

Tameside's Graduated Approach School Age



Tameside Metropolitan Borough

Contents

Acknowledgements **6**
Introduction **7**
Tameside SENCO Toolkit **10**
Assess-Plan-Do-Review **12**
Early Years Inclusion Funding (for children in receipt of FEF) **19**
Educational, Health, Care Plans (EHCP) **19**
Communication and Interaction **27**
Key Stage One **27**
Social Communication 27
Expressive Language 33
Expressive Language - stammering 41
Expressive Language – speech sounds 43
Understanding of Language 47
Situational mutism/ situational speaking 52
Key Stage Two **57**
Social Communication 57
Expressive Language 62
Expressive Language - stammering 70
Expressive Language – speech sounds 71
Understanding of Language 75
Selective mutism/ Situational mutism/ situational speaking 81
Key Stage Three **85**
Social Communication 85
Expressive Language 90
Expressive Language - stammering 97
Expressive Language – speech sounds 99
Understanding of Language 102
Situational mutism/ situational speaking 108
Key Stage Four **112**
Social Communication 112
Expressive Language - stammering 124
Expressive Language – speech sounds 126

Understanding of Language 129
Situational mutism/ situational speaking 134
Helpful links 138
Cognition and Learning 142
Key Stage One 142
General 142
Thinking skills 148
Literacy 153
Numeracy 156
Key Stage Two 158
General 158
Thinking skills 164
Literacy 169
Numeracy 173
Key Stage Three 175
General 175
Thinking Skills 181
Literacy 184
Numeracy 187
Key Stage Four 189
General 189
Literacy 196
Numeracy 199
Helpful links 200
Social Emotional Mental Health (SEMH) 206
Key Stage One 206
Social and Interpersonal Skills 206
Social Awareness and Understanding 208
Managing Emotions 211
Reducing Anxiety 216
Self-esteem/ self- efficacy 221
Key Stage Two 225
Social and Interpersonal Skills 225
Social Awareness and Understanding 228

Emotional Awareness, Understanding and Regulation 232
Reducing Anxiety 238
Self-esteem/ self- efficacy 243
Key Stage Three 248
Social and Interpersonal Skills 248
Social understanding 251
Managing Emotions 253
Reducing Anxiety 259
Self-esteem/ self- efficacy 262
Resilience 265
Key Stage Four 269
Social and Interpersonal Skills 269
Social Awareness and Understanding 274
Managing Emotions 277
Reducing Anxiety 281
Self-esteem/ self- efficacy and Resilience 285
Helpful links 287
Sensory and Physical 293
Key Stage One 293
Fine and gross motor 293
Sensory 302
Hearing Impairment 309
Vision Impairment 314
Key Stage Two 318
Fine and gross motor 318
Sensory 326
Hearing Impairment 332
Vision Impairment 337
Key Stage Three 342
Fine and gross motor 342
Sensory 350
Hearing Impairment 357
Vision Impairment 361
Key Stage Four 365

Fine and gross motor 365
Sensory 372
Hearing Impairment 379
Vision Impairment 383
Helpful links 387

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Introduction

This is a resource for anyone who supports children and young people with Special Educational Needs and Disabilities (SEND). It includes information related to best practice and known evidence-based interventions for children in the early years to post 16. The hope of this resource is to support practitioners to raise the standards of education and support for children and young people with SEND.

What is the Graduated Approach?

To ensure all needs are identified and supported, schools must use a graduated approach. It is called a graduated approach because there may be many different cycles of intervention and strategies before support needs are understood and met.

'Where a pupil is identified as having SEND, early years' settings, schools and colleges should take action to remove barriers to learning and put effective special educational provision in place' (DfE, SEND Code of Practice, 2015, p.100). The SEND Code of Practice promotes the use of the 'Assess-Plan-Do-Review' Cycle to support this process. This works by revisiting, refining and revising our understanding of a child's needs and what works to support them.

This means our understanding of the child's needs should become clearer over time and build a better picture of the provision they need to make progress. Building a picture over time is especially helpful when considering longer term planning and the provision needed to make a successful transition to setting/school or between schools. A good SENCO will support a family through cycles of Assess-Plan-Do-Review and will try to understand any differences in opinion or experiences a child has across different environments and make sense of them to inform the child's needs and support plan.

Tameside's Graduated Response for Inclusion in Education

Education is about supporting children to achieve their full potential.
The graduated approach is initially split by age (Early Years / Key Stage 1 / Key Stage 2 / Key Stage 4 / Post 16) and then by area of need (Cognition and Learning; Communication and Interaction; Social Emotional and Mental Health; and Sensory and Physical). This document focuses on school age (Key Stage 1 / Key Stage 2 / Key Stage 4)

It is then split into 3 tiers of support:
-WHAT TO DO FIRST - Identifying and supporting need
-ASKING FOR HELP - Making a referral for specialist advice
-WHEN MORE HELP IS NEEDED - Integrating specialist advice



The **'What To Do First'** section also includes support in relation to:
-Whole School/Whole Class Level
-Group Level
-Individual Level
Children might move up and down the Graduated Response continuum at different stages of their lives depending on how factors such as time, environment and their personal characteristics interact with what happens in classrooms and settings.

What is a Special Educational Need?
In Tameside we advocate for a broad definition of SEND. If a child/young person needs adjustments to be made in order to be included or make progress, then consideration should be given to them having a Special Educational Need.

We also recognise the benefits of identifying SEND early and how being responsive to individual needs early can have positive impacts on children/young people's outcomes in the longer term.

The Special Educational Needs and Disability (SEND) Code of Practice (Department for Education [DfE] & Department of Health [DoH], 2015) sets out guidance and expectations in relation to identifying, assessing and providing for children/young people with special educational needs. It tells us in relation to identification: *A child or young person has a special educational need if they have a learning difficulty or disability which calls for special educational provision, namely provision that is different from or additional to that normally available.*

The Code of Practice (2015) and Children and Families Act (2014) make it clear that settings have to meet the needs of all children/young people with SEND, including those who do not have an Education, Health and Care Plan (EHCP). All schools are required to use their SEN Notional Funding as part of a graduated response to meeting children/young people's needs.

Parent/Carer Support
Although this resource is aimed at educational practitioners, parents/carers may still find the sections above helpful when looking for strategies to use at home for their child/children.

More support?
-For information on services for children and young people with SEND please see the Tameside Local Offer, at: *www.tamesidelocaloffer.co.uk*
-Umbrella – The Tameside Parent Carer Forum, please visit their Facebook page for more information: *www.facebook.com/people/Tameside-Umbrella-Parent-Carer-Forum/61568513227370/*

-OKE is a local charity run by volunteers who are local parents of children who have special educational needs. They offer support, information and activities to families with children with special needs/disabilities.

-Tameside SENDIASS provides impartial information, advice and support to children and young people (aged 0-25 years) with special educational needs and/or disabilities, and their parents and carers, on education matters and health and social care matters in relation to their education and learning:
www.togethertrust.org.uk/community-support/sendiass

Feedback

It is important that this resource is regularly updated, as best practice and interventions are always developing. If you would like us to include a resource or intervention, feel we have missing information and/or have any general feedback please do not hesitate to get in contact and let us know how we can improve the Tameside Graduated Approach by going to: [Link Removed]



Tameside SENCO Toolkit

How the graduated approach can support practice in your setting/school. All children and young people can thrive when they are in schools/settings that are nurturing, inclusive and kind. In order for schools/settings to do this they need to have good monitoring processes, to notice difficulties that may arise from a pupil and/or groups of pupils, and to have good systems for supporting these individuals. Staff also need to feel supported, valued and have the time and space to follow these systems. Systems, policies and processes also need to be differentiated, as every child is different and it is important that any support received reflects this.

This graduated approach resource provides information related to best practice and known evidence-based interventions – as well as giving ideas and support to SENCOs directly, it is also a useful resource for supporting other setting/school staff with how they help pupils with SEND. When a staff member may come to a SENCO for support, they can be supported to look at this resource and find ideas for moving forward. This process could be embedded within setting/school systems, for example, if there is a formal referral process to the SENCO, taking ideas from this resource may be a part of that referral process.

There are many programmes and accreditations that can support setting/schools to embed inclusive practice at whole school level. These include:
-Dyslexia Friendly Schools *www.bdadyslexia.org.uk*
-Inclusion Charter Marks *www.iqmaward.com*

SENCO Network

Tameside Educational Psychology Service facilitate the SENCO network for SENCOs/SENCO Assistants/SLT members at the start of each term. The aim of these networks is to provide local and national updates, have visiting speakers and for SENCOs to share good practice. Feedback is asked at the end of every network in order to shape future networks.
To book, please visit Tameside Educational Psychologist Eventbrite page.

Role of the SENCO in Schools/Settings

A Special Educational Needs Coordinator (SENCO) plays a crucial role in supporting students with special educational needs and disabilities (SEND) within a setting/school. Their primary responsibility is to ensure that all children and young people, regardless of their abilities or challenges, receive the support they need to reach their full potential.

Just as a subject lead in a school will champion the importance and quality of the teaching of their subject, the SENCO maintains an overview of the quality of the

teaching of children and young people with SEND. The SENCO can do this through their SEND and inclusion policies.

Key Responsibility of a SENCO

Many settings/schools choose to hold a SEND register to support them with the identification of need. The setting/school is asked to categorise the nature of the pupils with SEND through the census data.

The SEND Code of Practice (DfE, 2015, pg. 100) encourages us to provide the right support at the right time. Some children/young people will require small adjustments within the classroom to be successful, whereas for others they will require a highly personalised timetable of support and intervention in order to make progress and be included.

The code highlights:

- Where a child/young person is identified as having SEND, the setting/school should take action to remove barriers to learning and put effective special educational provision in place.
- Once a child/young person is identified as having SEND, their family must be informed. The setting/school must work with parents/carers, listening to their views and involving them in any decision making and planning.
- The provision in place must be reviewed termly and involve the child/young person and their family.

This SEND support should take the form of Assess-Plan-Do-Review Cycles, through which earlier decisions and actions are revisited, refined and revised with a growing understanding of the Children/Young People's needs, alongside what support the children/young people require to make good progress and secure good outcomes (SEND Code of Practice, 2015, pg. 100, 6.44). The Assess-Plan-Do-Review Cycle is the foundation of the graduated approach and key to meeting the needs of all children/young people identified as having any form of SEND.

Assess-Plan-Do-Review

Review Following the plan phase, key educational professionals, SENCO, parent/carer should meet to review the plan. The review should include: • Evidence of the impact of the plan, both in terms of the desired outcomes and the success criteria. • Everyone's views on progress and impact, including the pupil themselves. • A plan for next steps. Does there need to be another cycle of Assess-Plan-Do-Review or can the child/young person's needs now be met through Ordinarily Available Provision? Does a referral need to be made to another service? • A written record. If it is agreed that the child/young person would benefit from further support, then a second round of Assess-Plan-Do-Review should begin.	**Assess** Clear and comprehensive assessment of the pupil's needs by key educational professionals, SENCO, parents/ carer and child/young person, based on a combination of: • Discussions to gather the views and aspirations of the child/young person and their family. • Universal and targeted in-house assessments and observations carried out by a range of setting/school staff. • Child/young person's current attainment and progress. • Child/young person's previous attainment and progress. • Tracking of data and comparisons with national data. • Any relevant assessment information provided by external agencies e.g. Health, Educational Psychology, and Social Care.
Do In this phase the plan is put into action. The SEND Code of Practice makes it clear that it is the responsibility of setting/school staff to implement the plan on a day-to-day basis. This should be supported by the SENCO. The 'do' phase should involve teachers/support staff: • Delivering Ordinarily Available Provision to all pupils. • Implementing any adjustments, specific strategies, interventions, or approaches to teaching that have been identified as teacher-led within the 'plan' phase. • Managing any support staff who are supporting pupils with SEND within the class.	**Plan** Following the assessment phase, key educational professionals, SENCO, parent/carer and pupil, meet and agree a plan of action. This plan should be outcome focussed (e.g. improve, develop, and achieve) and should include: 1. SMART (specific, measurable, achievable, relevant, time-based) targets. 2. Details of the adjustments, equipment, support, and interventions that need to be put into place to fulfil the plan. 3. Details of who will be running the programme and when. 4. Details of success criteria, including how progress will be measured, when and by whom.

• Continually assessing and monitoring the child/young person's progress and making any necessary adjustments. • Communicating with support staff and any other teachers providing interventions to pupils and making plans for them to generalise their skills within lessons. • Communicating how things are going with the pupil, their family and the SENCO. Robust information should be gathered during this phase so that the following can be discussed at review. • How the intervention/adjustment has been implemented e.g. whether there have been any absences or delays.	5. A date for review, typically 6-8 weeks. The plan should be recorded and circulated to all relevant parties before it begins. Any training needs should be identified and addressed prior to the start of the 'do' phase.
Learn At the end of each cycle there should be an explicit pause built into the process within which, professionals, the family and the pupil reflect on what has been learnt (e.g. regarding their learning preferences, motivation, approach, strategies that support and those which do not). This learning should be explicitly incorporated into any subsequent cycles of Assess-Plan-Do-Review and into all Ordinarily Available Provision that the pupil receives. In this way, there should be a clear thread linking subsequent plans and approaches.	

