

School years

Warrington Graduated Response



1. School Years Graduated Response

A. Communication and Interaction

Tools to support a whole school approach:

- 'An Introduction to Speech, <u>Language and Communication (ican.org.uk)</u> The Communication Trust.
- Age appropriate skills <u>Universally Speaking Age 5-11(ican.org.uk univspeak)</u> checklist, available from The Communication Trust.
- <u>The Communication Trust</u> pyramid for staff to understand how to adapt their communication cues so that they can 'step up' or 'step down' with a pupil as necessary.
- Set tasks and activities throughout the day/ week which focus on supporting language use and understanding.
- Identify designated communication champions or leads.
- Complete environmental checklists <u>Communication Friendly Environment Checklist (ican.org.uk)</u>.
- A <u>communication friendly classroom (ican.org.uk classroom supporting tool)</u> offering focused support and prompts/cues from adults to supplement pupil's understanding and participation in activities.
- Creation of 'communication friendly space/s' including checking the acoustics of the classroom, having designated quiet spaces or talking areas (such as 'Talking Tables').
- Set tasks and activities throughout the day/ week which focus on supporting language use and understanding.

Assessment and monitoring tools:

WellComm (GL- Assessment.co.uk) age-appropriate 'Big Book of Ideas'.

- <u>ICAN Talking Point Progress Tracker (ican.org.uk)</u>. These free Progress Checkers have been written by speech and language therapists. They are based on typical developmental milestones from 6 months to 11 years. Their resources can help you identify signs of a pupil who is struggling to communicate, so you can ensure they get the support they need.
- Alongside, increased observations, use of the curriculum and discussions with pupil's and parents/carers.
- Use of resources from The Royal College of Speech and Language Therapists (rcslt.org) website.
- Develop close home and school links to ensure strategies are used across both environments to support the generalisation of skills.

What You Might See

	Language	Difficulties relating to others
•	Limited vocabulary knowledge, learning and using new words	Inability to interpret social cues correctly
•	Difficulty understanding words that are said to them or verbal instructions	Poor social timingLack of social empathy
•	Attention and concentration skills	Lack awareness of personal space
•	Limited spoken language for their age	Difficulty maintaining appropriate eye contact
•	Poor organisation and sequencing	Lack of appropriate social conversational skills
•	Echolalia (repetition of noises or words spoken by another person)	 Literal use and interpretation of language Inability to see other people's point of view
•	Difficulty in understanding abstract concepts and applying prior learning	Resistance to change and difficulties with transitions
•	Difficulty with receptive and expressive language	Removal of self from certain environments
	, , , , , , , , , , , , , , , , , , , ,	Solitary play and unusually focused special interests
		Difficulties taking part in conversation
		Inappropriate use of facial expression
	Speech	Sensory
•	Monotone speech	

Language	Difficulties relating to others
Unclear speech	Experiences sensory processing difficulties, which may be
Stammer and/or difficulties getting words out	observed by the following:
Nasal quality to speech in the absence of a cold	Actions such as rocking, stroking, flapping and/or hands over ears
Unusual accent not linked to environment	A self-limiting diet
	Difficulty with body temperature regulation, e.g. coat on and
	hood up on a hot day

The Toolkit

Quality First Teaching approaches

- Place yourself where pupils can see your face clearly and you can see them
- Keep all distractions to a minimum
- Have visual prompts on display (to reinforce the rules of good listening, good sitting and turn-taking)
- Consider where pupils are seated within the learning environment to enable them to see visual prompts etc.
- Have clearly differentiated success criteria
- Allow extra time for processing information, formulating a response and completing tasks
- Allow for frequent practice through recall and repetition
- Use a variety of strategies for effective communication, including visual support and/or encouraging the pupil to say in a different way or show
- Encourage pupil to use gestures to support speech
- Encourage the pupil to tell you if they have not understood something

- Create a predictable and consistent environment, ensuring routines are followed
- Keep language clear, concise and unambiguous
- Use the pupil's name at the start of any instruction or information giving
- Present new information in small chunks, using simple language that is relevant to the pupil's
- Ensure that targets are SMART and achievable
- Introduce new material in a multi-sensory way show it, listen to it, look at it, hear it, say it, write it
- Use technology to support learning
- Encourage Peer support
- Use visual timetables and calendars
- Use concept maps to plan and identify overall themes and the relationships between ideas
- Recap relevant vocabulary. Ensure knowledge of vocabulary before introducing a new topic.
- Use clear adult models of speech and language, and repeat, emphasise and expand, as needed
- Use adult modelling of appropriate social phrases in context
- Make use of direct Playground Game teaching/ Personal, Social, Health and Economic (PSHE) education opportunities. Plan daily opportunities to teach specific skills such as sharing etc.
- Explain words and phrases that have more than one meaning or may be misconstrued e.g. pull up your socks
- Encourage discussion and prediction about stories
- React to what the pupil says, not how clearly they speak.

Support pupil's understanding of multi-step activities using task lists/ planners. Break down the amount of information provided at one time into smaller chunks (e.g. break up multi-step instructions and deliver 1 or 2 at a time).

- Ensure Daily routines are clear and predictable. <u>Visual Timetables (autism.org.uk)</u> and classroom rules are clearly displayed and personalised as needed. Ensure visuals related to past events are removed from the pupil's sight (e.g. take down pictures of activities as they are completed or use a clear marker to indicate where you are in the daily routine). Prepare pupil's in advance for any changes
- Teach and encourage pupil's self-support strategies to help them to follow instructions (e.g. chunking, visualisation, silent repetition, use of a written checklist).
- Encourage the pupil to recognise when they have not understood something and discuss self-help strategies to solve this (e.g. asking a peer, asking an adult etc.).
- Implement a teaching framework that provides a flexible process for developing understanding and expression e.g. <u>Talk for Writing</u> (talk4writing.com)
- Provide a classroom that uses a range of teaching and learning styles with emphasis on use of gestures, key visuals and concrete examples to support spoken language.
- Provide more time to respond to questions (e.g. 10-second rule) and to complete multi-step tasks.
- Check the pupil's/pupil's understanding by asking them what they need to do after they have been told.
- Encourage use of gesture (e.g. pointing) and, when appropriate, encourage use of accompanying language by modelling using objects, e.g. 'Which one, ball or box?'
- Use pre-teaching to introduce new, topic specific vocabulary and concepts, before these are included in group or whole class activities.
- During group work, allow the pupil to answer after other pupil's and adults have modelled the answer a few times.
- Use <u>Word Aware (thinktalking.co.uk)</u> to develop vocabulary skills (a structured, whole-school approach to promote the vocabulary development of all pupil).
- Teach specific vocabulary, such as 'word of the day/week' and support new vocabulary use and understanding within the classroom by

referring back to it often.

- Consider the three tiers of vocabulary:
- Every day, basic words.
- More complex words (e.g. using 'combine' for mix) or words with more than one meaning.
- Subject specific e.g. Galapagos.
- Focus on developing the pupil/pupil's understanding and use of words in Tier 2. These words have the highest utility in helping to close the language gap for those pupil's with limited vocabulary.
- Use of vocabulary checklists/word maps. Create personalised dictionaries, vocab cards or knowledge organisers.
- Use the STAR approach in content-rich subjects: Select the really useful vocabulary that is from the topic or class text. Teach the selected vocabulary in a structured manner. Activate the meaning by using the words in context and linking the word to the pupil's existing knowledge. Review the taught words to ensure they are retained.
- Use a range of whole-class or whole-school intervention programmes, for example:
- Providing consistent visual support/templates,
- Providing consistent visual support to structure or record ideas (scaffolds or templates). Use word webs and vocabulary maps as a whole class when learning new vocabulary.
- Introduce and display new vocabulary as it is introduced as part of topic work/ theme for the term. Teach pupil's self-support strategies to
 help them to follow instructions (e.g. chunking, visualisation, silent repetition, use of a written checklist).
- Provide a range of planned communication opportunities in a range of settings, with enough time given for processing (e.g. 10-second rule), thinking and responding to verbal information and new vocabulary
- Use of a range of whole-class or whole-school intervention programmes, for example providing consistent visual support to structure or record ideas (scaffolds or templates). Use word webs and vocabulary maps as a whole class when learning new vocabulary, and story

planners when re-telling or story or giving a personal narrative.

- Provide opportunities for communication throughout the school day in a range of lessons. Including opportunities for discussion around books and narratives.
- During group work, allow the pupil to answer after others have modelled the answer a few times.
- <u>Progression in Language Structures (learningvillage.net)</u> a document for identifying how content learning can be built on language structures. Language structures are presented in sentence starters for different text types, for example, the language of explanations and how it can be structured from foundation stage through to Year 6.
- <u>Talk for Writing</u> is a teaching framework that enables pupil's to imitate the language they need for a particular topic orally, before reading and analysing it and then writing their own version.
- Topsy Page a range of resources to support the development of effective pupil talk. Topsy also offers a Talk Audit where she will visit your school and analyse pupil and teacher talk, then provide recommendations.
- Additional reasonable adjustments and scaffolding of tasks, which may require individualised planning for much of the day.

Staff have an awareness of situational mutism and understand it is an anxiety-based need. Key staff have access to information about how to support pupil with situational mutism for example from the SMIRA website (selectivemutism.org.uk).

Check the <u>Helping Students in Secondary School-Staff Guide (selective mutism.org.uk)</u> has a range of information, resources and advice to support those with situational mutism, as well as their families and carers.

Establish a communication safe environment that includes:

- Providing unpressured opportunities for the pupil to speak. Don't react if the pupil does speak.
- Use of questions such as 'I wonder...'
- Encouraging joint activities with a quiet peer.
- Identifying a key adult for the pupil to build rapport and confidence with.

- Whole class singing/rhyming in unison.
- Encouraging participation through 'show' rather than 'tell'.
- Modelling a correct form of any word the pupil has mispronounced, rather than directly correcting them, e.g. if the pupil says 'tar' say 'yes, that is a star'.
- Providing traffic lights or 'ask for help' cards to allow them to access support non-verbally.
- Maggie Johnson (selectivemutism.org.uk) has developed a number of resources to support those with situational mutism.
- Check the Dos and Don'ts Guide to providing an anxiety-free environment developed by www. selectivemutism.org.uk
- The website has a range of information, resources and advice to support those with situational mutism, as well as their families and carers.
- Provide the pupil with a Visual Timetable/Written Schedules. Tell them in advance about any significant changes to the daily school routine and illustrate this with the visual timetable/written schedule. The visual timetable can also demonstrate timings of lessons.
- Use of first/then visuals to support understanding of tasks/routine.
- Use of personalised visuals (e.g. objects of reference, now/next, working for boards, activity boards, and sand timers). If a pupil has a personalised Visual Timetable they will need to be told as early as possible about any changes to their routine.
- Ensure expectations around work and behaviour are clearly structured and presented visually (e.g. Good looking, sitting, listening prompts).
- Use the environment to support the understanding of expectations.
- The <u>TEACCH (autism.org.uk)</u> approach is a way to provide high levels of visual structure and clarity to support pupil's understanding of the environment, expectations and activities. It is not a single method and can be used alongside other approaches.
- Sensory or movement breaks are incorporated into lessons.
- Try to avoid the use of non-literal language (e.g. idioms and sarcasm) and explain any abstract concepts in as concrete a way as possible (e.g. with pictures or objects).

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Getting More Help: SEN Support

At SEN Support, school staff should deliver and support daily, individualised targeted intervention, based on support and guidance from external services. Certain interventions may require specialist training from a Speech and Language Therapists.

Assessments and observations should increase to understand how the pupil communicates, with who and where do they communicate best, what their strengths and interests are, and how these can be used to encourage engagement in activities.

Tasks should be planned to accommodate SCLN and tasks adapted to take account of the pupil's individual communication needs.

Frequent practice to develop communication skills through recall and repetition should be provided.

Access Arrangements allow pupil's with special educational needs to access assessments without changing the demands of the assessment. This may include allowing extra time, providing a scribe or having a reader. These may need to be applied for in advance by the school; check the exam board guidance for more information.

Seek multi-agency support from outside services and work with the pupil's family to devise an **individualised support plan**.

Speech and language therapists will assess receptive language and provide support in this area if required.

Additional Staff training to meet individual pupil's need:

- Access additional staff training on supporting pupil's with specific communication and interaction needs (e.g. Speech and Language Therapist, Educational Psychologist).
- Access additional staff training to support key adults to understand and respond to behaviours associated with communication and interaction difficulties (e.g. frustration at not being able to communicate, distressed behaviours as a result of not understanding spoken instructions of expectations).

- Additional support is in place to develop emotional vocabulary using visual and real-life situations (e.g. mirror play, discussion of emotions during stories/ puppet play or use of feelings visuals.).
- <u>ELKLAN</u> accredited courses for education and other staff working with those with speech, language and communication needs. Practical ideas and skills to deliver a range of small-group, targeted interventions.
- Access specialist training from the Speech and Language Therapy Service (e.g. Vocabulary training).
- Provide access to assessment and advice from external services such as <u>Speech and Language Therapy</u> (<u>bridgewater.nhs.uk Warrington</u>)
 and to tailor programmes and activities to support their speech and language development, including attention and listening skills and social
 skills.
- <u>Black Sheep Press</u> provides resources for teachers and speech and language therapists working with pupils with Developmental Language Disorder (DLD) and speech, language & communication needs (SLCN). Black Sheep Press (11-16).
- Raising awareness of Developmental Language Disorder (RADLD) gives free information and fact sheets about Developmental Language Disorder (DLD), as well as a range of helpful resources.
- <u>Afasic (afasic.org.uk)</u> produces free downloads with vital information for parents and professionals about talking, understanding language and getting the right help. They offer free downloads, free parent support days and workshops, and useful links to mobile apps and other support.
- <u>British Stammering Association (stamma.org.uk)</u> provides a range of information, resources and advice to support those with a stammer, as well as their families and carers. The website includes recommended therapies and courses, as well as 'Everyday Tips' and apps and devices.

