PETERBOROUGH
CITY COUNCIL

Ordinarily Available

Inclusive Provision

Peterborough City Council

Provision that the local authority expects to be made available for Children and Young People with Special Educational Needs and/or Disabilities (SEND) in all educational settings.

Contents: (NB. Hyperlinked to the sections in the document)

Glossary

Access arrangements	'Access Arrangements are pre-examination adjustments for candidates based on evidence of need and normal way of working.' JCQ	**LASS**	Local Area SENI Support Service
AATS	Autism Advisory Teacher Service	**MLD**	Moderate Learning Difficulty
ADHD	Attention Deficit and Hyperactivity Disorder	**OT**	Occupational Therapy
AP	Alternative Provision also known as appropriate provision	**Outcome**	'An outcome can be defined as the benefit or difference made to an individual as a result of an intervention.' Code of Practice, p.163
ASD	Autistic Spectrum Disorder (Autism)	**PD**	Physical disability
CAMHS	Child and Adolescent Mental Health Service	**SALT**	Speech and Language Therapy
CLA	Children who are Looked After	**SAMS**	Statutory Assessment & Monitoring service
COP	Code of Practice	**SAPS**	Sensory and Physical Support service
CP	Child Protection	**SEN**	Special Educational Needs
CYP	Children and Young People	**SEND**	Special Educational Needs and Disability
EAL	English as an Additional Language	**SENCO**	Special Educational Needs Co-ordinator
EHA	Early Help Assessment	**SEMH**	Social Emotional Mental Health
EHCNA	Education, Health, and Care needs assessment	**SLD**	Severe Learning Difficulty
EHCP	Education, Health, and Care Plan	**SMART**	Specific, Measured, Achievable, Realistic, Time bound (Outcomes/Targets)
EP	Educational Psychologist	**SpLD**	Specific Learning Difficulty
FSM	Free school meals	**TOD**	Teacher of the Deaf
HQT/ QFT	'High Quality Teaching approaches that ensure long-term retention of knowledge, fluency in key skills, and confident use of metacognitive strategies ' EEF. This is also known as Quality First Teaching.	**TVI**	Teacher of vision impairment
KS	Key stage	**VI**	Vision Impairment

Introduction

Our Peterborough City Council Ordinarily Available Inclusive Provision (OAIP) has been co-produced and outlines examples of the provision and approaches that the local area has agreed should be available for children/ young people with Special Educational Needs and / or Disabilities (SEND) in all educational settings. This is inclusive of schools including Reception through to colleges. Other education provisions may wish to reference this document, including alternative provision and Early Years settings. This document will be a key SEND reference document; implementing strategies and practices outlined in the document will be seen as the first step for any setting providing an effective graduated response to supporting a child or young person's SEND needs. The term 'Ordinarily Available Practice' features in the SEND Code of Practice (2015).

All the ordinarily available inclusive provision described in this document reflect the SEND Code of Practice (2015) under the four categories; however, it should be used as 'needs led' and is not dependent upon any formal diagnosis. It is recognised that each child/ young person is an individual, with their own strengths and areas for development therefore not every intervention or strategy detailed within the guide will be necessary, or appropriate, for every child/ young person. The child/ young person's age and maturity must also be considered, with strategies and approaches reviewed. It is anticipated that high quality teaching methods will effectively support the teaching and learning of most children/ young people. Although the provision listed here should be available, this guide is not exhaustive, and it is not a checklist. It describes some examples of inclusive practice, reasonable adjustments and high-quality teaching strategies and provision expected across the whole setting community. Research indicates that small changes at the early stages of the graduated approach (Assess, Plan, Do and Review), when a child/young person's needs are first identified, will support in removing barriers to learning and enable the child/young person to be successful in their education setting. It is our hope that this guide will support more inclusive learning environments and experiences for all children/ young people across the city.

This OAIP can be used in many ways, for example:

- as a reference for Special Educational Needs Coordinators (SENCOs) and teachers to ensure the right support is available at the right time
- to support discussions with children/young people and families in working together to identify the most helpful approaches
- in meetings with other professionals such as outside agencies to discuss current approaches
- for governors to understand what can be seen as ordinarily available and 'above and beyond' for children/young people
- for support staff and other setting colleagues

Thank you to everyone who has been involved in the development of our OAIP through co-production with SENCOs, parents/ carers through Family Voice, as well as colleagues across the Local Authority Children's Services and Health. It is also linked with work published by other Local Authorities (Portsmouth, Buckinghamshire, Bristol, Somerset, East Riding, Hertfordshire, and Leicestershire).

For further details of services and support please visit Peterborough City Council's Local Offer [SEND Information Hub (Local Offer) | Peterborough City Council](#)

Section 1: Expectations of all Educational Settings

All settings must apply the principles underpinning the SEND Code of Practice 0 to 25 years and have regard to the Equality Act 2010, Children and Families Act 2014 and the SEND regulations 2014.

The key principles of the SEND Code of Practice should be applied in all settings and throughout the child/ young person's learning journey.
- The views, wishes and feelings of the child/ young person and parent carers.
- The importance of the child/ young person and parents, participating as fully as possible in decisions, and being provided with the information and support necessary to enable participation in those decisions.
- The early identification of child/ young person's needs and intervention to support them.
- The need to support the child/ young person and the child/ young person's parents to facilitate the development of the child/ young person and to help them achieve the best possible educational and other outcomes, preparing them effectively for adulthood.
- Collaboration between education, health, and social care services.
- High quality provision to meet the needs of the child/young person with a focus on inclusive practice and removing barriers to learning.
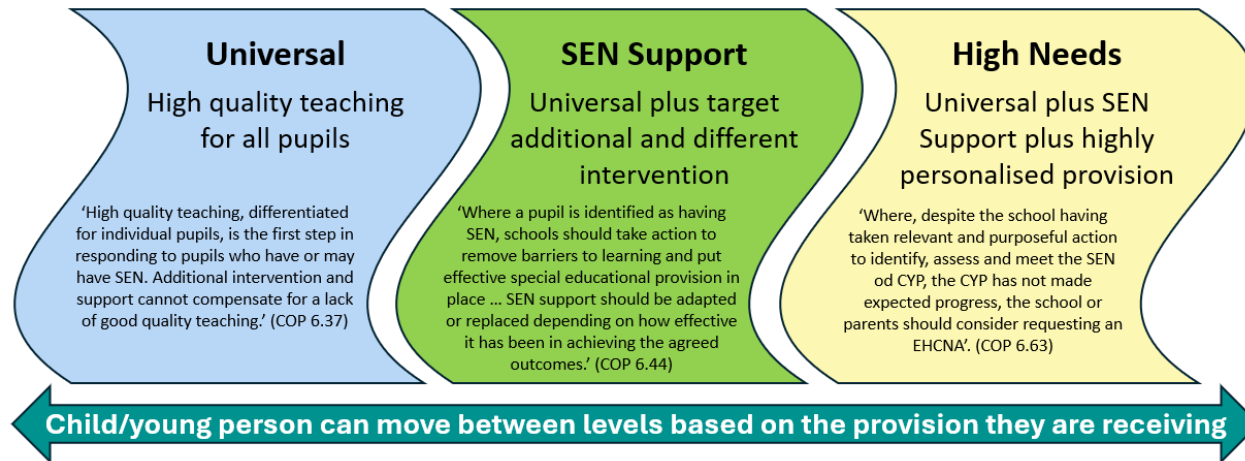
What is the Graduated Response

The SEND Code of Practice outlines the requirement for educational settings to have arrangements in place to support children and young people with SEN. This includes a" clear approach to identifying and responding to SEN" SEND Code of Practice (CoP), Chapter 6.

The importance of early identification of the needs of child/ young person so that appropriate provision can be put in place at the earliest opportunity is central to the SEND Code of Practice. Educational settings should offer an inclusive approach to learning and teaching, with high quality teaching which is adapted for an individual child/ young person. This approach should be embedded in their provision in all subject areas, and at all levels, and support the teaching of all children/ young people, including those with SEN as per the Teacher Standards 2021.

Where a pupil is identified as having SEN, schools should take action to remove barriers to learning and put effective special educational provision in place. This support should take the form of a four-part cycle where earlier decision and actions are revisited, revised, and refined with a growing understanding of the pupil's needs and what supports them to make good progress and secure good outcomes. This is known as the graduated response, (CoP 6.44). Where a pupil continues to make less than expected progress, despite evidence-based support and interventions that are matched to the pupil's needs, the school should consider involving specialists, which they can do at any point to advise them on identification of SEN and effective support and interventions. A school should always involve a specialist when a pupil continues to make little or no progress or where they continue to work at levels substantially below those expected of pupils of a similar age despite evidence-based SEN support delivered by appropriately trained staff. The pupil's parents should always be involved in the decision to involve specialists, (CoP 6.59).
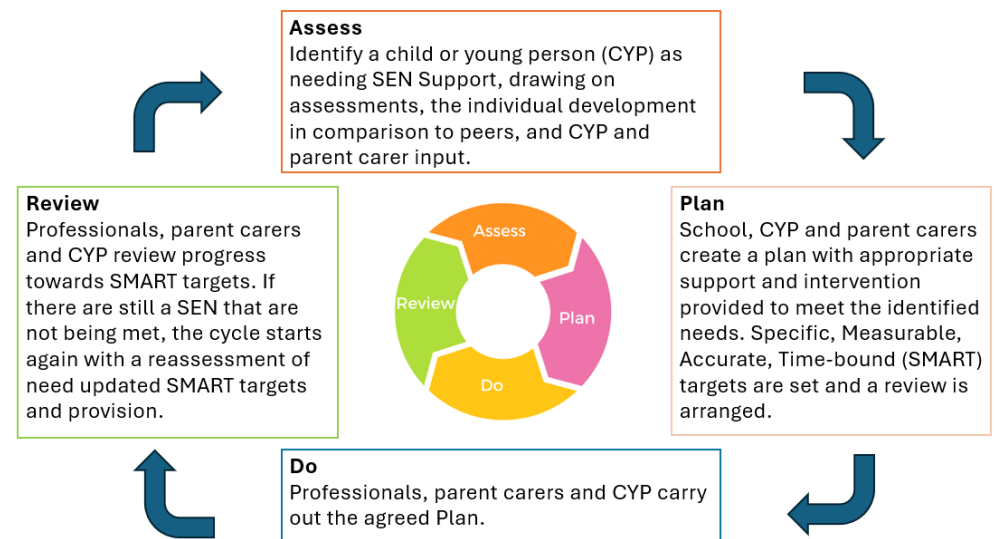
For most children or young people where there is a concern, the school should work through a graduated response 'to ensure the relevant and purposeful action to identify, assess and meet the special educational needs of the child or young person has been taken' (CoP 9.14) and as per the Code of Practice 6.44. 'In a very small minority of cases of children or young people may demonstrate such significant difficulties that a school or other provider may consider it impossible or inappropriate to carry out its full chosen assessment procedure.' (CoP 9.3)

Universal
High quality teaching for all pupils

'High quality teaching, differentiated for individual pupils, is the first step in responding to pupils who have or may have SEN. Additional intervention and support cannot compensate for a lack of good quality teaching.' (COP 6.37)

SEN Support
Universal plus target additional and different intervention

'Where a pupil is identified as having SEN, schools should take action to remove barriers to learning and put effective special educational provision in place … SEN support should be adapted or replaced depending on how effective it has been in achieving the agreed outcomes.' (COP 6.44)

High Needs
Universal plus SEN Support plus highly personalised provision

'Where, despite the school having taken relevant and purposeful action to identify, assess and meet the SEN od CYP, the CYP has not made expected progress, the school or parents should consider requesting an EHCNA'. (COP 6.63)

Child/young person can move between levels based on the provision they are receiving

What is the Assess, Plan, Do, Review (APDR) cycle?

The graduated response is 'a four-part cycle through which earlier decisions and actions are revisited, refined, and revised with a growing understanding of the pupil's needs and of what supports the pupil in making good progress and securing good outcomes' Code of Practice 6.44.

A regular cycle of APDR is used to ensure that the child/ young person with SEND is making progress. This should be monitored at every stage of the graduated response process. A wide range of assessment strategies and tools can be used to ensure a thorough understanding of a child/ young person's strengths and areas for development. The child/ young person will have regular opportunities to evaluate their own performance, and self-assessment is routinely used to set individual targets. The impact of interventions is critically evaluated. Alternative approaches are explored to establish whether they may result in better outcomes for the child/ young person.

Assess
Identify a child or young person (CYP) as needing SEN Support, drawing on assessments, the individual development in comparison to peers, and CYP and parent carer input.

Plan
School, CYP and parent carers create a plan with appropriate support and intervention provided to meet the identified needs. Specific, Measurable, Accurate, Time-bound (SMART) targets are set and a review is arranged.

Do
Professionals, parent carers and CYP carry out the agreed Plan.

Review
Professionals, parent carers and CYP review progress towards SMART targets. If there are still a SEN that are not being met, the cycle starts again with a reassessment of need updated SMART targets and provision.

Funding

This guidance is a summary of the DfE guidance published September 2024 and refers to the SEND code of practice which can be found here.

Local authorities: pre-16 schools funding - GOV.UK (www.gov.uk)

16 to 19 education: funding guidance - GOV.UK

SEND_Code_of_Practice_January_2015.pdf (publishing.service.gov.uk)

Our expectation is that through high quality teaching and the implementation of a graduated approach, the needs of the majority of our children/ young people can be met from a school's core and notional budgets. There are three sources of funding available to schools to support children/ young people with special educational needs, described as Elements 1, 2 and 3. The Local Authority calculate the amount of the notional budget using local mainstream schools funding formula factors such as free school meals, social deprivation factors, English as an Additional Language (EAL), attainment levels etc.

Element 1 – Core Education Funding	All schools are provided with what is known as core education funding. This is the individual funding that is provided to each school to provide the standard offer of teaching and learning for all children/ young people on the school roll. The Age Weighted Pupil Unit (AWPU) pays for the basic costs for every child/ young person in the school regardless of any SEND. It usually covers staffing and premises costs. All children/ young people should be able to access high quality teaching and we know from research that this improves outcomes for all children/ young people but also, high quality teaching, adapted for individual pupils, is the first step in responding to pupils who have or may have SEN.
Element 2 - SEND notional budget	Mainstream maintained schools and academies are notified each year of a clearly identified SEND notional budget, within their overall budget allocation, towards the costs of fulfilling their duty to use their 'best endeavours' to secure special educational provision for their pupils with SEN. This is funding of **up to £6000** per child/young person with SEND (both EHCP and SEND support). Schools are expected to meet the special educational needs of the majority of children/ young people from this budget.
Element 3 – High Needs Block	The High Needs Block (sometimes referred to as "top up funding"). This is the money paid by the Local Authority (maintained)/ Education and Skills Funding Agency (academies), in addition to the element 1 and element 2 funding to top up the support within the school to meet the funding needed for individual children/ young people with an EHCP.

Schools will need to carefully consider how the funding should be best used to meet the child/young person's outcomes instead of routinely allocating a 1:1 Teaching Assistant to them. This may include training for staff working with the child/young person, educational resources that will enhance the accessibility of the curriculum and/or more specialised teaching support for group interventions. There may be some cases where there is a high level of physical need, attachment and/or safeguarding need which will require higher levels of staffing.

The expectations of mainstream schools in relation to the use of the Notional SEN budget are to:
- meet the costs of special educational provision for children/ young people identified as on SEN Support in accordance with the SEND Code of Practice; and
- contribute towards the costs of special educational provision for children/ young people with high needs (most of whom have education, health, and care (EHC) plans), up to the high needs cost threshold set by the regulations (currently £6,000 per pupil per annum).

Government guidance says schools should provide up to the first £6,000 of additional or different support for those children and young people who need it, including those with an Education, Health, and Care Plan. This does not mean that the school will spend £6000 on every child/ young person with SEND, as most such pupils' support will cost less than that. Nor is the notional SEN budget intended to provide a specific amount per child/ young person for those with lower additional support costs. The Local Authority may make reasonable assumptions about what those costs might be, for the purpose of ensuring that their schools' notional SEN budget calculation is realistic. This is referred to as the 'national threshold' and this amount is set by the Department for Education (DfE).

There is an expectation (DfE and SEND Code of Practice 0-25) that the SENCO is aware of their school's notional SEN budget and to be actively engaged with the senior leaders of the school in deciding what to spend SEN support and provision on. It is for the SENCO, Headteacher and governing body to establish a clear picture of the resources that are available to the school, and to consider their strategic approach to meeting SEN in the context of the total resources available to them, including any resources targeted at particular groups, such as the pupil premium. The additional resources included below on whole school costed provision plans and individual pupil costed provision plans support this strategic approach to SEN funding.

Additional resources available to support funding calculations include:

Strategic planning and monitoring of SEN funding	When to use
NASEN Whole school costed-provision-map.xlsx	Prior to new academic year to plan provision for child/ young person across the whole school based on identified needs. Prior to new academic year to plan SEN expenditure based on information within whole school the costed provision map.
Individual Pupil planning and tracking of SEN Funding	When to use
Individual pupil costed-provision-map-template .xlsx	When making a request for an Education, Health, and Care Needs Assessment (EHCNA) to evidence where the school contribution towards the costs of special educational provision for a child/ young person with high needs is above the notional SEN budget of £6,000 per pupil per annum. When schools are struggling to meet the needs of a pupil with an EHCP and evidencing where the school contribution towards the costs of special educational provision for pupils with high needs is above the notional SEN budget of £6,000 per pupil per annum and exceeds the additional element 3 funding.

