



Inclusion Toolkit

Supporting children, young people
and their families across Rochdale

Working together to make our borough a
great place for all to grow up, get on and live well.

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Introduction

The Rochdale Inclusion toolkit is designed to support children and young people, from primary through to post 16, in their educational settings. It provides useful information for settings to use to inform provision and support, alongside guidance on the barriers to learning that children may be faced with and strategies that can be used to support.

The inclusion toolkit has been co-produced by the designated education officer, SEN support officer, Rochdale additional needs service (RANS), educational psychology service, Rochdale Parent Carer Voice, Eliza Says, Learn With ESS, education, health and care (EHC) team, school improvement team, special educational needs disability information and advice support service (SENDIASS), NHS, Alkrington Support Group, Colourful Minds, schools and youth workers.

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Raising Rochdale

This toolkit builds on the outcomes set out in the Raising Rochdale strategy, which highlights what all children and young people with special educational needs and disabilities (SEND) in Rochdale should expect and experience.

They should feel valued, well, safe, supported, involved in their community and hopeful for the future. Scan the QR code to read our Raising Rochdale in more detail.



What is Ordinarily Available Provision (OAP)?

Ordinarily Available Provision refers to the support that mainstream settings should be able to provide for a child or young person through their existing funding and resource arrangements. It is available for all children, including those on SEN support and with an education, health and care (EHC) plan.



What is Special Educational Needs (SEN)? (Code of Practice)

A child or young person has SEN if they have a learning difficulty or disability which calls for special educational provision to be made for them.

- has a significantly greater difficulty in learning than the majority of others of the same age,

or

- has a disability which prevents or hinders them from making use of facilities of a kind generally provided for others of the same age in mainstream schools or mainstream post-16 institutions.

What is a disability? (Code of Practice)

Many children and young people who have SEN may have a disability under the Equality Act 2010, that is '...a physical or mental impairment which has a long-term and substantial adverse effect on their ability to carry out normal day-to-day activities'.

This definition includes sensory impairments such as those affecting sight or hearing, and long-term health conditions such as asthma, diabetes, epilepsy, and cancer. Children and young people with such conditions do not necessarily have SEN, but there is a significant overlap between disabled children and young people and those with SEN.

What is SEN support?

“Where a pupil is identified as having SEN, schools should take action to remove barriers to learning and put effective special educational provision in place. This SEN support should take the form of a four-part cycle (See graduated approach on page 6) through which earlier decisions and actions are revisited, refined and revised with a growing understanding of the pupil’s needs and of what supports the pupil in making good progress and securing good outcomes.” (SEND code of Practice, 2014).

- All schools should have a clear approach to identifying pupils with SEN and responding to their needs. A pupil has SEN where their learning difficulty or disability calls for special educational provision, namely provision different from or additional to that normally available to pupils of the same age.
- Where progress continues to be less than expected, the class or subject teacher, working with the special educational needs coordinator (SENCO), should assess whether the child has SEN. Persistent disruptive or withdrawn behaviours do not necessarily mean that a child or young person has SEN. There could be other factors that contribute to these behaviours such as housing.
- Slow progress and low attainment do not necessarily mean that a child has SEN and should not automatically lead to a pupil being recorded as having SEN. Equally, it should not be assumed that attainment in line with chronological age means that there is no learning difficulty or disability.
- Identifying and assessing SEN for children or young people whose first language is not English requires particular care, difficulties related solely to limitations in English as an additional language are not SEN.



Four broad areas of need (SEND Code of Practice)

Communication and interaction	Cognition and learning
<p>Children and young people with speech, language and communication needs (SLCN) have difficulty in communicating with others. This may be because they have difficulty saying what they want to, understanding what is being said to them or they do not understand or use social rules of communication. The profile for every child with SLCN is different and their needs may change over time. They may have difficulty with one, some or all of the different aspects of speech, language or social communication at different times of their lives. Children and young people with autism spectrum condition, are likely to have particular difficulties with social interaction. They may also experience difficulties with language, communication and imagination, which can impact on how they relate to others.</p>	<p>Support for learning difficulties may be required when children and young people learn at a slower pace than their peers, even with appropriate differentiation.</p> <p>Learning difficulties cover a wide range of needs, including moderate learning difficulties (MLD), severe learning difficulties (SLD), where children are likely to need support in all areas of the curriculum and associated difficulties with mobility and communication, through to profound and multiple learning difficulties (PMLD), where children are likely to have severe and complex learning difficulties as well as a physical disability or sensory impairment.</p> <p>Specific learning difficulties (SpLD), affect one or more specific aspects of learning. This encompasses a range of conditions such as dyslexia, dyscalculia and dyspraxia.</p>
Social, emotional and mental health	Sensory and/or physical needs
<p>Children and young people may experience a wide range of social and emotional difficulties which manifest themselves in many ways. These may include becoming withdrawn or isolated, as well as displaying challenging, disruptive or disturbing behaviour. These behaviours may reflect underlying mental health difficulties such as anxiety or depression, self-harming, substance misuse, eating disorders or physical symptoms that are medically unexplained. Other children and young people may have disorders such as attention deficit disorder, attention deficit hyperactive disorder or attachment disorder.</p>	<p>Some children and young people require special educational provision because they have a disability which prevents or hinders them from making use of the educational facilities generally provided. These difficulties can be age related and may fluctuate over time. Many children and young people with vision impairment (VI), hearing impairment (HI) or a multi-sensory impairment (MSI) will require specialist support and/or equipment to access their learning.</p>



