

Our Provision for pupils with SEND

**COMMUNICATION AND INTERACTION:
Speech, Language and Communication Needs (SLCN)**

How we identify needs, assess and review progress	How we adapt teaching to ensure access to the curriculum	How we provide support and intervention for those with identified needs.
<ul style="list-style-type: none"> • The class teacher and the teaching assistant keep careful track of the child and record any observations. These observations could be in class or during playtimes and lunchtimes. • If the child continues to be of concern the SENDCo will observe and either suggest intervention strategies or refer to the Speech and Language Team (SALT). • We look at the impact that speech, language and communication needs is having on other areas of the curriculum and the child's general wellbeing. • An Individual Provision Map (IPM) if appropriate is written with clearly identified outcomes, provision being provided. (All IPMs are written in conjunction with the pupil and their parent/carer) • The pupil is carefully monitored and reviewed after a term to ensure that progress is being made. If progress is not being made then either other interventions are suggested or 	<ul style="list-style-type: none"> • We follow advice/recommendations from external agencies. • Provide suitable trained teaching assistants to run speech and language programmes. • Resources are purchased to support children e.g. speech and language games, recording equipment etc. <p>Receptive language users:</p> <ul style="list-style-type: none"> • All instructions given are simple and clear. • Provide support for children to make sure that they understand what is expected. <p>Expressive language users:</p> <ul style="list-style-type: none"> • Build time in for children to take part in activities to develop expressive language. • Provide support for children through experienced teaching assistants in class. 	<ul style="list-style-type: none"> • Following specific interventions as suggested by the speech and language team (SALT). • Provide trained teaching assistants to deliver speech and language programmes in school. This may be on a one-to-one basis or in small groups. • Regular feedback to parents/carers and giving parents/carers suggestions of how they can help their child at home.

<p>another referral is made or an Educational Health Care Plan (EHCP) assessment is requested.</p> <ul style="list-style-type: none"> • Pupils are regularly reviewed through internal tracking data, standardised assessment scores and national assessments such as SATs and the year 1 phonic screening. • If pupils have a Statement of special educational need or an Educational Health and Care Plan they have yearly annual reviews to review progress. 	<p>Articulation of sounds issues:</p> <ul style="list-style-type: none"> • Children may have a specific speech and language programme to follow - trained teaching assistants will administer these programmes with children on a one-to-one basis or in a small group. 	
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**COMMUNICATION AND INTERACTION:
Autistic Spectrum Disorder/Condition (ASD)**

How we identify needs, assess and review progress	How we adapt teaching to ensure access to the curriculum	How we provide support and intervention for those with identified needs.
<ul style="list-style-type: none"> • The class teacher and the teaching assistant keep careful track of the child and record any observations. These observations could be in class or during playtimes and lunchtimes. • Tracking progress through the National Curriculum and identifying barriers to learning. • Getting to know the child well and understanding patterns of behaviour or specific needs responding to these. 	<ul style="list-style-type: none"> • Visual timetables and where suitable individual timelines are used within the classroom and children (where possible) are prepared in advance when there are changes to the routines. • The anxiety levels of the pupil are monitored and subtle intervention is put into place before the pupil becomes anxious. • We adapt the curriculum or the style of teaching to cater for individual needs, e.g give clear precise and direct 	<ul style="list-style-type: none"> • Social stories/comic strip conversations. • Circle of friends. • Visual timetables • Individual timelines • Quiet/special places for reflection. • Refer children to Houghton Outreach service for advice. • Refer children to Educational Psychologist for appropriate

<ul style="list-style-type: none"> • An Individual Provision Map (IPM) if appropriate is written with clearly identified outcomes, provision being provided. (All IPMs are written in conjunction with the pupil and their parent/carer) • If the child continues to be of concern the SENDCo will observe and either suggest intervention strategies or refer the pupil to an outside agency such as the Educational Psychologist or Haughton Outreach.. • If appropriate a referral to CAMHs will be made through the CAF/TAC process. A Connors questionnaire will be completed by the school team which may possibly lead to a formal diagnosis. • Parents can also refer their child for assessment into ASD (Autistic Spectrum Disorder) traits by visiting their GP. • The pupil is carefully monitored and reviewed after a term to ensure that progress is being made. If progress is not being made then either other interventions are suggested or another referral is made or an Educational Health Care Plan (EHCP) assessment is 	<p>instructions.</p> <ul style="list-style-type: none"> • Use social stories and small nurture groups or on an individual basis. • Support is provided for children if they need some 'time out' of the classroom. 	<p>assessment of needs.</p> <ul style="list-style-type: none"> • Refer to CAHMS for advice. • Regular feedback to parents/carers and giving parents/cares suggestions of how they can help their child at home. • Support from our Family link worker and or our Learning Mentor and or our Pastoral care assistants.
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<p>requested.</p> <ul style="list-style-type: none"> • Pupils are regularly reviewed through internal tracking data, standardised assessment scores and national assessments such as SATs and the year 1 phonic screening. • If pupils have a Statement of special educational need or an Educational Health and Care Plan they have yearly annual reviews to review progress. 		
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**COGNITION AND LEARNING:
General/Moderate Learning Difficulties. (MLD)**