Expectations for Governors, Headteachers, SENCOs and Teachers

These expectations are drawn from the SEND Code of Practice 2015, Headteacher Standards 2020, Teachers' Standards 2021, Maintained schools governance guide 2024, Academy trust governance guide, Children and Families Act 2014 (legislation.gov.uk), Equality Act 2010 (legislation.gov.uk), UN Convention on the Rights of the Child - UNICEF UK and the UN Convention on the Rights of Persons with Disabilities: initial report on how the UK is implementing it - GOV.UK

Governors must
• Be aware of their legal duties in relation to children and young people with SEN as per The SEND Code of Practice and Children and Families Act 2014 and have a good working understanding of these documents and particularly their duty around 'best endeavours'.
• The governing body have the legal duty to focus on the school's systems and processes for supporting children/young people with SEN rather than provision for individual children/young people.
• Ensure all school policies meet the Equality Act and do not disadvantage pupils with SEND. Help to review the school's policy on provision for children/young people with SEN and the school's approach to meeting the needs of those with SEN.
• Ensure that there is a suitably qualified teacher designated as Special Educational Needs Coordinator (SENCO) and holds the National Award for Special Educational Needs Coordination or the National Professional Qualification for SENCOs or be working towards this within three years of becoming a SENCO.
• Ensure that SEN duties are undertaken effectively across the organisation including but not limited to: identification of needs, responding to SEN, a broad and balanced curriculum, record keeping of SEN provision and engagement and participation for all children/young people.
• Ensure the schools notional SEN budget is appropriately allocated to support children/young people with SEN.
• Have a member of the board with specific oversight for the school's SEN arrangements.
• Build a good working relationship with the SENCO and meet with the SENCO on a regular basis.
• Ensure that the school website publishes the school's SEN offer and link to Peterborough's SEND local offer.

Headteachers must
• Ensure the school holds ambitious expectations for all children and young people with SEN.
• Establish and sustain culture and practices that enable children/young people to access the curriculum and learn effectively.
• Ensure the school works effectively in partnership with parent carers and professionals, to identify the additional needs and SEN of children/young people, providing support and adaptation where appropriate.
• Ensure the school fulfils its statutory duties with regard to the SEND Code of Practice 2015.
• Promote positive and respectful relationships across the school community and a safe, orderly, and inclusive environment.
• Ensure that responsibilities are met under the Equality Act (2010) with regard to reasonable adjustments and access arrangements.
• Ensure a suitably qualified and experienced teacher is designated as SENCO and allowed sufficient non-teaching time to carry out their duties.
• Have a clear approach to early identification of SEN and response to identified needs.
• Ensure School SEN Information Report is produced and published online in accordance with section 69 of the Children and Families Act 2014.
• Ensure the SENCO is able to support and advise you and the governing body in determining strategic development of SEN policy and provision – this is achieved most effectively by the SENCO being a member of the SLT.
• Ensure the SENCO and governors are aware of the SEN budget and how it is being used and value for money is secured.

SENCOs must

- Be able to support and advise the Headteacher and governing body in determining the strategic development of SEN policy/provision in the school.
- Have day-to-day responsibility for the operation of the SEN policy and specific support to children and young people with SEN, including those with an EHCP.
- Be a qualified teacher and hold the National Award for Special Educational Needs Coordination or the National Professional Qualification for SENCOs or be working towards this within three years of becoming a SENCO.
- Provide professional guidance to colleagues and work closely with staff, parent carers and other agencies.
- Be aware of the Local Offer provision and provide support to families to ensure children/young people with SEN receive appropriate support.
- Ensure your school keeps its record of children/young people with SEN up to date.
- Compile an annual report for school governors about the provision for, and progress of, children/young people with SEN.
- Have knowledge of the SEN budget and how it is used.
- Advise on the graduated approach to providing SEN support.
- Liaise with potential next providers of education to ensure a children/young people and their parent carers are informed about options and a smooth transition is planned.
- Work with the Headteacher and SEN Governor to ensure that the school meets requirements under the Equality Act 2010 with regard to reasonable adjustments and access arrangements.

Teaching staff must

- Be aware that teachers are responsible and accountable for the progress and development of the children and young people in their class, including where child/young person access support from teaching assistants, specialist staff or are receiving bespoke provision.
- Have a clear understanding of the needs of all children/young people, including those with SEN, and be able to use and evaluate distinctive teaching approaches to engage and support them.
- Set goals that stretch and challenge children/young people of all backgrounds, abilities, and dispositions.
- Have knowledge of appropriate baseline assessments and tracking tools.
- Have a secure understanding of how a range of factors can inhibit children/young people's ability to learn and how best to overcome these.
- Manage classes effectively, using approaches which are appropriate to children/young people's needs in order to involve and motivate them.
- Remain responsible for working with children/young people on a daily basis. Where interventions involve time away from the main class teacher, the teacher retains responsibility for the child/young person.
- Work closely with teaching assistants to inform the planning and to assess the impact of interventions and link them to classroom teaching.
- Work closely with parent carers and children/young people to identify strengths, barriers, and support strategies.
- Work closely with outside agencies and professionals to support the child/young person when appropriate.
- Follow a graduated response to identifying barriers and implementing support strategies.

Expectations for whole school inclusion

These expectations are drawn from the SEND Code of Practice 2015, and EEF SEND in Mainstream Guidance Report 2020. They outline the expectations that will promote inclusion for all children and young people, including those with SEN, which are not detailed within the Broad Areas of Need section of this document. They are the key areas that collectively define the factors necessary for successful Special Educational Needs and/or Disabilities (SEND) provision at the setting-based stages of the graduated approach.

Assessment	– Practitioners ensure that formative assessment and feedback are a feature of lessons. Assessment is used to reflect on pupil progress, and to identify, and act upon, possible barriers to learning. – All schools should have a clear approach to **early identification** of SEN. – Schools should use a holistic approach to assessment including, but not limited to, formative assessment, observation, checklists, diagnostic tools and child/ young person and parent carer voice. – A regular cycle of Assess, Plan, Do, Review should be used to ensure that child/ young person with SEN are making progress. – Expertise is in place to manage reasonable examination arrangements (access arrangements) for tests and national tests and public examinations.
Partnership with child/young person and parent carers	– Parent/carer and child/young person are supported to engage in decision making and to share their views. – School support plans are used to record information relating to identified SEND interventions in place over time. Parents carers and child/young person are fully involved in setting and reviewing targets and outcomes. – Child/ young person is helped to value their progress and achievements and to recognise and understand their own barriers to learning. – Parents/carers and schools communicate regularly to exchange information about the child/ young person. – There is a shared understanding with parents/carers about which professionals and services are working with children/ young people and their families. – Schools work closely with parents/carers and parent advocacy groups (SENDIASS, Family Voice, Little Miracles) to create a shared understanding of needs and implement effective approaches to ensure outcomes are met. – The school SEN Information Report is co-produced with parent carers and published on the school website. – Parent carers are signposted to support available through The Local Offer.
Positive and supportive environment for all CYP	– Promote positive relationships, positive role models, active engagement, and wellbeing for all children/ young people. – There is a calm and purposeful climate for learning where children/ young people feel safe and their contributions are valued. – Language used in the classroom demonstrates unconditional positive regard for learners (e.g., relational / restorative approaches). – Peer awareness and sensitivity towards difference (including SEND) are raised at a whole setting level. Work is done with classes and groups regarding specific needs or conditions as appropriate. – Expectations of behaviour are high and consistent. Child/ young person are routinely taught what good behaviour looks like and supported to reach these expectations through modelled behaviours and an inclusive curriculum. Negative attitudes, beliefs and perceptions towards individuals and groups are challenged, in the classroom, the wider school and society.

The Physical and Sensory Environment	– The physical accessibility of the building and individual learning spaces is assessed. The accessibility plan is on the setting's website and 'reasonable adjustments' and adaptations are made to meet the needs of the child/ young person. – Extra-curricular activities and educational visits are planned to fully include child/ young person with SEND (in line with the Equalities Act 2010), including those with SEMH and physical disabilities. 'Reasonable adjustments' are made. – Practitioners are aware of sensory needs and issues that may impact on child/ young person.
Teaching and learning	– Practitioners are aware of the additional needs of their learners, understand the nature and impact of these and how to respond to them. Planning incorporates more detailed specialist advice. – Practitioners adapt to provide suitable learning challenges and cater for different learning needs and styles. – Practitioners ensure that learners have opportunities to work in different ways e.g. independently, in a variety of small groups and / or in pairs. – Use of steps-to-success or similar, to promote independence, scaffold, and support child/ young person. – Practitioners ensure that collaborative learning and peer support is a feature of learning. – Use of additional adults is planned to maximise their impact on learning. – Strategies are used to build and maintain positive relationships across the whole setting community (e.g. relational / restorative approaches). – Specific resources and strategies are provided to overcome potential barriers to learning e.g. concrete apparatus, increased use of ICT resources.
Staff skills and CPD	– There is a plan for on-going Continuing Professional Development (CPD) in relation to understanding and meeting the needs of children/ young people. – Staff collaborate and have effective links with other relevant outside agencies and specialists for support, training, and supervision. – All practitioners, including Teaching Assistants, (TA) make a positive contribution to learner progress. The Education Endowment Foundation (EEF) guide might be useful for TA CPD Making Best Use of Teaching Assistants	EEF (educationendowmentfoundation.org.uk).
Transition and transfer	– Staff are aware of those who will need additional support for all or most transitions and plan for these routine and life transitions when required. – Procedures are in place for ensuring smooth progression through settings, particularly during all transition phases, including on entry and exit. – Plans are made for unstructured times: safe spaces available; structured alternatives such as games club, use of library for vulnerable child/ young person. – Child/ young person and parent carers participate in decisions around transition and transfer. – On transition, there should be timely sharing of key information and any available records.

Supporting children/young people with complex medical needs

The document Supporting pupils at school with medical conditions (publishing.service.gov.uk) outlines national guidance on meeting medical needs within school. The Children and Families Act 2014 and the Equalities Act 2010, place legal duties on schools to support children/young people with medical conditions. This support might be specified in a healthcare plan which is written by the school with the help of the child/ young person's parent carers and relevant medical professionals. It is in place to clearly outline how the child/ young person's medical needs will be supported while they are attending the setting including an escalation plan for any deterioration in their health condition. If medical procedures such as monitoring medical readings or providing health treatments are required while the child/ young person is within the setting, then relevant healthcare professionals will provide training to identified staff within the setting to ensure that the child/ young person's needs can be safely met.

Medical needs and disability

A child/ young person with a medical condition that is physical or mental and that has a 'long term and substantial adverse effect on their ability to carry out day to day activities' may be defined as disabled by the Equality Act 2010. This means they may also be covered under the SEND Code of Practice legislation and should be supported in school through the graduated response. An Education, Health and Care Plan may only being needed for those with the highest level of need.

Medical needs without SEND

A child/ young person may have an isolated medical need and not necessarily have special educational needs or a disability, however they may need enhanced support to ensure they are safe and kept as healthy as possible within the setting. This will usually be provided by the setting making reasonable adjustments which may involve enhanced staffing.

Medical funding and resources for support

Some children and young people (up to their 18th birthday) may have such complex health needs that they cannot be met by the services which are routinely available from GP practices, hospitals or in the community. The National Framework for Children and Young People's Continuing Care provides guidance for NHS Integrated Care Boards when assessing a child or young person's health care needs. Schools should discuss with the child's healthcare professionals, GP, or social worker if there are health care needs that are more complex than the school can provide under statutory guidance for meeting medical needs in school. A referral can be made by any professional working with the child or young person, who feels there is an identified health need that cannot be met by existing universal or specialist services alone. You can contact the Children's Continuing Care Team by calling them 0330 057 1022 or by emailing cpicb.childrenscontinuingcare@nhs.net to request the referral form. For young adults aged 18 years and over the NHS Continuing Healthcare referral process can be found here: NHS Continuing Healthcare (CHC) | CPICS Website. The Designated Clinical Officer for SEND also offers advice and signposting for schools supporting children with complex health needs. This includes advice for children who do not have a Peterborough or Cambridgeshire GP. Please e-mail cpicb.send@nhs.net for further details.

Toileting

Some children/ young people, for a variety of medical, emotional, or social reasons, may require toilet training or special arrangements with toileting in their setting/school. Admission policies and practices that require a child to be toilet trained are discriminatory and potentially unlawful; under the Equality Act issues should be dealt with on an individual basis and Settings and Schools must make "reasonable adjustments" accordingly.

Children known to Social Care (Children in Care (CiC), Children Previously in Care (CPiC), children living in a Kinship Care Arrangement and those who have or have had a Social Worker at CiN or CP level over the last 6 years)

Peterborough Virtual School's remit includes promoting the educational outcomes for all children known to social care, enabling our vision of achieving 'aspirational educational outcomes which enable them to live healthy, happy, and fulfilled lives.' Children known to social care will have experienced adversity and trauma and therefore require both educational, situational, and environmental considerations.

It is recognised that children known to social care may have co-occurring SEND needs, that can be supported by this OAIP document and Peterborough Virtual School are in the process of creating a further supporting toolkit to support stakeholders to consider how the child's lived experiences can be supported successfully within their educational setting. Once available, a link will be included in this document.

In the meantime, Peterborough's Virtual School website offers a range information, advice and guidance and best practice for Peterborough's most vulnerable children and young people. The offer, also available on the website, includes but is not limited to intense inclusion and engagement work for some identified CiC children, Requests for Advice and Guidance for all children known to social care and termly Advisory visits.

[Peterborough Virtual School | Peterborough City Council – Local offer](#)
[Welcome to Peterborough Virtual School – Learn Together page](#)

Quick need checker

The Quick Checker can be used in a learning environment to gauge whether a child/ young person may need further investigation and/or support in one or more broad areas. This can then be used as part of a conversation between class teachers and parent carers at the initial stage of concern (see SEN Graduated Response Flowchart). The Quick Checker is not a diagnostic tool, but it is designed to identify barriers within the four broad areas of SEN.

Quick need checker - cognition and learning

There are concerns about the child or young person's:	Y/N
Lack of progress, even with differentiated high quality first teaching approaches which are targeted to gaps and barriers.	
Performance levels i.e., they are below the level within which most children and young people are expected to work.	
Difficulty acquiring basic literacy skills and knowledge, for example, phonics, reading fluency and reading speed.	
Difficulty acquiring basic maths skills and knowledge, for example, number bonds, applying and remembering maths learning.	
Retaining and recalling information - in the short and/or long term.	
Difficulty in dealing with abstract ideas, applying from prior learning and problem solving.	
Slow processing—they take longer to work through problems and tasks but can do with longer time.	
Poor independent learning skills such as the ability to focus, listen, organise themselves, sequence, or sustain attention on a task.	
High level of dependence on adult support.	
Lack of confidence, avoidance of tasks and reluctance to take risks.	

Quick need checker - communication and interaction

There are concerns about the child or young person's:	Y/N

Expressive language

Ability to use language to communicate with others, for example, finding the words they need or putting them in a cohesive sentence.	
Difficulty with speech sound or articulation skills.	
Difficulty using speech sounds accurately.	
Ability to use and express their ideas with clearly voiced and fluent speech, for example, stammering.	

Receptive language

Ability to understand and process language including auditory memory and vocabulary, for example, remembering length of sentence.	
Ability to understand a sentence as a whole, for example, may cue into certain words.	
Attention and/or listening skills—their ability to engage successfully with language.	
Difficulty with sequencing words or events to tell a story.	

Social and non-verbal communication

Social communication, difficulty with social understanding and interaction, for example, building and maintaining friendships.	
Rigidity of thought, for example, ability to manage changes in routine, literal understanding, and use of language.	
Difficulties with non-verbal communication such as eye contact, interpreting facial expression, non-verbal cues and prompts, body language.	
Poor awareness of needs of listener and what is appropriate, for example, not giving context, detail, speed of speech, tone of voice.	
Poor conversation skills, not taking turns, taking on board other's ideas, following another's topic of conversation, using a monologue, dominating the conversation.	

Quick need checker –Social, Emotional and Mental Health

There are concerns about the child or young person's:	Y/N
Ability to plan, attend, organise, regulate themselves and manage change.	
Level of hyper vigilance and their disproportionate 'fight, flight, freeze' response.	
Attendance at school. (Refer to DfE Guidance 'Working together to Improve School Attendance')	
Maintaining healthy peer relationships and friendships.	
Behaviour at home that may not be seen at school.	
Engagement with the curriculum.	
Changes in demeanour and/or appearance.	
Unpredictability of behaviour with lack of obvious triggers.	
Low confidence and/or self-esteem.	
Failure to make anticipated progress across many areas of the curriculum.	

Quick need checker – sensory and physical: physical needs

There are concerns about the child or young person's:	Y/N
Physical skills/needs are affecting their learning and/or access to the curriculum.	
Physical skills/needs effect their stamina and endurance levels impacting on quantity and quality of work achieved (such as fatigue).	
Physical skills/needs affecting their ability to access the school site/facilities.	
Physical skills/needs requiring them to have assistance with personal care/moving and handling.	
Physical skills/needs requiring additional support/equipment to evacuate the building safely in the case of an emergency.	
Physical skills/needs impacting on their ability to complete activities of daily living such as toileting, dressing, use of cutlery, use of scissors, writing etc.	

Quick need checker – sensory and physical: Vision impairment

There are concerns which may be related to vision loss about the child or young person's:	Y/N
Holding printed resources and/or objects very closely or at an unusual angle.	
Failing to respond to non-verbal instructions.	
Losing their place when reading, skipping lines, and struggling to find text on a page.	
Having difficulty accessing, or not paying attention to board work.	
Struggling in P.E., especially demonstrating poor spatial awareness.	
Appearing isolated in the playground.	
Having difficulty interpreting facial expressions, social cues and can get too close.	
Being withdrawn or demonstrating behavioural issues.	
Tripping over, or having difficulty with steps/stairs/uneven ground.	
Has difficulty orientating in an unfamiliar environment.	