Gathering and Responding to Children/Young People's Views

Children and young people with SEND have the same rights as non-disabled children and young people to participate in decisions and issues that affect them. The importance of the participation of children and young people with SEND is reflected in both the UN Convention on the Rights of the Child and in duties placed on the local authorities to support and involve children and young people in decision-making. Sadly, research suggests that despite this, children and young people with SEND in practice remain inactive in decisions about their education and future.

Why gather the views of children and young people with SEND?

Research suggests that listening to the views of children and young people with SEND is beneficial for several reasons. There are clear advantages including increased motivation, independence, perception of personal control and progress. Todd (2003) found that if children and young people are part of decision-making processes, they can provide appropriate information about their skills and abilities and offer their views about possible interventions, enhancing the likelihood of successful outcomes. The SEND Code of Practice makes it very clear that throughout the process of



assessment the child/young person's views should be sought. Every cycle is an opportunity to enable the children and young people to be involved in decision making. It is important to have regard to the views, wishes and feelings of the child/young person and for these views to be clearly incorporated into Assess-Plan-Do-Review Cycles. 'Planning should start with the individual and local authorities must have regard to the views, wishes and feelings of the child, child's parent/carer or young person, their aspirations, the outcomes they wish to seek and the support they need to achieve them.' (SEND Code of Practice, 2015, pg. 147).

Throughout the assessment/planning process staff should:
• Focus on the child/young person as an individual.
• Enable the child/young person to express their views wishes and feelings.
• Enable the child/young person to be part of the process.
• Ensure what is being discussed is easy for the child/young person to understand.
• Highlight the child/young person's strengths and capabilities.
• Elicit what they have done, what they are interested in and what outcomes they are seeking in the future.

Using a person-centred approach, involving the child/young person and their families, is key.

Things to consider
• The developmental stage of the child/young person;
• How they like to communicate and their level of understanding (e.g. are they able to share their views verbally or would they be best supported with a visual activity, such as picture sorting, or multiple-choice questions?)
• Whom they like to communicate with – is there a member of staff whom they feel most comfortable being honest with? Are parents/carers better placed to gather views at home?

What views to gather?
• Likes and dislikes (What subjects do they like / like less? What do they like to play with?)
• What support they value (What helps them in school? What helps them less?)
• Who supports them in the setting/school? (Who can they go to in setting/school that can help them? Who helps them feel safe or manage their feelings, who helps with their learning?)
• Long-term goals and aspirations (What would they like to be better at? What job would they like when they are older? What college courses / qualifications might they like to do?)

How can we do it?

A variety of methods can be used to gather children and young people's views. Some children and young people will be happy to talk and complete questionnaires, whereas others will need the practitioner to be more creative (e.g. children/young people with speech and language difficulties or children/young people with profound and multiple

For children and young people who may not communicate verbally or prefer using visual supports try non-verbal methods e.g.

• taking photos of all of their favourite parts of the classroom;
• card sorts to pick favourite subject / least favourite;
• line up photos or pictures in order from favourite to least favourite;
• projective techniques in which they might select a picture that shows how they feel e.g. the Blob School resources

For children and young people who are able to communicate verbally, use verbal or written methods (adults could scribe / pupil could use speech to text / they could write their own views if they wish). For example:

• Three wishes – if you could have three wishes about school, what would they be?
• Perfect week – describe your perfect week in detail.
• Good day/bad day – describe what happens on a good day (from the moment you get up).
• Relationship circle (who is important in your life?)
• Decision making profile.

Older children/young people can contribute to planning in well-structured meetings. Here are two ways of sharing views and representing planning of actions jointly with child/young person in a visual and inclusive way:

• MAP – a visual way of planning for child/young person with SEND.
• Planning Alternative Tomorrows with Hope (PATH) – a visual tool for longer term planning as a group.

The importance of enabling children/young people to have a voice in decisions regarding their life and learning is central to SEND policy. Pupil participation should be encouraged in all decision-making processes including setting individual targets, support plans and contributing to assessments and reviews. Schools and settings need to promote a culture of ensuring pupil voice across a range of issues and children and young people need to be taught and supported to contribute appropriately and effectively. It's up to the adults to ensure children and young people see the impact of their contribution, as many children and young people become frustrated when their voice appears to be ignored.

Pupil views within Annual Reviews

Annual Reviews can be an intimidating experience for some children and young people as they are sometimes asked to express their views in a room full of adults. It can be helpful to ensure that the child/young person's views are gathered well in advance of the meeting, perhaps over several weeks. The child/young person may prefer to be supported by a key adult or trusted member of staff in articulating their ideas.

The child/young person may also wish to be supported by their key adult in the review meeting, for moral support. Alternatively, the child/young person may wish to prepare a video or PowerPoint to share their views, or to ask a trusted adult to share their views on their behalf without the need to attend the review meeting in person. It may be helpful following the Annual Review for the child/young person to talk through the meeting with a supportive adult to answer queries or highlight the actions of the review and the next steps.

Working with parents/carers

Most SENCOs will know the importance of ensuring that families of children/young people with SEND are well informed about provision and approaches used in their setting/school. This can be done through clear communication systems that provide regular sharing of information between home and setting/school.

It is also important to gather the views of families of children/young people with SEND about what they would find helpful more broadly and then feeding families' views into the wider planning of support across the setting/school. For example, through the use of questionnaires and multi-agency coffee mornings, alongside sharing information about other SEND support services.
Best practice includes where SENCOs are able to support parents/carers to understand the whole of the SEND pathway and how their child/young person's needs are currently met on this pathway. It is also important that, where possible, the voices of children/young people with SEND are regularly and authentically gathered and used to inform development work and practice across the setting/school. Parents/carers of children/young people with SEND are used as experts to inform the package and approaches to support their child.

More support for parents/carers?

For information on services for children and young people with SEND please see the Tameside Local Offer, at: *www.tamesidelocaloffer.co.uk*

- Umbrella – The Tameside Parent Carer Forum, please visit their Facebook page for more information: *www.facebook.com/people/Tameside-Umbrella-Parent-Carer-Forum/61568513227370/*



- OKE is a local charity run by volunteers who are local parents of children who have special educational needs. They offer support, information and activities to families with children with special needs/disabilities: *www.ourkidseyes.org*
- Tameside SENDIASS provides impartial information, advice and support to children and young people (aged 0-25 years) with special educational needs and/or disabilities, and their parents and carers, on education matters and health and social care matters in relation to their education and learning: *www.togethertrust.org.uk/community-support/sendiass*

Leadership

Part of the role of SENCO is the leadership and management of staff involved in delivering SEND provision, often including Teaching Assistants (TAs). This includes considering deployment, and where TAs would be best placed to support the development and progress of children with SEND. Considering the balance of in-class support alongside structured check ins and targeted, small group interventions involves careful consideration of the systems and capacity in your setting, as well as the needs within the cohort of children or young people. Nasen provide a useful reflection tool to consider deployment within your setting here: *www.wholeschoolsend.org.uk/resources/teaching-assistant-deployment-review-guide*

SENCOs also need to consider how to monitor the effectiveness of support by measuring progress of children or young people. Similar monitoring tools to those used to identify need can be used to gauge the effectiveness of provision, following cycles of Assess-Plan-Do-Review and pre-and-post-intervention assessment. Monitoring the effectiveness of provision is useful to inform future deployment so staff can do more of what works.

Helpful Resources

We understand that the role of a SENCO is both rewarding and challenging. To help you in your role, we have compiled a range of useful documents and resources designed to support you in providing the best possible care for students with SEND. We hope you find these documents helpful in your day-to-day work and that you enjoy using the SENCO Toolkit, which is packed with practical guidance, strategies, and templates to assist you in managing SEND provision effectively.
Training Packages / SEND Needs / Monitoring – please go to: [Link Removed]

Useful websites/support

- ADD Information Services: *www.addiss.co.uk*
- ADHD Foundation: *www.adhdfoundation.org.uk*
- Anxiety UK: *www.anxietyuk.org.uk* 08444 775 774Child Bereavement UK - wide range of resources, support and advice for children, families and schools: 0800 02 888 40
- Childline: *www.childline.org.uk* 0800 1111
- Education Endowment Foundation: an independent charity dedicated to breaking the link between family income and educational achievement, by supporting schools, colleges, and early years settings to improve teaching and learning through better use of evidence. *www.educationendowmentfoundation.org.uk*
- Harmless – support, information, training and consultancy to people who self-harm, their friends, families and professionals: *www.harmless.org.uk*
- Young Minds – advice and guidance around young people's mental health: *www.youngminds.org.uk* 0808 802 5544 (Parents / Carers)
- Kidscape – charity to support those affected by bullying: *www.kidscape.org.uk*
- Kooth – online mental health charity for children and young people: www.kooth.com
- Nasen – is the National Association for Special Educational Needs – a charitable membership organisation that exists to support and champion those working with, and for, children and young people with SEND and learning differences. nasen do this by providing free resources and support for all members, leading targeted programmes and projects to deliver widespread improvements, offering a structured programme of professional development, accredited training and conferences as well as a package of SEND services throughout the UK and internationally: *www.nasen.org.uk*
- National Autistic Society – *www.autism.org.uk*
- OCD Action: *www.ocdaction.org.uk* 0845 390 6232
- Winston's Wish – practical support and guidance to families and professionals working with bereaved children and young people: *www.winstonswish.org.uk 08452 03 04 05*
- WellComm – is a toolkit for screening and supporting children's speech and language development from 6 months to 11 years: www.gl-assessment.co.uk/products/wellcomm
- Samaritans – telephone and email support for anyone who is worried, upset, or suicidal: *www.samaritans.org* 08457 909090

Requests/Referrals/Forms/Templates

For up-to-date requests/referrals/forms/templates please go to: *www.tamesidelocaloffer.co.uk/requests-referrals-forms-templates*



Person Centred Planning Tools: *www.helensandersonassociates.com/person-centered-thinking-tools*

Early Years Inclusion Funding (for children in receipt of FEF)

The Early Years Inclusion Funding is part of the graduated response; its aim is to support early intervention through promoting inclusion and equal access for children with any additional needs.

All children may experience challenges with their learning at some point and for most children, these difficulties can be overcome with support from Early Years practitioners and parents/carers. However, children with additional needs may need additional or different help to be able to learn.

Children with SEND who are eligible for 2, 3 and 4 year old Free Entitlement Funding (FEF) can access Inclusion Funding through their early years setting putting in an application form. Inclusion Funding is only for Tameside settings.

If a child needs a more intensive level of specialist help that cannot be met from the resources already in place (including Inclusion Funding) then early years settings may then wish to apply for an Education, Health and Care (EHC) needs assessment. A child does not have to be in receipt of Inclusion Funding in order for settings to apply for an EHC needs assessment, however having Inclusion Funding does support the graduated approach.

Inclusion Funding Meetings: Take place every half term; early years settings must put their application forms in one week prior to the meeting taking place in order for the funding to be discussed.

For more information please see: [Link Removed]

Contact: ***inclusionfunding@tameside.gov.uk***

Educational, Health, Care Plans (EHCP)

Settings and schools have a duty to meet the needs of all pupils and to follow a graduated response to identification and meeting Special Educational Needs. For a small number of children with a higher level of need children and young people the setting/school may need further guidance and resource from the local authority in order to meet their specific individual needs. In these cases, the setting/school have a duty of care to apply for an Education, Health, Care (EHC) assessment and the local authority has a duty to respond within legal timeframes. The Education Health and Care Plan (EHCP) is a legal document which sets out a description of a child/young person's special educational, health and care needs and what provision (what will be done) to meet their needs to enable the child/young person to make progress. It is crucial that the family and child/young person are fully informed of the Education,



Health, Care needs assessment process and supported through it. Parents/carers can report that the process can feel like a battle, sometimes with professionals and panels contradicting each other, which can cause understandable frustration.

It is the duty of all SEND professionals to have a robust, working knowledge of processes locally and nationally so that parents can be supported through the process amicably.
The video below explains what an EHCP is:
www.youtube.com/watch?v=axMjmY1-7WU

Who requires an Education Health and Care Plan?
Generally, only a very small number of children and young people with complex and severe needs, who require very high levels of individualised support, are issued with an EHCP. All schools have a budget, called the notional budget, that is available to support children and young people with SEND. Most children and young people will access help in their educational placement through Ordinarily Available Provision and in schools, school SEN Support.

