

[Home](#) > [Residents](#) > [Education and schools](#) > [Local offer](#) > [Professionals](#) > [Graduated approach](#) > [Physical and/or p
medical](#) > [Physical needs assess plan and strategies](#)

Physical needs - assess, plan and strategies

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You have an option to print the entire page, or select a page range.

First concerns - stage one

- Assess

Observed **emerging** and/or **fluctuating** difficulties with the following:

- Has physical needs and uses specialist aids relating to their condition, e.g. pencil grip or writing slope
- Motor control – fine and gross delay
- Spatial orientation issues
- Difficulties with tasks involving hand eye coordination
- Problems causing difficulties in ball skills and balance activities in Physical Education (PE)
- Supervision or support needed for medical conditions, diet and toileting, dressing and/or mealtimes
- Lack of progress in the curriculum due to condition
- Needs impact on their self-esteem and social relationships
- Working at a slower pace due to fatigue
- Medication which impairs concentration and may lead to difficulties in the classroom
- Poor engagement during tasks for intermittent periods throughout the day

- Plan

Class teacher liaises with parents/carers and child/young person on a regular basis - minimum of 2 meetings within a 12 month period

- Obtain and record updated parental views
- Obtain and record child or young person’s views

If necessary:

- Examine Early Years Foundation Stage (EYFS) Data and/or previous school records
- Consider past teacher observations and views
- Collate current assessments related to area of concern – qualitative, quantitative and summative – along with any health records

that have been shared

- Observe and compare potential barriers to learning and participation across a range of contexts

- Strategies

- Consider organisation of classroom and seating plans to ensure mobility and table organisation
- Consider positioning of child or young person in the classroom to minimise distractions
- Provide additional classroom resources such as sloping board, ruler, scissors, pencil grips
- Use differentiation and personalised learning targets
- Use a well-structured curriculum plan in PE [Hints and Tips for PE Lessons](#)
- Keep withdrawals from class to a minimum
- Provide adaptations to the pace of lessons to take account of fatigue
- Use technology to support learning and as alternative to handwriting link
- Encourage peer support
- Provide alternative lined paper to accommodate larger handwriting or support correct formation
- Attach paper to desk with masking tape to avoid having to hold with one hand and write with the other hand
- Eliminate inessential copying from the board
- Teach sequencing skills, for example putting on clothes in the right order - [developing dressing skills](#)
- Have appropriate height chairs and tables
- Provide option for child or young person to sit on a chair rather than on the floor at carpet time/assemblies. Can have a classmate do the same if appropriate

First concerns - stage two

- Assess

Observed ongoing and/or **fluctuating** difficulties with the following:

- Has physical needs and uses specialist aids relating to their condition, e.g. pencil grip or writing slope
- Motor control – fine and gross delay
- Spatial orientation issues
- Difficulties with tasks involving hand eye coordination
- Problems causing difficulties in ball skills and balance activities in Physical Education (PE)
- Supervision or support needed for medical conditions, diet and toileting, dressing and/or mealtimes
- Lack of progress in the curriculum due to condition
- Needs impact on their self-esteem and social relationships
- Working at a slower pace due to fatigue
- Medication which impairs concentration and may lead to difficulties in the classroom
- Poor engagement during tasks for intermittent periods throughout the day

- Plan

Class teacher liaises with parents/carers and child/young person on a regular basis - minimum of 2 meetings within a 12 month period

At this time:

- Obtain and record parental information and views and any information about health professionals involvement so far
- Obtain and record child or young person's views
- Share and discuss observations, assessments and strategies from First Concerns Stage One

If available and/or appropriate:

- Carry out further assessments as necessary - Blackpool schools have access to the ABC Motorway programme containing assessments and suggested exercises.
- Perform an audit/risk assessment of the young person's learning environment, and apply extra consideration to any visits or trips
- Discuss concerns with SENCO (and/or school nurse, if appropriate)
- Implement strategies (including targeted support and/or resources) up to agreed financial levels.
- Ensure Class teacher and Teaching assistants receive relevant Continuing Professional Development (CPD), e.g. manual handling etc.