Quick need checker – sensory and physical: Deaf

There are concerns which may be related to hearing impairment about the child or young person's:	Y/N
Having noticeable delays or gaps in attention and listening, play, communication and understanding spoken interaction.	
Showing some of the following: poor speech intelligibility, difficulty with recognising and responding to phonics, limited vocabulary both receptive and expressive, and immature grammatical structures in spoken language.	
Being distractible in class, having poor listening skills in a busy environment, and asking you to repeat often.	
Having low levels of confidence.	
Voice varies considerably, which may be due to group size, distance from board/teacher, reverberant rooms, or poor light levels.	
Being dependent on visual cues from their teacher or peers.	
Having difficulty in responding to questions, instructions, starting work after teacher input or discussion, recalling information, social and academic interaction with peers.	

Section 2: Support for Broad Areas of Need

This section is divided into the four areas of need set out in the SEND Code of Practice.

Many children/ young people may have needs across more than one category and several areas may need to be consulted for the same child/ young person, certain conditions may not fall neatly into one area of need. When reviewing and managing special educational provision the four broad areas of need may be helpful as a guide to ensure you can provide support across these areas.

Children/ young people are individuals and have their own pattern of strengths and areas for development and their age and maturity must be considered. It is important to note that not every intervention or strategy outlined will be appropriate for every child/ young person. The most helpful strategies should be agreed with the child/ young person and parents/ carers then reviewed and adapted as the child/ young person matures. Although there is a wealth of strategies and suggestions this is not an exhaustive list of the barriers a child/young person may face or provision available.

Each section is divided into a universal offer and a targeted offer. The targeted offer assessment tools may incur an additional cost.

Cognition and Learning

'Support for learning difficulties may be required when children and young people learn at a slower pace than their peers, even with appropriate differentiation. Learning difficulties cover a wide range of needs, including moderate learning difficulties (MLD), severe learning difficulties (SLD), where children and young people are likely to need support in all areas of the curriculum and associated difficulties with mobility and communication, through to profound and multiple learning difficulties (PMLD), where children and young people are likely to have severe and complex learning difficulties as well as a physical disability or sensory impairment. Specific learning difficulties (SpLD), affect one or more specific aspects of learning. This encompasses a range of conditions such as dyslexia, dyscalculia, and dyspraxia.' SEND Code of Practice, 6.30 and 6.31.

Cognition refers to the thinking skills and thought processes that a child / young person has acquired through their prior experience. Learning needs are on a continuum and can vary across subjects and situations. Children/ young people with learning needs may learn at a slower pace than their peers despite appropriate adaptation. Learning difficulties can be general or specific and related to one or more areas of the curriculum. Difficulties may be short-term in one or more areas or severe and long term.

General approaches and strategies for Cognition and Learning

- The view of the child/young person around how they feel sought in a child friendly way.
- Close home/setting/parent carer links so staff are aware of any changes in the home circumstances which may impact on progress.
- Adaptation to ensure the development of communication, expressive (difficulty with using language to express ideas, needs or feelings) and receptive (difficulty with understanding words, sentences, or instructions) language, literacy, numeracy, minimise behaviour and emotional difficulties and promotion of appropriate interpersonal skills with other children/ young people.

- Arrangements to support the use and delivery of approaches/ materials for child/ young person who, through the use of termly tracking, show they may have literacy/ numeracy difficulties and/or Specific Learning Difficulties (SpLD) which may include multi-sensory teaching strategies, a focus on phonological awareness, motor skills programmes.
- Effective use of Information Technology (IT) equipment to support learning.
- Staff are trained and skilled in supporting child/ young person with general and specific learning difficulties, for example, those with attention, memory, processing, or problem-solving difficulties.
- Give positive praise which is relevant to the child/ young person for all attempts not just successes.
- Recording usual way of working, evidenced in APDR. Making applications for Exam Access Arrangements as required.

What might you see? (Barriers to learning)	Suggested tools for identification of need	What can help? (Strategies and provision made by settings according to the ages and stages of the child/young person)
Generalised learning difficulties. *A child/young person may* show a slower rate of progress than their peers. This could be due to a range of factors including developmental delay or the impact of life events. Often their rate of progress will increase over time with high quality teaching and class support.	It is important to check hearing and vision prior to consideration of or assessment for cognition and learning barriers. Standardised whole school progress measures	*Universal* • Assessment through teaching to identify the areas of need in consultation with the child/ young person. • Clear and simple instructions, breaking down longer instructions and giving one at a time. • Visual schedules help child/ young person to follow the structure of the day and learn common sequences e.g. changing for PE or ready for home time. • Visual cues and prompts. • Social Stories. • Now/next /then systems close to the child/ young person. • An electronic timer/sand timer can be helpful to use as an aid to extend concentration. • Give time before a response is needed, e.g. 10 second rule. • Active learning, concrete, pictorial and pragmatic approach to learning. Emphasis on self-actualisation - activities designed to develop skills which will support them to become independent learners. • Provide an opportunity for child/ young person to use a movement break inside of the classroom for those who may not be able to attend for longer periods. • Support to manage self-esteem - celebration of strengths, reinforcement of success. • Shared next steps - so they know what to expect.
		Targeted provision • Provide an opportunity for child/ young person to use a movement break outside of the classroom for those who may not be able to attend for longer periods.

		• Pre-teaching - e.g. staff to help prepare the child/ young person for a new topic by going through the vocabulary and concepts. Repetition of taught topics and reminders to refer to.
		• Work trays (e.g. green as start and red as finished) help to focus on short task and brings a clear structure to activities. Start with one task and increase over time.
		• Consider the engagement of the child/ young person, could the learning have more of a focus on their interests.
		• Adapted resources and lessons so that learning is embedded at the child's/young person's pace and level of development so that it is relevant to their age and ensure all steps of development have been taught and retained.

What might you see? (Barriers to learning)	Suggested tools for identification of need	What can help? (Strategies and provision made by settings according to the ages and stages of the child/young person)
Phonological awareness skills *Child/ young person may have difficulty with:* • Identifying syllables, alliteration, rhyme • Blending sounds and segmenting sounds orally • Identifying and recalling individual phonemes (sounds)	Hertfordshire Primary Phonological Assessment Pack Hertfordshire Secondary Phonological Assessment Pack	***Universal*** • Hertfordshire SPLD Phonological Awareness Pack a range of teacher strategies and activities with handouts to develop syllable detection, rhyme, alliteration, phoneme blending and segmentation, phonological awareness for secondary child/ young person • Hertfordshire Phonological Skills and Games, list of syllables, rhyme initial sound/alliteration and initial middle and final phoneme game– based activities for the classroom
	Sound Linkage: An Integrated Programme for Overcoming Reading Difficulties - for any age PhAB & PhAB2 Primary - test of phonological processing, ages 5-14 CTOPP2 2013 - phonological awareness, memory & naming speed subtests, ages 4-24, requires qualification level B. Dyslexia Portfolio phoneme	***Targeted provision*** • Sound Linkage: An Integrated Programme for Overcoming Reading Difficulties - A cumulative multisensory phonological awareness programme. Activities to support identification of words and syllables; identification and supply of rhyming words; identification and discrimination of phonemes; blending, segmentation, deletion, substitution, and transposition of phonemes within words., any age, at a cost • Targeted interventions in small groups or one-to-one using evidence-based learning principles. • Phase 1 Teaching Programme Letters and Sounds six-phase teaching programme to help practitioners and teachers teach children how the alphabet works for reading and spelling. Primary ages, free to access. • Little Wandle, (or similar DfE approved intervention) Letters and Sounds Revised, Systematic, Synthetic Phonics Programme, at a cost. • Whole word reading or a different approach may be needed rather than using a phonics method.

	deletion and non-word reading subtests, ages 5-16+	
What might you see? (Barriers to learning)	**Suggested tools for identification of need**	**What can help?** (Strategies and provision made by settings according to the ages and stages of the child/young person)
Reading *Child/ young person may have difficulty with:* • engaging with reading independently or with some adult support • making progress in their reading skills such as reading accuracy, fluency, and comprehension	Miscue analysis, Hertfordshire Running Record for all ages Miscue Analysis, guide and form for all ages.	***Universal*** • Hertfordshire Co-operative word games list game-based reading activities • Opportunities for success in reading (reading books with over 95% accuracy and reading familiar books) • Paired Reading with a peer • Being read to and talking about text, developing comprehension skills such as summarising, predicting and inference • Sound mats, key words, phonics games, plastic letters, ability, and interest appropriate reading books. • Use of abridged versions of texts to support access to more challenging material • Reading wall, personal reading poster or book, containing words that are known, • Partly know and unfamiliar words. Words could be ticked when they are read correctly.
• reading words outside of their vocabulary • blending sounds e.g. t-i-n *Child/ young person may appear:* • anxious or refuse when asked to read aloud • to have over reliance on adults or peers and to avoid • reading • to overly rely on images and contextual clues when reading • to dislike or avoid reading at home • to predict a word using the first sound rather than segmenting or using phonics to read a word • to misread words	Salford Sentence Reading and Comprehension Test ages 6-16 Test of Word Reading Efficiency (TOWRE) 2 -ages 6-24, at a cost, requires qualification level B York Assessment of Reading Comprehension (YARC) - ages 4-16 Wide Range Achievement Test 5 (WRAT5) reading subtests, ages 5-85+, requires qualification level B	***Targeted provision*** • Paired Reading with an adult • Explicit teaching of fluency including re-reading for speed, intonation, and response to punctuation • Explicit teaching of reading skills such as inference, scanning and summarising • Text-to-speech functions in Microsoft, Google, Ipad, Mac • Immersive Reader function edits font style and size, adds coloured overlay, read aloud and line focus functions plus other features Use Immersive Reader in Microsoft Edge - Microsoft Support • Use of audio books, reading software such as ClaroRead and reading pens, • Brooks's What Works for Literacy Difficulties? Up to date list of evidence-based schemes targeting reading for Key Stages 1-5. Schemes are reviewed for impact. • Phase 1 Teaching Programme Letters and Sounds six-phase teaching programme to help practitioners and teachers teach primary aged children how the alphabet works for reading and spelling. • Little Wandle, (or similar DfE approved intervention) Letters and Sounds Revised, Systematic, Synthetic Phonics Programme. • Strategies and approaches within the communication and interaction section may support cognition and learning. • Multi-sensory reading activities.

What might you see? (Barriers to learning)	Suggested tools for identification of need	What can help? (Strategies and provision made by settings according to the ages and stages of the child/young person)
Recognising common high frequency words (HFW) *Child/ young person may have difficulty with:* • remembering letter-sound relationships for reading and spelling	First 100 HFW SNIP Literacy 1 checklist pages 4-5 primary age pupils SNIP Literacy 2 checklist pages 5-6 secondary age pupils	***Universal*** • Pre-teach, teach and revisit HFW using a multisensory approach, overlearn and use in context. • High Frequency word lists and flash cards • Hertfordshire word fan for first and second 100 high frequency words.
• remembering high frequency words for reading and spelling • accurate and/or fluent reading • matching the quality of their written work with their language skills • understanding (comprehending) text • inferring meaning from and/or answering questions about text • reading words outside of their vocabulary	Unlocking Letters and Sounds (ULS) A DfE validated programme for assessing and teaching phonics, Foundation to end of year 2	***Targeted provision*** • Precision Teaching – DfE Youtube video on precision teaching, and SEND Success 30 minute webinar. • Unlocking Letters and Sounds (ULS) A DfE validate programme for assessing and teaching phonics, Foundation to end of year 2, at a cost. • Catch up Literacy - ages six to fourteen 1:1 reading intervention for word recognition and comprehension • Switch-on Reading- KS2,3,4 1:1 • National Literacy Trust Skills Academy Secondary pupils - Game changers (freestyle football or breakdancing themed sessions) examples. Full intervention available at a cost.

What might you see? (Barriers to learning)	Suggested tools for identification of need	What can help? (Strategies and provision made by settings according to the ages and stages of the child/young person)

Spelling		*Universal*
Child/ young person may have difficulty with: • accurately spelling high frequency words and spelling rules such as root words, prefixes are not secure. • recalling and/or knowing graphemes • spelling accurately using the correct grapheme (letter) choice i.e. spelling phonetically • breaking down words into syllables and sounds • a slow speed of writing due to slow spelling fluency		• Look, Say, Cover, Write—this can be adapted to suit learners' needs such as additional stages for tracing over the words, air writing, writing in sand, verbalising the word using letter names etc. • Mnemonics– Use visuals, colour, pictures, words within words, sounds or rhymes to help remember letters within words, or 'mental hooks.' • Rainbow writing— multisensory sight word method for learning spellings with opportunities to then write the word in a chosen colour on a fresh page without any visual prompt. • Teach 'etymology' the roots, suffixes, and prefixes of words using multisensory techniques such pictures, sounds and videos to learn the meaning of the roots, suffixes, and prefixes. • Use of 'boxes' font when introducing words – supporting CYP to see the physical structure of a word, using visual clues as well as spelling strategies. • Key word mats with picture clues, phonic mat, vocabulary lists, glossaries. • Personal spelling book in alphabetical order that can be added to. • Mini Whiteboard to test out spellings before putting pen or pencil to paper. • Phoneme frames to support segmenting for spelling. • 'Ask Siri' on an iPad if a CYP does not know where to start with a spelling. • Use of spelling Apps such as: A+ Spelling, Mt Thorne Spelling with Dragons, DDs Dictionary, • ICT games - Free online spelling games, KS1 and KS2
	New Group Spelling Test (NGST) ages 7-14+ Helen Arkell Spelling Test (HAST 2) ages 5-adult Wide Range Achievement Test 5 (WRAT5) spelling subtest, ages 5-85+, at a cost, requires qualification level B– see details here	*Targeted provision* • Precision Teaching – DfE Youtube video on precision teaching, and SEND Success 30 minute webinar. • Brooks's What Works for Literacy Difficulties? Up to date list of evidence-based schemes targeting Spelling for Key Stages 1-5. Schemes are reviewed for impact and contact details for each scheme are provided.

What might you see?	Suggested tools for	What can help?
(Barriers to learning)	identification of need	(Strategies and provision made by settings according to the ages and stages of the child/young person)

Writing/Recording	Somerset School age factfile	Universal
Child/ young person may have difficulty with: • the pace or quality of their handwriting and/or letter formation, and do not competently use an alternate method of recording • accurately using punctuation and grammar • forming or remembering sentences • sequencing thoughts • word finding • demonstrating their underlying ability and knowledge when writing • starting written work or laying out work on the page	identification table to support identification of motor skills and sensory/ cognitive skills for writing. Pages 21-31, all ages	• Opportunities to talk before writing and to 'talk like an expert'. • Writing support such as pen grips, writing slopes, alternative methods of recording using technology, word spacers. • Provide an example of the finished product to model expectations. • Write on alternative lines to leave space for editing. • Coloured paper or exercise books. • Teacher modelling the writing or examples of a 'good one.' • Magpie books for word finding and word mats related to the topic. • Model the thinking process around language choice, grammar, and live mark when writing. • Allow additional thinking and writing time, give print outs of text, sit close to and facing the board. • Word banks and scaffolding materials such as sentence starters, graphic organisers, pictures, labels, images, writing frames, story boards or story maps, key words on post-its that can be moved around, learning how to mind map. • Support writing with colour, images, actions, sensory experiences, and drama. • Using a defined ending, e.g. a line drawn on the page to indicate where child/ young person to get to.
	DASH 2007 - speed and legibility of handwriting, 9 to 16.11. Dyslexia Portfolio writing subtest, ages 5-16+	Targeted provision • Dictate functions in, Microsoft, Google, Ipad, Mac with training on their use • Brooks's What Works for Literacy Difficulties? Up to date list of evidence-based schemes targeting Writing for Key Stages 1-5. Schemes are reviewed for impact and contact details for each scheme are provided. • Hand skills support intervention • Foundation skills intervention

What might you see? (Barriers to learning)	Suggested tools for identification of need	What can help? (Strategies and provision made by settings according to the ages and stages of the child/young person)
Numeracy Child/ young person may have difficulty with: • remaining focused or motivated when learning in maths • learning new mathematical	The Dyscalculia Checklist Steve Chinn identifies most of the key issues/ behaviours that contribute to maths failure, all ages, free to access	Universal • Know starting point and begin by visiting prior learning with low stakes and high success activities to build confidence and engage child/ young person. • Use of recap of skills required before teaching new material. • Understand the numeracy specific barriers and strengths of learners. • Access to worked examples and meaningful real-world examples such as shopping, train/ bus timetables, money management. • Allow the child/ young person to talk through their learning and thinking.

What might you see?		What can help?

| skills
• Making progress in their maths learning
• sharing their thinking around maths tasks with peers or adults | | • Reinforce understanding of maths using 'hands-on' diagrams and models.
• Follow Concrete, Pictorial, Abstract sequence of learning to introduce new concepts.
• Use Thinking Aloud teaching to scaffold problem solving. Narrate the thought process.
• Opportunities to consolidate learning through use of concrete resources such as manipulatives, place value grids, pictorial supports such as pizzas/cakes.
• Provide visuals such as times table grids, number lines, number square etc. |
| • using or applying mathematical concepts
• sense of number and estimation
• keeping up with the pace of learning
• high levels of anxiety within the maths classroom
• mental arithmetic skills
• basic understanding of quantity
• understanding Base-10
• the four operations of addition, subtraction, multiplication, and division
• recording operations using written methods
• difficulty understanding specific concepts such as fractions, ratio, percentages, time, and money | Diagnostic Assessment of Numeracy Skills (DANS) determines areas of numerical strength & weakness, KS1-KS2

More Trouble with Maths Diagnostic Assessment reveals error patterns, includes maths vocabulary and maths anxiety, all ages

Dyscalculia Assessment investigates numeracy abilities to inform a teaching programme, all ages | *Targeted provision*
• Catch-up Numeracy, a structured 1:1 intervention, ages 6-14
• Number Shark- game based catch up programme for maths foundations, ages 5-14, at a cost
• First Class @ Number, intervention to address gaps in year 1 and 2 curriculum, at a cost
• Numicon Breaking Barriers, assessment and step by step activities, ages 7 onwards, at a cost
• Beat Dyscalculia highly structured, multi-sensory numeracy programme, all ages (but designed with KS1 KS2 curriculum), at a cost
• Dynamo Maths, intervention for those not meeting age related expectations in maths. Contains assessment and intervention, at a cost
• Maths for Life differentiated approach to the maths curriculum that lays down solid foundations of essentials maths for life, all ages, at a cost |

What might you see? (Barriers to learning)	Suggested tools for identification of need	What can help? (Strategies and provision made by settings according to the ages and stages of the child/young person)
Cognitive Barriers to learning (Executive Function) Working Memory	Pearson Working Memory Checklist all ages	*Universal* • Recognise, repeat, reduce. Recognise the pressure on working memory, repeat key information in the same way, reduce pressure on working memory.