Where provision cannot reasonably be provided through services and resources that are normally available, it may be necessary to request an EHC needs assessment. Schools and settings typically request EHC needs assessments, but parents and professionals can do too. Young people aged 16 and over have the right to request an EHC needs assessment independently. Settings, schools and colleges and other bodies can also request assessments, but they can only do this with the knowledge and agreement of the young person and/or person with parental responsibility. The child/young person has to have a special educational need that is severe and/or complex and which has persisted despite the setting/school following the graduated response; including taking all expected steps and using the highest level of its resources to identify, assess and meet the need. The Local Authority (LA) SEND panel also considers whether or not the difficulties are having an effect on the child/young person's emotional wellbeing. The Local Offer in Tameside will enable families and practitioners to find out what is available locally and further afield and should help everyone to make the most of many services and opportunities that are available, without the need to have an EHCP.

The EHC Assessment Process

The Referral

This is the first part of the process in making a request for an EHC needs assessment and is a key document that the local authority will consider when making decisions. It is important for the referral to identify outcomes for the child/young person and any reports should highlight these outcomes. The decision to draw up an EHCP will depend on the severity of a child/young person's needs and if any resources are identified that need adding to those already available. The referral should be accompanied by evidence of provision made for an individual child/young person from the SEN Notional Funding over three school terms (including the previous, current and next planned school term). This can take the form of a costed provision map. If a child/young person has support in small groups, please ensure that you divide the cost between the number of children/young people accessing the group.

The 'All About Me' for Tameside documents completed by parents and children/young person should be included. It should be evident that the setting/school have been working on the aspirations highlighted by parents/carers and child/young person. Settings/schools should make every effort to identify strengths in all areas as well as difficulties. It is also helpful to detail what has worked in the last two/three cycles of Assess-Plan-Do-Review and what additionality is needed to maintain or enhance the child/young person's rate of progress. It is really important to include any attainment data/tracking information in the area of need/s identified so it is clear. Lastly, if there is any advice from external professionals, please ensure that this is incorporated into any paperwork, e.g. cycles of Assess-Plan-Do-Review, provision maps etc and, where possible, that this input is reviewed.

The Timescales

Timeline	Action
Week 0	Request for assessment is made to the Local Authority (LA) by a setting/school/ individual with parental responsibility or other professional e.g. Health and Social Care.
Week 0-6	The LA has 6 weeks to make a decision as to whether an assessment should commence. If the LA decide not to proceed with an assessment, settings/schools and parents/carers will be notified in writing with information about the LA decision and parents/carers right to appeal. A follow-up meeting to support setting/schools and parents/carers with next steps following a 'no to assess' decision is available upon request.
Week 6	If yes to assess, the EHC assessment starts. The LA must gather advice and information as to: (1) the child/young person's needs; (2) the provision needed to support those needs; (3) the outcomes that would be expected to result from the provision being put in place. The LA must seek: (a) advice and information from the child's parents/carers or the young person; (b) educational advice and information from the head teacher or principal of the setting, school, post-16 or other institution that the child or young person is attending (or other appropriate person where this is not available); (c) medical advice and information from a health care professional identified by the responsible commissioning body; (d) psychological advice and information from an Educational Psychologist; (e) advice and information in relation to social care; (f) advice and information from any other person the local authority thinks is appropriate; (g) where the child/young person is in or beyond Year 9, advice and information in relation to provision to assist the child/young person in preparation for adulthood and independent living; (h) advice and information from any person the child's parents/carers and/or young person reasonably requests that the LA seek advice from. The SEND Code of Practice states that the advice should be clear, accessible and specific (pg. 157, 9.51). There is only one exception to seeking new advice which is where it is agreed, in relation to a particular advice, that existing information and advice is "sufficient" for the purposes of the assessment. The judgement that an individual report is sufficient must be made by all of the following: (1) the LA; (2) the original author of that report, and; (3) the parents/carers or young person. If any one of the above disagrees or is no longer available, then the LA must seek new advice. A LA must not make a "blanket" decision that all existing information and advice is sufficient for a child/young person, but must

	look at each piece of advice and request consent from the author and the parents/carers or young person. The SEND Code of Practice (pg. 155, 9.47) advises that parents/carers and young people should be supported to make an informed decision.
Week 14	A draft EHCP needs to have been produced and sent to the parents/carers or young person by this time. At the same time, the LA must advise the parents/carers or child/young person where they can find information about the settings/schools and colleges that are available for the child/young person to attend. The parents/carers or child/young person then has at least 15 calendar days after receipt of the draft plan in which to: 1. make representations to the LA about the contents of the draft EHC plan; 2. ask for a meeting with an LA SEN officer to discuss the draft EHC plan; 3. tell the LA the type of setting/school/college (mainstream or special) and the actual setting/school/college they would like named in the final EHC plan.
Week 16	If the LA decides not to issue an EHC plan, having carried out the EHC needs assessment, they must so notify the parent/carer/young person by this date. The parent/carer/young person will have a right of appeal to the Special Educational Needs and Disability Tribunal against the decision to refuse to issue a plan. Where an LA has issued an EHC Plan, the LA must consult with the setting/school/college the parents/carers or child/young person has requested. Setting/school/college should respond to the LA within 15 days (SEND Code paragraph pg. 173, 9.83).
Week 20	Final EHC plan issued by the LA. This must be sent to the parent/carer/child/young person; the governing body, proprietor or principal of any setting/school, other institution or provider named in the EHC Plan and the responsible commissioning body.

Annual Reviews of Education, Health and Care Plans

Overview

The Annual Review is the statutory process by which a child/young person's progress against the outcomes set out in the EHC Plan are reviewed in order to ensure that the provision and targets are up to date and relevant. The review also helps to consider whether the EHC Plan is still necessary to support the child/young person's needs in the future, and to plan the outcomes for the coming year, setting new outcomes if necessary.

Statutory requirements

• An Annual Review must be undertaken in partnership with the child and their parent/carer, or the young person (if over 16), and must take account of their views, wishes and feelings, including their right to request a Personal Budget.
• A Personal Budget is the amount of money identified by the LA to deliver aspects of provision set out in an EHC Plan where the parent/carer or young person (over 16 years of age) is involved in securing that provision. The funds may be held and managed either by the LA, setting/school/college; the family; a third-party arrangement; or a combination of the aforementioned.
• The Annual Review process must be completed on or before the anniversary of when the EHC Plan was first issued or the anniversary of the last review.
• In the Early Years an EHC Plan should be reviewed every 6 months up to the child's 5th birthday (SEND Code of Practice, pg. 198, 9.178)

The Annual Review Meeting

Before the meeting

• The host (usually the SENCO in the educational setting) will contact relevant professionals to gather up-to-date reports and must contact the parent/carer and child/young person to invite them to contribute their views, wishes and feelings.
• The host must send an invitation to attendees at least 2 weeks prior to the meeting date and circulate copies of the gathered reports and views.
• The host should arrange a suitable meeting place, where confidential conversations can be held without disruption.

During the meeting

• The aim of the process is to review the child/young person's progress towards achieving outcomes and must cover the following:
- Are the outcomes and objectives still appropriate? Agree new outcomes or short-term objectives if required.
- Is the educational provision (including any health and social care provision) and the arrangements for delivering still appropriate?
- Have the aspirations of the child/young person changed? From Year 9 onwards, Annual Reviews must include an explicit focus on the child/young person's

aspirations for the future in relation to preparing for adulthood outcomes (paid employment, good health, independent living and community inclusion/participation).
- Is a Personal Budget required?

Following the meeting
• The host must prepare a report including any recommendations for amendments to the EHC Plan, documenting differences of opinion, if necessary, rather than a general consensus. This must be circulated to those invited and the LA within 2 weeks of the meeting.
• The LA will consider the review documentation and decide whether the EHC Plan should either remain unchanged; be amended or be ceased. The LA must inform the parent/carer or young person of this decision within 4 weeks from the review date and should be no later than the anniversary of either when the EHC Plan was first issued or the previous Annual Review.

Special review meetings
• The Year 5 Annual Review helps to inform decisions about the transfer from primary to high school and is an opportunity to make clear recommendations about the type of provision a child/young person needs on transition to high school. The Year 6 review is then an opportunity to make sure these arrangements are working or consider alternative/additional planning.
• The Year 11 and Year 13 Annual Reviews will be held shortly before a young person leaves school. There will need to be a focus on the support needed by the young person in preparing for adulthood considering paid employment, independent living, good health and community inclusion/participation.
• In some cases, it may be appropriate to call an Annual Review ahead of the usual timeframe.
This would typically be when there has been a significant change in circumstances, where a significant change is anticipated, or where it is felt that the support outlined in the EHC Plan may no longer be needed

SEND Support Services
There are a wide range of teams available across Tameside who can support settings/schools to meet the needs of children/young people with a wide range of SEND. Some of these services provide a universal support offer to settings/schools, some are traded and need to be 'brought in' by settings/school and some require settings/schools to follow a pathway or procedure in order for a referral to be made.

These include:

- Child and Adolescent Mental Health Service (CAMHS) – offer specialist services to children and young people who are experiencing mental health difficulties: *www.penninecare.nhs.uk/tamesidecamhs*
- Integrated Service for Children with Additional Needs (ISCAN) – is an integrated service made up of Speech and Language Therapy, Physiotherapy, Occupational Therapy, Nutrition & Dietetics and Complex Needs Nursing. ISCAN is a community service and they work from a range of sites across Tameside and Glossop. They offer assessments and treatment in a variety of places including local clinics, nurseries, special and mainstream schools and young people's homes: *www.tamesidechildrenandyoungpeople.nhs.uk/about-us/integrated-service-children-additional-needs-iscan*
- Tameside Educational Psychology Service – work together with families, educational settings and other services to support children and young people up to the age of 25. They support children and young people when they may be finding some aspects of their educational provision difficult to manage: *www.tameside.gov.uk/Education/Educational-Psychology-Service*
- Tameside Specialist Outreach Support Service (TSOSS) – is a specialist team of multi skilled professionals, including teachers and specialist support workers. The service helps schools and settings to meet the needs of vulnerable children and young people and those with SEND. The service is available to Early Years and school-aged children and young people attending a mainstream setting within Tameside: *www.tamesidelocaloffer.co.uk/education/graduated-approach/pupil-support-service*



Communication and Interaction

Key Stage One

SKILL WHAT TO DO FIRST *Identifying and supporting need* Social Whole School:		ASKING FOR HELP *Starting Assess, Plan, Do, Review*	WHEN MORE HELP IS NEEDED *Targeted support*
Communication Schools to have access to a robust, consistent symbol-based system to support all children and Pupils with social provide communication *communication* opportunities. Examples of these *needs can often have* include Boardmaker, Twinkl and *sensory processing* Widget (cost included to *differences – please* purchase) also see the Follow ISCAN Speech and Sensory and/or Language Therapy team's Physical Needs Language and Communication *section* Standard for Reception aged children: Language and Communication Standard [Link Removed]		Provide a personalised curriculum allowing flexibility in the organisation of the learning environment and the school day. For example, you could offer access to a low stimulus, distraction-free base either within or outside of the classroom for certain tasks. Adapt group and individual activities in line with the individual's sensory needs and communication and interaction profile. Consider carrying out targeted interventions in individual or small groups to support interaction and communication:	Provide a more personalised curriculum allowing increased flexibility in the organisation of the learning environment and the school day, (e.g. offering access to additional adult support to enable the child to participate in the less structured parts of the school day such as break time, and provide access to a quiet, distraction-free place in school if a child feels anxious, ensuring access to a safe and trusted key person). Regular staff briefings, linking in with families where possible, centred around the child's strengths and support needs,

	Access Mainstream Schools Forum for general advice and strategies *tamesidelocaloffer.co.uk/wp-content/uploads/2025/12/School-forum.pdf.* Access Early Years Forum for general advice and strategies (for reception children). *tamesidelocaloffer.co.uk/wp-content/uploads/2025/12/Early-Years-Forum-Jan-2024.pdf.* School staff to refer to specialist services (ISCAN SALT) for any immediate concerns e.g. breakdown in placements, risk of exclusion, complex safeguarding issues. Classroom: Establish consistent and predictable routines. Refer to advice and visual resources to support routines and transitions as a full class approach:	Attention Autism an intervention model which aims to develop natural and spontaneous communication through the use of visually based and highly motivating activities. *attentionautism.co.uk).* Blacksheep Press resources BSP, speech & language resources for schools, therapists & parents *(blacksheeppress.co.uk)* Resources around building ~~inferencing, situational and social awareness.~~ TalkAbout a programme aimed at developing self- esteem, as well as social and friendship skills. *winslowresources.com/specific-needs/the-talkabout-series.html.*	particularly if multiple staff members are involved in support (e.g. sharing and updating the One Page Profile, discussing therapy plans, ensuring training completed). Multi-agency assessment to identify persistent and complex needs (e.g. access advice from external services such as TSOSS, Children's Speech and Language Therapy :: Tameside Children and Young People and the Tameside Educational Psychology Service), to tailor programmes and activities to support their communication development. Multi-agency assessment to highlight any onward referrals required (e.g., diagnostic multi-disciplinary teams such as MAAT, Paediatrician) *tamesidechildrenandyoung*

