



**The Westminster
School**


Safe, Happy and learning Together

www.thewestminsterschool.co.uk

2024-25

Admissions Policy

Building foundations and providing opportunities to create confident, aspirational, and independent members of our community.

Approved by Governing Body on:	21/03/2024
Signed by Chair of Governors:	
Head Teacher:	O M Flowers
Lead Personnel:	J Flowers
Date of Review:	21/03/2025

1. School Profile

The Westminster School caters for pupils with **Moderate Learning Difficulties, plus Additional Needs** for pupils aged 7-19 years. Pupils admitted to The Westminster School will have a Primary Need of Moderate Learning Difficulty.

We offer our pupils a broad and balanced curriculum, whilst aiming to meet their individual special educational needs. The School is committed to equal opportunities, and all pupils are expected to leave School with accredited qualifications. Preparation for life takes on a more prominent role as pupils progress through the School. At all times they are expected to work and behave responsibly, showing respect and consideration for others.

2. Principles

- The Admissions Authority for the School is the Local Authority.
- The School would expect that all pupils referred to them for admission would have a moderate learning difficulty. In addition to this learning difficulty the child may also have other problems including, but not exclusive to:
 1. Physical difficulties
 2. Autistic Spectrum Disorder (see appendix 3)
 3. ADHD (see appendix 4)
 4. Medical needs
 5. Mild/Moderate Speech, language and communication difficulties

All pupils considered for admission to the School will have an Education, Health and Care Plan and have undertaken a Statutory Assessment.

3. Assessment Placements

In exceptional circumstances, it may be difficult to determine the child's level of need. Where necessary the LA may request the School admit a pupil on an assessment placement in order for the child's needs to be determined. Before an assessment place can be determined as suitable a member of the school senior leadership team will conduct a visit and observation at the current educational placement of the young person. As part of the assessment process, the School will work with inclusion support and external agencies to produce a report detailing the individual needs of the child. This report will outline the outcome of the assessments undertaken as well as the school's view on the suitability of its provision.

An assessment place in no way commits the school to admit the young person on a more permanent basis and it does not act as an alternative method of obtaining a placement at The Westminster School. It is merely an opportunity to assess the needs of the young person. Assessment Places will last no longer than 12 weeks and will be funded by the Local Authority.

4. Procedures

Children are referred to the School in consultation with the LA. The views and opinions of those agencies and professionals who know the child will be sought during this consultation.

Independent approaches or out of borough consultations will come to both the school and local authority where an assessment will be made by the school admission team about the suitability of placement. Once a decision has been made, the school will inform each party.

The Westminster School Published Admission Number (PAN) in 2018/2019 was 160. Following a Local Authority consultation in 2018 to increase pupil numbers to 250, an incremental increase will occur as follows:

2019/20	215
2020/21	230
2021/22	250

The Local Authority, Governing Body and School Leadership Team must take into consideration the PAN when allocating and accepting places to ensure resources are deployed appropriately.

Placement allocations are conducted on the basis of capacity within each of the school's distinct and defined pathway. Each of the pathways match the educational provision and capacity to the educational need of the individual. The pathways and capacity from 2021 and beyond are as follows:

- Personal Development – 41
- Bridging - 66
- WestminStars – 143

The school leadership is empowered to make the decisions regarding admissions that are right for the school and to consider the following factors:

- Health and Safety
- Class group sizes and capacity within pathways and key stages
- Staff to pupil ratios based on their Educational Need
- Resources and expertise
- Wellbeing of staff and pupils

The school will be able to reject a request for school placement based on the following grounds:

- The placement would be unsuitable for the age, ability, aptitude or SEN of the child or young person; or
- The attendance of the child or young person there would be incompatible with either:
 - o the efficient education of others (or)
 - o the efficient use of resources

5. Children Transferring from Other Schools

If there are concerns relating to an individual child the existing school will be expected to consult the Educational Psychologist attached to the school as well as discuss their concerns with the child's parents. This discussion should be part of the child's annual review meeting.

- The LA will consider any recommendations involving a change in provision made by the School if they deem it a suitable placement.
- Parents will be invited to visit the School with their child if the LA feel it may be a suitable provision. The caseworker within Sandwell SEN will arrange this visit in conjunction with the SENCO. The School holds a number of open events throughout the year. We are unable to provide individual tours unless there are exceptional circumstances.
- Where the School is concerned that they would be unable to meet a child's needs or where they feel that the child should be able to be educated within mainstream provision the School will notify the LA of these concerns.
- The LA in liaison with the School will make the final decision relating to the placement of the child.
- The LA will write to the parents of the child notifying them of the decision.
- The SENCO will then notify the parents of the transition arrangements made for their child if a place is offered.
- The SEN team will amend and finalise the Education, Health and Care Plan.
- The SENCO will liaise with the existing school to determine a phased transition for the child. The transition may involve:
 1. The SENCO visiting the child in their existing school.
 2. Providing the child with the opportunity to participate in a series of transition visits.
 3. LA and existing school to forward any documents and reports relating to the child prior to admission.
 4. The Family Support Worker will visit the parents at home in order to complete admission papers and complete the pupil profile.

