

<b>Communication and Interaction: Speech, Language and Communication</b>	
<b>Need</b>	<b>Provision</b>
<p><b>Attention and Listening:</b></p> <ul style="list-style-type: none"> <li>• Difficulty paying attention during a shared activity, to an activity for an age appropriate length of time and listening to instructions whilst busy doing something else</li> <li>• Easily distracted and tends to prefer activities of their own choosing</li> <li>• Finds tasks with spoken instructions harder to complete than tasks where listening is not required</li> </ul> <p><b>Understanding:</b></p> <ul style="list-style-type: none"> <li>• Difficulty understanding age appropriate spoken instructions, abstract concepts (e.g. big, little, bravery), everyday words, longer and more complex spoken language e.g. listening to a story or multiple instructions (choose a pencil in a colour you like, then draw round your hand really carefully on the big yellow paper), questions starting with words such as when, where, who, what, why, how, age appropriate subject specific /curriculum vocabulary</li> <li>• Difficulty in remembering spoken information long enough to use it</li> </ul> <p><b>Spoken Language:</b></p> <ul style="list-style-type: none"> <li>• Uses a smaller range of words and shorter sentences than other children of their age, wrong words for things and/or uses general words such as ‘thingy’ ‘that’ ‘put’ and ‘get’</li> <li>• Misses out the small words and/or tends to repeat back what the adult has said</li> <li>• Sounds muddled or disorganised when talking in longer sentences</li> </ul>	<p><b>Promoting positive communication environments is the responsibility of all members of the staff in the setting. In addition to good Quality First Teaching some of the following may be required:</b></p> <ul style="list-style-type: none"> <li>• Ensure parents are fully aware of what is being done to support their child/young person and are able to support interventions</li> <li>• Daily personalised/small group learning to target identified areas of need and consider pre-teaching of words needed in lessons</li> <li>• Use a recommended screening tool such as Speech Link or WellComn to inform and plan next steps and/or provision. Further details at <a href="https://salt.ecch.org/professionals/screening-intervention">https://salt.ecch.org/professionals/screening-intervention</a></li> <li>• Use a recommended programme of intervention either independently or as advised by the Speech and Language Therapist (SaLT), Education Psychologist or Specialist Teacher. Further details at <a href="https://salt.ecch.org/school-age-intervention-tools">https://salt.ecch.org/school-age-intervention-tools</a> and <a href="https://salt.ecch.org/early-years-intervention-tools">https://salt.ecch.org/early-years-intervention-tools</a></li> <li>• Access training and implement advice regarding augmentative communication strategies as recommended by the SaLT via the Norfolk Local Offer at <a href="https://salt.ecch.org/professional-referral-form/">https://salt.ecch.org/professional-referral-form/</a></li> <li>• Seek advice from a Specialist Resource Base (SRB) <a href="https://www.norfolk.gov.uk/children-and-families/send-local-offer/education-and-training-0-25/schools/specialist-education/specialist-resource-bases-srbs">https://www.norfolk.gov.uk/children-and-families/send-local-offer/education-and-training-0-25/schools/specialist-education/specialist-resource-bases-srbs</a></li> <li>• Consider a School 2 School referral <a href="http://www.s2ssupport.co.uk/">http://www.s2ssupport.co.uk/</a></li> <li>• Seek advice for Educational Psychology and Specialist Support (EPSS) <a href="https://www.norfolkepss.org.uk">https://www.norfolkepss.org.uk</a></li> <li>• Access training and specialist ICT equipment as advised by Access Through Technology (ATT) or SaLT.</li> <li>• Interventions are evidenced based, for example <a href="https://www.sendgateway.org.uk/whole-">https://www.sendgateway.org.uk/whole-</a></li> </ul>

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<ul style="list-style-type: none"> <li>• Difficulty describing events in a way that is easy for the listener to understand</li> <li>• Difficulty in structuring sentences and expressing thoughts, opinion and knowledge clearly</li> <li>• Has a stammer/stutter e.g. lengthens or repeats some sounds or words or gets stuck</li> <li>• Unable to use spoken language to convey their thoughts, feelings and wishes</li> </ul> <p><b>Speech Sounds:</b></p> <ul style="list-style-type: none"> <li>• Difficulty recognising the difference between speech sounds</li> <li>• Misses out sounds from words, misses off ends of words or never uses some speech sounds</li> <li>• Substitutes one sound for another, has obvious difficulties in forming speech sounds</li> <li>• Difficulties using clear speech sounds in a whole sentence or conversation</li> </ul> <p><b>Social Communication:</b></p> <ul style="list-style-type: none"> <li>• Difficulty using language in social interactions, understanding the rules of conversation, maintaining a topic of conversation, responding appropriately to non-literal language, irony and jokes, social use of language, eye contact, initiating conversations, attention, taking the listener's perspective</li> </ul> <p>Difficulty understanding visual and written inference</p>	<p><u>school-send/what-works</u> or the Education Endowment Foundation (EEF) toolkit</p> <p>All the above should be closely monitored by the class teacher and SENCo</p> <p><b>Training for staff:</b></p> <ul style="list-style-type: none"> <li>• Elklan packages</li> <li>• Communication Friendly Schools</li> <li>• Word Aware</li> <li>• Talk Boost</li> </ul> <p><b>Questions to consider:</b></p> <ul style="list-style-type: none"> <li>• Has hearing been checked?</li> <li>• Is the environment suitable for good listening and attention?</li> <li>• Are there a lot of distractions when delivering SaLT interventions?</li> <li>• Are children sitting in the most appropriate place?</li> <li>• Are children given enough time to think about and answer questions?</li> <li>• Does the setting's cycle of support (assess, plan, do, review) continue while specialist advice is sought?</li> </ul>