	Using visual supports such as first-then boards and visual schedules. *tamesidelocaloffer.co.uk/wp-content/uploads/2025/12/using-visual-timetables-schedules.pdf.* Transition cues (verbal warnings, transition songs, timers, traffic lights). *tamesidelocaloffer.co.uk/wp-content/uploads/2025/12/Supporting-Transitions.pdf.* Using start / finished task boxes, task lists. Ensure expectations of tasks are clear. Prepare for upcoming changes to routine, supported by visual aids (e.g., symbols, photos, drawing) Encourage a total communication approach and accept all forms of communication (e.g., spoken, gesture, signs, written word,	Lego Therapy is an intervention to help improve social competence while conducting fun, naturally rewarding Lego clubs. Social Stories – can be created to provide children with a concrete way to prepare for future situations, or better understand social situations. It is important that these follow the official and recommended format. Consider consultation with ISCAN SLT for further support in generating these. (tamesidechildrenandyoungpeople.nhs.uk/our-services/childrens-salt). Comic Strip Conversations: can be used as a visual teaching tool to explore situations and others perspectives: *tamesidelocaloffer.co.uk/wp-content/uploads/2025/12/comic-strip-conversations.pdf.*	School staff deliver and support daily, individualised targeted interventions, based on support and guidance from external services. Certain interventions may require specialist training from the ISCAN Speech and Language Therapy Team. Use of a robust, bespoke high or low AAC system, embedded within all routine and learning activities, accessible at all times to the student with specialist training, targets and support from the ISCAN Speech and Language Therapy Team. ISCAN SLT may complete onward

	Alternative and Augmentative Communication, AAC). Recognise that 'good listening' and 'good looking' may look different for everyone. Don't expect eye contact or sitting still. Sensory or movement breaks are incorporated into lessons. Try to avoid the use of non-literal language (e.g. idioms and sarcasm) and explain any abstract concepts in as concrete a way as possible (e.g. with pictures or objects). Refer to advice sheets and resources for interaction and communication strategies and embed into all classroom activities. Visuals available for:	Zones of Regulation is an intervention that supports the development of self-regulation and emotional control. Speech and Language offer training on Zones of Regulation. *zonesofregulation.com/index.html*. The Incredible Five Point Scale – a tool to explore emotional regulation and tools to support this. Language for Thinking an approach aimed at developing the verbal reasoning and thinking skills of children aged 4-11 through drawings, written scenarios, and questions. *thinkingtalking.co.uk/language-for-thinking*. Language for Behaviour and Emotions - practical, interactive resource to be used individually or in groups to support language,	referral for external specialist services (e.g., The ACE Centre). PECS (Picture Exchange) *(pecs-unitedkingdom.com/pecs)*.

	Creating communication opportunities: *youtube. com/watch ?v=8eaKqRvvUrw* Activity specific communication boards for aided language modelling: *tamesidelocaloffer.co. uk/wp-content/uploads/2025/12/ Communication-boards-for-settings.pdf.* Visuals pack – symbols and photos for aspects of the routine and areas in school: *tamesidechildrenandyoungpeople. nhs. uk/application/files/4616/7171/6 843/Visual_pack.pdf.* Helping children interact: t*amesidelocaloffer.co. uk/wp-content/uploads/2025/12/ helping-children-interact.pdf.* Individual Pupil Consult with key people in the child's life (e.g., parents, carers,	social and emotional development, (can be bought on Amazon). Use of personalised visuals (e.g. objects of reference, photos and symbols, now/next, choice boards, activity boards, traffic lights, sand timers). Consider seeking further advice from the SALT team regarding personalisation and implementation of visuals. For all students requiring access to alternative communication systems, referral to ISCAN Speech and Language Therapy is required. Additional resources and support for aided language modelling, choice boards and core word teaching are available on: The Ace Centre: Resources | Ace Centre *(acecentre.org.uk/resources)*	

	previous settings, professionals currently involved) to understand individual current communication skills, preferences, strengths and challenges. If struggling to embed and apply strategies, or more personalised, bespoke communication systems required, consider accessing further help from SALT team. Consider referral to ISCAN Speech and Language therapy for further support: Children's Speech and Language Therapy :: Tameside Children and Young People *tamesidechildrenandyoungpeople.nhs.uk/our-services/childrens-salt.*	AssistiveWare: AAC Resources - AssistiveWare *(assistiveware.com/resources)* Use of a Sensory Checklist – and environmental adaptations to minimise impact of sensory distractions and sensory processing differences (e.g. opportunities to work in quieter spaces with reduced distractions when completing focused activities, access to tailored sensory activities or resources). *tamesidelocaloffer.co.uk/education/sensory-toolkit.* Consider referral to ISCAN Speech and Language therapy for further support and advice around targeted resources Children's Speech and Language Therapy :: Tameside Children and Young	



		People *(tamesidechildrenandyoungpeopl.nhs.uk/our-services/childrens-salt).* Consider referral to EPS for developing a personalised support plan. *(tamesidelocaloffer.co.uk/wp-content/uploads/2025/12/School- orum-2.pdf).*	
Expressive Language	<u>Whole School:</u> Access to a robust, consistent symbol-based system to support all children and provide communication opportunities. Examples of these include Boardmaker, Twinkl and Widget (cost included to purchase) Follow ISCAN Speech and Language Therapy team's Language and Communication Standard for Reception aged children: Language and Commun~~ication Standar~~d *(*	Continue to embed Communication Friendly Classroom strategies Embed more targeted approaches to the whole classroom and support carry over to curriculum-based activities within the classroom. Access Supporting Language in the Primary Classroom Training delivered by EP team.	



	tamesidechildrenandyoungpeople .nhs. uk/application/files/9516/7589/2 164/updated_standard. pdf) Access Mainstream Schools Forum for general advice and strategies. *(tamesidelocaloffer.co. uk/wp-content/uploads/2025/12/ School-forum-1.pdf).* Access Early Years Forum for general advice and strategies (for reception children). *(tamesidelocaloffer.co. uk/wp-content/uploads/2025/12/ Early-Years-Forum-Jan-2024-1. pdf).* Refer to specialist services (ISCAN SALT) for any immediate concerns e.g. Breakdown in placements, risk of exclusion, complex safeguarding issues. Classroom	Consider carrying out targeted interventions in small groups to support expressive language and communication. Examples of these may include: Using Narratives: Narrative Training 2023 *(tamesidetchildrenandyoungpeople. nhs.uk/our-services/childrens-salt).* Developing Spoken Vocabulary: Vocabulary training Part 1 *(tamesidechildrenandyoungpeople. nhs.uk/our-services/childrens-salt).* Vocabulary training part 2 *(tamesidechildrenandyoungpeople.nhs.uk/our-services/childrens-salt).* Colourful Semantics to develop sentence structure: *(tamesidechildrenandyoungpeople. nhs.uk/our-services/childrens-salt).*	

	Create a communication friendly classroom offering opportunities to continue to develop children's expressive language, vocabulary, grammar and participation in learning and social activities. Creating a communication supportive environment: Early years - Speech and Language UK: Changing young lives. *(speechandlanguage.org.uk/educators-and-professionals/resource-library-for-educators/creating-a-communication-supportive-environment-early-years).* Creating a communication supportive environment: Primary - Speech and Language UK: Changing young lives *(speechandlanguage.org.uk/educators-and-professionals/resource-library-for-educators/creating-a-communication-supportive-environment-primary*	Introduction to Alternative and Augmentative Communication (AAC) (part 1): *(tamesidechildrenandyoungpeople. nhs.uk/our-services/childrens-salt).* Modelling and demo of AAC (part 2): *(tamesidechildrenandyoungpeople. nhs.uk/our-services/childrens-salt).* Consider purchasing a targeted evidence-based language intervention to support use of language e.g. Wellcomm screening toolkit and intervention (The Big Book of Ideas). *Age ranges available 6 months – 6 years (Early Years) and 6 -11 years (Primary)* WellComm - GL Assessment *(tamesidechildrenandyoungpeople. nhs.uk/our-services/childrens-salt).* Word Aware *(supporting the understanding of new*	

	Access Language Friendly Classrooms Training delivered by ISCAN SALT team: ISCAN Language Friendly Classrooms training A Language Friendly Classroom Handout *(youtu.be/4MV_6wD1eAM?si=hhb_SwYNbC_G7trX)*. Access Supporting Language in the Primary Classroom Training delivered by EP team. Encourage a total communication approach and accept all forms of communication (e.g., spoken, gesture, signs, written word, Alternative and Augmentative Communication, AAC). Refer to advice sheets and visual support resources for expressive support and embed into all	*vocabulary*) Word Aware – Thinking Talking *(tamesidechildren andyoungpeople. nhs. uk/our-services/childrens-salt)*. Blacksheep Press resources BSP, speech & language resources for schools, therapists & parents *(tamesidechildrenandyoungpeople. nhs.uk/our-services/childrens-salt)*. Talk boost Key stage 1/ Key stage 2 (speechandlanguage.org. uk/educators-and-professionals/programmes-for-nurseries-and-schools/talk-boost/talk-boost-ks2). Nuffield Early Language Intervention (NELI) *(speechandlanguage.org. uk/what-works/nuffield-early-language-intervention-neli)*. Language for Thinking an approach aimed at developing the verbal reasoning and thinking skills of children aged 4-11 through	



	classroom activities. Visuals available for: Creating opportunities to communicate *(youtube.com/watch?v=8eaKqRvvUrw)*. Activity specific communication boards for aided language modelling. *(tamesidelocaloffer.co.uk/wp-content/uploads/2025/12/Communication-boards-for-settings-1.pdf)*. Supporting vocabulary knowledge and vocabulary checklist: *(tamesidelocaloffer.co.uk/wp-content/uploads/2025/12/Communication-boards-for-settings-1.pdf)*. Supporting narrative skills: *(tamesidelocaloffer.co.uk/wp-content/uploads/2025/12/Communication-boards-for-settings-1.pdf)*.	drawings, written scenarios, and questions. *Thinkingtalking.co.uk/language-for-thinking)*. Tales Toolkit An online package of resources to develop children's skills in story development and sequencing in small groups. *(thinkingtalking.co.uk/language-for-thinking)*. Victoria Joffe Narrative Intervention programme – This resource helps support the understanding and telling of stories in secondary school students Colourful Stories (ELKLAN) is a visual support strategy which helps children to learn about the structure of stories and to become more confident about telling and writing stories. Colourful Stories encourages oral-narrative skills and introduces written words only when the child is confident about	



	Individual Pupil If struggling to embed and apply strategies, or more personalised, bespoke communication systems required, consider accessing further help from SALT team. Consider referral to ISCAN Speech and Language therapy for further support: Children's Speech and Language Therapy :: Tameside Children and Young People *(tamesidechildrenandyoungpeople.nhs.uk/our-services/childrens-salt).*	how to structure and tell a story orally. *(thinkingtalking.co.uk/language-for-thinking).*	



		Access Mainstream Schools Forum for further, specific advice and strategies. *(tamesidelocaloffer.co.uk/wp-content/uploads/2025/12/School-forum-2.pdf).* Access Early Years Forum for further, specific advice and strategies (for reception children). *(tamesidelocaloffer.co.uk/wp-content/uploads/2025/12/Early-Years-Forum-Jan-2024-2.pdf).* Consider referral to ISCAN Speech and Language therapy for further support and advice around targeted resources Children's Speech and Langua~~ge Therapy~~ :: Tameside Children and Young People *(tamesidechildrenandyoungpeople.nhs.uk/our-services/childrens-salt).* Consult with/refer to specialist services (ISCAN SALT, SEND, TSOSS) for any immediate	



		concerns e.g. Breakdown in placements, risk of exclusion, complex safeguarding issues. Developmental Language Disorder (DLD) When children experience persistent difficulties with using and/or understanding language with no known cause, this is referred to as DLD. This can affect up to 2 in every 30 children and often impacts on children's learning and overall communication skills from starting in childhood and persisting into adulthood. *(tamesidelocaloffer.co.uk/wp-content/uploads/2025/12/Fact-Sheet-RADLD-1.pdf)*. Support children with DLD by working alongside the Speech and Language therapy team including following advice and strategies and	



		carrying out advised targeted interventions. Refer to the DLD website for further guidance: *(radld.org).* *(speechandlanguage.org.uk/help-for-families/developmental-language-disorder-awareness).*	
Expressive Language - stammering	Classroom Create a communication friendly classroom (see above) Individual Pupil Stammering can be very common in children ages 3-5 years, particularly when they are developing their language skills. Typically, development stammering will naturally resolve within 12 months. For some children, stammering is something that may persist into later childhood and adulthood. Ensure the following strategies are in place and that all teaching	Create a communication friendly classroom (see above). Ensure the following strategies are in place and that all teaching staff /adults within the school setting are aware of how to support stammering. *(tamesidelocaloffer.co.uk/wp-content/uploads/2025/12/Stammering-Advice-for-Teaching-Staff-1.pdf).* School to complete a one-page profile on communication styles to share with all members of staff.	Create a communication friendly classroom (see above) Ensure the following strategies are in place and that all teaching staff/adults within the school setting are aware of how to support stammering. *(tamesidelocaloffer.co.uk/wp-content/uploads/2025/12/Stammering-Advice-for-Teaching-Staff-1.pdf).* Seek support from websites such as: www.stamma.org *(stamma.org).* www.actionforstammeringchildre

	staff /adults within the school setting are aware of how to support stammering *(tamesidelocaloffer.co.uk/wp-content/uploads/2025/12/Stammering-Advice-for-Teachin--Staff-1.pdf).* Seek support from websites such as www.stamma.org *(stamma.org).* www.actionforstammeringchildren.org *(actionforstammeringchildren.org)* Consider referral to Speech and Language therapy if stammer persists, The child/ young people becomes aware/ concerned about it/ family are concerned about it Children's Speech and Language ~~Therapy :: Tameside Children and Young People (~~	Seek support from websites such as www.stamma.org *(stamma.org).* *(actionforstammeringchildren.org)* Education are also able to sign up to the Stammer awareness toolkit. Consider setting up small group work around building confidence and resilience skills if appropriate to child/young person. Refer to Speech and Language therapy for further advice/support around stammering Children's Speech and Language Therapy :: Tameside Children and Young People *(tamesidechildrenandyoungpeople.nhs.uk/our-services/childrens-salt).*	n.org *(actionforstammeringchildren.org).* Consider setting up small group work around building confidence and resilience skills if appropriate to child/young person. Refer to Speech and Language therapy for further advice/support around stammering Children's Speech and Language Therapy :: Tameside Children and Young People *(tamesidechildrenandyoungpeople.nhs.uk/our-services/childrens-salt).* Consider referral to Mental health services to support child/young person with significant anxiety.