Child/ young person may have difficulty: • remaining focused on the task and/or appear not to listen effectively • keeping up with the pace of whole class teaching and learning • remembering instructions • managing multi-step tasks and problem solving • copying from a worksheet or the board • understanding and/or retaining verbal information • understanding and/or retaining written information • organising tasks such as time keeping, homework, equipment • making academic progress • keeping their place in tasks • being motivated to learn		• Pre-teaching and revisiting of key information and new topics • Make explicit links to prior learning by 'thinking aloud' and modelling how to 'open the right box' in the working memory • Hands on practical learning opportunities movement and rhyme, discussion, and structured talk • Practical demonstrations rather than explanations • Visual aids such as colour, highlighting, pictures, videos, checklists, flow charts, boxes, ask steps, now and next boards, white boards, post-its with key words, key word, and sentence starter key rings, print outs of information on the board.
	Dyslexia Portfolio Digit Recall Forwards, Digit Recall backwards, ages 5-16+ Working Memory Rating Scale, 5-11 years	***Targeted provision*** • 1:1 or small group support to learn and use memory support strategies. How Can I Remember All That? By Dr. Tracy Packiam Alloway or Improving Working Memory by Dr. Tracy Packiam Alloway could support these sessions. • Bradford Small group or 1:1 memory games

What might you see? (Barriers to learning)	Suggested tools for identification of need	What can help? (Strategies and provision made by settings according to the ages and stages of the child/young person)
Cognitive Barriers to learning Speed of Processing (Processing speed is the pace at which you take in information, make sense of it, and begin to respond. This information can be visual,	Hertfordshire Processing speed checklist all ages	***Universal*** • A calm quiet environment when giving instruction. • Give time to process any information that is given either orally or in written form. • Give extra time to complete tasks. This may include to think and recall to answer a question, formulate a sentence, recall sounds for spelling, retrieve sounds for reading. • It is important to be aware that the child/ young person may find tasks more tiring than other pupils. • Chunk information or instructions.

such as letters and numbers. It can also be auditory, such as spoken language). *Child/ young person* may: • take significantly longer than peers to start and complete tasks • appear to forget information or instructions • seem easily distracted • give up easily and appear frustrated with learning and lack confidence		• Accompany talk with demonstration where possible. • Careful use of questioning. Oracy techniques, talk partners, articulating learning. • The learning environment has been appropriately considered for the teaching space layout, seating plans and groupings take account of individual needs and routinely provide opportunities for access to role-models, mixed-ability groups, structured opportunities for sharing of ideas. • Multi-sensory approach – kinaesthetic to help motor pathways.
	Comprehensive Test of Phonological Processing CCTOP2– Rapid Symbolic Naming, ages 4-24, requires qualification level B Dyslexia Portfolio Naming subtest, ages 5-16+ PHAB2 rapid symbolic naming, picture naming ages 6-14 years	*Targeted provision* • 1:1 or small group support to develop and use their own toolkit of strategies to support their speed of processing needs. • Staff to consider recommendations, strategies, and approaches as a result of assessment or consultation.

Useful resources and guidance on strategies

Cognitive Barriers general
Executive functioning Harvard University
Working Memory in the Classroom, Gathercole and Alloway, 2007

Cognitive Barriers strategies, provision, and interventions
Developing Memory Skills in the Primary Classroom by Gill Davies
Somerset's Sensory Processing Handbook
Call Scotland iPad apps for learners with complex additional support needs.pdf

Literacy general
Improving Literacy in Key Stage 1, EEF Guidance Report
Improving Literacy in Key Stage 2, EEF Guidance Report
Improving Literacy in Secondary Schools EEF Guidance Report

Numeracy general
Improving Mathematics in the Early Years and Key Stage 1 | EEF
Improving Mathematics in Key Stages 2 and 3 | EEF
EEF blog: Promoting high-quality talk in Maths | EEF

Numeracy assessment
GL Dyscalculia Screener
The Dyscalculia Assessment - Jane Emerson, Patricia Babtie - Google Books
More Trouble with Maths, Steve Chinn
New PUMA - Progress in Maths Assessments For KS1 & KS2 (risingstars-uk.com)

Numeracy strategies, provision, and interventions
The Dyscalculia Solution: Teaching number sense - Jane Emerson, Patricia Babtie
Maths | Nessy

EEF Promising Projects contains a range of reviewed literacy and learning interventions as does Effective educational intervention database - Evidence 4 Impact

Choosing a Phonics Teaching Programme, DfE

Validated Systematic Synthetic Phonics Programme Providers, DfE

Call Scotland Ipad Apps to Support Literacy difficulties

Call Scotland Chromebook apps and extensions for learners with dyslexia

Call Scotland android apps for learners with dyslexia

Literacy assessment

British Dyslexia Association foundation stage checklist

British Dyslexia Association primary age checklist

British Dyslexia Association secondary age checklist

PATOSS SpLD checklist EYFS.pdf

PATOSS SpLD checklist primary.pdf

PATOSS SpLD checklist secondary.pdf

PATOSS SpLD checklist post-16.pdf

Writing assessment

GAPS: Progress in Grammar, Punctuation & Spelling Assessment (risingstars-uk.com)

Writing strategies, provision, and interventions

Talk for writing – Pie Corbett - Outstanding Teacher Training - Talk for Writing, at a cost

Spelling Rules, Riddles and Remedies: Advice and Activities to Enhance by Sally Raymond.

Willow Dean Scheme

Willow Dean scheme of work - TES

ipad-apps-for-learners-with-dyscalculianumeracy-difficulties.pdf

Reading assessment

New PiRA– Progress in Reading Assessments for KS1 and KS2, at a cost

Reading strategies, provision, and interventions

Teach your Monster to Read- iPad-based intervention for free Phonics, Reading and Mathematics Games

Education Recovery Interventions, national Literacy Trust

Rewordify.com | Understand what you read Free online software that improves reading through simplifying language

Elklan Training Limited

Home | Bag Books provides multi-sensory books and storytelling for people with severe or profound and multiple learning disabilities.

Sensory Stories and Sensory Storytelling | SEND - Twinkl

Sensory Stories | The Bridge Special School

Sensory Stories for PMLD and SLD - Special Education and Inclusive Learning

Teaching Reading to All Learners Including Those with Complex Needs: A Framework for Progression within an Inclusive Reading Curriculum by Sarah Moseley

Big writing intervention Big Writing | Andrell Education, at a cost

Write Dance – handwriting for early years/infants, at a cost

Nessy Writing Beach, games, videos, printable resources, develop writing skills in structured step-by-step system, ages 7+, at a cost

Training available	
High quality teaching and effective practice	**Spelling**
Webinar: Adapting teaching for learners with SEND	Whole School SEND (ppt)	Practical Solutions Plus – Spelling (Virtual & eLearning) - BDA (bdadyslexia.org.uk)
High Quality Teaching to support pupils with SEND - Part 1	Nasen	Teaching Spelling Strategies - YouTube
High Quality Teaching to support pupils with SEND - Part 2	Nasen	How I Teach Spelling	Active Spelling Strategies & ways to make practicing spelling fun!
High Quality Teaching to support pupils with SEND - Part 3	Nasen	Spelling - BBC Teach (Lots of short videos for different spelling patterns/rules)
High Quality Teaching to support pupils with SEND Part 4	Nasen	
	Writing

Effective support for children and young people with SEND: Session 1 | Nasen

Effective support for children and young people with SEND: Session 2 | Nasen

Effective support for children and young people with SEND: session 3 | Nasen

Effective support for children and young people with SEND - session 4 | Nasen

Webinar: High-Quality Teaching - Targeting Areas of Need | Whole School SEND

Webinar: High standards and an inclusive curriculum for all | Whole School SEND

Webinar: High standards and an inclusive curriculum - Best Practice | Whole School SEND

Differentiation in Practice | Optimus Education (optimus-education.com)

Quality First Teaching | Optimus Education (optimus-education.com)

SEND Inclusive Teaching Programme | Optimus Education (optimus-education.com)

Practical online resources to support SEND students | Support Services for Education

Universal Provision for SEND | Support Services for Education

Webinar: Ensuring accurate identification of SEN in school and college settings | Whole School SEND

Webinar: Early Identification and Intervention: Acting upon the Earliest Indicators of Need at Every Stage | Whole School SEND

Reading

Teaching English: How to teach reading | Teaching English |

British Council Courses for educators | Helen Arkell

Primary Reading: Inspire a Love of Reading | The National College

Raising Standards in Reading Comprehension | National Literacy Trust

Reading for Learning | Secondary Online CPD | National Literacy Trust

Primary Reading: Develop Reading Comprehension Skills | The National College

Developing Reading Comprehension Skills Ready for Secondary School | The National College

Chris Such: The Art and Science of Teaching Primary Reading

Improving Writing in Key Stage 2 | National Literacy Trust

CPD: Supporting struggling writers | Teaching Resources (tes.com) (14-16 year old)

Numeracy

Number Sense and Place Value (maths.org)

Top Tips to Teach Number Sense Well - Rainbow Sky Creations

Number Sense Activities for the Classroom - WeAreTeachers

Teaching Number Sense - Over 50 Free Hands-on Learning Activities - Sea of Knowledge What is Number Sense? The Key to Strong Math Skills - Teaching with Jillian Starr (jillianstarrteaching.com)

Modular CPD (Recognised Teacher): Introduction to dyscalculia | Nasen

Cognitive Barriers

Working Memory Training, SSE, on demand, at a cost

Executive Function Training– e-learning, an overview of Executive Function Skills (Working Memory, Planning & Prioritising, Organisation, Metacognition, Impulse Control, Emotional regulation, Task Initiation, Flexibility)

Webinar: Teaching Children with Cognition and Learning Needs– Whole School SEND,

Dyslexia Awareness

Modular CPD (Recognised Teacher): Introduction to dyslexia | Nasen

Understanding Dyslexia | Nasen

Education – Teachers – Made By Dyslexia Understanding Dyslexia FREE teacher edition | Nessy Courses for educators | Helen Arkell

Sir Jim Rose Dyslexia and the Simple View of Reading - YouTube

Further advice and support available from local teams once strategies have been implemented and reviewed

For Reception:

- For those working in Reception at the Early Years Foundation Stage, schools can also refer to Early Years OAIP Framework (available March 2025)
- Early Years team for advice regarding children attending private voluntary and independent settings - Peterborough Early Years and Childcare
- Portage for children 0-5 with needs in developing play skills with significant support needed in 2-3 areas of early learning before they begin attending a setting - Peterborough Information Network | Early Years SEN Specialist and Portage Service

- Children's Occupational Therapy Service- Peterborough (CPFT) | CPFT NHS Trust – there is also a helpline (professionals and parents can access) which can be booked via cpm-tr.childrensotcpft@nhs.net

For Primary, Secondary and College:
- Advice or support via a request for involvement for the Specialist Teaching and Support Service (AATS, SAPS, LASS) - Peterborough resources for SEND Professionals
- Advice or support via Education Psychology Service - Peterborough Information Network | Educational Psychology Service (Local Offer)
- Speech and Language Therapy Service - Peterborough Information Network | Speech & Language Therapy for Children
- Children's Occupational Therapy Service- Peterborough (CPFT) | CPFT NHS Trust – there is also a helpline (professionals and parents can access) which can be booked via cpm-tr.childrensotcpft@nhs.net
- Peterborough SEND Hub network - Peterborough Information Network | Peterborough Specialist SEND Hub Network
- Use of Early Help Assessment - Early Help and Targeted Support | Peterborough City Council and Peterborough Information Network | Targeted Support
- Mental Health Support Team - Cambridgeshire and Peterborough Emotional Health and Wellbeing Service (cambspborochildrenshealth.nhs.uk)
- Consultation with child/ young person and adolescent mental health service (CAMHS) - How to refer | CPFT NHS Trust
- FCAMHS https://www.cpft.nhs.uk/fcamhs
- DeafCAMHS https://swlstg.nhs.uk/national-deaf-camhs-cambridge
- School Nursing Service - Peterborough Information Network | School Nursing Service
- Advice from Behaviour and Inclusion team when considering the use of re-integration timetables - Behaviour and Inclusion team
- Liaison with the Virtual School for training and advice - Peterborough Information Network | Peterborough Virtual School

Communication and Interaction

'Children and young people with speech, language, and communication needs (SLCN) have difficulty in communicating with others. This may be because they have difficulty saying what they want to, understanding what is being said to them or they do not understand or use social rules of communication. The profile for every child with SLCN is different and their needs may change over time. They may have difficulty with one, some or all of the different aspects of speech, language, or social communication at different times of their lives. Children and young people with … Autism, are likely to have particular difficulties with social interaction. They may also experience difficulties with language, communication, and imagination, which can impact on how they relate to others.' SEND Code of Practice, 6.28. and 6.29.

Autism, social communication, speech, language, and communication need is often called a 'hidden difficulty.' This means that instead of communication difficulties people may see child/ young person struggling to learn to read, showing poor behaviour, having difficulties learning or socialising with others. Some children/ young people may become withdrawn or isolated. Their needs are often misinterpreted, misdiagnosed, or missed altogether.

General approaches and strategies for Communication and Interaction

- Relevant staff awareness and understanding of specific child/young person communication and interaction needs. Whole setting staff could have understanding of the different forms of communication and interaction needs. Schools can utilise support from AATS, SALT and other appropriate training bodies.
- Child/ young person will access strategies and resources typically available in the ordinary learning environment, with an emphasis on appropriate multi-sensory teaching aids to support learning and social activities.
- Tasks may need to be adapted for the individual, by level / outcome / pitch / pace and grouping. Aspects of structured teaching might be helpful.
- Staff are skilled in adjusting the pace and order of activities to maintain interest and attention.
- All staff are skilled in differentiating their language and adapting their use of non-verbal communication according to individual need.
- Empowering child/ young person through the voice of person-centred practices.
- Recording usual way of working, evidenced in APDR. Making applications for Exam Access Arrangements as required.

What might you see? (Barriers to learning)	Suggested tools for identification of need	What can help? (Strategies and provision made by settings according to the ages and stages of the child/young person)
Expressive language or a speech production difficulty to communicate needs and wants *The child/ young person may:* • have a limited range of vocabulary	Universally Speaking Checklist 5-11yrs, left hand column Universally Speaking 11-18	***Universal*** • Modelling developmentally appropriate language. • All attempts to communicate and speak are encouraged. • Allow time for child/ young person to process and respond (10 second rule). • Introduce a variety of language through rhymes, songs, drama. • Acknowledge and validate all forms of communication (e.g. non-verbal and spoken) and avoid correction to promote motivation for talking and self-esteem. • Providing additional alternative augmentative communication techniques. No-tech options include:

- use shorter, more simple sentence structure - only talk about the here and now, rather than things in the past or future - use simpler forms of words e.g. 'geen' - instead of 'green' - swap some sounds e.g. 'bish' instead of 'fish' - have difficulty responding to the whole of a sentence	- o Gestures and facial expressions - o Writing - o Drawing - o Spelling words by point to letters - o Point to photos, pictures or written words - Reducing pressure to speak by providing alternative means of expression (e.g. laptop, whiteboards, use of symbol communication). - Communication friendly classroom. **Targeted provision** - Providing additional alternative augmentative communication techniques. High-tech options include: - o Using an app on an iPad or tablet to communicate - o Using a computer with a "voice," sometimes called a speech-generating device - Small group or individual language sessions and / or language sessions (e.g. expressive vocabulary and social skills). - Language programme devised by a Speech and Language Therapist (SALT) in line with service polices and protocols. Peterborough Information Network	Speech & Language Therapy for Children

What might you see? (Barriers to learning)	Suggested tools for identification of need	What can help? (Strategies and provision made by settings according to the ages and stages of the child/young person)
Receptive language *The child/ young person may:* - find it difficult to follow instructions, follow on part of the instruction - need more time to understand what has been said - ask questions to clarify understanding - copy peers	Somerset school age fact file 4-19yrs, p. 121. Universally Speaking Checklist 5-11yrs, middle column	*Universal* - Enhancing classroom environment for a vocabulary rich approach (e.g. words on the wall). - Checking that hearing has been tested. - Gaining the child/ young person's attention before giving the instruction (e.g. using their name first). - Considering how much information a child/ young person can manage when giving instructions and adapting language accordingly (e.g. reducing complexity of language, avoiding idioms, avoiding sarcasm and have consideration of grammar). - Modelling language and consider rephrasing peer class contributions. - Emphasise key words/ vocabulary when speaking. - Ask child/ young person to repeat instructions to clarify their understanding or explain the instruction in their own words. - Providing visual prompts including key vocabulary and visual timetables.

