**Early Years Foundation Stage**

**Special Educational Needs Support**

**in Oxfordshire schools and settings**

**October 2018**



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# A: Introduction for parents and carers

**Special Educational Needs**

The Special Educational Needs and Disability Code of Practice (2015) places great importance on involving parents in decision-making about their child’s individual support and by taking part in developing policy and practice where they live (Sections 1.3 -1.12).

Most children identified with special educational need (SEN) in Oxfordshire are supported in their local mainstream school or foundation years setting. The majority of children and young people will have their needs met through additional help that is put in place by their setting or school, sometimes with advice from specialist services. Some children and young people who have high or complex needs may need an Education Health and Care Plan (EHCP).

The Special Educational Needs Code of Practice (2015) sets out how parents and young people should be involved in identifying, understanding and taking decisions about special educational needs (see SEND Code of Practice Section 6.48). Parents like to know how their child’s school or setting will make decisions about any extra support and what form that support should take. They are also concerned whether their child will be given as much support as they need, and how they can help.

**The purpose of this handbook**

This handbook is written for schools and settings to help them to identify a child or young person’s special educational needs, what level of support they are expected to offer and how to arrange and monitor the support given. It also sets out expectations of what they must offer for the funding they receive. It is intended to help all schools and settings have the same approach wherever they are in Oxfordshire. It is also an assurance to parents that their child will be given as much support as another child with a similar need in a school or setting elsewhere. Many parents find it helpful to understand what a school is basing decisions on. It can sometimes be reassuring and also helps you ask informed questions about your child’s support and progress.

If a school or setting has concerns that a child is finding certain aspects of learning hard or that they are not making the same progress as other children, they can use the checklists in this handbook to help them to bring together all of the information needed to get a more detailed picture of the child’s needs. The checklists can also help parents to think about things that they have noticed outside of the setting or school.

The checklists cover the four broad categories of SEN:

* Communication and interaction needs (C&I)
* Cognition and learning needs (C&L)
* Social, emotional and mental health needs (SEMH)
* Sensory and/or physical needs (S&P)

They are divided into different ages to help identify what a child or young person with that particular need might find difficult.

**How you will be involved**

As part of this information gathering the school or setting will ask for your knowledge and views, and those of your child. You can ask to see the evidence that the school is using to decide about whether your child needs SEN support. This might be from teacher assessments, for example. If there are other professionals working with your family this is a helpful point to share that information. The school or setting will then work with you to agree the additional support that will be put in place to help your child to make better progress and what everyone will do to make that happen. You will also agree how and when you will keep track of how things are going and when you will meet together next to review progress.

If your child is receiving support you should meet with school or setting staff at least three times a year to look at your child’s progress, set new goals and discuss the activities and support that will help your child achieve them. Sometimes the school or setting will want to ask for additional specialist advice. In this case they will discuss this with you. They will also record and share with you what is discussed or agreed with specialists.

This handbook provides templates that schools and settings in Oxfordshire can use as a basis for discussion with you and to record the information that is gathered. They can be used as a record over time, helping you and the school or setting to see the support that has been put in place. This can also be helpful if support is needed from outside the school or setting, perhaps from a specialist teacher, for additional funding, or to provide evidence if the child needs an assessment of their needs that might lead to an Education, Health and Care Plan (EHCP).

**Getting advice**

Parents and young people can get help and advice from SENDIASS (Special Educational Needs and Disability Information Advice and Support Service). You can find contact details and lots of other information about SEN on Oxfordshire’s Local Offer website: <https://www.oxfordshire.gov.uk/cms/public-site/special-educational-needs-and-disability-local-offer> .

**B: Additional SEN support, funding and expectations for Early Years/ nursery providers**

**Special Educational Needs**

The Special Educational Needs (SEN) Code of Practice (2015) sets out guidance and expectations in relation to identifying, assessing and providing for children with special educational needs. A child has a special educational need if they have a learning difficulty or disability which calls for special educational provision to be made for them. A child of compulsory school age is considered to have a learning difficulty or disability if he or she:

* *‘has a significantly greater difficulty in learning than the majority of others of the same age; or*
* *has a disability which prevents or hinders him or her from making use of facilities of a kind generally provided for others of the same age in mainstream schools or mainstream post-16 institutions’.*

 (Code of Practice 2015, para xiv)

A child under compulsory school age has special educational needs if he or she fulfils the definition above now, or is likely to fall within the above definition when they reach compulsory school age, or would do so if they did not receive special educational provision.

Special educational provision goes beyond normal differentiated and personalised teaching and learning approaches. It is individual provision that is additional to or different from that made for other children of the same age. The most effective means of closing the gap is through high quality, carefully differentiated and inclusive teaching.

**Responsibilities of settings**

All early years and education providers are responsible for doing their best to ensure that special educational needs are met. This means:

* identifying needs early
* ensuring that the views of parents and children inform assessment, planning and decision making; the SEND Code of Practice places great importance on involving parents and children in decisions.
* knowing precisely where children with SEN are in their learning and development, and planning for their next small steps
* having high aspirations and setting stretching targets for learners with SEN
* putting in place effective, evidence-based interventions individually tailored to needs
* tracking progress towards these goals regularly, and reviewing the appropriateness of provision and ensuring that it impacts on progress.

**Supporting settings to identify and meet needs**

The majority of children with SEN will have their needs met in a mainstream setting and will not need an Education, Health and Care needs assessment or possible Plan. This handbook provides guidance on identifying and supporting these children in line with the Code of Practice (2015). Specifically it:

* sets out in broad terms a description of the special educational provision that should be provided from a setting’s own budget
* supports providers to consistently identify children with SEN and assess their needs
* gives guidance on providing for children with SEN including planning and adaptations to teaching and the learning environment, including access to specialist advice and ancillary aids and assistive technology
* sets out expectations in relation to assessing and reviewing progress towards outcomes and how parents and children are involved in this
* gives advice on enabling children with SEN and their families to access opportunities beyond the immediate learning environment.

**How to use this guidance to support identification, assessment and provision**

**First**

Use the guidance and template in Section C

to bring together discussions and evidence

**Next**

Use the detailed checklists and advice in Sections D

(Foundation Years)

to identify and provide for specific needs

Use the supporting information in the appendices as helpful.

Refer to **Oxfordshire’s Local Offer website** [https://www.oxfordshire.gov.uk/residents/children-education-and-families/education-and-learning/special-educational-needs-and-disability-local-offer](https://www.oxfordshire.gov.uk/residents/children-education-and-families/education-and-learning/special-educational-needs-and-disability-local-offer%20)

for more details

about services and for the most up to date contact information

**Concerns about a child not making progress**

What is already in place?

- Statutory Framework for the Early Years Foundation Stage.

- Key person.

- Learning Journey

- Continual assessment, plan, do review process

- Recording and tracking progress using tools such as Oxfordshire online tracking tool, Early Years outcomes

- Partnership with parents

|  |
| --- |
| Use Section C – ‘**Special Educational Needs Support in Oxfordshire Schools and Settings’** to help consider the needs of the child, plan and implement next steps to support.Review impact of actions with parents.If concerns continue – consider the following:- Linking with the child’s **Health Visitor** with parental consent for help in understanding and supporting the child’s needs- Access to therapy services via **Single Point of Request for Involvement (SPORFI), i**f appropriate- Named or no name consultation with EYSEN if appropriate- Use of **Early Help Assessment** if appropriateUse Section D of the above document to identify and support SEN and specific area(s) of need. |

|  |
| --- |
| **Early Years SEN Support for a child includes:*** **SEN Support and Outcomes Plan**
* **Regular reviews**
* **Early Years SEN EYF individual intervention record.**
* Access to additional specialist services via **Single Point of Request for Involvement (SPORFI)** if appropriate.
* Use of additional resources where appropriate, such as **Early Support** **Developmental Journals** and **Practice Guide**.
* Access to **Inclusion** funding via identification on the headcount task/census data where appropriate
* Access to **Additional** funding via application where appropriate.
 |

**EARLY YEARS SEN SUPPORT** is informed by:

* Learning journey
* All About Me
* Strengths
* Area of need – See OCC SEN Guidance ‘Identifying and supporting Special Educational Needs in Oxfordshire Schools and Settings’ section C to support initial action in identifying whether the child’s need fall within SEN.
* Gaining parent’s aspirations/hopes and use these to inform outcomes and next steps.
* Supporting child using SEN Support and Outcomes Plan, including monitoring of progress and impact of strategies/interventions/provision.
* Reviewing at least 3 times a year with family to ensure child is making appropriate progress.

**NEXT STEPS**

* Where the review indicates that the child needs additional resources to support progress which are not available from within the setting, then specialist services, such as therapy or education services may become involved or be requested, subject to their access criteria.
* For some children additional funding may also be available from the Local Authority:

 **Inclusion Funding** – Available for children in receipt of 3 and 4 year 15 hour early education funding and also the extended 15 hours childcare funding for working families, but not yet in reception. This funding is to support children with low level SEN and emerging needs. It is accessible by indicating the child is receiving SEN support on the termly headcount activity or in schools on the pupil census. This funding is a weekly amount of £38.50 and will be automatically paid to the setting or school through their Early Education funding.

* Continue supporting the child using SEN Support and Outcomes Plan to include monitoring of progress and impact of strategies/ interventions/ provision.
* Review at least 3 times a year with family to ensure child is making appropriate progress.

**RESOURCES ABOVE INCLUSION FUND SUPPORT**

Where reviews show that the level of the child’s continued needs/rate of progress indicates a need for greater differentiation of activities and individualised planning to provide an enabling environment, further resources, training and/ or support funding may be required.

* **Additional Funding** may also be available from the Local Authority to support children with higher level or complex SEN/Disability. Request of this funding are made via an Additional funding request form available from <https://www.oxfordshire.gov.uk/residents/good-practice-and-ideas-childcare-providers/sen-support-providers/guidance-and-procedures>. This funding is available for children in receipt of 2 year entitlement as well as those eligible for 3 and 4 year Early Educational Entitlement and the extended Childcare entitlement for working families. A panel will consider applications and supporting evidence, and if appropriate award additional SEN support funding for a fixed period of time.
* Continue supporting the child using SEN Support and Outcomes Plan to include monitoring of progress and impact of strategies/ interventions/ provision.
* Review at least 3 times a year with family, and where appropriate adjust the level of support to ensure continued progress.

**ALSO AVAILABLE**

* **Disability Access Fund** – annual one-off payment of £615.00 for children with Disability Living Allowance receiving their 3 and 4 year 15 hour Early Education Entitlement, but not in a reception class. For information re eligibility and criteria, see the ‘Guidance and Procedures’ page on EYSEN OCC webpage <https://www.oxfordshire.gov.uk/residents/good-practice-and-ideas-childcare-providers/sen-support-providers/guidance-and-procedures>.

**C1: What to do if you think a child has a Special Educational Need (SEN)**

**Overall approach**

Many children with complex needs have these identified very early. For other children difficulties may only become evident as they grow and develop, and as they learn and interact in new and different environments. Some children and young people have special educational needs that result from an illness or accident. The approach to identifying a special educational need should be part of a school or setting’s overall approach to monitoring the development and progress of all learners.

**Less than expected progress**

A good understanding of a learner’s starting points and regular checks on progress are the basis for identifying when a learner is making less than expected progress given their age and individual circumstances. Children start settings and schools with varied experiences and usually need a little time to settle in and engage with new learning opportunities. The progress check at aged 2 and assessment at the end of the EYFS are two important early points for formally reviewing progress.

Less than expected progress is progress which:

• is significantly slower than that of peers starting from the same baseline;

• fails to match or better the child’s previous rate of progress;

• fails to close the attainment gap between the child and their peers;

• widens the attainment gap.

(Code of Practice, 2015 Section 6.17)

**What to do when a child is making less than expected progress**

For many learners who are not making expected progress the precise area of need is not clear at the outset. Some will have needs that span more than one area. Usually evidence is gathered over time, although in some circumstances a child may appear in school with little history or may suddenly develop a need as a result of an accident or injury. In the first instance it is always helpful to bring together all of the available evidence, including information from parents and the learner him/herself, to make a detailed individual assessment of need. The following pages ‘Children who may need additional support’ will help you to do that:

* **Firstly complete the relevant age/stage specific initial identification pages in this section (C)**,
* **Next look at the suggested detailed descriptors for each area of need in the relevant section from D (Foundation years) to H (KS4).**

Remember the checklists are guidance and not criteria for SEN support.

**Categories of special educational need**

The four broad areas of need and the subdivisions of need used in this guidance are:

* Communication and interaction needs (C&I)
* Cognition and learning needs (C&L)
* Learning needs (LD)
* Specific Learning Difficulties (SpLD) (KS1 onwards)
* Social, emotional and mental health needs (SEMH)
* Sensory and/or physical needs (S&P)
* Hearing Impairment (HI)
* Visual Impairment (VI)
* Multi-Sensory Impairment (MSI) (Foundation years)
* Physical difficulties (PD)

**Specific circumstances**

Progress can be affected by a number of factors inside and outside of the setting or school including family crises, bereavement and bullying. Some of these will not necessarily lead to a learner having SEN but may cause significant short term needs.