<u>Michael Palin Centre for Stammering (whittington.nhs.uk)</u> offers a range of support services for pupil, young people and parents and training courses for professionals.

Adjustments to classroom teaching and strategies:

• Put in place regular communication groups, working on speech and language skills on a frequent basis with a small group of pupil's. It can be helpful to include good role models alongside pupils who need additional support. Sessions may be themed, using ideas from Talking Boxes (cambscommunityservices.nhs.uk).

- Use a buddy system, whereby pupil's work together to ensure correct understanding of verbal information. A peer or adult buddy can then check correct understanding before starting.
- Staff are mindful of how lesson information is communicated. For example, a key word list to have lots of visuals, use of a personalised visual dictionary.
- Display question prompts on the wall for school staff to initiate communication. For example, using the BLANK (Language of Learning model a pupil is operating at a specific level when they can answer at least 80% of questions at that particular level):
 - Level 1 Naming (language demands rely on teaching materials, e.g. objects/pictures)
 - Level 2 Describing (language relates to teaching materials, e.g. objects/pictures)
 - Level 3 Retelling, (language has less emphasis on the teaching materials)
 - Level 4 Justifying and Problem Solving (language is more advanced than the teaching materials).
- Vocabulary Groups in smaller groups and support vocabulary use and understanding within the classroom. Vocabulary programs such as Bed Rock Learning (bedrocklearning.org) are available, which track student's progress and have specific topic vocabulary available.
- Implement opportunities for play to support the understanding within a structured activity such as LEGO Therapy (autism.org.uk).
- Draw upon small group programmes to develop listening and receptive language skills, for example:
- The <u>BLAST programme</u> (<u>Boosting Language Auditory Skills and Talking</u>) can be used with pupil's aged 3-5. There is also a 4-8 package available.
- Provide an environment in which pupil /pupils are surrounded by spoken and written words and inspired to learn them using multi-modal approaches (e.g. key words highlighted on the board and in worksheets to remind the pupil to check their vocab sheet).
- Ensure access to a range of communication opportunities, so the pupil can contribute in different ways or across contexts and in relation to different topics (e.g. including those they are more confident/ interested in).
- Provide access to small group interventions, for example:
- Tales Toolkit An online package of resources to develop pupil's skills in story development and sequencing in small groups.

- Colourful Stories (ELKLAN) a visual support strategy which helps pupil's to learn about the structure of stories and to become more confident about telling and writing stories. Colourful Stories encourages oral-narrative skills and introduces written words only when the pupil is confident about how to structure and tell a story orally.
- Pre-teach key vocabulary and support generalisation to the classroom (e.g. have worksheets with key vocabulary on their desks, which they can refer to, use of word webs to promote experiential language learning).
- <u>Talk Boost KS1 (ican.org.uk)</u> a targeted intervention for 4- to 7-year-olds with a language delay, which aims to narrow the language gap between them and their peers.
- Talk Boost KS2 a targeted intervention for 7- to 10-year-olds with a language delay, which aims to narrow the gap between them and their peers.
- <u>Colourful semantics (integratedtreatmentservices.co.uk)</u> an approach aimed at helping pupil's to develop their grammar by linking the structure of a sentence (syntax) and its meaning (semantics).
- <u>Looking and Thinking (learningmaterials.co.uk)</u> workbooks aim to support pupils with delayed language skills, or who have English as an additional language, to develop verbal reasoning skills.
- <u>Talking Maths (educationworks.org.uk)</u> a 10-week intervention programme that targets speaking and listening skills in the context of mathematical language.
- In small groups, encourage pupil's to re-tell a narrative about a school or class activity, where the teacher and other pupils can give prompts and support the narrative. Also encourage pupils to give personal narratives or 'news' about their own lives. Ensure they include information about who, where, when and what happened.
- Access training provided from the Speech and Language Therapy service for parents and education staff supporting narrative and vocabulary development.
- Use of intervention programmes within a small group, such as Listening and Speaking and Oral to Written narrative packs from Blacksheep Press. To support pupil's structure of oral stories and the transition to a written narrative.
- Colourful Stories (ELKLAN) a visual support strategy which helps pupil's to learn about the structure of stories and to become more

confident about telling and writing stories. Colourful Stories encourages oral-narrative skills and introduces written words only when the pupil is confident about how to structure and tell a story orally.

- <u>Language for Thinking (thinkingtalking.co.uk)</u> an approach aimed at developing the verbal reasoning and thinking skills of pupil's aged 4-11 through drawings, written scenarios, and questions.
- Junior <u>Language Link (speechandlanguage.info)</u> is an intervention for pupil's aged 7-11 years, which focuses on higher-level language skills such as inference, complex grammar and figurative language.
- Secondary Language Link This includes a teacher training package, assessment, and targeted interventions for KS3 pupils.
- Narrative Intervention Program to improve the story telling skills of pupil's in secondary school.
- Black Sheep Press: Secondary Talk Narrative KS3 –KS4; Creating Superhero Stories Narrative KS3
- Talkabout for Teens (winslowresources.com) a group work programme for developing self-esteem, social and friendship skills.
- Additional adult support to contribute to group activities using a range of communication methods (e.g. gesture, vocalisations, instruments, visuals) alongside/instead of spoken language.
- Referral into speech and language service to support pupil and implement targeted approaches including adaptations to learning (reading aloud etc.).
- School staff to implement individualised interventions, following training by a Speech and Language Therapist. For example:
- Blacksheep Inference and Reasoning Resource is designed to develop inference and reasoning skills in pupils at Key Stages 1 and 2. It includes 24 colour pictures and a set of related questions for discussion.
- Use of an additional or augmented communication system. These may include:
- <u>Signalong</u> is a key word sign-supported communication system. It uses speech, sign, body language, facial expression and voice tone to link between sign and spoken word.
- Makaton is a language programme that uses symbols, signs and speech to enable people to communicate.

- Use of an additional or augmented communication system (ACC). These may include <u>PECS (Picture Exchange Communication System)</u> is an alternative augmentative communication system in which simple picture cards are used to communicate simple needs initially, but then work towards more complex sentence structures, signing, or high-tech communication systems and software such as <u>Proloquo2Go (assistiveware.com)</u>.
- Other AAC which may be used include direct access boards and use of PODD books (Pragmatic, Organisation Dynamic Display) to support sentence structure using a visuals.
- Other ACC which may be used include direct access boards and PODD (novitatech.com.au).
- · Subject specific e.g. Galapagos.
- Use of the 'Sliding in Technique' detailed in The Selective (Situational) Mutism Resource and included on the SMiRA website: selectivemutism.org.uk/info-the-sliding-in-technique-and-progress-charts/.
- Carefully support the pupil's transition between year groups.
- Provide a more personalised curriculum allowing flexibility in the organisation of the learning environment and the school day. For example, you could offer access to a low stimulus, distraction-free base either within or outside of the classroom for certain tasks.
- Access to staff training on the use of visuals to support communication.
- Use of a Sensory Checklist and environmental adaptations to minimise impact of sensory distractions and sensory processing differences (e.g. opportunities to work in quieter spaces with reduced distractions when completing focused activities, access to tailored sensory activities or resources).
- Provide small group activities to help pupils develop their social communication, attention and listening skills. Interventions to consider include:
- <u>Attention Autism (best-practice.middletownautism.com)</u> is an intervention model which aims to develop natural and spontaneous communication through the use of visually based and highly motivating activities.
- <u>Social Communication Fix (tts-international.com)</u> a programme using scripts and images to aid communication and develop pupil's understanding of body language and facial expressions. It comes with pre-and post-assessments.

- Provide small social communication groups, focussing on the explicit teaching of social skills within a small group environment, with the opportunity to then generalise the skills into the wider environment. This may be focusing on the reading of social cues, body language, gestures, facial expressions and intonation.
- Support to better understand inferencing, idioms and metaphors (e.g. Black Sheep Press Idioms).
- <u>Socially speaking (Idalearning.com)</u> a year-long social skills programme that introduces and practises skills to develop and maintain relationships.
- SULP (Social Use of Language Program) a framework for personal, emotional and social development from a communication and thinking skills perspective, providing multisensory activity sequences with interactive stories
- <u>Social Detectives (socialthinking.com)</u> a comic book that teaches students to develop their own social detective skills through repeating and reviewing their communication.
- <u>Time to Talk (amazon.co.uk)</u> a 40-session programme for pupil's aged 4-8 that teaches and develops oral language and social interaction skills with Ginger the Bear.
- <u>Friendship Terrace (blacksheeppress.co.uk)</u> a series of sessions for reflecting on and teaching friendship skills. It is for pupil's who find it difficult to make or maintain friendships, and for pupils with an autistic spectrum disorder.
- <u>Circle of Friends (inclusive-solutions.com)</u> a group intervention that enhances inclusion through peer support. The Circle of Friends approach works by mobilising the pupil's peers to provide support and engage in problem solving with the person in difficulty.
- Zones of Regulation is an intervention that supports the development of self-regulation and emotional control.
- Provide a personalised curriculum allowing increased flexibility in the organisation of the learning environment and the school day, (e.g. offering access to additional adult support to enable the pupil to participate in the less structured parts of the school day such as break time, and provide access to a quiet, distraction-free place in school if a pupil feels anxious).
- Regular staff briefings centred on the pupil's strengths and support needs (e.g. A One Page Profile may help communicate this).
- Training for staff/parents to attend to develop awareness of social stories and comic strip conversations.

- Use of transition books/support to allow a smooth transition into a new year group. Additional opportunities to visit new classrooms/schools and meet new teachers in advance to allow sharing of information.
- The Identiplay intervention helps pupils on the autistic spectrum, and those with specific communication disorders, learn to play. Through the use of play scripts, the approach promotes the development of social skills, understanding, imagination and exploration.

Complex/ specialist support

Continue with any relevant strategies from Quality First Teaching and/or SEN levels, plus:

- Continue to identify gaps in learning.
- See EHCP and/or SALT care plan for specific outcomes.
- Create a personalised curriculum (class teacher with SENCO support).
- Liaise with support to ensure learning outcomes are facilitated and resources are readily available.
- Refer for a sensory assessment from a qualified sensory practitioner and implement a sensory diet if advised.
- From completion of Autism Education Trust's environmental audit make environmental changes as appropriate to meet pupil's need.
- Signpost parents/carers to relevant support services for example <u>ADDvanced Solutions</u>.

Implement and use:

- Alternative augmentative communication assessment and appropriate aids.
- High tech low tech systems.
- Use a variety of specialist strategies for effective communication e.g. Picture Exchange Communication System (PECS), Widget, visual supports, Makaton, objects of reference, symbols, signs, prologuo2go, switches, voice output communication aids, eye gaze systems.

- Facilitate access to speech and language therapy.
- Refer to a specialist to carry out a sensory assessments and implement appropriate modifications.
- Use social interaction programmes/small group work as an integral part of the curriculum (e.g. Talking Partners, Circle of Friends, buddy systems).
- Provide specialist communication sessions.
- The SCERTS curriculum if appropriate.
- A safe and supervised area for calming and time away from triggers.
- Specialist therapeutic interventions, e.g. play therapy, art therapy, interest based activities that facilitate engagement in learning.

B. Cognition and Learning

Tools to support a whole school approach:

Consider staff awareness of the <u>learning hierarchy</u> (<u>interventioncentral.org</u>) to support their understanding of the stages involved in developing a skill and identifying which stage pupils have reached/ where additional support to progress may be needed:

- Acquisition (being introduced to a task, such as recognising a phonic sound, and recognising initial components. Focus is on accuracy and getting it right, rather than speed or use of concepts to problem solve).
- Fluency (practice phase and becoming familiar with the task; starting to focus on speed as well as accuracy (e.g. identifying sounds more quickly and automatically). Individuals will make different rates of progress).
- Mastery (task is fully learnt and feels like 'second nature'; pupil has developed a level of proficiency which is not affected by new learning or periods of time without practicing the skill, such as being able to recognise a phonic sound over time).

- Generalisation (mastered task is now used in other situations; with instruction, the pupil applies the skill with novel materials or under different conditions, such as applying phonics sounds to reading a book with some help. Learning is less prescribed and reinforcement can take place through everyday experiences, enabling simple problem solving).
- Adaptation (the mastered skill is fully generalised and the information can be used in novel ways and for more complex problem solving, such as: applying phonic knowledge to new words. Specific instruction in complex or new situations isn't needed and the pupil can ask themselves what skills or knowledge they might need to solve the problem).
- Repetition of concepts and skills, e.g. pre-teaching vocabulary; address misconceptions the same day; retrieval practice (last session/ last week/ last topic/ last term); bridging new content and skills with prior learning (e.g. 'where have we seen this before?').
- Provide staff and peer <u>feedback (educationendwomentfoundation.org.uk)</u> that is specific, clear and accurate; which focuses on improvement from previous work; and which supports effort and perseverance.