<b>Communication and Interaction: Social Communication Difficulties/Autistic Spectrum</b>	
<b>Need</b>	<b>Provision</b>
<p><b>Cognition, Learning and Behaviours:</b></p> <ul style="list-style-type: none"> <li>• Uneven learning profile (may have particular strengths and difficulties)</li> <li>• Noticeable gap between attainment and ability</li> <li>• Difficulty in making connections, generalising skills and responding to adult direction</li> <li>• Poor understanding of social conventions (e.g. personal space) and expectations, leading to possible social isolation</li> <li>• Difficulty showing empathy, predicting own response and those of others</li> <li>• Resistance to change and exhibits sign of distress (this is could be due to sensory overload e.g. being overwhelmed by visual, auditory and/or physical stimulation), intense special interests and obsessive behaviours</li> </ul> <p><b>Social Communication:</b></p> <ul style="list-style-type: none"> <li>• Difficulty using language in social interactions</li> <li>• Difficulties understanding the rules of conversation</li> <li>• Difficulties in maintaining a topic of conversation</li> <li>• Difficulty responding appropriately to non-literal language, irony and jokes</li> <li>• Difficulty with the social use of language, requiring some direct teaching – eye contact, initiating conversations, attention, taking the listener’s perspective (empathy)</li> <li>• Difficulty understanding visual and written inference (reading between the lines) e.g. they all laughed at the man with the red boots and the red nose</li> </ul> <p><b>Children who experience difficulties with Speech, Language and Communication needs may show frustration through behaviours that challenge</b></p>	<p><b>Promoting positive communication environments is the responsibility of all members of the staff in the setting. In addition to good Quality First Teaching the following will be required:</b></p> <ul style="list-style-type: none"> <li>• Engage with resources for early intervention, such as Portage, to ensure positive transitions into early years settings. Early years transition forms are available at <a href="http://www.schools.norfolk.gov.uk/Early-years-foundation-stage/QualityandImprovement/NCC180908">http://www.schools.norfolk.gov.uk/Early-years-foundation-stage/QualityandImprovement/NCC180908</a></li> <li>• Make reasonable adjustments to the learning environment e.g. appropriate seating, individual work-station, visual timetable, timings of breaks and transition arrangements within the school day, use of timers</li> <li>• Make reasonable adjustments to enable CYP to cope with anxiety related issues</li> <li>• Incorporate time for Sensory Circuits, this may be appropriate for the whole class not just individual children with ASD</li> <li>• Use alternative means of communication/augmentative communication strategies (access training for staff and learners)</li> <li>• Use ICT resources appropriately and effectively for engagement, developing good learning behaviours and as a tool for writing and learning</li> <li>• Deliver interventions to develop social communication skills e.g. small group work, negotiating activities, turn-taking/sharing, role-play/social stories as appropriate</li> <li>• Request support from ASD Specialists (via Norfolk Local Offer at <a href="https://www.norfolk.gov.uk/children-and-families/send-local-offer/education-and-training-0-25/support-services/communication-and-interaction-support">https://www.norfolk.gov.uk/children-and-families/send-local-offer/education-and-training-0-25/support-services/communication-and-interaction-support</a>)</li> <li>• Seek advice from a Specialist Resource Base (SRB) <a href="https://www.norfolk.gov.uk/children-and-families/send-local-offer/education-and-training-0-25/schools/specialist-education/specialist-resource-bases-srbs">https://www.norfolk.gov.uk/children-and-families/send-local-offer/education-and-training-0-25/schools/specialist-education/specialist-resource-bases-srbs</a></li> </ul>

