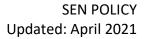


SPECIAL EDUCATIONAL NEEDS (SEN) POLICY

Updated: April 2021





Montessori School of Cayman – SEN Policy

Approved and adopted - April 26th, 2021.

SIGNATURES

Principal/Director/Owner of Centre

Ms. Briana Bergstrom



SPECIAL EDUCATIONAL NEEDS (SEN) POLICY

Purpose:

The Special Education Needs (SEN) Policy is to provide the information that staff need to:

- create and maintain an inclusive setting; include all children in teaching and learning opportunities
- provide support and guidance to all children
- understand expected standards in relation to the care and education for children with special education needs or children with suspected special education needs

In accordance with the Education Regulations, 2017, Section 51:

(1) Early Childhood care and education centres shall ensure that reasonable accommodation is available so that every child who may have or has special education needs or disabilities enjoys rights, privileges, benefits and treatment on an equal basis with children without special education needs or disabilities.

Also, in accordance with the Education Law, 2016, and Education Regulations, 2017 this policy promotes the development of:

- a healthy, strong and well-adjusted child;
- a child who is able to communicate effectively;
- a child who values their culture and that of others;
- a critical thinker and an independent learner;
- a child who is self-respecting, respects others and the environment; and
- a resilient child.

Parents, practitioners, early childhood centre management, and the wider community at Montessori School of Cayman have been informed of this Special Education Needs Policy, which states our expected standards in relation to care and education for children with special education needs, or may be suspected to have special education needs.

Policy Statement:

Montessori School of Cayman is committed to inclusion for all children. Staff will use appropriate strategies to support and guide children to socialise and engage in all learning opportunities. At Montessori School of Cayman in order to help all children succeed, we have a graduated approach that recognises there is a continuum of needs that brings increasing action and support for the additional needs a child may require. As far as possible, all children, that may include special educational needs and disabilities, should have equal opportunities to participate in the full curriculum alongside their peers. By utilising the graduated approach Montessori School of Cayman's roles and responsibilities are transparent for all.

Legal Framework:

At Montessori School of Cayman we adhere to the requirements and responsibilities as set out in law, regulations and policies.

These include:

- Education Law, 2016;
- Education Regulations, 2017;
- Disability (Solomon Webster) Law, 2016;
- Cayman Islands Disability Policy 2014 2033;
- Successful Schools & Achieving Students, Office of Education Standards (OES) 2, October 2020.

At Montessori School of Cayman we adhere to the Cayman Islands Disability (Solomon Webster) Law, 2016. We do not discriminate against children with SEND and make 'reasonable accommodations' to prevent children with SEND being put at substantial disadvantage. This duty is also anticipatory – it requires thought to be given in advance to what children with SEND might require and what adjustments might be needed to be made to prevent their disadvantage.

According to the Cayman Islands Disability (Solomon Webster) Law, 2016:

"Discrimination" means any distinction, exclusion or restriction, on the basis of disability, which:

- a) has the purpose or effect of impairing or nullifying the recognition, enjoyment or exercise, on an equal basis with others, of all rights and freedoms in the political, economic, social, cultural, civil, or any other field; and,
- b) cannot be shown to be a proportionate means of achieving a legitimate aim;

According to the Education Regulations, 2017:

52. (1) Early childhood care and education centres shall ensure that "reasonable accommodation" is available so that every child who may have or has special education needs or disabilities enjoys rights, privileges, benefits and treatment on an equal basis with children without special education needs or disabilities.

According to the Education Law, 2016:

"Reasonable accommodation" means the necessary and appropriate modification and adjustments not imposing a disproportionate or undue burden where needed in a particular case, to ensure to a person with a disability, the enjoyment or exercise, on an equal basis with persons who do not have disabilities, of privileges, interests, benefits and treatment, and the facilitation of such privileges, interests, benefits and treatment, by the provision of auxiliary aids and services, including:

- a) assistive devices;
- b) interpreters, technologies and effective methods of making aurally delivered and received materials available to a person with a disability;
- c) readers, taped audio visually recorded texts or other effective methods of making visually delivered and received materials available to a person with a disability; and
- d) physical modification to buildings and the built environment.