How we identify needs, assess and review progress	How we adapt teaching to ensure access to the curriculum	How we provide support and intervention for those with identified needs.
<ul style="list-style-type: none"> • The class teacher and the teaching assistant keep careful track of the child and record any observations. These observations could be in class or during playtimes and lunchtimes. • If the child continues to be of concern the SENDCo will observe and either suggest intervention strategies or refer to the LSAT for additional support and advice. • The pupil is carefully monitored and reviewed after a term to ensure progress is being made. If progress is not being made then either other interventions are suggested or another referral is made or an application for an Educational Health and 	<ul style="list-style-type: none"> • Pupils are encouraged to work within small groups with the support of an additional adult. • Pupils are given work which is carefully differentiated and where appropriate pupils will work in ability groups. • Pupils are encouraged to use resources/apparatus to support their learning such as word banks, number lines, bead strings. • Specific interventions are put into place to aid pupils to develop the skills that they require to be able to access the curriculum. • Adapting to children using different learning styles, for example, precision 	<ul style="list-style-type: none"> • Touch type activities such as dance mat from the BBC website. • Following advice from external agencies. • Purchasing resources to support children. • Support children through additional adult in the classroom. • Regular feedback to parents/carers and giving parents/cares suggestions of how they can help their child at home.

<p>Care Plan is requested.</p> <ul style="list-style-type: none"> • Pupils are regularly reviewed through internal tracking data, standardised assessment scores and national assessments such as SATs and the year 1 phonic screening. • If pupils have a Statement of special educational need or an Educational Health and Care Plan they have yearly annual reviews to review progress. 	<p>teaching, multi-sensory learning.</p> <ul style="list-style-type: none"> • Having children in target groups or booster groups within the class. • Providing children with SMART targets. 	
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**COGNITION AND LEARNING:
Specific Learning Difficulties e.g Dyslexia, Dyscalculia. (SpLD)**

How we identify needs, assess and review progress	How we adapt teaching to ensure access to the curriculum	How we provide support and intervention for those with identified needs.
<ul style="list-style-type: none"> • The class teacher and the teaching assistant keep careful track of the child and record any observations. These observations could be in class or during playtimes and lunchtimes. • If the child continues to be of concern the SENDCo will observe and either suggest intervention strategies or refer to an external agency. • SENDCo will administer the Lucid Rapid test as an indicator to dyslexia. • Refer to LSAT for further dyslexia screening. • For some pupils an assessment with the 	<ul style="list-style-type: none"> • Pupils are encouraged to work with an adult within a small group when appropriate. For some activities pupils may be grouped within ability level groups. • Follow advice from outside agencies. • Any information that is displayed on the interactive whiteboard is presented on a pastel background. • Pupils receive specific interventions to aid them with acquiring the skills that they need to be able to access the curriculum. Pupils are encouraged work within the classroom with subtle support. • Pupils are encouraged to develop own 	<ul style="list-style-type: none"> • Toe by Toe • Memory activities such as pellmanism, use of ICT games. • Touch typing activities such as Dance Mat from the BBC website. • Coloured overlay (to support pupils with visual stress) • Providing a variety of resources to support learning above and beyond what is in the classroom. • Support for parents/carers by recommending resources to use at home. • Regular feedback to parents/carers and

<p>schools Educational Psychologist is requested.</p> <ul style="list-style-type: none"> The pupil is carefully monitored and reviewed after a term to ensure progress is being made. If progress is not being made then either other interventions are suggested or another referral is made or an application for an Educational Health and Care Plan is requested. Pupils are regularly reviewed through internal tracking data, standardised assessment scores and national assessments such as SATs and the year 1 phonic screening. If pupils have a Statement of special educational need or an Educational Health and Care Plan they have yearly annual reviews to review progress. 	<p>strategies to help them overcome the difficulties that they have, for example learning a mnemonic to aid with remembering spellings.</p> <ul style="list-style-type: none"> Adapting to children's needs by using different learning styles , e.g precision teaching, multi-sensory learning. Having children in target groups or booster classes within class. Pupils are encouraged to access resources to support their learning such as word banks, number lines etc. Pupils are given the opportunities to revisit concepts more frequently than other pupils to ensure that pupils are secure with concepts. 	<p>giving parents/cares suggestions of how they can help their child at home.</p>
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SOCIAL, EMOTIONAL and MENTAL HEALTH (SEMH)