For more information regarding admission to The Westminster School, contact the school directly on admissions@westminster.sandwell.sch.uk or call the school on 0121 561 6884.

Appendix 1 –Moderate Learning Difficulty or MLD

Cognition and Learning

Support for learning difficulties may be required when children and young people learn at a slower pace than their peers, even with appropriate differentiation. Learning difficulties cover a wide range of needs, including moderate learning difficulties (MLD), severe learning difficulties (SLD), where children are likely to need support in all areas of the curriculum and associated difficulties with mobility and communication, through to profound and multiple learning difficulties (PMLD), where children are likely to have severe and complex learning difficulties as well as a physical disability or sensory impairment. Specific learning difficulties (SpLD), affect one or more specific aspects of learning. This encompasses a range of conditions such as dyslexia, dyscalculia and dyspraxia

Moderate Learning Difficulties (MLD)

Pupils with MLD will have attainments well below expected levels in all or most areas of the curriculum, despite appropriate interventions. Their needs will not be met by normal differentiation and the flexibilities of the National Curriculum. Pupils with MLD have much greater difficulty than their peers in acquiring basic literacy and numeracy skills and in understanding concepts. They may also have associated speech and language delay, low self-esteem, low levels of concentration and under developed social skills.

In particular, pupils with MLD may need support with:

- understanding instructions and the requirements of tasks
- acquiring sequencing skills – for example, when following a recipe or science experiment
- understanding how they affect and relate to their immediate surroundings
- personal organisation over the short, medium and long term, and
- visual and auditory memory for information, processes and instructions

Appendix 2 – Additional Needs

Additional Needs Categorisation may include:

- Medical needs
- Epilepsy
- Diabetes
- Down's Syndrome
- Cerebral Palsy
- Attention Deficit Hyperactivity Disorder
- Attachment Disorder
- Dyslexia
- Literacy difficulties
- Dyscalculia
- Numeracy difficulties
- Dyspraxia
- Developmental Coordination Difficulties
- Motor difficulties
- Specific Language Impairment

Appendix 3 – ASD

Autism spectrum disorder is characterised by persistent deficits in the ability to initiate and to sustain reciprocal social interaction and social communication, and by a range of restricted, repetitive, and inflexible patterns of behaviour, interests or activities that are clearly atypical or excessive for the individual's age and sociocultural context. The onset of the disorder occurs during the developmental period, typically in early childhood, but symptoms may not become fully manifest until later, when social demands exceed limited capacities. Deficits are sufficiently severe to cause impairment in personal, family, social, educational, occupational or other important areas of functioning and are usually a pervasive feature of the individual's functioning observable in all settings, although they may vary according to social, educational, or other context. Individuals along the spectrum exhibit a full range of intellectual functioning and language abilities.

Diagnostic manuals, ICD-10 and DSM-5, set out the criteria for autism to be diagnosed. These create the foundation for diagnostic tools such as the DISCO (Diagnostic Interview for Social and Communication Disorders), the ADI-R (Autism Diagnostic Interview - Revised), the ADOS (Autism Diagnostic Observation Schedule) and 3Di (Developmental, Dimensional and Diagnostic Interview).

These, and other diagnostic tools, are used to collect information in order to help to decide whether someone is on the autism spectrum or not.

[ICD-11 for Mortality and Morbidity Statistics \(who.int\)](http://www.who.int)

The Westminster School is able to support the needs of learners who are categorised in the following way as per the ICD-11:

- 1. Autism spectrum disorder without disorder of intellectual development and without impairment of functional language (6A02.0)**
- 2. Autism spectrum disorder with disorder of intellectual development and without impairment of functional language (6A02.1)**

Appendix 4 – ADHD

Attention deficit hyperactivity disorder is characterised by a persistent pattern (at least 6 months) of inattention and/or hyperactivity-impulsivity that has a direct negative impact on academic, occupational, or social functioning. There is evidence of significant inattention and/or hyperactivity-impulsivity symptoms prior to age 12, typically by early to mid-childhood, though some individuals may first come to clinical attention later. The degree of inattention and hyperactivity-impulsivity is outside the limits of normal variation expected for age and level of intellectual functioning. Inattention refers to significant difficulty in sustaining attention to tasks that do not provide a high level of stimulation or frequent rewards, distractibility and problems with organisation. Hyperactivity refers to excessive motor activity and difficulties with remaining still, most evident in structured situations that require behavioural self-control. Impulsivity is a tendency to act in response to immediate stimuli, without deliberation or consideration of the risks and consequences. The relative balance and the specific manifestations of inattentive and hyperactive-impulsive characteristics varies across individuals and may change over the course of development. In order for a diagnosis to be made, manifestations of inattention and/or hyperactivity-impulsivity must be evident across multiple situations or settings (e.g., home, school, work, with friends or relatives), but are likely to vary according to the structure and demands of the setting. Symptoms are not better accounted for by another mental, behavioural, or neurodevelopmental disorder and are not due to the effect of a substance or medication.

The Westminster School is able to support the needs of learners who are categorised in the following way as per the ICD-11:

- **Attention deficit hyperactivity disorder, predominantly inattentive presentation (6A05.0)**