Assessment and monitoring tools:

- <u>B Squared assessment</u> broken down into lesson steps to reduce gaps.
- Learning Ladders assessment framework.
- Comparison and analysis of special pupil attainment (CASPA caspaonline.co.uk).
- Meaningful moderation of assessment.
- GL assessments (gl-education.com).
- Consider the <u>science of learning (deansforimpat.org)</u> and how to develop motivation, self-efficacy and growth-mindset

What You Might See

Observed emerging and/or fluctuating difficulties with the following:	Observed persistent and moderate difficulties with the following:
 Low general attainment and progress and/or gap beginning to widen. Difficulty in understanding abstract concepts and applying prior learning. Speech and language difficulties. Attention and concentration span difficulties, e.g. easily distracted or short attention span. Literacy difficulties, e.g. reluctance to read or poor sight vocabulary. Numeracy difficulties. Untidy handwriting/clumsy. Poor organization. Discrepancy between oral and written work. Difficulty following instructions. Tiredness due to excessive concentration levels needed. Social and behavioural difficulties arising from low self-esteem and frustration. 	 The gap between the pupil and that of his/her peers may be significantly wider than would be expected for a pupil of his/her age. May also be socially or emotionally immature and have limited interpersonal skills. Attention and concentration span difficulties, leading to poor motivation and resistance to learning. Difficulties with sequencing, visual and/or auditory perception, coordination, or short term working memory. Difficulties in the acquisition of reading, writing, oral or number skills, which do not fit his/her general pattern of learning and performance. Difficulties with other areas, e.g. motor skills, organisation skills, behaviour, social or emotional skills and multi-agency advice may be required. Very specific difficulties (e.g. diagnosis of dyspraxia or dyslexia etc.) affecting literacy skills, spatial and perceptual skills and fine and gross motor skill.

The Toolkit

Quality First Teaching Approaches

- 'Help box' with appropriate resources in each classroom containing resources such as word mats'
- Using off-white paper (not black text on white paper).
- Colour coding/ dyslexia friendly environment.
- Working walls and purposeful displays (e.g. key vocabulary).
- Prompts/ reminders/ 'to do' lists.
- Consider seating selection.
- Visual cues.
- Timetables.
- Timed rewards and consequences.
- Brain breaks.
- The use of pre and prior learning strategies including pre-teaching of key concepts/vocabulary and increased repetition and over-learning with opportunities to revisit concepts more frequently.
- Task adaptation e.g. task sheets; providing PowerPoint printouts; timers; breaking down skills; understanding of 'small steps' approaches; targeted questions at different levels.
- Scaffolding of work e.g. task plans; word banks; sentence starters; writing frames.
- Promote independence e.g. scaffolding; timers; visuals; sharing expectations; work pitched at pupils' level; effective deployment of support staff; offering mediation at a lower level first before increasing, where necessary.
- <u>Chunking (teachertoolkit.co.uk)</u> verbal instructions using key clear specific language.
- Arrange relevant training for staff from external support services, where needed.

Employ strategies to start to encourage pupils' metacognition and self-regulation (educationendowmentfoundation.org.uk) (i.e. the ability to monitor, direct and review their own learning, through explicitly thinking about their own learning, setting goals and evaluating progress) and

support executive function skills (these are a set of skills and mental processes that develop throughout childhood and adolescence, which support pupils to self-regulate, initiate, attend to and persevere with activities successfully).

Explicit teaching of metacognitive strategies, following the seven-step model (educationendowmentfoundation.org.uk):

- 1. Activating prior knowledge.
- 2. Explicit strategy instruction.
- 3. Modelling of learned strategy.
- 4. Memorisation of strategy.
- 5. Guided practice.
- 6. Independent practice.
- 7. Structured reflection.
- Organise and structure classroom talk and dialogue, including the use of talk partners and debating; for example, Cat 5 for thinking skills.
- Use of technology and ICT-based resources to support planning, organisation and retention (e.g. voice activated software, talking tins/post cards, Clicker 8 [cricksoft.com]).
- Teacher modelling of own thinking and understanding at a whole-class level (e.g. modelling self-talk when preparing for a task, making mistakes and monitoring own levels of reading comprehension).
- Provide <u>sensitive levels of challenge and mediation (www.tes.com)</u> based on the pupil's needs, encouraging independence where possible.
- Whole-class input using visual and auditory cues to support attention and listening.
- Reduce load on working memory –break instructions down into chunks, offer repetition and visual cues. Use whole-class initiatives which also improve memory and recall skills (e.g. <u>Talk for Writing</u>).
- Provide examples of the expected outcome of a task ('What a good one looks like' [WAGOLL]).

- Use of multi-sensory learning and access to concrete apparatus across the curriculum (e.g. cubes, counters, number lines, spelling or word mats for scaffolding).
- Use of spaced learning (content/topics which are taught and revisited at spaced intervals) at a whole-class level.
- Direct instruction, cueing and positive reinforcement of key skills (e.g. good listening, putting hand up, waiting etc.)
- Use of open questioning to support pupils, thinking around a task (e.g. what do we have to do here? How might we start?).
- Use of structured planning templates (e.g. visual task plans or check lists), teacher modelling, worked examples and breaking down activities into steps.
- Access to key information (e.g. subject specific vocabulary, key spellings, number facts, etc.) visually to promote independence and reduce working memory loads.
- Use of verbal and visual cues/prompts to direct or redirect attention access to opportunities for movement breaks and different modalities of teaching and learning.
- Use of frameworks and mnemonics, displayed virtually to support pupils to plan and review their work (e.g. Plan, Organise, Write, Edit and Review POWER; Capitalise, Organise, Punctuate, Spell-check COPS).
- Whole-class intervention around memory and recall strategies (e.g. Lucid Memory Booster).
- Use of evidence-based approaches to teaching Literacy (e.g. Education Endowment Foundation <u>Improving Literacy in Key Stage 1</u> (educationendowmentfoundation.org.uk) guidance report).
- Collaborative learning and peer tutoring approaches (e.g. Paired Reading, Cued Spelling).
- Reading buddy/peer support/joint learning.
- Class literacy programmes which can be differentiated for individuals e.g.
 - Achieve 3000 (KidzBiz3000 for KS2) a family of online literacy interventions to improve reading, writing and critical thinking skills.

- Whole class/ group systematic phonics programmes (e.g. <u>DfE produced list of agreed tools [gov.uk]</u>), embedded within a rich literacy environment.
- Interventions for literacy dyslexia SpLD Trust for evidenced based literacy interventions.
- ICT based reading programmes including Reading Eggs, Reading Plus, Literacy Shed.
- Development of oral language skills as foundations for reading and writing (e.g. reading books aloud and discussing them; use of books without text to encourage comprehension skills; use of resources and approaches such as Clicker 8 [cricksoft.com], recording devices, word of the week, teaching specific vocabulary; programmes such as Talk for Writing).
- Guided reading groups or Reciprocal Teaching (readingrockets.org) groups to enhance reading comprehension skills.
- Nuffield Early Language Intervention (teachneli.org).
- Education endowment foundation literacy interventions.
- Staff participation in Literacy initiatives and forums (e.g access SENDCo forum's facilitated by NASEN).
- Provide a broad approach to literacy intervention including teaching high frequency words to fluency, paired reading, phonics, audio books, etc.
- Access to books with low reading age and high interest, e.g. Rising Stars.
- Cross-curricular embedding of basic Literacy skills.
- Assessment of skills to inform support and intervention plans, e.g. whole school dyslexia screen and SALT assessments; bench marking with in-depth assessments (e.g. York Assessment of Reading for Comprehension YARC).
- Introduce accessibility tools on Microsoft Word e.g. Immersive Reader.
- Training on meeting literacy needs by NASEN.

Use of evidence-based approaches to teaching Mathematics (e.g. Education Endowment Foundation <u>Improving Mathematics in the Early Years and Key Stage 1 [educationendowmentfoundation.org.uk]</u> guidance report).

Evidence-based whole class approaches to teaching foundational skills to mastery, e.g. <u>Mathematical Reasoning programme</u> (educationendowmentfoundation.org.uk).

Cross-curricular embedding of basic numeracy skills.

Concrete numeracy apparatus:

- Numicon.
- Base 10.
- Singapore counters.
- Work through the concrete to pictorial to abstract (mathsnoproblem.com) (CPA) approach.
- Access to manipulative resources e.g. Cuisenaire rods.
- Success through Arithmetic.

Ensure that mathematical skills and learning are embedded throughout the curriculum (e.g. SMSC lessons).

Collaborative learning (e.g. Paired Maths - tutor and tutee working together jointly on Maths questions).

Getting More Help: SEN Support

At SEN Support you should be ensuring further assessment of need through observation, collating assessment data, screening tools, and gathering the views of staff, parents/ carers and pupils, following the graduated approach and assess / plan / review /do.

Targeted observation of pupils' executive function skills in the classroom, including: self-regulation/ inhibition control, working memory, sustained attention, task initiation, planning/prioritising, organisation, time management, persistence and flexibility should take place

Observational data and targeted assessment to clarify strengths and needs (e.g. <u>Working Memory Rating Scale (WMRS) (pearsonclinical.co.uk)</u> / Automated Working Memory Assessment) should be gathered.

Individual and/ or small group interventions with appropriate pre- and post- measures to evaluate progress (examples of specific Literacy and Numeracy interventions are suggested below) should continue. Suggested evidence-based interventions, programmes and approaches are:

- The Education Endowment Foundation's <u>Teaching and Learning Toolkit</u> and <u>Language and Literacy</u> (educationendowmentfoundation.org.uk) and Mathematics projects.
- <u>Evidence 4 Impact</u> an independent service that supports educators in using evidence-based practice in order to improve outcomes for pupils.
- The <u>Early Intervention Foundation guidebook (guidebookeif.org.uk)</u> provides information about early intervention programmes that have been evaluated and shown to improve outcomes for pupils.
- Over rehearsal of information to enable pupils to progress through the hierarchy of learning e.g. Precision Teaching (PT) intervention, PT intervention is suitable for those who struggle with working memory difficulties and retaining information and is used as an intensive 1:1 intervention, Toe By Toe.

Referrals to external agencies for further support around learning and factors which may impact pupil's progress:

- Educational Psychology Service (EPS) (mylifewarrington.co.uk)
- Speech and Language Therapy (SALT) Service (mylifewarrington.co.uk)
- <u>Supporting Inclusion Team (warrington.gov.uk)</u>
- Warrington specialist teachers should be considered.

Different pupils will require different types, levels and intensity of adult mediation (approaches and strategies used to support during tasks and activities) to maximise their learning of specific skills and to promote increased levels of independence.

The focus of mediation may include:

- Regulation of behaviour (finding out what helps the pupil to manage behaviours associated with learning such as attention, impulsivity and distraction);
- Rule teaching (helping and encouraging the pupil to find and apply rules);
- Insight (helping the pupil to use 'what works' and apply these tactics to new and novel situations -generalising); or
- Sequencing (helping the pupil to respond in an organised and sequenced way).

Modes of mediation may include:

- Focusing (directing and maintaining attention to a task using prompts such as gesture or verbal and visual cues).
- Motor (drawing, moving objects into pupil's line of sight, hand over hand guidance).
- Verbal (using instructions to guide and direct through questions, step-by-step instructions and feedback on what has gone well).
- Promote dialogic teaching, which emphasises classroom dialogue through which pupils learn to reason, discuss, argue and, explain.
- Further promote and embed metacognitive talk when working in smaller groups (i.e. explore thinking around a task, how to plan, prepare and use strategies to approach a task with pupils and ways to monitor levels of understanding).
- Provide explicit instruction and targeted goal-setting with individual pupils/groups around key skill areas (e.g. self-organisation or basic time management).
- Use of self-evaluation and feedback tools such as "exam wrappers" (a pre and post exam self-evaluation tool).
- Use of personalised work areas/stations with clear systems of organisation (e.g. using task boards or in-out trays.
- Provide regular opportunities for short breaks and use of individual items to support attention and concentration within agreed boundaries across lessons (e.g. brief movement breaks and/or access to fiddle items).
- Target-setting with groups and/or individual pupils around self-regulation and organisation strategies (personalising approaches outlined in Expected Column). Cue individual pupils to remind them of the skill or behaviour they are practising (e.g. listening, waiting, or asking questions when they do not understand).

- Small group-based support to develop and practise attention and listening skills (e.g. through games and activities targeted around focused, sustained, and joint attention skills).
- Support pupils individually and/or in small groups to initiate and persevere with activities through personalised organisation strategies (e.g. task board, lists or charts, markers for start and finish points, or timers) and games (e.g. 'ready, steady, go!').
- Play games in small groups to practise memory and recall skills (e.g. identifying missing items, recalling lists, copying figure drawings or repeating number sequences both forwards and backwards).
- Targeted intervention, clearly linked to IEP objectives, for key competencies using age-appropriate games/apps (<u>Lucid Memory Booster (glassessment.co.uk</u>) or <u>Cogmed</u>). Complement intervention with further strategy-based practice within the classroom (e.g. rehearsing or chunking information). Use of pre/post measures to monitor impact and progress.
- Daily opportunities to model, teach and practise strategies in small groups to manage verbal information and task sequences (e.g. naming the first 2-3 steps and making a list with different colours, ticking off pictures of equipment needed to initiate a task etc.).
- For pupils with more complex needs or pupils whose learning appears to have plateaued, assess key skills and levels of engagement through structured observation (e.g. using The DfE Engagement Model (gov.uk) in order to create personalised learning pathways.
- Use of ICT software and technology to support information recall and independence as a learner, embedded within everyday provision (e.g. use of voice recorders/apps).
- Specialist technology (e.g. eye gaze, reading pens/glasses, Dragon).
- Use of a reading pen.
- Use of appropriate assessments to identify strengths and areas of need, in order to target intervention at an early stage. This may include:
- Standardised assessments (York Assessment of Reading for Comprehension support.gl-assessment.co.uk).
- Formative, criterion-referenced and curriculum-based assessments.
- Benchmarking using in-depth assessments (e.g. York Assessment of Reading for Comprehension <u>YARC</u>).