How we identify needs, assess and review progress	How we adapt teaching to ensure access to the curriculum	How we provide support and intervention for those with identified needs.
<ul style="list-style-type: none"> The class teacher and the teaching assistant keep careful track of the child and record any observations. These observations could be in class or during playtimes and lunchtimes. Are children experiencing behaviour problems, withdrawn, attention needing 	<ul style="list-style-type: none"> Pupils are encouraged to work with others within a small group with the support of an adult. Pupils are encouraged to share their ideas with others and adults model how to take turns, share and negotiate with their peers Pupils are provided with clear guidance and 	<ul style="list-style-type: none"> Anger management. Quiet/special places offered for reflection. Circle of friends. An accredited Nurture Group. Refer to outside agencies as appropriate CAMHS, relateen.

<p>etc/</p> <ul style="list-style-type: none"> • Get to know the individual children well through working closely with the pupil. • If the child continues to be of concern the SENDCo will observe and either suggest intervention strategies with support from the family link worker (Debra Groucott) or the Learning Mentor (Pat Bailey). If appropriate an assessment will be undertaken using the Boxall Profile. • If appropriate the child might be identified for Nurturing support within school. • If appropriate a referral to CAMHS (child and adolescent mental health service) and or counselling services. • Parents can also refer their child for assessments or raise concerns by visiting their GP. • The pupil is carefully monitored and reviewed after a term to ensure progress is being made. If progress is not being made then either other interventions are suggested or another referral is made or an application for an Educational Health and Care Plan is requested. • Pupils are regularly reviewed through internal tracking data, standardised assessment scores and national assessments such as SATs and the year 1 phonic screening. • If pupils have a Statement of special educational need or an Educational Health 	<p>expectations for expected behaviours. All staff are aware of these and reinforce consistent expectations.</p> <ul style="list-style-type: none"> • Parents are aware of the behavioural expectations that we have so they can reinforce these at home. This helps to provide the pupil with a consistent approach. • Develop a personalised approach to learning for that child. • Providing support - have a designated adult to work with the child. • Develop resources to support children, e.g memory box in the case of bereavement. • Having a calm area where children can go to think and talk. 	<ul style="list-style-type: none"> • Support of bereavement with a trained learning mentor in bereavement counselling.. • Training children about E-Safety. • Staff keeping up to date with new emerging priorities. • SLT are trained in MAPA techniques. • Supporting families with multi-agency involvement.
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and Care Plan they have yearly annual reviews to review progress.

SENSORY and/or PHYSICAL Hearing Impaired (HI)

How we identify needs, assess and review progress	How we adapt teaching to ensure access to the curriculum	How we provide support and intervention for those with identified needs.
<ul style="list-style-type: none"> • The class teacher and the teaching assistant keep careful track of the child and record any observations. • Are children experiencing any problems? • Reception age children will have a hearing test in school. • Contact parents/carers if we feel there is a problem in school and ask them to take their child for a hearing test. • If the child continues to be of concern the SENDCo will observe and either suggest intervention strategies or refer to an external agency such as the Sensory Inclusion Service/Team. • Parents can also request an assessment by visiting their GP. • Pupils are regularly reviewed and assessed by the Sensory Inclusion Service/Team. They also monitor hearing aids and ensure that they are working adequately and replace any parts that are no longer working. • Pupils are regularly reviewed through internal tracking data, standardised 	<ul style="list-style-type: none"> • Pupils work within small group with the subtle support of an adult. • The adult will repeat the ideas and comments of other children when the class are discussing ideas, in a clear audible voice. • Pupils are encouraged to wear hearing aids if appropriate and these are monitored daily in a subtle and unobtrusive way. • Pupils are encouraged to ask for ideas to be repeated or instructions explained if they have not understood or heard them. • Ensure that the child is looking at you before speaking - saying the child's name first before speaking to them. • Be aware of background noise in different environments that they may affect hearing. • Teaching assistant support may be needed to repeat instructions to the child. 	<ul style="list-style-type: none"> • Ensuring that the pupil sits near the front of the classroom. • Following advice from the Sensory Inclusion Service/Team/ hearing impairment services. • Pupils encouraged to wear hearing aid if appropriate and an amplification loop box can be worn by the adults if this is suggested by the Sensory Inclusion Service/Team.