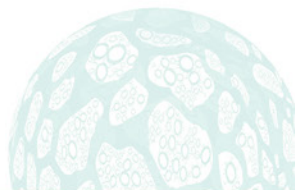
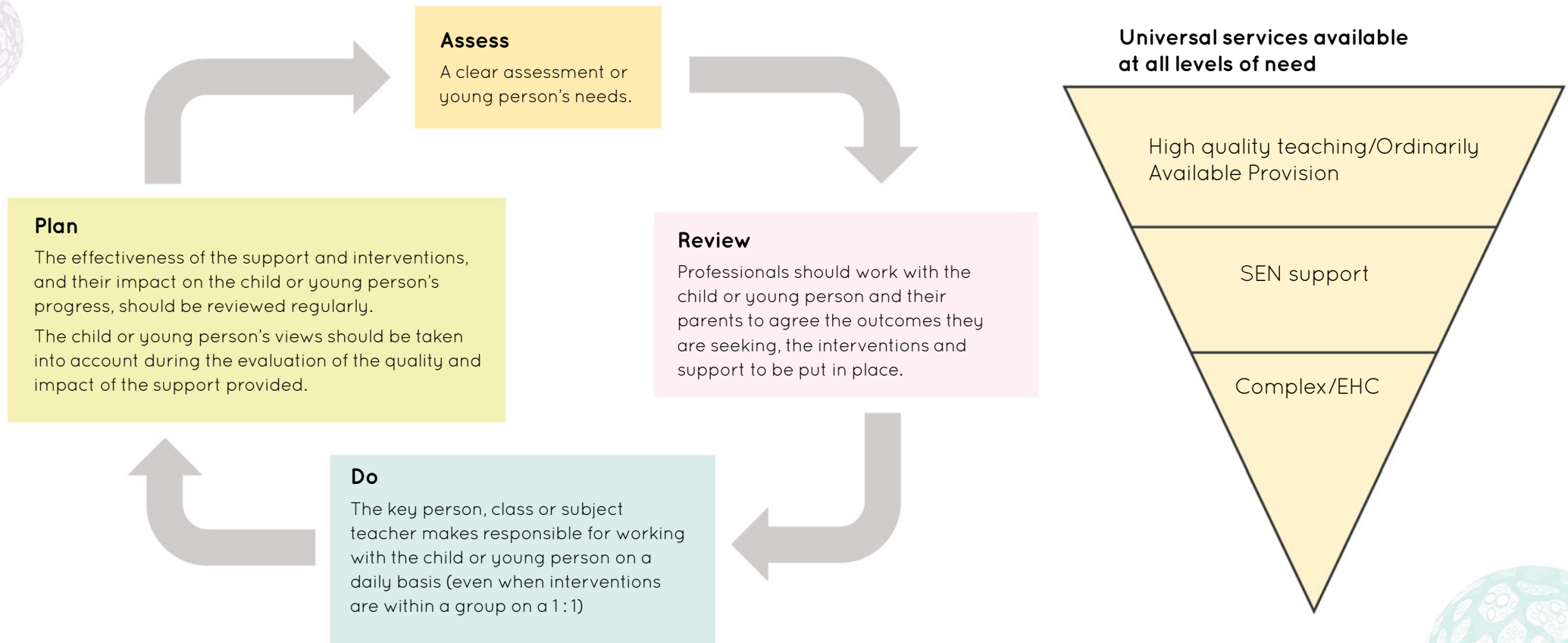
Our graduated approach

Within the Rochdale Graduated Approach, universal level needs are met through high quality teaching/Ordinarily Available Provision (OAP), alongside universal health and care services available to all children and young people e.g. dentist, GP.

What are the principles of the graduated approach?

According to the Code of Practice, supporting children and young people with SEN via the graduated approach includes the use of a four-part cycle of 'Assess, Plan, Do and Review'.

Through this cycle, earlier decisions and actions are revisited, refined and revised with a growing understanding of the child or young person's needs and of what supports the child or young person in making good progress and securing good outcomes.



Person centred planning



A child or young person with SEND should always remain at the centre of any assessment or planning process that focuses on them. A person-centred approach aims to discover and act upon what is important to the child or young person and should be used throughout the graduated approach.

Top tips for person centred planning; child/young person-centred meeting, problem solving, child/young person and parent/carer voice, highlight strengths and aspirations, listening and learning.

SEN Support Plan

Schools should particularly record details of additional or different provision made under SEN support. This should form part of regular discussions with parents about the child's progress, expected outcomes from the support and planned next steps. They should ensure that they have accurate information to evidence the SEN support that has been provided over the pupil's time in the school, as well as its impact.

A SEN Support Plan (or equivalent) should include:

- Collated assessment data from a range of sources e.g. class teacher and SENCO
- Record of desired outcomes for child or young person
- Record of implemented resources and strategies including resulting impact and progress (assess, plan, do, review cycles)
- Log of meetings with parents - minimum of three meetings within a 12-month period to support assess, plan, do and review cycle
- Record of any external support, contact or advice



Smart targets

- Targets are smaller goals which sit underneath the holistic outcomes from the perspective of a particular service.
- There must be a direct relationship between needs, outcomes and targets.
- Achieving these targets indicates that the child or young person is getting closer to their outcomes.
- Children at SEN support and those with and EHCP may require a learning target breaking down into smaller progress steps.
- These outcomes and targets need tracking in a way which professionals can understand what progress has been made towards achieving the learning outcome as a whole.

S	Specific
M	Measurable
A	Achievable
R	Relevant
T	Time-based



Teacher Standards

Teachers make the education of their pupils their first concern and are accountable for achieving the highest possible standards in work and conduct.