- Whole school dyslexia screen and SALT assessments.
- Small group targeted 'basic skills' work to supplement and repeat some whole class learning (e.g. phonics, fine motor groups).
- Resources to support literacy skills for individuals/ small groups (e.g. reading/ spelling squares; recording software iPads, sound buttons).
- Peer support (e.g. Specific Year teaching younger pupils). Pair up lower attaining pupils to read with younger peers in the school.

Access to technology and interventions such as:

- Nessy.
- Clicker 8 (cricksoft.com).
- Spelling Shed.
- IDL Literacy (idlsgroup.com).
- Accelerated Reader (renlearn.co.uk).
- Reading Recovery.
- Reading Wise.
- Project X CODE (global.oup.com).
- Immersive Reader (learn.microsoft.com).
- Lexia (lexialearning.com)
- Specialist SpLD teaching

Online learning software that the pupil can access without adult support, e.g. IDL, Dyslexia Gold.

Interventions to develop literacy skills, based on principles of repetition and over-learning, with support to generalise skills (e.g. <u>Precision Teaching [highlandandliteracy)]</u>, <u>Toe by Toe</u>).

Specific assessments- e.g. <u>Dyslexikit</u>, <u>Sounds Write</u>, <u>Bearing Away</u> / <u>Bear Necessities</u> (<u>soundfoundations.co.uk</u>)

More specialised interventions, e.g. <u>Reading Recovery</u> - a short-term (12-20 weeks) early intervention programme, aimed at the lowest-achieving 20% of KS1 readers, and delivered by a trained Reading Recovery teacher.

- Very small group/paired/individual interventions to develop literacy skills e.g. Word Shark and Accelawrite (dyslexic.com).
- Use of appropriate assessments to identify strengths and areas of need, in order to target intervention at an early stage. This may include standardised assessments (e.g. <u>Sandwell Early Numeracy Test gl-assessment.co.uk</u>) as well as formative, criterion-referenced and curriculum-based assessments.
- Programmes for assessment and intervention where Mathematical difficulties are present (e.g. <u>Dynamo Maths</u>).
- Individualised learning opportunities for pupils with specific numeracy difficulties e.g. <u>1stClass@ Number (edgehill.ac.uk)</u>. A specially trained teaching assistant delivers up to 30 half-hour sessions to a group of up to four pupils, for 10 -15 weeks.
- Peer support (e.g. Year 2 pupils teaching younger peers).
- Targeted 'basic skills' time work, and small group sessions to supplement and repeat some whole class learning and develop basic skills.

Success through Arithmetic:

- Small group interventions to develop numeracy skills:
- First Class Number
- Mathletics
- Numican: Breaking Barriers Pack
- Plus 1 / Power of 2

More specialised interventions, e.g.

- <u>Numbers Count (edgehill.ac.uk)</u> a specially trained teacher gives individuals or small groups at least 3 x 30-minute lessons for a term. Sessions are planned for individuals based on initial assessments, with a focus on number and calculation.
- 1stClassNumber can be adapted for older pupils who need to reinforce basic mathematical skills and concepts.

Interventions to develop numeracy skills, based on principles of repetition and over-learning, with support to generalise skills (e.g. Precision Teaching, Plus 1).

Complex/ specialist support

Continue with any relevant strategies from First Concerns and/or SEN Support levels, plus:

- Continue to identify gaps in learning.
- See EHC Plan for specific outcomes and break outcomes into smaller, SMART targets and review frequently.
- Create a personalised curriculum tailored to the pupil's needs (this may require consultation with all professionals involved with the child or young person).
- Incorporate external advice.
- Liaise with support to ensure learning outcomes are facilitated and resources are readily available.
- Put behaviour management programme in place, if appropriate.

C. Social and Emotional Mental Health Needs

Tools to support a whole school approach:

Schools should arrange relevant training for school staff from external support, to promote resilience and whole staff mental health training including trauma informed approaches

- Consistent use of whole school Behaviour / Relationship Policy
- Use effective assessment tools to identify an overall profile of emotional wellbeing at a whole school and classroom level, for example, from those that have been identified as effective measures for schools to use from the Education Endowment Fund.
- Use appropriate assessments to identify difficulties early, establish a greater understanding of the pupil's needs, and the reason why they are displaying the challenging behaviours, and inform appropriate referral to other services.
- Set realistic targets and review termly in collaboration with the Special Educational Needs and Disability Co-ordinator (SENDCo), teaching staff and the pupils/parents/carers where appropriate using plans in place to support.
- Implement appropriate interventions for young people with specific individual needs, e.g. anxiety based difficulties and attachment difficulties.
- Consider preferred learning style and motivational levers for pupils causing concern.
- Consider environmental factors such as classroom organisation, seating and group dynamics.
- Put in place clear boundaries and routines, supported by visuals, e.g. visual timetables, now and next boards and visual classroom rules.
- Ensure consistency of Key adult characteristics across the whole school: nurturing yet able to hold firm boundaries, resilient, patient, empathic and able to seek and accept support from another adult. The key adult should be part of the team around the pupil, and kept informed of their targets and the provision in place to meet these.
- Ideas for activities can be found within Emotionally Friendly Schools and an intervention package is available on the ELSA support website.

Implement a transparent system of expectations (flexibly applied dependent on need, e.g. reasonable adjustments), which is consistent across all staff.

Create a safe and happy playground with differentiated options for those pupils who struggle with less structured times of the day.

Other whole school approaches may include:

- Opportunities for daily mindfulness.
- Use of Emotion Coaching techniques (see <u>Educational Psychology Service [mylifewarrington.co.uk]</u>, for more details).
- Go Noodle (movement breaks).
- <u>Team Teach</u> training/strategies.
- Provision of nurturing opportunities.
- Access to safe spaces/ calm areas.

Assessment and monitoring tools:

Identify and complete appropriate assessments to establish a greater understanding of the pupil's needs, for example:

- Boxall Profile (new.boxallprofile.org)
- The Strengths and Difficulties. Questionnaire (SDQinfo.org).
- Superflex Programme(thinkingbooks.co.uk)
- SNAP (hoddereducation.co.uk).

What you might see

Observed emerging and/or fluctuating difficulties with the following:	Observed persistent and moderate difficulties with the following:
Difficulties with interpersonal communication or relationships, regularly reluctant to share materials or attention and/or participate in social groups.	Difficulties with interpersonal communication or relationships, regularly reluctant to share materials or attention, participate in social groups and distracts other pupils, or self.
• Involved in low level distractions which hinder own concentration and that of others due to a lack of social understanding, task avoidance and/or with intent to gain attention.	Verbal aggression to peers or adults which does not cease with deescalation techniques and/or requires time out from the situation. So with draws and isolated assembly assembly as a little on the group.
 Verbal challenges to peers or adults which do not cease with verbal intervention and requires adult intervention and/or time out from the situation. 	 Is withdrawn and isolated, generally seeking too little or too much adult attention, which may often be negative attention. Will not communicate feelings appropriately.
• Is withdrawn and isolated, generally seeking too little or too much adult attention with limited or selective communication. Regularly appears on the fringe of activities.	Difficulty in controlling own emotions and feelings of frustration or distress in response to social or environmental situation that requires emotional containment.
 May not communicate feelings appropriately. Difficulty in controlling own emotions, feelings of frustration or 	Unforeseeable frustration and distress in response to personal, social or environmental situation which may result in danger or damage to self, people or property.
distress in response to social or environmental situation that requires a reflective response with the pupil.	Emotional responses that are not typical of the majority of the age group.
 Foreseeable signs of distress to usual social situations or activities, e.g. withdrawing, refusing, avoiding, lack of engagement that requires adult acknowledgement and a need for space or time out. 	Behavioural difficulties that have not been addressed by differentiated learning opportunities or by the strategies described above in 'First Concerns'.

Observed emerging and/or fluctuating difficulties with the following:	Observed persistent and moderate difficulties with the following:
 Behaviour that can be challenging and/or upsetting towards peers or adults, that is perceived to be intentional. Some anti-authoritative behavior. Anxiety and/or low mood impacting on ability to participate, engage and maintain attention requiring regular adult support and reassurance, which may be situationally dependent. Some self-esteem and/or resilience difficulties leading to avoidance of new experiences/fear of failure. Some controlled, low levels of self-harming behaviours. 	 High levels of disruption causing break down in group activities, and requiring planned and targeted intervention and/or removal from the activity. Harmful or unsocial behaviour in different settings, which may pose a risk. Reduced ability to acknowledge or accept responsibility for his/her own actions in a heighted emotional state. Anxiety and/or low mood adversely affecting participation, engagement, inclusion and concentration levels in multiple situations. Low levels of self-esteem and/or resilience leading to avoidance of new experiences/fear of failure.

The Toolkit

Quality First Teaching

- Use turn-taking games and co-operative learning activities during subject lessons.
- Access to mental health first aid training for staff to support their understanding of fostering positive peer relationships.

- Consider implementing <u>Restorative Justice Practice</u> to prevent conflict, build relationships and repair harm by enabling people to
 communicate effectively and positively. Provide access to supervision and training to encourage staff to reflect on their current practice
 with their school environment, e.g. trauma-informed practice. The <u>Educational Psychology service (mylifewarrington.co.uk)</u>, can also
 support with this.
- Create learning opportunities by introducing classroom routines to teach friendly behaviour. For example, model giving compliments and then set up situations where pupils can practise giving and receiving them.
- Use positive notes or compliment slips when positive social behaviour is observed.
- Teach positive social skills through drama and role play, giving pupils the opportunity to reflect on how different scenarios may make others feel.
- Set up peer mentoring or 'buddy' systems during unstructured times.
- Establish soft landings or reasonable adjustments to support transition points.
- Key adults to foster a relationship and encourage understanding e.g. using one page profiles.
- Use of PSHE to discuss healthy relationships and friendships.
- Use of whole school anti-bullying policies and programmes.
- Developing Emotional Awareness and Listening Programme (Samaritans) training for teachers and whole class lesson plans.
- Use PACE strategies. Through PACE, and as they begin to feel safer, pupil's discover they can do better. PACE stands for Playfulness, Acceptance, Curiosity and Empathy. These principles help to promote the experience of safety in your interactions with pupils. Pupils need to feel that you have connected with the emotional part of their brain before they can engage the thoughtful, articulate, problem solving areas.
- Provide planned opportunities to learn and practise social and emotional skills during structured activities, e.g. role playing.
- Use stories and other stimuli that generate problem solving around different social situations, modelling and practising the use of skills.

- Prepare the pupil for changes to activities/routines/staffing.
- Provide a plan and support for unstructured and/or transition times where needed.
- Utilise visual timetables/schedules.
- Use role play/verbal rehearsal before activities to reinforce behavioural expectations and reduce anxiety.
- Ensure that pupils who are struggling have ownership of a clear and simple behaviour card (e.g. points card).
- Ensure that KS1 pupils who are struggling have ownership of a clear and simple behaviour card (e.g. green amber and red dots).
- Implement 'Talk Time', a timetabled opportunity to discuss PHSE related topics, news, class concerns e.g. SALT.
- Set up peer mentoring or 'buddy' systems during unstructured times.

Use whole class approaches to teaching emotional regulation strategies, e.g. Go Noodle.

Use emotional validation strategies when upset, angry or distressed, e.g. an Emotion Coaching approach (emotioncoachinguk.com).

Discuss and model feelings and emotions often, using a wide vocabulary of words.

Create displays focused on developing emotional vocabulary.

Ensure consistent rules and routines across the school.

Ensure there is flexibility built in to support those with additional needs.

Rules should be in the form of a positive statement. Avoid rules framed as negative statements.

Rules need to be stated clearly.

Minimise your list of rules (3 - 5 rules).

Other whole school approaches may include:

- Provision of a safe space/area pupils can access to support their emotional regulation.
- Sensory breaks/sensory diets.
- Opportunities for daily mindfulness.
- Emoji card/time out card.

Key visuals e.g. visual timetables and flashcards (See Autism In Schools Toolkit).

Embed a whole class growth mind set approach coupled with effective differentiation which focuses on effort over achievement.

Implement whole class activities that encourage identification of strengths, e.g. creating visual reminders of their strengths through posters, certificates, stickers. These can be collected in a 'Good to be me' or 'all about me' book.

Utilise resilience-based framework and intervention such as the boing boing framework.

Identify and complete appropriate assessments to establish a greater understanding of the whole class/whole school's needs, for example: pupil's attitudes to self and school (PASS) (This can be more useful if there are a number of pupils in one class causing concern).

Offer opportunities for pupils to take on jobs and responsibilities in class and school.

