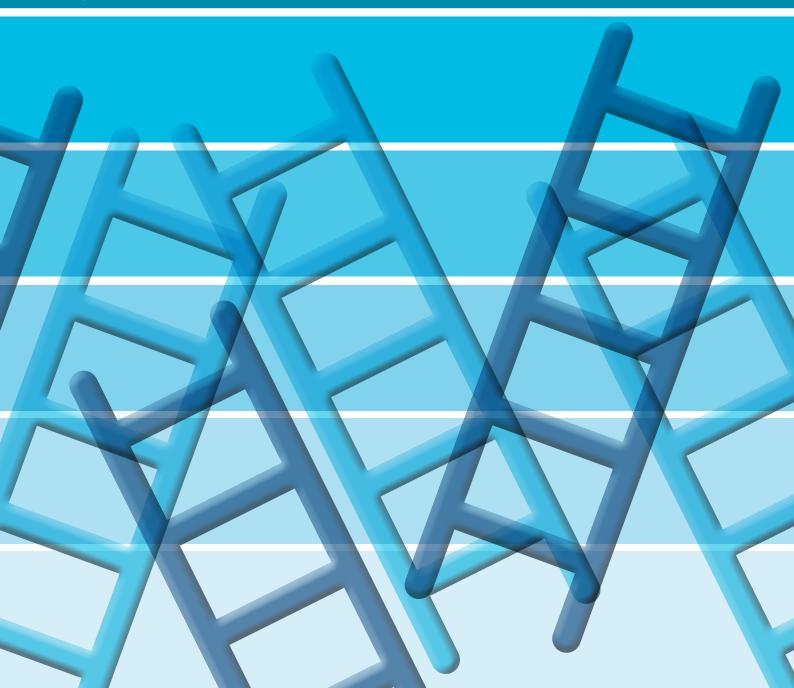


Ladder of Intervention

Supporting children and young people with Social, Emotional and Mental health difficulties in schools September 2019



Foreword

In Young and Yorkshire 2 we set out our vision for all children and young people in North Yorkshire to be happy, healthy and achieving. However we know many young people face challenges in their lives, ranging from difficult home environments, trauma, stress and anxiety about exams and their future, to complex, long term mental health conditions.

When children and young people are 'in distress' we can see this in many different ways, quiet disengagement, self-harm, risk taking, often also in outward behaviour that challenges us as educators, and may affect the safety of others.

Schools have a unique privilege in that they may be the first line of contact for children, or the place where they show their distress most clearly and so are well placed to identify needs and make a first response to them. The SEND Code of Practice reinforces the importance of looking beneath the outward behaviours and identifying what is causing them, considering SEND, emotional wellbeing, social circumstance and mental health. "Behavioural difficulties" is no longer an adequate description of need.

This document gives schools guidance on a staged response to identifying and meeting needs in the area of social, emotional and mental health. We know that there is a strong correlation between poor attendance and academic achievement, poor mental health and life chances and that there is a two way correlation between mental health and exclusion. Any form of exclusion both social and educational exclusion only serves to compound the needs of a child in emotional distress and their family.

The Growing Up in North Yorkshire Survey demonstrated that there was a correlation between the positive culture and ethos of a school and good attainment. Our most inclusive and successful schools focus



not on compliance, but on connections and relationships. Through doing this they make lasting impact and truly improve life chances.

Stuart Carlton Director, Children and Young People's Service

"No significant learning can take place without a significant relationship".

James Comer

"Great teachers focus not on compliance, but on connections and relationships".

PJ Caposey in Education Week Teacher



Ladder of Intervention



Introduction

The Ladder of intervention has been developed to support schools and settings in adopting the requirements within Working Together to Safeguard Children (2018), the DFE Exclusion Guidance (2018), the Code of Practice (2016) and the North Yorkshire Early Help Strategy (2019).

It aims to support schools in adopting early intervention for children with Social Emotional Mental Health (SEMH) and/or at risk of exclusion. This will include children with a range of vulnerabilities including children and young people with Special Educational Needs (SEND), pupils in receipt of free school meals (FSM), Gypsy Roma Traveller (GRT) children, and others eligible for pupil premium including looked after (LAC) or previously looked after children.

Providing Early Help is more effective in promoting the welfare of children than reacting later. Early Help means providing support as soon as a problem emerges, at any point in a child's life, from the foundation years through to the teenage years.

Working together to Safeguard children, 2018

Working Together 2018, clearly sets out that effective Early Help relies upon local agencies:

- Working together to identify children and families who need Early Help
- Assessing the need
- · Providing relevant services to address the need

In North Yorkshire every person working with or engaging with children and families, regardless of organisation, status or position, has a responsibility to support the delivery of Early Help and support the family to access appropriate support.

When we identify need, we must support children and families back on to a safe, supportive and resilient path as soon as possible.

Early Help Champions

Early Help Champions are professionals from across the children's workforce (for example schools, health, police, early years providers, voluntary and community sector, housing, etc.) who through strong and resilient relationships with children and their families, identify and respond to need at the earliest opportunity. They complete Early Help Assessments and deliver enhanced support to address assessed needs. Where necessary the Early Help Champions will coordinate Team around the Family (TAF) meetings, which ensure an appropriate multi-agency response to escalating needs. Early Help Champions can be supported in their role by dedicated Early Help Consultants.

The Ladder of intervention should support the vision and priorities described within the Early Help Strategy.

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identificationsupport for'Signs of Safety'cultureand response toschools tomethods acrosscollarchildren in needimplementthe partnershipintegrationof enhancedthe Early Helpusing strengthownsupport, acrossprocess and tobased supportsolution	ter a struure of aboration gration a ership f tion foc vention

Using the Ladder for children experiencing difficulties will improve early identification and response to children and young people with SEMH and increase the community capacity to support effective early help delivery.

The Ladder adopts a Signs of Safety methodology which provides a framework for a multiagency approach to work with Children and Families using strength based techniques. It has a focus on building safety and support to embed positive change. It encourages engagement in critical thinking whilst maintaining a position of enquiry and aims to create safety through supporting children and their families. It is designed to create a shared focus and understanding for all stakeholders in understanding and responding to need through a shared tool and language which facilitates greater collaboration and ownership of solution focused intervention.

Ladder of Intervention

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Objective 5

Build on the No Wrong Door methodology and contextual safeguarding – to implement a partnership approach to the management of risky adolescent behaviour

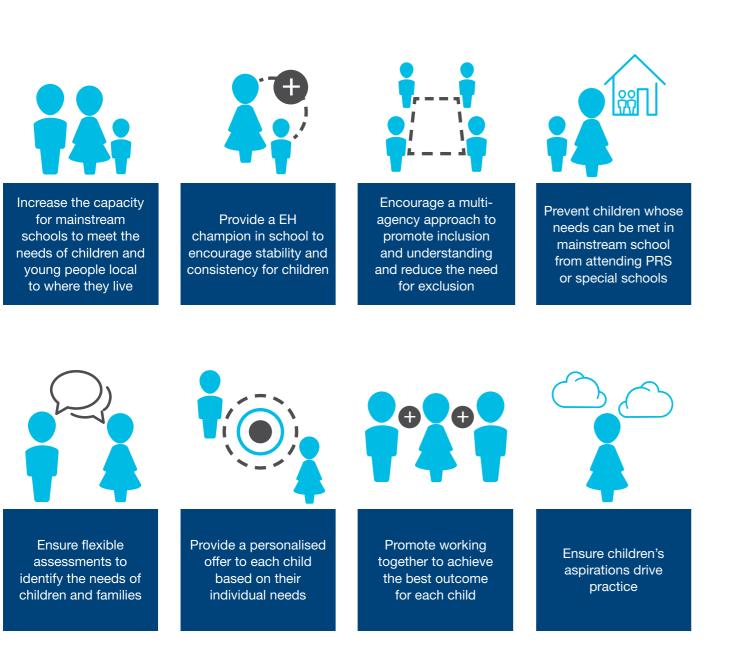
Objective 6

Improve attendance and inclusion and reduce the number of Exclusions

Objective 7

Explore the use of shared IT Systems to capture early help activity and outcomes

The Ladder of Intervention will aim to:

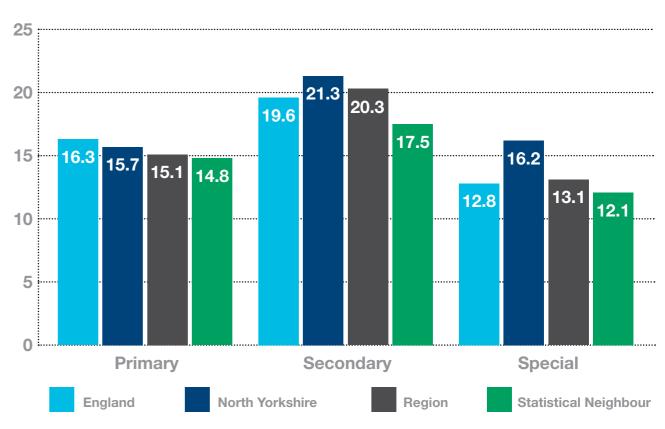


The facts and figures

There are currently 2,106 children and young people identified as having Social Emotional and Mental Health needs as a main or additional need in North Yorkshire mainstream schools (1,835 at SEN support and 271 recorded as having an EHCP). This represents 2.6 % of the mainstream school population.