A teacher must:

1. Set high expectations which inspire, motivate and challenge pupils
2. Promote good progress and outcomes by pupils
3. Demonstrate good subject and curriculum knowledge
4. Plan and teach well-structured lessons
5. Adapt teaching to respond to the strengths and needs of all pupils
6. Make accurate and productive use of assessment
7. Manage behaviour effectively to ensure a good and safe learning environment
8. Fulfil wider professional responsibilities



Cognition and learning Ordinarily Available Provision

Barriers to learning	Strategies
<p>Child or young person may present with one or more of the following:</p> <ul style="list-style-type: none"> • Working below age-related expectations and/or some difficulties in English and/or maths • Appears anxious when starting an activity/task • Takes a long time to complete/start tasks • Has different ways of learning • Unable to maintain attention • May be easily distracted or distract others • May have long and/or short term memory difficulties • Task avoidance • Copies others work • May look around the room for cues from others • Relies on routine to know what is happening next • Unable to follow instructions as expected for their age • Not always prepared to begin a task • Appears to 'shout out' when they are ready to share their ideas • May need instructions repeating • Presents with difficulties copying and/or recording • Fidgeting or getting up and moving around the environment • Difficulties remembering information • Difficulties applying /linking learning • Relies on work to be presented in the same way consistently • May have difficulties processing text on a white background • May have social, emotional mental health needs 	<p>Teaching/support staff can support by:</p> <ul style="list-style-type: none"> • Adaptations to planning and curriculum • Multi-sensory whole class activities e.g. use of manipulative objects, practical lessons where this allows • Targeted teacher support and modelling • Visual aids e.g. timetables, timer, engaging, clearly presented texts and working walls • Reminders of strategies/prompting when needed • Writing frames/vocabulary mats/ACE dictionaries (if available) • Use of coloured backgrounds e.g. whiteboards, paper • Access to a range of pencils, pens, pencil grips • Use name to gain child and young person's attention • Pre-teaching, consolidate learning/links to prior learning • Learning and instructions broken down into manageable chunks/ 'help areas' in the classroom • Child/young person to feedback what they are expected to do, this is to check their understanding • Seek parent/child/young person voice e.g. what strategies work at home, home situation • Texts are appropriate to level of understanding • Child/young person is not asked not to read aloud in class unless prepared, supported and comfortable with this • Access to sentence starters/scaffolded writing • Support children with understanding how they learn best • Review learning at key points with a plenary • Use alternative ways to demonstrate understanding e.g. diagrams, recordings, mind maps, drama/allow note taking • Use of IT to reinforce learning



Barriers to learning	Strategies
<p>Child or young person may present with one or more of the following:</p> <ul style="list-style-type: none">• Working significantly below age-related expectations• Difficulties with listening, attention and concentration leading to low motivation and learning engagement, unless interested in the subject• Specific difficulties in learning with significant lower level of progress across English or Maths based subjects• Difficulties with task organisation, handwriting and presentation skills• May rely on prompts to return to task• There is a discrepancy between children's understanding compared to what they write• Difficulties in making inferences, generalisation of what has been learned and transferring skills to new tasks• May demonstrate/have some specific learning difficulties such as difficulties in reading fluency, inaccurate spelling, and difficulties with organising and recording work• Processing delay <p>Difficulties in the acquisition of:</p> <ul style="list-style-type: none">• Phonics acquisition and decoding• Reading comprehension• Problem solving• Number skills	<p>Teaching/support staff can support by:</p> <ul style="list-style-type: none">• Evidence based individual/small group interventions to be implemented• Interventions to have specific outcomes that will be measured and reviewed• Regular and specific focused teaching from teachers/teaching assistants• Opportunities for over-learning and repetition• Highly structured personalised reading and/or spelling programmes to be implemented• Additional resources to be available that are specific to individual needs and interests• Personalisation of strategies e.g. Pupil Passport or equivalent• Collect pupil voice through assess, plan, do and review• Individual timetables, checklists to support child with managing transitions and deadlines• Alternative methods of recording to be considered e.g. access to ICT and specialist equipment/materials as necessary• Personalised modelling/scaffolding adapting to individual needs• Use of scripts/worked examples• Individualised pre/post teaching of new skills and concepts including identifying and pre-teaching subject specific vocabulary, supported with visuals as appropriate• Seek external advice from appropriate educational or health agencies and incorporate advice to a high standard• Visual support where available• Communication with parents• Differentiated homework



Communication and interaction

Ordinarily Available Provision

Barriers to learning	Strategies
<p>Child or young person may present with one or more of the following:</p> <ul style="list-style-type: none">• Uses non-specific vocabulary e.g. 'thingy', 'erm', 'you know'• Difficulty understanding and/or using vocabulary• May forget unfamiliar words• Difficulty listening to, or remembering instructions• Difficulties understanding semantic links (words which go together e.g. shoe and foot, fish and chips)• Uses limited language or closed answers• Uses words in the wrong context• Difficulty following or listening to instructions• May appear to ignore others• Flits between conversations or topic activities• May have occasional or mild difficulties with receptive and/or expressive language, speech, social interaction, literal interpretation and inference, social use of language, sensory trigger and thought process• Overshares information or goes off topic• Difficulties with understanding body language and facial expressions• Doesn't always understand jokes or sarcasm• Inconsistencies with eye contact• Differences in voice tone and intonation• May not use or overuse of gesture to support verbal communication• May prefer non-verbal communication methods• Has difficulties understanding social situations and knowing how to respond	<p>Teaching/support staff can support by:</p> <ul style="list-style-type: none">• Use a range of multi-sensory approaches to support spoken language e.g. symbols, visuals, concrete apparatus artefacts, role-play• Use photographs, symbols, whole class visual timetable and prompts along with verbal instructions to promote and support routines (use the same symbols across the setting)• Pre-teaching of vocabulary, emphasis on key words, working walls, word mats or something similar to develop understanding of new vocabulary• Support provided in the form of verbal or written prompts, scaffolding, writing frames, task planners etc• Use of targeted questioning to confirm, consolidate and deepen understanding• Teach and encourage self-support strategies to help them remember and follow instructions e.g. checklists• Provide verbal or written scripts, e.g. conversation and sentence starters and finishers• Provide clear, simple instructions, repeated, simplified and accompanied with visual cues• Model language positively through reflecting back correct speech, rather than correcting it• Allow time for the learner to process and allow additional take-up time to process information (this can be up to 10 seconds for some children and young people)• Give pupils a demonstration of what is expected• Encourage responses through 'talking partners' or similar peer influences