In this Law, "disproportionate or undue burden" includes:

- a) the nature of the benefit likely to accrue to, or the detriment likely to be suffered by, any person concerned;
- b) the effect of the relevant disability on a person concerned;
- c) the financial circumstances of the person concerned who is claiming a disproportionate or undue burden; or
- d) the estimated amount of expenditure or other allocation of resources required by the person concerned who is

claiming a disproportionate or undue burden and whether it is reasonably proportionate to the benefit likely to accrue.

According to the Education Regulations, 2017:

52. (2) Provision at early childhood care and education centres shall comply with national policy and the Ministry's policy and guidelines for special education needs or disabilities for children under compulsory school age.

Montessori School of Cayman Aims to:

- recognise each child's individual needs by gathering information from the parents and others involved with the child
- ensure all staff understand their responsibilities to all children, including those with SEND and have regard to the guidance given in the Cayman Islands Code of Practice: Identification, Assessment and Provision of Additional Learning Support Needs in Education 2019
- identify any emerging concerns that might suggest a child has special educational needs and/or disabilities at the earliest opportunity and plan for those needs through a range of strategies
- share information with parents
- assist parents to obtain any additional help or support for any needs not met at our centre
- seek additional help from the ECCE Unit where our centre's own actions are not helping the child to make progress
- work in partnership with parents and other agencies in order to meet the individual children's needs, including early year specialists
- monitor and review our own practice and provision and, if necessary, make adjustments
- accommodate a child's specialist equipment and services to the best of our ability
- ensure that all children are treated as individuals and encouraged to engage in every aspect of the day
- encourage children to value and respect others
- challenge inappropriate attitudes and practices
- promote positive images and role models during play experiences of those with additional needs wherever possible
- celebrate diversity in all aspects of play and learning
- provide professional development opportunities to staff which will help them to cater to the needs of varying abilities.

Depending on the nature of a child's special educational need(s), Montessori School of Cayman may not be equipped to meet all of the needs of every child. Montessori School of Cayman pledges to do what is feasible to accommodate the needs of the child and family and looks at each case individually.



Facilities:

Montessori School of Cayman is located within a recently renovated and purpose built building with adequate learning spaces for all. We strive to accommodate all children's needs. At this time we have a secure outdoor area, which has an entry that is easily accessible. We engage in open dialogue with families and their children's service providers. We discuss the needs and will honestly state if we have the ability to accommodate specialist equipment and programmes to enable the child to attend our centre.

Information Sharing:

At Montessori School of Cayman our facilities, staffing and practice accommodate children with special educational needs. We ask that the families share all information when making application for their child to attend Montessori School of Cayman and during his/her time at our centre in order to help ensure that we can meet the needs of all children in our care.

In accordance with the Section 52 of the Education Regulations, 2017;

- (1) A system shall be in place for the regular exchange of information between parents and members of staff of the early childhood care and education centre regarding their children's learning and development.
- (2) The parent or legal guardian of a child enrolled at an early childhood care and education centre shall work in partnership with the early childhood care and education centre to support the child's holistic development.