	tamesidechildrenandyoungpeople.nhs.uk/our-services/childrens-salt).		
Expressive Language – speech sounds	Whole School Consult Royal College of Speech and Language Therapy website for information on which age we would expect sounds to be developed by Clinical information on speech sound disorders | RCSLT *(rcslt.org/speech-and-language-therapy/clinical-information/speech-sound-disorders/#section-2).* Classroom Refer to advice sheets for working ~~on speech~~ sounds and use them in 1:1/small group activities. Video advice on producing /k/, /g/, /t/, /d/, /s/ blends is available here: Training :: Tameside Children and Young People *(*	Consult Royal College of Speech and Language Therapy website for information on which age we would expect sounds to be developed by Clinical information on speech sound disorders | RCSLT *(rcslt.org/speech-and-language-therapy/clinical-information/speech-sound-disorders/#section-2).* Refer to advice sheets for working on speech sounds and use them in 1:1/small group activities. Advice sheets available for: Speech Sound Clusters Cluster Leaflet not group.pdf *(tamesidelocaloffer.co.uk/wp-content/uploads/2026/03/Cluster-Leaflet-not-group.pdf).*	Consult Royal College of Speech and Language Therapy website for information on which age we would expect sounds to be developed by Clinical information on speech sound disorders | RCSLT *(rcslt.org/speech-and-language-therapy/clinical-information/speech-sound-disorders/#section-2).* Refer to advice sheets for working on speech sounds and use them in 1:1/small group activities. Advice sheets available for: Speech Sound Clusters Cluster Leaflet not group.pdf

	tamesidechildrenandyoungpeople.nhsuk/getting-help/training). For a general overview on how to support early speech sounds *youtu.be/yNQN4sWaUsI?si=F-AY-lu-49fdkZh5* (Great Western Hospitals NHS Foundation Trust) Individual Pupil Enquire whether the child has had a hearing test/check whether there are concerns regarding hearing and refer to Audiology as appropriate Paediatric Audiology :: Tameside ~~and Glossop Integrated Care (tamesideandglossopicft.nhs.uk/services/audiology/paediatric-audiology).~~ Refer to Speech and Language therapy for further advice/support around speech sounds Children's Speech and Language Therapy :: Tameside	Fronting/Backing (/t/,/d/,/k/,/g/) F&B not group.pdf *(tamesidelocaloffer.co.uk/wp-content/uploads/2026/03/FB-not-group.pdf).* Final Consonant Deletion FCD not group.pdf *(tamesidelocaloffer.co.~~uk/wp-co~~ntent/uploads/2026/03/FCD-not-group.pdf).* Practicing Speech Sounds in Words practicing speech sounds in words.pdf *(tamesidelocaloffer.co.uk/wp-content/uploads/2026/03/practicing-speech-sounds-in-words.pdf).* Speech Sound Awareness Phonological Awareness.pdf *(tamesidelocaloffer.co.uk/wp-content/uploads/2026/03/Phonological-Awareness.pdf).*	*tamesidelocaloffer.co.uk/wp-content/uploads/2026/03/Cluster-Leaflet-not-group.pdf).* Fronting/Backing (/t/,/d/,/k/,/g/) ~~F&B not group.pdf~~ *(tamesidelocaloffer.co.uk/wp-content/uploads/2026/03/FB-not-group.pdf).* Final Consonant Deletion FCD not group.pdf *(tamesidelocaloffer.co.~~uk/wp-content~~/uploads/2026/03/FCD-not-group.pdf).* Practicing Speech Sounds in Words practicing speech sounds in words.pdf *(tamesidelocaloffer.co.uk/wp-content/uploads/2026/03/practic~~ing-speech-sounds-in-words.pdf).~~* Speech Sound Awareness Phonological Awareness.pdf *(tamesidelocaloffer.co.uk/wp-content/uploads/2026/03/Phonological-Awareness.pdf).*

	Children and Young People *(tamesidechildrenandyoungpeople.nhs.uk/our-services/childrens-salt).*	Video advice on producing /k/, /g/, /t/, /d/, /s/ blends is available here: Training :: Tameside Children and Young People *(tamesidechildrenandyoungpeople.nhs.uk/getting-help/training).* As in Phonics, when working on speech sounds use a physical prompt and/or symbol to remind the child of what the target sound is. Carry out interventions as directed by SALT. For a general overview on how to support early speech sounds *youtu.be/yNQN4sWaUsI?si=F-AY-lu-49fdkZh5* (Great Western Hospitals NHS Foundation Trust) Enquire whether the child has had a hearing test/check whether there are concerns regarding hearing	Video advice on producing /k/, /g/, /t/, /d/, /s/ blends is available here: Training :: Tameside Children and Young People *(tamesidechildrenandyoungpeople.nhs.uk/getting-help/training).* Carry out interventions as directed by SALT. If Augmentative and Augmentative Communication is required to support communication liaise with Speech and Language Therapy through referral or contact The ACE Centre Ace Centre | Charity specialising in AAC & Assistive Technology *(acecentre.org.uk).* For a general overview on how to support early speech sounds *youtu.be/yNQN4sWaUsI?si=F-*



		and refer to Audiology as appropriate Paediatric Audiology :: Tameside and Glossop Integrated Care *(tamesideandglossopicft.nhs.uk/services/audiology/paediatric-audiology)*. Refer to Speech and Language therapy for further advice/support around speech sounds Children's Speech and Language Therapy :: Tameside Children and Young People *(tamesidechildrenandyoungpeople.nhs.uk/our-services/childrens-salt)*.	*AY-lu-49fdkZh5* (Great Western Hospitals NHS Foundation Trust) Enquire whether the child has had a hearing test/check whether there are concerns regarding hearing and refer to Audiology as appropriate Paediatric Audiology :: Tameside and Glossop Integrated Care *(tamesideandglossopicft.nhs.uk/services/audiology/paediatric-audiology)*. A referral to ENT may also be appropriate if there is a 'blocked nose' quality to the speech or if you are hearing a 'snort' rather than the target sound. Refer to Speech and Language therapy for further advice/support around speech sounds Children's Speech and Language Therapy :: Tameside



			Children and Young People *(tamesidechildrenandyoungpeople.nhs.uk/our-services/childrens-salt).*
Understanding of Language	Whole School Access Language Friendly Classrooms Training delivered by ISCAN SALT team ISCAN Language Friendly Classrooms training *(youtu.be/4MV_6wD1eAM?si=hhb_SwYNbC_G7trX).* Schools to have access to a robust, consistent symbol based system to support all children. Examples of these include Boardmaker, Twinkl and Widget (cost included to purchase) Access Mainstream Schools Forum for general advice and strategies.	Continue to embed Communication Friendly Classroom strategies Embed more targeted approaches to the whole classroom and support carry over to curriculum based activities within the classroom. Consider carrying out targeted interventions in small groups to support understanding of language. Examples of these may include: Understanding Narratives Narrative Training 2023 *(youtube.com/watch?v=inKr_jFGTXU).* Understanding Vocabulary	Continue to embed Communication Friendly Classroom strategies Education staff to access Supporting Language in the Primary Classroom Training delivered by EP team. Multi-agency assessment to identify persistent and complex needs (e.g. access advice from external services such Children's Speech and Language Therapy :: Tameside Children and Young People and the Tameside Educational Psychology Service), to tailor programmes and activities to support their speech and language development,



	tamesidelocaloffer.co.uk/wp-content/uploads/2025/12/School- forum-2.pdf). Access Early Years Forum for general advice and strategies (for reception children, *tamesidelocaloffer.co.uk/wp-content/uploads/2025/12/Early-Years-Forum-Jan-2024-2.pdf).* Refer to specialist services (ISCAN SALT EP) for any immediate concerns e.g. breakdown in placements, risk of exclusion, complex safeguarding issues. <u>Classroom</u> Create a communication friendly classroom offering focused support and prompts/cues from adults to supplement children's understanding and participation in activities.	<u>Vocabulary training Part 1</u> *(youtu.be/6sLQO9-ykVY).* <u>Vocabulary training part 2</u> *(youtu.be/MzUz5eBhVmo).* Understanding Information carrying words <u>Information Carrying Words training</u> *(youtu.be/wefMZo-ds6k).* Understanding questions and Blank levels <u>Blank Levels training</u> *(youtu.be/tOoMCyaOoyw).* Schools to consider purchasing a targeted evidence-based language intervention to support understanding of language e.g. Wellcomm screening toolkit and intervention (The Big Book of Ideas). *Age ranges available 6 months – 6 years (Early Years) and 6 -11 years (Primary)* <u>WellComm - GL Assessmlent</u> *(gl-*	including attention and listening skills and understanding of language skills. *(tamesidechildrenandyoungpeople.nhs.uk/our-services/childrens-salt).* School staff deliver and support daily, individualised targeted interventions, based on support and guidance from external services. Certain interventions may require specialist training from the ISCAN Speech and Language Therapy Team. Developmental Language Disorder (DLD) When children experience persistent difficulties with using and/or understanding language

	Creating a communication supportive environment: Early years - Speech and Language UK: Changing young lives *(speechandlanguage.org.uk/educators-and-professionals/resource-library-for-educators/creating-a-communication-supportive-environment-early-years).* Creating a communication supportive environment: Primary - Speech and Language UK: Changing young lives *(speechandlanguage.org.uk/educators-and-professionals/resource-library-for-educators/creating-a-communication-supportive-environment-primary).* A Language Friendly Classroom Handout *(tamesidechildrenandyoungpeople.nhs.uk/application/files/2016/7111/4562/a_language_friendly_classroom.pdf).*	*assessment.co.uk/assessments/products/wellcomm).* Word Aware *(supporting the understanding of new vocabulary)* Word Aware – Thinking Talking *(thinkingtalking.co.uk/word-aware).* Blacksheep Press resources BSP, speech & language resources for schools, therapists & parents *(blacksheeppress.co.uk).* Talk boost Key Stage 1 *(speechandlanguage.org.uk/educators-and-professionals/programmes-for-nurseries-and-schools/talk-boost/talk-boost-ks1).* Nuffield Early Language Intervention (NELI) *(speechandlanguage.org.uk/what-works/nuffield-early-language-intervention-neli).*	with no known cause, this is referred to as DLD. This can affect up to 2 in every 30 children and often impacts on children's learning and overall communication skills from starting in childhood and persisting into adulthood. *(tamesidelocaloffer.co.uk/wp-content/uploads/2025/12/Fact-Sheet-RADLD-1.pdf).* Education staff should support children with DLD by working alongside the Speech and Language therapy team including following advice and strategies and carrying out advised targeted interventions Education staff should also refer to the DLD website for further guidance

	Access Supporting Language in the Primary Classroom Training delivered by EP team. Refer to visual support advice sheets and resources, make appropriate resources and embed into all classroom activities. If struggling to embed use of visuals across all environments, consider accessing further help from SALT team. Included in the link below are examples of first/then boards, visual timetables, traffic lights and communication boards. Visuals Downloadable Pack *(tamesidechildrenandyoungpeople.nhs.uk/application/files/7816/7758/3454/Visuals_Pack_UPDATED_FEB_23.pdf).* Individual Pupil Follow ISCAN Speech and Language Therapy team's	School to complete a one page profile to share with all members of staff. Access Mainstream Schools Forum for general advice and strategies. *(tamesidelocaloffer.co.uk/wp-content/uploads/2025/12/School-forum-2.pdf).* Access Early Years Forum for general advice and strategies (for reception children, *tamesidelocaloffer.co.uk/wp-content/uploads/2025/12/Early-Years-Forum-Jan-2024-2.pdf).* Consider referral to ISCAN Speech and Language therapy for further support and advice around targeted resources Children's Speech and Language Therapy :: Tameside Children and Young People	*(RADLD.org).* *(speechandlanguage.org.uk/help-for-families/developmental-language-disorder-awareness).*