Barriers to learning	Strategies
<ul style="list-style-type: none"> • May not contribute in paired/shared work • Increased anxiety when asked to speak in front of others • May fidget or have a need to move around • May misunderstand the unspoken rules of social communication e.g. waiting to speak • Becomes fixated on subjects and may discuss in inappropriate context or cannot 'read the room' • May present with behavioural needs as a coping strategy • Have executive functioning difficulties e.g. difficulties with planning, organisation, time management, emotional regulation etc. • May answer questions and/or produce work not related to the topic 	<ul style="list-style-type: none"> • Value other languages pupils may have (encourage families at home to speak in the language they are most comfortable with) • Encourage and show pupils how to seek further clarification/help • Use group work flexibly to encourage and promote social interaction and independence by providing opportunities to develop social skills (paired work, small group, and large group) • Set clear role and purpose in group work • Promote modelling and good active listening skills • Consider possible warning or provide questions in advance e.g. 'I will come to speak to you next' • Say 'name first' to ensure pupils know when to respond • Low arousal, purposeful environment • Use tools such as The Wellcomm toolkit to identify needs • Use displays to reinforce key vocabulary • Minimise visual and auditory distractions • Understand that adults provide the best language models • ELKLAN training and Language Builders handbooks available to all schools

Expressive language

Expressive language is the ability to express ourselves. For example, showing what it is that we want, being able to make choices, asking and answering questions. This can be done verbally and non-verbally.



Receptive language

Receptive language is the ability to understand and comprehend the language we hear or read. For example, a child's ability to listen and follow directions demonstrates their receptive language skills.



Communication and interaction SEN support

(In addition to Ordinarily Available Provision)

Barriers to learning	Strategies
<p>Child or young person may present with one or more of the following:</p> <ul style="list-style-type: none">• Finds it hard to interpret social cues correctly• Lack of social empathy• Unawareness of others' personal space• Difficulty maintaining appropriate eye contact, or over emphasis, will physically turn your face, eye contact maybe overly important to the child or young person• Difficulties with appropriate social conversational skills• Literal use and interpretation of language• Rigidity and inflexibility of thought• Unable to see other peoples' point of view• Struggles with change and difficulties with transitions• Solitary play and unusually focussed special interests• Difficulties taking part in conversation particularly with unfamiliar peers/staff• Differences in facial expressions• Frustration/anxiety due to communication difficulties• Social and communication difficulties that may present as behavioural difficulties• Inconsistent behaviour between home and school• Behavioural needs as a result of frustration <p>Speech</p> <ul style="list-style-type: none">• Monotone speech• Unclear speech• Non-verbal communication differences• Speech or sound production difficulties and/or differences• Stammer, difficulties saying what they want and being understood	<p>Teaching/support staff can support by:</p> <ul style="list-style-type: none">• Seek specialist advice e.g. Talk to learn (TTL) team and advisory speech and language therapists• Individual or small group targeted interventions• Targeted phonological awareness interventions• Individual strategies/interventions as advised by a Speech and Language Therapist or outside agency• Meet and greet 'soft landing'• Key adults to support pupil during less structured times, alternatives during less structured times to be offered when available• Access to a workstation or distraction free/quiet area• Ensure that all staff are aware of the pupils preferred method of communication• Sensory activities/timetabled movement breaks• Use a variety of strategies for effective communication e.g. symbol exchange, widgets, visual aids, sign language such as British Sign Language• Individualised timetables, now and next, calendars, check lists• Individualised social stories and comic strip conversations• Allow time to process and respond to a key adult, including the use of non-verbal gestures e.g. communication books, choice boards, gestures, pointing/signing• Adjust environment where appropriate e.g. seating, lighting• Understand that the profile for every child at SEN support with identified speech, language and communication needs is different and may change over time• Alternative methods of communicating e.g. use of ICT



Barriers to learning	Strategies
<p>Language</p> <ul style="list-style-type: none">• Limited vocabulary or language beyond expected development• Difficulties learning new words• Lack understanding of what is being said• Attention difficulties• Concentration difficulties• Limited spoken language for age• Echolalia (repeating noises or what is being spoken from others)• Difficulty with receptive (understanding) and expressive (spoken) <p>Sensory</p> <ul style="list-style-type: none">• Difficulties with large spaces, difficulties with background noise, issues with scents, touching others <p>Please refer to sensory processing page for more advice on sensory processing</p>	<ul style="list-style-type: none">• Communication with parents and understanding social difficulties• Intensive interaction and Attention Autism strategies if suitable• Implement targeted interventions e.g. Primary Wellcomm Big Book of Ideas, Colourful Semantics, blank levels, phonological awareness and care plans from speech and language therapists• Pre-teach vocabulary