***Behavioural difficulties*** do not necessarily mean that a child has a SEN, but consistent disruptive or withdrawn behaviours can indicate underlying and unmet needs and so it’s important to look across the range of indicators to check where difficulties originate.

If it is thought housing, family or other domestic circumstances may be contributing to the presenting behaviour a multi-agency approach, supported by the use of the Early Help Assessment (EHA) may be appropriate.

The ***identification and assessment of the SEN of children or young people whose first language is not English***: Schools and early years providers will need to look carefully at all aspects of a child or young person’s performance in different areas of learning and development or subjects to establish whether lack of progress is due to limitations in their command of English or if it arises from a SEN or both.

***Children who are Looked After*** by the local authority will already have a Care Plan that includes a Personal Education Plan (PEP) and a Health Plan. It may be through making assessments for these plans that an SEN is identified. Any planning for SEN needs to dovetail with and add to existing planning and involve other professionals and foster carers who are working with the child.

***Children of Service personnel*** face particular challenges. The mobility of service personnel means that their children may face more transitions than most learners, sometimes at short notice. There may also be anxiety and related emotional difficulties resulting from the deployment of family members to operational areas. Settings and schools need to ensure that the service related lifestyle of these children doesn’t lead to any delay in identifying or providing for any SEN, and that any records kept are transferred as quickly as possible if the child moves. The Children’s Education Advisory Service (CEAS) within the Ministry of Defence can provide advice and guidance: <https://www.gov.uk/guidance/childrens-education-advisory-service#history> .

**C2: Children who may need additional support**

**Foundation Years**

**Name of child** ……………………………………………………………………………………………

|  |  |  |
| --- | --- | --- |
| **First check** | *Date* | *What’s the evidence?* |
| How have the individual needs of the child been addressed through a range of learning opportunities and an enabling environment? |  |  |
| What adjustments have been made for the child within the normal day to day organisation of the setting? |  |  |
| What observations of the child’s responses to learning opportunities have been recorded? |  |  |
| What information has been gathered about the child’s responses to experiences and opportunities outside of the setting? |  |  |
| **Gather and review the evidence using*** Evidence from observations of the child engaged in different activities
* Evidence from any tracking and assessments, formal or informal
* Information about the child in and out of school/setting from parents or carers
* Records of the child’s achievements
* Information about attendance
* Evidence of the child’s views and responses to learning opportunities
* Information from any other agencies involved with the child or family, where appropriate, eg EHA
 |

**Consider whether the child has particular support needs\***

|  |  |  |
| --- | --- | --- |
| *Additional support needs may be indicated if the child:* | *Tick/**date* | *Now look at the detailed descriptors for:* |
| Is working at a Developmental Matters band below chronological age  |  | C&L needsC&I needs |
| Tracking shows progress not being made within development band |  | C&L needsC&I needsS&P needs |
| Has a known difficulty or impairment that may impact on his/her learning |  | As appropriate to the identified difficulty/impairment |
| Is showing withdrawn or anxious behaviour and/or a lack of self confidence |  | C&L needsSEMH needsC&I needsSensory needs |
| Is having difficulty in making relationships and interacting appropriately/meaningfully with others  |  | C&L needsSEMH needsC&I needsSensory needs |
| Has difficulty in sequencing events and tasks |  | C&L needsC&I needs |
| Appears not to listen/respond to questions or instructions |  | C&I needsHearing needsSEMH needs |
| Has limited use of spoken language to communicate meaning |  | C&I needsHearing needs |
| Finds it difficult to learn within a group that is age/stage appropriate |  | C&I needsSensory needsSEMH needs |
| Finds it challenging to learn when activities are unstructured |  | C&I needsSEMH needsC&L needsSensory needs |
| Has difficulty in following instructions or joining in activities that are dependent upon hearing |  | Hearing needsC&I needs |
| Has difficulty in seeing fine work, eg picking out detail in pictures |  | Visual needs |
| Has difficulty in managing his/her body to move confidently |  | Physical needsLearning needs |
| Has difficulty in using hands for fine motor movements |  | Physical needsC&L needs |
| Has a need to seek or avoid sensory stimuli that impacts on his/her own or others’ learning  |  | Physical needsC&I needsSensory needsSEMH needs |

\*see intro to this section for abbreviations

**D1: Identifying and supporting needs**

**Foundation Years**

‘**What to do if you think a child or young person has an additional SEN support need’** is the starting point for action. Once the potential range of needs has been identified use the more detailed descriptors for each area of difficulty and the assess-plan-do advice contained in this section to help to understand needs and put in place appropriate support.

The descriptors are in checklist format; the assess-plan-do section also has a tickbox which can be used, if and where helpful, to support thinking and record keeping.

**Assessing**

* Gather further evidence if needed, involving parents and the child.
* Always involve a specialist where a child continues to make little or no progress over a sustained period or where they continue to work at levels substantially below those expected of children of a similar age despite high quality SEN support. The child’s parents **must** be involved in any decision to involve specialists and their views taken into account.
* Review the initial assessment regularly to ensure that support continues to be matched to need.
* In some cases, outside professionals from health or social care may be involved with the child and they will have information that may helpfully inform assessments. They may already be working with the school/setting, if not parents need to agree that they can be contacted. If it is thought that housing, family or other domestic circumstances may be contributing to the child or young person’s needs, perhaps by impacting on his/her behaviour, a multi-agency approach supported by the use of theEarly Help Assessment (EHA) may be appropriate.
* Contact details for all of the specialist agencies listed in this section, and more information about universal, targeted and specialist or personalised services, can be accessed through the Local Offer website (<https://www.oxfordshire.gov.uk/cms/public-site/special-educational-needs-and-disability-local-offer>).

**Planning**

* Use the planning list in the Assessment and Planning section to help with thinking.
* Agree, in consultation with the parent and the child, the interventions and support to be put in place, as well as the expected impact on progress, development or behaviour, and a clear date for review.
* All staff who work with the child will need to be made aware of their needs, the support provided and any teaching strategies or approaches that are required. Identify and address any staff development needs.
* The descriptor lists can be a helpful source of targets. It may be necessary to track back to an earlier age/stage.
* As well as planning for the child’s immediate needs it’s important to think ahead about transitions, especially between key stages.
* Also plan how to help parents to support their child’s learning at home.

**Doing**

* Use the strategies and resources list to help.
* In schools, the class or subject teacher needs to retain day to day responsibility for planning and working with the child especially where the interventions involve group or one-to-one teaching delivered by a teaching assistant or specialist teacher.

**Reviewing**

* Review the effectiveness of the support and the impact on the child’s progress in line with the agreed date and use this to inform further analysis of his/her needs and support requirements.
* Involve the child and parents in reviewing both the impact of support and plans to change it. Discuss the activities and support that will help to achieve goals set and identify the responsibilities of the parent, child and the setting or school in this.
* Review meetings with parents should be held at least three times a year and lead by someone with a good knowledge of the child. ‘Holding a review meeting’ (see Appendix 1) gives pointers on how to ensure that this is a helpful and productive process for all.

**Keeping records**

* Accurately record provision for learners with SEN. This supports the assess – plan – do – review process, and provides evidence of the work that has been done and the progress made.
* Settings and schools determine their own approach to record keeping, but as part of any school inspection Ofsted will expect to see evidence of the interventions and support that are in place and whether they lead to accelerated or sustained progress.
* Oxfordshire has developed record keeping templates to capture person centred planning, pupil outcomes, assessments, planning and reviewing. This information will be required for children and young people who require additional SEN top-ups or who may require co-ordinated assessment and an Education, Health and Care Plan (more information about EHC plans can be found on the Local Offer website <https://www.oxfordshire.gov.uk/cms/public-site/special-educational-needs-and-disability-local-offer>).

**D2: Communication and Interaction needs (C&I)**

**Foundation years**

This section describes children who have greater needs than most of their peers for support with communication and interaction (C&I). Children with communication and interaction needs may have difficulty in expressing themselves, in understanding language, and with interacting with others and the world around them. Children need help to acquire language skills in order to develop their thinking as well as their ability to communicate.

Some children with C&I difficulties will have had their needs identified at a very early age and may already be receiving support. For many children needs may not become apparent until they enter a group setting when the difficulties begin to impact on learning.

**This section contains:**

* **Descriptors to help identify children with a communication and/or interaction**

 **difficulty.**

* **Guidance on supporting children with communication and interaction needs.**

Needs in other areas can lead to and compound communication and interaction needs, for example a hearing loss or difficulties with attachment, and can also be the result of unmet C&I needs, for example learning needs, social and emotional needs. Look across descriptors for all relevant areas of need to make sure that support is tailored appropriately.

English as an Additional Language (EAL) is not in itself a special educational need but it can be the case that a child who speaks English as an additional language may also have special educational needs. The approach to supporting all children with EAL is set out in ‘[Identifying Children who are Learning English as an Additional Language and who may also have Learning Difficulties and/or Disabilities’](https://www.oxfordshire.gov.uk/cms/content/early-education-toolkit). Used alongside the descriptors on the next pages this will help you to decide whether a child’s language competence should be giving rise for concern.

|  |  |
| --- | --- |
| **Foundation years** **Communication and Interaction**  | Name |

|  |  |  |  |
| --- | --- | --- | --- |
|  The child needs support for some of the following: | ***By 1 year old the child needs support for at least one of the following:*** | Date & age | Date & age |
| Communication and Interaction | smiling, looking and moving in response to your interaction |  |  |
| vocalising back when talked to, making own sounds, especially to a familiar adult and when a smiling face is used |  |  |
| listening to nursery rhymes with enjoyment |  |  |
| showing excitement at the sound of approaching voices, footsteps and other sounds. |  |  |
| ***By 2 years the child needs support for at least one of the following:*** |
| Listening & attention | enjoying nursery rhymes and trying to join in with actions or sounds by copying |  |  |
| Understanding | understanding and following simple instructions in context, eg ‘come for snack’ |  |  |
| pointing to simple body parts when asked |  |  |
|  |  |  |
| Speaking | spontaneously naming common objects which interest them, eg car, bird |  |  |
| copying expressions they hear a lot, eg ‘all gone!’ ‘oh dear!’ |  |  |
|
| Interaction | being aware of other people’s feelings – for example to look concerned if hears crying or to look excited if hears a familiar voice |  |  |
| taking turns in a simple ‘conversation’ |  |  |
| pointing to draw attention to things of interest. |  |  |
| ***By 3 years the child needs support for at least one of the following:*** |
| Listening & attention | concentrating on an activity of their own choosing for a short period of time recognising and joining in with songs and actions, eg ‘The wheels on the bus’ |  |  |
| Understanding | understanding simple instructions involving a choice of 2 people or objects, eg‘Give the car to James’‘Give the ball to Annie’ |  |  |
|  |  |  |
| Speaking | joining 2/3 words together with meaning, eg‘Daddy car’ ‘Mummy gone’ |  |  |
| being understood by familiar adults |  |  |
| Interaction | playing ball co-operatively with an adult (eg kick or roll back and forth) |  |  |
| starting interaction with and playing alongside other children |  |  |
| expressing emotions and seeking a reaction, for example crying at a minor injury and asking for help or comfort. |  |  |
| ***By 4 years the child needs support for at least one of the following:*** |
| Listening & attention | stopping and listening to an adult who has called their name and then refocus on their original activity  |  |  |
| attending to an adult’s choice of activity for a short period of time  |  |  |
| Understanding | understanding position words, ‘in’ ‘on’ ‘under’eg ‘put Dolly under the chair’ |  |  |
| answering ‘who’ ‘what’ ‘where’ questions about a story |  |  |
| talking about ownership, eg‘My teddy’ ‘Jack’s car’using simple pronouns correctly, eg ‘I’ ‘me’ ‘you’ |  |  |
| being understood by unfamiliar adultstalking about what s/he has been doing |  |  |
| Speaking | including another child in their play sequence and talking to them as they do so, eg give a child a cup to drink from |  |  |
| seeking out others to share experiences, eg by saying ‘watch me’. |  |  |
| Interaction | including another child in their play sequence and talking to them as they do so, eg give a child a cup to drink from |  |  |
| identifying an object from a description of its use, eg‘What do we use to cut things with?’ |  |  |
| ***By 5 years the child needs support for at least one of the following:*** |
| Listening & attention | remaining focussed during a short story/singing session in a large group |  |  |
| Understanding | Identifying an object from a description of its use, e.g. what do we use to cut things with. |  |  |
| Speaking | Retelling a simple past event or familiar story in the correct order, eg Went down the slide and hurt finger |  |  |
| Interaction | enjoying and joining in with shared play. |  |  |
| regularly using adults as sources of knowledge, comfort and shared activities |  |  |
| expressing wishes and needs clearly and understanding when these are not immediately met |  |  |