	Language and Communication Standard for Reception aged children: Language and Communication Standard *(tamesidechildrenandyoungpeople.nhs.uk/application/files/9516/7589/2164/updated_standard.pdf).* Consider referral to ISCAN Speech and Language therapy for further support Children's Speech and Language Therapy :: Tameside Children and Young People *(tamesidechildrenandyoungpeople.nhs.uk/our-services/childrens-salt).*	*(tamesidechildrenandyoungpeople.nhs.uk/our-services/childrens-salt).* Refer to specialist services (ISCAN SALT) for any immediate concerns e.g. Breakdown in placements, risk of exclusion, complex safeguarding issues. Developmental Language Disorder (DLD) When children experience persistent difficulties with using and/or understanding language with no known cause, this is referred to as DLD. This can affect up to 2 in every 30 children and often impacts on children's learning and overall communication skills from starting in childhood and persisting into adulthood. (*tamesidelocaloffer.co.uk/wp-content/uploads/2025/12/Fact-Sheet-RADLD-1.pdf).*	



		Education staff should support children with DLD by working alongside the Speech and Language therapy team including following advice and strategies and carrying out advised targeted interventions Education staff should also refer to the DLD website for further guidance *(RADLD.org) (speechandlanguage.org.uk/help-for-families/developmental-language-disorder-awareness).* Education staff to access Supporting Language in the Primary Classroom Training delivered by EP team.	
Situational mutism/ situational speaking *Speaking fluently in some situations but*	Whole School Staff have an awareness of situational mutism and understand it is an anxiety-based need.	Referral to ISCAN Speech and Language therapy Children's Speech and Language Therapy :: Tameside Children and Young People.	Join the Greater Manchester Situational Mutism Network *(gmsmn.wordpress.com).* *Use of the 'Sliding in Technique' detailed in The Situational*



remaining silent in others	Key staff have access to information about how to support children with situational mutism from online resources including: SMiRA website. *(selectivemutism.org.uk/about-selective-mutism).* Home | Situational Mutism Association *(selectivemutism.org).* Do's & Don'ts at Secondary School - SMIRA *(selectivemutism.org.uk/info-dos-donts-at-secondary-school).* Do's & Don'ts at Pre and Primary School - SMIRA *(selectivemutism.org.uk/info-dos-donts-at-pre-and-primary-school).* School transition Plan - SMIRA *(selectivemutism.org.uk/info-transition-plan).* Supporting friendships - SMIRA *(selectivemutism.org.uk/info-playdates).*	*(tamesidechildrenandyoungpeople.nhs.uk/our-services/childrens-salt).* Speech and language therapists will assess receptive language and provide support in this area if required. A language sample from home may also be requested to observe the child's spoken language skills. If receptive language skills fall within typical limits, the pupil will be referred to CAMHS for support with Situational Mutism. If they fall below typical limits, targets will be set to support this and a referral can also be made to CAMHS. For support in developing a step by step plan refer to Educational Psychology Education Psychology Service - Information for Parents - Tameside MBC	Mutism Resource and included on the SMiRA website: *(selectivemutism.org.uk/info-the-sliding-in-technique-and-progress-charts).* The steps can be accomplished either in a single session or over 2–3 weeks. This involves an adult (parent or staff member) as the child's talk partner. Activities are completed on a regular basis within the child's talk partner in a safe and quiet area of the setting. The activity should be simple and involve something that the child enjoys and is familiar with (e.g. a favourite game or book from home). As the child becomes confident, their tolerance to another person gradually coming closer and joining the activity ('sliding in') is increased.



	School staff to ensure all forms of communication are accepted, including: Pen/paper Whiteboard (if strong writing skills) Communication boards - Visuals Downloadable Pack *(tamesidechildrenandyoungpeople.nhs.uk/application/files/7816/7758/3454/Visuals_Pack_UPDATED_FEB_23.pdf).* Use of body language; nodding/shaking head, thumbs up/thumbs down, pointing. As SM is an anxiety based need, please refer to SEMH strategies for strategies to support managing anxiety. Classroom Establish a communication friendly environment for children/young people with situational mutism	*(tameside.gov.uk/Education/Educational-Psychology-Service).* As SM is an anxiety based need please refer to SEMH strategies for strategies to support managing anxiety.	For support in developing a step by step plan refer to Educational Psychology Education Psychology Service - Information for Parents - Tameside MBC *(tameside.gov.uk/Education/Educational-Psychology-Service).* As SM is an anxiety based need please refer to SEMH strategies for strategies to support managing anxiety.



	Engage through physical activity and creative projects. Support friendships with other children. Encourage them to sit, work or play with friends they talk to in other settings. Organise activities in which children move, sing or talk in unison and activities/games which do not require speech. Encouraging participation through 'show' rather than 'tell'. Providing traffic lights or 'ask for help' cards to allow them to access support non-verbally. <u>Individual Pupil</u> Providing unpressured opportunities for the child to speak. Don't react if the child does speak. If the child whispers or uses gesture, talk back in a natural way. Use commentary style questions and comments. Avoid direct questions. Talk to the child about		



	what you are doing, without expecting an answer. Identifying a key adult for the child to build rapport and confidence with. Find time at school for periods of unpressured 1:1 time. Encourage independence and ensure success. Rather than doing things for the child, do things with them initially and then withdraw, or make things easier. Carefully support the child's transition between year groups.		



Key Stage Two

SKILL	WHAT TO DO FIRST *Identifying and supporting need*	ASKING FOR HELP *Starting Assess, Plan, Do, Review*	WHEN MORE HELP IS NEEDED *Targeted support*
Social Communication *Pupils with social communication needs can often have sensory processing differences – please also see the Sensory and/or Physical Needs section*	Whole School: Schools to have access to a robust, consistent symbol-based system to support all children and provide communication opportunities. Examples of these include Boardmaker, Twinkl and Widget (cost included to purchase) Follow ISCAN Speech and Language Therapy team's Language and Communication Standard for Reception aged children: Language and Communication Standard *(tamesidechildrenandyoungpeople.nhs.uk/application/files/9516/7589/2164/updated_standard.pdf).*	Provide a personalised curriculum allowing flexibility in the organisation of the learning environment and the school day. For example, you could offer access to a low stimulus, distraction-free base either within or outside of the classroom for certain tasks. Adapt group and individual activities in line with the individual's sensory needs and communication and interaction profile. Consider carrying out targeted interventions in individual or small groups to support interaction and communication:	Provide a more personalised curriculum allowing increased flexibility in the organisation of the learning environment and the school day, (e.g. offering access to additional adult support to enable the child to participate in the less structured parts of the school day such as break time, and provide access to a quiet, distraction-free place in school if a child feels anxious, ensuring access to a safe and trusted key person). Regular staff briefings, linking in with families where possible, centred around the child's strengths and support needs, particularly if multiple staff

	Access Mainstream Schools Forum for general advice and strategies *(tamesidelocaloffer.co.uk/wp-content/uploads/2025/12/School-forum.pdf).* School staff to refer to specialist services (ISCAN SALT) for any immediate concerns e.g. breakdown in placements, risk of exclusion, complex safeguarding issues. *(tamesidechildrenandyoungpeople.nhs.uk/our-services/childrens-salt).* Classroom: Establish consistent and predictable routines. Refer to advice and visual resources to support routines and transitions as a full class approach:	Attention Autism Home - Attention Autism Ltd | UK & Ireland an intervention model which aims to develop natural and spontaneous communication through the use of visually based and highly motivating activities. *(attentionautism.co.uk).* Blacksheep Press resources BSP, speech & language resources for schools, therapists & parents *(blacksheeppress.co.uk)* Resources around building inferencing, situational and social awareness. TalkAbout a programme aimed at developing self- esteem, as well as social and friendship skills. *(winslowresources.com/specific-needs/the-talkabout-series.html).* Lego Therapy is an intervention to help improve social competence while conducting fun, naturally rewarding Lego clubs. Speech and	members are involved in support (e.g. sharing and updating the One Page Profile, discussing therapy plans, ensuring training completed). Multi-agency assessment to identify persistent and complex needs (e.g. access advice from external services such as SEN TSOSS, Children's Speech and Language Therapy :: Tameside Children and Young People and the Tameside Educational Psychology Service), to tailor programmes and activities to support their communication development. Multi-agency assessment to highlight any onward referrals required (e.g., diagnostic multi-disciplinary teams such as MAAT, Paediatrician) School staff deliver and support daily, individualised targeted interventions, based on support

	(Using visual supports such as first-then boards and visual schedules tamesidelocaloffer.co.uk/wp-content/uploads/2025/12/using-visual-timetables-schedules.pdf). Transition cues (verbal warnings, transition songs, timers, traffic lights) *(tamesidelocaloffer.co.uk/wp-content/uploads/2025/12/Supporting-Transitions.pdf).* Using start / finished task boxes, task lists. Ensure expectations of tasks are clear. Prepare for upcoming changes to routine, supported by visual aids (e.g., symbols, photos, drawing) Encourage a total communication approach and accept all forms of communication (e.g., spoken, gesture, signs, written word, Alternative and Augmentative Communication, AAC).	Language offer training on Lego Therapy. Social Stories – can be created to provide children with a concrete way to prepare for future situations, or better understand social situations. It is important that these follow the official and recommended format. Consider consultation with ISCAN SLT for further support in generating these. Comic Strip Conversations: can be used as a visual teaching tool to explore situations and others perspectives:*(tamesidelocaloffer.co.uk/wp-content/uploads/2025/12/comic-strip-conversations.pdf).* Zones of Regulation is an intervention that supports the development of self-regulation and emotional control. Speech and Language offer training on Zones of Regulation.	and guidance from external services. Certain interventions may require specialist training from the ISCAN Speech and Language Therapy Team. Use of a robust, bespoke high or low AAC system, embedded within all routine and learning activities, accessible at all times to the student with specialist training, targets and support from the ISCAN Speech and Language Therapy Team. ISCAN SLT may complete onward referral for external specialist services (e.g., The ACE Centre). PECS (Picture Exchange Children's Speech and Language Therapy – Tameside tamesidechildrenandyoungpeople.nhs.uk/our-services/childrens-salt

	Recognise that 'good listening' and 'good looking' may look different for everyone. Don't expect eye contact or sitting still. Sensory or movement breaks are incorporated into lessons. Try to avoid the use of non-literal language (e.g. idioms and sarcasm) and explain any abstract concepts in as concrete a way as possible (e.g. with pictures or objects). Refer to advice sheets and resources for interaction and communication strategies and embed into all classroom activities. Visuals available for: Creating communication opportunities: *(youtube.com/watch?v=8eaKqRvvUrw)*. Activity specific communication boards for aided language	*com/index.html)*. *(youtube.com/watch?v=xtESfc5dJ_Y &t=14s)*. The Incredible Five Point Scale – a tool to explore emotional regulation and tools to support this. Language for Thinking an approach aimed at developing the verbal reasoning and thinking skills of children aged 4-11 through drawings, written scenarios, and questions. *(thinkingtalking.co.uk/language-for-thinking)*. Language for Behaviour and Emotions - practical, interactive resource to be used individually or in groups to support language, social and emotional development. Use of personalised visuals (e.g. objects of reference, photos and symbols, now/next, choice boards, activity boards, traffic lights, sand	Educational Psychology Service – Tameside tameside.gov.uk/Education/Educational-Psychology-Service The ACE Centre (for specialist AAC onward referral) acecentre.org.uk/resources PECS pecs-unitedkingdom.com/pecs

	modelling: *(tamesidelocaloffer.co.uk/wp-content/uploads/2025/12/Communication-boards-for-settings.pdf)*. Visuals pack – symbols and photos for aspects of the routine and areas in school: *(tamesidechildrenandyoungpeople.nhs.uk/application/files/4616/7171/6843/Visual_pack.pdf)*. Helping children interact: (*tamesidelocaloffer.co.uk/wp-content/uploads/2025/12/helping-children-interact.pdf)*. Individual Pupil ~~Consult with ke~~y people in the child's life (e.g., parents, carers, previous settings, professionals currently involved) to understand individual current communication skills, preferences, strengths and challenges. If struggling to embed and apply strategies, or more personalised,	timers). Consider seeking further advice from the SALT team regarding personalisation and implementation of visuals. For all students requiring access to alternative communication systems, referral to ISCAN Speech and Language Therapy is required. Additional resources and support for aided language modelling, choice boards and core word teaching are available on: The Ace Centre: Resources | Ace Centre *(acecentre.org.uk/resources)*. AssistiveWare: AAC Resources - AssistiveWare *(assistiveware.com/resources)*. Use of a Sensory Checklist – and environmental adaptations to minimise impact of sensory distractions and sensory	

	bespoke communication systems required, consider accessing further help from SALT team. Consider referral to ISCAN Speech and Language therapy for further support: Children's Speech and Language Therapy :: Tameside Children and Young People *(tamesidechildrenandyoungpeople.nhs.uk/our-services/childrens-salt)*	processing differences (e.g. opportunities to work in quieter spaces with reduced distractions when completing focused activities, access to tailored sensory activities or resources). *(tamesidelocaloffer.co.uk/education/sensory-toolkit)* Consider referral to ISCAN Speech and Language therapy for further support and advice around targeted resources Children's Speech and Language Therapy :: Tameside Children and Young People *(tamesidechildrenandyoungpeople.nhs.uk/our-services/childrens-salt).*	
Expressive Language	Whole School: Access to a robust, consistent symbol-based system to support all children and provide communication opportunities. Examples of these include	Continue to embed Communication Friendly Classroom strategies Embed more targeted approaches to the whole classroom and support carry over to curriculum-	