Use positive classroom management strategies such as PIP & RIP – praise in public and reprimand in private.

Provide regular opportunities for pupils to identify and celebrate success and achievements and share these with others.

Ensure praise is specific and focuses on the learning process i.e. learning from mistakes and taking on challenges.

Opportunities for pupils to engage extra-curricular activities which allow them to showcase their strengths for example debating club or gardening club.

Ensure that pupils' successes and achievements are shared with parents and carers.

Use whole class approaches to teaching emotional regulation strategies, e.g. Zones of Regulation, cosmic kids yoga, peer massage, calm boxes.

Explore negative thinking styles as part of PSHE curriculum, as well as strategies to challenge these.

Practise calming strategies as a class routinely, particularly after a transition from break or lunch, e.g. colouring or mindful breathing exercise.

Use PACE strategies. Through PACE, and as they begin to feel safer, pupils discover they can do better. PACE stands for Playfulness, Acceptance, Curiosity and Empathy. These principles help to promote the experience of safety in your interactions with pupils. Pupils need to feel that you have connected with the emotional part of their brain before they can engage the thoughtful, articulate, problem solving areas.

Embed a whole class growth mind-set approach which focuses on effort over achievement.

Whole school resiliency training

Consider how you communicate with the family. It may not always be appropriate to discuss matters at the end of the school day. Consider weekly **brief** emails which sum up successes and challenges

Getting More Help: SEN Support

At SEN support, Senior Leaders should be directly involved and supporting the pupil, class and staff. If intensive support is ultimately required then SLT will be able to offer first hand experiences and share successes and challenges.

Ensure staff are trained effectively to carry out de-escalation techniques as described in positive handling training and consider its use to protect the individual pupil, their peers and staff. Any Positive Handling Plan should be carefully considered in liaison with parents and the pupil before putting in place. Obtain and record parental information and views. These can include questionnaires, parents' evenings, assemblies and social media forums.

Consider the use of effective assessment tools to measure and demonstrate the impact of an intervention or programme over time. Tools will be dependent on the intervention used/ goal to be achieved – see sections below for specific examples.

Use appropriate assessments to identify difficulties early, establish a greater understanding of the pupil's needs and inform appropriate referrals to other services.

Obtain and record pupil's views through pupil voice activities, e.g. <u>Blob Tree</u>.

Consider the following whole-class/ group-level emotional well-being interventions:

- Coping Power.
- Nurture UK
- S.S. GRIN. 3C Institute | Research-based products & services for behavioural health (3cisd.com)

Consider the use of accredited school-based counselling providers. https://www.gov.uk - counselling-in-schools

Consider the use of Behaviour Hub, capacity building interventions based around the themes of Anger, Anxiety, Self-Esteem, Social Skills and Early Play.

Observe and record the pupil's presentation (e.g. using an <u>ABC (autismwales.org)</u> – antecedent, behaviour, Consequence – chart or STAR - situation, trigger, actions and rewards/avoidance) across a range of varied contexts/times during the school day to understand whether need is contextual/situational and to inform possible strategies.

Explore possible emotionally based non-attendance (EBSA) and establish a process for how to support the pupil and their parents/carers (contact <u>Educational Psychology Service (mylifewarrington.co.uk)</u> for further information).

Refer to relevant agencies, e.g. Behaviour Hub, Educational Psychology Service, Child and Adolescent Mental Health Service, Virtual School Team. <u>Warrington's Local Offer | Ask Ollie (mylifewarrington.co.uk)</u>

Consider risk and protective factors to provide a profile of the pupil, e.g. <u>BOING BOING</u>.

Implement appropriate interventions for pupils with specific individual needs, e.g. anxiety-based difficulties and attachment difficulties (examples are provided under specific needs below).

Key adult support at specific times that have been identified as challenging for the pupil, e.g. unstructured times. 1:1 time to build up a relationship between a pupil and a key adult to be built into the pupil's timetable.

Consider a referral to the THRIVE panel by emailing thriverisksupportpanel@warrington.gov.uk

Identify and complete appropriate assessments to establish a greater understanding of the pupil's needs and inform group interventions, for example:

Boxall Profile (new.boxallprofile.org)

- Child and Youth Resiliency Measure (cyrm.resilienceresearch)
- The Strengths and Difficulties Questionnaire (SDQinfo.org).
- Emotional Literacy Assessment (gl-assessment.co.uk)

Offer small group interventions to promote positive peer interactions including:

- Time to Talk
- <u>Circle of Friends (inclusive-solutions.com)</u>
- S. S Grin 3C Institute | Research-based products & services for behavioural health (3cisd.com)
- Nurture UK

Provide key adult support at specific times that have been identified as challenging for the young person, e.g. unstructured times.

In consultation with relevant outside agencies (e.g. <u>Educational Psychology Service (mylifewarrington.co.uk)</u>), provide 1:1 tailored intervention planned to enable the pupil to meet specific targets in relation to peer integration/ friendships.

Small group or paired provision at breaks and lunchtimes, modelled and structured by an adult.

Adult support in class to scaffold any group/paired work.

If negative thoughts are a barrier to the pupil engaging with peers, try cognitive behavioural approaches such as Think Good Feel Good.

Use of programmes such as Why Try and Social Skills Improvement System (pearsonassessment.com/store).

Implement a Reducing Anxiety Management Plan (RAMP).

<u>PACE training (semh.co.uk)</u> for all staff via an accredited provider.

Offer social time support for example setting up a club around a pupil's area of interest e.g. gardening or gaming.

Identify and complete appropriate assessments to establish a greater understanding of the pupil's needs and inform group interventions, for example:

• Social Skills Improvement System (pearsonassessment.com/store).

Promote interaction with the pupil's peer group through small group interventions:

- Socially Speaking
- Opportunities to develop turn taking and organisational responsibility e.g. Lego Therapy.
- SALT

Use personalised <u>Social Stories 9 (autism.org.uk)</u> (Carol Gray) to reaffirm appropriate behaviour in specific situations according to the needs of the individual pupil.

Use Comic Strip Conversations (autism.org.uk) to reflect on real-life events and consider alternative ways of responding.

Identify and complete appropriate assessments to establish a greater understanding of the pupil's needs, for example: <u>Emotional Literacy</u> <u>Assessment (gl-assessment.co.uk)</u>.

An appropriately trained adult, (supported by the SENDCo, Educational Psychologist or CAMHS professional), to be available to provide deescalation and reflection work following any confrontation with peers.

One tool that might be used is <u>Comic Strip Conversations (autism.org.uk)</u> to support the pupil to reflect on real-life events and consider alternative ways of responding.

- Think Good, Feel Good
- Starving the Anxiety Gremlin book (anxietyuk.org)
- Starving the Angry Gremlin book (bookdepository.com)
- No worries programme

- Offer small group support to develop skills related to emotional regulation and emotional literacy e.g. recognising and labelling emotions, self-calming techniques.
- Work with a group of key staff to identify the individual profile of the pupil to gain an understanding of their individual triggers, observable behaviours, as well specific escalating and de-escalating adult responses. An example of this might be the RAMP (Reducing Anxiety Management Plan). Contact Educational Psychology Service (mylifewarrington.co.uk), for support with implementing this.
- Assign a key adult/ team of adults for daily check-ins.
- Teach self-calming techniques, such as breathing, visualisation or repetitive, soothing or calming activities (colouring, play dough, theraputty). Ensure access to these activities at all times through use of a 'calm box'.
- Utilise <u>specialist therapeutic activities (positivepsychology.com)</u> to explore pupil's emotions and to work through past events as recommended by a clinician.
- Utilise <u>Restorative Justice (baat.org)</u> interventions for conflict Resolution.
- Use gentle praise when self-calming strategies are attempted, even if unsuccessful.
- Use the incredible <u>5-point scale</u> to aid emotional self-regulation. Adults to understand the arousal curve and the arousal continuum to support the pupil.

Put an appropriate support plan in place (may be a behaviour/risk management plan), which has been devised with the pupil according to what they feel helps them to feel calm. This might include a safe-handling plan.

Use appropriate emotional awareness and regulation workbooks or programmes within individual or a small group, such as:

- Identify and complete appropriate assessments to establish a greater understanding of the pupil's needs, for example, the Boxall Profile
 (new.boxallprofile.org)
- Offer small self-esteem groups as a supportive way of building pupil's confidence and self-esteem. Plan out self-esteem building exercises as part of a group to enable pupils to receive positive messages and acceptance from one another.

- Plan daily opportunities to spend time identifying and building on strengths with an adult, on a 1:1 basis, e.g. make a strengths jar, use the finding hidden treasures approach (loan Rees, 2005).
- Assign a key adult/team of adults to provide daily opportunities for the pupil to talk through successes and achievements experienced that day.

Use person centred reviews and meetings as an opportunity to evidence and celebrate positive achievements, with an audience of people who are significant to the pupil.

Identify and complete appropriate assessments to establish a greater understanding of the pupil's needs, for example:

- The Strengths and Difficulties Questionnaire (SDQinfo.org).
- Schools and students health education unit (SHEU.org.uk) surveys offer a daily check in for pupils with key adult/team of adults.

Work with a group of key staff to identify an individual profile of the young person to gain an understanding of their individual triggers, observable behaviours, as well specific escalating and de-escalating adult responses. An example of this might be the RAMP - Reducing Anxiety Management Plan (contact <u>Educational Psychology Service [mylifewarrington.co.uk]</u> for further information).

Consider risk and protective factors to provide a profile of the young person, e.g. Boing Boing.

Identify and complete appropriate assessments to establish a greater understanding of the pupil's needs and inform group interventions, for example:

Child and Youth Resiliency Measure (cyrm.resilienceresearch)

Consider group interventions to develop resilience in pupils, e.g. Smart Moves.

The Eating Disorder Toolkit

The School and Public Health Nurses Association has co-produced a toolkit with useful tips and information for school nurses on recognising eating disorders as well as suggested conversation-starters that can help prompt discussion with children and their families.

It has been produced after a rise in reported eating disorders amongst children and young people during the pandemic. Councils are encouraged to share the toolkit as appropriate in their local areas.

Toolkit: https://saphna.co/homepage/toolkits/eating-disorder-toolkit/

Complex/ specialist support

Continue with any relevant strategies from First Concerns and/or SEN Support levels, plus:

- Develop a whole school approach that provides a consistent reward and sanction structure
- Implement an appropriately differentiated curriculum; this may incorporate a personalised/ alternative curriculum and/or timetable (facilitating SEMH skill development)
- Short term and focused alternative provision within school where appropriate
- Use reflective practice to support positives and successes and develop a 'social toolkit'
- Provide access to appropriate key adult support
- Use role play/verbal rehearsal before activities to reinforce behavioural expectations and reduce social anxiety
- Discuss social boundaries for forthcoming activities explicitly to support social communication difficulties
- Use social stories to explore choices of actions and potential consequences
- Implement specific lessons in social interaction that cover conversation, meal time etiquette, personal safety, manners etc. (It may be necessary to review facial expressions and body language as part of this). This should include giving and receiving compliments.
- Make communication skills and behavioural expectations a core focus this should include ways to show you are listening etc.
- Teach self-help strategies to minimise hypervigilance, such as not sitting next to or facing doors or windows, using noise cancelling headphones to block out sound etc.
- Support maintaining focus in a non-confrontational way at regular intervals using strategies such as using the pupil's name, touching the

desk in front of them or their book, passing post-its of instruction, using an agreed card system such as traffic lights

- Monitor your own body language, facial expression and tone to project calm and consideration, and avoiding aggression or agitation associated with frustration
- Teach good mental health strategies either through Social and Emotional Aspects of Learning (SEAL), mindfulness or similar therapeutic activities to calm and clear the mind
- Utilise nurture group ethos and strategies
- Provide a safe and supervised area for calming and time away from triggers
- Specialist nurture provision across the school
- Specialist therapeutic interventions, e.g. play therapy, art therapy, interest based activities that facilitate reflective practice etc.
- Support for parents to understand mental health and guidance on appropriate techniques and skills to use, e.g. using BASC3 monitoring and intervention structure
- Signpost parents to support for parent mental health
- Specific specially trained staff to meet individual need
- Emotion coaching from trained staff
- Sensory based therapies and workouts
- Trauma and grief therapy
- School work with medical staff to provide holistic package of care and intervention
- Targeted behavioural modification programmes with family support and training
- Individualised support that will include curriculum content, length of day, group dynamic, supported access to additional medical appointments.

D. Sensory and Physical

Tools to support a whole school approach:

- Consider whole school approach to the environment: including low stimulus areas, use of Hessian backgrounds for displays, use of cream coloured paint for walls and plain soft furnishings.
- Create a 'clutter-free' environment. Pay attention to layout of furniture, seating and adult position in the classroom. Avoid standing in front of windows as your face can become difficult to see. It may be helpful to complete an environmental audit of the school including indoor and outdoor areas.
- The curriculum includes examples of diversity.

What you might see: Visual Impairment

The pupil may have any new or unusual visual behaviour, changes in eye movement, reported lack of visual clarity, loss of part of visual field should be first reported to a medical professional by parents.

Free NHS sight tests are available at opticians for children under 16 and for young people under 19 in full-time education. Consider the follow questions – does the pupil:

- Seem to have delay in expected visual development?
- Have eyes which move quickly from side to side, jerk or wander randomly?
- Have pupils which flicker, or their eyes are looking in two different directions?
- Move their eyes very little?
- Have eyes which don't follow your face or an object?
- Seem unable to make eye contact?
- Have eyes which don't react to bright light being turned on in the room?
- Have white eyes in photos instead of red eyes when a flash goes off?
- React in a surprised way when you touch them?