|  |  |
| --- | --- |
| **Assessment and planning** | **Date** |
| **Further assessment may be required to identify more specifically the areas where the child needs support.**  |
| * Careful observation is the best way of unpicking difficulties.
 |  |
| * For children with marked difficulties in social communication, thought and sensory processing, build on the initial evidence gathered to assemble a detailed profile of the child’s strengths, interests, challenges and sources of stress. Include parents and the child in this process. This profile will help to ensure that the optimum learning environment is achieved.
 |  |
| **For further advice with assessment and planning contact:** |
| * SENSS Communication and Interaction Service.
 |  |
| * The Integrated Therapies team (Physiotherapy, Occupational therapy, Speech and language therapy) for a speech and language referral.
 |  |
| * Settings should contact the EYSEN team.
 |  |
| **Planning for a child with a C&I need will include:** |
| * ‘Thinking ahead’ about the planned learning each week and how the child with a C&I need will be supported to access it.
 |  |
| * Any adaptations needed to the physical environment to help with access to learning, eg picture labelling of resources.
 |  |
| * Any specialist equipment or resources, including ICT that may be helpful.
 |  |
| * How the child’s key person will help him/her to access learning opportunities.
 |  |
| * Individual or small group work to focus on specific communication and interaction skills.
 |  |
| * Where the child will sit for particular activities.
 |  |
| * Any support that is needed at break times to help the child to be part of a small group and/or to follow his/her own interests.
 |  |
| * Risk assessments relating to any health and safety issues.
 |  |
| * Careful planning for moving from the FS curriculum to KS1.
 |  |
| **Doing: strategies and resources** |
| **The physical environment** |
| * Modify the environment to help with any sensory issues; eg acoustic boards and ear defenders, avoid glare and harsh lighting, provide a quiet area for the child to withdraw to such as a soft corner or play tent.
 |  |
| * Sit the child where they can best see and hear the adult in whole class and group activities. Use visual cues (such as a cushion) to remind them where they should sit and encourage independence with this.
 |  |
| * Boxes of toys and equipment should be labelled with words and pictures depicting the content.
 |  |
| **Teaching and learning** |
| * Use a visual timetable to help the child to understand the structure of the session. Photos and symbols can be used to support understanding.
 |  |
| * Keep expectations clear and consistent.
 |  |
| * Give clear visual prompts when there is to be a change of activity supported by a verbal countdown such as a ‘two minute/one minute warning’.
 |  |
| * Provide support to manage time limited tasks, eg sand timer, egg timer.
 |  |
| * Teach children to recognise and use visual prompts to engage them in making choices, eg photos, symbols.
 |  |
| * Use the child’s name to focus attention individually before giving whole or small group instructions.
 |  |
| * Teach ‘pointing’ when the child is unable to verbalise a choice.
 |  |
| * Offer activities that encourage learning how to play rather than through play, eg imitating/mirroring activities, ‘join in’ songs like Wheels on the Bus, descriptive commentary and other ECAT strategies.
 |  |
| * Use individual, pair and small group activities to teach specific skills, eg *Treasure Trove (*OCC/NHS), Spirals, ICAN materials.
 |  |
| * Use photos to help the child link past and present – useful for predicting, making choices, sequencing.
 |  |
| * Modify the language that adults use; reduce, slow down, give take up time, use non-literal language with care.
 |  |
| * Involve good peer role models and buddies, eg for language modelling and to help the child use learned skills in the everyday environment.
 |  |
| * Create structured opportunities to engage in communication skills, such as asking another child for some fruit at snack time.
 |  |
| * Help the child to recognise his/her own needs and those of others.
 |  |
| * Only make social demands that the child has the ability to cope with – work towards involvement with a bigger group over time.
 |  |
| * Use the child’s areas of special interest to provide motivational learning opportunities.
 |  |
| * The EYSEN toolkit contains ideas for activities, strategies and resources: <https://www.oxfordshire.gov.uk/cms/content/early-years-sen-toolkit> .
 |  |
| **Wider thinking** |
| * All staff should be aware of the implications of the child’s communication and interaction needs and how to respond appropriately.
 |  |
| * Settings must consider what support or adjustments may be needed for the child to access out of school/setting activities including trips. Information sharing, with consent of parents where appropriate can help the child to participate successfully.
 |  |
| * Advice, support and information for parents and carers are available from a range services and organisations. See Oxfordshire’s Local Offer website (<https://www.oxfordshire.gov.uk/cms/public-site/special-educational-needs-and-disability-local-offer>).
 |  |
| * SENDIASS Oxfordshire offers advice and support to parents, and can help parents, carers and professionals to work together to support the inclusion and achievement of children and young people with SEN.

<https://www.oxfordshire.gov.uk/cms/public-site/sendiass-oxfordshire-formerly-parent-partnership>  |  |
| * Information about out of school/setting activities including childcare and short breaks is also available from the Family Information Service Directory (FISD) via the Oxfordshire County Council Local Offer website <https://fisd.oxfordshire.gov.uk/kb5/oxfordshire/directory/home.page>
 |  |
| * ICAN, AFASIC, The Communication Trust and The National Autism Society all have useful websites and resources.
 |  |
| * The Inclusion Development Programme ([www.idponline.org.uk](http://www.idponline.org.uk)) has advice and resources for supporting children with speech language and communication and also autistic spectrum conditions.
 |  |
| * Early Support information resources, available from the NCB website, provide useful and detailed information for staff and parents.
 |  |

**D3: Learning needs (C&L)**

**Foundation Years**

This section describes children who have greater needs than most of their peers for support with learning. Children with learning difficulties will learn at a slower pace than other children and may have greater difficulty than their peers in developing play skills, understanding concepts and acquiring basic literacy or numeracy skills.

Some children with learning difficulties, particularly those with severe or profound and multiple difficulties, will have had their needs identified at an early age and may already have received support. For many children needs may not become apparent until the child enters a group setting for the first time.

**This section contains:**

* **Detailed descriptors to help identify children with learning difficulties.**
* **Guidance on supporting children with learning needs.**

Difficulties in other areas are often likely to lead to difficulties in learning, for example an unmet hearing need may impact on the child’s ability to learn at the same rate as his/her peers. Conversely unmet learning needs are likely to impact on social development and emotional wellbeing. Look across descriptors for all relevant areas of need to make sure that support is tailored appropriately.

|  |  |
| --- | --- |
| **Foundation years** **Learning needs** | Name |

|  |  |  |  |
| --- | --- | --- | --- |
| The child needs support for some of the following: | ***By 2 years the child needs support for at least one of the following:*** | Date & age | Date & age |
| Copying / Pretend | imitating some everyday routines eg using a mobile phone, washing the car |  |  |
| Problem solving | retrieving out of reach toys or other objects |  |  |
| Memory | remembering where familiar things are kept and how to find them |  |  |
| Concepts | building 3 blocks, scribbling on paper |  |  |
| Social | bringing a book or toy to share with an adult |  |  |
| Curiosity  | filling and emptying containers. |  |  |
| ***By 3 years the child needs support for at least one of the following:*** |
| Copying / Pretend | developing simple sustained play with dolly/teddy eg eating, drinking, sleeping |  |  |
| Problem solving | operating a mechanical toy, for example turning the knob on a wind up toy, pushing a button to open a flap |  |  |
| Memory | spontaneously singing some of the words and actions of a familiar rhyme |  |  |
| Concepts | matching pictures of familiar objects in play |  |  |
| painting or drawing horizontal lines and circles in imitation |  |  |
| Social | watching others play and joining in briefly  |  |  |
| following the daily routine |  |  |
| Curiosity  | participating in a range of creative activities eg exploring and experimenting with sensory materials, musical instruments, using paint etc. |  |  |
| ***By 4 years the child needs support for at least one of the following:*** |
| Copying / pretend | joining in make-believe play with other children |  |  |
| Problem solving  | suggesting using sticky tape to mend a torn book, choosing an appropriate tool to dig in the sand |  |  |
| Memory | recalling 2 or 3 pictures/objects hidden in a memory game |  |  |
| Concepts | understanding size difference, eg selecting the bigger or smaller object or picture when asked, putting features on a drawn face |  |  |
| Social | demonstrating concern towards others who are upset, for example offering a favourite toy, patting arm or back |  |  |
| Curiosity | showing a curiosity about how things work, how things feel, how things sound etc.  |  |  |
| ***By 5 years the child needs support for at least one of the following:*** |
| Copying / pretend | imitating adult roles, eg dressing up for dramatic play |  |  |
| Problem solving | choosing appropriate resources when making things |  |  |
| Memory | retelling or demonstrating something that happened in a familiar story |  |  |
| Concepts | sorting objects into categories eg all the animals, all the cars |  |  |
| drawing a simple human face (head and facial features) |  |  |
| Social | taking turns with other children in a child initiated activity |  |  |
| Curiosity | wanting to know how things work eg taking things apart, collecting things, asking questions. |  |  |

|  |  |
| --- | --- |
| **Assessment and planning** | **Date** |
| * Careful observation is the best way of unpicking difficulties.
 |  |
| **For further advice with assessment and planning contact:** |
| * Settings should contact the EYSEN team.
 |  |
| * The Educational Psychology Service.
 |  |
| **Planning for a child with a need will include:** |
| * ‘Thinking ahead’ about the planned learning each week and how the child with a learning need will be supported to access it.
 |  |
| * Any adaptations needed to the physical environment to help with

access to learning, eg labelling of resources. |  |
| * Any specialist equipment or resources, including ICT that may be helpful.
 |  |
| * How the child’s key person will help him/her to access learning opportunities.
 |  |
| * Individual or small group work to focus on specific skills.
 |  |
| * Where the child will sit for particular activities.
 |  |
| * Considering reasonable expectations in relation to the specific needs of the child, eg the time that may be taken to complete a task.
 |  |
| **Doing: strategies and resources** |
| **The physical environment** |
| * Sit the child where they can best see and hear the adult in whole and small group activities.
 |  |
| * Boxes of toys and equipment should be labelled with words and pictures depicting the content.
 |  |
| **Teaching and learning** |
| * Provide developmentally appropriate toys, experiences and activities.
 |  |
| * Use a visual timetable to help the child to understand the structure of the session.
 |  |
| * Use visual prompts to engage the child in making choices, eg photos, symbols.
 |  |
| * Use props and visual aids when giving information, telling stories etc.
 |  |
| * Keep expectations clear and consistent.
 |  |
| * Break down skills and activities into smaller achievable steps.
 |  |
| * Avoid overloading the child with too many tasks and instructions at once.
 |  |
| * Provide support to manage time limited tasks, eg sand timer, egg timer.
 |  |
| * Modify the language that adults use; reduce, slow down, give take up time, use non-literal language with care.
 |  |
| * Use photos to help the child link past and present – useful for predicting, making choices, sequencing.
 |  |
| * Play memory games.
 |  |
| * There are strong links between physical development and cognitive development. Young children need to be able to engage in lots of physical activity e.g. balancing, throwing, catching, climbing and learning opportunities should be planned to take place outside as well as inside.
 |  |
| * Make sure learning opportunities and expectations are challenging enough to be interesting but not so far out of the child’s reach that they may become frustrated/or experience failure.
 |  |
| * Follow young children’s interests, eg go to activities that are already engaging the child and look for ways of extending learning there rather than taking the child away.
 |  |
| * Allow time for children to process language and to consider their responses.
 |  |
| * Repeat learning opportunities.
 |  |
| * Play alongside and model new ways of playing and learning.
 |  |
| * Help the child to feel secure and happy through positive messages and praise.
 |  |
| * Use the child’s areas of special interest to provide motivational learning opportunities.
 |  |
| * The EYSEN toolkit contains ideas for activities, strategies and resources: <https://www.oxfordshire.gov.uk/cms/public-site/early-years-sen-toolkit>
 |  |
| **Wider thinking** |
| * All staff should be aware of the implications of the child’s learning needs and how to respond appropriately.
 |  |
| * Support may be needed for the child to access out of school/setting activities including trips. Information sharing, with consent of parents where appropriate can help the child to participate successfully.
 |  |
| * Advice, support and information for parents and carers are available from a range services and organisations. See Oxfordshire’s Local Offer website (<https://www.oxfordshire.gov.uk/cms/public-site/special-educational-needs-and-disability-local-offer>).
 |  |
| * SENDIASS Oxfordshire offers advice and support to parents, and can help parents, carers and professionals to work together to support the inclusion and achievement of children with SEN. <https://www.oxfordshire.gov.uk/cms/public-site/sendiass-oxfordshire-formerly-parent-partnership>
 |  |
| * Information about out of school/setting activities including childcare and short breaks is also available from the Family Information Service Directory (FISD) via the Oxfordshire County Council Local Offer website.
 |  |
| * Children’s Centres across Oxfordshire offer activities and advice to families with children under 5.
 |  |
| * Early Support information resources, available from the NCB website, provide useful and detailed information for staff and parents.
 |  |
| **Useful books**Jennie Lindon, ‘*Understanding Child Development Linking Theory and Practice*’ (Hodder Arnold)Penny Tassoni, ‘*Supporting Special Needs’* (Heinneman) for helpful strategies. |

**D4: Cognition and Learning (C&L)**

**Specific Learning Difficulties (SpLD)**

**Foundation Years**

The term ‘specific learning difficulty’ describes a collection of difficulties related to the way that information is learned and processed. Specific learning difficulties may impact on literacy, maths, and activities that involve fine and gross motor skills.

**Specific Literacy difficulties, including Dyslexia,** hinder the acquisition of language and literacy skills on a spectrum ranging from mild to severe. The characteristic features are difficulties with:

* identifying and manipulating the sounds in words (phonological awareness)
* retaining an ordered sequence of verbal material (verbal memory)
* processing familiar verbal information such as letters and digits (verbal processing speed)
* visual memory, tracking and processing.