Statistics released by the DfE in July of this year (2019) show that children recorded as having SEMH as a primary need represent 15.7% of the primary school, 21.3% of the secondary school and 16.2% of the special school population in North Yorkshire.

Chart 1: Percentage of school population recorded as having SEMH as a primary need (*January 2019 – DfE*)



As of currently available data, there have been 89 (0.1% of the school population) children permanently excluded in the 2018/19 academic year and 5846 fixed-term exclusions for 2001 individual children (2.4% of the school population).

Statistics released by the DfE show that 2.48% of the school population in North Yorkshire were fixed-term excluded at least once in the 2017/18 academic year, this figure was 2.33% nationally.

0.12% of the school population in North Yorkshire were permanently excluded in this period, the rate was 0.1% nationally.

Ladder of Intervention

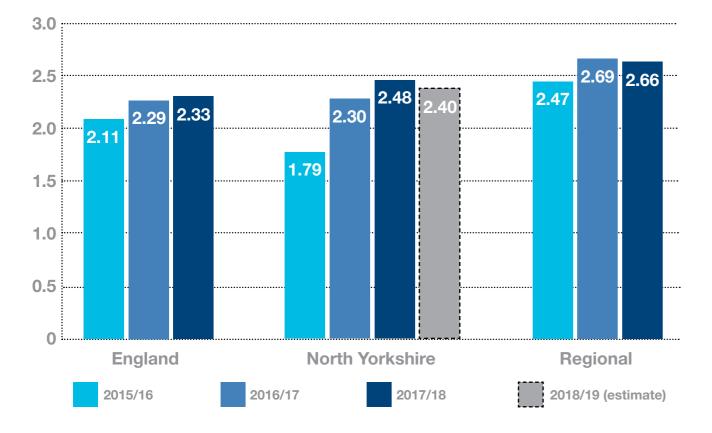
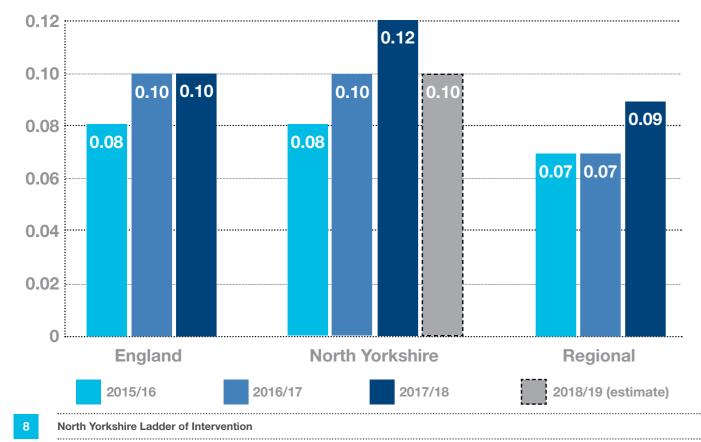


Chart 2: Fixed-term excluded children as percentage of school population

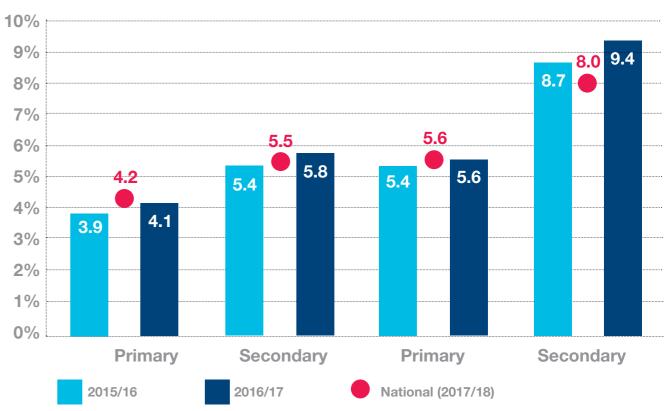
Chart 3: Permanent exclusions as percentage of school population



The SEN population (SEN Support or EHC plan) in North Yorkshire secondary schools did not attend approximately 9.4% of possible sessions in the 2017/18 academic year, compared to 8% nationally.

26.3% of the SEN population in North Yorkshire schools were recorded as being persistently absent (i.e. absent from at least 10% of sessions) in the 2017/18 academic year, compared to a national figure of 23.4%.

Chart 4: Sessions absent by SEN population in North Yorkshire school – 2017/18



Ladder of Intervention

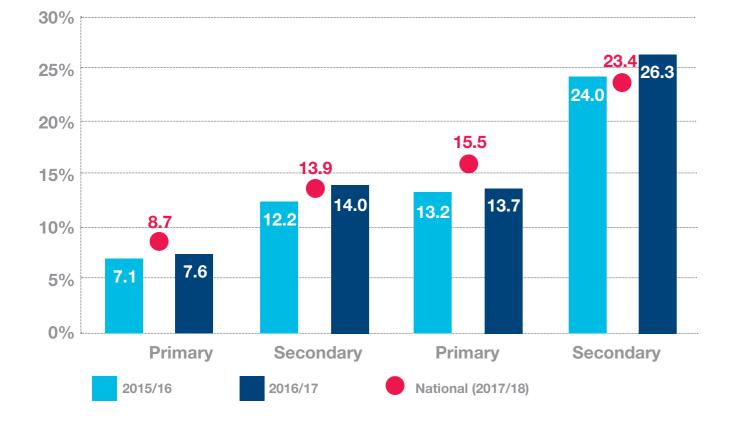
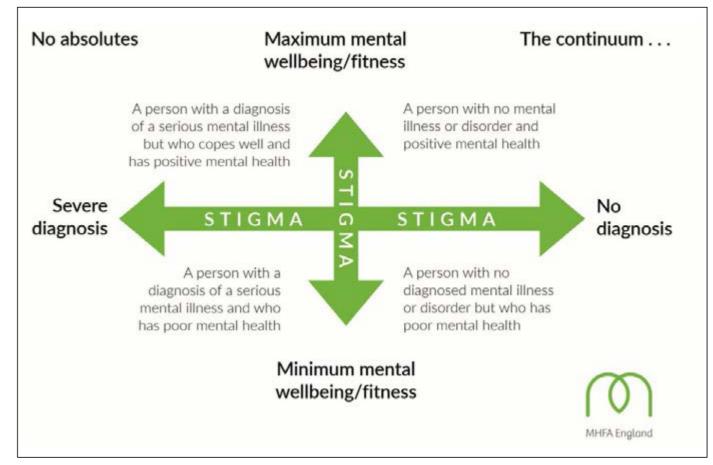


Chart 5: % of SEN population recorded as persistently absent in North Yorkshire schools – 2017/18

Whole school approach

An ethos and culture where good mental health is valued, prioritised and supported for all adults, children and young people is essential. Schools should prioritise an absolute commitment and drive to develop a physically, socially and emotionally safe and secure environment for both adults and children/young people.

The Mental Health Foundation encourage schools to adopt the five ways to wellbeing to promote good mental health in their organisation. Mental health is impacted by internal and external factors and is sometimes described as a continuum.



Ladder of Intervention	

Diagram courtesy of MHFA England

The DFE published non statutory guidance on mental health and behaviour in schools in 2018 which encourages a whole school approach, involving providing a structured environment with clear expectations and routines and individualised graduated response. It emphasises the role of schools in prevention, early access to support and referral to specialist support as appropriate.

Further information on Improving Behaviour in School has recently been published by the Education Endowment Foundation educationendowmentfoundation.org.uk/public/files/ Publications/ Behaviour/EEF Improving behaviour in schools Report.pdf

5 Ways to Wellbeing

Evidence suggests there are 5 steps we can all take to improve our mental wellbeing.

If you give them a try, you may feel happier, more positive and able to get the most from life.

- Connect connect with the people around you. Spend time developing these relationships. Learn more in Connect for mental wellbeing.
- Be active Take a walk, go cycling or play a game of football. Find an activity that you enjoy and make it a part of your life. Learn more in Get active for mental wellbeing.
- Keep learning learning new skills can give you a sense of achievement and a new confidence. Find out more in Learn for mental wellbeing.
- Give to others even the smallest act can count, whether it's a smile, a thank you or a kind word can improve your mental wellbeing and help you build new social networks. Learn more in Give for mental wellbeing.
- Be mindful be more aware of the present moment, including your thoughts and feelings, your body and the world around you. Some people call this awareness "mindfulness". It can positively change the way you feel about life and how you approach challenges. Learn more in Mindfulness for mental wellbeing.

Academic Resilience

Academic resilience means students achieving good educational outcomes despite adversity. For schools, promoting it involves strategic planning and detailed practice involving the whole school community to help vulnerable young people do better than their circumstances might have predicted.

With this way of working, schools can help not only to beat the odds for individual pupils, but also with changing the odds for disadvantaged pupils across the board.

There are many risk factors which make a child less likely to achieve.