<p>assessment scores and national assessments such as SATs and the year 1 phonic screening.</p> <ul style="list-style-type: none"> • The pupil is carefully monitored and reviewed after a term to ensure progress is being made. If progress is not being made then either other interventions are suggested or another referral is made or an application for an Educational Health and Care Plan is requested. • Pupils are regularly reviewed through internal tracking data, standardised assessment scores and national assessments such as SATs and the year 1 phonic screening. • If pupils have a Statement of special educational need or an Educational Health and Care Plan they have yearly annual reviews to review progress. 		
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**SENSORY and/or PHYSICAL
Visually Impaired (VI)**

How we identify needs, assess and review progress	How we adapt teaching to ensure access to the curriculum	How we provide support and intervention for those with identified needs.
<ul style="list-style-type: none"> • Observations of the children - Are they experiencing any problems? E.g Can they track print? • Reception age children will have sight test in school. • Pupils are monitored carefully and if there 	<ul style="list-style-type: none"> • Pupils are encouraged to sit near the front of the class so that they can clearly see any visual information that is displayed. • Ensuring that children who wear glasses are clear about when they are to be worn. • Any information displayed on the 	<ul style="list-style-type: none"> • Provide pupils with documents which use a larger font. • Use pastel coloured paper to print worksheets/tasks onto. • Using appropriate coloured overlays or reading rulers to aid visual stress.

<p>are concerns then parents are requested to take their child for an appointment with the optician.</p> <ul style="list-style-type: none"> • For pupils with significant impairments a request is made with the Sensory Inclusion Service/Team. This is usually requested by the child's optician or by an optometrist. • Pupils are regularly reviewed and assessed by the Sensory Inclusion Service/Team. Additional strategies and interventions are suggested. • The pupil is carefully monitored and reviewed after a term to ensure progress is being made. If progress is not being made then either other interventions are suggested or another referral is made or an application for an Educational Health and Care Plan is requested. • Pupils are regularly reviewed through internal tracking data, standardised assessment scores and national assessments such as SATs and the year 1 phonic screening. • If pupils have a Statement of special educational need or an Educational Health and Care Plan they have yearly annual reviews to review progress. 	<p>interactive whiteboard has a pastel background colour and is presented using a clear large font. If possible pupils are given a copy of what is to be displayed.</p> <ul style="list-style-type: none"> • Provide work on pastel coloured paper on recommendation from outside agencies. • Provide coloured overlays - where appropriate to assist with visual stress. • If pupils have a significant visual impairment, then the teacher will ensure that furniture and resources stay in expected locations so that they are easy to find. 	<ul style="list-style-type: none"> • Adapt the environment where necessary. • Purchase appropriate resources as recommended by the Sensory Inclusion Service/Team e.g scanner, Ipad, slope writing board etc.
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**SENSORY and/or PHYSICAL
Physical Difficulties (PD)**

How we identify needs, assess and review progress	How we adapt teaching to ensure access to the curriculum	How we provide support and intervention for those with identified needs.
<ul style="list-style-type: none"> • Parents are best placed to advise us about the specific physical needs of their child. We therefore rely upon good communication between home and school to ensure that concerns about the child are addressed promptly. • The class teacher and teaching assistant keep careful track of the child and record observations. • If the child continues to be of concern the SENDCo will observe and either suggest intervention strategies or refer to an external agency such as the Occupational Therapy Team. • Child may attend Action Fun Club session in school to develop fine and gross motor skills. • Lesson observations, watching external coaches teaching PE. • Liaise with the school nurse/health visitor. • An assessment with the occupational therapy team will be undertaken and then additional strategies will be implemented. • Parents can also request an assessment with the occupational therapy team by visiting their GP. • The pupil is carefully monitored and 	<ul style="list-style-type: none"> • Pupils are encouraged to sit with the rest of the class or small group to listen to the ideas of the others. They will either have a fidget toy to keep them focussed or an adult to sit near them to keep them focussed. • Pupils are provided with resources such as pencil grips, lap tops etc so they are able to write their own ideas. • Ensure tables and chairs are the correct height. • When pupils are completing physical activities such as PE or outdoor learning, they are encouraged to participate in the same way as their peers. If this is not possible different resources such as large balls in PE or subtle support of an adult so they are able to participate. • When pupils are using tools or resources ensuring that the appropriate use of these resources are modelled by an adult and specialist tools are used if appropriate. • Forest school sessions (when possible) to encourage skills such as climbing and balancing. 	<ul style="list-style-type: none"> • Referral to occupational therapy. • Pre-writing skills such as using tweezers, using mazes etc. • Pencil grips/ other suitable writing pencils/pens (stable and rocketry writer) • Lap tops • Ipad • Dance Mat touch typing programme • Wooble cushions • Fidget toys • Action Fun Club • Interventions as suggested by the Occupational Therapy Team. • Teaching assistant support on individual basis or in small group.

reviewed after a term to ensure progress is being made. If progress is not being made then either other interventions are suggested or another referral is made or an application for an Educational Health and Care Plan is requested.

- Pupils are regularly reviewed through internal tracking data, standardised assessment scores and national assessments such as SATs and the year 1 phonic screening.
- If pupils have a Statement of special educational need or an Educational Health and Care Plan they have yearly annual reviews to review progress.