<b>Communication and Interaction: Social Communication Difficulties/Autistic Spectrum</b>	
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	<ul style="list-style-type: none"> <li>• Consider a School 2 School referral <a href="http://www.s2ssupport.co.uk/">http://www.s2ssupport.co.uk/</a></li> <li>• Seek advice for Educational Psychology and Specialist Support (EPSS) <a href="https://www.norfolkepss.org.uk">https://www.norfolkepss.org.uk</a></li> <li>• Be aware of the constraints of testing when ascertaining a CYP’s cognitive ability, attainment and progress and being flexible in approach to meet the needs of individuals</li> <li>• Interventions are evidenced based, for example <a href="https://www.sendgateway.org.uk/whole-school-send/what-works">https://www.sendgateway.org.uk/whole-school-send/what-works</a> or the Education Endowment Foundation (EEF) toolkit</li> </ul> <p><b>Training for staff may include:</b></p> <ul style="list-style-type: none"> <li>• Understanding ASD</li> <li>• Supporting Social Communication Difficulties</li> <li>• Elklan</li> <li>• Using Social Stories/Comic strip conversations</li> <li>• Supporting CYP with Sensory Processing issues</li> </ul> <p><b>Questions to consider:</b></p> <ul style="list-style-type: none"> <li>• Have the learner’s needs been considered to ensure that assessments are appropriate, accurate and informative?</li> <li>• Could the assessment be done in a different way to ensure a true picture is gained?</li> <li>• Have you audited your environment – what stimulus is there that may distress a learner with ASD?</li> <li>• What’s behind the teacher when they are teaching?</li> <li>• Consider making a video a point in time of your day and see what you notice – noise; visuals; distractions</li> <li>• Does the setting’s cycle of support (assess, plan, do, review) continue while specialist advice is sought?</li> </ul>

<b>Cognition and Learning</b>	
<b>Need</b>	<b>Provision</b>
<ul style="list-style-type: none"> <li>• The development / progress in learning for a CYP is at a slower rate and additional support is needed</li> <li>• The CYP is attaining at a level significantly below age-related expectation</li> <li>• There is evidence to suggest that the gap between the CYP and their peers is increasing</li> </ul>	<p><b>Enabling learners to access a broad and balanced curriculum is the responsibility of all members of staff in the setting. In addition to good Quality First Teaching the following will be required:</b></p> <ul style="list-style-type: none"> <li>• Differentiation is used to ensure the development of literacy and numeracy skills, expressive language and communication skills and to minimise behaviour and emotional difficulties</li> <li>• Access to adults who are skilled and experienced in supporting students with general and specific learning difficulties</li> <li>• Assessments focus on how the pupil is learning, more in-depth analysis of strengths and weaknesses and progress in relation to time</li> <li>• Arrangements to support the use and delivery of approaches/materials for students with Specific Learning Difficulties (SpLD) which may include multi-sensory teaching strategies, a focus on phonological awareness and/or motor skills programme</li> <li>• Make reasonable adjustments to the learning environment</li> <li>• Materials which reduce or support note taking, copying of diagrams and charts and/or alternative approaches to recording</li> <li>• Effective use of ICT equipment to support learning; for specialist ICT equipment, consider a referral to Access Through Technology (ATT) at <a href="http://www.schools.norfolk.gov.uk/Pupil-needs/Access-Through-Technology/index.htm">http://www.schools.norfolk.gov.uk/Pupil-needs/Access-Through-Technology/index.htm</a></li> <li>• Advice is sought from the Norfolk Local Offer at <a href="https://www.norfolk.gov.uk/children-and-families/send-local-offer/education-and-training-0-25/support-services/learning-and-cognition-support">https://www.norfolk.gov.uk/children-and-families/send-local-offer/education-and-training-0-25/support-services/learning-and-cognition-support</a></li> <li>• Request support from ASD Specialists (via Norfolk Local Offer at <a href="https://www.norfolk.gov.uk/children-and-families/send-local-offer/education-and-training-0-25/support-">https://www.norfolk.gov.uk/children-and-families/send-local-offer/education-and-training-0-25/support-</a></li> </ul>

<b>Cognition and Learning</b>	
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	<p><u>services/communication-and-interaction-support)</u></p> <ul style="list-style-type: none"> <li>• Seek advice from a Specialist Resource Base (SRB) <a href="https://www.norfolk.gov.uk/children-and-families/send-local-offer/education-and-training-0-25/schools/specialist-education/specialist-resource-bases-srbs">https://www.norfolk.gov.uk/children-and-families/send-local-offer/education-and-training-0-25/schools/specialist-education/specialist-resource-bases-srbs</a></li> <li>• Consider a School 2 School referral <a href="http://www.s2ssupport.co.uk/">http://www.s2ssupport.co.uk/</a></li> <li>• Seek advice for Educational Psychology and Specialist Support (EPSS) <a href="https://www.norfolkepss.org.uk">https://www.norfolkepss.org.uk</a></li> <li>• Appropriate interpersonal skills with other students are promoted</li> <li>• Mentoring/Learning mentors can be accessed by learners</li> <li>• SENCO accesses relevant Continued Professional Development (CPD)</li> <li>• Staff trained and able to support students with a range of learning difficulties, including SpLD. This might include support from external specialist professionals</li> <li>• Class teacher/SENCo makes good use of recommendations from outside agencies/specialists including the Norfolk Local Offer</li> <li>• Interventions are evidenced based, for example <a href="https://www.sendgateway.org.uk/whole-school-send/what-works">https://www.sendgateway.org.uk/whole-school-send/what-works</a> or the Education Endowment Foundation (EEF) toolkit</li> </ul> <p><b>Questions to consider:</b></p> <ul style="list-style-type: none"> <li>• Does the setting foster good home/school relationships?</li> <li>• Are effective lines of communication between the setting and CYP/parents/carers open and accessible?</li> <li>• Is the setting consistent in its approach to meeting need?</li> <li>• Does the setting’s cycle of support (assess, plan, do, review) continue while specialist advice is sought?</li> </ul>