But there is also a wealth of research on what can work in building resilience in vulnerable children and young people, including:

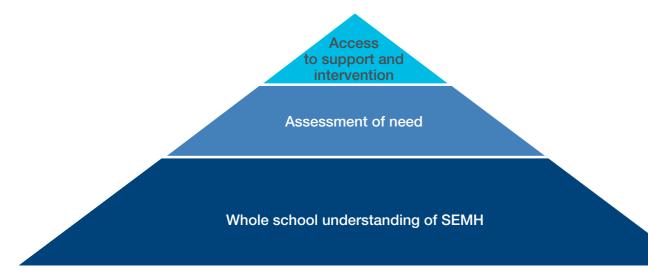
- 1. At least one trusted adult, with regular access over time, who lets the pupils they 'hold in mind' know that they care
- 2. Preparedness and capacity to help with basics, i.e. food, clothing, transport, and even housing
- 3. Safe spaces quiet, safe spaces for pupils who wish to retreat from 'busy' school life
- Making sure disadvantaged pupils actually access activities, hobbies and sports
- Help to map out a sense of future (hope and aspirations) and developing life skills
- 6. Help to develop and practice problem-solving approaches at every opportunity
- 7. Help for pupils to calm down and manage their feelings
- 8. Support to help others e.g. volunteering, peer mentoring.
- 9. Opportunities for all staff, pupils and parents to learn about resilience
- 10. Staff treat each other with care and respect, modelling the behaviour they expect

The Academic Resilience framework can be found at https://youngminds.org.uk/media/1486/ interactive_resilience_framework-002.pdf

A mentally healthy school is one that adopts a whole-school approach to mental health and wellbeing. It is a school that helps children flourish, learn and succeed by providing opportunities for them, and the adults around them, to develop the strengths and coping skills that underpin resilience. A mentally healthy school sees positive mental health and wellbeing as fundamental to its values, mission and culture. It is a school where child, staff and parent/carer mental health and wellbeing is seen as 'everybody's business'.

Ladder of Interventi	on

The ethos must be based on a sound knowledge and awareness of SEMH needs, systems and processes should be in place to support the wellbeing of all. These should be underpinned by Social, Emotional and Mental Health policies and positive relational behaviour policies.



Schools can play a critical part in many different ways to help promote good mental health in children and to prevent later difficulties.

This can be achieved through:

A positive and supportive school ethos, creating an environment that enhances children and school staff's mental health.

Curriculum based activities supporting key social and emotional skills.

Making the most of positive peer relationships and school staff relationships.

Capitalising on the many light touch daily contacts that staff have with children and families.

All of these preventative opportunities rely on the support of school leadership and particularly the drive of a head teacher who models positive self-care, resilience and strong social and emotional skills that is committed to resolving conflict restoratively. The leadership team at all levels have a part to play in ensuring a culture and ethos that promotes good social and emotional wellbeing.

Clear pathways should be established so that pupils identified as needing support are assessed early to establish their SEMH needs using Signs of Safety. Furthermore once assessment has been undertaken appropriate intervention should be implemented and reviewed. Schools should know how and when to access more targeted and specialist support through Compass Reach and CAMHS.

Further information on whole school approaches and more targeted and specialist approaches can be found in the intervention guidance that accompanies this document.



Metacognition

Metacognition and self-regulation approaches aim to help pupils think about their own learning more explicitly, often by teaching them specific strategies for planning, monitoring and evaluating their learning. Interventions are usually designed to give pupils a repertoire of strategies to choose from and the skills to select the most suitable strategy for a given learning task.

Self-regulated learning can be broken into three essential components:

- cognition the mental process involved in knowing, understanding, and learning;
- metacognition often defined as 'learning to learn'; and
- motivation willingness to engage our metacognitive and cognitive skills.

Ladder of Intervention

Curriculum, teaching and learning to promote resilience and support social and emotional learning

Enabling student voice to influence decisions

Staff development to support their own wellbeing and that of students

Building Relationships

School staff have a unique relationship with young people and as such are often very aware when young people are going through a tough time emotionally.

When a pupil turns to a member of staff for help, it's because they trust and respect them. When pupils confide in staff, the member of staff can feel like they do not have the skills and knowledge to effectively help the child with the concerns they have raised (managing emotions, social contexts i.e. divorce/separation, anxiety, stress, low mood). However sometimes just knowing that there is somebody there that is willing to listen in a non-judgemental and patient way, demonstrates that somebody cares about them and this can be an invaluable protective factor that prevents things escalating. By encouraging children and young people to discuss any concerns/emotions they are experiencing, staff are able to guide those who require additional support in accessing that.

Sometimes a pupil won't explicitly ask for help, but they may be behaving in ways that make staff worried about them. There are some warning signs that may help identify those children so that staff can initiate the conversation needed to ensure appropriate support is in place.

Signs to look out for include:

Unexpected outbursts of emotion
Acting out of character
Talking or thinking about their difficulties constantly
Sleeping difficulties
Changes to eating habits
Using drugs or alcohol
Participating in risk taking behaviours
Avoiding friends and social events
Threat of or actual self-harm
Suicidal ideation

If a member of school staff has concerns for the welfare of a pupil then staff should be supported to feel confident in raising these concerns with them. Pupils will often feel a sense of relief that someone has noticed and cares enough to ask how they are. If concerns are confirmed, then it is important to inform the appropriate staff within the school to ensure that the pupil receives the help and support they need to stay safe. An Early Help Champion should be allocated to monitor the child and to provide support with their emotional wellbeing. If you are concerned about anything that a child or young person discloses then the school's safeguarding procedures must be adhered to.

Adverse Childhood experiences

Adverse childhood experiences (ACEs) include experiences such as mental illness, parental divorce and child maltreatment. ACEs can impact physical health, potentially causing issues including heart disease, arthritis and various types of cancer, as well as mental health issues such as depression, anxiety, and attention deficit disorder. Due to the impact ACEs have on mental health, ACEs have a great impact on educational outcomes.

School staff can use their existing expertise more effectively when they understand that many of the academic, social, and behavioural difficulties displayed by children such as failing to understand directions, overreacting to comments from staff and peers, misreading context, failing to peers, failing to connect cause and effect, and other forms of miscommunication. For children who experience trauma at home, school could be their only sanctuary, and staff represent so much more than educators.

School staff offer reassurance that not all adults are harmful, that even relationships at home are difficult there are people in the world who will value, support, and care for them.

It is important that pupils are supported to enable them to listen to each other and to others in the school community, including parents. Strong pupil participation can support school improvement by helping the school to identify future priorities and make more informed decisions on wellbeing, learning experiences and the quality of teaching. Through their involvement, pupils develop valuable personal and social skills such as listening skills and working with others.

Ladder of Intervention

The Ladder of Intervention

When there is a clear whole-school emotional wellbeing strategy, there is often no need for referral on, the school Early Help Champion leads and co-ordinates school based support. The effectiveness of the following strategies depend on the whole school ethos and staff confidence described above.

The principles underpinning the Ladder of Intervention are:

All children and young people including those who display behaviour that challenges the organisation have the right to be included within their local school and to have their needs met effectively

An Early Help Champion provides opportunities for children and young people to develop a positive and supportive relationship which provides opportunity to develop new skills

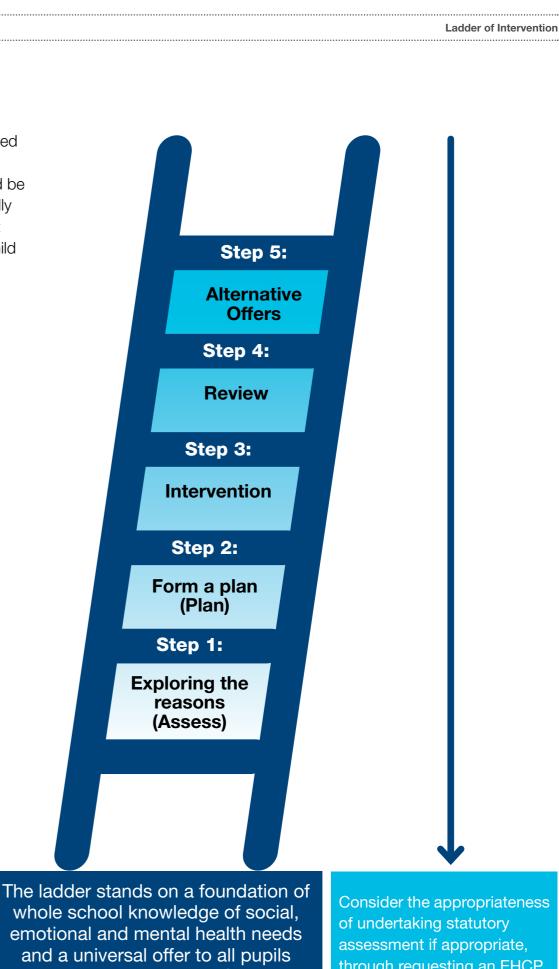
Multi-agency, evidence informed approaches for children with escalating needs should be effectively co-ordinated to ensure best outcomes and a reduction in risk of exclusion

Working together to avoid exclusion provides the greatest opportunity to improve outcomes for children and young people

Multi-agency, evidence informed approaches for children with escalating needs should be effectively co-ordinated to facilitate attendance and inclusion, improving outcomes

The ladder of intervention should ensure that schools intervene at the earliest stage to support children. It is designed to ensure those requiring additional support receive it as early as possible and can identify a person within the school who they trust and can rely upon. It also provides a framework for ensuring that when school based strategies and support have been exhausted schools can easily navigate support from a range of services across the Local Authority. The Ladder of Intervention will be supplemented by an evidence based practice guidance for SEMH which has been developed in partnership with health and social care professionals locally.

The Ladder is divided into a number of steps which should be followed sequentially to achieve the best outcome for the child or young person.



whole school knowledge of social, emotional and mental health needs and a universal offer to all pupils as part of the Early Help Strategy.

through requesting an EHCP.