Social, emotional and mental health

Ordinarily Available Provision

Barriers to learning	Strategies
<p>Child or young person may present with one or more of the following:</p> <ul style="list-style-type: none">• Pupil may experience low level/low frequency difficulties with social interaction and may demonstrate some difficulties with emotional well-being• Emotional needs in relation to general well-being may be seen through disengagement or frustration, lack of confidence as a learner and poor self esteem• Occasional non-attendance due to emotionally based needs• Difficulties forming and maintaining friendships• Lack of understanding of social behaviour (could be possible influence/impact of adverse childhood experiences (ACEs))• Difficulties recognising emotions in themselves and others• Difficulties regulating own emotions• Poor concentration• Seek perfectionism or over-critical of themselves• Difficulties with change (transitions)• May seem to ignore instructions• Struggles without adult guidance/refuses to be helped• Recreating a familiar environment• 'Acting out' feelings that they don't have the words to describe• May seem defiant/disrespectful• Seeks attention from others good or bad• Fight, flight, freeze, fawn response• Finds it difficult to accept compliments or praise• Lacking in confidence or appears overconfident/bossy• Struggles to make decisions/try new things/afraid of failure	<p>Teaching/support staff can support by:</p> <ul style="list-style-type: none">• Behaviour policy, clear and consistent across school• Use of whole school approaches to promote wellbeing and resilience• Use of personal, social, health and citizenship education (PSHCE), circle time and curriculum approaches to explicitly teach rules and routines, build self-esteem and develop social and emotional skills to all learners• Teach emotional literacy and regulation strategies e.g. whole school/class zones of regulation or similar• Calm/purposeful environment• Awareness of de-escalation strategies• Restorative practice/approaches• Validate feelings, use of emotions coaching• Building positive trusting relationships, including parents• Key adults to focus on connecting before correcting• Re-establish a positive relationship after an incident• Nurture groups• Think about what the child's behaviour is communicating• Focus on priorities and ignore minor things (pick your battles)• Check in and soft landing, time to 'off-load'• Talk about child's interests• Communicate in a calm, clear manner• Scaffold activities/break down into manageable chunks• Allow processing time• Depersonalised language such as "We can..." "Let's investigate this..."• Emotion stories, social stories and comic strip conversations

Barriers to learning	Strategies
<ul style="list-style-type: none"> • Avoids or seeks adult/peer interaction • Risk taking • Lying, stealing or hurting others • Display physical signs of anxiety 	<ul style="list-style-type: none"> • Provide multi-sensory opportunities • Communicate changes to routines/transitions in advance • Visual timetable / now and next board • Clear routines and boundaries • Use of natural consequence • Re-assure it is ok to make mistakes, opportunities to make mistakes and problem solve • Use of distraction techniques e.g. giving responsibility • Give a set time for written work and do not extend into playtime to 'catch up' • Clear success criteria • Class approaches to asking for help • Class sensory box / self soothe box • Positive affirmations • Planned quiet time • Possible safe flight path or exit strategy • STAR behaviour analysis to identify triggers and what the behaviour is communicating



Understanding why children display such behaviours...

- Their early life experiences have taught them that the way to survive or get recognition is via these kinds of behaviour
- The child's negative view of themselves and the world, learned through their poor start to life, makes it hard for them to trust and accept your more positive views.
- Being able to cope with feelings and calm themselves down is a skill learned through a child's early significant relationships.
- Early relationship problems also lead to delays in the development of the brain.

Social, emotional and mental health SEN support

(In addition to Ordinarily Available Provision)

All behaviours should be considered as a child or young person communicating an unmet need	
Barriers to learning	Strategies
<p>Child or young person may present with one or more of the following:</p> <ul style="list-style-type: none">• Significant school avoidance• Have a negative view of themselves as a learner, this may present as difficulty with concentration, engagement and participation in learning• Have a negative view of themselves as a person, this may present as low self-esteem and/or resilience• Consistently display emotional responses that are not typical of their age group• Difficulties forming meaningful relationships and maintaining friendships with peers• Consistently presents as withdrawn and isolated• Has a lack of understanding of social behaviours over a long period of time which may lead to social vulnerability• Continuously seeks attention from adults and or their peers• Increased verbal and/or physical behaviours• High levels of disruption in the classroom which may prevent teaching from being delivered• Difficulty in controlling their own emotions and expressing feelings of frustration• Unable to recognise the behaviours that they have displayed following a period of dysregulation	<p>Teaching/support staff can support by:</p> <ul style="list-style-type: none">• Seek external advice from education and/or health professionals• Plan appropriate emotional awareness and regulation interventions• Create a personalised plan and support for unstructured and/or transition times to increase stability and predictability in the environment• Develop personalised task lists to ensure the pupil is able to complete tasks and meet deadlines• Targeted low level emotional health interventions e.g. relaxation exercises, anxiety scales, celebration books• Targeted emotional literacy-based programmes• Personalised resources and an adapted curriculum• Targeted social skill intervention• Implement interventions from the self-harm pathway on an individual basis• Assist a pupil to identify an emotionally available member of staff who is able to carry out close liaison between home and school• Use a co-produced five point scale• Regular check ins with a key member of staff
<ul style="list-style-type: none">• Indicators of an unmet need may also present as; anxiety/depression, self-harm, eating disorders or substance misuse• It is important to remember that all of the behaviours outlined could be a behaviour caused by increased anxiety	

Sensory processing

Ordinarily Available Provision

Barriers to learning

Child or young person may present with one or more of the following:

- Have a limited diet due to the smells or texture
- May have some difficulties being in busy environment e.g. assembly, dinner hall
- Sensitive towards smells in the environment
- May become distressed when the lighting change
- Potentially present as clumsy or frequently bump into things
- Unaware of personal space
- General discomfort in uniform
- Struggle sitting still and/or lean against others or objects
- Rocks on chair and/or sits on the edge of chair
- Some interoception difficulties e.g. not recognising when hot/cold, in pain, need the toilet etc
- Need to fidget/move around
- May frequently mouth or try to eat inedible items
- Covers ears



Touch

What your skin feels (texture, tightness, pressure, temperature, etc.) from either something touching you or you touching an object.