Identification:

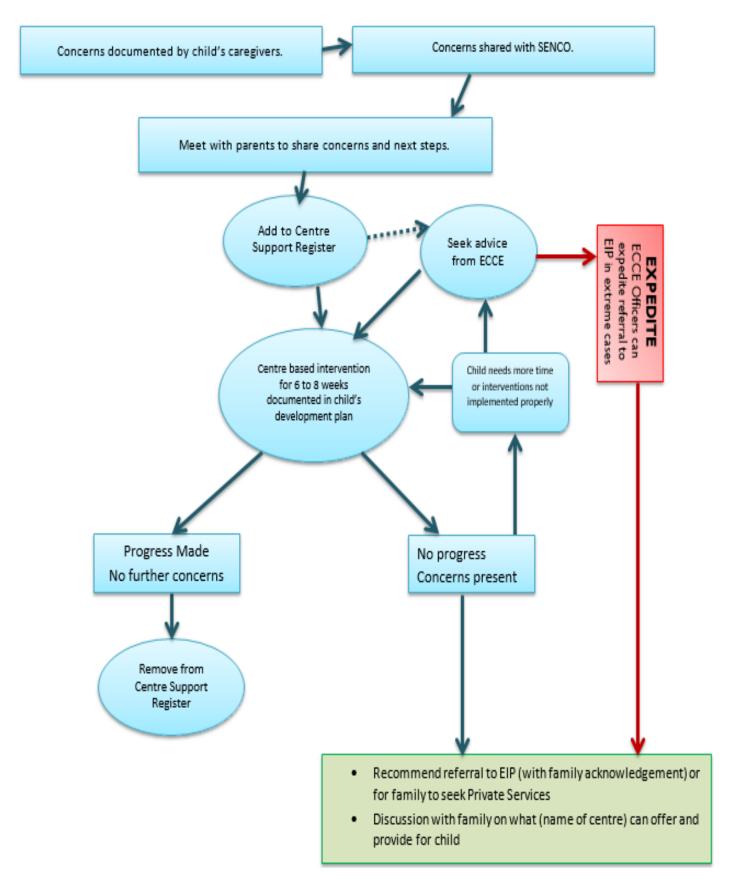
All staff at Montessori School of Cayman continuously monitor children's progress and development. This is done through various methods of assessment and progress tracking considering all areas of development. When a child's progress gives cause for concern we will meet with the family and share our observations and assessments.

Pathway:

It is particularly important in early childhood that there is no delay in responding to developmental and learning needs and providing any necessary supports in a timely manner. Delay in early childhood can exacerbate difficulties and reduce the likelihood of ameliorating or remediating barriers to learning and subsequently affects to self-esteem, frustration in learning, and behavioural challenges. Early, appropriate action to address identified needs is critical to the future progress and improved outcomes that are essential in helping the child to prepare for their onward journey in education. This is why the collaboration with the child's family is essential and why we work in partnership with parents/guardians to establish the support and actions to support the needs of the child.

Our pathway for our approach is as depicted on the next page.







Responsibility of Montessori School of Cayman

It is the responsibility of Montessori School of Cayman to:

- prepare, implement and make available this policy;
- designate a staff member to be responsible for coordinating additional learning support needs for children with special educational needs and disabilities or with suspected special educational needs and disabilities (i.e. SENCO / the Director of the centre / designated teacher/ lead person);
- ensure that every attempt possible is made to provide children with special educational needs and disabilities (SEND), the support they need;
- ensure that children with special educational needs and disabilities (SEND), engage in the activities of the centre alongside all other peers;
- inform parents when needs of the child are beyond the scope of the centre and to provide information on relevant outside services;
- have arrangements for the admission of a child with special educational needs and disabilities (SEND);
- outline the steps being taken to include children with special educational needs and disabilities (SEND);
- enable access with our facilities and resources for children with special educational needs and disabilities (SEND),
 and:
- provide a safe, comfortable location for sessions with service providers to occur.