- Strategies

Class teacher to discuss findings with the SENCO and plan for interventions, continue to use strategies suggested in the initial observations and First Concerns Stage One

- Use programmes to develop motor skills
- Follow strategies advised by any health professionals
- Implement an accessibility plan to move around the school this may include; ramps, hand rails
- Consider timetabling and location of rooms where possible to facilitate movement
- Have appropriate height chairs and tables
- Ensure the child or young person can be safely evacuated during an emergency and write a personal emergency evacuation plan (PEEP) if necessary
- Provide a locker for child or young person to store books etc. rather than needing to carry them around during the day

SEN support - stage one

- Assess

Observed **persistent** and **moderate** difficulties with the following:

- Has physical needs and uses specialist aids relating to their disability, e.g. seating
- Motor control – marked fine and gross delay affecting ,multiple functional skills
- Spatial orientation issues
- Physical difficulties – hand eye coordination
- Problems causing difficulties in throwing, catching, balance in PE – moderately behind peers
- Supervision or support needed for medical conditions, diet and toileting, dressing and/or mealtimes
- Lack of progress in the curriculum due to condition
- Needs impact on their self-esteem and social relationships
- Moderate difficulties in physically accessing the curriculum
- Working at a markedly slower pace due to fatigue
- Poor engagement during tasks throughout the day
- Needs extended adult support beyond “First Concerns” level of support to be able to access the curriculum

- Plan

Class teacher, SENCO, parents and child/young person and any external professional liaise on a regular basis - minimum of 3 meetings within a 12-month period

- Obtain and record updated parents’ views
- Obtain and record updated child or young person’s views
- Complete a SEN Support Plan and review on a regular basis (e.g. at least termly)
- Place child/young person on register as SEN Support (Code K)
- Seek external advice with parental consent from professionals such as: School Health and the Inclusion Team
- Implement strategies (including targeted support and/or resources/ equipment this may include specialist seating, toileting and any other equipment as advised by professionals) up to agreed financial levels: Universal funding (AWPU) plus up to a maximum of £6,000
- Ensure Class teacher and Teaching assistants receive relevant Continuing Professional Development (CPD), e.g. manual handling
- Ensure All appropriate staff have completed Level one Training accessed on PD Net – [pdnet - Level 1 training](#)

If necessary:

- Seek external advice with parental consent from the Educational Psychologist
- Seek advice from Physiotherapy (referrals to be made through GP or Paediatrician); Occupational Therapy (OT) (referrals to be made through GP or Paediatrician)
- Carry out and review further assessments as required and/or as advised by outside agencies

- Strategies

Continue with any relevant strategies from previous stages plus:

- Provide flexible, adult assistance as necessary to access the curriculum, manage their condition, or move with safety around the environment
- Flexible support in school to include dressing and undressing, and toileting – an intimate care plan should be written and agreed with parents if appropriate -
- Provide extra time to deliver targeted and additional motor skills development – as outlined in OT or Physio programme.
- Ensure access to additional and specialised IT equipment, refer to Inclusion Team
- Consider access arrangements for external tests and exams, and apply for/implement as necessary
- Use strategies to reduce or provide alternative methods of recording written work – refer to Inclusion Team
- Teach child or young person how to use planner, diary, lists to organise themselves as appropriate -
- Allow additional time to complete tasks

- Where possible, provide alternatives to taking part in competitive team games where child or young person may feel self-conscious –
- Allow child or young person to leave early when travelling between classes to avoid large groups in corridors and enable extra travel time e.g. to go to lift
- Provide appropriate size and height chairs/tables to encourage a correct posture and to support fine motor function and writing – as advised by OT
- Following advice from Occupational therapists, provide hand rails on stairs and consider access to toilet facilities
- Ensure child or young person is able to reach and use facilities e.g. hand basins/taps/coat pegs /lockers –
- Give consideration to transporting of food at lunchtime e.g. assistance with trays and seating
- Ensure the child or young person can be safely evacuated during an emergency and write a personal emergency evacuation plan (PEEP) if necessary link
- Consider adaptations required in practical lessons e.g. ovens in cookery to be wheelchair accessible
- Implement an accessibility plan to move around the school – in consultation with OT