Taste

The signals that your taste buds receive in your mouth (sweet, salty, sour, bitter, umami).



Sound

The sound waves that your ears register, including different pitches and frequencies.



Vestibular

What constitutes your sense of balance and spatial orientation or coordination of your head and body.



Vision

The colours and depth perception signals that your eyes receive from your surroundings.



Proprioception

The system that focuses on the body's muscle and joint movements.



Smell

The scents and aromas that your nose picks up from the objects around you.



Interoception

What gives you signals of your internal organs, such as hunger, pain, urination, etc.

Strategies

Teaching/support staff can support by:

- Use natural lighting whenever possible and consider adjusting the lighting (if possible)
- Ensure clutter free classroom environment
- Ensure displays are clear and neutral colours are used where possible
- Consider alternative seating
- Have sensory resources available e.g. attention tools, sensory box, fidget attention tools and sensory chewable necklaces
- Offer a variety of food choices and snacks
- Provide space for movement and sensory breaks (this maybe whole class sensory movement breaks) access to readily available resources e.g. trampoline, theraband, yoga ball
- Allow reasonable adjustments if required to uniform
- Adaptations for transitions e.g. early pass
- Toilet pass
- Adults and child/young person encouraged to talk at the appropriate volume and pitch for learning to take place
- Reduce background noise, offer designated quiet spaces, and provide noise-cancelling headphones or earplugs
- Avoid using air fresheners or strong-smelling cleaning products
- Zones of regulation resources
- Advise parents to attend a sensory workshop
- Food chaining – find out what safe foods are, why they are safe and offer foods similar

Sensory processing SEN support

(In addition to Ordinarily Available Provision)

Barriers to learning	Strategies
<p>Child or young person may present with one or more of the following:</p> <ul style="list-style-type: none">• May need to hold, fiddle or stim with objects frequently• Seeks fast movements• May take or avoid/wary of risks e.g. climbing/jumping at height• Frequently tactile towards others• Increased poor interoception e.g. not noticing when hurt, hands are dirty, needing the toilet, not dressed appropriately for the weather• Strong preferences around certain smells• Generating noises e.g. humming, whistling, tapping• Overly focused on visual detail• Significant chewing clothing or objects• Seeking fast movements• Struggles to navigate around the classroom• Find it hard to follow text on a whiteboard• Frequently loses place on a page• Avoids or seeks messy play• Unable to tolerate certain types of uniform, fabrics etc.• May refuse to eat/explore certain foods e.g. tastes, colours, textures• Does not like being touched or being close to others which may result in unwanted physical behaviours• Reacts to loud or sudden noises e.g. covers ears• Struggles filtering out background noise• Needs regular movement breaks• Unable to remain seated	<p>Teaching/support staff can support by:</p> <ul style="list-style-type: none">• Sensory circuits• Small group targeted intervention• Timetabled movement breaks and access to unplanned movement breaks• Alternatives lunch time activities e.g. quiet area to eat• Consider seating arrangements, storage of personal belongings, wobble cushion, leaning against a wall, standing desk• Additional time for transitions• School uniform adjustments• Support/modelling when navigating PE equipment, messy play, new textures or food• De-sensitise hands before messy play e.g. clapping together, deep pressure, use of gloves• Visual timetable/now and next board/flashcards• Scaffolded teaching of playground games particularly any involving touch• Provide handouts to reduce amount of copied work• Visual friendly strategies e.g. coloured overlay, coloured paper reading window, clear font, coloured backgrounds• Complete a sensory profile• Consider sensory items such as chewelry, weighted blanket, weighted backpack, individual sensory box, trampoline• Allow transitional objects such as an object with a specific scent• Pre-warning of loud noises e.g. fire alarm

Hearing impairment

Ordinarily Available Provision

Barriers to learning	Strategies
<p>Child or young person may present with one or more of the following:</p> <ul style="list-style-type: none">• Has a diagnosed hearing loss that has been confirmed by audiology or is suspected to have a hearing loss and is undergoing assessments• Has hearing aids• Limited receptive and expressive language• Challenges in learning and employing new vocabulary• Limited attention and concentration• Struggles to understand verbal information• Unable to consistently follow instructions• Misunderstands/misses key information• Struggles to listen with background noise or in loud environments• Struggles to retain information and presents with poor language skills• Frequently asks for repetition• Volume of voice may be loud or extremely quiet• May have frequent colds or ear infections• May have low self-esteem• Present with fatigue due to high levels of concentration• May struggle to form friendships• May present with unclear speech• Pupils may develop masking strategies to hide their lack of ability to access learning e.g. immediately says yes after a question	<p>Teaching/support staff can support by:</p> <ul style="list-style-type: none">• Teachers to access deaf awareness training and continued advice and support from the Teacher of the Deaf• Additional processing time• Consider environmental specific adaptations e.g. poor acoustics in a hall, noise levels, carpeting, soft furnishings, rubber feet on the table• Consider classroom seating e.g. front of the class• Staff members to be aware that the pupil may lip read• Ensure pupils are face on when giving an instruction• Ensure that any hearing technology or adjustments to the environment are in place• Staff to be aware of pupils developing their understanding of their deaf identity• Staff to be aware of their social and emotional needs related to the demands of their deafness• Staff to provide opportunities to build friendships• Staff to have an understanding of supporting pupils to develop their independence with their equipment whilst discreetly ensuring they are using hearing equipment effectively and consistently (this can be particularly important during the teenage years)• Staff to speak clearly and deliver clear instructions• Signage around the setting to be clear and accessible• Appropriate plans for emergency evacuation• School to facilitate a quiet space• Give prompts e.g. gentle touch of hand before giving instructions if and when appropriate, use of visual cues