Ladder of Intervention

Step 5 – Alternative provision

Statutory guidance

School Action

"Where a school has concerns ... it should, in partnership with others (including the Local authority as necessary), consider what additional support or alternative placement may be required"

the collaborative arrangement to offer appropriate alternative vocational curriculum pathways. *Note that provision in independent AP cannot be full time unless the provider is a registered school. Consider alternative curriculum pathways either within school organised by a nominated member of school staff or through external providers. These can be longer term or as a short term approach with a planned reintegration to the school's curriculum pathway. Create a bespoke package of provision to include school based provision organised by a nominated member of school and some access to appropriate alternative provision. Once appropriate alternative provision is sourced and agreed, attend admission meeting at the AP so that the intervention can be planned with roles and responsibilities of all stakeholders confirmed. Attend review meetings and work with the providers and local authority officers to ensure successful reintegration into school following intervention. There is NYCC Guidance on Alternative Provision and a directory available (see support mechanism in appendix 3). *Note the third element of Progress and attainment 8 now contains 'technical awards' from the DfE approved list as well as GCSEs.

for additional support (Children & families,

Inclusion, Healthy Child, COMPASS)

School should consider the use of independent

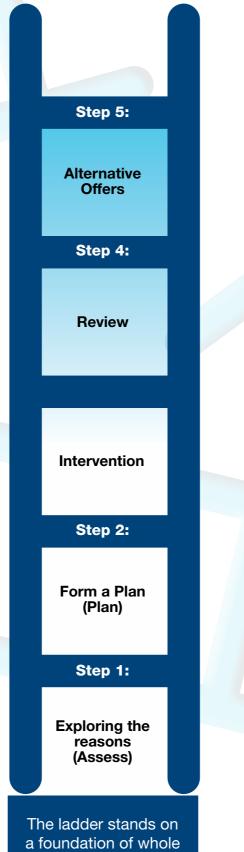
Alternative Provision or commissioning the PRS through

Step 4 – Review

Statutory guidance **School Action** Staff monitor and record the "Schools should review the effectiveness of the support and interventions and their intervention to ensure that it is impact on the pupil's progress should be having a positive impact. reviewed in line with the agreed date." Consider the quality, effectiveness "The impact and quality of the support and impact of provision and and interventions should be evaluated evaluate this along with the child's along with the views of the pupil and family and other professionals. their parents. This should feed back into Celebrate all successes with the analysis of the pupil's needs." the child and family. "Support should then be revised in light of the Consider if there is a requirement pupil's progress and development, deciding to undertake a further assess on any changes to the support and outcomes plan – do review cycle or early in consultation with the parent and the pupil." help intervention cycle. Consider referrals to external agencies

Step 3 – Intervention

Statutory guidance	School Action
"the head teacher should consider what extra support might be needed to identify and address the needs of pupils in order to reduce	Implement in school support and targeted intervention as identified through the assessment. Request the involvement of additional services identified as required in steps 1 and 2 and implement any intervention advised.
their risk of exclusion"	Discuss your concerns with an Early Help Consultant.



school knowledge of mental health needs and a universal offer to all pupils as part of the Early Help Strategy

Step 2 – Form a Plan

Statutory guidance
"The head teacher should also conside the use of Early Help assessment
for a pupil who demonstrates 🛛 🔪
persistent disruptive behaviour"
"Under the Equality Act 2010,
schools must not discriminate. For
disabled children, this includes a duty
to make reasonable adjustments
to policy and practice and to
undertake anticipatory duties"
"Early Intervention to address
underlying causes of disruptive
behaviour should include as
assessment of whether appropriate
provision is in place to support any
SEN or disability that a pupil may have

Step 1 Assess – Exploring the reasons Statutory Guidance School Actions

"The head teacher should take account of any contributing factors" "Early intervention to address underlying causes of disruptive behaviour should include an assessment of whether appropriate provision is in place to support any SEN or disability that a pupil may have"

School Action

Ver Where unmet needs become evident, but there are no identified SEND needs complete the NYCC Early Help assessment and action plan (Appendix 1) and engage services as appropriate – single agency or through instigating a Team around the child or family. Where SEN is identified complete an SEN Support plan. Engage parents in the initial plan.

Assess the learning environment, contextual factors and nature of educational practice before turning to explore factors within child. Seek consultation from an Educational Psychologist (Appendix 4). Note: Parents are not required to provide consent for the school as a single agency to complete an Early Help assessment and plan (Appendix 2). Parents will have to consent to other services including the Early Help team becoming involved. If you have concerns in relation to this please contact your Early Help consultant for further advice.

For all pupils where a concern about their SEMH is identified including but not restricted to those that are at risk of or have received an exclusion, undertake screening for underlying special needs (as a minimum this should include a screen of communication ability, a reading assessment and an SEMH screening tool) examples of these can be found in Appendix 3. Identify a person in school to be their Early Help Champion. This should be somebody that has a good relationship with the child and has the capacity to work with them. Explore the child's wishes and feelings using Signs of Safety methodology. Consult with parents to establish concerns. Ensure alterations to the curriculum are in place. Explore environmental factors including undertaking an audit of the impact of the school environment on the pupil and through consultation with parent/carer and pupil. Undertake observations or functional analysis of behaviour using the emotional crisis scale (Appendix 6). Initial screening and assessment should be undertaken by the SENCO or a nominated person within the school. Support can be accessed through the SENCO networks and Compass Buzz. Ensure positive feedback and praise is used as a vehicle to improve self-perception. Ensure all staff are appropriately trained to identify and meet the SEMH needs of pupils. Ensure that the Early Help Champion is undertaking regular oversight of the child and any progress being made. Seek consultation from an Educational Psychologist.

Case study

A recent case which was funded by the Equality and Human Rights Commission was heard at the upper tribunal. It centred on the fact that children with disabilities that mean they have "a tendency to physically abuse" are not protected by the Equality Act 2010.

This means that children with autism, ADHD or other SEN that constitutes a disability are not treated as "disabled" in relation to their physically aggressive behaviour and so cannot challenge decisions to exclude them from school.

Judge Rowley, who examined whether this rule was in breach of children's human rights, found that this rule came "nowhere near striking a fair balance between the rights of children on the one side and the interests of the community on the other".

Judge Rowley said that "aggressive behaviour is not a choice for children with autism".

"In my judgment the Secretary of State has failed to justify maintaining in force a provision which excludes from the ambit of the protection of the Equality Act, children whose behaviour in school is a manifestation of the very condition which calls for special educational provision to be made for them.

"In that context, to my mind it is repugnant to define as 'criminal or anti-social' the effect of the behaviour of children whose condition (through no fault of their own) manifests itself in particular ways so as to justify treating them differently from children whose condition has other manifestations."

The 'one off' breach

The Local Authority endorses a restorative approach to behaviour, if the relationship between school and the pupil or family has been damaged a restorative approach should be adopted. Adopting a Restorative approach allows schools to comply with the exclusion statutory guidance which states that pupils should not be permanently excluded for a serious breach, or even breaches of the policy, if the incident(s) can be managed such that other pupils are not harmed. The guidance below is informed by the DFE ACPO guidance on drug related incidents. This section is designed to guide head-teachers in pursuing inclusive alternatives to permanent exclusion when pupils make serious, but one off mistakes.

In most cases the ladder of intervention should still be followed.

The following inclusive measures should be undertaken prior to permanent exclusion in the event of a one off or particularly serious breach of the behaviour policy.

Ladder of Intervention

Statutory guidance	School Action
"Where practical, head teachers should give pupils an opportunity to present their case before taking the decision to exclude"	Adopt a restorative approach to facilitate the repairing of harm, support learning and to establish close monitoring and risk assessment.
"Head teachers should take account of any contributing factors that are identified after an incident of poor behaviour has occurred. For example, when it comes to light that a pupil has suffered a bereavement, has mental health issues or has been subject to bullying"	Consider mitigating circumstances, e.g. bereavement, separation, divorce, bullying, criminal or sexual exploitation. Request the involvement of additional services as in Step 3. Consider all aspects of potentially unmet needs as in Step 1.
"Exclusion should not be the automatic response to a drug incident and permanent exclusion should only be used in serious cases" "Any decision must be made in line with the principles of administrative law, i.e. that it is lawful, rational, reasonable, fair and proportionate"	Adhere to the 2012 DfE guidance on drugs misuse to avoid permanent exclusion for possession. For more serious breaches contact your Inclusion Support Service. For drug related incidents refer to the Youth Offending Panel.
"Maintained schools have the power to direct a pupil off site for education to improve their behaviour."	If none of the above are sufficient to allow pupils to remain within the school then placement elsewhere should be arranged by the school in partnership with the Inclusion support service.

Statutory guidance	School Action
"A pupil at any type of	A managed move may
school can also transfer	best interest of the chil
to another school as part	move may be appropri
of a managed move.	• If bullying has occurr
"The threat of exclusion	 If there is a safeguard
must never be used	educated elsewhere is If an incident has occ
to influence parents	the pupil in close proxi
to remove their child	could give rise to diffice If the child or young
from the school"	behaviour and a move

Special circumstances

If the breach of behaviour policy justifies a permanent exclusion only because of previous violations, then it must be coded as persistent disruptive behaviour to accurately reflect the context for this decision. In these circumstances the pupil must therefore have been supported through all the steps outlined above.