• echo back question or last part of the sentence they have just heard • repetition of words or whole phrases from familiar TV programmes, stories, and conversations		• Awareness of what would be an appropriate tone of voice (calm, not too loud). • Awareness of rate of speech (slow down). • Allowing extra time to process spoken language. • Think about the seating of this child/ young person within the classroom and their environment; limiting any distractions including low arousal classrooms. • Instructions should be given in order of completion. • Access to exam modifications, e.g. an oral language modifier for assessments • Visualised instructions • Checklists
	Test of abstract language comprehension at a cost TALC 1 (Primary) TALC 2 (Secondary) Speech and language link at a cost	**_Targeted provision_** • Pre-teaching of topic vocabulary. • Explicit teaching on note taking and organisation skills.

What might you see? (Barriers to learning)	Suggested tools for identification of need	What can help? (Strategies and provision made by settings according to the ages and stages of the child/young person)

Difficulties understanding or using **social rules of communication** *The CYP may: (in different situations/with different people)* • find it difficult to take turns in conversations, or listen to others e.g. may dominate or withdraw • may find it difficult or not want to change topic of conversation and repair conversation where it goes wrong • need support to understand, build and maintain friendships • need support with changes in routine unsettling • need support to understand/ recognise facial expression, non-verbal cues and prompts and body language • need support to give context, detail, adjust speed of speech and tone of voice	Speech, Language and Communication Needs Progression Tools 4-10yrs, at a cost - page 22 Universally speaking Checklist 5-11yrs	***Universal*** • Modelling. • Peer role play. • Social stories and comic strip conversations. • Prompts – symbols, signing systems (e.g. Makaton in Reception). • Now (you are doing this) and Next (you are going to be doing that) boards. • Staff to have understanding that different cultures may have different social rules. Ensure a conversation with parents/ carers about what is expected in their culture. • Clear communication of expectations of the learning environment. • Opportunities for supported social interaction (e.g. unstructured playtimes, a variety of extra-curricular groups, circle of friends, friendship bench). • Awareness of social demands on a child with social communication needs and limiting the demand by giving a choice of working alone, in a pair or a small group. • Opportunities to answer questions in different ways (e.g. white boards, hands up and opting out) • Preferred communication style recognised and modelled by the supporting adult (not speaking in class, written, gestures) • Use of tools of communication, e.g. objects, objects of reference, photos, symbols, gestures, signing systems. ***Targeted provision*** • Adult led role play – teaching specific social situations. • Small group session to support development of social communication skills. • Identified spaces to offer choice of sensory preference (quiet, calm, or alerting spaces available). • Explicitly teach how to initiate, repair, and maintain relationships. • Clearly defined roles in peer interactions in interventions led by adult. • Support to respond to conflict in relationships and resolve difficult situations. • Support to understanding their own emotions and emotions of others. • Turn taking activities, led by an adult.

• not always ask for help, or feel able to express their needs • have an increased need for concrete, precise language. For example, someone may misunderstand jokes and sarcasm, idioms, synonyms		

What might you see? (Barriers to learning)	Suggested tools for identification of need	What can help? (Strategies and provision made by settings according to the ages and stages of the child/young person)
Listening and attention *The child/ young person may:* • have difficulties following multi step instructions • not appear to hear • not understand information • appear to forget information • demonstrate dysregulated behaviour e.g. avoidance, disruption, upset, anxiety, withdrawal • fleeting attention and difficulties sustaining attention • not respond to their name • only engage in adult led activities for limited periods • not follow classroom routine • rush to complete a set task	Check with parent carer when the last hearing test was conducted Sensory preferences and differences profile /Environmental checklist	***Universal*** • Cue child/young person into what you are saying - start by saying their name and checking back for understanding. • Use of active listening techniques within teaching. Explicit teaching of active listening. Using supportive resources if required. Listening to all of the words, looking in the direction of the speaker (not necessarily requiring eye contact) and remaining quiet so other people can listen. • Simplifying language and giving increased processing time. • Sequential instruction tasks chunked and visually supported if appropriate using gesture, pictures, objects of reference (CYP's preference at age/stage appropriate) • Modelling - adults to model and scaffold appropriate language and conversation skills • Sensory strategies in the mainstream classroom may need to be considered at times where there are increased demands placed on the child to encourage listening and attention. Sensory, fidget and fiddle objects (e.g. TheraBand's, peanut balls to sit on instead of a chair) • Movement breaks in the mainstream classroom may need to be considered, particularly prior to times where there are increased demands placed on the child. Fidget and fiddle objects (e.g. TheraBand's, wobble boards, peanut balls to sit on instead of a chair). • Backward chaining - chain parts of the task together (e.g. build the sequence at the last part of the task and working back so the child/ young person experiences success and then gradually work back to increase more elements until they can do the entire task). • Consider the seating position of the young person to promote attention and listening / minimise distractions.

• fidget and move about		• If there is hearing loss, the adult (and peers) will ensure they are facing the child, not covering face etc (see sensory and physical). • Use of timers, so they know they only must focus for a comfortable amount of time.
		Targeted provision • Test of Abstract Language Comprehension TALC 1 - activities to support development of receptive language • Explicit teaching of active listening. Listening to all of the words, looking in the direction of the speaker (not necessarily requiring eye contact) and remaining quiet so other people can listen. This could be using intensive interaction and attention autism. • Sensory diet and movement breaks outside of the mainstream classroom.

Useful resources and guidance on strategies

Speech and language
SALT toolkit
Communication friendly classroom
Expressive language activities
Selective mutism framework
Speaking and listening
Leicestershire Every child a talker

Occupational therapy
OT toolkit

Classroom support
Now and Next
Visual timetables
Using-choice-boards-visual-helpers.pdf (gorton-manchester.org.uk)
Using-pictures-and-symbols-in-early-years-settings.pdf
Profiles
https://www.autismeducationtrust.org.uk/resources/progression-framework

Other
https://www.elklan.co.uk/Training/
Autism Education Trust
Michael Palin Centre for Stammering (https:// michaelpalincentreforstammering.org)
Autism Education Trust Early Years framework
Learning About Neurodiversity at School (LEANS) | Salvesen Mindroom Research Centre
Call Scotland iPad Apps for Complex Communication Support Needs: Augmentative and Alternative Communication (AAC)
android-apps-for-complex-communication-support-needs.pdf
Intensive-Interaction.pdf

Further school Assessment
GL Emotional Literacy Assessment– assessment of strengths and weaknesses in self-awareness, self-regulation, motivation, empathy and social skills, 7-16 years, at a cost
Strengths and Difficulties Questionnaire (SDQ) - For identifying areas of strengths & difficulties to be completed by school, family and child and young person (CYP). Age 3-17
Developing Baseline Communication Skills By Catherine Delamain, Jill Spring is a practical resource designed to fit with baseline assessments in primary school. It contains a programme of games and activities to foster personal and social development and promote language and literacy skills in 3–5-year-olds.

Training available

[Communication and Interaction – Whole School SEND](#)

[Online CPD Units | Whole School SEND](#)

[Resource library for educators - Speech and Language UK: Changing young lives](#)

[Autism Training and Development | Autism Education Trust](#)

[Training courses - Speech and Language UK: Changing young lives](#)

[Training for Schools and Settings | Elklan Training Ltd](#)

[Training – SCERTS](#)

[Autism - Teachers Guide.pdf](#)

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- Speech and Language Therapy Service - [Peterborough Information Network | Speech & Language Therapy for Children](#)
- Occupational therapy children's service - [Children's Occupational Therapy Service- Peterborough (CPFT) | CPFT NHS Trust](#)
- Peterborough SEND Hub network - [Peterborough Information Network | Peterborough Specialist SEND Hub Network](#)
- Use of Early Help Assessment - [Early Help and Targeted Support | Peterborough City Council](#) and [Peterborough Information Network | Targeted Support](#)
- Mental Health Support Team - [Cambridgeshire and Peterborough Emotional Health and Wellbeing Service (cambspborochildrenshealth.nhs.uk)](#)
- Consultation with child/ young person and adolescent mental health service (CAMHS) - [How to refer | CPFT NHS Trust](#)
- FCAMHS https://www.cpft.nhs.uk/fcamhs
- DeafCAMHS https://swlstg.nhs.uk/national-deaf-camhs-cambridge
- School Nursing Service - [Peterborough Information Network | School Nursing Service](#)
- Advice from Behaviour and Inclusion team when considering the use of re-integration timetables - [Behaviour and Inclusion team](#)
- Liaison with the Virtual School for training and advice - [Peterborough Information Network | Peterborough Virtual School](#)

Social, Emotional and Mental Health

'Children and young people may experience a wide range of social and emotional difficulties which manifest themselves in many ways. These may include becoming withdrawn or isolated, as well as displaying challenging, disruptive, or disturbing behaviour. These behaviours may reflect underlying mental health difficulties such as anxiety or depression, self-harming, substance misuse, eating disorders or physical symptoms that are medically unexplained. Other children and young people may have disorders such as attention deficit disorder, attention deficit hyperactive disorder or attachment disorder. Schools and colleges should have clear processes to support children and young people, including how they will manage the effect of any disruptive behaviour so it does not adversely affect other pupils. The Department for Education publishes guidance on managing pupils' mental health and behaviour difficulties in schools'. SEND Code of Practice, 6.32 and 6.33.

Schools have an important role to play in supporting the mental health and wellbeing of children by developing whole school approaches tailored to their particular needs, as well as considering the needs of individual pupils (p.4). There are things that schools can do for all pupils, as well as those at risk of developing mental health problems, to intervene early to create a safe and calm educational environment and strengthen resilience before serious mental health problems occur (p.5). The culture, ethos and environment of the school can have a profound influence on both pupil and staff mental wellbeing. Schools are in a unique position, as they are able to help prevent mental health problems by promoting resilience as part of an integrated, whole school approach that is tailored to the needs of their pupils. A whole school approach is one that goes beyond the teaching in the classroom to pervade all aspects of school life (p.8) Mental health and behaviour in schools (DfE, 2018)

General approaches and strategies for Social, Emotional and Mental Health

It is important to recognise that SEMH difficulties may reflect other underlying special educational needs or difficulties from other categories of need. Learning needs should be reviewed using settings own screening or assessment tools, or external advice to ensure that any SEMH needs or behavioural difficulties are not caused by any unmet learning need or communication difficulty. It is essential that barriers, identification tools, and strategies/provision from other areas of need outlined in this document are considered when supporting a child/ young person who presents with SEMH needs.

Due to the complex nature of SEMH needs, this section shows all possible strategies and provision that could be considered for all that may be seen. It is professional judgement and knowing your child/young person to decide which strategies will be appropriate. Not all strategies will be appropriate for all children/ young people.

- Use of whole setting approaches to promote wellbeing and resilience - consider completing whole setting audits.
- A relational policy underpinned by a clear ethos and values.
- Use of relational/restorative approaches to build, maintain and repair relationships as part of a whole school positive behaviour approach which reflects the underpinning beliefs held in e.g. therapeutic thinking, emotional coaching, restorative practice, Thrive, Virtual Schools relational practice training. Scaffolded approach into behaviour expectations.
- Encourage pupil to give their voice.
- Anti-bullying policy.
- Support available for staff working with child/ young person with SEMH via group or individual supervision or debrief sessions.
- Emphasis on giving the child/ young person choice rather than adult control and 'take up time' to respond to choose whenever possible.

- Use of distraction techniques and giving responsibility.
- Explicitly teaching de-escalation and self-management strategies.
- Use of positive language to assist children/ young people to make sense of their own feelings (e.g. using an emotion coaching approach).
- Use of PSHE, circle time and curriculum.
- Approaches to explicitly teach rules and routines, build self-esteem, and develop social and emotional skills to all children/young people.
- A good transition when the child/ young person starts a setting and between each year group/stage/setting, checking the history.
- A learning environment which is well organised and well ordered, enabling concentration and engagement.
- A wide range of sensory resources available within the environment and encouraging sensory play opportunities (play is important for all ages to support regulation).
- Reflecting on positive adult engagement and consequence environments.
- Recording usual way of working, evidenced in APDR. Making applications for Exam Access Arrangements as required.

What might you see? (Barriers to learning)	Suggested tools for identification of need	What can help? (Strategies and provision made by settings according to the ages and stages of the child/young person)
Engagement with curriculum *The child/young person may have difficulties with:* • participating in class discussions • remaining in the room • starting and remaining on a task • rushing work • being able to edit and improve their work without upset • maintaining their attention • being disruptive • remembering materials or instructions, • changes in routine	Identifying pupil views is a key feature of effective practice when identifying SEMH needs. All ages. ABCC charts (antecedent, behaviour, consequences, and communication) – an observational tool that allows you to record information about a particular behaviour to better understand what the behaviour is communicating. All ages. STAR Chart (Setting, Trigger, Action, Result) - A template for analysing what happens before, during and after an episode of behaviour. All	*Universal* • Whole setting approach to develop professional curiosity to further explore the child/ young person's presentation – why are they withdrawn/overactive/have poor concentration? • Assessment through teaching - e.g. are there parts of the curriculum that they find easier to manage than others? Use these to develop confidence. • Have a clear structure to the day. • Establish interests and use these to engage and develop relationship. • Buddying /peer mentoring. • Use of a transition object from home to help them feel safe and secure. • Giving responsibility for looking after someone else. • WOW boards to encourage child/ young person to think about what they did well at today. • Regular communication between home and school using a variety of methods including home/school book or emails. • Give controlled choices within timetable e.g. 'would you like to do task A or task B first?' • Set personalised learning targets. Tasks should have clear goals, outputs, and timescales for completion to reduce the 'unknown' and limit anxiety. • Chunk tasks. Make tasks short, with frequent breaks, and opportunities to move around. • Use visual support to provide structure to tasks e.g. now and next board, visual timetables etc. • When/then sentences.

• impulsive behaviours • remaining seated • low level disruption • task transition • following adult direction **Change in demeanour and/or appearance** (changes may have occurred quickly or over time). *The child/young person may have difficulties with:* • Change in appearance • attitude to learning, • motivation to engage with peers • quieter or louder in class • increase in stimming and/or tics • reduction in engagement with adults **Managing and/or regulating their emotions (e.g. quick emotional reactions to seemingly small stimuli)** *The child/young person may have difficulties with:* • Anxiety /low mood • Low confidence/self esteem • Unhappy/stressed • Withdrawn • Self-harming	ages. Strengths and Difficulties Questionnaire (SDQ) - For identifying areas of strengths and difficulties to be completed by school, family and child and young person (CYP). Age 3—17 years. The Spence Children's Anxiety Scale assess six domains of anxiety and can be used to understand whether a child/young person has raised levels of anxiety in a specific or more generalised area. Age 8—15. Sensory suggester tool. All ages. Behaviour indicator tool. All ages. Psychology Toolkit | CPFT NHS Trust	• Use short, clear instructions; recap and reinforce these during lessons. • Provide 'scaffolding' in the form of writing frames, word mats, relevant classroom displays, access to technology. • Say what you want them to do, rather than what you do not. E.g. 'walk slowly' rather than 'don't run.' • Consider seating and positioning in the classroom. A seat at the side or back of the classroom might be preferable for some children/young people so they do not worry about what is happening behind them. Some children/young people might prefer to be closer to the door to allow for time out if needed. • Sensory/calm box freely available. • Whole class movement breaks • Whole class calming activities (Safe calming activities) • Sensory checks throughout the day/in the moment understanding e.g. Colour Monster • Protecting and adapting playtime, maximising playtime. • Create an environment in which the learner can work; making use of flexible and multi-method learning approaches and consider alternative ways of recording to enable child/ young person to demonstrate their learning. • Understand that behaviour is a method of communication and seek what they are trying to communicate e.g. what purpose is the behaviour trying to achieve for the child/ young person? What is 'x' trying to tell us with their behaviour? Is there a history/context that can help us to understand behaviour? • Use of appropriate supportive language through scripts and or emotion coaching. • Keep a log and analyse pattern or trends to identify triggers. • Having a whole class 'check in' at the beginning/end of the school day to identify and resolve any worries. • Adapt use of voice, gesture, and body language. • Focus on reducing anxiety and thereby behaviours. • Flexible and creative use of rewards and consequences e.g. 'catch them being good.' • Positive reinforcement of expectations through verbal scripts and visual prompts. • Giving / allowing / agreeing to a fiddle object/self-soothing object.
	Emotional Literacy Checklist—Measure child/ young person's ability to understand and express feelings and	***Targeted provision*** • Multi-professional approach. Liaison with school nurse and relevant health professionals as needed. • Partnership and collaboration with home is essential to understand the wider picture.

• Self-injurious behaviour – refer to Communication and Interaction section • Substance misuse • Eating disorders • Fight/ flight/ freeze/ fawn response • Emotional regulation **Unpredictability of behaviour with lack of obvious triggers** *The child/young person may have difficulties with:* • behaviour does not seem to follow particular patterns • triggers may seem unrelated • behaviours seem variable or change on a regular basis • behaviour at home that may not be seen at school • behaviour at school that may not be seen at home • reaction when trusted adults are not available. **Attendance at school (EBSA)** *The child/young person may have difficulties with:* • Reduction in attendance • being late • patterns of non-attendance • parent carers report challenges getting their child/young person into school	highlight areas for intervention. Age 7—16 years. The Children's Mental Health and Psychological Wellbeing Portfolio—a range of simple, questionnaire-based assessments to measure child/ young person social and emotional skill. Age 2—20 years. Boxall profile— It identifies the levels of skills the child/ young person possesses to access learning. Age 4—18 years. Emotionally Based School Avoidance (EBSA) - tools for supporting child/young person, training for staff and guidance. Motional - Emotional Wellbeing & Mental Health Online Observing Children with Attachment Difficulties in School: A Tool for Identifying and Supporting Emotional and Social Difficulties in Children Aged 5-11	• Staff to seek advice and support from Designated Safeguarding Lead and/or Senior Mental Health Lead in school. • Staff to be trained and aware of any child/ young person with attachment difficulties, trauma informed practice and relational approaches and how to support them. • Risk assessment if appropriate. • Sensory/calm space available • Protected and adapted playtime • A regularly updated and easily accessible one page profile created by parent carers and teaching staff, along with the child/ young person, to give a snapshot of a child/ young person likes, dislikes, strengths, and areas where they might need a bit more support. • Make reasonable adjustments to behaviour policy. • When and then plans – breaking the cycle – skill to replace unwanted behaviour – what can do instead. • Interoception plan – linked to sensory – breaking cycle. • Make specific, planned, and reasonable adjustments to behaviour policy on a case-by-case basis. • Appropriate food and fluid program to support snack and meals to meet sensory needs and nutritional level to maintain energy and focus levels. • Free access to toilets *Classroom based interventions:* • Provide a personalised 'Help me' card for the child/ young person discreetly to ask for support from an adult. • Provide a 'Time out' or 'exit card' for the child/ young person to request time away from the classroom or task when required. A clear plan should be made about where the child/ young person can go, what they could do (provide calming activities), and the plan for reintegrating them into the classroom (e.g. they may be set a time to come back, an adult may need to check on them etc) • Use a visual strategy to support communication about emotional regulation in the classroom. This could be Zones of Regulation (a book is available at cost) or the Incredible 5-point Scale (a book is available at cost) • Provide an individualised visual timetable for the task, lesson and/or across the whole school day. • Consistent classroom transition support – use music, important job, snack time either side of break, pre-warning, transition object, photos, timers, friend to move to different classroom, leaving lessons early/late to move when it is quieter. • Use a worry box in the classroom so child/ young person can express their needs safely. • Calming boards • Use a 'keeping in mind' strategy such as the invisible string.