<b>Social, Emotional, Mental Health</b>	
<b>Need</b>	<b>Provision</b>
<p>Needs may present in a variety of ways including:</p> <ul style="list-style-type: none"> <li>• Low self-esteem in some areas which requires support in order to raise confidence and self-belief</li> <li>• Displays behaviours that interfere with own learning and with the learning of others</li> <li>• Withdrawn and isolated – limited communication, difficulties communicating feelings</li> <li>• Poor concentration</li> <li>• Engages in attention-seeking behaviour and regularly seeks approval from adults and peers</li> <li>• Poor organisational skills</li> <li>• Communicates failure in tasks before starting</li> <li>• Difficulties in making and sustaining appropriate relationships with adults and peers</li> <li>• Can often be easily influenced by others or in contrast can persuade others to do something against their will</li> <li>• Difficulties with sharing and turn taking</li> <li>• Poor attendance and/or reluctance to participate</li> <li>• Difficulty in accepting responsibility for own actions</li> <li>• Occasionally be verbally and physically</li> </ul>	<p><b>Promoting good social, emotional and mental health is the responsibility of all members of setting staff and community. In addition to good quality first teaching, the following may be required:</b></p> <ul style="list-style-type: none"> <li>• All staff should have an awareness of the early signs of mental health problems (Mood; Actions; Social; Keep Talking; <a href="http://www.actionforchildren.org.uk">www.actionforchildren.org.uk</a>) and what to do if they think they have identified a developing problem</li> <li>• Be an access point for early support for children with emerging problems</li> <li>• Identify children with mental health problems through the effective use of data and an effective pastoral system</li> <li>• Use the Strengths and Difficulties Questionnaire (SDQ)* and/or the Boxall Profile to help them judge whether individual pupils might be suffering from a diagnosable mental health problem and involve their parents/carers and the pupil in considering why they behave in certain ways</li> <li>• Understand the causes of behaviour and use effective approaches to behaviour management.</li> <li>• Consider ‘Norfolk Steps’ which provides training and consultancy to settings to support early intervention and manage complex or challenging behaviour <ul style="list-style-type: none"> <li>• Use a graduated approach to inform a clear cycle of support. An assessment to establish a clear analysis of the pupil’s needs; a plan to set out how the pupil will be supported; action to provide that support and regular reviews to assess the effectiveness, making changes where necessary. The cycle of internal, setting-based support will need to continue while further specialist advice is sought.</li> </ul> </li> <li>• Seek appropriate support for children and young people experiencing negative experiences and distressing events, including referrals to appropriate services e.g.), Early Help; Child and Adolescent Mental Health Services (CAMHS); support services (e.g. Point 1): <ul style="list-style-type: none"> <li>○ <a href="https://www.norfolk.gov.uk/children-and-families/early-help-and-family-support">https://www.norfolk.gov.uk/children-and-families/early-help-and-family-support</a></li> <li>○ <a href="https://www.norfolk.gov.uk/care-support-and-health/health-and-wellbeing/childrens-health-and-wellbeing/mental-health-camhs/services-in-norfolk">https://www.norfolk.gov.uk/care-support-and-health/health-and-wellbeing/childrens-health-and-wellbeing/mental-health-camhs/services-in-norfolk</a></li> <li>○ <a href="https://www.justonenorfolk.nhs.uk/emotional-health">https://www.justonenorfolk.nhs.uk/emotional-health</a> or 0300 300 0123</li> <li>○ <a href="https://point-1.org.uk/contact-point-1">https://point-1.org.uk/contact-point-1</a></li> </ul> </li> <li>• Seek advice from a Specialist Resource Base (SRB)</li> </ul>