Head teachers should, as far as possible, avoid excluding permanently any pupil with a statement of SEN or a looked after child. It is unlawful to exclude for a non-disciplinary reason, including if a child has special educational needs and the school struggle to meet those needs. Sending a child home due to SEN needs or to cool off is also unlawful. Schools should look at putting more or different support in place instead.

Ladder of Intervention	on

ay be considered if this is in the child. Examples of when a managed priate to consider are:

urred

arding reason that means being is in the best interest of the child

occurred which means that educating oximity to other children in the school ficulties (i.e restraining orders etc.)

g person is engaging in anti-social ve could help break the negative cycle.

Vulnerable Groups

If the child is not making appropriate social/emotional and or academic progress further to two robust cycles of assess, plan, do, review using the Ladder of Intervention and their alternative offer, or the pupil is not accessing the alternative provision on offer then consideration should be given to undertaking statutory assessment (these pupils would be identified as Band 4 pupils). Request an Education, Health Care Plan assessment (EHCP) using an Education, Health and Care Assessment Request (EHCAR).

Pupils with an Education, Health and Care Plan

Where a child's needs are such that placement change is being considered (either in the short term or the long term) an emergency review must be convened as soon as possible by the school and the Assessment and Review Officer and other LA officers involved must be invited. If all steps have been followed, appropriate provision will be discussed and options explored. Any requests will then be sent to the provider for consideration. If the provider can meet the specified needs, work will be undertaken alongside the Inclusive Education team and current setting to support a successful placement and transition back to school at the end of the placement. The SEND team will remain involved in ongoing review meetings and be updated on any developments.

Children in care or previously in care

Given the additional vulnerabilities these children face if the head teacher wishes to access additional support for a pupil who is in the care of the local authority or has previously been in care they should initiate an emergency review of the PEP. The virtual school and inclusion service must be invited and future plans will be considered. The virtual school will remain involved in ongoing review meetings and be updated on any developments.

For further advice and guidance please contact the Inclusive Education Service on 01609 534010 or via InclusiveEducation@northyorks.gov.uk

Appendix 1 – Early Help assessment and Action plan

From time to time some children will become vulnerable and will require additional support because of their own development, family circumstances or environmental factors. These children and young people are at risk of not reaching their full potential and life chances may be impaired without the provision of additional interventions. Early Help can be delivered by an individual from single universal agencies who is known to the child and has developed a unique relationship based on trust and respect. The worker, identified as an Early Help Champion, will provide the help and support required either as a single agency or through a coordinated response. One use of the Early Help assessment and action plan is to support young people who are at risk of becoming disaffected because of their social, emotional and mental health needs, including those with poor attendance and at risk of exclusion. Early Help Champions can complete Early Help Assessments (EHA) and deliver enhanced support to address assessed needs. Where necessary the Early Help Champions will coordinate Team around the Family (TAF) meetings, which ensure an appropriate multi-agency response to escalating needs. Early Help Champions can be supported in their role by dedicated Early Help Consultants.

As part of the Ladder of Intervention the Early Help assessment and action plan:

- · Is school based and time-limited
- Has achievable targets and practical strategies
- Is agreed with parents/carers and any agencies involved with the child and is jointly owned by all parties

An Early Help assessment can be instigated for:			
A young person who is demonstrating poor wellbeing, a lack of engagement and attendance and where universal strategies are not working to improve the situation	A young person who's social, emotional and mental health is a concern	A young person who is at risk of exclusion or has received one or more exclusions from school	A young person at risk of permanent exclusion.

Process:

Process	Rationale	Who	Actions
1. Contact those required to attend the meeting	Ensure parents, agencies involved with the child or family are invited.	Pastoral Lead /Early Help Champion	Contact and confirm date of the meeting Gather teacher feedback, e.g learning walk, SIMS analysis
2. Collate paperwork for the meeting	 Ensure full picture of the child is available to include: Behaviour Achievement Attendance Progress Feedback from professionals working with the child including AP. Strategies and interventions undertaken. 	Pastoral Lead /Early Help Champion	Liaise with line manager to review paper work before the meeting and agree targets. Liaise with the Early Help consultant to ascertain if the child is open to the Children and Families Service.

Process	Rationale	Who	Actions
3. Meeting takes place	To address issues, and ensure all stakeholders agree to the steps required to move forward	Pastoral Lead (Early Help Champion) Parent External agencies	Notes of the meeting are taken and completed Target agreed and support strategies to achieve targets in place Review meeting scheduled
4. Weekly review	Pastoral lead checks in with pupil daily but logs weekly the outcome of the steps towards achieving the targets	Pastoral Lead (Early Help Champion)	Log to be stored on "weekly review document" to use in next review
5. Review meeting preparation	Collect updated paperwork	Pastoral Lead (Early Help Champion)	Paperwork available from initial meeting and weekly reviews to evidence impact
6. Review meeting takes place	To consider progress made, address any difficulties and ensure all stakeholders agree to the steps required for moving forward	Pastoral Lead (Early Help Champion) Parent External agencies	Notes of meeting are taken and completed Targets reviewed and future targets agreed Review meeting to be scheduled

If improvements are evident continue to monitor and support through the pastoral system.

It is for schools to determine their own approach to record keeping in line with the requirements of the Data Protection Act 1998, however using the Early Help assessment and action plan for the school level intervention could increase efficiency as this can then be submitted as evidence alongside the Early Help referral.

Ladder of Interventior	ı

Section A			
North Yorkshire	e Early Help Assessment		
Surname:		Forename(s):	
Date of Birth / Estimated Date of Delivery:		Gender:	Male Unknown Female Unborn
Address			
Telephone Numbers:		NHS Number	
		UPN Number	
		GP Surgery	
Child/young person's White British White Irish White Irish Caribbean Caribbean African Any other Black b White and Black C Child's first language or preferred means of communication:	ackground	Indian Pakistani Bangladeshi	ed background an background
Child's Religion		Nationality:	
Immigration status:		1	I
Is the child disabled?	No Yes	Details:	
Is there an EHCP in place?	No Yes	Details:	
Is the child adopted?	No Yes		

Section B – People in the family/household and other people who are important to the family:

Explore who is important to the family; who cares about then life. Completing a genogram, family tree or circles of support this information. Please send copies of any pieces of work co

Name	Relationship to child/ young person	DOB/EDD	F

Section C – Services working with the fam

	Ŭ	
Role	Full Name	Telephone
Dentist		
Health Visitor		
Midwife		
5-19 Health Child Nurse		
Education Provider		
Youth Justice Service		
Paediatrician		
Other, please specify:		

Ladder of Intervent	ion

n and helps them in their day to day			
together is a good	together is a good way to capture		
ompleted along with this form.			
Parental Ethnicity			

Parental Responsibility Y/N	Ethnicity	Religion

nily:		
	Email Address	Address and Postcode

Please give as much and concise evidence-based information as possible to help us in our assessment

What are you worried about?
(Reason for Assessment)
Please separate the information into
Worries and Complicating Factors.
In the worries – say what has happened in the past that worries us about
the child or young person and their
family. Be specific and factual – give
examples. Say what impact this is
having or could have on the child/ young person and their family.
Complicating Factors are anything that
makes the problem harder to deal with.
What is going well for the
child and their family?
(What support is currently in place?)
Please separate the information
into Existing Strengths and
Existing Wellbeing.
Strengths are good things that are happening in the family for
the child/ young person.
Existing Wellbeing is times when
the family has shown they can meet
the child's needs when the problem
is happening. This can also include
other people who are helping.

What needs to change or would help this child and their family?

Say what the next steps are to start to build the plan and make sure the child is safe and well. This might include getting some people together who can support the family and be part of their network.

Scaling - Having discussed what life is like for

0	1	2	3	4	5
Extremely worried					

What are the child/young person's views?

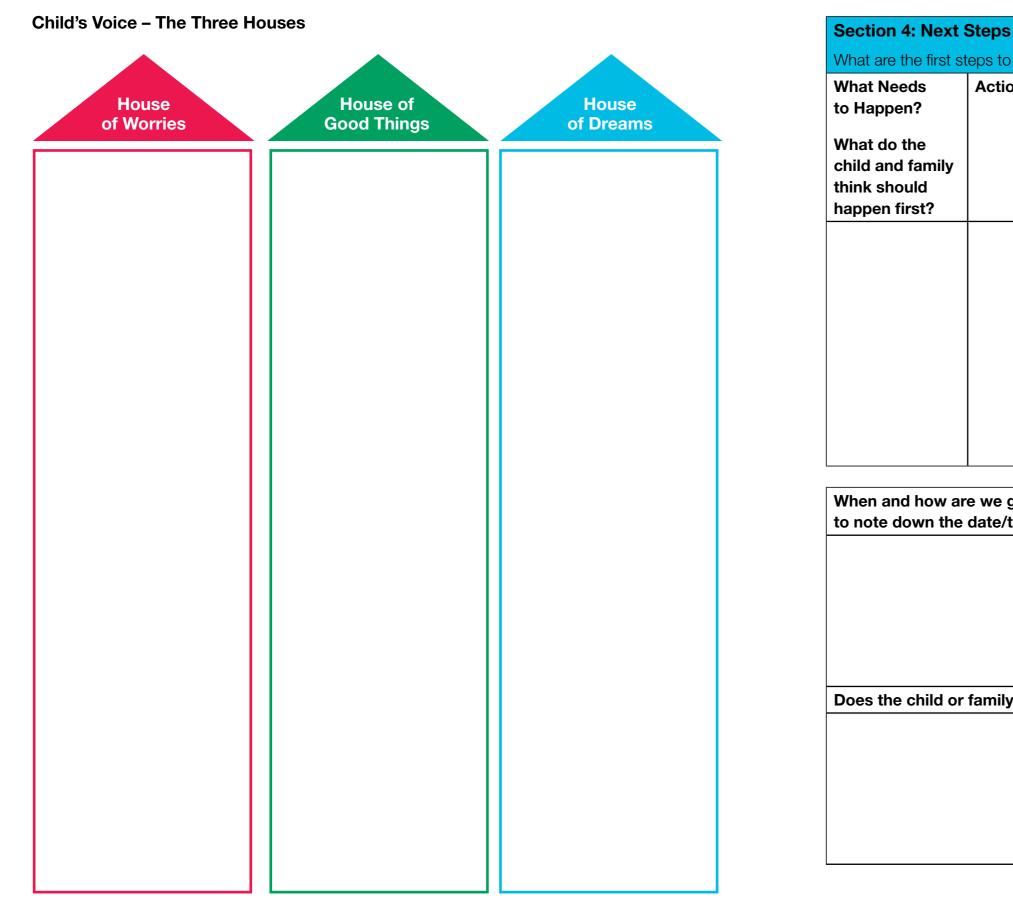
What does the child/young person feel is good abo worried about and what do they want to happen? what the child has put in their three houses. Please the work completed with the child/young person to