	Boardmaker, Twinkl and Widget (cost included to purchase) Follow ISCAN Speech and Language Therapy team's Language and Communication Standard for Reception aged children: Language and Communication Standard *(tamesidechildrenandyoungpeople.nhs.uk/application/files/9516/7589/2164/updated_standard.pdf)*. Access Mainstream Schools Forum for general advice and strategies *(tamesidelocaloffer.co.uk/wp-content/uploads/2025/12/School-forum.pdf)*. Refer to specialist services (ISCAN SALT) for any immediate concerns e.g. Breakdown in placements, risk of exclusion, complex safeguarding issues.	based activities within the classroom. Access Supporting Language in the Primary Classroom Training delivered by EP team. Consider carrying out targeted interventions in small groups to support expressive language and communication. Examples of these may include: Using Narratives: Narrative Training 2023 *(youtube.com/watch?v=inKr_jFGTXU)*. Developing Spoken Vocabulary: Vocabulary training Part 1; Vocabulary training part 2 Vocabulary training – part 1 *(youtu.be/6sLQO9-ykVY)*. Vocabulary training – part 2 *(youtu.be/MzUz5eBhVmo)*.	

	tamesidechildrenandyoungpeople.nhs.uk/our-services/childrens-salt). Classroom Create a communication friendly classroom offering opportunities to continue to develop children's expressive language, vocabulary, grammar and participation in learning and social activities. Creating a communication supportive environment: Primary - Speech and Language UK: Changing young lives *(speechandlanguage.org.uk/educators-and-professionals/resource-library-for-educators/creating-a-communication-supportive-environment-primary).* Access Language Friendly Classrooms Training delivered by ISCAN SALT team: ISCAN Language Friendly Classrooms training	Colourful Semantics to develop sentence structure: Colourful Semantics demonstration - YouTube *(youtube.com/watch?v=Se0gAOgfNvg).* Introduction to Alternative and Augmentative Communication (AAC) (part 1): Introduction to AAC - YouTube *(youtube.com/watch?v=rGml4iF6QRA).* Modelling and demo of AAC (part 2): Augmentative and Alternative Communication Training *(youtube.com/watch?v=-557ppkq92s).* Consider purchasing a targeted evidence-based language intervention to support use of language e.g. Wellcomm screening toolkit and intervention (The Big Book of Ideas). *Age ranges available 6 months – 6 years (Early Years) and 6 -11 years*	

	(youtube.com/watch?v=4MV_6wD1eAM). A Language Friendly Classroom Handout *(tamesidechildrenandyoungpeople.nhs.uk/application/files/2016/7111/4562/a_language_friendly_classroom.pdf).* Access Supporting Language in the Primary Classroom Training delivered by EP team. al communication approach and accept all forms of communication (e.g., spoken, gesture, signs, written word, Alternative and Augmentative Communication, AAC). Creating communication opportunities: *(youtube.com/watch?v=8eaKqRvvUrw).* Activity specific communication boards for aided language modelling:	*(Primary)* WellComm - GL Assessment *(glassessment.co.uk/assessments/products/wellcomm).* Word Aware *(supporting the understanding of new vocabulary)* Word Aware – Thinking Talking *(thinkingtalking.co.uk/word-aware).* Blacksheep Press resources BSP, speech & language resources for schools, therapists & parents *(blacksheeppress.co.uk).* Talk boost Key Stage 2 *(speechandlanguage.org.uk/educators-and-professionals/programmes-for-nurseries-and-schools/talk-boost/talk-boost-ks2).* Nuffield Early Language Intervention (NELI) *(speechandlanguage.org.uk/what-works/nuffield-early-language-intervention-neli).*	



	tamesidelocaloffer.co.uk/wp-content/uploads/2025/12/Communication-boards-for-settings.pdf). Supporting vocabulary knowledge and vocabulary checklist: *(thinkingtalking.co.uk/word-aware)*. Supporting narrative skills: *(youtube.com/watch?v=inKr_jFGTXU)*. ~~Individual Pupil~~ If struggling to embed and apply strategies, or more personalised, bespoke communication systems required, consider accessing further help from SALT team. Consider referral to ISCAN Speech and Language therapy for further support: Children's Speech and Language Therapy :: Tameside Children and Young People	Language for Thinking an approach aimed at developing the verbal reasoning and thinking skills of children aged 4-11 through drawings, written scenarios, and questions. *(thinkingtalking.co.uk/language-for-thinking)*. Tales Toolkit An online package of resources to develop children's ~~skills in story~~ development and sequencing in small groups. *(talestoolkit.com)*. Victoria Joffe Narrative Intervention programme – This resource helps support the understanding and telling of stories in secondary school students Colourful Stories (ELKLAN) is a visual support strategy which helps children to learn about the structure of stories and to become more confident about telling and writing stories. Colourful Stories	

	(tamesidechildrenandyoungpeople.nhs.uk/our-services/childrens-salt)	encourages oral-narrative skills and introduces written words only when the child is confident about how to structure and tell a story orally. *(elklan.co.uk/Shop/Colourful_Stories).* For all students requiring access to alternative communication systems, referral to ISCAN Speech and Language Therapy is required. Additional resources and support for aided language modelling, choice boards and core word teaching are available on: The Ace Centre: Resources | Ace Centre *(acecentre.org.uk/resource).* AssistiveWare: AAC Resources - AssistiveWare *(assistiveware.com/resources)* Complete a one-page profile on communication styles to share with all members of staff.	

		Access Mainstream Schools Forum for further, specific advice and strategies *(tamesidelocaloffer.co.uk/wp-content/uploads/2025/12/School-forum.pdf)*. Consider referral to ISCAN Speech and Language therapy for further support and advice around targeted resources Children's Speech and Language Therapy :: Tameside Children and Young People *(tamesidelocaloffer.co.uk/wp-content/uploads/2025/12/School-forum.pdf)*. Consult with/refer to specialist services (ISCAN SALT, SEND, TSOSS) for any immediate concerns e.g. Breakdown in placements, risk of exclusion, complex safeguarding issues.	



		Developmental Language Disorder (DLD) When children experience persistent difficulties with using and/or understanding language with no known cause, this is referred to as DLD. This can affect up to 2 in every 30 children and often impacts on children's learning and overall communication skills from starting in childhood and persisting into adulthood. (*tamesidelocaloffer.co.uk/wp-content/uploads/2025/12/Fact-Sheet-RADLD-1.pdf).* Support children with DLD by working alongside the Speech and Language therapy team including following advice and strategies and carrying out advised targeted interventions. Refer to the DLD website for further guidance: *(RADLD.org).*	



		(speechandlanguage.org.uk/help-for-families/developmental-language-disorder-awareness).	
Expressive Language - stammering	Classroom Create a communication friendly classroom (see above) Individual Pupil Stammering can be very common in children ages 3-5 years, particularly when they are developing their language skills. Typically, development stammering will naturally resolve within 12 months. For some children, stammering is something that may persist into later childhood and adulthood. Ensure the following strategies are in place and that all teaching staff /adults within the school setting are aware of how to support stammering	Create a communication friendly classroom (see above) Ensure the following strategies are in place and that all teaching staff /adults within the school setting are aware of how to support stammering *(tamesidelocaloffer.co.uk/wp-content/uploads/2025/12/Stammering-Advice-for-Teaching-Staff-1.pdf).* School to complete a one-page profile on communication styles to share with all members of staff. Seek support from websites such as *www.stamma.org www.actionforstammeringchildren.org*. Education are also able to sign	Create a communication friendly classroom (see above) Ensure the following strategies are in place and that all teaching staff/adults within the school setting are aware of how to support stammering *(tamesidelocaloffer.co.uk/wp-content/uploads/2025/12/Stammering-Advice-for-Teaching-Staff-1.pdf).* Seek support from websites such as: *www.stamma.org www.actionforstammeringchildren.org* Consider setting up small group work around building confidence and resilience skills if appropriate to child/young person.

	tamesidelocaloffer.co.uk/wp-content/uploads/2025/12/Stammering-Advice-for-Teaching-Staff_1.pdf). Seek support from websites such as www.stamma.org www.actionforstammeringchildren.org Consider referral to Speech and Language therapy if stammer persists, The child/ young people becomes aware/ concerned about it/ family are concerned about it Children's Speech and Language Therapy :: Tameside Children and Young People *(tamesidechildrenandyoungpeople.nhs.uk/our-services/childrens-salt).* Whole School Consult Royal College of Speech and Language Therapy website for information on which age we would expect sounds to be developed by Clinical information	up to the Stammer awareness toolkit. Consider setting up small group work around building confidence and resilience skills if appropriate to child/young person. Refer to Speech and Language therapy for further advice/support around stammering Children's Speech and Language Therapy :: Tameside Children and Young People *(tamesidechildrenandyoungpeople.nhs.uk/our-services/childrens-salt).*	Refer to Speech and Language therapy for further advice/support around stammering Children's Speech and Language Therapy :: Tameside Children and Young People *(tamesidechildrenandyoungpeople.nhs.uk/our-services/childrens-salt).* Consider referral to Mental health services to support child/young person with significant anxiety.
Expressive Language – speech sounds		Consult Royal College of Speech and Language Therapy website for information on which age we would expect sounds to be developed by Clinical information on speech sound	Consult Royal College of Speech and Language Therapy website for information on which age we would expect sounds to be developed by Clinical information on speech sound disorders | RCSLT

	on speech sound disorders | RCSLT *(rcslt.org/speech-and-language-therapy/clinical-information/speech-sound-disorders).* Classroom Refer to advice sheets for working on speech sounds and use them in 1:1/small group activities. Video advice on producing /k/, /g/, /t/, /d/, /s/ blends is available here: Training :: Tameside Children and Young People *(tamesidechildrenandyoungpeople.nhs.uk/getting-help/training).* For a general overview on how to support early speech sounds *youtu.be/yNQN4sWaUsI?si=F-AY-lu-49fdkZh5* (Great Western Hospitals NHS Foundation Trust)	disorders | RCSLT *(rcslt.org/speech-and-language-therapy/clinical-information/speech-sound-disorders).* Refer to advice sheets for working on speech sounds and use them in 1:1/small group activities. Advice sheets available for: Speech Sound Clusters Cluster Leaflet not group.pdf *(tamesidelocaloffer.co.uk/wp-content/uploads/2026/03/Cluster-Leaflet-not-group.pdf).* Fronting/Backing (/t/,/d/,/k/,/g/) F&B not group.pdf *(~~tamesidelocaloffer~~.co.uk/wp-content/uploads/2026/03/FB-not-group.pdf).* Final Consonant Deletion FCD not group.pdf	*(rcslt.org/speech-and-language-therapy/clinical-information/speech-sound-disorders).* Refer to advice sheets for working on speech sounds and use them in 1:1/small group activities. Advice sheets available for: Speech Sound Clusters Cluster Leaflet not group.pdf *(tamesidelocaloffer.co.uk/wp-content/uploads/2026/03/Cluster-Leaflet-not-group.pdf).* Fronting/Backing (/t/,/d/,/k/,/g/) F&B not group.pdf *(tamesidelocaloffer.co.uk/wp-content/uploads/2026/03/FB-not-group.pdf).* Final Consonant Deletion FCD not group.pdf *(~~tameside~~localoffer.co.uk/wp-content/uploads/2026/03/FCD-not-group.pdf).*