- Atropine or occlusion therapy (for a squint) may be referred by the hospital Specialist Orthoptist treating them if the vision in the unpatched eye is very poor.
- Following an assessment by the hospital VPD clinic a young person may be diagnosed with visual processing difficulties.
- A diagnosed eye condition or visual impairment.
- A diagnosed progressive visual condition.
- May struggle to access the curriculum without targeted strategies/support.
- Following recommended strategies and intervention the young person should be able to access the curriculum in the mainstream classroom setting.
- Continue to use strategies, links and resources from Expected Support (QFT) which applies plus:
- QTVI provide assessment, advice and support sessions based on National Sensory Impairment Partnership (NATSiP) criteria.

In addition, the pupil may also:

- Be registered Visually Impaired by the consultant (sight impaired or Severely Sight Impaired).
- Require additional support to access the curriculum.

- React in a startled way when exposed to loud noises?
- Behave in a very passive way, for example, doesn't reach out when offered things?
- Tilt their head a lot, as if they are looking at objects from an odd angle?
- Not grab things around them?
- Does the pupil have long term?
- Clouding in the eyes?
- Swollen, sore, watery, or inflamed eyes?
- Drooping eyelids?
- Erratic eye movements?
- Frequent headaches/dizziness?
- Squint?

Does the pupil:

- Blink, frown or screw their eyes up a lot?
- Rub or poke his/her eyes a lot?
- Show excessive movements of head or eyes
- Turn their head to use one eye?

- Need the curriculum to be provided as large print or braille.
- Require ongoing/regular support from the sensory team.
- Need a tactile curriculum.
- Have difficulties with communication, movement and/or social and emotional aspects of their development.
- Show signs of visual fatigue.

•	Cover or close one eye?
•	Use an unusual very short or very long viewing distance?
•	Reach for things in the wrong place?
•	Often bump into things or trip?
•	Pay less than usual attention visually?
•	Get very close to other pupils when interacting?
•	Is the pupil's written work:
•	Deteriorating - may be unusually small or large, or letters poorly formed?
•	Unusually untidy?
•	Not on the line?
•	Poorly space with odd omissions?
•	These difficulties can have other explanations but if you think they may be caused by the pupil's inability to see properly please contact the pupil's parents in the first instance.

The Toolkit: Visual Impairment

Quality First Teaching Approaches

Schools should liaise with parents/carers to ensure attendance for eye health and glasses checks.

If a pupil is demonstrating visual processing difficulties, they can be referred directly to the Orthoptic Visual Processing Difficulties (VPD) Clinic Warrington and Halton Hospitals NHS Trust. The screening questionnaire should be completed and guidance is available at the Orthoptic VPD Clinic (NHS Trust).

A referral should be made to Warrington's Sensory Support Service - Visual Impairment Team (mylifewarrington.co.uk).

Information (from the RNIB) to aid understanding of visual impairment should be shared with parents/ carers and staff.

Staff should say the pupil's name at the start of the sentence so that they know you are speaking to them.

Talk to the pupil about what is happening and what is going to happen.

Ensure that pupils are in a position where there is no glare, and the light is diffused evenly. Try not to have light directly behind you when you speak to them.

Learning materials and toys should be big, bold, colourful and well contrasted (BBCC!).

Using vision can be very tiring and the extra effort required can result in physical and visual fatigue. Develop staff awareness of the pupil's needs and how to support these using guidance from the RNIB <u>resources (rnib.org.uk)</u>.

Staff should be aware that the pupil may be experiencing visually related learning difficulties and provide support to enable them to plan appropriately.

Gather the views of the pupil, using person-centred approaches regarding their opinions and preferred strategies.

Create of Pen Profile/Pupil Passport detailing their needs and strategies which work for the pupil - share with all staff.

Request an assessment by the Qualified Teacher of pupils with Visual Impairments (QTVI) and distribute the report to key staff. Recommendations of the report should be implemented in the school to enable full inclusion within the mainstream class.

The school should monitor pupil progress in this respect e.g. carrying out reading assessments in different fonts.

Learning materials must be selected and prepared for the pupil's clarity.

Make basic adaptations to activities and materials to facilitate access for a visually impaired pupil e.g. oral descriptions of visual materials, saying the pupil's name before asking a question.

Allow more time for the pupil to complete the tasks and adjust the pace of the work which may need to be slower. Information about adapted resources is available at <u>Sight Advice (sightadvicefaq.org.uk)</u>.

Low level adjustments may need to be made to activities e.g. reducing length of visual tasks. Break up visually demanding tasks with other activities. Standard adjustments advised include:

- 1. Non cursive, bold size 14 font
- 2. Increased letter spaces
- 3. Ensure pictures are clear with bold colours and outlines and not too small.
- 4. Use of high contrast colours, e.g. cream background and black text (in print and on screen).

Teaching methods should facilitate access to the curriculum, social/emotional development and class/group participation.

ICT to be used to increase access to the curriculum, where appropriate e.g. iPads for reading.

Use of <u>RNIB information</u> relating to a range of resources and agencies, within the Local Authority and the wider community e.g. <u>Victaparents</u> and <u>Look UK</u>.

Involvement of parents/carers and provision of information relevant to them e.g. using resources available at RNIB and Vision UK.

Develop transition plan for pupils moving between year groups, key stages, primary and secondary school and post 16 provision.

Refer to medical, learning specialists to support development in all areas e.g., SALT, OT, physio at <u>Bridgewater Community Healthcare Trust</u> (<u>bridgewater.nhs.uk</u>).

Ensure information moves with the pupil when they move classes.

Put in place a Personal Emergency Evacuation Plan for a visual impaired pupil – speak to the Sensory Support Team (mylifewarrington.co.uk).

Staff will need to plan ahead to ensure that there is time to differentiate activities for pupils with visual impairment and to ensure that appropriate resources can be prepared.

It is worth considering breaks between visual activities and some non-visual activities for pupils as they may find it tiring to concentrate on visual tasks for a length of time.

Incidental learning is often missed by pupils who have low vision, these needs developing and extending to ensure they have access to all learning opportunities.

Verbal information needs to be clear and specific, to help young people to locate/access visual information. Use left, right, next to rather than over there.

Pupils need to be given their own copy of all pictures and written materials; they should not be expected to share.

Considerations for good transitions between stages of education, and how to plan and prepare for these e.g. opportunities to walk with an adult, repeating the process, moving towards more independence. Talking the pupil through the route, noting key points, textures or space to feel for. Make sure that these plans are shared with those people involved, including the pupil and parent/carer.

Make an accessible classroom environment by:

- 1. Encouraging pupils to push their chairs under the table when not in use.
- 2. Ensuring the chairs used in each area are of a good contrast.
- 3. Avoiding unnecessary clutter around the classroom and walkways.
- 4. Ensuring that the mats and rugs have no slip rubber edged and lie flat. Avoid using tape if possible.
- 5. Avoiding having protruding legs or brackets in walkways.
- 6. Avoiding displays that hang down and are not of good contrast to their surroundings.
- 7. Using window blinds to control glare from the sunlight
- 8. Painting door frames in a contrasting colour.
- 9. Ensuring all equipment and items for storage should be stored against walls or behind screens.
- 10. Closing cupboard doors when not in use.
- 11. Ensuring that all doors are either always left either fully open or fully closed to avoid bump hazards.
- 12. Ensuring enough space is left between tables to ensure easy access to areas in the classroom and around the school.

- 13. Ensuring that tables are clearly visible by using high visibility tape on edges.
- 14. Fitting hinge guards on both sides of all doors.
- 15. Fitting child-proof safety covers to all electrical sockets use coloured covers to make it immediately clear if any are missing.

Provide access to a quiet space to work with the pupil and deploy additional support to deliver specific interventions.

The Curriculum plan should reflect the pupil's needs and level of achievement and must include individually focused Support Plan.

Visits away from the school are planned well in advance and take into consideration the pupils needs.

Getting More Help: SEN Support

Monitor the social and emotional impact of visual impairment and raise any concerns with the Qualified Teacher of the Visually Impaired (mylifewarrington - QTVI).

Let's play! A guide with toy and play ideas for pupils with vision impairment (RNIB - See differently).

Teaching practice should facilitates access to the curriculum, social/emotional development and class participation. Draw upon information contained within specialist websites, such as RNIB.

Utilise the Curriculum Framework for pupils and young people with Visual Impairment, includes 11 areas which interconnect and overlap - www.rnib.org.uk/cfvi

QTVI may make onward referral for Habilitation assessment/support/input.

QTVI may make a referral to the Sensory Technician for advice and provision of adapted materials.

The hospital may refer a child who is having patching/occlusion therapy. The QTVI will make one visit and provide some strategies - www.squintclinic.com

School must access specific VI related training provided by the Visual Impairment Team (mylifewarrington.co.uk)

On-going assessment, advice, support, monitoring and training from a QTVI, up to 6 hours annually, as well as attendance at review meetings. Teachers should implement advice including specific interventions as suggested by the QTVI.

Teaching methods based on experiential and tactile learning with a strong verbal emphasis, which facilitate access to the curriculum and class participation.

School staff to provide some modification of learning materials to facilitate access e.g. attention to speed of lesson delivery and speed of working of the pupil. This may also include modifications for assessment and exam arrangements.

Opportunities for individual and small group work to meet identified needs and to facilitate learning and inclusion, as appropriate.

Opportunities for explanation, and exploration of resources before they are used in an activity e.g. through pre-teaching.

Further information about assistive technology can be found at Sight Advice (sightadvicefaq.org.uk), RNIB and Living Made Easy.

There may be a need for a specialist non-sighted/tactile curriculum to be developed and delivered which may require smaller group teaching.

Teachers and/or Teaching Assistants with specialist knowledge/training such as tactile/pre-braille curriculum.

QTVI to make referral to Low Vision Aid clinic.

Additional support may be required for the pupil from a Teaching Assistant in class, and around school, as indicated by assessment to:

- 1. Facilitate inclusive and independent learning.
- 2. Provide in-class support.
- 3. Ensure safe mobility.
- 4. Provide support during unstructured times and extra-curricular activities.
- 5. Conduct individual work.
- 6. Plan alongside the QTVI opportunities for tactile exploration of the environment and resources.
- 7. Prepare specialist/ tactile resources and learning materials in alternative formats, including Braille, tactile diagrams, audio / speech.

30 hours (20 annual sessions) from a QTVI to provide all the teaching and support outlined above.

Advice, assessment, teaching, support and programme of work from Mobility Officer regarding mobility and independence skills; frequency based on assessed need, block of work equivalent to weekly contact.

The report written by a QTVI in conjunction with the Mobility Officer will be shared with all stakeholders and will include information as outlined in the Universal offer.

Staff member to become a Vision Champion within the school by completing a training course offered by Positive Eye.

Complex / Specialist Support: Visual Impairment

Continue with any relevant strategies from First Quality Teaching and/or SEN Support levels, plus:

- Employ a differentiated/modified curriculum
- Provide support to meet needs as detailed in STVI recommendations, and EHC Plan
- Provide significant modification of materials and presentation to facilitate access to the curriculum
- Provide appropriate learning space taking into account use of equipment
- Ensure that specialist equipment is kept in good working order and inform STVI of any problems.
- · Provide the pupil with time for pre or post tutoring
- Provide alternative physical activities if and when required/advised
- Provide time for joint planning between school staff and STVI
- Provide sufficient time for school TAs to acquire specialist skills, e.g. Braille
- Actively support the pupil in using specialist skills as an integral part of the school day.

SIS involvement may be required as follows:

- Specialist Teacher for the Visually Impaired
- Defined and time limited programmes of specialist teaching, e.g.
- Use specialist equipment.
- Social skills

- Ongoing, weekly specialist teaching of Alternative Formats, such as Braille, Moon, Audio.
- Ongoing specialist teaching for curriculum support
- Ongoing support around social and emotional aspects of learning
- Ongoing training for school TAs
- Specialist Teaching Assistant (VI)
- Support TA training by working alongside school TA to model good practice
- Habilitation Specialist
- Assess skills in mobility
- Assess independent life skills
- Create and implement a programme of work to develop mobility skills and techniques
- Create and implement a programme of work to develop independent life skills to be carried out by SIS, school staff and parents/carers. This may include shopping, food preparation and dressing.

Additional to strategies at First Concerns, SEN Support and Complex:

• Suitable/alternative curriculum, exams, vocational assessments/learning environment

Daily teaching from a STVI/Habilitation Specialist.

What you might see: Hearing Impairment

The pupil:

- Has a diagnosed hearing loss (which is confirmed by up-to-date information from Audiology)
 - AND
- May have hearing aids
 OR
- Is suspected of having a hearing loss and is undergoing clinical assessment.
- May exhibit some emerging and/or fluctuating difficulties with the following:
 - Receptive and expressive language
 - Attention and concentration
 - Understanding verbal (spoken) information
 - Following instructions
 - Missing key information
 - Misunderstanding key information
 - Processing auditory information, including verbal and nonverbal information
 - Listening in the presence of background noise and/or locating the speaker in large/noisy environments
 - Acquiring and retaining vocabulary (may be observed as vocabulary gaps or poor language
 - skills where they may have missed early vocabulary)
 - Often asks for repetition
- Volume of voice (i.e. abnormally loud or quiet voice)
- Acquisition of phonic skills (which may impact early stages of reading)
- Frequent colds/ear infections

The pupil:

- Has hearing aids or cochlear implants
- Is likely to have a personal radio aid system
- Is unable to access the mainstream curriculum through personal amplification alone within the allowed timescale and at normal teaching pace.