The Role of the SENCO / Designated Lead Person

Our Special Education Needs Coordinator (SENCO) is Katrin Schild

The role of the SENCO / lead person for SEND involves:

- implementing the day-to-day operation of Montessori School of Cayman's policy for special educational needs and disabilities (SEND);
- responding to requests for support and advice from other centre staff;
- following the Pathway to ensure children receive the support they require
- coordinating provision, ensuring appropriate liaison with the staff members who will teach any given child with special educational needs and disabilities (SEND);
- maintaining a register (Appendix 1), with records on children with special educational needs and disabilities (SEND);
- supporting staff in writing a Support Plan (Appendix 2);
- coordinating provision as appropriate following up on Support Plans (Appendix 2);
- securing appropriate documentation to ensure legal permission to share information with child's with relevant entities
- liaising closely with parents of children with special educational needs and disabilities (SEND) (Appendix 5);
- requesting of parents/guardians that medical appointments are up to date (Appendix 3 and 4);
- identifying, brokering and providing for in-service training requirements of the staff, and contributing as appropriate to their training needs in collaboration with owners/managers;
- collaborating to support the child's transitions into and out of the centre ensuring the exchange of all information with relevant educational institutions and specialist service providers;
- ensuring parents/guardians have every opportunity to be closely involved throughout, and that their insights inform action taken by the centre;
- listening to and responding to (as appropriate) concerns raised by parents in regard to their child's progress, and;



• liaising with external agencies and other professionals as required.

The Role of the Early Childhood Practitioner

The role of the staff or staff members primarily responsible for a child special educational needs and disabilities (SEND), include:

- engaging all children in play based activities;
- adapting materials/resources to benefit a child with special educational needs and disabilities (SEND);
- differentiating for a child with special educational needs and disabilities (SEND) to accommodate the child's needs;
- communicating with parents/guardians (Appendix 5), other staff and specialists, and;
- writing a Support Plan in collaboration with relevant persons (Appendix 2).

The Role of Parents

The role of the parents include:

- sharing information that will assist Montessori School of Cayman in providing the most inclusive care and education for their child;
- updating Montessori School of Cayman as information or strategies change to ensure consistency between home and the early childhood centre, and;
- implementing consistent strategies at home in conjunction with what is being used at the centre.

The Role of the Early Childhood Care and Education (ECCE) Unit

The ECCE Unit serves Montessori School of Cayman through:

- providing curriculum guidance, professional development and training for early childhood care and education settings and practitioners;
- supporting our centre to help ensure we are providing best practice;
- empowering our parents with knowledge about child development and in identifying best practice for their child, and:
- providing advice to our centre as relevant and requested.

Involving Specialists

Parents/guardians may seek services for their child from service providers. This may include private service providers or the Early Intervention Programme operated by the Cayman Islands Department of Education Services. At Montessori School of Cayman we strive to provide a safe, comfortable location for sessions to occur at our centre. With the parents/guardians consent it is expected that strategies will be shared and perhaps modelled with our staff to ensure consistency for the child.

Transition

Steps will be taken when a child is transferring from or to Montessori School of Cayman to ensure the best outcomes for the child.

When transitioning into Montessori School of Cayman we will:

- discuss with parent(s)/guardian(s) needs of the child which will include a review information regarding strengths and support on registration form;
- request, set up and hold/attend a transition meeting with family, child's support services and possibly previous
 Early Childhood Centre;
- if feasible and possible, have staff member visit child in current setting;
- prepare environment for child based on child's needs (may include, but not limited to, a visual schedule, quiet corner, sensory box, etc.), and;
- invite child for an orientation visit(s).

When transitioning from Montessori School of Cayman we will:

- discuss with parent(s)/guardian(s) needs of the child to consider when selecting a new Early Childhood Centre or moving on to the next phase of education;
- request, set up and hold/attend a transition meeting with the family, incoming setting and support services;
- invite the incoming setting to observe the child at your centre with parent/guardian permission;
- use methods to help the child with the transition such as Social Stories on saying Good Bye to your centre/staff/friends, and;
- remain positive and enthusiastic with the child and parent(s) and guardians(s) on the upcoming change to their next educational setting.

Record Keeping

Montessori School of Cayman will maintain the following records:

- Register of all children with special educational needs and disabilities (SEND) (Appendix 1)
- Learning Support Plan for each child with special educational needs and disabilities (SEND) (Appendix 2).