**Specific Maths difficulties including Dyscalculia** affect the ability to acquire arithmetical skills. Dyscalculic learners may have difficulty understanding simple number concepts, lack an intuitive grasp of number, and have problems learning number facts and procedures. Even if they produce a correct answer or use a correct method, they may do so mechanically and without confidence.

**Specific difficulties with writing or Dysgraphia** may present as difficulties with spelling, handwriting and putting thoughts down on paper.

**Developmental co-ordination disorder (DCD) or dyspraxia affects gross and fine motor skills.** DCD is characterised by difficulty in planning smooth, co-ordinated movements. This leads to clumsiness and lack of co-ordination. It can lead to problems with language, perception and thought.

Children of all intellectual abilities can have specific learning difficulties.

**This section contains:**

* **Descriptors for identifying specific learning difficulties.**

* **Guidance on supporting children with specific learning difficulties.**

Use these after considering the learning needs descriptors. Many children have co-occurring difficulties; check across the whole range of specific learning difficulty descriptors to in order to build a comprehensive picture of needs.

|  |  |
| --- | --- |
| **Foundation years** **Learning needs** | Name |

|  |  |  |  |
| --- | --- | --- | --- |
|  | ***By 4 years the child needs support for at least one of the following:*** | Date & age | Date & age |
|  The child needs support for some of the following: | Memory | joining in with familiar rhymes and stories |  |  |
| joining in with familiar repeated phrases or refrains |  |  |
| recall of familiar words |  |  |
| recalling 2 or 3 pictures/objects hidden in a memory game |  |  |
| Auditory processing/Phonologicalskills | distinguishing different sounds  |  |  |
| hearing the first sounds of words |  |  |
| following a new, one-step instruction |  |  |
| Visual discrimination | recognising their own name |  |  |
| drawing a simple human face |  |  |
| matching activities |  |  |
| continuing a simple 2 element sequencing pattern |  |  |
| Copying / pretend | joining in make-believe play with other children |  |  |
| extending a play sequence  |  |  |
| Organisation | remembering and following regular routines  |  |  |
| organising own activities |  |  |
| Physical coordination  | putting on simple garments |  |  |
| managing basic personal care |  |  |
| drawing a large circle |  |  |
| turning the pages of a book |  |  |
| tracking left to right when looking at books |  |  |
| making basic snips using scissors  |  |  |
| making movements across the mid-line of their body |  |  |
| deciding which hand to use for drawing and writing |  |  |
| organising themselves for activities |  |  |
| running  |  |  |
| crawling  |  |  |
| jumping with 2 feet |  |  |
| pushing a trike with 2 feet |  |  |
| Mathematical skills | joining in with class counting activities, songs and games |  |  |
| counting orally up to 5 by him/herself |  |  |
| beginning to understand big/little, long/short |  |  |
| beginning to count objects using number names |  |  |
| Social | joining in with construction play |  |  |
| Attention/concentration | attending in line with peers |  |  |

|  |  |
| --- | --- |
| **Foundation years** **Learning needs** | Name |

|  |  |  |  |
| --- | --- | --- | --- |
|  | ***By 5 years the child needs support for at least one of the following:*** | Date & age | Date & age |
|  The child needs support for some of the following: | Memory | learning the words for familiar songs and rhymes |  |  |
| remembering the repeated phrases in simple books |  |  |
| retelling simple stories |  |  |
| spotting deliberate mistakes in familiar rhymes |  |  |
| recall of familiar words  |  |  |
| remembering letters representing first sets of sounds, e.g. satpin |  |  |
| Auditory processing/Phonologicalskills  | remembering a simple sequence of sounds |  |  |
| identifying the first sound of words |  |  |
| completing the rhymes in simple books |  |  |
| following a new, 2-step instruction |  |  |
| Visual discrimination | drawing a recognisable human figure |  |  |
| writing own name |  |  |
| making their own 2 element sequencing pattern |  |  |
| Copying / pretend | imitating adult roles, eg dressing up for dramatic play |  |  |
| extending a play sequence |  |  |
| Organisation | remembering and following regular routines |  |  |
| organising own activities  |  |  |
| Coordination | getting dressed |  |  |
| managing own personal care |  |  |
| drawing recognisable shapes |  |  |
| deciding which hand to use for drawing and writing |  |  |
| writing left to right |  |  |
| using scissors correctly and holding paper with other hand |  |  |
| making movements across the mid-line of their body |  |  |
| hopping |  |  |
| commando-crawling  |  |  |
| pedalling a trike  |  |  |
| Mathematical skills | recognising significant numbers (age, house number etc) |  |  |
| counting orally up to 10 by him/herself |  |  |
| understanding that last number in a set gives the amount |  |  |
| beginning to count objects with 1:1 correspondence |  |  |
| beginning to subitise numbers to 3 |  |  |
|  | beginning to understand more/fewer |  |  |
| Social | joining in with construction play |  |  |
| Attention/concentration | attending in line with peers |  |  |
| listening to stories |  |  |
| concentrating on activities  |  |  |

|  |  |
| --- | --- |
| **Assessment and planning** | **Date** |
| * Careful observation is the best way of unpicking difficulties.
 |  |
| **For further advice with assessment and planning contact:** |
| * Settings should contact the EYSEN team.
 |  |
| * The Educational Psychology Service.
 |  |
| **Planning for a child with a need will include:** |
| * ‘Thinking ahead’ about the planned learning each week and how the child with a learning need will be supported to access it.
 |  |
| * Any adaptations needed to the physical environment to help with

access to learning, eg labelling of resources. |  |
| * Any specialist equipment or resources, including ICT that may be helpful.
 |  |
| * How the child’s key person will help him/her to access learning opportunities.
 |  |
| * Individual or small group work to focus on specific skills.
 |  |
| * Where the child will sit for particular activities.
 |  |
| * Considering reasonable expectations in relation to the specific needs of the child, eg the time that may be taken to complete a task.
 |  |
| **Doing: strategies and resources** |
| **The physical environment** |
| * Sit the child where they can best see and hear the adult in whole and small group activities.
 |  |
| * Boxes of toys and equipment should be labelled with words and pictures depicting the content.
 |  |
| **Teaching and learning** |
| * Provide developmentally appropriate toys, experiences and activities.
 |  |
| * Use a visual timetable to help the child to understand the structure of the session.
 |  |
| * Use visual prompts to engage the child in making choices, eg photos, symbols.
 |  |
| * Use props and visual aids when giving information, telling stories etc.
 |  |
| * Keep expectations clear and consistent.
 |  |
| * Break down skills and activities into smaller achievable steps.
 |  |
| * Avoid overloading the child with too many tasks and instructions at once.
 |  |
| * Provide support to manage time limited tasks, eg sand timer, egg timer.
 |  |
| * Modify the language that adults use; reduce, slow down, give take up time, use non-literal language with care.
 |  |
| * Use photos to help the child link past and present – useful for predicting, making choices, sequencing.
 |  |
| * Play memory games.
 |  |
| * Play sound games and include phonological activities, e.g. can you find me something beginning with ‘g’. What sound does Mary’s name start with? etc.
* *Playing With Sounds* useful resource.
 |  |
| * There are strong links between physical development and cognitive development. Young children need to be able to engage in lots of physical activity e.g. balancing, throwing, catching, climbing and learning opportunities should be planned to take place outside as well as inside.
 |  |
| * Make sure learning opportunities and expectations are challenging enough to be interesting but not so far out of the child’s reach that they may become frustrated/or experience failure.
 |  |
| * Follow young children’s interests, eg go to activities that are already engaging the child and look for ways of extending learning there rather than taking the child away.
 |  |
| * Allow time for children to process language and to consider their responses.
 |  |
| * Repeat learning opportunities.
 |  |
| * Play alongside and model new ways of playing and learning.
 |  |
| * Help the child to feel secure and happy through positive messages and praise.
 |  |
| * Use the child’s areas of special interest to provide motivational learning opportunities.
 |  |
| * The EYSEN toolkit contains ideas for activities, strategies and resources: <https://www.oxfordshire.gov.uk/cms/public-site/early-years-sen-toolkit>
 |  |
| **Wider thinking** |
| * All staff should be aware of the implications of the child’s learning needs and how to respond appropriately.
 |  |
| * Support may be needed for the child to access out of school/setting activities including trips. Information sharing, with consent of parents where appropriate can help the child to participate successfully.
 |  |
| * Advice, support and information for parents and carers are available from a range services and organisations. See Oxfordshire’s Local Offer website (<https://www.oxfordshire.gov.uk/cms/public-site/special-educational-needs-and-disability-local-offer>).
 |  |
| * SENDIASS Oxfordshire offers advice and support to parents, and can help parents, carers and professionals to work together to support the inclusion and achievement of children with SEN.

<https://www.oxfordshire.gov.uk/cms/public-site/sendiass-oxfordshire-formerly-parent-partnership>  |  |
| * Information about out of school/setting activities including childcare and short breaks is also available from the Family Information Service Directory (FISD) via the Oxfordshire County Council Local Offer website.
 |  |
| * Children’s Centres across Oxfordshire offer activities and advice to families with children under 5.
 |  |
| * Early Support information resources, available from the NCB website, provide useful and detailed information for staff and parents.
 |  |
| **Useful books**Jennie Lindon, ‘*Understanding Child Development Linking Theory and Practice*’ (Hodder Arnold)Penny Tassoni, ‘*Supporting Special Needs’* (Heinneman) for helpful strategies. |

**D5: Social, Emotional and Mental health needs (SEMH)**

**Foundation Years**

This section describes children who have greater needs than most of their peers for support with their social and emotional development, mental health and wellbeing. It contains:

* **Descriptors to help identify children with a social, emotional and mental health difficulty.**
* **Guidance on supporting children with social, emotional and mental health needs.**

All young children are only just learning about how to make friends, play socially and interact with others and there will be times when they find developing these skills very difficult. However, children who appear to have emerging SEMH difficulties may find it significantly harder to

* make and maintain appropriate and healthy relationships,
* regulate their emotions.

Sometimes these difficulties will present in:

* withdrawn behaviour,
* challenging, over active or disruptive behaviour,
* being controlling.

These behaviours will be persistent and may indicate mental health issues such as anxiety or depression. It must also be recognised that behaviour is a child’s first way of communicating, whether intentionally or not, that their needs are not currently being met.

Certain individuals and groups are more at risk of developing mental health problems than others. These risks can relate to the child themselves, to their family, or to their community or life events. **It is important to provide early intervention and support to prevent difficulties escalating.**

Children can develop social, emotional needs or mental health difficulties for many reasons. Sometimes these are related to:

* Other learning needs, either as part of a condition or disorder, such as:
* Attention deficit hyperactive disorder (ADHD) or attention deficit disorder (ADD) This is rarely able to be clearly identified in the early years although there may be indicators.
* Attachment disorder
* Autism spectrum condition (ASC)
* A pervasive developmental disorder that impacts upon their mental health and social and emotional wellbeing
* A medically unexplained condition, such as being reluctant to speak.
* A response to an unmet need, for example, a young person who has difficulty with communicating thoughts and ideas may find inappropriate ways to express him/herself.
* Sensory difficulties, pupils experiencing difficulties in coping with the sensory stimuli around them will require reasonable adjustments to help them adapt to the learning environment.
* A response to factors outside of the learning environment, such as early life trauma.

A small number of children will have social, emotional and mental health needs are identified at a very young age. For many children needs may go unrecognised until they reach a group setting and are exposed to the multiple demands of a bigger peer group in a highly interactive environment. In the first instance it may be the child’s behaviour that raises concern. You may be seeing behaviours coming from anxiety, fear, frustration, lack of control or feeling of autonomy. Such feelings may manifest themselves in a range of ways, high activity and lack of concentration, “over reaction” to events, “shutting down”, self-harm or angry outbursts. Again, we should note that these can be normal behaviours during a settling in period so monitoring over time is important.

Risk factors are cumulative. Children exposed to multiple risks such as social disadvantage, family adversity and cognitive or attention problems are much more likely to develop behavioural problems. DfE guidance outlines risk and protective factors on page 9.

<https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/508847/Mental_Health_and_Behaviour_-_advice_for_Schools_160316.pdf>

When children display behaviour that is of continuing concern it is essential to try to address any underlying social or emotional need or a mental health problem, and not just the presenting behaviour. Close observation will help to show when and where the behaviours are triggered. Discussion with parents may help to explore what the child may be communicating through this behaviour. Equally, behaviour that differs from normal developmental patterns can be an indicator of underlying learning difficulties. For example, a child with a language delay or disorder may exhibit frustration when they are unable to communicate effectively or may find that hitting or biting is a quicker way of making their needs known.