Complex

- Assess

Observed **persistent** and **significant** difficulties with the following:

- Despite implementation of strategies from “First Concerns” and “SEN Support”, progress for the child or young person is either:
 - significantly slower than that of their peers starting from the same baseline
 - failing to match or better the child or young person’s previous rate of progress
 - failing to close the attainment gap between the child or young person and their peers or
 - widening the attainment gap
- Their ability to function independently in the school environment and in their everyday life
- May require significant therapies and/or medical interventions
- May require adult support to navigate around the school
- May require adult support to access and use equipment safely in practical lessons e.g. science/cooking

- Plan

Class teacher, SENCO, parents and child/young person and external professionals continue to liaise on a regular basis - minimum of 3 meetings with parents within a 12-month period

If EHC Plan is not in place:

- Review SEN Support Plan (at least termly)
- Consider a request for EHC needs assessment

If EHC Plan is in place:

- Change code on SEN register to indicate child/young person has EHC plan in place (code E)
- Refer to described outcomes and provision and implement - the class teacher, SENCo and assistant working with the child should have regular sight of the EHC plan
- Continue to plan, do, review against the specified outcomes in EHC Plan – the targets on assess plan do review will be broken down into smaller targets as the EHC plan outcomes are usually end of key stage
- Complete Annual Review of EHC Plan – [The annual review process | \(IPSEA\) Independent Provider of Special Education Advice](#)
- Continue to act on external advice from educational and health agencies as necessary, including Speech and Language Therapy (SALT) care plan
- Implement strategies (including provision of targeted support and/or resources) up to agreed financial levels: Universal funding (AWPU) plus up to £6,000 and any additional top-up as agreed based on the provision detailed in the EHC Plan
- Ensure Class teacher and Teaching assistants receive relevant Continuing Professional Development (CPD) g. manual handling
- Ensure All appropriate staff have completed Level one Training accessed on PD Net – [pdnet - Level 1 training](#)

- Strategies

Continue with any relevant strategies from First Concerns and/or SEN Support levels, plus:

- Follow EHCP for specific outcomes if in place.
- Monitor the impact on other areas of learning, e.g. social and emotional well being
- Adaptations to the school environment e.g. changing plinths/ramps/hoists
- Consider space needed to accommodate specialist equipment e.g. walker
- Ensure access to specialised seating and/or height adjustable tables
- Carry out lessons on ground floor if no suitable access to classrooms on upper floors

- Consider adaptations required in practical lessons e.g. ovens in cookery to be wheelchair accessible
- Ensure the child or young person can be safely evacuated during an emergency and write a personal emergency evacuation plan (PEEP) if necessary

Specialist support

- Assess

- Physical needs cannot be met within mainstream school setting due to complex or vulnerable nature of the child’s condition
- Child or Young Person requires:
 - Specialist medical intervention
 - Manual handling e.g. hoists, changing plinths
 - Change of position during the day into specialist equipment
 - Adult support for independence and self-care
 - Educational environment which allows easy access moving around indoors and outdoors

- Plan

Class teacher, SENCO, parents and child/young person continue to liaise on a regular basis - minimum of 3 meetings with parents within a 12 month period

- Obtain and record updated parents’ views
- Obtain and record updated child or young person’s views
- Indicate on SEN register that child or young person has an EHC plan in place (code E)
- Refer to described outcomes and provision in the child or young person’s individual EHC Plan and implement

Continue to plan, do, review against the specified outcomes and provision within the child or young person’s EHC Plan

- Complete Annual Review of the EHC Plan
- Liaise with named local authority 0-25 SEND officer for child or young person if needs change
- Continue to act on advice from internal and external education and health professionals, as necessary
- Carry out further assessments following advice and guidance from outside agencies
- Implement strategies (including provision of targeted support and/or resources) up to agreed financial levels for specialist provision
- Ensure all staff receive Continuing Professional Development (CPD) and training as required

- Strategies

- Use specialist equipment for manual handling/ changing, as required
- Implement individualised health care plan
- Implement individualised postural management programme
- Provide access to hydrotherapy if appropriate to their medical needs and physiotherapy intervention plan

[↑ Back to top](#)

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