In addition, the pupil will have one or more of the following:

- A late diagnosis
- A progressive hearing loss
- A moderate to severe hearing loss
- Auditory Neuropathy
- Delayed language development
- Requires elements of the curriculum to be differentiated
- Observed persistent and moderate difficulties with the following:
- Perception of some speech sounds
- Accessing linguistic aspects of the curriculum
- Accessing speech in TV programmes, DVDs and YouTube clips where lip pattern is not present (e.g. 'hidden narrators' and voiceover)
- Accessing speech where there is competing background noise, including music.

•	Problems with self-esteem, emotional wellbeing and social interaction	
•	Fatigue due to level of concentration required.	

The Toolkit: Hearing Impairment

Quality First Teaching Approaches

The pupil may show evidence of some delay in meeting expected milestones in attending, listening, vocalisations and communication.

There may be a history of hearing loss – fluctuating loss/unilateral loss (hearing loss on one side).

The pupil may be diagnosed with a hearing loss from audiological assessment.

Concerns may be raised with one or more of the following:

- Ear infections and congestion
- Reduced or limited vocabulary for their age
- Gaps in vocabulary
- Finds learning and pronouncing words challenging
- Misunderstands or ignores verbal instructions

- Poor attention and concentration skills
- Watches what others are doing
- Limited spoken language for their age
- Difficulties with receptive and expressive language
- Listening in the presence of background noise
- Emotional wellbeing and social interaction difficulties
- Locating the speaker in large/noisy environments
- · Regularly asks for repetition and may not hear after information is repeated
- Uncontrolled volume of their voice (loud or quiet)
- · Tiredness due to extended periods of listening
- Acquisition of phonics

Pupils with temporary hearing loss may demonstrate these behaviours intermittently.

It will be necessary to follow legislative guidance and make reasonable adjustments for a D/deaf pupil The Equality Act and your child's education (ndcs.org.uk).

These difficulties can have other explanations but if you think they may be caused by a pupil's hearing loss please contact the pupil's parents in the first instance and parents can make a GP appointment to determine if an audiology referral is required. At audiology a hearing test can be undertaken to determine if a pupil has a fluctuating or permanent hearing loss. Alternatively, with parental permission, a referral can be made to the sensory support team. Referral form: sensory team referral 2019 1.doc (live.com).

It is always advisable that pupil's hearing is checked by a medical professional if you have concerns; an appointment with GP can be the first contact. Routine school age hearing screening are offered to young pupils to identify any problems early on. If there are any concerns regardless of the outcomes from these screenings, please ask the parent/carers to contact the GP.

A referral may be required to medical, learning specialists to support development in all areas e.g., SALT, etc.

If a hearing impairment is identified, advice regarding support is available via a referral to the Sensory Support Team's specialist Teachers of the Deaf. If appropriate, with parental permission, fill in the Sensory Support referral form to request involvement.

Sensory team referal 2019 1.doc (live.com)

The Sensory Team will support through the diagnosis and hearing aid fitting:

- Make sure the pupil is facing the speaker
- Gain the pupil's attention, maintaining eye contact using facial expression and gesture.
- If hearing aids have been issued, ensure they are worn, well maintained and clean. Any spare batteries are stored and disposed of safely.
- If hearing aids are issued ensure staff are trained in management and care of the equipment.
- Review the acoustic conditions of the setting, make reasonable adjustments by adapting physical environment.
- Reduce any background noise where possible or provide a quiet space for focused activities. Follow advice from NDCS Improving listening conditions | Reducing background noise (ndcs.org.uk).
- Use short simple sentences of the level appropriate to the young person.
- One sided hearing loss make sure the better ear is toward the majority of the group.
- Speaker's face to be clear with no obstructions.
- Lighting is important speaker to stand with their face in the light, not with their back to the light as this will put their face in shadow.
- Follow advice from the Specialist Teacher of the Deaf regarding setting adjustments and strategies.
- Implement SALT advice if provided.
- Use visual prompts and cues where possible e.g., photos, pictures, objects.
- Allow time for the pupil to look at the visual prompts without speaking, it is difficult to listen and look at the object of reference at the same time.
- Model next steps and language.

- Support the pupil to communicate if they have not been understood.
- Keep language clear, concise and unambiguous.
- Keep language at an appropriate grammatical level for the pupil to understand.
- Use the young pupil's name at the start of any instruction
- Risk assessment for safety of students and equipment.

See advice sheets from the Ask Ollie page

https://www.mylifewarrington.co.uk/kb5/warrington/directory/advice.page?id=F93ThH4loAg&localofferchannel=0.

General good classroom practice which will be of benefit to pupils who have hearing difficulties includes:

- Preferential seating position. Consider where pupils are seated they will need to be near to the sound source and have a clear, comfortable view of the speaker's face.
- One sided hearing loss make sure the better ear is toward the majority of the group
- Speaker's face to be clear with no obstructions
- Lighting is important speaker to stand with their face in the light, not with their back to the light as this will put their face in shadow.
- Make sure the pupil with a hearing loss is watching when delivering key information
- Check that key information has been understood using open questions
- Follow advice from the Specialist Teacher of the Deaf regarding classroom management and strategies
- Consider reasonable adjustments to improve classroom acoustic conditions <u>NDCS Improving listening conditions | Reducing background noise (ndcs.org.uk)</u>
- Implement SALT advice if provided.
- Determine if access arrangements are required e.g., SATs /GCSE
- Access Arrangements, Reasonable Adjustments and Special Consideration JCQ Joint Council for Qualifications (jcq.org.uk)

- Key stage 2 tests: access arrangements GOV.UK (www.gov.uk)
- Keep background noise to a minimum and reduce distractions
- Use visual prompts and cues where possible e.g., demonstration, objects, subtitles
- Allow extra time to process information formulating a response and to complete tasks.
- Use repetition and rephrase information to consolidate understanding.
- Model information
- Support the young person in communicating if they have not been understood.
- Keep language clear, concise and unambiguous
- Keep language at an appropriate grammatical level for the young person to understand.
- Use the young person's name at the start of any instruction
- Ensure change in topic is clearly identified
- Give information in small, understandable sections
- Provide key vocabulary in advance
- Risk assessment for safety of students and equipment

See advice sheets from the Ask Ollie page

https://www.mylifewarrington.co.uk/kb5/warrington/directory/advice.page?id=F93ThH4loAg&localofferchannel=0

Be aware of the pupil's needs and how key developmental milestones and skills are affected by hearing loss, particularly in communication, language acquisition, play and fine and gross motor skills N.B. some forms of hearing loss are associated with balance and delayed milestones e.g. late to walk/sit/balance issues.

Creation of a One-Page Profile (helensandersonassociates.co.uk) which is shared with all staff.

An assessment by Qualified Teacher of the Deaf (QToD) may be required and report should be distributed to key staff. Recommendations of the report implemented in the setting to enable full inclusion within the school and the National Curriculum teaching and learning.

Where appropriate short-term interventions may be provided and the school/pupil may receive:

- Model suggested strategies/ train staff at the setting.
- Direct work from either a Qualified Teacher of the Deaf or Specialist Teaching Assistant including Assessment and obtaining pupil voice.

Make basic adaptations to activities and materials to facilitate access for a hearing impaired pupils.

Repeat instructions to check understanding and reinforce messages. Use of multisensory approaches to all teaching across all subjects such as the use of visual resources.

School must use subtitles on all audio resources e.g. TV and DVDs. Access to transcripts where there are no subtitles are not available.

Follow advice about how to support and include pupils who are deaf or hearing impaired in <u>primary</u> or <u>secondary</u> school (ndcs.org.uk).

Staff need to be aware of areas of potential risk associated with childhood hearing impairment e.g. social and emotional impact, reduced opportunity for incidental learning in <u>primary</u> and <u>secondary</u> school (ndcs.org.uk).

Involvement of parents/carers and provision of information relevant to them e.g. using resources available at Council for Disabled Children.

Develop peer awareness and opportunities for group interventions to develop social inclusion with peers e.g. <u>Circle of Friends (inclusive-solutions.com)</u>.

Consider good transitions (www.mentalhealth.org.uk) between stages of education, and how to plan and prepare for these e.g. allowing the pupil to have extra visits to the new school and ensure transfer of information.

Develop a transition plan for pupils moving between year groups, key stages, primary and secondary school.

HI Team will provide transition support visits to new educational placements as required.

Getting More Help: SEN Support

The pupil has a diagnosed hearing loss and has been issued hearing aids or cochlear implants.

The pupil requires amplification but unable to use equipment due to ear infection or other reasons such as sensitivity.

The pupil may have a progressive hearing loss.

The pupil may:

- Attend regular appointments at audiology or cochlear implant centre and is diagnosed with a permanent bilateral hearing loss.
- Require additional support to access the curriculum.
- Require support from the sensory team Teacher of the Deaf.
- Have difficulties with social and emotional aspects of their development.
- May be a requirement for alternative modes of communication e.g., BSL, SSE, total communication in class and in break times.
- Show signs of listening fatigue.
- Require amplification but unable to use equipment due to ear infection or other reasons such as sensitivity.

The pupil attends regular appointments at audiology or cochlear implant centre and is diagnosed with a permanent bilateral hearing loss. The pupil may:

- Require additional support to access the curriculum
- Require support from the sensory team Teacher of the Deaf
- Have difficulties with social and emotional aspects of their development
- Require for alternative modes of communication e.g., BSL, SSE, total communication in class and in break times
- Show signs of listening fatigue
- Require amplification but unable to use equipment due to ear infection or other reasons such as sensitivity.

An assessment of need will be completed by the Qualified Teacher of the Deaf (QtoD) and advice and support sessions based on National Sensory Impairment Partnership Criteria (NATSiP.org.uk).

School should follow and implement recommendations from the QtoD.

The QToD may provide support using the Monitoring Protocol (deafeducation.org.uk).

Training may be provided to teaching and support staff by the sensory team.

Check equipment is in working order, contact sensory team if there are any faults.

Monitor the social and emotional impact of the hearing loss in the setting and inform the Sensory Team of concerns.

Involve the HI Team in the completion of baseline assessments and cognition and learning, as well as in the development of targeted plans.

School must access specific deaf related training/ opportunities for modelling of suggested strategies by HI Team/ Qualified Teacher of the Deaf (QToD). Access to wider training for staff from the NDCS (ndcs.org.uk).

Teachers must implement advice as suggested by the Qualified Teacher of the Deaf (QToD) related to:

- The modification to the presentation of assessments.
- Targets.
- Curriculum and teaching methods.

A key person should be trained in working with pupils with a hearing impairment and understands hearing equipment to:

- Reinforce lesson content.
- Deliver modified curriculum tasks.
- Support language development.
- Daily check of hearing aids.

Specific interventions for language development, speaking and listening and phonics learning e.g. Lip reading, Auditory Verbal Therapy, Natural Aural Approach, Cued Speech, Sign Language, Total Communication Approach, those contained within <u>guidance documents from NDCS</u> (ncds.org.uk).

Advice from other professionals e.g. Speech and Language Therapist, Cochlear Implant Programmes as appropriate.

Use of equipment and technology, including: use of <u>radio aids</u>/ <u>soundfield speaker systems (ncds.org.uk)</u> as appropriate to meet assessed needs. Also seek advice about how to link equipment to Interactive White Boards, computers, iPads etc.

The pupil may require a signing environment and/or the need for the curriculum to be delivered through specialist communications e.g., BSL/Makaton/SSE.

Provide access to quiet working spaces for tutorial/small group work and specialist assessment

Key person from the HI Team identified from initial audiology referral, who will link with the school, parents/carers and professionals.

Opportunities for parents/ carers, pupils and extended family to attend a local Hi Hopes parent support group (highhopes.co.uk).

See NDCS for advice and guidance on suitable technology and apps.

Liaise with other, external agencies for advice and guidance and a multi-agency approach e.g. audiology.

Qualified Teacher of The Deaf providing individual support sessions based on <u>National Sensory_Impairment Partnership (NATSiP.org.uk)</u> criteria.

Direct teaching and/ or in class support from Qualified Teacher of the Deaf or specialist TA.

The pupil may require:

- A differentiated/modified curriculum
- Access to a d/Deaf peer group
- A signing environment
- A need for the curriculum to be delivered through specialist communications e.g., BSL/Makaton/SSE
- Smaller group teaching

Invitation to the annual review for the attendance of a QToD to ensure needs are being met, regarding support for the hearing loss, progress and access to the curriculum.

Use of equipment and technology for example, radio/aids/soundfield systems as appropriate. Also advice on linking, streaming equipment with educational equipment.

Risk assessment for safety of students and equipment.

Provide support to meet needs as detailed in Teacher of the Deaf recommendations, and EHC Plan

Provide access to quiet working spaces for tutorial/small group work and specialist assessment

Key person from the HI Team identified from initial audiology referral, who will link with the school, parents/ carers and professionals.

Offer home visits where appropriate.

Opportunities for parents/ carers, PUPILS and extended family to attend a local Hi Hopes parent_support group (highhopes.co.uk).