Barriers to learning	Strategies
<p>Child or young person may present with one or more of the following:</p> <ul style="list-style-type: none"> • Has bilateral hearing aids, cochlear implants or BAHA • Likely to have an assistive listening device (ALD) • Has a progressive hearing loss or a moderate to severe hearing loss • Delayed language development • Relies on elements of the curriculum to be differentiated • Uses a preferred method of sign as their main form of communication • Has difficulties with the perception of some speech sound and accessing the curriculum • Difficulty establishing friendships • May focus their visual attention for a long period of time • May not be actively listening in the lesson • May present with listening fatigue • May be reluctant to participate in some lessons • Lack of progress in learning due to a hearing loss 	<p>Teaching/support staff can support by:</p> <ul style="list-style-type: none"> • Offer appropriate access arrangements for exams to create usual way of working • Reinforcement of learning through additional methods such as pre and post teaching, visual resources and signing • A quiet working space for small group work and specialist assessment • Provide adapted/modified curriculum as required • Some targeted teaching support to enable access to the curriculum • Consider acoustic treatment of rooms and Soundfield systems • Contact with the Teacher of the Deaf to provide specialist teaching, assessment, pre and post tutoring and staff training • Daily checks on hearing equipment as advised by the Teacher of the Deaf • Follow individual recommendations from Teacher of the Deaf for listening skills/language development activities • Targeted interventions to support the development of listening skills, language development, vocabulary, deaf identity, pre/post teaching of subject-specific vocabulary and/or concepts and social and emotional skills • Teacher of the Deaf to provide specialist equipment check, advice or teaching visits following the service criteria • Seek advice from external agencies and implement any recommendation

Vision impairment

Ordinarily Available Provision

Barriers to learning	Strategies
<p>Child or young person may present with one or more of the following:</p> <ul style="list-style-type: none">• May be able to see close up but be unable to see at distance• May be able to see at distance but not close up• May have a specific eye condition• May be unable to see different colours• May cover an eye when reading or performing close up tasks• May have poor handwriting e.g. may be unusually small or large, or letters may be poorly formed• May have difficulties with:<ul style="list-style-type: none">• tasks involving reading and writing• moving around the environment• maintaining visual attention/concentration• starting/completing tasks• making friendships• copying accurately either from board or close up• height, depth or shadow perception• reading facial expressions and body language• Shows signs of poor hand eye co-ordination and over and under reaching• Appears clumsy and may often trip or fall• May tire easily or easily distracted by tasks• May find spoken information easier to understand/remember• Room is too bright or dimly lit e.g. glare from windows• Not wearing glasses/patch as prescribed• Visually demanding lessons, small font size, incorrect seating position, cluttered classrooms, visually cluttered worksheets, exercise books with poorly contrasted lines, crowded areas	<p>Teaching/support staff can support by:</p> <ul style="list-style-type: none">• Advice from a qualified teacher of children and young people with vision impairment e.g. RANS• Provide rest breaks, multi-sensory experiences and allow processing time• Provide a consistent and clutter free classroom environment• Visual clutter consideration e.g. neutral backgrounds• Consideration for seating• Consider print size e.g. drawer labels/worksheets• Consider transitions e.g. early pass if child can independently move around• Adaptations to PE equipment (available to all)• Access to a device and 'screen share' if suitable and can use independently• Electronic books• Consider lighting e.g. use of blinds• Think about positioning of possessions e.g. coat peg and locker positioned at the end• Develop independence skills• Consult with family• Advise parents to attend a sensory workshop• Additional time to complete tasks e.g. exam arrangements• Give verbal commentary including environmental/social cues• Clear verbal instruction/explanations supported by visuals• Alternatives to written work• Clear predictable routines and placement of resources to support independence e.g. clear signage

Vision impairment SEN support

(In addition to Ordinarily Available Provision)

Barriers to learning	Strategies
<p>Child or young person may present with one or more of the following:</p> <ul style="list-style-type: none">• A recognised vision impairment and/or an assessed visual difference which is not fully corrected by glasses/lense• Relies on modified materials or different formats• Require support or supervision in unfamiliar or hazardous situations• May present with visual fatigue and have a slower work rate• Unable to record and retrieve written work• Has difficulties moving safely, independently and with appropriate speed• Requires specialist equipment to be able to access the curriculum e.g. specialist software to access computers• Limited self-help skills• Difficulties forming and maintaining meaningful relationships• Struggles in social situations• Difficulty accessing reading materials• Difficulties with recording and retrieving/re-reading written work• Difficulty accessing the curriculum through vision• Textbooks or worksheets are not available in learners preferred formats (Braille, large print, or audio)• Difficulty seeing content on the board, PowerPoint, or projectors• Assistive technology is not integrated into lessons or curriculum activities or outdated	<p>Teaching/support staff can support by:</p> <ul style="list-style-type: none">• Advice from a qualified teacher for vision impairment• Seek advice from external agencies and follow recommendations• Ensure all resources are in recommended print size• Provide an adapted/differentiated curriculum• Provide modification of materials and presentations• Targeted adult support to allow preparation• Provide a suitable learning space• Ensure that specialist equipment is kept in good working condition and charged• Pre and post teaching• Alternative physical activities if required (or additional/alternative resources)• Access to specialist resources such as magnifiers, dark lined books/paper, laptops/tablets and magnification aids• Consider access arrangements for external tests and exams• Adult support to scribe when appropriate• Provide additional experiences in the environment• Intervention to support life skills, peer awareness and self-advocacy skills• Access to a device and 'screen share' if suitable• Modified exercise books and resources e.g. talking scales• Computer settings modified to learner• Specialist software to access computers• Provide task lighting where necessary• Allow different ways of recording (touch-typing, audio/video)