Montessori School of Cayman SENCO / lead person will ensure that these records are properly updated and available as needed.

Complaints

Where anyone (child, parents/guardians, staff member or visitor) has a concern, this will be dealt with through our usual complaints procedure.

Appendix 1

SUPPORT REGISTER

Last Name	First Name	Date of Birth	Date Added to Register	Level of Support	My Development Plan Written	Review Date	Action After Review



Appendix 2

MY SUPPORT PLAN

Name of Child:	
Date of Birth: _	

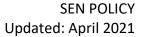
SEN POLICY Updated: April 2021



What I Things I How will you Who and what Review am find know working will help me? Date: (max 8 weeks) difficult. I can do it? towards? Mastered Developing Beginning ☐ Need More Help Comments: Mastered Developing ☐ Need More Help Beginning Comments: Mastered Developing Beginning ☐ Need More Help Comments: Mastered Developing Beginning ☐ Need More Help Comments: Early Childhood Parent's Role: **Support Register Record** Practitioner's **ECCE** Role: Advice requested from ECCE: YES NO Date: Response: See attached documents NO **Support Register** Date Child Added: Register Submitted to ECCE: **Medical Appointments:** ☐ Paediatrician ☐ Medical Form Given to Family Date: ☐ Copy of Completed Medical Form Received Date: (As medical conditions can affect development, please ask medical professional to complete the attached medical form. This will be attached to your child's Developmental Plan.)



Agreed by:	
☐ Parent Date:	* Parent:
☐ Owner/Principal Date:	* Owner/Principal:
☐ Early Childhood Practitioner Date:	* EC Practitioner:
☐ ECCE Date:	ECCE Officer:
(*Required signatures for My Development Pla	n)
(e.g. progress monitoring and medical informand Agencies (e.g. Ministry of Education, Dep	umentation regarding my child in relation to My Child's Support Plan nation) may be shared openly with applicable Government Ministries partment of Education Services, Ministry of Health, Health Services e and education setting or provider of special needs services which my
Parent's Name:	
	Date:





Appendix 3

Medical Appointment Reminder

Just a friendly reminder....

Please make an appointment for your child to see his/her paediatrician. This is requested for your child's development plan and ought to occur prior to

________(date)

Please ask your paediatrician to complete the attached medical information form.

Thank you.







Appendix 4

Medical Form

	CHILD'S INFORMATION
Name:	
Date of Birth:	Current Age:
	ON FROM EARLY CHILDHOOD CENTRE
	as attended our Early Childhood Centre from
o present. Developmental concerns no	oted on the back page have been discussed with the family.
	CIAN/PRIMARY PHYSICIAN EVALUATION
aediatrician/Primary Physician:	Medical Evaluation Date:
PHYSICAL EXAM	
Chest	Weight: 🗆 within normal range
	□ above normal range
Heart	below normal range
	Here 🗖 Me
GI	_ Height: □ within normal range □ above normal range
CNS	below normal range
DENTAL	
	Referred on: 🗆 Yes 🗀 No
VISION	
	Referred on: 🗆 Yes 🗀 No
LIFADINIC	
HEARING	Referred on: ☐ Yes ☐ No
	Referred on. — Tes — TNO
EARS NOSE &	
THROAT	Referred on: Tyes No
DEVELOPMENT General Developme	• • • • • • • • • • • • • • • • • • •
	Age Appropriate
	☐ Delayed Development
Area(s) of Concern:	
	ed and the following has been determined:
Medical	Developmental development and
medical concerns	developmental assessment recommended
no medical follow up required	wait for medical concerns to be treated prior to assessment no developmental concerns at this time
I IIO IIIEUICAI CUIICEI IIS AL UIIS UIIIE	I IIO GEVELODITIETILAI COTICETTIS AL UTIS UTITE

Signature of Paediatrician/Primary Physician



Developmental Concerns (To be completed by the Early Childhood Centre and discussed with family prior to medical appointment. Use check mark ($\sqrt{}$) to indicate accordingly.)