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<p>aggressive towards others requiring intervention to support regulation of response</p> <ul style="list-style-type: none"> <li>• Sometimes engages in behaviours that pose a high risk or harm to themselves or others</li> <li>• At times, challenges rules and authority, and requires support in order to conform</li> <li>• CYP with medical conditions, physical and sensory needs as well as CYP who are/have been in care and/or are adopted may also have particularly SEMH needs</li> </ul>	<p><a href="https://www.norfolk.gov.uk/children-and-families/send-local-offer/education-and-training-0-25/schools/specialist-education/specialist-resource-bases-srbs">https://www.norfolk.gov.uk/children-and-families/send-local-offer/education-and-training-0-25/schools/specialist-education/specialist-resource-bases-srbs</a></p> <ul style="list-style-type: none"> <li>• Consider a School 2 School referral <a href="http://www.s2ssupport.co.uk/">http://www.s2ssupport.co.uk/</a></li> <li>• Seek advice for Educational Psychology and Specialist Support (EPSS) <a href="https://www.norfolkepss.org.uk">https://www.norfolkepss.org.uk</a></li> <li>• Staff should receive sufficient and suitable training to support CYP with SEMH needs</li> <li>• Interventions are evidenced based, for example <a href="https://www.sendgateway.org.uk/whole-school-send/what-works">https://www.sendgateway.org.uk/whole-school-send/what-works</a> or the Education Endowment Foundation (EEF) toolkit</li> </ul> <p><b>Questions to consider:</b></p> <ul style="list-style-type: none"> <li>• Type of need CYP has and how best to describe the need?</li> <li>• What are the CYP's strengths?</li> <li>• What is the impact of the CYP's behaviour or attitude on themselves, others and their environment?</li> <li>• How prolonged or persistent is the need?</li> <li>• What has happened in the CYP's life? Has there been any changes of behaviour?</li> <li>• When does the behaviour occur? Is there a marked contrast between the home and school behaviour?</li> <li>• What support and advice are available? (adapted from Peter Wilson, 2004)</li> <li>• Have you engaged with the services in your part of Norfolk?</li> <li>• Is a risk assessment necessary? <a href="https://www.norfolkscb.org/wp-content/uploads/2015/04/Norfolk-Joint-Services-Policy-on-Positive-Handling-Strategies21.pdf">https://www.norfolkscb.org/wp-content/uploads/2015/04/Norfolk-Joint-Services-Policy-on-Positive-Handling-Strategies21.pdf</a> and <a href="https://www.norfolkscb.org/wp-content/uploads/2015/04/Handling-Behaviours-that-Challenge1.pdf">https://www.norfolkscb.org/wp-content/uploads/2015/04/Handling-Behaviours-that-Challenge1.pdf</a></li> <li>• Have parents and CYP been provided with advice numbers? <ul style="list-style-type: none"> <li>○ Just One Number: 0300 300 0123 Advice for children, young people, school staff, parents/carers.</li> <li>○ Chat Health: 07480635060 Text messaging service for 13-19 year-olds to confidentially seek help about a range of issues, make an appointment with a school nurse, or find out how to access other local services, including emotional support or sexual health services.</li> </ul> </li> </ul>





<b>Social, Emotional, Mental Health</b>	
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	<ul style="list-style-type: none"><li>○ <b>Parent line: 07520 631590</b> for parents/carers of a child/young person (0-19 years) living in Norfolk. Text messaging service to talk to practitioners for health-related advice or information.</li><li>• Does the setting's cycle of support (assess, plan, do, review) continue while specialist advice is sought?</li></ul>

SEPTEMBER 2019

### Sensory Needs

**Being inclusive to children and young people with sensory needs is the responsibility of everyone in the setting which will involve engagement with the Virtual School for Sensory Support <http://vsss.virtual-school.org.uk/>**

Need	Provision
<p><b>Hearing Impairment (HI):</b></p> <ul style="list-style-type: none"> <li>• Poor listening skills in certain situations</li> <li>• Delayed speech and language</li> <li>• Difficulty maintaining attention</li> <li>• Difficulty following instructions</li> <li>• Diagnosed fluctuating conductive hearing loss e.g. glue ear</li> <li>• Diagnosed permanent hearing loss</li> <li>• Diagnosed unilateral (one-sided hearing) loss</li> <li>• Diagnosed mild or moderate loss</li> <li>• Diagnosed long term conductive (loss from the outer ear into the middle ear) loss</li> <li>• Hearing loss is impacting on learning</li> <li>• Specialised assessments demonstrate below expected level for chronological age or is at risk of falling behind peers</li> <li>• Difficulties in making and maintaining friendships</li> <li>• All listening devices e.g. hearing aids, cochlear implants and radio aids are functioning optimally in order to access speech</li> <li>• CYP feels included in school environment</li> <li>• The gap between child’s assessed levels and peer levels to be narrowed</li> <li>• Equal access to curriculum, premises, information and assessment</li> <li>• Opportunities to meet with other deaf peers</li> <li>• May need alternative communication approach e.g. Total Communication, Sign Bilingualism and Oral/Aural</li> </ul>	<p><b>Hearing Impairment (HI):</b></p> <ul style="list-style-type: none"> <li>• Complete the checklist - Identifying Deafness - Early Years: <a href="http://vsss.virtual-school.org.uk/professionals/identifying-deafness---early-years">http://vsss.virtual-school.org.uk/professionals/identifying-deafness---early-years</a></li> <li>• Identifying Deafness - Educational Settings: <a href="http://vsss.virtual-school.org.uk/professionals/identifying-deafness-educational-settings">http://vsss.virtual-school.org.uk/professionals/identifying-deafness-educational-settings</a></li> <li>• If concerns still exist refer, to school nurse/GP</li> </ul> <p><b>In addition to good Quality First Teaching the following may be required:</b></p> <ul style="list-style-type: none"> <li>• Use of hearing aids and other assistive listening devices e.g. radio aids as appropriate and advised by VSSS</li> <li>• Seek advice from a Specialist Resource Base (SRB) <a href="https://www.norfolk.gov.uk/children-and-families/send-local-offer/education-and-training-0-25/schools/specialist-education/specialist-resource-bases-srbs">https://www.norfolk.gov.uk/children-and-families/send-local-offer/education-and-training-0-25/schools/specialist-education/specialist-resource-bases-srbs</a></li> <li>• Classroom management strategies, daily personalised/small group learning to target identified areas of need</li> <li>• Close monitoring of the above by SENCo/class teacher.</li> </ul> <p><b>Differentiated learning opportunities, for example:</b></p> <ul style="list-style-type: none"> <li>• Use of radio aid in all lessons, Soundfield systems</li> <li>• Specialist language programme e.g. Elklan and reading programme</li> <li>• Virtual School for Sensory Support (VSSS) may offer: <ul style="list-style-type: none"> <li>○ Hearing aid checks using specialist equipment</li> <li>○ Specialist language assessments</li> </ul> </li> </ul>