What are the parent/carer's views?

What does the parent/carer feel is good about their child's life, what are they worried about and what do they want to happen?

Ladder of Intervention

r this child ı	right nov	v, how wo	orried are	we?	
6	7	8	9 No w	10 orries	
out their life, what are they You may want to summarise e send any copies or photos of					
ogether with					



What Needs Action to Happen? What do the child and family think should happen first?

What are the first steps to making things better an

When and how are we going to review this assessment (please remember to note down the date/time of the TAF meeting if applicable)?

Does the child or family have any further comments on the assessment and plan?

Ladder of Intervention

nd moving from the worries towards the goals?					
	Who will do this?	By when?	How will we know it has made a difference?		

Author's details		
Date of completion:		
Name of Author:	Role:	
Agency Address:		
Contact Number:		
E-mail:		
Other:	Any other relevant information to note	

Author Please Complete

To log Team around the Family (TAF) in place (Continuum of Need – Level 2B) Referral for Targeted Early Help (Continuum of Need - Children and Families Service - Level 2C)*

Referral to Children's Social Care (Continuum of Need Level 3 & 4)*

*Please complete Family Consent Form

If you are sending this form from a NYCC email you can send it to Children&families@northyorks.gov.uk

If you have access to an egress account, please send to Children&families@ northyorks.gov.uk via egress. Do not send from egress to gcsx.

Appendix 2 **Family Consent Form**

July 2019

If there is little or no evidence of improvement or progress through the Ladder of Intervention, discuss with the Early Help consultant if support is required through the Children and Families Service.

The Children and Families Service work closely with different professionals, such as teachers, health visitors and GPs. This helps us to understand and meet the needs of your family and members within it.

Before we are able to do this we need to ask you for consent to collect and share this information about your family and, before you sign to indicate you agree to this, we want to ensure you understand what we are collecting and sharing, and why. What we want your information for and how we will use it.

It is important you know that any information we collect and share about you will be stored and used in strict accordance with the General Data Protection Regulation (GDPR) and the Data Protection Act 2018.

We need to look up and share your information such as names, dates of birth, and addresses for 3 main purposes:

1) to understand what help you or your family might need.

By sharing information we can build up a better picture of your family and this will help us and our partners

- plan the services we offer you,
- check our records to see if and how we have worked with your family previously.
- see if you are currently working with any of our partner services or support organisations and, where appropriate, ask such organisations to provide you with any additional services which we feel could assist you.
- 2) to improve the way we support you and other people in the future.

By listening to and sharing your feedback we can make changes to the way we work and constantly improve how we offer support to you and others in similar situations.

3) to show those who are funding us (e.g. central Government) if the services we are spending it on are really helping families, both now and in years to come.

Ladder of Intervention

Also

- Any information will be provided as part of a large group of families from across North Yorkshire.
- Any report made will be on the findings for the group as a whole and it will not be possible to identify you or anyone individually.
- Your information will only be used for research and statistical purposes to measure the performance of the service we give you.
- The overall findings will help both Government and ourselves develop new policy and approaches, and to see if what is being provided meets the needs of those who receive the help.

What do you need to do?

We are asking for your agreement, known as "consent" to share your information for the reasons above. It is an easy process where all we need is for you to tick whether you agree or disagree to the consent and sign the declaration below.

You do not have to agree to this and you can withdraw your "consent" at any time if you change your mind. You can do this by emailing the Data Protection Officer at **infogov@northyorks.gov.uk** or write to Information Governance Office, Veritau Ltd, County Hall, Northallerton, North Yorkshire, DL7 8AL.

You can also request a copy of any information we hold on you by submitting a Subject Access Request to the above address.

It is important to tell you that we have a legal duty to share your information with other agencies, even without your consent if we believe it will, protect you, prevent harm to someone else or prevent / detect a crime.

Your agreement

I understand why information about our family is being recorded and how it will be used and shared.

I give consent for information about our family to be used for the above purposes	
I do not give consent for information about our family to be used for the above purposes	

Signed:.....

Date:....

Role in Fa	mily – Ind	ividual, Car	er, Parent c	r Repre
------------	------------	--------------	--------------	---------

This consent needs to	be given fo	or all mem	bers of t
t must also be signed	by the prof	fessional v	vorking

Signed:	

Signed:	
---------	--

Signed:	
---------	--

Early Help Champion/Professional

Signed:

Print Name:

For more information about how NYCC collects and processes your personal data please refer to https://www.northyorks.gov.uk/privacy-notices

l	Ladder of Intervention

esentative (delete as appropriate)

the family as appropriate. with you.

Date:	
Date:	
Date:	
Date:	

Date:....

Team Around the Family Plan for (insert name of child or young person)				
Date of this plan				
Date TAF started				
Date plan was last reviewed				
Name of the child	Date of birth	Does the child have a disability?	Name of the parent/carer with Parental Responsibility	
			Please ensure you insert all people with Parental Responsibility	
Name of the Early Help Champion				
Contact email & telephone number				

What Needs to Happen? (copy and paste from EHA)	Actions	Who will do it?	By when?	How will we know if it has made a difference?
Copy and paste everything from the "What needs to happen?" column. Include items from the Practitioner's Family and Child/ Young Person. Where there are many issues, the Team Around the family, including the child/young person themselves, can prioritise and agree for this plan to address the issues that are most important and add more later.	 Make sure these are clear and achievable. Ensure that the actions are related to the issue described in the left hand column. Do not include actions that do not contribute to the priorities of the plan. Do not use acronyms or jargon without explanation. 	 Assign clear responsibility and ensure this person agrees and is clear about what the action is. 	 Set an agreed, realistic timescale. Do not use 'ongoing' 	 Ensure that this is clear, measurable and described in words the child and family understand. Do not use acronyms or jargon without explanation. Check again that this is related to the priorities of the plan.

The scaling question below should be used to establish how concerned each person is about the issues identified in the assessment above.

The Professional, the parents/carers, and the child or young person should all score separately. There is no need to come to a consensus. The scaling is very powerful in understanding where families are at in their thinking about change; and for opening up a discussion about why scores are similar or different for each person involved.

Ladder of Intervention

On a scale of 0-10 where 10 means you haven't got any worries, and 0 means that things are so bad you don't know what to do; where do you rate this situation today? Please circle a number for each person (Child/Young Person, Early Help Champion, Parent/Carer(s)) 4 5 6 7 8 10 0 1 2 3 9 **Extremely worried** No worries Write the person's name underneath their score I have contributed to, and agreed the content of this plan: Child/young person's signature Date: Parent's/Carer's Signature Date: Early Help Champion's signature Date: Review Date NB The plan needs to be reviewed at least once every 6 weeks

Appendix 3 – Support mechanisms

Step 1 – Explore the reasons Support mechanisms that may be useful NYCC Mainstream guidance https://www.northyorks.gov.uk/sites/default/files/fileroot/Children%20and%20 families/SEND%20-%20local%20offer/SEND mainstream guidance 2016 - 17.pdf North Yorkshire Vulnerability check list http://www.safeguardingchildren.co.uk/professionals/vulnerability-check-list Communication Trust Progression Tools - screen for communication difficulties thecommunicationtrust.org.uk/resources/resources/ resources-for-practitioners/ progression-tools-primary thecommunicationtrust.org.uk/resources/resources/ resources-for-practitioners/ progression-tools-secondary CORC - Wellbeing Measures for primary and secondary schools www.corc.uk.net/media/1506/primary-school-measures 310317 forweb.pdf www.corc.uk.net/media/1517/blf17 20-second-school-measuresbl-17-03-17b.pdf Guidance on appropriate assessment materials available from the SEND adviser or through informal liaison with the appropriate EMS. CDC Whole school Framework for Emotional Wellbeing and Mental Health www.ncb.org.uk/sites/default/files/uploads/documents/Policy_docs/Briefings/ NCB%20School%20Well%20Being%20Framework%20Leaders%20Tool%20FINAL.pdf Academic Resilience Framework www.youngminds.org.uk/resources/school-resources/academic-resilience-resources Thrive www.thriveapproach.com The Local offer www.northyorks.gov.uk/send-local-offer NYCC SEND mainstream guidance www.cyps.northyorks.gov.uk/special-educational-needs-disabilities NYCC SEMH Intervention guidance