• missing lessons • difficulties with transition • Frequent illnesses i.e. tummy ache, headache • Anxiety on separation and unusual dependence on family members • Poor sleep hygiene • Inappropriate friendships **Making and maintaining healthy peer relationships and friendships** *The child/young person may have difficulties with:* • falling out with peers • not forming positive relationships • needing to feel in control of peer relationships • difficulties maintaining appropriate boundaries and relationships • understanding their own body signals/Interoception • understanding of others' emotions • developing relationships in unstructured times • physical aggression with others • isolated from peers • sensitive to disagreements • lacks resilience to repair the relationship • rejecting others	Outcomes Star™ transforms lives and services | Triangle	• Give warnings and/or preparation and allow discussion for any changes to the school day or for any school trips. Visual support might be helpful here such as pictures of any change or new place. • Personalise the environment, e.g. provide own workspace if this is preferable for the child/ young person. • Any adult in the classroom to support de-escalation in a consistent manner – consider using scripts. • Play based activities. • Using child/young person's strengths to put in place a skills-based curriculum focus. • Continued use of unconditional positive regard to ensure fresh start each lesson. *Interventions outside of the classroom (it is important to consider the right intervention to meet the needs of the child/young person for the skills you hope for them to develop; ensure an appropriate balance between outside and inside the classroom; and the interventions should have clear aims and outcomes):* • Identify a trusted key person(s) to talk about worries and support with problem solving. Schedule a daily check in or daily meet and greet with a trusted adult. This may happen at the start of the day to discuss the day ahead, at the end of the day to review the day, or during the day to check in about how the day is going. This should be at least 15 minutes daily. They may also need to be available on an ad hoc basis for support when required during the day. • Identified safe adults – a small group of adults identified by the child/young person. • Individualised ELSA (Emotional Literacy Support Assistant) Intervention which teaches specific emotional regulation and/or social skills. • Small group interventions aimed at developing social skills or communication such as: Talkabout, socially speaking, Time to talk, construction club • Direct teaching of calming/self-regulation strategies (visualisations, meditation, breathing). • Social stories/ social scripts/ comic strip conversations/ therapeutic stories. • A time to discuss and explicitly label emotions. • Circle of Friends Intervention aimed at developing understanding and collaboration within a class or peer group. • Nurture Group Provision. • Providing structure during unstructured times. • Outdoor interventions such as weekly gardening, forest school, sports. • Provide appropriate play-based activities and/or creative activities e.g. messy play, using playdough, drumming, music, drama, art. This should be at least once a week with a trusted adult. • Plan targeted opportunities to build positive relationships with the child/young person - e.g. a specific time

• understanding social language and phrases from others • a reduction in opportunities to play • balancing sensory input ***Environmental factors to consider:*** • body image/ self-image • sexuality • excessive social media use/ online presence/ gaming • safeguarding – CME/ CSE • inappropriate friendships • Adverse childhood experiences • Bereavement and loss		• in the day/week to share an activity that is of interest to you both. • Calming scripts to de-escalate, using activities with natural endings that support self-regulation such as word searches/mazes/ finger tracing etc. • A smaller/quieter place to eat lunch. • Flexibility around extra-curricular activities and how the child/ young person can access these.

Useful resources and guidance on strategies

Emotion	**EBSA**
Emotion coaching introduction	EBSA toolkit - (Bromley)
Emotion coaching resources	EBSA toolkit - (West Sussex)
Supporting A Child With Anxiety | Tips and Advice | YoungMinds	
emotional-regulation.pdf	**Tools**
The Interoception Curriculum Bundle | Kelly Mahler	Supporting SEN: Your strategies for inclusive classroom practice – Thrive approach
The Zones of Regulation | A Curriculum For Emotional Regulation	Meditation
A toolkit for schools and colleges	'WOW' Board - Self Esteem Tool for Kids
Anxiety Resource Pack.pdf	
Energy Management.pdf	**Eating**
Therapeutic Thinking	NHS - Eating and Feeding difficulties
Support for mental health and wellbeing in schools | The Thrive Approach	Eating-Disorder-Guidelines-for-Education-Professionals-2021.pdf
Helping every child become able to learn: nurtureuk home	
	Sleeping
Behaviour	Sleep Right podcasts | Disability charity Scope UK
NHS CPFT psychology toolkit	Peterborough Information Network | Scope Sleep Management Programme

PDA helpful approaches

Free behaviour resources – Beacon House

What we say – Beacon House

Positive Behaviour Support Proforma.docx

Social

Little parachutes social stories

Therapeutic Stories for Children — Play Therapy London

Social Communication Group – Early Years

Giant Scrunchie

parachutegames.pdf

Sensory

Sensory suggester

Understanding Your Child's Sensory Signals: A Practical Daily Use Handbook for Parents and Teachers: Amazon.co.uk: Voss OTR, Angie: 9781466263536: Books

Turn taking

turn-taking.pdf

Activities-for-developing-Turn-Taking-skills.pdf

Training available

Social, Emotional and Mental Health – Whole School SEND

Taking CARE to promote mental health in schools and colleges: animation: Mentally Healthy Schools

Teaching for neurodiversity: guide for educators: Mentally Healthy Schools

Challenging behaviours: Mentally Healthy Schools

Understanding self-harm in children - video and factsheet: Mentally Healthy Schools

Nessie – EBSA

https://www.gov.uk/government/publications/positive-environments-where-children-can-flourish/positive-environments-where-children-can-flourish

Understanding ADHD | OpenLearn - Open University

Training - ADHD Foundation : ADHD Foundation

Large organisations to help with SEMH

For settings:

Anna Freud resources for supporting mental health in schools - School and college resources | Anna Freud

MindEd is a free educational resource on children, young people, adults, and older people's mental health

Beacon House website with attachment-based resources

I-THRIVE an essential framework for communities who are supporting the mental health and wellbeing of children/ young people and families.

Twinkl mindfulness resources

MindEd – Free educational resource for parent carers and educational settings on child/ young person mental health

What We Do - YMCA

For child/young person:

How Are You Peterborough? | Home - support for mental health for children/young people who need to talk

Free Help & Counselling for Young People ¦ Cambridgeshire, Peterborough

Keep Your Head – Mental health and wellbeing information for children, young people, adults, professionals, and schools across Cambridgeshire & Peterborough

Peterborough - Centre 33

YoungMinds | Mental Health Charity For Children And young people

Home - Kooth - support for mental health for children/young people who need to talk

Shout: the UK's free, confidential and 24/7 mental health text service for crisis support | Shout 85258

MIND resources for young people aged 11 to 18 Information for young people on mental health and wellbeing | Mind, the mental health charity - help for mental health problems

NHS website relaxation resources and signposting. Mindfulness - NHS (www.nhs.uk)

Childline is the UK's free, confidential helpline for children and young people

Papyrus – UK charity for the prevention of young suicide

The Mix – UK support service for young people

What We Do - YMCA

Blue Smile | Children's Mental Health Charity in Cambridgeshire – providing specialist counselling and arts-based therapy to children/ young people

GPs, Health Visitor, and health services—If you speak to **your GP** about **your mental health** concerns, they can: ask questions about **your** feelings and thoughts that may help you better understand what you are going through and what support is available.

For specific support:
Bullying
Home - Red Balloon Learner Centres

Substance abuse
Aspire Recovery Service - Peterborough | Change Grow Live – support around substance abuse

Eating disorder
Peterborough Information Network | Personalised Eating Disorder Support

Beat – National Information and Helpline encourages and empowers young people presenting with eating disorders to get help quickly

Cambridgeshire and Peterborough parents - Nessie

Bereavement
Winston's Wish - giving hope to grieving children

CRUSE offers support to grieving children, young people, and adults, 0808 808 1677.

Cambridgeshire and Peterborough parents - Nessie

Educational Psychologist service are able to offer bereavement support for settings.

Domestic abuse

Safe lives UK-wide charity dedicated to ending domestic abuse.

Peterborough Women's Aid – supports and empowers women and children on their journey to realise their true value and full potential away from domestic abuse.

Domestic Abuse Support Service (DASS) - 0300 3731073 - https://impakt.org.uk/dass/

Peterborough Women's Aid - 01733 894964 - http://www.peteroroughwomensaid.co.uk/

Peterborough Rape Crisis - 01733 511250 - http://www.prccg.org.uk/

Living Keys - 07507 269081 - admin@livingkeys.co.uk

The Independent Domestic Violence Adviser (IDVA) Service only takes referrals from professionals, it has a duty system during office hours if advice or information is required -

idva.referrals@Cambridgeshire.gov.uk - IDVA duty for any queries: 01480 847718

Cambridgeshire & Peterborough Domestic Violence & Sexual Abuse Partnership - http://www.cambsdasv.org.uk/

Young carers

https://www.caringtogether.org/support-for-carers/young-carers/

https://www.cambridgeshire.gov.uk/residents/children-and-families/parenting-and-family-support/supporting-young-carers

https://fis.peterborough.gov.uk/kb5/peterborough/directory/service.page?id=U1U1mUXK1-U

LGBTQ and gender

https://thekitetrust.org.uk

Cambridgeshire and Peterborough parents - Nessie

For parent carers:

Peterborough Information Network | SEND Information Advice and Support Service (SENDIASS) can give child/young person and their parent carers information, advice, and support about SEND. The service is free, confidential, and impartial.

Home - FVP – Family Voice Peterborough

Little Miracles - HOME - Peterborough

MindEd – Free educational resource for parent carers and educational settings on child/ young person mental health

Young Minds – UK Mental health charity for children, young people, and their parent

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Further advice and support available from local teams once strategies have been implemented and reviewed

For Reception:

- For those working in Reception at the Early Years Foundation Stage, schools can also refer to Early Years OAIP Framework (available March 2025)

- Early Years team for advice regarding children attending private voluntary and independent settings - [Peterborough Early Years and Childcare](#)
- Portage for children 0-5 with needs in developing play skills with significant support needed in 2-3 areas of early learning before they begin attending a setting - [Peterborough Information Network | Early Years SEN Specialist and Portage Service](#)
- [Children's Occupational Therapy Service- Peterborough (CPFT) | CPFT NHS Trust](#) – there is also a helpline (professionals and parents can access) which can be booked via cpm-tr.childrensotcpft@nhs.net

For Primary, Secondary and College:
- Advice or support via a request for involvement for the Specialist Teaching and Support Service (AATS, SAPS, LASS) - [Peterborough resources for SEND Professionals](#)
- Advice or support via Education Psychology Service - [Peterborough Information Network | Educational Psychology Service (Local Offer)](#)
- Speech and Language Therapy Service - [Peterborough Information Network | Speech & Language Therapy for Children](#)
- Occupational therapy children's service - [Children's Occupational Therapy Service- Peterborough (CPFT) | CPFT NHS Trust](#)
- Peterborough SEND Hub network - [Peterborough Information Network | Peterborough Specialist SEND Hub Network](#)
- Use of Early Help Assessment - [Early Help and Targeted Support | Peterborough City Council](#) and [Peterborough Information Network | Targeted Support](#)
- Mental Health Support Team - [Cambridgeshire and Peterborough Emotional Health and Wellbeing Service (cambspborochildrenshealth.nhs.uk)](#)
- Consultation with child/ young person and adolescent mental health service (CAMHS) - [How to refer | CPFT NHS Trust](#)
- FCAMHS https://www.cpft.nhs.uk/fcamhs
- DeafCAMHS https://swlstg.nhs.uk/national-deaf-camhs-cambridge
- School Nursing Service - [Peterborough Information Network | School Nursing Service](#)
- Advice from Behaviour and Inclusion team when considering the use of re-integration timetables - [Behaviour and Inclusion team](#)
- Liaison with the Virtual School for training and advice - [Peterborough Information Network | Peterborough Virtual School](#)

Sensory and/ or Physical needs

'Some children and young people require special educational provision because they have a disability which prevents or hinders them from making use of the educational facilities generally provided. These difficulties can be age related and may fluctuate over time. Many children and young people with vision impairment (VI), hearing impairment (HI) or a multi-sensory impairment (MSI) will require specialist support and/or equipment to access their learning, or habilitation support. Children and young people with an MSI have a combination of vision and hearing difficulties. Information on how to provide services for deafblind children and young people is available through the Social Care for Deafblind Children and Adults guidance published by the Department of Health (see the References section under Chapter 6 for a link). Some children and young people with a physical disability (PD) require additional ongoing support and equipment to access all the opportunities available to their peers.' SEND Code of Practice, 6.34 and 6.35.

General approaches and strategies for Sensory and/ or Physical needs
- The view of the child/young person around how they feel has been sought in a child friendly way to ensure the physical school environment, communication and curriculum is accessible.

- Consider the physical school environment. Is their locker/ peg accessible and inclusive?
- Close home/setting/parent carer links/relationship (not just ICT based) so that staff are aware of any changes in home circumstances and environmental factors that might impact on progress. Also to ensure that information is shared appropriately.
- All staff are aware of individual child/ young person's sensory /physical disability and implications in all teaching and learning environments. Staff may choose to observe the child/ young person's journey through the day to ensure provision is accessible.
- Favourable seating arrangements are identified.
- Staff are aware that for some children/ young people, a sensory or physical disability could impact on their language and social interaction.
- Staff should ensure that child/ young person use aids and equipment to support their needs.
- Staff should ensure that all children/ young people have understood all instructions.
- Recording usual way of working, evidenced in APDR. Making applications for Exam Access Arrangements as required.
- Ensure fair access to school clubs, trips, and visits (including swimming, in and out of the pool) with forward planning and risk assessments. This would include consideration for transport and personnel.
- Accessibility plan with anticipatory consideration plans guiding this.
- A Personalised Emergency Evacuation Plan (PEEP) may be necessary for certain students with physical disability. Personal Emergency Evacuation Plan (PEEP)- TheSchoolBus

What might you see? (Barriers to learning)	Suggested tools for identification of need	What can help? (Strategies and provision made by settings according to the ages and stages of the child/young person)
Vision impairment *The child/ young person may:* - hold reading materials very close or at an unusual angle - adopt a poor or unusual posture when reading - not respond to non-verbal instructions such as facial expressions - lose their place when reading, skip lines or struggle to find text on a page - lack confidence in group activities - be hesitant when walking	Hold a conversation with the parent/ carer around concerns. Check when last eye check took place and whether any health professionals are involved such as a Consultant Ophthalmologist. Use the quick checker in this document. School staff are not expected to carry out any specialist assessments relevant to this area of need.	***Universal*** - Uncluttered worksheets. - Think about contrast e.g. paper and crayons, resources on a plain background that contrasts. - Enlarging of class resources e.g. larger text on worksheets. Not A3 as this is too large an area to scan for students with a vision impairment. - Use of matt laminates to reduce glare - Removing unnecessary text/pictures on worksheets, whiteboards, and presentations. - Ensuring good overall glare-free to access levels of light - Consideration of best placement of child in learning environment for seated tasks. - Provide additional resources for inclusive play, for example a bell in the ball so all can play together. - Ensure time for a child to map the room. Allow re-mapping to occur when furniture and resources change place to reduce confusion and potential injury. - Use blinds to reduce glare in the room. - Adults to ensure they do not stand with their backs to the windows when talking to the child. - For children who wear glasses, staff to ask for a spare pair to be kept at the setting if they are regularly forgotten.

What might you see?		

