**Year 7 Onwards Checklist**

Physical Needs

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **The young person may need support for some of the following:** | Occasionally | Sometimes | Most of the time | What OAP strategies have been used? |
| Mobility | Moving safely around the school |  |  |  |  |
| Moving around on uneven ground |  |  |  |  |
| Managing stairs |  |  |  |  |
| Standing on 1 foot for 10 seconds |  |  |  |  |
| Jumping over objects and landing with 2 feet together |  |  |  |  |
| Catching small balls using hands only |  |  |  |  |
| Accessing physical activities e.g. using climbing frame, bike, equipment |  |  |  |  |
| Participating in physical activities in PE |  |  |  |  |
| Independence | Eating and drinking efficiently e.g. to drink or eat without spilling/opening packets |  |  |  |  |
| Eating and drinking independently  |  |  |  |  |
| Dressing e.g. lifting/fastening or positioning clothes on their body |  |  |  |  |
| Getting to or using the toilet/washing hands etc. |  |  |  |  |
| Articulating clearly and in a timely way |  |  |  |  |
| Accessing learning | Accessing personal belongings and school equipment for lessons |  |  |  |  |
| Holding or using school equipment in class e.g. holding a pencil or maths equipment/using scissors |  |  |  |  |
| Ensuring posture support to allow for participation in activities e.g. sand tray/painting/drawing |  |  |  |  |