HEARING	SEEING	THINKING	
Talks in a very loud, or very low voice; or voice has an unusual sound	Has difficulty following objects or looking at people when spoken to	By age six months, not reaching for and grasping toys	
Draining ears	Has milky coloured or cloudy pupils (emergency)	By age nine months, not moving toy from one hand to another	
Ear pulling	Rubs eyes frequently	By age one, has difficulty finding an object after seeing it hidden	
Turns body so that the same ear is always turned toward a sound	Holds books or objects too far	By age eighteen months, does not attempt to tower blocks	
Has had frequent earaches	Has an eye or eyes that look crossed or turned; or eyes do not move together	By age two, does not point to body parts when asked such questions as "Where is your nose?"	
Head banging	Blinks excessively	By age two, not interested in self-care skills (e.g. feeding, dressing)	
Has had many ear, nose or throat infections	Closes one eye or tilts head when looking at an object	By age three, does not play make-believe games	
Early babbling stops	Has difficulty focusing or making eye contact	By age three, does not understand ideas such as "more" or "one"	
Does not always respond when called from across a room even when it is something that the child is usually interested in or likes	Usually holds books or objects very close to face; or sits with face close to computer or television screen	By age four, does not answer simple questions, such as "What do you do whe you are hungry?" or "What colour is this?"	
Does not look where sounds or voices are coming from or react to loud noises	Avoids books, puzzles or similar items	By age five, does not understand the meaning of today, yesterday or tomorrow	
FEEDING & SWALLOWING	Eyes constantly move back and forth	BEHAVIOURS AND RELATIONSHIPS	
Problems with swallowing or chewing	Tearing without crying	Avoids being held, does not like being touched	
Problems with eating foods of certain textures	Squinting, regardless of no exposure to bright lights or glare	Resists being calmed, difficult to comfort	
Feeding is a frustrating, stress-filled experience	Stares without blinking	Avoids or rarely makes eye contact with others	
Lacks interest in self-feeding	Poor balance, clumsy and/or uncoordinated	Poor interaction with adults or other children	
COMMUNICATING	Often closes or covers one eye	Acts aggressively on a regular basis, hurts self or others	
Lack of eye contact and poor social skills for age	Has reddened, watery eyes or crusty eyelids	By age four months, does not coo or smile when interacting with others	
Ongoing hoarse voice	MOVING	By age one, does not play games such as peek-a-boo or pat-a-cake or wave 'bye-bye'	
Excessive drooling	High muscle tone - stiff and tense movements	By age eighteen months, lacks interest in playing and interacting with others	
By age three months, does not coo or smile	Low muscle tone - loose and floppy movements	By age two, does not imitate parent or caregiver doing everyday things, such as washing dishes, cooking or brushing teeth	
By age six months, does not babble to get attention	Frequently walks on tip toes	By age three, does not play with others	
By age nine months, no gestures (e.g. pointing, waving)	Pushes away or arches back when held close or cuddled	By age three, has difficulty noticing and understanding feelings in themselves and others (e.g. happy, sad)	
By age one, does not respond differently to words such as "ball" or "night, night"	Difference in strength, movement or tone between right and left sides of body	SENSORY	
By age one, does not say words to name people or objects, such as "mama" or "bottle" or shake head to indicate "no"	Avoids crafts and manipulatives; or unable to play appropriately with a variety of toys	Oversensitive to certain sounds	
By age eighteen months, cannot understand short requests (e.g. "Where is the ball?")	Habitually uses W sitting position	Clumsy and/or stumbles	
By age two, does not point to or name objects or people to express wants or needs	By age four months, does not hold head up	Seeks out experiences which provides deep pressure	
By age two, does not use two-word phrases, such as "want juice" or "mama go"	By age six months, does not roll over	Aversion to textures	
By age three, speech is difficult to understand	By age one, does not sit up or creep using hands and knees; does not pick up small objects with finger and thumb	Overactive or low arousal	
By age three, does not try to say familiar rhymes or songs	By age two, does not walk alone; has difficulty holding large crayons and scribbling	PHYSICAL	
By age three, cannot follow simple directions	By age three, shows poor coordination and falls or stumbles a lot when running; has difficulty turning pages in a book	Appears over weight	
By age four, does not tell stories, whether real or make-believe; or ask questions	By age three, has difficulty manipulating small objects (e.g. threading beads)	Appears under weight	
By age four, does not talk so that adults outside the family can understand	By age four, has difficulty standing on one foot for a short time	Snores when sleeping	
DAILY LIVING	By age five, does not skip or hop on one foot; has difficulty drawing simple shapes	Tonsils appear swollen	
Lacks interest in toilet training		Breathing sounds heavy	