(Continued table from previous page)

What might you see? (Barriers to learning)	Suggested tools for identification of need	What can help? (Strategies and provision made by settings according to the ages and stages of the child/young person)
or bump/knock into things • walk with an unusual gait • have difficulty finding dropped items • have a short attention span when reading or writing • tilt their head excessively to one side, up or down • use excessive head movements when reading • squint or frown when looking at the board • struggle to copy information from the board or from a peer next to them. • have poor hand/eye co-ordination		• Close home/setting/parent carer links/relationship (not just ICT based) so that staff are aware of any changes in home circumstances and environmental factors that might impact on progress. Also to ensure that information is shared appropriately. • Joint working between school and family to discuss child/ young persons vision impairment • Curriculum adaptation that takes account of individual visual needs • Following medical advice about the wearing of glasses and/or occlusion (patching) • Accessing and using e-books e.g. RNIB Bookshare. • Awareness and risk assessment of impact of vision impairment for safety e.g. PE lessons, fire practice, offsite or unfamiliar visits. • Consider appropriate signage around the school to include braille and at accessible height of users. • Use of technology such as talking tins, iPads with the whole class. • Occupational Therapy Toolkit | CPFT NHS Trust
		Targeted provision • Staff to engage with partner agencies such as OT/ Physio/ Specialist Teachers of VI/ Deaf/ MSI/ PD professionals to be aware of and implement recommended strategies and advice to support the child/ young person. • Use RNIB Bookshare/ for electronic books /books in Braille via Specialist Teaching Service SAPS. • Use of ICT e.g. iPad connected to whiteboard. • Use recordable devices e.g., Talking Tins, penfriend via Specialist Teaching Service SAPS. • Consider doing a Request for Involvement for SAPS • Occupational Therapist 'Go to OT Guide'

What might you see? (Barriers to learning)	Suggested tools for identification of need	What can help? (Strategies and provision made by settings according to the ages and stages of the child/young person)

Deal	Hold a conversation with the parent/ carer around concerns. Check when last hearing check took place and whether any health professionals are involved such as a Clinical Audiologist and/or Ear, Nose and Throat Consultant. Use the quick checker in this document. School staff are not expected to carry out any specialist assessments relevant to this area of need.	*Universal*

Deal

The child/young person may:

- have immature grammar e.g. "me want apple"
- have immature speech sounds e.g. "bish" for fish,
- "gar" for car
- make less than expected progress in phonics
- make less than expected progress in the curriculum
- lose focus or be more often distracted in comparison to peers
- vary in response to hearing their name e.g. good if familiar voice, when close or can see you, in quiet environment
- not turn their head and smile, look up, and respond verbally to name
- give answers or comments which are not relevant, and show have missed information
- often asks for repetition of instructions
- have difficulty in starting a task after instructions (e.g. looks at other child/young person or asks for help)
- use limited vocabulary, not pick up new curriculum words or names readily

Hold a conversation with the parent/ carer around concerns. Check when last hearing check took place and whether any health professionals are involved such as a Clinical Audiologist and/or Ear, Nose and Throat Consultant.

Use the quick checker in this document.

School staff are not expected to carry out any specialist assessments relevant to this area of need.

Universal

- Seated towards the front of the class so that the speaker and visual materials can be seen by the child/ young person while also being able to turn to see peers.
- Instructions delivered clearly and in a normal speaking voice.
- Allow additional processing time to allow comprehension of instructions or explanations.
- Check the lesson content has been heard and understood, particularly when delivering new information, instructions, or homework; and/or using unfamiliar vocabulary. Ask the child/young person to explain in their own words what they have to do in the task.
- Repeat contributions made by others and rephrase if necessary.
- Staff understanding that a child/ young person who are deaf may supplement their communication with lip reading and visual cues to some extent.
- Make sure you face the child/ young person when talking and that your face is not covered or in darkness e.g. standing in front of a bright window and putting yourself in shadow.
- Stand still when talking.
- Be aware that during P.E. or Games lessons it will be more difficult to follow instructions. Consider ways to include in sports at distance for example, instructions and demonstration before PE game, visual 'flag' to start races or alert child/ young person to stops and starts at distance.
- Background noise should be kept to a minimum e.g. doors closed, carpeted floors, soft furnishing, rubber feet on the table and chair legs etc.
- Seat away from any source of noise e.g. window, corridor¸ fan heater, projector, the centre of the classroom.
- Staff support child/young person to develop independence skills e.g. the work is suitably adapted so they can work on their own with the available resources. The child/ young person is encouraged to discuss their needs.
- All staff who work with a learner with deafness should be made aware how best to support in the setting and to engage with partner agencies such as OT/ Physio/ Specialist Teachers of VI/ Deaf/ MSI/ PD professionals to be aware of and implement recommended strategies and advice to support the child and consider and implement appropriate access arrangements where and when appropriate.
- All adults who work with children/ young people who are deaf should have Deaf Awareness training. PSAPSS will provide this upon request.
- Multisensory approach to teaching i.e. pictures and real objects, visual timetables. Use displays, visual signage to support learning and make the learning environment accessible, these can provide important visual clues for deaf children.
- Use a range of communication strategies where required, for example, gesture, facial expressions, demonstration.

- use non-specific language e.g. "that one" "over there" "it is big" - have difficulty expressing needs clearly or are difficult to understand if context is unknown - use gestures, show, or point alongside speech to help them get message across - are very quiet or withdraw from group social situations - have issues with friendship group and socialising with peers - have difficulty joining in playground games or age-appropriate conversation		- Gain the child/ young person's attention prior to giving an instruction using a suitable visual/ physical method e.g. turning the lights on and off, tapping the child/ young person's table to make a vibration. - School should have made provision to fulfil health and safety requirements around deafness at school e.g. regarding fire alarms and on school trips. The child/ young person may not be aware of sounds that signal danger such as traffic noises e.g. a visual action/ BSL sign for bell, which is understood by the child and used by all. - Make discrete checks that the child/ young person has understood task instructions / expectations. - Make daily checks that a child/ young person's hearing equipment/assistive listening devices are available, working and are used effectively. - Words spoken on an audio/ visual recording may need a person to repeat what is being said, i.e. a live speaker, subtitles and scripts should be used and provided for all visual and audio media. - Occupational Therapy Toolkit | CPFT NHS Trust - Glue Ear in Children and Young People
		Targeted provision - Occupational Therapist 'Go to OT Guide' - Following advice/ training from Teachers of the Deaf; equipment (Soundfield and or/radioaids) should be used correctly and consistently. - A quiet working environment, particularly for specific listening work. - Conduct a risk assessment if appropriate. - Allocate watchful adult /hand holding if needed. - Consider completing a Request for Involvement for SAPS

What might you see? (Barriers to learning)	Suggested tools for identification of need	What can help? (Strategies and provision made by settings according to the ages and stages of the child/young person)
Multi-Sensory Impairment: To understand the implication of deafblindness it is necessary to **multiply** the impact of a single vision impairment and that of deafness, not just to view it as a vision plus a hearing loss as the joint effect is greater	Hold a conversation with the parent/ carer around concerns. Check when last eye check took place and whether any health professionals are involved such as a Consultant Ophthalmologist.	***Universal*** - Place a priority on all the child's sensory needs - Ensure against sensory overload - Respond to their sensory integration difficulties - A sensitive communication partner and contingent responses to all communication attempts - Support for receptive and expressive communication - Recognition of child's preferred communication modes

than the effect of hearing/visual difficulties alone. *The child/ young person may:* • Have difficulties finding out information • Have difficulty accessing verbal and written information. • Fine motor difficulties and underdeveloped pencil/handwriting skills • be unable to access incidental learning through sight/hearing thus missing out on valuable learning and social experiences • have delayed receptive and expressive language • Have difficulties with communicating with others • Have difficulties forming and keeping friends due to misinterpreting social cues. • Have difficulty understanding/ expressing own emotional state and empathising with peers.	Hold a conversation with the parent/ carer around concerns. Check when last hearing check took place and whether any health professionals are involved such as a Clinical Audiologist and/or Ear, Nose and Throat Consultant. Use the quick checker in this document. School staff are not expected to carry out any specialist assessments relevant to this area of need.	• Use of a concrete component e.g. objects of reference/symbols/photographs to overcome executive function difficulties • Relevant and meaningful experiences presented in context • A balance between familiar and unfamiliar activities • Regular opportunities to engage in large movements and large movement play activity • Active/supportive seating and different working positions. • Alternative recording methods made available • Sharing control with the child and supporting active involvement • Regular choice making opportunities throughout the day • Working at the child's pace (considering burst-pause style) • A flexible approach responding to child's changing needs/ recognition of levels of responsiveness • Not placing too many demands on the child when a 'difficult' day • Recognition of executive function difficulties • Clear structure and routines implemented consistently throughout the school day • Use concrete cues to support sequencing an activity, transitions, and daily routine Use of mini routines • Staff awareness of the impact of change • Consistent approach adopted by all adults • Key people with whom strong, trusting relationships are formed • Recognition of the impact of fatigue • Option to remove glasses/hearing devices when fatigued. • Extended deadlines for coursework/homework or reduce tasks/timetable (ensure still challenging) • Designated safe space to keep vision and hearing equipment • Peer awareness training • Occupational Therapy Toolkit | CPFT NHS Trust *Also refer to strategies and provision for vision impairment and Deaf*
• Experience difficulties with self-esteem and emotional well-being. • Have difficulties moving around the environment, particularly new environments		***Targeted provision*** • Occupational Therapist 'Go to OT Guide' • Structured support to explore new environments and route planning • Assessment of hand function and fine motor activities • Activities to support development of gross motor skills and body awareness • Support to develop self-help and self-organisational skills • Structured programmes to support peer interactions

- Experience high levels of fatigue/stress - difficulty coping when routine and structure not established - have Sensory Integration difficulties. Ability to regulate emotions and senses impacts upon concentration and focus. arising from poorly developed/under stimulated vestibular and proprioceptive system. - Executive function difficulties may include difficulties with flexibility/coping with unexpected changes, initiating activities, independent play, self-organisational skills, transitions, shifting attention, poor memory, transferring/generalising skills, environmental distractions. - Finding abstract concepts more difficult - A need to be in control and a requirement for a level of negotiation. *Also refer to barriers for learning for Vision Impairment and Deaf.*		- Support to develop understanding of emotions - Activities to ensure success and therefore build confidence - Opportunities to meet other sensory impaired people/role models - A safe rest area and allow rest breaks when needed. - Staff training in deafblind/MSI awareness. - Consider seeking support from QTVI/ QToD/ QTMSI *Also refer to targeted provision for Deaf and Vision impairment*

What might you see? (Barriers to learning)	Suggested tools for identification of need	What can help? (Strategies and provision made by settings according to the ages and stages of the child/young person)
Access to the physical school and learning environment *The child/ young person may:* • seek adult support to move around the school • refrain from moving between areas of the school • struggle to open doors • require additional support to evacuate a building in case of emergency • require physical support to negotiate the school site	Hold a conversation with the parent/ carer around concerns. Check whether any health professionals are involved such as Occuptaional Therapy, Paediatrician, Physiotherapist. School staff are not expected to carry out any specialist assessments relevant to this area of need.	*Universal* • Staff to work together with other professionals to share strategies and advice to support the child/ young person. • Regulation breaks • Opportunities for rest throughout the day. • Clutter free environment. • Vary recording methods. • Ensure access to enabling IT equipment. • Ensure the child/ young person can be included in all activities at an appropriate level. Provide a range of options such as different type of scissors, a variety of sizes of crayons/ pens, stick paper to the table to stop it slipping. • Space to move around a room in a walker or wheelchair. • Audit accessibility throughout school (e.g. will grab rails be needed in the toilet). • Access to height adjustable tables in classrooms where required. • Consider changing door handles and handrails on steps. • Accessible toileting space with the relevant equipment and space to move. Consider use of step to access toilet/basin. • Schools should use the supporting children/ young people in school with [medical conditions document](#) to support missed unplanned for learning. • Physical accessibility of the outdoor environment and during non-structured times. • Activities to develop gross and fine motor skills using [Occupational Therapy Toolkit	CPFT NHS Trust](#) • Consider adjusting the timetable to ensure full access to all lessons. Does the child/ young person have sufficient time to move between classrooms? Could a room change increase accessibility?
		Targeted provision • Occupational Therapist 'Go to OT Guide' • Additional equipment may be needed, including specialist seating, mobility aids, manual handling aids. • Equipment to be serviced and maintained in line with LOLER regulations. All schools to have signed a Memorandum of Understanding specifically for specialist seating. • Appropriate hygiene facilities in line with child/ young person's needs. This may include a changing table. • Staff trained in manual handling and personal care. • Staff training on specific diagnosis and co-occurring conditions from suitably qualified health professionals.

- Risk assessments, personal care, and emergency evacuation plans. These are informed by consultation with professionals.
- Accessibility planning including for off site visits. Equipment e.g. cutlery, scissors, writing tools.
- Provide physical activities to support the development of gross and fine motor skills (e.g. access to continuous provision and play opportunities/ participation in P.E. and unstructured times) in line with Physiotherapist and Occupational Therapist recommendations.
- Provide alternative areas for specific tasks to be carried out.
- Allow alternative routes around the school.
- Consider arrangements for lunch and break times, e.g. queuing earlier
- Leaving lessons earlier or later
- Reduce physical exertion around the school site e.g. to lockers, cloakroom pegs
- Consider doing a Request for Involvement for SAPS

What might you see? (Barriers to learning)	Suggested tools for identification of need	What can help? (Strategies and provision made by settings according to the ages and stages of the child/young person)
Co-ordination and mobility *The child/young person may:* • require occasional, low-level support to mobilise in the setting • have difficulties sitting on the floor and/or getting up from the floor • have difficulties changing positions • struggle to coordinate movements in PE • have falls/trips frequently in the playground	Hold a conversation with the parent/ carer around concerns. Check whether any health professionals are involved such as Occuptaional Therapy, Paediatrician, Physiotherapist. Peterborough Occupational Therapy Service - Go to OT guide	*Universal* • Staff to work together with other professionals to share strategies and advice to support the child/ young person. • Accessibility planning including for off site visits. Equipment e.g. cutlery, scissors, writing tools. • Sensory breaks. • Opportunities for rest throughout the day. • Clutter free environment. • Vary recording methods. • Ensure access to enabling IT equipment. • Ensure the child/ young person can be included in all activities at an appropriate level. Provide a range of options such as different type of scissors, a variety of sizes of crayons/ pens, stick paper to the table to stop it slipping. • Space to move around a room in a walker or wheelchair. • Audit accessibility throughout school (e.g. will grab rails be needed in the toilet). • Occupational Therapy Toolkit	CPFT NHS Trust

• have difficulties navigating around the classroom • e.g. bumping into furniture/people • have difficulties throwing/catching • have poor timing and sequencing of movement • have difficulties learning new motor skills e.g. swimming, riding a bike/trike • have difficulties with balance		***Targeted provision*** • Additional equipment may be needed: o Specialist seating – referral to be completed for an assessment from OT - Occupational Therapy Referrals	CPFT NHS Trust o Standing frame/walkers – referral to be completed for an assessment by physiotherapy - Referrals: Physiotherapy Children's Service	CPFT NHS Trust o Wheelchairs – referral to wheelchair services (AJM current provider)- If a service user meets the NHS eligibility criteria, they can be referred into the wheelchair service by a qualified health professional. enquiries@ajmhealthcare.org or liaise with your health professional involved (i.e. OT or Physiotherapist). o Manual handling aids – referral to Sensory and Physical Service (SAPS) - Peterborough Information Network	Education (Local Offer) and then submit request for involvement form 2024 RFI • Appropriate hygiene facilities in line with child/ young person's needs. This may include a changing table. • Staff trained in manual handling and personal care. • Risk assessments, personal care, and emergency evacuation plans. • Provide physical targeted intervention to support the development of gross and fine motor skills (e.g. access to continuous provision and play opportunities/ participation in P.E. and unstructured times) in line with Physiotherapist and Occupational Therapist recommendations. • Sensory support throughout the day e.g. Sensory circuits or individualised options to meet the child/ young person's individualised sensory need. Staff delivering sensory circuits should be appropriately trained. Children/ young people accessing this provision should be identified, assessed, and reviewed. • Regular movement breaks • Consider position on the floor – dedicated spot/cushion with firm surface to lean against if appropriate. • Regular programme of motor coordination activities individually or in small groups such as Learn to Move • Referral to SAPS can support with training for moving and handling. • Occupational Therapist 'Go to OT Guide'

What might you see? (Barriers to learning)	Suggested tools for identification of need	What can help? (Strategies and provision made by settings according to the ages and stages of the child/young person)
Handwriting and fine motor **Recording work**	Hold a conversation with the parent/ carer around concerns. Check whether any	***Universal*** • Staff to work together with other professionals to share strategies and advice to support the child/ young person.

The child/young person may: • have illegible handwriting • be reluctant to hand write • be unable to keep up with pace • be unable to record ideas **Keyboard access** *The child/young person may:* • be unable to type with both hands • use single fingers **Copying from the board** *The child/young person may:* • be unable to track between board and book • be unable to record accurately • miss information **Using tools** *The child/young person may:* • have difficulties manipulating small objects (e.g. beads) • have difficulties using scissors • have difficulties using cutlery	health professionals are involved such as Occuptaional Therapy, Paediatrician, Physiotherapist. Warwickshire Hand Skills Baseline and Outcome Assessment Warwickshire Handwriting Letter formation Baseline and Outcome Assessment Peterborough Occupational Therapy Service - Go to OT guide	• Additional equipment may be needed, including specialist seating, mobility aids, manual handling aids. • Accessibility planning including for off site visits. • Regulation breaks. • Opportunities for rest throughout the day. • Clutter free environment. • Vary recording methods. • Ensure access to enabling IT equipment. • Ensure the child/ young person can be included in all activities at an appropriate level. Provide a range of options such as different type of scissors, a variety of sizes of crayons/ pens, stick paper to the table to stop it slipping. • Consider sensory needs. • Offering purposeful writing tasks. • Writing tasks that are multisensory. • Consider alternate ways of recording work for some tasks, e.g. voice recording, using pictures, using laptop for some work. • Use of a writing slope or alternative positions for working. • Enlarged worksheets to account for larger/less clear handwriting. • Consider positioning of worksheets, some children/ young people find tracking side to side easier than up and down. • If no additional time is available, consider reducing output of work completed whilst maintaining challenge (e.g. in maths, complete alternative questions). • Allow additional time for activities involving fine motor skills. • Adapting homework tasks to allow for the additional time it will take. • For child/ young person using a keyboard, consider alternative mouse, keyboard or other suitable equipment and associated keyboard/touch typing software. • Have a handout on the desk. • Have an electronic version. • Consider where the student sits. • A range of strategies can be found in the Peterborough Occupational Therapy Service - Go to OT guide.