Assessment, planning and provision for a child with social, emotional and mental health needs should be located within a nurturing approach that includes consistent use of positive strategies with training for all staff, and training where appropriate for positive handling. Difficulties that persist despite the support available at a universal level will require more bespoke arrangements that are closely monitored and reviewed.

|  |  |
| --- | --- |
| **Foundation years** **Social, Emotional & Mental health** | Name |

|  |  |  |  |
| --- | --- | --- | --- |
|  The child needs support for some of the following: | ***By 2 years old the child needs support for at least one of the following:*** | Date & age | Date & age |
| Making relationships | giving a positive response to a familiar adult, e.g. turning, looking and smiling when spoken to |  |  |
| engaging in social interaction, e.g. bringing toys to a familiar adult to show and share |  |  |
| Self confidence& Self awareness | taking pleasure in exploring objects |  |  |
| making his/her own needs through vocalising, banging his/her plate to request more. |  |  |
| Managing feelings & responses | using their key person for ‘emotional refuelling’, e.g. in a familiar setting happy to explore activities but looks for key person for reassurance. |  |  |
| ***By 3 years old the child needs support for at least one of the following:*** |
| Making relationships | sharing/turn taking with an adult in a simple activity that they enjoy, e.g. rolling or kicking a ball back and forth |  |  |
| giving a positive response to a familiar adult |  |  |
|  Self confidence & self-awareness | separating from main carer with support of their key person (or alternatively show no sense of care in separating from main carer) |  |  |
| showing interest in the play of other children alongside them whilst sustaining their own, e.g. watching with interest what other children are doing in the water play whilst continuing their own exploration |  |  |
| Managing feelings and responses | cooperating with age appropriate familiar expectations in relation to the routines of the setting, e.g. sitting for snack |  |  |
| sitting in a small group (3-4 children) with a familiar adult for more than 3 minutes doing an activity which interests and excites them, e.g. songs and rhymes. |  |  |
| ***By 4 years old the child needs support for at least one of the following:*** |
| Making relation-ships | engaging in positive interactions with other children in a structured situation, e.g. talking to other children whilst playing and joining in a group activity |  |  |
|  Self confidence & self-awareness | responding positively to a variety of adults, e.g. feeling confident to approach any adult in the setting for help |  |  |
| spending time in groups with other children but engaged in own play, e.g. is able to complete their task, such as junk modelling whilst being alongside others |  |  |
| Managing feelings and responses | understanding that some things are theirs, some are shared and some belong to other people |  |  |
| making predictable responses in a range of situations, e.g. helping to put toys away and get ready for group time |  |  |
| consistently responding positively to and coping with different events, social situations and changes of routines in the setting |  |  |
| expressing their own feelings and doing so in an appropriate way. |  |  |
| ***By 5 years old the child needs support for at least one of the following:*** |
| Making rel-ation-ships | engaging in and sustaining positive interactions with other children |  |  |
| initiating and sustaining conversations with adults and children |  |  |
| SC & SA  | receiving praise and taking a pride in him/her self |  |  |
| Managing feelings and responses | staying on task to complete an age appropriate adult initiated activity |  |  |
| managing their emotions if their needs are not met quickly |  |  |
| demonstrating concern towards other children, e.g. to comfort a child in distress |  |  |
| understanding that his/her own actions affect others |  |  |
| responding appropriately to simple instructions |  |  |
| understanding the needs of others and usually being able to share and take turns without adult intervention |  |  |
| transitioning from one activity or space to another |  |  |

|  |
| --- |
| **Additional questions to help understand SEMH needs** |
| Does the child have any delay or difficulty in their:* understanding of language?
* expressive language?
* thinking skills and problem solving?
 |  |  |
| Have there been any significant changes at home, e.g. moving house, new baby? |  |  |
| Does the child have any sensory processing difficulties that impact on their ability to engage in the learning opportunities? |  |  |
| Does the child show a good level of involvement with most activities and learning opportunities? |  |  |
| Are your expectations appropriate for the child’s age and stage? |  |  |
| Does the child have access to experiences / learning opportunities that are age and stage appropriate and stimulating for them? |  |  |
| Does the child feel welcomed, safe and secure in your setting? |  |  |
| Are there complex circumstances such as parenting, housing, financial difficulties, which impact on the child’s wellbeing? |  |  |

|  |  |
| --- | --- |
| **Assessment and planning** | **Date** |
| If a child appears to have a Social, Emotional or Mental health difficulty that has not been previously identified in discussion and agreement with the parents/carers **advice could be sought from:** |
| * The Early Years SEN Team if the child has been referred to a community paediatrician and is not yet in a reception class. A no name consultation is available if the child has not yet been referred to a paediatrician.

<https://fisd.oxfordshire.gov.uk/kb5/oxfordshire/directory/service.page?id=ezjsMlND7rA>  |  |
| * PCAMHS if the child is 4 years or over.

<https://www.oxfordhealth.nhs.uk>  |  |
| * Health Visitor and/ GP.
 |  |
| * Educational Psychology Service

<https://fisd.oxfordshire.gov.uk/kb5/oxfordshire/directory/service.page?id=BrbWJr4zZko>  |  |
| * Locality Community Support Services

<http://www.oscb.org.uk/professionals/early-help-locality-community-support-service/> |  |
| For Looked After children, adopted and under special guardianship order contact the Virtual School (VSLAC)* <https://www2.oxfordshire.gov.uk/cms/public-site/virtual-school-looked-after-children-and-care-leavers-0-25>
 |  |
| The ATTACH team offer support to children who are living away from their birth parents, including those living in foster care, kinship care, or in adoptive families<http://schools.oxfordshire.gov.uk/cms/content/attach-team>  |  |
| * Oxfordshire Health Visitors <https://www.oxfordhealth.nhs.uk/0-5-years-public-health-service/>
 |  |
| * School Health Service <https://www.oxfordhealth.nhs.uk/school-health-nurses/>
 |  |
| * For children who have physical difficulties with poor emotional regulation: Oxfordshire Children’s Occupational Therapist Website <https://www.oxfordhealth.nhs.uk/service_description/oxfordshire-childrens-occupational-therapy/>
 |  |
| * Education Inclusion Service works with schools and families to support school attendance and reduce exclusions. <http://schools.oxfordshire.gov.uk/cms/content/education-inclusion-service>
 |  |
| **Assessments and checklists that will help to unpick the child’s needs include:** |
| * Wellbeing and involvement scale checklists (Ferre Laevers and Centre for Research in Early Childhood – CREC).

<https://www.scilt.org.uk/Portals/24/Library/resources/hmi/Leuven_Scale.pdf>  |  |
| * Antecedent Behaviour Consequences or Iceberg tools.
 |  |
| * Boxhall profile. <https://boxallprofile.org/>
 |  |
| * Early Help Assessment (EHA)

<https://www2.oxfordshire.gov.uk/cms/content/early-help-assessment-and-team-around-family> |  |
| * For pupils with autism,

Oxfordshire’s SCERTs in Action - a framework that supports assessment and planning for children with autism.* Autism Education Trust (AET) Progression Framework <https://www.autismeducationtrust.org.uk/shop/pf-shop//>
 |  |
| **Planning for a child with a SEMH need will include:** |
| * Keeping a close working relationship with parents/carers so that everyone in the child’s life understands and is supportive of the child.
 |  |
| * ‘Thinking ahead’ about the planned learning each week and how the child with a SEMH need will be supported to access it.
 |  |
| * Responding to the individual needs of the child.
 |  |
| * How the child’s key person will help him/her to access learning opportunities.
 |  |
| * Individual or small group work to support personal learning targets and build self-confidence.
 |  |
| * Where the child will sit for particular activities.
 |  |
| * Risk assessments relating to any health and safety issues.
 |  |
| * Enhanced transition planning into school or the next setting.
 |  |
| **Doing: strategies and resources** |
| **The physical environment** |
| * Use quiet areas to give the child calm down time.
 |  |
| * Set up regular active outdoor time for children who benefit from greater space for exuberant and noisy play.
 |  |
| * Make it easy for a child to use resources without fuss or frustration;

accessible storage, pictorial labels, things in the same place. |  |
| * Ensure a consistent key person offering a strong relationship sensitive to the child’s needs.
 |  |
| * Ensure the environment offers support with periods of transition and other key triggers times for the child.
 |  |
| * Arrange for activities to be available and planned into the child’s day to de-escalate heightened levels of arousal, anxiety.
 |  |
| **Teaching and learning** |
| * Use visual timetables and resources such as sand timers and lead in time to prepare the child for changes of routine.
 |  |
| * Keep expectations and boundaries clear and consistent.
 |  |
| * Use small group activities to develop self-esteem and confidence.
 |  |
| * Give clear visual and verbal prompts when there is to be a change of activity (e.g. 2 minute/1 minute warning).
 |  |
| * Use specific strategies consistently, for example praise for being (‘what a lovely smile’) and praise for doing (‘thank you for tidying up the puzzles; that was really helpful’).
 |  |
| * Build in opportunities for the child to develop emotional literacy so that he/she can verbally communicate and understand the feelings that they and others have.
 |  |
| * Give open access to specific activities that help to calm the child, eg pulley work, digging.
 |  |
| * Ensure all adults use positive, enabling language. Use a fresh start principle to encourage a warm welcome to each new session every day.
 |  |
| * Use the child’s areas of special interest to engage him/her in motivational learning.
 |  |
| **Helpful resources include:** |
| * *The Parenting Puzzle* by Candida Hunt, The Family Links Nurturing Programme.
 |  |
| * *The Incredible Years*, Caroline Webster Stratton, Incredible Years 2006.
 |  |
| * *Promoting Positive Behaviour*, National Day Nurseries Association, Hope Education.
 |  |
| *Supporting Children with Behavioural, Emotional and Social difficulties:* Inclusion Development Programme (now in the National Archives). |  |
| * *Why Love Matters*, Sue Gerhart, Brunner-Routledge, 2004.
 |  |
| * *Good Grief*, Barbara Ward and Associates, Jessica Kingsley
 |  |
| * *Behavioural and Emotional difficulties*, Hannah Mortimer, Scholastic, 2002.
 |  |
| * *Box of Feelings*, Distributed by Speechmark Publishing Ltd, ISBN 978-1-901487-03-9.
 |  |
| * The EYSEN toolkit contains ideas for activities, strategies and resources: <https://www.oxfordshire.gov.uk/cms/public-site/early-years-sen-toolkit>
 |  |
| **Wider thinking** |
| * All staff should be aware of the implications of the child’s social, emotional and mental health needs and how to respond appropriately.
 |  |
| * Support may be needed for the child to access out of school/setting activities including trips. Information sharing, with consent of parents where appropriate can help the child to participate successfully.
 |  |
| * Advice, support and information for parents and carers are available from a range services and organisations. See Oxfordshire’s Local Offer website (<https://www.oxfordshire.gov.uk/cms/public-site/special-educational-needs-and-disability-local-offer>).
 |  |
| * SENDIASS Oxfordshire offers advice and support to parents, and can help parents, carers and professionals to work together to support the inclusion and achievement of children with SEN.

<https://www.oxfordshire.gov.uk/cms/public-site/sendiass-oxfordshire-formerly-parent-partnership>  |  |
| * Information about out of school/setting activities including childcare and short breaks is also available from the Family Information Service Directory (FISD) via the Oxfordshire County Council Local Offer website.
 |  |
| **Further Training for Staff**  |  |
| * The Inclusion Development Programme has useful support and resources: [www.idponline.org.uk](http://www.idponline.org.uk) .
 |  |
| * The National Day Nurseries Association has many useful resources and online training courses <https://www.ndna.org.uk/NDNA/Shop/Online_Training_page_1.aspx>
 |  |
| * Early Support information resources, available from the NCB website, provide useful and detailed information for professionals and parents.

<https://www.ncb.org.uk/news-opinion/news-highlights/best-practice-framework-help-schools-promote-social-and-emotional-well> |  |
| * NASEN online training module: <http://www.nasen.org.uk/newsviews/newsviews.free-online-elearning-module-for-semh.html>
 |  |
| * Realistic Positivity: understanding the additional needs of children placed for adoption, and supporting families when needs are unexpected –National Children’s Bureau (NCB) and Council for Disabled Children (CDC)  July 2018.

<https://www.ncb.org.uk/resources-publications/resources/realistic-positivity> |  |
| * Oxford Brookes PGCert Education - Understanding and Managing SEMH Difficulties <https://www.brookes.ac.uk/courses/postgraduate/pgcert-education---understanding-and-managing-semh-difficulties/>
 |  |

**D6: Sensory and Physical (S&P)**

**Hearing needs (HI)**

**Foundation Years**

Many children with hearing difficulties will have their needs identified early and will be supported by the SENSS Hearing Impairment (HI) team. Children may have a temporary hearing loss affecting one or both ears that may fluctuate or may be permanent. Some children benefit from a hearing aid(s) or other amplification devices.

Some young children may have needs that go unrecognised until they reach a group setting or are expected to undertake tasks that require them to use hearing skills in a different context. It is also possible for some children to acquire a hearing loss. This could be caused through illness or accident or might be because they have a progressive condition or a condition that has a late onset. The most common cause of temporary and fluctuating hearing loss in childhood is commonly known as ‘Glue Ear’. The SENSS (HI) team has hand outs and information that can be provided on request.

Some children with a hearing loss will require on-going specialist teaching support from a teacher of the deaf to access the curriculum alongside their peers. Others may require a routine monitoring visit to check the function and management of any equipment, to observe the child and feedback on his/her learning and to ensure that the setting is empowered to take responsibility for all aspects of the child’s inclusion.

Sometimes a child can meet many of the descriptors for a hearing need but when clinically assessed the child’s hearing is normal. It could be that the child has a fluctuating hearing loss and at the time of assessment it is within normal limits. If this is the case repeated assessment will usually determine the type and level of hearing loss. If there is no underlying physical hearing loss it may be that the child has auditory processing difficulties. If a child has auditory processing difficulties the descriptors and guidance for supporting children with communication and interaction (C&I) needs should be used. The SENSS (C&I) team works closely with the SENSS (HI) team who can support equipment needs where appropriate.

