|  |  |  |  |
| --- | --- | --- | --- |
| **Area of need** | Wave 1General provision for all children | Wave 2Enhanced Group SupportFor those just below national age-related expectation, need a ‘boost’ to ‘catch up’, **not****necessarily identified as SEN.** | Wave 3Additional SEN Support **Higher Need****For those who despite wave 2 intervention require further intervention** or it is felt wave 2 not appropriate due to specific need.  |
| **Cognition and learning**Children may have difficulties in learning to read, spell and construct sentences.Children may have difficulty with numeracy.  Children may find it hard to process and retain new information (short or long term memory difficulties). Children may have a specific learning difficulty (dyslexia, dyscalculia).  Children may learn at a significantly slower rate than others. | Differentiated planning, activities, delivery and outcomesIndividual targets for Reading, Writing and numeracyUse of ICT (Laptops and iPads)Use of models and images to support learning/scaffolds and word matsUse of practical and visual resources (e.g. numicon)Assessment for Learning (AfL)Peer and self-assessmentHigher order thinking skills developmentHigher order questioningFocus group support from TAFocus group support from TA range of age appropriate dictionariesRevision classes for year 6 (if appropriate) | Extra reading with adults.Superhero reading (Older children support younger children who are below national in their reading). Phonic (Read, Write Inc) interventions.Maths/English addressing misconceptions during afternoon intervention.Fresh Start program.Coloured overlays.Pencil grips.Writing slopes | **Numeracy**1:1/small group support in lessons.Heavily adapted/reduced tasks.Accessing learning in a year group more suitable to the child’s needs.1:1 developing subsidising1:1 correspondence and formation – gross motor e.g. P.E type activitiesPrecision teaching of Number recognitionPre/post teaching of key/concept vocabulary**English/Reading**1:1/small group support in lessons.Heavily adapted/reduced tasks.Accessing learning in a year group more suitable to the child’s needs.Adapted word mats with images**General**Input from Learning Support Advisory Teacher.Educational Psychologist Service support |
| **Communication and interaction**Children may have difficulties with receptive and/or expressive language.Children’s pronunciation may not be clear or fluent.Children may have limited vocabulary, struggle to respond verbally and have difficulty following instructions.Children may find social situations and engaging with peers difficult.Children may be diagnosed with a specific condition such as Autism Spectrum Disorder (ASD) or Asperger's. | Visual timetables present in all classes of the sequence of the day.Key vocabulary explained in every lesson to aid understanding.Structured school and class routines.Whole school training by Autism Education Trust (AET) on inclusive, calm classrooms.Emotion, health and well-being leader (EHWB) circulating school throughout the day to support any children. | Targeted seating in class to ensure children with C&I needs have access to working walls with key vocabularySAL interventions for children on SALT register.Modification of language - short chunks of concise information, where possible accompanied by either a model or imageThinking time – pausing to allow time for pupil to process. Or allowing them time to plan their verbal response. | Small group/1:1 SAL interventions recommended by SALTSymbols/print used in planning and resources.Communication books if appropriate Advice from external agencies (SALT).Visits to Stepping Stones and Language School if required. Sessions with EHWB leader for children with ASD. |
| Social,Emotional andMental HealthChildren may be anxious, emotional and negative in their opinion of themselves.Children may have hyperactive, aggressive or controlling behaviours.Children may be demanding of adult attention, lack concentration or consistently disturb the learning of others.Children may be socially withdrawn or refuse to communicate.Children may have difficulties attending school.Children may have diagnosed condition such as Attachment Disorder, Attention Deficit Hyperactivity Disorder (ADHD) or Attention Deficit Disorder (ADD).  | Whole school behaviour policy based on taking responsibility for actions.Class based reward systems.Whole school approach to SEALCircle times.Jumping JaxxBuddy benchClass worry box (depending on needs of children within class)PSHE- JigsawWhole class assembliesAccess to sensory roomELSA – specific targets for identified children.Bereavement groupGrowth mindset groupFriendship group1-1 work (not ELSA) as necessary to help with SEMH needs (e.g anxiety, friendship issues, body image, anger…)Use of school guinea pigs to promote wellbeing.Working with parents to help children.Staff/senior leaders available at break times to support where necessary.Transition periods between schools for year 6 pupils. Mindfulness time during the day.Calming tents or rooms in each phase.Class timetables. | Social narrativesComic stripsIndividual reward / sanctions systems. Behaviour plan Behaviour Risk assessment when neededLearning mentor individual and group workSocial Skills group workELSA – specific targets for identified children. | Early intervention teamBehaviour plan and behaviour risk assessment Additional transition arrangementBehaviour Support Team drop in sessions for consultationELSA – specific targets for identified children.Child in Care supportChildren may have 1:1 provision to help them access learning in the classroom environment.Access to a workstation or safe space to reduce emotional and sensory overloads.Children may attend outside agencies such as BEAM drop-in service or Kooth. Children may be referred to BeeU (CAMHS).Specific advice and resourced given by Education Psychologist (EP) |
| Sensory and PhysicalChildren may have a visual impairment (VI).Children may have a hearing impairment (HI).Children may have a multi-sensory impairment (MSI). Children may have a physical disability or medical condition that specifically impacts on their education (a student with a medical condition that does not impact on their education and is able to fully access school life is not considered to have a SEND) | All areas of school are accessible to all.Children are included in all PE lessons, physical activities with adaptions made where necessary.Environmental considerations e.g lighting, noise, seating Differentiated planning, activities, delivery and outcomes | Cool kids (training provided by Occupational therapy (OT) for children with fine/gross motor skill difficulties)Additional fine motor skills practice. (Funky fingers/dough disco).Pencil gripsWriting slopesSpring scissorsWobble cushionsSensory roomAdditional handwriting – Speed Up Teodorescu Perceptuo – motor programme (Write Start) Working in low arousal areaFiddle toys Different forms of recording e.g. Typing, drawing, peer scribe | Targeted physio as directed by Occupational Therapy/physiotherapy department.Visits from Teacher of the Deaf from the Sensory Inclusion Service (SIS) for the Hearing impaired (HI).Visits from the SIS for Visually impaired.Specific resources/large scale equipment.Individual risk assessments.Suitable areas for intimate care, with suitable training for staff. Care plans in place.Input from Learning Support Advisory TeacherEducational Psychologist Service support |