Targeted provision
- Occupational Therapist 'Go To OT Guide'
- Access to dedicated lap top or tablet for recording work and word prediction to support spelling.
- Text-to-speech functions in Microsoft, Google, Ipad, Mac.
- Dictate functions in, Microsoft, Google, Ipad, Mac with training on their use.
- Learn to type programme - Development of Touch-Typing skills using programmes such as:
- Typing Club Learn Touch Typing Free to access - TypingClub, all ages, free to access
- DoorWay Text Type, A highly accessible touch-typing method, all ages, free to access
- BBC dancemat touch typing, all ages, free to access
- English Type Junior and Senior, all ages , at a cost
- Regular programme of fine motor skills activities individually or in small groups
- Handwriting programmes to develop the muscles in the hand and fine motor skills using the Peterborough Occupational Therapy Service - Go to OT guide or programmes such as How to Identify and Overcome Handwriting Difficulties Book - Lois Addy, Write from the start: Unique Programme to Develop the Fine Motor and Perceptual Skills Necessary for Effective Handwriting or Speed Up!: a Kinaesthetic Programme to Develop Fluent Handwriting
- Consider a referral to Occupational Therapy services/SAPS.
- SEND Hubs can support with accessibility tools relevant to the children's needs.

What might you see? (Barriers to learning)	Suggested tools for identification of need	What can help? (Strategies and provision made by settings according to the ages and stages of the child/young person)
Toileting and self-care *The child/young person may:* • Require adult assistance with cleaning themselves occasionally • require adult support to change their clothes • be unable to get on and/or off toilet	Hold a conversation with the parent carer including whether any health professionals are involved. E.g. Occuptaional Therapy, Paediatrician, Physiotherapist. Peterborough Occupational Therapy Service - Go to OT guide	*Universal* • Consider the child's welfare, autonomy, dignity, privacy, and respect at all times. • Ensure an appropriate level of staffing. Staff who are going to help a child with intimate care should make sure another member of staff is aware of their intentions and is in the vicinity and visible or audible. • An intimate care plan may be necessary. • Ensure appropriate equipment is available in an accessible environment. Consider access to storage for resources such as gloves and wipes. • Liaise with healthcare professionals and parents for training and when devising a plan. • Consider sensory issues with toileting and self-care skills e.g. smells, textures, and noises. • Use of visuals to support transitions and familiar routines.

- demonstrate poor balance on the toilet
- be unable to reach sink
- be unable to use taps/dry hands
		- Consider and respond to child/ young person's individual intimate care plans when attending events, trips or residentials.
		- Provide adaptations and commercially available equipment such as:
		  o installation of rails
		  o provision of bath-steps or stools
		  o change taps to leavers
		  o provide toilet seat with arms
		  o toilet seat insert
		- Occupational Therapy Toolkit | CPFT NHS Trust

		Targeted provision - Occupational Therapist 'Go To OT Guide' - Referral to the school nurse if required. - https://www.eric.org.uk/ ERIC, the Children's Bowel and Charity is the UK's leading charity supporting all children and teenagers with a bowel or bladder problem. A free to access telephone and email helpline - Consider task analysis to inform forward and backward chaining.

What might you see? (Barriers to learning)	Suggested tools for identification of need	What can help? (Strategies and provision made by settings according to the ages and stages of the child/young person)
Sitting and seating *The child/young person may:* - appear to be fidgeting/leaning in their chair - appear to be distracted/taking longer to complete tasks in comparison to their peers - complain of pain or falling off their chair - demonstrate poor quality of work, such as poor handwriting - longer time to eat - struggle to maintain posture throughout the school day	Conversation with the parent carer including whether any health professionals are involved. E.g. Occuptaional Therapy, Paediatrician, Physiotherapist Peterborough Occupational Therapy Service - Go to OT guide	***Universal*** - Dining area – some tables and chairs (with back rest/ arm rests/ wheelchair spaces) should be available, especially for younger children/ young people. Consider child/young person's sensory needs - Consider a child/ young person's sensory need to access a quiet space at unstructured times. - Hall – some chairs in different heights, with backrest and some with arm rests, wheelchair spaces should be available. - Use of cushions such as wobble cushions, wedge cushions or foot rocker. - Use of a foot massager, massage ball or resistance bands. - Trial of a writing slope. - Ensure child/ young person has access to rest periods in the school day. - consider working in different areas of the classroom—allow different positions for working; high kneeling, standing etc. - consider alternative workstations to allow flexibility for work whilst sitting on the carpet or work in standing. - Access to height adjustable tables in classrooms where required. - Ensure feet are flat on the floor (this could be using temporary items such as an upside tray)

• struggle to sit on and get up from the chair		• allowing additional time for activities • regular mobility/movement breaks • Occupational Therapy Toolkit | CPFT NHS Trust
		Targeted provision • Occupational Therapist 'Go To OT Guide' • Referral to the Children and Young People's specialist service known as SAPS for specialist equipment. • Follow professional advice for reasonable adaptations and commercially available equipment

What might you see? (Barriers to learning)	Suggested tools for identification of need	What can help? (Strategies and provision made by settings according to the ages and stages of the child/young person)
Severe and complex medical needs including a life-threatening diagnosis or condition	School staff are not expected to carry out any specialist assessments relevant to this area of need.	**Universal** • Reasonable adjustments in line with the Equality Act 2010 and Supporting Pupils at School with Medical Conditions, DfE Guidance, 2015. • Support equipment such as lockable medicine cabinets, first aid bags, fridges. • Clear bereavement training and policies. • Regular home - setting contact when/ if a child/ young person is not in setting, to maintain 'sense of belonging' with peers and setting community and minimise any learning missed. • Consider child/ young person's fatigue levels and how this may impact on ability to engage. Allow opportunities to rest throughout the day. • All staff to be aware of the Health Care plan which has been agreed with parents/carers. This should be updated annually with professional health advice if needed. • Annual recorded training for general medical needs (e.g. epi-pens, diabetes, asthma, and epilepsy) for all school staff. • Training for all staff including lunchtime and catering staff on allergies.
		Targeted provision • Rotated medication / care training. • Liaising with specialist colleagues for up-to-date training (e.g. peg feeding and other bespoke medical care). • Training for catering staff on how food is prepared and presented to meet child/ young person's individual needs. • Bespoke support from health professionals as required for individual needs.

What might you see? (Barriers to learning)	Suggested tools for identification of need	What can help? (Strategies and provision made by settings according to the ages and stages of the child/young person)
Sensory needs *A child/ young person may:* Experience both **hypersensitivity** (over responsiveness) and **hyposensitivity** (under-responsiveness) to a wide range of stimuli. Most people have a combination of both. *A child/ young person may experience needs with:* • Olfactory (smell) • Gustatory (taste) • Auditory (sound) • Visual (sight) • Proprioception (body awareness) • Vestibular (balance) • Tactile (touch) • Interoception (internal body signals)	SEMH.co.uk - Sensory Suggester	***Universal*** • Staff to work together with other professionals to share strategies and advice to support the child/ young person's sensory diet. • Staff training on sensory needs and arousal. • Flexibility with uniform policy. • Consideration to the environment e.g. noise, room temperature, visual stimuli, proximity to sources. • Staff are aware of lighting in the room e.g. use of natural light, glare from the board, who is facing the light, where you stand in relation to the light. • Staff are aware of interoceptive needs and build in awareness of temperature, need for toilet breaks, snack breaks etc. • Ensuring good overall glare-free to access levels of light • Build resilience using timers. • Flexible approach to transitions e.g. between lessons and to and from school. • Flexible approach to micro transitions e.g. changing subject in the same room. • Consideration of best placement of child in learning environment for seated tasks. Left and right-handed child/ young person are able to use equipment comfortably. • Use blinds to reduce glare in the room. • Use of matt laminates to reduce glare • Displays are meaningful and visually accessible to reduce sensory overload. Remove unnecessary text/pictures etc • Use of pale background and accessible font styles on the whiteboard. • Think about contrast e.g. paper and crayons, resources on a plain background that contrasts. • Removing unnecessary text on worksheets • Enlarging of class resources e.g. larger text on worksheets • Ear defenders/ ear loops planned and monitored. • Keep environment ventilated to reduce strong odours. • Provide a range of chewies. • Encourage active listening skills. This can include the use of auditory cues to capture child/ young person's attention. • Use of clear and concise language. • Use visual supports to supplement auditory information. • Well organised environment which is clutter free.

		• Provide different writing tools that incorporate tactile elements such as writing grips, slopes, different pens, and pencils. • Occupational Therapy Toolkit | CPFT NHS Trust
		Targeted provision • Occupational Therapist 'Go To OT Guide' • Complete a sensory environment audit. Understanding the frequency and location of triggers. • Complete an individual sensory profile – boxes used changeably if child/ young person has interoception and olfactory need. • Sensory reduction planning. • Sensory workouts for hypo and hyper movement/sensory break for hyper. • Sensory support throughout the day e.g. Sensory circuits or individualised options to meet the child/ young person's individualised sensory need. Staff delivering sensory circuits should be appropriately trained. Children/ young people accessing this provision should be identified, assessed, and reviewed. • Individual workstations. • Safe area /sensory calming activities or space. • Communication with families about what might be happening at home (e.g. divorce, bereavement, illness) and strategies that work /do not work and relaying this information to staff. • Plan seating arrangements and movement breaks, or sensory play opportunities. • Sensory strategies in the mainstream classroom may need to be considered at times where there are increased demands placed on the child to encourage listening and attention. Sensory, fidget and fiddle objects (e.g. TheraBand on chair legs, peanut balls to sit on instead of a chair, foot massager). • Provide edible sensory play opportunities. • Use of sound-masking devices such as white noise/calming music. • Provide use of sensory equipment and tools within the classroom for child/ young person to regulate. • Provide sensory integration activities. • Develop fine motor skills (hand awareness activities/hand strengthening activities). • Provide visuals for child/ young person to support them at mealtimes/toileting. • Utilise Social Stories to support child/ young person to understand their bodies e.g. are they hot? Cold? Ill? Hungry? Hurt? Etc.

Useful resources and guidance on strategies	
Advice on standards for school premises	**Physical**
DfE advice on school premises	Physical activity guide for early years practitioners

Medical needs

Supporting pupils with medical conditions at school

Vision impairment

Vista training and resources

How vision impairment may affect access to the curriculum

Teaching and learning guidance | RNIB

RNIB Online Shop

Deaf

Deaf friendly teaching

The role of a Teaching Assistant in supporting deaf children

Teachers can use this questionnaire when they have concerns about a child or young person's hearing ability Assessment - SoundSkills-TEAP-Form.pdf - primary

Teachers can use this questionnaire when they have concerns about a child or young person's hearing ability [S.I.F.T.E.R.pdf](S.I.F.T.E.R.pdf) – primary

Teachers can use this questionnaire when they have concerns about a child or young person's hearing ability Secondary-S.I.F.T.E.R.pdf – secondary

https://www.ndcs.org.uk/documents-and-resources

https://www.childline.org.uk/info-advice/bullying-abuse-safety/deaf-zone/bsl-videos/

https://thelisteningroom.com/

https://www.cochlear.com/uk/en/home/ongoing-care-and-support/rehabilitation-resources

https://www.british-sign.co.uk/

https://letssign.co.uk/product-category/free-resources/

https://www.bslzone.co.uk

https://www.efolio.soton.ac.uk/blog/usaistrainingportal/

Sensory

Sensory audit

Sensory differences

SEMH.co.uk - Sensory Suggester

Sensory circuits

SEND PE activities

OT toolkit

Schools therapy resource pack - fine motor

Schools therapy resource pack - adaptation for physical education and playground games

Co-ordination and motor skills

Newlife the Charity - Changing the lives of disabled children (newlifecharity.co.uk)

Access for all (Activity Alliance)

Inclusive PE Training Portal: About the Programme

'What you may see' in the Children and Young People's School Age Fact File.

Elephant Feet Furniture Raisers - Grey - 9cm from Essential Aids

High Quality Physical Education for Pupils with Autism.pdf

pdnet – a network for those supporting learners with physical disability

Designing wheelchair accessible playgrounds

Inclusive & Wheelchair Accessible Playground Equipment for Schools (actionplayandleisure.co.uk)

Accessible Playground Equipment | Flights of Fantasy

Hypermobility

Joint Hypermobility Strategies & Advice | NHS GGC

Coping at school | Hypermobility Syndromes Association (HMSA)

Cerebral palsy and hemiplegia (affecting one side of the body)

Support services | Disability charity Scope UK (Cerebral Palsy)

https://contact.org.uk/help-for-families/information-advice-services/health-medical-information/hemiplegia-support/ Education | Contact

Education | Muscular Dystrophy UK

FAQ's about physical disability and educational settings - Shine (shinecharity.org.uk)

Preterm birth

Preterm birth - House of Lords paper.pdf – page 61-62 for accessing support in educational settings

Toileting

Understanding sensory signals Sensory motor circuits Messy play texture hierarchy Sucking, blowing, and chewing activities Heavy muscle work activities	Toilet-visual-schedule_compressed.pdf **Food allergies** Tools and Resources - Benedict Blythe Foundation Allergy guidance for schools - GOV.UK Schools Allergy Code | The Allergy Team

Training available
Vista training and resources
Online CPD Units | Whole School SEND
Condition-specific video: Physical Disability | Whole School SEND
councilfordisabledchildren.org.uk/
www.natsip.org.uk
www.rnib.org.uk
Access and Assistive technology Team | Support Services for Education
Personal Emergency Evacuation Plan (PEEP) – generic one hour online training. Information can be found on the SSE Website.
Personal and Intimate care. Information can be found on the SSE Web- site.
Evacuation Chair training – setting specific three hours training. Information can be found on the SSE Website.
Curriculum access through IT. Information can be found on the SSE Web- site.
Raising Awareness of Physical Disability, level 1: pdnet Level 1 Training – pdnet
'STEP' tool encourages adapted activity | Connectsport
Glue Ear in Children and Young People

Large organisations to help with
• Council for disabled children: councilfordisabledchildren.org.uk/
• RNIB: Education and learning tools for visually impaired children | RNIB. Links to useful resources and a document listing teacher-reviewed resources for blind and partially sighted learners.
• RNIB Lending Library: https://www.rniblibrary.com/iguana/www.main.cls?surl=a1 (large print and Braille books).
• DELTA: Deaf Education Through Listening and Talking - Deaf Education Deaf Education Through Listening and Talking (DELTA) is a charity that supports families with deaf babies, CYP and the practitioners in Health and Education that work with them.
• Home - BATOD British Association Teachers Of the Deaf (BATOD) is the sole professional association for Teachers of the Deaf in the UK.
• Home page - The Elizabeth Foundation for Preschool Deaf Children (elizabeth-foundation.org) The Elizabeth Foundation help young deaf children to listen and talk.
• Ewing Foundation (ewing-foundation.org.uk) The Ewing Foundation is a national charity, promoting inclusion and achievement for deaf CYP through listening and speaking.

- NatSIP - Home The National Sensory Impairment Partnership (NatSIP) supports colleagues from the frontline workforce who are new to working with a CYP with sensory impairment as well as a wealth of research, information, and resources to support CYP with sensory impairment.
- Find the Best Hearing Aid Solution | Hearing Devices - Phonak is an international hearing aid manufacturer.
- National Association for Special Educational Needs (nasen): video specific to hearing impairment https://www.sendgateway.org.uk//resources/condition- specific-video-hearing-impairment
- Hearing to Succeed and Achieve—a guide for families and early years practitioners.
- Who We Are - About — The Smallest Things – Preterm birth.

Further advice and support available from local teams once strategies have been implemented and reviewed

For Reception:

- For those working in Reception at the Early Years Foundation Stage, schools can also refer to Early Years OAIP Framework (available March 2025)
- Early Years team for advice regarding children attending private voluntary and independent settings - Peterborough Early Years and Childcare
- Portage for children 0-5 with needs in developing play skills with significant support needed in 2-3 areas of early learning before they begin attending a setting - Peterborough Information Network | Early Years SEN Specialist and Portage Service
- SAPS webpage https://fis.peterborough.gov.uk/kb5/peterborough/directory/site.page?id=FCIJ06Wts68
- Children's Occupational Therapy Service- Peterborough (CPFT) | CPFT NHS Trust – there is also a helpline (professionals and parents can access) which can be booked via cpm-tr.childrensotcpft@nhs.net

For Primary, Secondary and College:

- Advice or support via a request for involvement for the Specialist Teaching and Support Service (AATS, SAPS, LASS) - Peterborough resources for SEND Professionals
- SAPS webpage https://fis.peterborough.gov.uk/kb5/peterborough/directory/site.page?id=FCIJ06Wts68
- Advice or support via Education Psychology Service - Peterborough Information Network | Educational Psychology Service (Local Offer)
- Speech and Language Therapy Service - Peterborough Information Network | Speech & Language Therapy for Children
- Occupational therapy children's service - Children's Occupational Therapy Service- Peterborough (CPFT) | CPFT NHS Trust
- Peterborough SEND Hub network - Peterborough Information Network | Peterborough Specialist SEND Hub Network
- Use of Early Help Assessment - Early Help and Targeted Support | Peterborough City Council and Peterborough Information Network | Targeted Support
- Mental Health Support Team - Cambridgeshire and Peterborough Emotional Health and Wellbeing Service (cambspborochildrenshealth.nhs.uk)
- Consultation with child/ young person and adolescent mental health service (CAMHS) - How to refer | CPFT NHS Trust
- FCAMHS https://www.cpft.nhs.uk/fcamhs
- DeafCAMHS https://swlstg.nhs.uk/national-deaf-camhs-cambridge
- School Nursing Service - Peterborough Information Network | School Nursing Service
- Advice from Behaviour and Inclusion team when considering the use of re-integration timetables - Behaviour and Inclusion team

- Liaison with the Virtual School for training and advice - Peterborough Information Network | Peterborough Virtual School
- Peterborough Information Network | Peterborough City Council Disability Social Care 0-25