A medical confirmation of a hearing loss does not necessarily mean a child has SEN. However early intervention with specialist advice from the SENSS (HI) Team ensures that the impact of the hearing loss on the child’s progress is minimised.

**This section contains:**

* **Some characteristics that may be observed in a child with a hearing impairment.**
* **Detailed descriptors to help identify children with hearing impairment by the things they need support with.**
* **Guidance on supporting children with a hearing need**.

|  |  |
| --- | --- |
| **Foundation years** **Hearing Needs** | Name |

|  |  |  |  |
| --- | --- | --- | --- |
| A child with a hearing need may | ***A child with a hearing loss may:*** | Date & age | Date & age |
| find difficulty in expressing him/herself clearly |  |  |
| appear dreamy and distracted |  |  |
| appear loud, raising his/her voice in conversation |  |  |
| startle easily  |  |  |
| use gesture more than his/her peers |  |  |
| not appear to understand common phrases and may have a limited vocabulary use |  |  |
| be more physical when expressing their needs and wants |  |  |
| find it difficult to sustain concentration especially when there is background noise. |  |  |
|  The child needs support for some of the following: | ***The child needs support for some of the following:*** |
| listening in a range of situations  |  |  |
| following instructions; the child may be noticeably more able to do this in a quiet area |  |  |
| joining in activities in a small group |  |  |
| following and responding in an age appropriate conversation, especially where visual clues are not available |  |  |
| making him/herself understood by others; his/her expressive language may be unclear  |  |  |
| sustaining attention during whole group activities, e.g. listening to a story; the child may be noticeably more attentive and able to maintain concentration in a quiet area |  |  |
| developing and using age appropriate language; the child may use gesture to compensate |  |  |
| accessing TV/DVD/music at normal sound levels |  |  |
| enjoying songs and rhymes and join in by copying |  |  |
| to start interaction with and play alongside other children of a similar age |  |  |
| sustaining age appropriate positive interactions with other children |  |  |
| developing pretend play activities  |  |  |
| managing anxiety and/or frustration. |  |  |

|  |  |
| --- | --- |
| **Assessment and planning** | **Date** |
| If a child appears to have a hearing difficulty that has not been previously identified advice should be sought from the SENSS Hearing Impairment (HI) Team. The SENSS (HI) Team will not usually become involved with a child unless a paediatric audiologist has first made an assessment. This is because there can be many reasons why a child may not appear to hear well and a formal hearing assessment is needed to ensure that the guidance offered to a setting is appropriate. If a child has not been seen by the community paediatric audiology team or the audiology department at the Children’s Hospital, the first step is a GP referral to community paediatric audiology, based at the Children’s Hospital. Parents should be asked to discuss this with their child’s GP.A referral to the SENSS (HI) Team for a child with a known hearing loss is usually made by a health service paediatric audiologist, for example, a member of the paediatric audiology team at the Children’s Hospital. Parental permission to share information is obtained before the referral is made. A referral from health to the SENSS (HI) Team will be made on confirmation that the child has:* a permanent hearing loss
* an ongoing temporary hearing loss that is likely to impact on his/her education.

The SENSS (HI) Team will undertake specialist assessment leading to a more specifically focused personal learning programme and give advice on measurement of pupil progress as well as degree of hearing loss, social development and linguistic level. This will include use of an age appropriate SENSS (HI) assessment toolkit, including equipment and functional access assessments.  |  |
| * It may also be appropriate to involve the Educational Psychology Service.
 |  |
| * It may also be helpful to involve the Speech and Language Therapy

Service (Integrated Therapies team). |  |
| **Planning for a child with a hearing need will include:** |
| * Joint planning with a teacher of the deaf from SENSS.
 |  |
| * Responding to the individual needs of the child.
 |  |
| * Planning for learning opportunities throughout the child’s day.
 |  |
| * How background noise will be managed.
 |  |
| * Any specialist adaptations to the learning environment that may be needed.
 |  |
| * Any specialist equipment or resources, including Radio Systems, Sound Field Systems, ICT, that may be needed for the foundation stage curriculum.
 |  |
| * The training and support needed for use and maintenance of equipment.
 |  |
| * Risk assessments relating to any health and safety issues.
 |  |
| * Access to individual sessions or small groups to support personal learning targets.
 |  |
| * The adult support that may be required for accessing learning opportunities.
 |  |
| * The implementation of strategies to ensure access to the language of the peer group and supporting adults.
 |  |
| * Where the child will sit for particular activities.
 |  |
| * Ensuring there is a family focused, Team Around the Family and keyworking approach across the involved agencies.
 |  |
| **Doing: strategies and resources** |
| **The physical environment** |
| * Use quiet areas where appropriate.
 |  |
| * Walls, ceilings and floors may need acoustic modifications.
 |  |
| * Access will be needed to appropriate audiological equipment e.g. hearing aid test box, sound field system, a radio system.
 |  |
| * Support will be needed for management of all audiological equipment including a daily checking routine.
 |  |
| * Ensure good lighting.
 |  |
| * Sit the child where they can best see and hear the adult in whole and small group activities, as advised by the teacher of the deaf.
 |  |
| **Teaching and learning** |
| * Use specialist materials and equipment including ICT to support personalised learning and reinforcement of previous learning.
 |  |
| * Ensure that equipment is used effectively and consistently.
 |  |
| * Use small group activities in a quiet environment to support the child’s listening and learning.
 |  |
| * Use individual and small group activities to prepare the child for the learning that will take place in a later whole group activity and to consolidate vocabulary and language development.
 |  |
| * Use some one to one activities as advised by the teacher of the deaf.
 |  |
| * Use role models and buddies who have good language and communication skills to provide support to develop interactions.
 |  |
| * Provide opportunities for the child to hear and use language in meaningful situations.
 |  |
| * Ensure that spoken language is reinforced with visual cues and clues, eg by using a visual timetable.
 |  |
| * Manage the pace of learning to allow additional time for completion of tasks and time for clear explanation to ensure linguistic understanding.
 |  |
| * Ensure that learning targets and strategies are implemented throughout the child’s day.
 |  |
| * Be prepared for fluctuations in hearing levels that will affect access to learning.
 |  |
| * The EYSEN toolkit contains ideas for activities, strategies and resources: <https://www.oxfordshire.gov.uk/cms/public-site/early-years-sen-toolkit>
 |  |
| **Wider thinking** |
| * All staff should be aware of the implications of the child’s hearing needs and how to respond appropriately.
 |  |
| * Support may be needed for the child to access out of school/setting activities including trips. The SENSS (HI) Team have guidance materials and advice to offer eg swimming advice. In addition equipment can be loaned outside school through a Loan agreement. Information sharing, with consent of parents where appropriate can help the child to participate successfully.
 |  |
| * Advice, support and information for parents and carers are available from a range services and organisations. See Oxfordshire’s Local Offer website (<https://www.oxfordshire.gov.uk/cms/public-site/special-educational-needs-and-disability-local-offer>).
 |  |
| * SENDIASS Oxfordshire offers advice and support to parents, and can help parents, carers and professionals to work together to support the inclusion and achievement of children and young people with SEN.

<https://www.oxfordshire.gov.uk/cms/public-site/sendiass-oxfordshire-formerly-parent-partnership>  |  |
| * Information about out of school/setting activities including childcare and short breaks is also available from the Family Information Service Directory (FISD) via the Oxfordshire County Council Local Offer website.
 |  |
| * There are a number of organisations that produce information and guidance including the NDCS (National Deaf Children’s Society). Also the local group ODCS (Oxfordshire Deaf Children’s Society) who support children and families directly.
 |  |
| * Early Support information resources, available from the NCB website, provide useful and detailed information for staff and parents. This includes the Monitoring Protocol for deaf babies and children, a developmental journal that tracks and supports the next steps of developmental milestones in communication, listening, talking, physical, social and play.
 |  |
| * Children’s Centres across Oxfordshire offer activities and advice to families with children under 5.
 |  |

**D7: Sensory and Physical (S&P)**

**Visual needs (VI)**

**Foundation Years**

This section describes children who have visual difficulties.

Many children with visual difficulties will have their needs identified early. Some young children may have needs that go unrecognised until they reach a group setting or are expected to undertake tasks that require them to use visual skills in a new way.

Visual difficulties range from mild through to severe. Some children will have their vision corrected by spectacles; a child should be considered to have a visual difficulty only if additional educational provision is required to access learning.

**This section contains:**

* **Some of the characteristics that may be observed in children with a visual need.**
* **Detailed descriptors to help identify children with a visual need by the things they support with.**
* **Guidance on supporting children with a visual need.**

|  |  |
| --- | --- |
| **Foundation years** **Visual needs** | Name |

|  |  |  |  |
| --- | --- | --- | --- |
| A child with a visual need may: | ***A child with a visual need may:*** | Date & age | Date & age |
| tilt his or her head and/or use his/her body in a different way to other children to maximise vision |  |  |
| bring eyes close to a toy, or a toy close to eyes |  |  |
| blink frequently |  |  |
| touch, rub or cover eyes |  |  |
| appear sensitive to light or glare |  |  |
| have eye pain, headache, dizziness or nausea, especially after periods of looking closely at something |  |  |
| move eyes towards the nose when looking at very near objects |  |  |
| find it difficult to track the movement of something across the field of vision, eg a ball rolling from left to right |  |  |
| find scanning difficult, eg searching for a toy in a room |  |  |
| bump into things as they move around |  |  |
| not respond to a non-verbal gesture. |  |  |
|  |
|  The child needs support for some of the following (for visual reasons): | ***By 2 years the child needs support for at least one of the following:*** |
| to spoon food or pick up a cup |  |  |
| playing with a ball  |  |  |
| pointing to pictures. |  |  |
| ***By 3 years the child needs support for at least one of the following:*** |
| drawing features on a pre-drawn face |  |  |
| catching a ball with both hands |  |  |
| kicking a moving ball |  |  |
| recognising detail in a picture. |  |  |
| ***By 4 years the child needs support for at least one of the following:*** |
| for age appropriate activities that involve hand-eye co-ordination, eg placing small pegs in a board, threading beads |  |  |
| cutting with scissors |  |  |
| completing inset puzzles |  |  |
| copying simple shapes, eg a cross |  |  |
| finding small details in pictures, eg Where’s Wally? |  |  |
| joining in with outdoor play and physical activities. |  |  |
| ***By 5 years the child needs support for at least one of the following:*** |
| for age appropriate activities that involve hand-eye co-ordination, eg threading a large needle |  |  |
| copying a pattern, eg a sequence of bricks |  |  |
| copying his/her own name |  |  |
| recognising letters and numbers even when printed boldly |  |  |
| drawing a recognisable human figure with details like hair/buttons |  |  |
| using outdoor equipment, eg playing games with balls, hoops. |  |  |
| **Assessment and planning** | **Date** |
| If a child appears to have a visual difficulty that has not been previously identified parents should be referred to an optician or the child’s GP. The optician or GP will be able to make a referral to an eye hospital if necessary. Diagnosis of a difficulty by the eye hospital will trigger the involvement of the SENSS Visual Impairment team who will work alongside the school to support the child’s access to learning. |  |
| **Planning for a child with a visual need will include:** |
| * How the child will be supported to move around the learning spaces.
 |  |
| * Any adaptations needed to the physical environment.
 |  |
| * Risk assessments relating to any health and safety issues.
 |  |
| * Any support needed for personal care; eating and drinking, dressing.
 |  |
| * Any specialist equipment or resources, including ICT, that may be needed to support learning.
 |  |
| * The adult support that may be required for accessing learning opportunities.
 |  |
| * Where and how the child will sit for particular activities.
 |  |
| * ‘Thinking ahead’ about the planned learning each week and how the child with the visual need will be supported to access it.
 |  |
| * Considering reasonable expectations in relation to the specific needs of the child, eg to remain in a particular position for a length of time, the time that may be taken to complete a task.
 |  |
| **Doing: strategies and resources** |
| **The physical environment** |
| * Make adaptations to make movement easy and safe, eg decluttering, using different textures and colours to aid navigation, some groups use white footmarks on dark flooring to show the way to the toilet.
 |  |
| * Use contrasting surfaces to make things more visible, eg black symbols on a white or yellow background.
 |  |
| * Put the child’s coat peg at the end of the line where it is easiest to find.
 |  |
| * Avoid shadows, glare and reflected light.
 |  |
| * Sit the child where they can best see and hear the adult in whole class and group activities, as advised by the specialist support teacher.
 |  |
| * Encourage the child to wear his/her spectacles if prescribed; if possible keep a spare pair handy.
 |  |
| * Use low vision aids and specialist technology if prescribed.
 |  |
| **Teaching and learning** |
| * Make sure that clear verbal instructions, descriptions and explanations accompany each learning activity.
 |  |
| * Provide a range of sensory experiences to support learning, eg real objects to support understanding of a story rather than pictures.
 |  |
| * Use Big books and books with big print/tactile elements.
 |  |
| * Use objects of reference to help the child know what is happening, eg a cup for drinks time.
 |  |
| * When teaching a physical skill start by using big versions of the task, eg big beads and stiff thread, and work down to smaller ones as the task is mastered.
 |  |
| * Manage the pace of learning to allow additional time for completion of tasks and for visual fatigue.
 |  |
| * Use individual and small group activities to prepare the child for the learning that will take place in a later whole group activity.
 |  |
| **Wider thinking** |
| * All staff should be aware of the implications of the child’s visual needs and how to respond appropriately.
 |  |
| * Support may be needed for the child to access out of school/setting activities including trips. Information sharing, with consent of parents where appropriate can help the child to participate successfully.
 |  |
| * Advice, support and information for parents and carers are available from a range services and organisations. See Oxfordshire’s Local Offer website (<https://www.oxfordshire.gov.uk/cms/public-site/special-educational-needs-and-disability-local-offer>).
 |  |
| * SENDIASS Oxfordshire offers advice and support to parents, and can help parents, carers and professionals to work together to support the inclusion and achievement of children and young people with SEN.

