Townlands SEND Initial Concerns Form

Child's Name: _____

Date: _____

Teacher's Name: _____

This form can be filled out by parents initially if concerns have been raised to the class teacher. The teacher and SENDCo will then look at this together and add to the document. If concerns are initially raised by the school, then this will be filled out by the class teacher and shared with the SENDCo to collaboratively look at next steps. Parents may also be invited to add their contributions.

Current Attainment Overview e.g (Working PKS, below, towards, at, above) -

Reading Age	Reading	Writing	Maths

Tick all that apply:

1. Communication and Interaction:

- ☐ Difficulty following instructions
- ☐ Struggles to make eye contact
- ☐ Speech or language delays
- ☐ Difficulty expressing themselves verbally
- ☐ Difficulty understanding social cues
- ☐ Limited social interaction with peers
- ☐ Other:_____

2. Cognition and Learning:

- ☐ Difficulty with reading, writing, or maths
- ☐ Struggles to remember instructions or routines
- ☐ Difficulty focusing or staying on task
- ☐ Needs frequent repetition or clarification of tasks
- ☐ Difficulty organising thoughts or materials
- ☐ Appears to have a short attention span
- ☐ Other:_____

3. Social, Emotional, and Mental Health (SEMH):

- ☐ High levels of anxiety or stress
- ☐ Difficulty regulating emotions
- ☐ Withdrawn or overly dependent on adults
- ☐ Difficulty making or keeping friends
- ☐ Frequently upset or distressed
- ☐ Displays aggressive behaviour (towards self or others)
- ☐ Other:_____

4. Sensory and Physical Needs:

- ☐ Sensitivity to noise, light, or touch
- ☐ Difficulty with fine or gross motor skills (e.g., handwriting, cutting)
- ☐ Tired easily or has low energy
- ☐ Difficulty with coordination or balance
- ☐ Needs regular movement or breaks to stay focused
- ☐ Other:_____

5. Behaviour and Learning:

- ☐ Frequent disruptive behaviour in class
- ☐ Difficulty following classroom rules
- ☐ Appears bored or disengaged from activities
- ☐ Struggles with transitions or changes in routine
- ☐ Difficulty completing work independently
- ☐ Has been reluctant or resistant to attending school
- ☐ Other:_____

6. Other Concerns:

- Concerns about child's health or wellbeing (e.g., sleep, eating)
- Family circumstances impacting the child's school experience
- Concerns about child's safety or self-esteem
- Previous concerns raised by external professionals (e.g., health, social care)
- Any other concerns not already raised

Support Already in Place/Tried:

(Please provide details of any support or interventions already in place to address the concerns raised)

At home:

At school:

Parent/Carer Feedback:

(Any additional concerns or observations not covered in the checklist)

Teacher's Feedback:

(Any additional concerns or observations not covered in the checklist)

Next Steps:

Tick all that apply

- ☐ Arrange a meeting with parents and relevant professionals
- ☐ Monitor and observe further over a specific period
- ☐ Add to the SEND register if Wave 1 and Wave 2 of support have been tried for a significant period of time (See 'Levels of Provision at Townlands' document)
- ☐ Consider referrals to external agencies or specialists
- ☐ Develop an action plan or further intervention strategies
- ☐ Other:_____