Youth Mental Health First Aid training nyestraining.co.uk/Services/2648

		Ladder of	Intervention

Compass Buzz training (level 1,2,3)

NYCC exemplar behaviour/SEMH policy

MindEd <u>www.minded.org.uk</u>

Educational Psychologist nyestraining.co.uk/Services/2428

Step 2 – Form a Plan

Support mechanisms that may be useful
NYCC exclusions toolkit
Healthy child programme 0 – 19 Referral www.cyps.northyorks.gov.uk/referral-forms
Compass Buzz referral
Referral to Speech and Language Therapist www.cyps.northyorks.gov.uk/referral-forms
Inclusion panel discussion for advice and guidance
The Equality Act www.gov.uk/government/publications/easy-read-the-equality-act-making-equality-real
Early help Consultation to include those working with the child including any speech and language therapists, healthy child practitioner, Compass Buzz etc.
District pathways www.northyorks.gov.uk/support-children-young-people-and-their-families
SEN Support plan documentation

Early help assessment and action plan (appendix 1)

Step 4 – Intervention

λομ	
Supp	port mechanisms that may be useful
-	Help service referral .cyps.northyorks.gov.uk/referral-forms
www	practice guidance for Restorative Practice .restorativejustice.org.uk/sites/default/file tice%20guidance%20for%20restorative%
	sive Education Service Request for involvemen
	pass Reach referral .cyps.northyorks.gov.uk/compass-reach
	ational Psychology referral .cyps.northyorks.gov.uk/educational-psyc
www	HS single point of access .cyps.northyorks.gov.uk/children-and-you ples-emotional-and-mental-health
	n Yorkshire Referral forms
	n Yorkshire District referral Pathways northyorks.gov.uk/support-children-your
Step {	5 – Alternative provision
Supp	port mechanisms that may be useful
NYC	C Alternative Provision Guidance and Directory
	nical awards approved gov.uk/government/publications/2019-pe

	Ladder of Intervention
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%20practice%202011.pdf	
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ional-needs-disabilities	
<u>n</u>	
ychology-early-years	
oung-	
ung-people-and-their-familie	es

performancetables-technical-and-vocational-qualifications

Consideration by Local authority officer/inclusion panel to an intervention place within PRS

Request in-reach provision within an EMS via the Local authority officer/inclusion panel

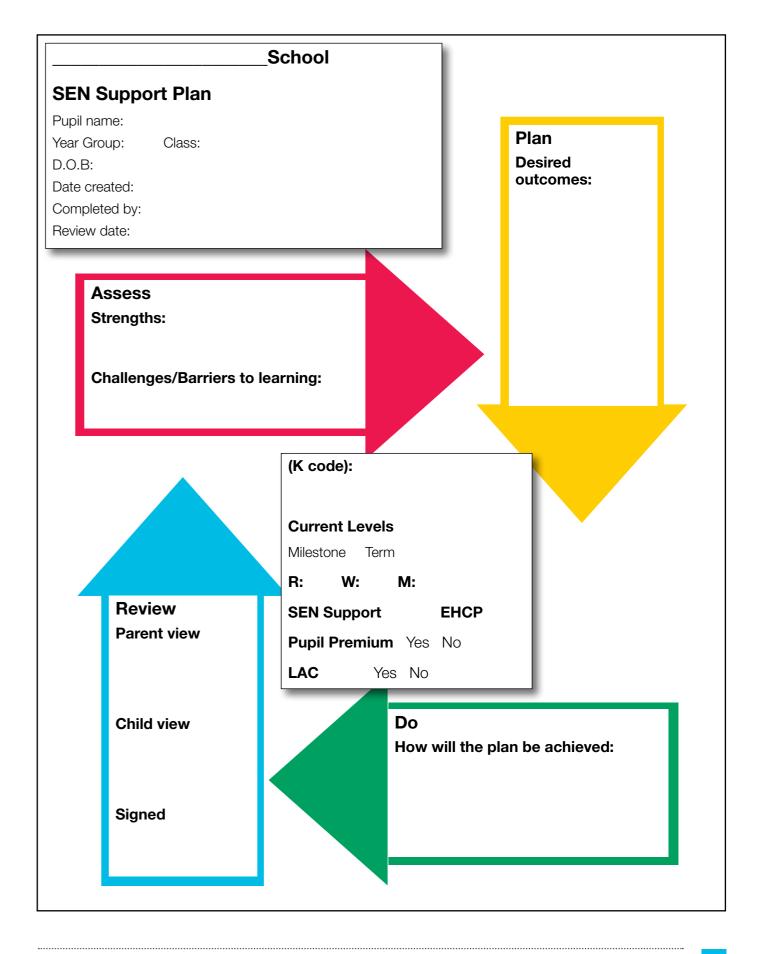
Appendix 4 SEN support plans

The SEN Code of Practice it is for schools to determine their own approach to record keeping in line with the requirements of the Data Protection Act 1998.

The provision made for pupils with SEN should be recorded accurately and kept up to date. As part of any inspection, Ofsted will expect to see evidence of pupil progress, a focus on outcomes and a rigorous approach to the monitoring and evaluation of any SEN support provided.

Schools should particularly record details of additional or different provision made under SEN support. This should form part of regular discussions with parents about the child's progress, expected outcomes from the support and planned next steps. They should ensure that they have accurate information to evidence the SEN support that has been provided over the pupil's time in the school, as well as its impact.

The following are examples of SEN support plans that could be adapted to suit the needs of the school.



Ladder of Intervention

booring of the leaves within the second s

My Provision Map	Barrier to Learning (K Code):	Name:	Age: 8 Class: 4
6102 - 0102		Date from: April 19	Number: 3
Targeted Support	What - interventions	Who	When – how often
אממונוסוופו א מווופרפוונ	Own chair	****	When needed
	Calm box	Quiet room	 When needed
	Crisis curve and countdown		When needed
Specialist Provision	What – interventions & programmes	Who	When – how often
outside school e.g EMS	EMS	* * * * * •	• Weekly

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48

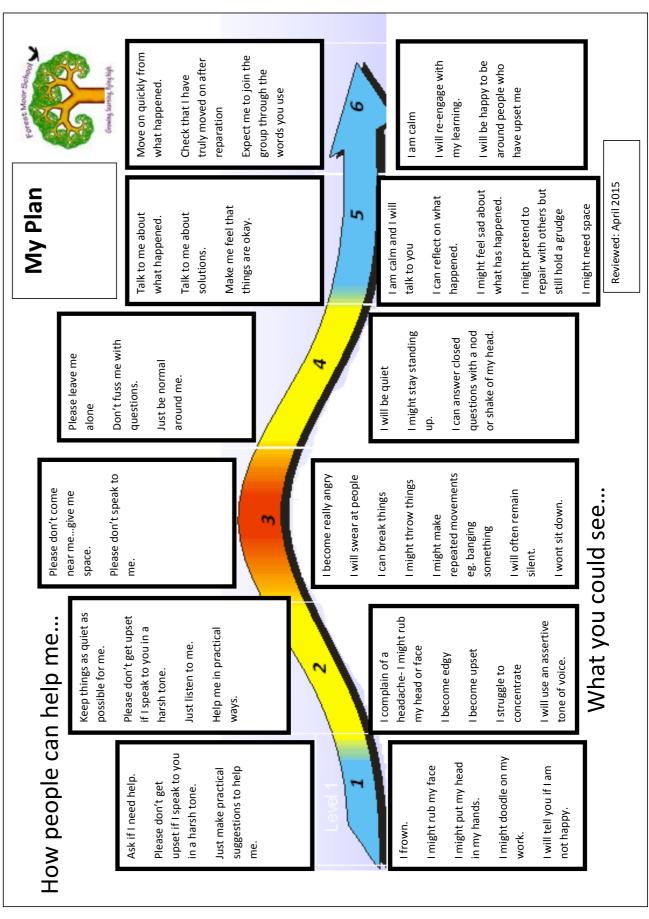
REVIEW: CHECK MY PROGRESS – What I think

	10	10	10
			6
Ň	2 3 4 5 6 7 8 9	1 2 3 4 5 6 7 8 9	∞
Progress – where I am now	~	~	2 3 4 5 6 7 8
ere	9	9	9
hw –	ы	ы	ы
gress	4	4	4
Pro	m	m	ო
	7	5	7
	ц.	-	-
DATE			
70			
	10	10	10
	6	6	7 8 9 10
gan	∞	∞	œ
My targets – Where I began	5 6 7 8 9 <u>10</u>	5 6 7 8 9 10	~
Wher	9	9	9
ets – 1	ы	ы	ъ
/ targ	4	4	4
ź	m	m	m
	2	2	<mark>7</mark>
	-		त्न
DATE	28.11.18	28.11.18	28.11.18
Targets			