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Need	Provision
	<ul style="list-style-type: none"> <li>○ Monitoring of social and emotional well-being and inclusion</li> <li>○ Opportunities to champion the Voice of the Child</li> <li>○ Advice on specialist arrangements for examinations and assessments</li> <li>○ Personalised programmes of work and language development</li> <li>○ Advice on good acoustic environment - consideration of Soundfield systems</li> <li>○ Regular direct input, where appropriate e.g. pre and post tutoring for curriculum, language programme</li> <li>○ Access to additional specialist curriculum delivered by VSSS e.g. Deaf Studies/PUD (Personal Understanding of Deafness) in order to come to terms and manage their hearing loss and equipment</li> <li>○ To promote independence and social inclusion in an appropriate way e.g. participation in activities – nurture groups, sports and events</li> <li>○ Referral and ongoing support as appropriate from the VSSS Child Psychotherapist</li> <li>● Advice on referral to speech therapy</li> <li>● Reading programme</li> </ul> <p><b>Training for staff may include:</b></p> <ul style="list-style-type: none"> <li>● Glue ear training</li> <li>● BTEC for Teaching Assistants</li> <li>● Bespoke training for staff in meeting needs of a deaf CYP</li> <li>● Training for staff in appropriate communication strategies e.g. signing, cued speech and visual phonics</li> </ul>



### Sensory Needs

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Need	Provision
	<p><b>Questions to consider:</b></p> <ul style="list-style-type: none"><li>• Is the environment suitable for good listening and attention?</li><li>• Are CYP sitting in the most appropriate place?</li><li>• Are CYP given enough time to think about and answer questions?</li><li>• Are there basic modifications that can be made to improve acoustics?</li></ul>

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Need	Provision
<p><b>Visual Impairment (VI):</b></p> <ul style="list-style-type: none"> <li>• Problems with balance</li> <li>• Resistance to visual activities e.g. reading</li> <li>• Poor spatial awareness</li> <li>• Remote viewing (CYP looking in a different direction to that which is expected)</li> <li>• Poor colour differentiation</li> <li>• Unexplained tiredness and headaches</li> <li>• Poor hand-eye co-ordination</li> <li>• A diagnosed eye condition which impacts on learning and may require specialist training, resources and/or equipment</li> <li>• Reduced visual acuity (clarity) and/or field loss in one or both eyes, which affects learning</li> <li>• Specialised assessments demonstrate below expected level for chronological age or is at risk of falling behind peers</li> <li>• VI impacts on mobility and orientation</li> <li>• VI impacts on self-help and independence skills</li> <li>• Difficulties with establishing and maintaining friendship which can lead to social isolation</li> <li>• Supports the “crisis interventions” from Virtual School Sensory Support and the input required to develop Habilitation and Independence skills (Section 17 assessment)</li> </ul>	<p><b>Visual Impairment (VI):</b></p> <p>Complete the checklist Identifying Vision Impairment - Educational Settings: <a href="http://vsss.virtual-school.org.uk/professionals/identifying-vision-impairment-educational-settings">http://vsss.virtual-school.org.uk/professionals/identifying-vision-impairment-educational-settings</a></p> <p>If concerns still exist refer to GP</p> <p><b>In addition to good Quality First Teaching the following may be required:</b></p> <ul style="list-style-type: none"> <li>• Appropriate differentiation or modifications to the curriculum or to the environment and assessment and exam materials and recording of answers</li> <li>• Strategies to include a learner with an eye condition are in place and identified</li> <li>• VSSS may offer strategies as follows:             <ul style="list-style-type: none"> <li>○ Advice and guidance on modified access to learning</li> <li>○ Advice and guidance on modifications to exams and assessment</li> <li>○ Suggested teaching strategies to meet the needs of individual learners</li> <li>○ How to recognise the different needs inherent in different eye conditions</li> <li>○ Advice and guidance to teaching staff on developing ways to support progress</li> <li>○ Opportunities to champion the Voice of the Child</li> <li>○ Visual stimulation activities designed to meet the needs of CYP</li> <li>○ The CYP the ability to express their needs and have an in depth understanding of the implications of their eye condition</li> </ul> </li> </ul>