<https://www.oxfordshire.gov.uk/cms/public-site/sendiass-oxfordshire-formerly-parent-partnership>  |  |
| * Information about out of school/setting activities including childcare and short breaks is also available from the Family Information Service Directory (FISD) via the Oxfordshire County Council Local Offer website.
 |  |
| * The RNIB has a comprehensive website with useful information for parents and teachers and a library of resources including some that can be loaned.
 |  |
| * Early Support information resources, available from the NCB website, provide useful and detailed information for staff and parents.
 |  |
| * Children’s Centres across Oxfordshire offer activities and advice to families with children under 5.
 |  |

**D8: Sensory and Physical (S&P)**

**Multi-sensory needs (MSI)**

**Foundation years**

This section describes children who have multi-sensory needs. It contains:

* **Guidance on what you may observe if a child has a multi-sensory need.**
* **Guidance on supporting children with multi-sensory needs.**

Deafblind children have a combination of hearing and visual needs. Other children with multi-sensory impairment may not have a combined clinical diagnosis of visual and hearing loss but present as having substantial developmental delay in responding to sensory stimuli.

Children with multi-sensory impairment usually have their needs identified at a very early stage. Occasionally multi-sensory needs may occur as a result of an accident, trauma or a progressive syndrome in an older child, for example Usher syndrome, Alstrom syndrome. Some children also have additional difficulties.

Support and advice from a range of professionals is essential to meet the complex nature and pattern of needs displayed by these children.

|  |  |
| --- | --- |
| **Foundation years** **Multi-sensory Needs** | Name |

|  |  |  |  |
| --- | --- | --- | --- |
|  A child with multi-sensory needs may: | ***A child who has deaf blindness/multi-sensory impairment may:*** | Date & age | Date & age |
| make idiosyncratic responses to auditory and/or visual stimuli |  |  |
| avoid touch or make a startled response to touch (tactile defensiveness or reluctance) |  |  |
| have problems with eye contact and interaction |  |  |
| find it difficult to fix and track an object, eg a ball rolling across the floor |  |  |
| be delayed in developing skills and in achieving developmental milestones, eg walking |  |  |
| tilt his or her head and/or use his/her body in a different way to other children to maximise vision and hearing |  |  |
| have difficulty in making sense of the world because of fragmentary information received through the senses |  |  |
| appear withdrawn or isolated, eg may spend and unusual amount of time asleep |  |  |
| display unusually passive behaviour |  |  |
| display repetitive or challenging behaviour; this is likely to be a result of sensory overload |  |  |
| use smell, taste, movement and touch to gain information or to support mobility |  |  |
| be unable to find things or people when they have moved |  |  |
| have difficulty caused by changes in light levels, glare and reflection |  |  |
| have difficulty when attending unfamiliar places |  |  |
| appear clumsy – bumping into doorways, tripping over objects on the floor. |  |  |

|  |  |
| --- | --- |
| **Assessment and planning** | **Date** |
| If a child appears to have a multi-sensory difficulty that has not been previously identified contact the Advisory teacher for multi-sensory impairment (MSI) from SENSS. The Advisory teacher for MSI will undertake specialist assessment and provide specialist advice. S/he will also advise about involving any other professionals |  |
| **Planning for a child with a multi-sensory need will include:** |
| * Joint planning with the Advisory teacher for MSI from SENSS.
 |  |
| * Responding to the individual needs of the child.
 |  |
| * Planning for learning opportunities throughout the child’s day.
 |  |
| * ‘Thinking ahead’ about the planned learning each week and how the child with multi-sensory need will be supported to access it.
 |  |
| * Any specialist adaptations to the learning environment that may be needed.
 |  |
| * How background noise will be managed.
 |  |
| * Any specialist equipment or resources, including ICT that may be needed.
 |  |
| * The training and support needed for use and maintenance of equipment.
 |  |
| * Risk assessments relating to any health and safety issues.
 |  |
| * Trained adult support to help the child to access learning.
 |  |
| * Access to individual sessions or small groups to support personal learning targets.
 |  |
| * Where and how the child will sit for particular activities.
 |  |
| * Any support needed for personal care; eating and drinking, dressing.
 |  |
| **Doing: strategies and resources** |
| **The physical environment** |
| * Use quiet areas where appropriate.
 |  |
| * Walls, ceilings and floors may need acoustic modifications.
 |  |
| * Ensure good lighting; avoid shadows, glare and reflected light.
 |  |
| * Make adaptations to make movement around the room easy and safe, eg decluttering, using different textures and colours to aid navigation.
 |  |
| * Support will be needed for management of all audiological equipment including a daily checking routine.
 |  |
| * Sit the child where they can best see and hear the adult in whole class and group activities, as advised by the Advisory teacher.
 |  |
| **Teaching and learning** |
| * Use a key worker to ensure that equipment is used effectively and learning targets and strategies remain in place during the whole of the child’s day.
 |  |
| * Use small group activities in a quiet environment to support the child’s listening and learning.
 |  |
| * Use some one to one activities to support specific targets as advised by the Advisory teacher.
 |  |
| * Use individual and small group activities to prepare the child for the learning that will take place in a later whole group activity and to consolidate vocabulary and language development.
 |  |
| * Give clear verbal descriptions and instructions through the child’s preferred mode of communication, eg objects of reference, pictures, symbols, hand over hand signing.
 |  |
| * Use auditory, visual and kinaesthetic approaches to help the child to access learning.
 |  |
| * Use specialist materials and equipment, including ICT, to support personalised learning.
 |  |
| * Manage the pace of learning to allow additional time for completion of tasks and for fatigue.
 |  |
| * Be prepared for fluctuations in hearing levels that will affect access to learning.
 |  |
| **Wider thinking** |
| * All staff should be aware of the implications of the child’s multi-sensory needs and how to respond appropriately.
 |  |
| * Support may be needed for the child to access out of school/setting activities including trips. Information sharing, with consent of parents where appropriate can help the child to participate successfully.
 |  |
| * Advice, support and information for parents and carers are available from a range services and organisations. See Oxfordshire’s Local Offer website (<https://www.oxfordshire.gov.uk/cms/public-site/special-educational-needs-and-disability-local-offer>).
 |  |
| * SENDIASS Oxfordshire offers advice and support to parents, and can help parents, carers and professionals to work together to support the inclusion and achievement of children and young people with SEN.

<https://www.oxfordshire.gov.uk/cms/public-site/sendiass-oxfordshire-formerly-parent-partnership>  |  |
| * Information about out of school/setting activities including childcare and short breaks is also available from the Family Information Service Directory (FISD) via the Oxfordshire County Council Local Offer website.
 |  |
| * There are a number of organisations that produce information and guidance including the NDCS (National Deaf Children’s Society) and SENSE, a national charity supporting deafblind people.
 |  |
| * Early Support information resources, available from the NCB website, provide useful and detailed information for staff and parents.
 |  |
| * '*Making Sense Together: practical approaches to supporting children who have multi-sensory impairments'* by Rosalind Wyman is a useful resource.
 |  |
| * Children’s Centres across Oxfordshire offer activities and advice to families with children under 5.
 |  |

**D9: Sensory and Physical (S&P)**

**Physical needs (PD)**

**Foundation Years**

This section describes children who have greater needs than most of their peers for support with their physical needs.

Some children with physical difficulties will have had their needs identified at an early age and may already have received support. For others, needs may not become apparent until the child enters a group setting and they impact on his/her learning.

Many children with physical needs require minor adaptations to the learning environment that would be considered as reasonable adjustments under the Equality Act 2010. For some this is the only support that is needed, they do not need additional SEN support. Where children have a diagnosed progressive physical condition, eg Duchenne muscular dystrophy, it is important to plan and prepare early for later needs.

**This section contains:**

* **Detailed descriptors to help identify children with physical difficulties.**
* **Guidance on supporting children with physical needs.**

Unmet physical needs may impact on the child’s ability to learn at the same rate as his/her peers. Look across descriptors for all relevant areas of need to make sure that support is tailored appropriately.

|  |  |
| --- | --- |
| **Foundation years** **Physical needs** | Name |

|  |  |  |  |
| --- | --- | --- | --- |
|  The child needs support for some of the following: | ***By 2 years old the child needs support for at least one of the following*:** | Date & age | Date & age |
| walking holding an adult’s hand |  |  |
| trying to feed him/herself with a spoon |  |  |
| holding a lidded beaker in 2 hands and drinking |  |  |
| holding a crayon and use different strokes to make a scribble |  |  |
| building a tower of 2 blocks |  |  |
| taking off easily removed clothes, eg socks |  |  |
| using a finger thumb pincer grasp,eg picking up a raisin. |  |  |
| ***By 3 years the child needs support for at least one of the following:*** |
| walking confidently, avoiding obstacles |  |  |
| helping with dressing and hygiene routines |  |  |
| walking up and downstairs, holding on, 2 feet to each step |  |  |
| kicking a large ball |  |  |
| using hands to screw and unscrew simple toys and lids, turn door knobs |  |  |
| holding a pencil between thumb and two fingers and make a circular scribble |  |  |
| squatting steadily to rest or play with objects on the ground and rising to feet without using hands. |  |  |
| ***By 4 years old the child needs support for at least one of the following:*** |
| building a tower of 6 – 9 blocks |  |  |
| climbing on nursery play equipment |  |  |
| walking downstairs, two feet to a step |  |  |
| taking off an unzipped coat |  |  |
| undoing Velcro fasteners |  |  |
| trying to use scissors to make snips in paper |  |  |
| manipulating simple construction toys, eg Duplo. |  |  |
| ***By 5 years old the child needs support for at least one of the following:*** |
| pedalling a trike |  |  |
| running confidently |  |  |
| washing and drying his/her hands |  |  |
| catching a large ball  |  |  |
| jumping forward on two feet |  |  |
| communicating the need to use the toilet  |  |  |
| holding a pencil between thumb and forefingers and drawing different shapes. |  |  |

|  |  |
| --- | --- |
| **Assessment and planning** | **Date** |
| **For specialist advice with assessment and planning contact:** |
| * The SENSS Physical Disability team.
 |  |
| * PVI settings should contact the EYSEN team.
 |  |
| * The Integrated Therapies team (Physiotherapy, Occupational therapy, Speech and language therapy).
 |  |
| **Planning for a child with a Physical need will include:** |
| * ‘Thinking ahead’ about the planned learning each week and how the child with the physical need will be supported to access it.
 |  |
| * Where and how the child will sit for particular activities.
 |  |
| * Any adaptations needed to the physical environment to allow the child safe passage and support access to learning.
 |  |
| * The support needed for personal care; eating and drinking, dressing, going to the toilet.
 |  |
| * Any specialist equipment or resources, eg supportive seating, ICT, that may be helpful.
 |  |
| * Risk assessments relating to any health and safety issues.
 |  |
| * Individual or small group work to focus on specific skills.
 |  |
| * How the child’s key person will help him/her to access learning.
 |  |
| * The training required for staff to deliver specific programmes and/or use specific equipment and for manual handling if needed.
 |  |
| * Considering reasonable expectations in relation to the specific needs of the child, eg the time that may be taken to complete a task, tiredness due to the discomfort of using a wheelchair.
 |  |
| **Doing: strategies and resources** |
| **The physical environment** |
| * Make adaptations to make movement easy and safe, eg decluttering, using different textures and colours to aid navigation.
 |  |
| * Put the child’s coat peg at the end of the line where it is easiest to find.
 |  |
| * Provide equipment to support learning, eg a computer with a variable speed mouse, bigger puzzles, a range of balls and beanbags.
 |  |
| * Sit the child where they can best see and hear the adult in whole and small group activities using specialist seating if needed.
 |  |
| * Provide seating to help when changing clothes.
 |  |
| * Have a private changing area near the toilet.
 |  |
| **Accessing learning** |  |
| * Break down skills and activities into smaller achievable steps.
 |  |
| * Provide sensory and kinaesthetic experiences indoors and out, for example shaving foam or fine sand to ‘draw’ in, big painting on vertical surfaces.
 |  |
| * Provide developmentally appropriate toys, experiences and activities that enable the child to learn without feeling over challenged.
 |  |
| * Aim to support the child while encouraging him/her to do everything that they can for themselves.
 |  |
| * Manage the pace of learning to allow additional time for completion of tasks and for fatigue.
 |  |
| * Use individual, pair and small group activities to teach specific skills:
	+ understanding language, memory and reasoning, eg understanding and answering questions
	+ early literacy and numeracy skills, eg looking at books, counting and recognising numbers
	+ sequencing and organising, eg toilet routines or changing clothes or shoes for physical activities
	+ problem solving and developing concepts, eg big and little, shapes
	+ fine and gross motor skills, eg threading beads, riding a tricycle, throwing and catching
	+ listening and attending, eg responding to adult requests, sharing stories within a small group.
 |  |
| * Use visual prompts to support memory and independence: visual timetables, objects of reference, pictorial labels on storage.
 |  |
| * The EYSEN toolkit contains ideas for activities, strategies and resources: <https://www.oxfordshire.gov.uk/cms/public-site/early-years-sen-toolkit> .
 |  |
| **Wider thinking** |
| * All staff should be aware of the implications of the child’s physical needs and how to respond appropriately.
 |  |
| * Arrange for the child to have additional time for eating if needed.
 |  |
| * Check what the child is having for lunch and support high calorie easily eaten choices where chewing is a problem.
 |  |
| * Settings must facilitate access to offsite activities including trips, by considering what support or adjustments might be needed.
 |  |
| * Advice, support and information for parents and carers are available from a range services and organisations. See Oxfordshire’s Local Offer website (<https://www.oxfordshire.gov.uk/cms/public-site/special-educational-needs-and-disability-local-offer>).
 |  |
| * SENDIASS Oxfordshire offers advice and support to parents, and can help parents, carers and professionals to work together to support the inclusion and achievement of children and young people with SEN.

