

SEND Inclusion Fund (SENDIF) Audit

*From March 2019*

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Name of child |  | | | | | | | | | | | Child’s D.O.B. | |  | | | | | |
| Name of setting |  | | | | | | | | | | | Attendance % | |  | | | | | |
| Name of staff auditing |  | | | | | | | | | | | SEN Funding | | 1B | |  | 1C |  | |
| Role of staff |  | | | | | | | | | | | Review date | |  | | | | | |
| Is the child: | LAC | |  | CP | |  | CIN |  | | CASA |  | Receives: | DAF |  | | EYPP | |  | |
| **Review** | | | | | | | | | | | | | | | | | | | |
| **Specialist Assessment Identified Needs** | |  | SEN Support but No Specialist Assessment (NSA) of need | | | | | | | | | | | | | | | | |
| OR Specialist Assessment | | | | | | | | | | | | | | | | | |
|  | Specific learning difficulties (SpLD) | | | | | | | | | | | | | | | | |
|  | Moderate learning difficulty (MLD) | | | | | | | | | | | | | | | | |
|  | Severe learning difficulty (SLD) | | | | | | | | | | | | | | | | |
|  | Profound and multiple learning difficulty (PMLD) | | | | | | | | | | | | | | | | |
|  | Speech, language and communication needs (SLCN) | | | | | | | | | | | | | | | | |
|  | Social, emotional and mental health (SEMH) | | | | | | | | | | | | | | | | |
|  | Autistic spectrum disorder (ASD) | | | | | | | | | | | | | | | | |
|  | Visual impairment (VI) | | | | | | | | | | | | | | | | |
|  | Hearing impairment (HI) | | | | | | | | | | | | | | | | |
|  | Multisensory impairment (MSI) | | | | | | | | | | | | | | | | |
|  | Physical disability (PD) | | | | | | | | | | | | | | | | |
| **Child’s Developmental Assessment (prime areas)** | | | | | | | | | | | | | | | | | | |
| Communication and Language | Emerging  Developing  Secure | | | | Personal, Social and Emotional | | | | Emerging Developing  Secure | | | Physical | | | Emerging  Developing  Secure | | | |
| L and A |  | | | | MR | | | |  | | | H and SC | | |  | | | |
| U |  | | | | SC | | | |  | | | M and H | | |  | | | |
| S |  | | | | MF | | | |  | | |  | | | | | | |

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| SENCo/Key Person discussion: *(what is going well, are they any concerns? How much progress has been made?)* | | | | |
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| Review of current strategies/interventions*: (observation of work with the child that supports outcomes)* | | | | |
|  | | | | |
| Review of SENDIF spend: *(evidence of how the funding has been spent as agreed in section 4 of the SENDIF application form and its impact on the child’s learning outcomes)* | | | | |
|  | | | | |
| Update of key information: *(new professionals / agencies involved since Panel, new reports, etc)* | | | | |
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| From what has been discussed, observed and documented, is there evidence of effective use of SENDIF funding to support outcomes? | Yes |  | No |  |
| If ‘No’ provide further information | | | | |
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| **Agreed actions/recommendations to further improve practice / SEN support** | | | | |
| Date set | To improve practice/SEN support. | State if Action or Recommendation | Responsible person | Complete by |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| Date of next review: | |  | | | |
| Inclusion Officer signature: | |  | | | |
| *Please Note: The Inclusion Officer offers advice and recommendations only (unless otherwise stated) and therefore on-going support remains the setting’s responsibility and should be incorporated within daily provision, intervention programmes and/or SEN Support for the child.*  *It is the setting’s responsibility to provide a copy of this report to the parents/carers of this child* | | | | | |