### Sensory Needs

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Need	Provision
	<ul style="list-style-type: none"><li>○ To work with settings and other agencies to support transition through phases</li><li>○ To work with Health and Social Care to ensure systems are in place to identify CYP with VI</li><li>○ To support the implementation of specialist skills e.g. Skills Ladders, eDCC certification, touch typing and habitation skills</li><li>○ To promote independence and social inclusion in an appropriate way e.g. participation in activities – nurture groups, sports and events</li><li>○ Referral and ongoing support as appropriate from the VSSS Child Psychotherapist</li></ul> <p><b>Training for staff may include:</b></p> <ul style="list-style-type: none"><li>● Training in the use of specialist equipment to support access to learning.</li><li>● Bespoke training for staff in meeting needs of a vision impaired CYP</li><li>● BTEC for Teaching Assistants – further details at <a href="http://vsss.virtual-school.org.uk">vsss.virtual-school.org.uk</a></li></ul> <p><b>Questions to consider:</b></p> <ul style="list-style-type: none"><li>● Are CYP sitting in the most appropriate place?</li><li>● Are CYP given enough time to think about and answer questions?</li><li>● Are there basic modifications that can be made to improve the environment?</li></ul>

### Sensory Needs

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Need	Provision
<p><b>Multi-Sensory Impairment (MSI):</b></p> <ul style="list-style-type: none"> <li>• A mild vision and a mild hearing loss</li> <li>• A combination of one mild and one moderate sensory loss</li> <li>• Tires easily and attention and concentration will lapse at times</li> <li>• Isolated from peers and finds social interaction challenging</li> <li>• Communication with adults and peers is challenging</li> <li>• Difficulty accessing the curriculum and other information e.g. assembly, notices, lunch arrangements, clubs etc.,</li> <li>• Needs support to access the settings e.g. mobility, orientation and dependence</li> <li>• Specialised assessments demonstrate below expected level for chronological age or is at risk of falling behind peers</li> </ul> <p><i>See descriptors for both vision and hearing impairment</i></p>	<p><b>Multi-Sensory Impairment (MSI):</b></p> <p>In addition to good Quality First Teaching the following will be required:</p> <ul style="list-style-type: none"> <li>• Whole setting training – Multi-Sensory Impairment training from VSSS so all staff understand the needs of the CYP, including teachers, teaching assistants and midday supervisory assistants. This could include the following and will involve the class teacher(s) being supported by the qualified teacher of MSI from VSSS:             <ul style="list-style-type: none"> <li>○ Good awareness of functioning of CYP’s hearing and vision and the impact of this on learning</li> <li>○ Adaptation of materials and activities, for example:                 <ul style="list-style-type: none"> <li>○ Enlarged print</li> <li>○ Tactile models</li> <li>○ Activity cues</li> <li>○ Seating arrangements</li> <li>○ Decluttering</li> <li>○ Access to information and keeping on task</li> <li>○ Scaffolding of activities i.e. giving sensitive support whilst optimising independence</li> <li>○ Encouragement to develop friendships</li> <li>○ Breaks as appropriate</li> <li>○ Home/school book</li> <li>○ An individual communication approach may be required e.g. timetable with tactile cues, a communication passport to help with consistency amongst staff/family.</li> </ul> </li> <li>○ Teaching Assistant (preferably Intervenor trained) to provide support for the CYP to access the curriculum; additional information; access the environment; encourage the development of friendships; support medical needs</li> </ul> </li> </ul>



### Sensory Needs

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Need	Provision
	<ul style="list-style-type: none"><li>○ Habilitation for mobility and life skills as appropriate delivered by a qualified Habilitation Officer</li><li>○ Environmental audit and adaptations by MSI Teacher/Habilitation Officer</li><li>○ CYP will need adaptations and reasonable adjustments to access the curriculum and additional information</li><li>○ Ongoing assessment and advice from a qualified Teacher of the MSI</li><li>○ Transition is a particularly challenging time for young people with MSI.</li><li>○ Consideration should be given to capturing the aspirations and wishes of the young person pre-transition</li></ul> <p><i>See training and questions to consider from HI and VI, above</i></p>