Access to deaf adults and peers in the community.

Attendance at audiology clinic appointments by a QToD to support families through diagnosis and hearing aid fitting.

Support by a QToD through the referral process for cochlear implantation.

See NDCS for advice and guidance on suitable technology and apps.

Liaise with other, external agencies for advice and guidance and a multi-agency approach e.g. audiology.

Regular reviews of school-based interventions, involving parents/carers and the QToD, to ensure progression and adaption if necessary.

Qualified Teacher of The Deaf providing individual support sessions based on <u>National Sensory Impairment Partnership (NATSiP.org.uk)</u> criteria.

Direct teaching and/ or in class support from Qualified Teacher of the Deaf or specialist TA.

Access to specialist health assessments, advice and equipment (e.g. Audiology for ear mould impressions and repairs).

Access to a Communication Support Worker (CSW) with appropriate BSL/ communication skills when advised.

Specific deaf related training opportunities for staff on request to the HI Team.

Possible use of speech audiometry and other specialist tools to assess access to spoken language in class on request to LSS Hearing Impaired Team.

Specialist language assessments, upon advice from the HI Team.

Complex / Specialist Support: Hearing Impairment

Facilitate the pupil to use of the following if required according to their needs (following advice from the Sensory Inclusion Service and/or Speech and Language Therapy):

- May need intensive hearing, speech and language rehabilitation following hearing aid fitting or cochlear implant surgery
- Use of sign language as their primary mode of communication and to access to learning, or to supplement delayed or limited spoken language
- Use of a communication support worker for British sign language, sign supported English or different communication approaches according to the situation (known as total communication)
- Provide support to meet needs as detailed in STOD recommendations, and EHC Plan
- Provide teacher led small group work
- Provide access to quiet working spaces for tutorial/small group work and specialist assessment
- Use a differentiated/modified curriculum, as required
- Reinforcement of curriculum through additional methods, e.g. sign, use of visual resources, pre/post tutoring, small group work
- Consider if the pupil requires targeted support from a teaching assistant to facilitate access to the curriculum
- Consider acoustic treatment of rooms and Soundfield systems
- Facilitate frequent contact with specialist teacher of the deaf (STOD), for example to provide: specialist teaching and assessment, pre and post tutoring, auditory rehabilitation, plus staff training, mentoring and supervision of specialist support workers.

Via Specialist Teacher for the Deaf providing:

- Ongoing, weekly specialist teaching of language and literacy skills
- Ongoing specialist teaching for curriculum support
- Ongoing support around social and emotional aspects of learning

- Ongoing training for school Teaching Assistants (TAs).

Via Involvement of a Specialist Teaching Assistant (HI) providing:

- Support for TA training by working alongside school TA to model good practice
- Suitable/alternative curriculum, exams, vocational assessments/learning environment
- Daily teaching from a Specialist Teacher Of the Deaf (STOD)
- Access to a d/Deaf peer group
- Curriculum delivered through sign language or alternative modes of communication
- If required:
- Implement advice from SALT Advice Line
- Implement SALT Care plan

Liaise with Speech and Language Therapist.

The Toolkit: Physical Difficulties

Quality First Teaching Approaches

Concerns about a pupil's physical needs should initially be identified by parents/carers and or relevant health professional. The school should be informed by the School Nurse prior to the pupil starting school about any healthcare needs which impact on the pupil's physical presentation and/or needs.

All professionals across health and education should work together to put in place an Individual Healthcare Plan
(www.gov.uk/government/publications) which will enable the school to meet the pupil's needs whilst at school. This should include arrangements to manage the administration of medication and risks. This should be completed as part of the transition process from nursery to primary or primary to secondary school.

Use the <u>model letter (www.gov.uk/government/publications)</u> to involve parents/carers in developing these plans and identify any strengths and needs.

Consideration should be given about how the pupil can manage their own condition, and/or move with safety around their environment, with as much independence as possible (in line with their age and/or capacity).

Teaching practice should facilitate access to the curriculum, inclusion and participation.

Consider the organisation of the classroom and create a 'clutter-free' environment.

Seating plans should consider the positioning of the pupil in the classroom to minimize distractions and enable mobility.

Provide an option for the pupil to sit on a chair rather than on the floor at carpet time/ assemblies. Can have a classmate do the same if appropriate.

Accessibility plans (TheKey) should enable the pupil to move freely and allows for sufficient working space and mobility aid.

Consider timetabling and location of rooms where possible to facilitate movement whilst continuing to take into consideration access to facilities and fatigue.

Allow pupils to leave lessons early when traveling between rooms or buildings to avoid large groups in corridors and enable extra travel time.

Provide additional time and support for PE lessons and swimming.

Provide a locker for a pupil to store books, bags and coats etc. rather than needing to carry them around during the day.

Give consideration to transporting food at lunchtime e.g. providing assistance with trays and seating.

It may be helpful to complete a risk assessment (hse.gov.uk) of the setting including indoor and outdoor areas and trips outside of the school.

Allocate a key person such as the SENCo to:

- 1. Adapt resources
- 2. Attend training
- 3. Establish differentiated activities

4. Establish more specialist strategies and resources to support the pupil.

Create a Personalised Fire Evacuation Plan (TheKey) if required.

Provide additional equipment or resources such as sloping board, adapted cutlery/ chairs/ scissors and pencil grips etc.

Include different physical play activities into as many aspects of the curriculum as possible to develop fine and gross motor opportunities into as many aspects of the curriculum as possible to support specific skill development and targets.

Consider activities which focus on spatial awareness, planning and body awareness.

Take account of potential fatigue and reduce the pace of structured lessons, reduce the amount of copying from the board and provide regular opportunities for breaks and rest.

Allow the pupil additional time to complete tasks.

Consider <u>access arrangements</u> (goodschoolsguide.co.uk) for assessments and exams, and apply to the relevant exam board for them and implement them, as necessary.

Consider further assessment of handwriting, for example complete a <u>DASH assessment (pearsonclinical.co.uk)</u> if the child is over 9 years.

Consider alternatives to handwriting e.g., voice recorder, iPad, laptop or netbook.

Consider the use of a pen rather than pencil to improve fluency. If pen licenses are used within school, consider suitability for the pupil and the potential to give pen licenses for reasons other than neatness.

Incorporate handwriting/hand strengthening activities into daily plans, for example using age appropriate resources such as <u>Theraputty</u>, elastic bands, shoe lace tying, aqua/iron on beads, tweezer and chopstick games, peg activities, threading, jigsaws, lego, <u>funky fingers and finger gym (earlyearscareers.com)</u>.

Consider modifying activities that the pupil with perceptual difficulties may find challenging such as worksheets with lots of information, word searches or crosswords.

Use technology to support learning including apps, for example Dexteria Jr, Blobble Write and Hairy Letters.

Teach sequencing skills for everyday tasks to increase independence, for example putting on clothes in the right order etc.

Teach strategies to improve self-organisation, including use of diaries, planners, and checklists of daily equipment needed.

Encourage peer support through whole class awareness sessions.

Provide lined paper with spaces sufficiently wide enough for writing tasks.

Use of appropriate height chairs and tables. Consider supporting feet using a step or box.

Keep withdrawals from class to a minimum.

Make advised adaptations to the school environment e.g. changing plinths/ramps/hoists - building regulations link to ratio of space. Provide handrails on stairs and within bathroom areas or provide access to disabled toilets and/or personal care spaces.

Ensure a pupil is able to reach and use facilities e.g. hand basins/taps/coat pegs / lockers.

Consider appropriate settings for educational trips as well as transport to and from e.g. Use of a vehicle with tail-lift, specialist car seat etc.

Use appropriate size and height chairs/tables to encourage a correct posture and to support fine motor function and writing.

Whole setting interventions:

- Write Dance (writedancetraining.com) (suitable for KS1)
- Motor Skills United (tts-group)
- Clever Fingers
- <u>Teodorescu Write from the Start (Idalearning.com)</u>
- Squiggle Whilst You Wiggle (spreadthehappiness.co.uk)
- Keyboarding without Tears (lwtears.com)
- Ready Steady Write (buckshealthcare.nhs.uk)
- Physical Literacy (activeforlife.com)
- Balance bikes

- Yoga
- Supported writing

Consider any additional support for self-care tasks and establish personal care spaces which suit the needs of the pupil. Take additional advice from the pupil and/or parent/carer.

A whole school approach should be established to promote movement and positive postural management e.g., MOVE curriculum www.enhamtrust.org.uk.

Getting More Help: SEN Support

Request involvement from external services e.g. Occupational Therapy and Physiotherapy (bridgewater.nhs.uk).

Schools can link into Warrington's Children's Occupation Therapy Video Resources (bridgewater.nhs.uk).

Ensure any suggested specialist advice is shared with all school staff and incorporated into the pupil's Support Plan.

Differentiate the physical curriculum and incorporate OT/ PT exercises into everyday routines and/ or general class/ PE lessons.

Ensure access to additional and specialist equipment and therapy as advised by professionals such as Occupational Therapy and Physiotherapy (bridgewater.nhs.uk).

Seek advice from the Advanced Occupational Therapist / Sensory Integration Practitioner to implement advice from Bridgewater's Occupational Therapy / Physiotherapy such as bespoke therapy programmes and sensory diets.

Implement an <u>individualised postural management programme (www.gov.uk/government/publications)</u> as advised by Occupational Therapy.

Ensure any specialist equipment continues to meet the pupil's needs and contact relevant OT/ PT and liaise with the family regarding any repairs or alterations.

Some disabled pupils may require specialist moving and handling, treatment or facilities and in these cases are a <u>Manual Handling</u> <u>Environmental Assessment (hse.gov.uk)</u> should be completed.

Review advice from the <u>Health and Safety Executive (hse.gov.uk)</u> regarding the management of moving and handling and ensure all staff in the setting receive relevant and appropriate training to support this. This can be accessed via Warrington Borough Council's Training Team.

Liaise with Bridgewater's Specialist Community Nursing Team requiring any specialist medical interventions required by the pupil.

Consider the delegation of healthcare / nursing tasks to non-medical professionals in school (such as Teaching Assistants) and whether these are appropriate. Review advice from the Royal College of Nursing and Unison.

Undertake Co-ordination Matters activities and record outcomes.

Monitor and review specialist strategies and advice given by professionals such as Occupational Therapists and Physio Therapists.

Carry out risk assessments on a regular basis around:

- Manual Handling
- Chest physio
- Clinical tasks
- Feeding
- Move programme

The Toolkit: Sensory Integration

Quality First Teaching Approaches

In discussion with parents, talk about the pupil's sensory preferences and dislikes in order a build a picture of their sensory needs.

Look at how the pupil responds to the environment and make changes as appropriate e.g. lighting (i.e. reduce bright lights), noises and smells.

Identification of sensory processing difficulty and whole school approach.

Ensure a One-page profile is in place and shared with all teaching and non-teaching staff. Ensure staff are aware why these adaptations are needed and that the PUPILS does not receive consequences for engaging in sensory regulating behaviours or avoiding certain activities.

Introduce new activities or play equipment in a multi-sensory way to the pupil e.g. by showing, listening, saying, looking, writing, and drawing.

Providing access to small calm, quiet spaces, e.g. a small pop up tent or room with low level noise and lighting.

Access to a sensory room or designated space.

Continue to liaise with any health professionals, as appropriate.

Make use of resources such as:

- Move 'n' sit cushions
- Busy legz
- Movement breaks
- Fiddle/fidget toys
- Ear defenders
- Wobble cushions
- Chewelry
- Putty
- Therabands

Considerations for good transitions between stages of education, and how to plan and prepare for these e.g. allowing the pupils to have extra visits and ensure transfer of information.

Development of a transition plan for pupils moving between year groups, key stages, primary and secondary school, and on to Post 16 provision.

Consider access to a workstation or a privacy board to create a low distraction working environment for focused tasks.

Ensure staff understand that sensory needs are typical for pupils with Autism and also those that have experienced Developmental Trauma.

Consider whether it would be appropriate to allow an older pupils to leave lessons early when traveling between rooms or buildings to avoid large groups in corridors and enable extra travel time.

Implement sensory strategies advised in the Autism in Schools Toolkit and seek advice from ASD specialist lead teachers where appropriate.

Take-up Autism in Schools Sensory Integration Training.

Getting More Help: SEN Support

Build access to activities which meet the pupil's sensory needs into the day, for example: timetabled movement breaks, sensory circuits and access to other personalised sensory activities dependent on the outcome of the sensory assessments conducted.

Plan individual/small group activities dependent on the sensory needs identified such as state (sensory-processing.middletownautism.com) related resistance activities (activities to support the pupil to be more alert or calm) pushing against a wall, resistance bands, etc.

Providing access to a small, calm, quiet space e.g. a small room or tent.

SENDCo to support the key person/Teaching Assistant to plan differentiated activities and strategies to support the pupil.

If the pupil struggles with particular sensory materials, build up tolerance in activities slowly e.g. start off with dry resources and slowly add liquid.

Incorporate adaptations for sensory feedback into planning e.g. Include specific activities to provide sensory feedback for the pupil e.g. lifting and tidying heavy equipment away, putting on a backpack, using a weighted blanket. If they are unwilling to touch specific objects, offer alternatives such as using tools or putting cling film over objects and equipment.

Schools can link into Warrington's Children's Occupation Therapy Video Resources (bridgewater.nhs.uk).