Physical needs

Ordinarily Available Provision

Children and young people with a physical need may have missed learning experiences due to absences, appointments etc. where progress is less than expected but not because of a learning difficulty

Barriers to learning	Strategies
<p>Child or young person may present with one or more of the following:</p> <ul style="list-style-type: none">• Has physical needs and may use specialist aids relating to their disability• Fine and gross motor delay• Spatial awareness issue• Minor physical difficulties e.g. hand eye coordination• Difficulties in throwing, catching, balancing• Lack of progress academically relating to impact of condition• Needs impact on their self-esteem and social relationships• Works at a slower pace due to fatigue and/or pain• May take medication which impairs concentration and may lead to difficulties in the classroom• Poor engagement during tasks	<p>Teaching/support staff can support by:</p> <ul style="list-style-type: none">• The physical aspects of the building, outdoor areas and individual learning spaces are accessible• Risk assessments/ Personal Emergency Evacuation Plan• Leave early when travelling between classes• Clutter and obstacle free environment• Accessible displays/resources e.g. alternative lined paper• Option to sit on a chair rather than floor• Consider if left/right handed and where they sit• The furniture is the appropriate size/height/type• Consider positioning of child in the classroom• Consider timetabling and location of rooms• Consideration to flexibility of uniform• Teach sequencing skills e.g. putting clothes on the right order• May need regular rest breaks• Consideration needed for transportation of food at lunchtimes• Handrails/accessible bathroom• Provide a space/locker to store items• Provide assistive technology, including digital technology to support learning e.g. pencil grips, adapted scissors, writing slope, alternative cookery equipment• Avoid copying from the board• Allow additional time to complete tasks• Programmes to develop fine and gross motor control• Keep withdrawals from class to a minimum

Physical needs SEN support

(In addition to Ordinarily Available Provision)

Barriers to learning	Strategies
<p>Child or young person may present with one or more of the following:</p> <ul style="list-style-type: none">• Have a physical need and uses specialist aids which relate to their disability• Poor fine motor skills which may impact their handwriting, speed and/or accuracy• Poor gross motor skills which may impact their ability to carry out tasks independently• Limited spatial awareness• Poor hand eye co-ordination• Difficulties in throwing, catching and balance• Copies others work• Requires adult support for a medical condition, diet, toileting, dressing and/or mealtimes• Lack of academic progress due to a physical disability• Low self esteem• Unable to sustain meaningful relationships• Working at a slower pace due to physical fatigue• Limited engagement in tasks	<p>Teaching/support staff can support by:</p> <ul style="list-style-type: none">• Individual risk assessments and risk management plan• Seek advice from external agencies (Occupational therapist, RANS for physical disability and/or physio therapist) and implement recommendations• Provide flexible targeted adult support that enables the pupil to access the curriculum, move around safely and manage their condition• Allow the pupil to leave early to travel to the next lesson• Adult support with dress/undressing and toileting• Interventions that focus on motor skills development• Ensure access to specialised IT equipment if required• Provide alternative methods of recording written work• Consider access arrangement for exams• Support with organisation and independence• Allow access to suitable equipment which enables the pupil to access the curriculum e.g. walking aids, standing frames and specialist seating• Access to hoisting facilities for personal care needs

Acknowledgements

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SEN support officer

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Head of SEND

Katie Charlton

Head of schools

Katie Beresford

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Rochdale Parent Carer Voice

Jacquie Ellis

Rochdale Parent Carer Voice

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EHC officer

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EHC team manager

Hannah Glennon

Interim SEN service manager

Jessica Stout

Educational psychologist

Gina Westwood

Educational psychologist

Nicola Goldsworthy

RANS VI team

Sophia Qureshi

RANS VI team

Karen Slack

RANS team for autism and social communication (TASC)

Ruth Kelsey

RANS TASC team

Cath Hankinson

RANS TTL manager

Elizabeth Croshaw

RANS HI and VI team manager

Ed Bradley

RANS HI team

Alison Moore

RANS HI team

Kate Earnshaw

RANS HI team

Rebecca Rawsthorne

RANS physical disabilities (PD) team manager

Shelley Hunt

RANS PD team

Kirsty McNee

Assistant EHC officer

Holly Davies

Assistant EHC officer

Emily Humphrey

School improvement officer

Leanne Foley

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Hammas Majid

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Kristian Glenny

Clinical psychologist

Saqub Hussain

Engagement and co-design youth worker

Kirstie Rathbone

Head of The Virtual School

Shauna Golden

St Cuthberts High School

Karen Duggan

Hamer Primary School

Lesley Cryer

Marland Hill Primary School

Heidi McDermott

Educational psychologist

Helen Austin

Educational psychologist

SEN Support Plan

(Pupil Name) SEN Support Plan

Cycle Number



Name (Pupil Name)	NYC (Year group)	School (School Name)	SEN Support Plan agreed (Date)
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Pupil Voice (My strengths and needs are)	Parent Voice (My child's strengths and needs are)	Insert picture of pupil here

Assess (What do I need help with)	Plan (outcome to achieve)	Do (Strategies to help me achieve the outcome)	Review (Date and impact)

Name of professional:	Signature:	Parent/Carer name:	Signature:
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Contact Information

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