<b>Physical Needs</b>	
<b>Need</b>	<b>Provision</b>
<p>Needs may present in a variety of ways including:</p> <ul style="list-style-type: none"> <li>• Frequent trips and falls</li> <li>• Cautious on steps or stairs</li> <li>• Bumps into people or furniture etc regularly</li> <li>• Gross motor skills lack fluency and lag behind peers</li> <li>• Use of mobility or walking aids (e.g. wheelchair or walking frame)</li> <li>• May dislike PE and similar activities</li> <li>• Slow to change before/after PE and clothes/shoes on incorrectly</li> <li>• Difficulties with pencil skills or handwriting</li> <li>• Difficulties manipulating concrete resources in maths</li> <li>• Difficulties with fine motor activities such as threading, craft, scissors</li> <li>• Progress across the curriculum may be affected by a condition or medication</li> <li>• Requires support to develop independence</li> <li>• Able to participate in classroom activities, but difficulties in undertaking certain tasks have a significant impact on pace of work</li> <li>• Concerns around social inclusion</li> <li>• May act the 'clown' to hide difficulties</li> <li>• Difficulties with self-esteem, confidence and emotional well-being</li> <li>• Physical needs may affect their relationships with peers</li> <li>• May have medical devices to support feeding or breathing for example</li> <li>• May require support with toileting</li> </ul>	<p><b>Being inclusive to children and young people with physical needs is the responsibility of everyone in the setting. If a physical need is identified, support a referral to specialist service (e.g. Occupational Therapy), then follow advice.</b></p> <p><b>In addition to good Quality First Teaching the following will be required:</b></p> <ul style="list-style-type: none"> <li>• Training, advice and monitoring from specialist services e.g. Occupational Therapist (OT), Physiotherapist, School Nurse</li> <li>• Reasonable adjustments e.g. changes to uniform, hoists, medical/care plan, intimate care plan</li> <li>• Therapy programmes e.g. Speech and Language Therapy, Physiotherapy, Occupational Therapy (OT)</li> <li>• Specialist chairs, standing frames, (as advised and provided by specialist services)</li> <li>• Access to a Key Worker</li> <li>• Support CYP to use alternative and augmentative communication under guidance from SALT</li> <li>• Programmes to develop specific identified gross and fine motor skills as advised by specialist services e.g. OT and Physiotherapy and close liaison with those services and the parents/carers</li> <li>• Technology to access curriculum and information - if the IT resources do not meet need refer to Access Through Technology (ATT) Hardware e.g. rollerball, adapted keyboard and software e.g. predictive text, talking word processing</li> <li>• Implementation of eating/drinking advice provided by SALT due to an identified need</li> <li>• Monitoring of above and close liaison with parents/carers and SALT</li> <li>• Additional assistance to access the curriculum, manage condition and move around the site</li> <li>• Emotional support</li> </ul>

<b>Physical Needs</b>	
<b>Need</b>	<b>Provision</b>
	<ul style="list-style-type: none"> <li>• Risk assessment and consideration of school accessibility plan</li> <li>• Referral for moving and handling the CYP within the school environment</li> </ul> <p><b>Resources:</b></p> <ul style="list-style-type: none"> <li>• Fizzy Programme for balance, ball skills and fine motor skills: <a href="https://www.nhs.uk/healthcare-professionals/paediatric-occupational-therapy/fizzy-programme/">https://www.nhs.uk/healthcare-professionals/paediatric-occupational-therapy/fizzy-programme/</a></li> <li>• Movers and Creators/Smart Moves programmes: <a href="https://www.smartcc.co.uk/smart-products.html">https://www.smartcc.co.uk/smart-products.html</a></li> <li>• Local health and therapy services for downloads and referral information: <a href="https://childrens.nhc.nhs.uk/childrens-occupational-therapy/">https://childrens.nhc.nhs.uk/childrens-occupational-therapy/</a> <a href="https://childrens.nhc.nhs.uk/childrens-nursing/">https://childrens.nhc.nhs.uk/childrens-nursing/</a> <a href="https://www.jpaget.nhs.uk/departments-services/children-young-peoples-services/newberry-clinic-(community-paediatrics)/childrens-therapy/">https://www.jpaget.nhs.uk/departments-services/children-young-peoples-services/newberry-clinic-(community-paediatrics)/childrens-therapy/</a> <a href="http://www.nnuh.nhs.uk/our-services/our-hospitals/jennyind/who-we-are-and-what-we-do/physiotherapy/">http://www.nnuh.nhs.uk/our-services/our-hospitals/jennyind/who-we-are-and-what-we-do/physiotherapy/</a> <a href="http://www.gehkl.nhs.uk/Roxburgh.aspx?s=information&amp;ss=departmental.information&amp;p=Roxburgh">http://www.gehkl.nhs.uk/Roxburgh.aspx?s=information&amp;ss=departmental.information&amp;p=Roxburgh</a> <a href="https://salt.ecch.org/">https://salt.ecch.org/</a></li> </ul> <p><b>Training for staff may include:</b></p> <ul style="list-style-type: none"> <li>• Appropriate early years training in Portage ‘small steps’ approach to learning</li> <li>• Training for use of specialist equipment</li> <li>• Training for use of medical devices</li> <li>• Moving and handling training</li> </ul>



<b>Physical Needs</b>	
<b>Need</b>	<b>Provision</b>
	<ul style="list-style-type: none"><li>• Training in specific therapy programmes as recommended by NHS professionals</li><li>• Condition specific training e.g. cerebral palsy, epilepsy, diabetes</li></ul> <p><b>Questions to consider:</b></p> <ul style="list-style-type: none"><li>• Does the CYP need a personal emergency evacuation plan?</li><li>• Has the setting made reasonable adjustments to accommodate (Inclusion and Equality Act, 2010)?</li><li>• Does your setting need to review its accessibility plan?</li><li>• Does the setting's cycle of support (assess, plan, do, review) continue while specialist advice is sought?</li></ul>

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