Ladder of Intervention

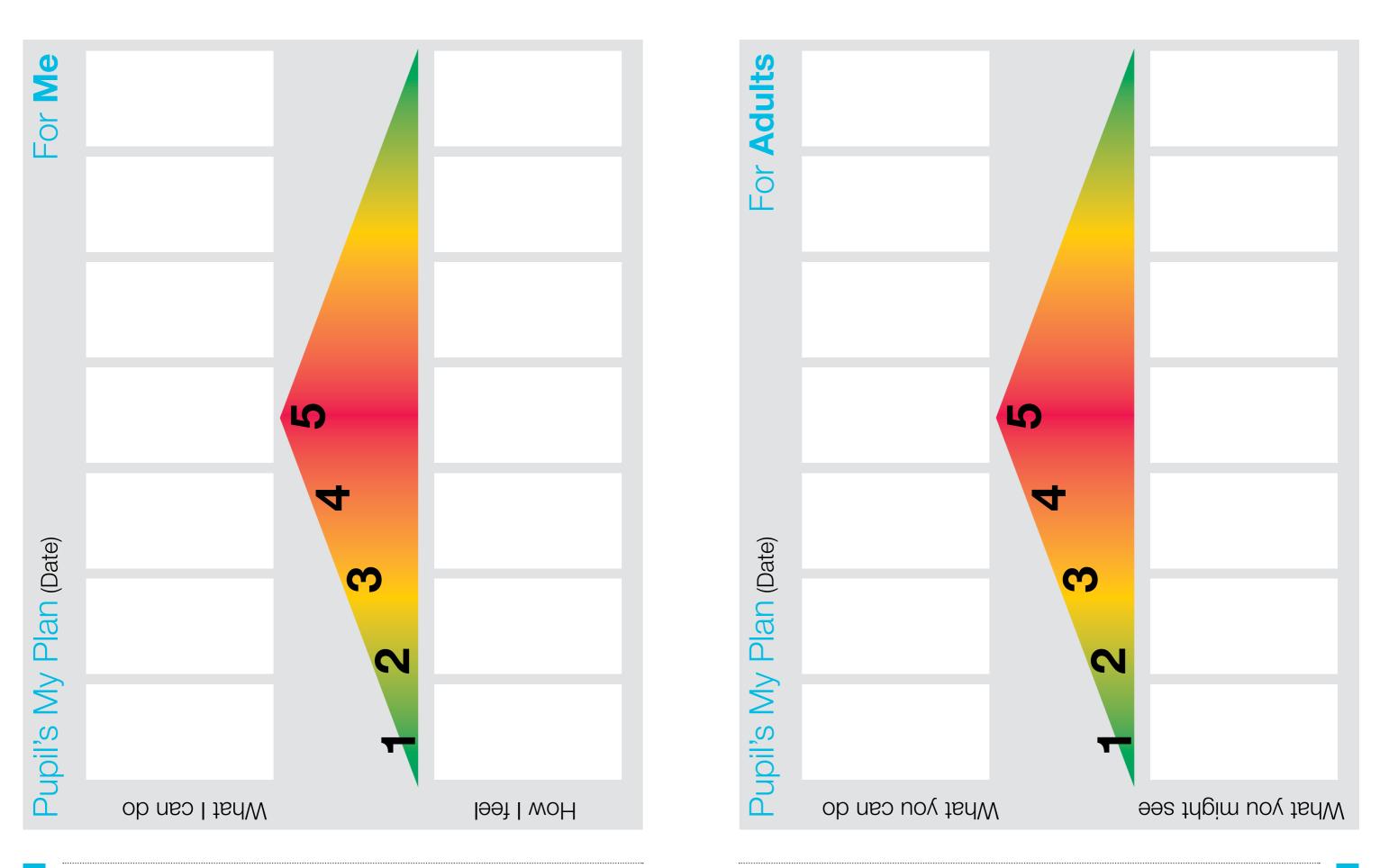
My Provision Map 2018 - 2019	on Map 2019	Barri	Barrier to Learning	Learning (K Code):	Name: Date from: April 19	Age: 8 Class: 4 Number: 3
REVIEW:	CHECKING MY P	ROGRESS – V	REVIEW: CHECKING MY PROGRESS – What my teachers think	rs think		
	Target Tracker	Maths	Reading	Writing	Parents View:	
Before	step:	3s+	3s	3s		
	Target Tracker	Maths	Reading	Writing		
After	step:	4w	4w	4w		
Who/what	Who/what has helped me make progress?	make progre	ess?		Next Steps	
•						
Signed by pupil:	oupil:		Date:			
Signed by parent:	barent:			Date: _		
Signed by c	Signed by class teacher:			Date:		

Appendix 6 – My Plan



North Yorkshire Ladder of Intervention

Ladder of Intervention



Lado	der of Interventior

Appendix 7 – Contact details

Inclusive Education Service

T: 01609 534010

E: inclusiveeducation@northyorks.gov.uk

Early Help East

T: 01609 534852

E: EarlyHelpEast@northyorks.gov.uk

Early Help West

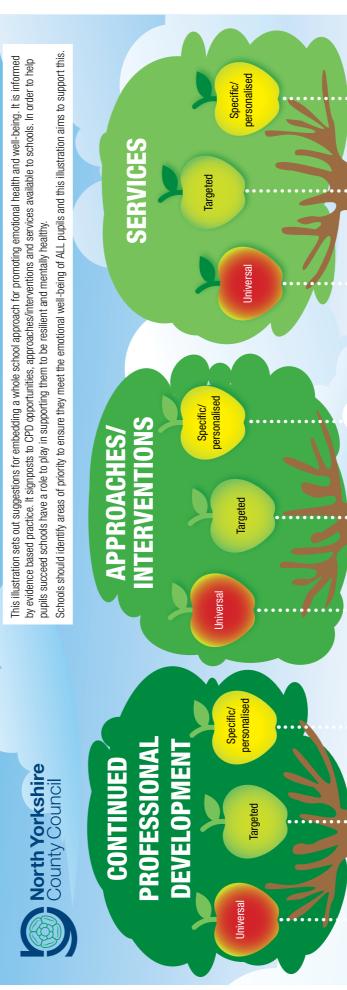
T: 01609 534842

E: EarlyHelpWest@northyorks.gov.uk

Early Help Central

T: 01609 534829

E: EarlyHelpCentral@northyorks.gov.uk



54

	2 Targeted 3 Specific/personalised • Healthy Child Team – Targeted Support 3 Specific/personalised • Barby Child Team – Targeted • Services for young People Support • Services for young People • ComPASS REACH • Early Nether Functions Functionellewicy of Interventions • ComPASS REACH • COMPASS REACH • ComPass Reacher Interventions • COMPASS REACHER • ComPass Reacher Interventions • COMPASS REACHER • ComPass Reacher Interventions • COMPASS REACHER
	2 Targeted 3 Specific/p Services for your Support - Healthy Child Team – Targeted Support 3 Specific/p Services for your Early Help Service - Sarvices for yourg People - CAMHSS CAMHSS REACH - Barly Help Service - CAMHSS REACH - Indusive Education Services - endusive Education Service - ecoleNersy of interventions - CAMHSS Education Service - Barvice - Service Services - COMPASS REACH - COMPASS REACH - COMPASS BLIZZ - supported - ComPass BLIZZ - supported - Service Services - Fuucational Psi Service - Service Services - Please click on the links to find out further inft - Youth Justice S Please click on the links to find out further inft
SERVICES	 Universal Hearthy Child Team – Early Identification Services for young People Compass BUZZ
	 3 Specific/personalised Thrive individual assessment and intervention £ Graded Exposure Graded Exposure Danking and Taking Diaktical Behaviour Therapy Diaktical Behavioural Activation Behavioural Activation Circle of adults Compass Buzz (Pequest for Support)
TERVENTIONS	 2 Targeted Lego Intervention WMHA – ALGE approach Midivational Interviewing Midivational Intervention £ Mittervention £ Hittachment and trauma aware Stools Emotional First Aid Peantal Interventions 'Murture' Interventions Small Group SEAL Intervention Emotion cashing Compass BUZZ (Request for Support)
APPROACHES/IN1	 Universal Effective and well planned PSHCE curriculum Thrive Wouth Mental Health First Aid (MHFA) Wouth Mental Health First Aid (MHFA) Academic Reselence Restorative Approaches Conflict Resolution Postive Behaviour Support Compass BUZZ
DPMENT	 3 Specific/personalised Cognitive behaviour Intraspettic specificational Psychology Packages) Ε NYES – Anxety/Low mood Ε
CONTINUED PROFESSIONAL DEVELOPMENT	 2 Targeted Lepo Intervention E Midhvational Intervention E Motivational Intervention E Assistant (ELSA) E Frandonal First Ad E Early Developmental Traumal Misternet (Excacional Psychology Packages) E WES Packages E WES Packages E Ormpass BUZZ Level 2 actual veention I training and intervention I training
CONTINUED PROF	1 Universal Growth Mindeet E Mindfuthress E CoMPASS BLIZZ Level 1 Flarby Help and Promotion Training Mindfa Emotion Cuaching E Mindfa Emotion Cuaching E Academice E Academice E Restrative Approaches E Conflict Resolution E Votti Mental Health Flist Ad I Learning (SEAL) E Notth Mental Health Flist Ad I votti Mental Health Flist Ad I votti Mental Health Flist Ad Reschoil – designated I teacher fraining

Ladder of Intervention

Contact us

W: www.northyorks.gov.uk
E: customer.services@northyorks.gov.uk
T: 01609 780 780 (Monday to Friday 8.00am - 5.30pm closed weekends and bank holidays)
North Yorkshire County Council, County Hall, Northallerton, North Yorkshire, DL7 8AD

You can request this information in another language or format at **www.northyorks.gov.uk/accessibility**