<https://www.oxfordshire.gov.uk/cms/public-site/sendiass-oxfordshire-formerly-parent-partnership>  |  |
| * Information about out of school activities including childcare and short breaks is also available from the Family Information Service Directory (FISD) via the Oxfordshire County Council Local Offer website.
 |  |
| * Children’s Centres across Oxfordshire offer activities and advice to families with children under 5.
 |  |
| * Early Support information resources, available from the NCB website, provide useful and detailed information for staff and parents.
 |  |
| **Useful books*** The physical development section of the *Early Years developmental journal* (avail-able via NCB website); useful for learning more about a child’s developmental steps.
* Mary Sheridan, 2008, *From birth to 5,* Routledge.
 |

**I1: Appendix 1**

**Holding a review meeting**

Schools and settings are required to meet with parents at least three times a year when their child is receiving SEN support and are responsible for setting up these meetings. This section gives guidance to help make this a satisfactory process for all of those involved. It is based on feedback from parents and professionals, and the requirements of the new Code of Practice.

**Set it up well**

* Choose a time and venue that works for everyone so that attendees are able to focus wholly on the meeting. Aim for a month’s notice.
* Conducting these meetings effectively involves a considerable amount of skill. As with the other aspects of good provision for learners with SEN, schools and settings should ensure that staff are supported to manage these conversations as part of professional development.
* Allow sufficient time to meet so the views of parents and children can be explored. This is likely to be at least 20 minutes. It is important not to try and squeeze meetings into the normal parents’ evening schedule.
* Choose a setting that is private enough for confidential conversations and where you will be undisturbed.
* Choose a setting where people have space to sit and write comfortably and can sort their documents, and can see and hear each other.
* Agree who will attend, in consultation with parent/carers and the child/young person, at least two weeks before the meeting. Make parents/carers aware that they may bring a supporter if they wish. Parents may find it hard to express their views and wishes; it can be helpful for them to write down the things they want to say in advance of the meeting.
* Include the views of the child/young person by including them in as much of the meeting as is appropriate or by gathering their views beforehand. Ask them how they would like to contribute.
* Send out an agenda and relevant paperwork in sufficient time before the meeting. A week in advance is a good balance between ensuring that information is up to date and giving participants enough time to read and think.
* Ensure that there is a gap between any prior meetings and the review meeting so that all attendees arrive together and feel equally included.

**At the meeting**

* The meeting should be led by someone who knows the child well; in a school this would usually be the class teacher or form tutor, supported by the SENCo, in a setting this would usually be the SENCo and key person or lead professional.
* Welcome all attendees and give everyone an opportunity to introduce themselves, and explain their roles to parents. Check parents understand who everyone is.
* Be clear about the purpose of the meeting. Usually this will be to review progress, set goals, agree the activities and support that will help to achieve outcomes, and the responsibilities of the school, the child/young person and the parent in this. Use the checklists in this document to help. Don’t forget to highlight the things that are going well.
* Make sure that everyone has the opportunity to contribute, and keep discussion focused. Asking people to contribute in turn can help.
* Summarise agreements, aspirations and recommendations during and at the end of the meeting and record them accurately.
* Agree a review date.
* Check back on whether the meeting arrangements worked for everyone and thank everyone for attending.

**Follow up well**

* Follow up actions promptly and within agreed timescales.
* All appropriate school or setting staff need to know the outcomes of the meeting.
* Update paperwork and ensure that copies are distributed to agreed timescales, eg notes from the meeting, a copy of the relevant section of a provision map.

**I2: Appendix 2**

**Glossary**

The Local Offer has contact details for many of the services and organisations mentioned in this document and in the glossary below. Access at: <https://www.oxfordshire.gov.uk/cms/public-site/special-educational-needs-and-disability-local-offer>

|  |  |
| --- | --- |
| Acronym, word or phrase | Definition or information |
| ADD and ADHD | Attention Deficit (Hyperactivity) DisorderA diagnosis based upon difficulties with attention and impulsiveness. |
| ASD or ASC | Autistic Spectrum Disorder or ConditionLearners with ASD find it difficult to:* understand and use non-verbal and verbal communication
* understand social behaviour, which affects their ability to interact with children and adults
* think and behave flexibly, which may be shown in restricted, obsessional or repetitive activities
* moderate their responses to sensory inputs such as noise, visual distractions or tactile experiences.
 |
| Assessment | An ongoing process of finding out a learner's progress, achievements, strengths and needs.  |
| APD  | Auditory Processing Disorder  A difficulty in the processing of auditory information that may be associated with difficulties in listening,speech understanding, language development and learning. |
| (P) CAMHS | (Primary) Child and Adolescent Mental Health Service. |
| CoP or SENDCoP | Code of Practice for SEN and disability |
| C&I | Communication and InteractionThis includes speech language and communication difficulties and Autism Spectrum Conditions. |
| C&L | Cognition and LearningThis describes a wide range of difficulties with thinking and learning. It includes moderate, severe, and profound and multiple difficulties as well as specific difficulties with one of more particular aspects of learning (SpLD). |
| Differentiation | The way in which teaching and learning opportunities are adapted to meet a range of needs. |
| Dyscalculia | Learners with dyscalculia have difficulty in acquiring mathematical skills. Learners may have difficulty understanding simple number concepts, lack an intuitive grasp of numbers and have problems learning number facts and procedures. |
| Dyslexia | Learners with dyslexia have a marked and persistent difficulty in learning to read, write and spell, despite progress in other areas. Learners may have poor reading comprehension, handwriting and punctuation. They may also have difficulties in concentration and organisation, and in remembering sequences of words. They may mis-pronounce common words or reverse letters and sounds in words. |
| Dyspraxia | Pupils with dyspraxia are affected by an impairment or immaturity of the organisation of movement, often appearing clumsy. Gross and fine motor skills are hard to learn and difficult to retain and generalise. Pupils may have poor balance and coordination and may be hesitant in many actions (running, skipping, hopping, holding a pencil, doing jigsaws, etc). Their articulation may also be immature and their language late to develop. They may lack awareness of body position and have poor social skills. |
| EAL | English as an Additional Language. |
| EHA | Early Help Assessment The EHA is a standardised framework for conducting an assessment of a child or family’s additional needs across a range of areas and deciding how those needs should be met. It aims to help the early identification of additional needs and promote co-ordinated service provision to meet them.  |
| EHCP | Education Health and Care Plan. |
| EP(S) | Educational Psychologist/y (Service)Educational Psychologists are trained in psychology, learning and child development. They give specialist support and advice to settings, schools, parents and learners. |
| EYFS | Early Years Foundation StageThe EYFS provides the statutory framework for learning in the foundation years. |
| EYSEN team | Early Years Special Educational Needs team includes Early Years SEN Inclusion Teachers (EYSENIT) who work with individual children and their families and support inclusive practice in foundation years settings, and Early Support Assistants who work with young children with SEN and their families. |
| FSS | Family Solutions Service |
| HI | Hearing ImpairmentLearners with HI range from those with a mild hearing loss to those who are profoundly deaf. They cover the whole ability range. |
| GRT | Gypsy Roma Traveller |
| IPS | Independent Parental SupporterIPS are trained volunteers who give practical support to parents of children with special educational needs. |
| Key working | A key worker acts as the main link person for a child or young person. |
| LAC | Looked After Child |
| LCSS | Local Community Support Service |
| Local Offer | The Local Offer brings together in one place information advice and support for parents and young people about SEN and disability. It is also useful for professionals.Oxfordshire’s Local Offer can be accessed at:<https://www.oxfordshire.gov.uk/cms/public-site/special-educational-needs-and-disability-local-offer> |
| MSI | Multi-Sensory ImpairmentLearners with MSI have a combination of visual and hearing difficulties. They are sometimes referred to as deafblind but may have some residual sight and/or hearing. Many also have additional disabilities but their complex needs mean it may be difficult to ascertain their intellectual abilities. Learners with MSI have much greater difficulty accessing the curriculum and the environment than those with a single sensory impairment. They have difficulties in perception, communication and in the acquisition of information. Incidental learning is limited. The combination can result in high anxiety and multi-sensory deprivation. |
| National Curriculum | The National Curriculum sets out the statutory entitlement to learning for all children of school age. |
| Occupational Therapist (OT) | Occupational Therapists are trained to advise on aids and adaptations that will help with daily living and curriculum access. |
| OXSIT | Oxfordshire School Inclusion Team. |
| Paediatrician | A doctor with specialist expertise in babies and children. Community paediatricians are often involved with the early identification of additional needs. |
| Paediatric Audiology | The health team that assess children's hearing.  |
| Parent | A parent is any person with parental responsibility for a child or who cares for him/her as set out in Section 576 of the Education Act 1996. |
| PD | Physical DifficultiesThere is a wide range of physical disabilities and learners cover the whole ability range. Some learners are able to access the curriculum and learn effectively without additional educational provision. They have a disability but do not have an SEN. For others, the impact on their education may be severe.In the same way, a medical diagnosis does not necessarily mean a pupil has an SEN. It depends on the impact the condition has on their educational needs.There are a number of medical conditions associated with physical disability that can impact mobility. These include cerebral palsy, heart disease, spina bifida and hydrocephalus, and muscular dystrophy. Learners with physical disabilities may also have sensory impairments, neurological problems or learning difficulties.Some learners are mobile but have significant fine motor difficulties that require support. Others may need augmentative or alternative communication aids. |
| Phonics Screening Test | An assessment of phonic knowledge, completed by children in Year 1. |
| Physiotherapist (PT) | Physiotherapists are trained to help with physical disabilities. They advise on and support special exercise programmes and provide specialist equipment. |
| Provision map |  A provision map is a way of showing the range of support available to pupils with SEN within a school. It may be organised by age group or key stage and/or by area of need.  |
| SDQ | Strengths and Difficulties Questionnaire is an evidence based tool to help schools to judge whether a child has a mental health need. It is available free of charge from <http://www.sdqinfo.com/> . |
| SEMH | Social Emotional and Mental Health |
| SEND | Special Educational Need and Disability |
| SENCo | Special Educational Needs Co-ordinatorThe member of staff of a setting or school who has responsibility for coordinating SEN provision within that setting school. In a small school the headteacher or deputy may take on this role. In larger schools there may be an SEN coordinating team. |
| SENDIASS | Special Educational Needs and Disability Information Advice and Support Service (formerly Parent Partnership)SENDIASS provides impartial advice and information to parents whose children have special educational needs. They offer support on all aspects of SEN to help parents play an informed and active role in their child’s learning. |
| SENSS | Special Educational Needs Support ServicesSENSS includes specialist teams for C&I, HI, VI, PD, MSI, and Down’s Syndrome and Complex Needs, and SENICTAAC (Special Educational Needs Information Communication Technology and Augmentative and Alternative Communication) |
| SEMH | Social Emotional and Mental Health |
| Simultaneous oral spelling | Simultaneous oral spelling is a useful way of learning spelling patterns and individual words. At its simplest it involves asking the learner to say the word, spell it aloud while looking at it, cover it up and spell it aloud a few times as needed, then write it down. |
| SLT | Speech and Language TherapistA SLT is trained to assess and treat speech, language, voice and fluency difficulties and disorders. SLTs give advice to settings and schools and work with children and parents. |
| SNAST | Special Needs Advisory Support Teacher |
| SpLD | Specific Learning DifficultyDyscalculia, Dyslexia and Dyspraxia are all Specific Learning Difficulties |
| Specialist or Advisory Teacher | A teacher with specialist expertise who works across the county giving support ant advice to settings and schools. |
| TA | Teaching Assistant |
| TAF  | Team Around the Family |
| VI | Visual ImpairmentLearners have a visual impairment if their sight is not correctable by wearing glasses or contact lenses.  |