Lacks interest in dressing self		
Unaware of danger		

Appendix 5

Tips for Communicating Concerns with Parents

DO	DO NOT
Arrange a comfortable, private place and time to talk.	Relay information over the telephone, send a message by another person, or speak in the presence of the child
Ensure adequate time for meaningful conversation.	Rush your message or prolong meeting to the extent parents are uncomfortable
Be empathetic towards how the parents feel. Some may suspect their child is having difficulty, but may be afraid to express it. Others may just not realize it due to their lack of experience with children or other reason.	Blame parents, dismiss their feelings or give them promises you may not have the power to follow through on such as, "We will fix this and everything will be okay"
Be prepared for strong emotions from the parents; such as anger, pain and fear. Some may surprise you with an overwhelming sense of relief that you have approached them first. Be prepared to handle any emotions the parents may present with.	Become defensive or angry at the parents. They are entitled to process the information you are presenting them with, and this may require them going through certain stages or phases of emotions.
Share the strengths the child has. Always share something positive about the child. Point out any positive aspects of the parent/child relationship.	Accuse parents of being negligent or abusive towards the child, thus causing the concern. If there are concerns that the child is being neglected or abused, this must be reported immediately to Department of Children and Family Services under the Child Law (2012).
Ask if the parents have any concerns or questions about how their child is developing. Ask the parents to share what they have noticed about their child, such as, "Have you noticed he has a hard time hearing loud noises or people talking?"	Dismiss concerns the parent may have, or monopolize the meeting time.
Share you own observations and concerns once the parent has had time to talk.	Dominate the conversation.
Come prepared with evidence – anecdotal records, developmental journey, portfolios, etc.	Attempt to have the conversation without evidence to demonstrate your concerns to the parents.
Choose your words carefully. Give specific examples such as "I noticed when the breeze blew the door shut, Susie did not react to the loud sound. She also did not respond to me when I called her a few times to come to me."	Give a diagnosis such as, "Susie is deaf" or "Josh looks like he has autism". Specific assessments and medical evaluations need to be completed by trained and qualified professionals in those areas.
Keep the goal in mind which is to encourage the parents to get a professional evaluation for their child so that any concerns can be checked out. You can offer encouraging words such as, "It doesn't hurt to check things out" or "A doctor may be able to give you some answers to our questions".	Forget or ignore to give the parents support and information which you may have to help them find more information or intervention for their child.
Stress the importance of checking things out immediately and making changes right away. This may be a medical evaluation as well as putting the My Development Plan into action. In some cases, it may be immediate referral to special service providers as the concern may be so great.	Encourage the parents to wait for an indefinite amount of time to "see how it will go".
Continue to support the parents through the different stages of processing the information you have shared with them, as well as the different stages of referrals, interventions and ongoing assessments.	Refuse further assistance or support after the initial parent meeting. If the child is remaining at your centre, you need to be an equal partner in the child's care, support and development.
Be confident in your findings and the information you have shared with the parents.	Second guess yourself or doubt the information you are sharing with the parents.