	Individual Pupil Enquire whether the child has had a hearing test/check whether there are concerns regarding hearing and refer to Audiology as appropriate Paediatric Audiology :: Tameside and Glossop Integrated Care *(tamesideandglossopicft.nhs.uk/services/audiology/paediatric-audiology).* Refer to Speech and Language therapy for further advice/support around speech sounds Children's Speech and Language Therapy :: Tameside Children and Young People *(tamesidechildrenandyoungpeople.nhs.uk/our-services/childrens-salt).*	tamesidelocaloffer.co.uk/wp-*content/u ploads/2026/03/FCD-not-group.pdf).* Practicing Speech Sounds in Words practicing speech sounds in words.pdf *(tamesidelocaloffer.co.uk/wp-content/uploads/2026/03/practicing-speech-sounds-in-words.pdf).* Speech Sound Awareness Phonological Awareness.pdf *(tamesidelocaloffer.co.uk/wp-content/uploads/2026/03/Phonological-Awareness.pdf).* Video advice on producing /k/, /g/, /t/, /d/, /s/ blends is available here: Training :: Tameside Children and Young People *(tamesidechildrenandyoungpeople.nhs.uk/getting-help/training).* As in Phonics, when working on speech sounds use a physical prompt and/or symbol to remind	Practicing Speech Sounds in Words practicing speech sounds in words.pdf *(tamesidelocaloffer.co.uk/wp-content/uploads/2026/03/practicing-speech-sounds-in-words.pdf).* Speech Sound Awareness Phonological Awareness.pdf *(tamesidelocaloffer.co.uk/wp-content/uploads/2026/03/Phonological-Awareness.pdf).* Video advice on producing /k/, /g/, /t/, /d/, /s/ blends is available here: Training :: Tameside Children and Young People *(tamesidechildrenandyoungpeople.nhs.uk/getting-help/training).* Carry out interventions as directed by SALT. If Augmentative and Augmentative Communication is required to support communication liaise with



		the child of what the target sound is. Carry out interventions as directed by SALT. For a general overview on how to support early speech sounds *(youtube.com/watch?v=yNQN4sWaUsI)*. (Great Western Hospitals NHS Foundation Trust) Enquire whether the child has had a hearing test/check whether there are concerns regarding hearing and refer to Audiology as appropriate Paediatric Audiology :: Tameside and Glossop Integrated Care *(tamesideandglossopicft.nhs.uk/services/audiology/paediatric-audiology)*. Refer to Speech and Language therapy for further advice/support	Speech and Language Therapy through referral or contact The ACE Centre Ace Centre | Charity specialising in AAC & Assistive Technology *(acecentre.org.uk/resource)*. For a general overview on how to support early speech sounds *youtu.be/yNQN4sWaUsI?si=F-AY-lu-49fdkZh5* (Great Western Hospitals NHS Foundation Trust) Enquire whether the child has had a hearing test/check whether there are concerns regarding hearing and refer to Audiology as appropriate Paediatric Audiology :: Tameside and Glossop Integrated Care *(tamesideandglossopicft.nhs.uk/services/audiology/paediatric-audiology)*. A referral to ENT may also be appropriate if there is a 'blocked nose' quality to the speech or if you

		around speech sounds Children's Speech and Language Therapy :: Tameside Children and Young People *(tamesidechildrenandyoungpeople.nhs.uk/our-services/childrens-salt).*	are hearing a 'snort' rather than the target sound. Refer to Speech and Language therapy for further advice/support around speech sounds Children's Speech and Language Therapy :: Tameside Children and Young People *(tamesidechildrenandyoungpeople.nhs.uk/our-services/childrens-salt).*
Understanding of Language	Whole School Access Language Friendly Classrooms Training delivered by ISCAN SALT team ISCAN Language Friendly Classrooms training *(youtube.com/watch?v=4MV_6wD1eAM).* Schools to have access to a robust, consistent symbol based system to support all children. Examples of these include	Continue to embed Communication Friendly Classroom strategies Embed more targeted approaches to the whole classroom and support carry over to curriculum based activities within the classroom. Consider carrying out targeted interventions in small groups to support understanding of language.	Continue to embed Communication Friendly Classroom strategies Education staff to access Supporting Language in the Primary Classroom Training delivered by EP team/. Multi-agency assessment to identify persistent and complex needs (e.g. access advice from external services such Children's Speech and Language Therapy ::

	Boardmaker, Twinkl and Widget (cost included to purchase) Access Mainstream Schools Forum for general advice and strategies *(tamesidelocaloffer.co.uk/wp-content/uploads/2025/12/school-forum.pdf)*. Refer to specialist services (ISCAN SALT EP) for any immediate concerns e.g. breakdown in placements, risk of exclusion, complex safeguarding issues. Classroom Create a communication friendly classroom offering focused support and prompts/cues from adults to supplement children's understanding and participation in activities. Creating a communication supportive environment: Primary	Examples of these may include: Understanding Narratives Narrative Training 2023 *(youtube.com/watch?v=inKr_jFGTXU)*. Understanding Vocabulary Vocabulary training – part 1 *(youtu.be/6sLQO9-ykVY)*. Vocabulary training – part 2 *(youtu.be/MzUz5eBhVmo)*. Understanding Information carrying words Information Carrying Words training *(youtu.be/wefMZo-ds6k)*. Understanding questions and Blank levels Blank Levels training *(youtu.be/tOoMCyaOoyw)*. Schools to consider purchasing a targeted evidence-based language intervention to support understanding of language e.g.	Tameside Children and Young People and the Tameside Educational Psychology Service), to tailor programmes and activities to support their speech and language development, including attention and listening skills and understanding of language skills Children's Speech and Language Therapy – Tameside (tamesidechildrenandyoungpeople.nhs.uk/our-services/childrens-salt). Educational Psychology Service – Tameside *(tameside.gov.uk/Education/Educational-Psychology-Service)*. School staff deliver and support daily, individualised targeted interventions, based on support and guidance from external services. Certain interventions may

	- Speech and Language UK: Changing young lives *(speechandlanguage.org.uk/educators-and-professionals/resource-library-for-educators/creating-a-communication-supportive-environment-primary).* A Language Friendly Classroom Handout *(tamesidechildrenandyoungpeople.nhs.uk/application/files/2016/7111/4562/a_language_friendly_classroom.pdf).* Access Supporting Language in the Primary Classroom Training delivered by EP team. Refer to visual support advice sheets and resources, make appropriate resources and embed into all classroom activities. If struggling to embed use of visuals across all environments, consider accessing further help	Wellcomm screening toolkit and intervention (The Big Book of Ideas). *Age ranges available 6 months – 6 years (Early Years) and 6 -11 years (Primary)* WellComm - GL Assessment *(glassessment.co.uk/assessments/products/wellcomm).* Word Aware *(supporting the understanding of new vocabulary*) Word Aware – Thinking Talking *(thinkingtalking.co.uk/word-aware).* Blacksheep Press resources BSP, speech & language resources for schools, therapists & parents *(blacksheeppress.co.uk).* Talk boost Key Stage 2 *(speechandlanguage.org.uk/educators-and-professionals/programmes-for-nurseries-and-schools/talk- boost/talk-boost-ks2).*	require specialist training from the ISCAN Speech and Language Therapy Team. Developmental Language Disorder (DLD) When children experience persistent difficulties with using and/or understanding language with no known cause, this is referred to as DLD. This can affect up to 2 in every 30 children and often impacts on children's learning and overall communication skills from starting in childhood and persisting into adulthood. *(tamesidelocaloffer.co.uk/wp-content/uploads/2025/12/Fact-Sheet-RADLD-1.pdf).* Education staff should support children with DLD by working alongside the Speech and Language therapy team including

	from SALT team. Included in the link below are examples of first/then boards, visual timetables, traffic lights and communication boards. Visuals Downloadable Pack *(tamesidechildrenandyoungpeople.nhs.uk/application/files/7816/7758/3454/Visuals_Pack_UPDATED_FEB_23.pdf).* Individual Pupil Follow ISCAN Speech and Language Therapy team's Language and Communication Standard for Reception aged children: Language and Communication Standard *(tamesidechildrenandyoungpeople.nhs.uk/application/files/9516/7589/2164/updated_standard.pdf).* Consider referral to ISCAN Speech and Language therapy for	Nuffield Early Language Intervention (NELI) *(speechandlanguage.org.uk/what-works/nuffield-early-language-intervention-neli).* School to complete a one page profile to share with all members of staff. Access Mainstream Schools Forum for further, specific advice and strategies *(tamesidelocaloffer.co.uk/wp-content/uploads/2025/12/School-forum.pdf).* Consider referral to ISCAN Speech and Language therapy for further support and advice around targeted resources Children's Speech and Language Therapy ::	following advice and strategies and carrying out advised targeted interventions Education staff should also refer to the DLD website for further guidance RADLD *(radld.org).* Speech & Language UK – DLD awareness *(speechandlanguage.org.uk/help-for-families/developmental-language-disorder-awareness).*



	further support Children's Speech and Language Therapy :: Tameside Children and Young People *(tamesidechildrenandyoungpeople.nhs.uk/our-services/childrens-salt).*	Tameside Children and Young People *(speechandlanguage.org.uk/help-for-families/developmental-language-disorder-awareness).* Refer to specialist services (ISCAN SALT) for any immediate concerns e.g. Breakdown in placements, risk of exclusion, complex safeguarding issues. Developmental Language Disorder (DLD) When children experience persistent difficulties with using and/or understanding language with no known cause, this is referred to as DLD. This can affect up to 2 in every 30 children and often impacts on children's learning and overall communication skills from starting in childhood and persisting into adulthood.	



		(tamesidelocaloffer.co. uk/wp-content/uploads/2025/12/Fact-Sheet-RADLD-1.pdf). Education staff should support children with DLD by working alongside the Speech and Language therapy team including following advice and strategies and carrying out advised targeted interventions Education staff should also refer to the DLD website for further guidance RADLD *(radld.org).* Speech & Language UK – DLD awareness *(speechandlanguage. org. uk/help-for-families/developmental-language-disorder-awareness).*	



		Education staff to access Supporting Language in the Primary Classroom Training delivered by EP team.	
Selective mutism/ Situational mutism/ situational speaking *Speaking fluently in some situations but remaining silent in others*	Whole School Staff have an awareness of situational mutism and understand it is an anxiety-based need. Key staff have access to information about how to support children with situational mutism from online resources including: SMiRA website – *(selectivemutism.org.uk/about-selective-mutism).* Home | Situational Mutism Association – *(selectivemutism.org).* Do's & Don'ts at Pre and Primary School - SMIRA – *(selectivemutism.org.uk/info-dos-donts-at-pre-and-primary-school).*	Referral to ISCAN Speech and Language therapy Children's Speech and Language Therapy :: Tameside Children and Young People. Speech and language therapists will assess receptive language and provide support in this area if required. A language sample from home may also be requested to observe the child's spoken language skills. If receptive language skills fall within typical limits, the pupil will be referred to CAMHS for support with Situational Mutism. If they fall below typical limits, targets will be set to support this and a referral can also be made to CAMHS. Children's Speech and Language Therapy – Tameside	Join the Greater Manchester Situational Mutism Network. *(gmsmn.wordpress.com)* Use of the 'Sliding in Technique' detailed in The Situational Mutism Resource and included on the SMiRA website: (*situationalmutism.org.uk/info-the-sliding-in-technique-and-progress-charts)* steps can be accomplished either in a single session or over 2–3 weeks. This involves an adult (parent or staff member) as the child's talk partner. Activities are completed on a regular basis within the child's talk partner in a safe and quiet area of the setting. The activity should be simple and involve something that the child enjoys and is familiar with (e.g. a favourite game or book from

	School transition Plan - SMIRA - *(selectivemutism.org.uk/info-transition-plan)*. Supporting friendships - SMIRA - *(selectivemutism.org.uk/info-playdates)*. School staff to ensure all forms of communication are accepted, including: Pen/paper Whiteboard (if strong writing skills) Communication boards - Visuals Downloadable Pack *(tamesidechildrenandyoungpeople.nhs.uk/application/files/7816/7758/3454/Visuals_Pack_UPDATED_FEB_23.pdf)*. Use of body language; nodding/shaking head, thumbs up/thumbs down, pointing. As SM is an anxiety based need, please refer to SEMH strategies for strategies to support managing anxiety.	*(tamesidechildrenandyoungpeople.nhs.uk/our-services/childrens-salt)*. For support in developing a step by step plan refer to Educational Psychology Education Psychology Service - Information for Parents - Tameside MBC As SM is an anxiety based need please refer to SEMH strategies for strategies to support managing anxiety.	home). As the child becomes confident, their tolerance to another person gradually coming closer and joining the activity ('sliding in') is increased. For support in developing a step by step plan refer to Educational Psychology Education Psychology Service - Information for Parents - Tameside MBC *(tameside.gov.uk/Education/Educational-Psychology-Service)*. As SM is an anxiety based need please refer to SEMH strategies for strategies to support managing anxiety.



	<u>Classroom</u> Establish a communication friendly environment for children/young people with situational mutism Engage through physical activity and creative projects. Support friendships with other children. Encourage them to sit, work or play with friends they talk to in other settings. Organise activities in which children move, sing or talk in unison and activities/games which do not require speech. Encouraging participation through 'show' rather than 'tell'. Providing traffic lights or 'ask for help' cards to allow them to access support non-verbally. <u>Individual Pupil</u> Providing unpressured opportunities for the child to speak. Don't react if the child does speak. If the child whispers		



	or uses gesture, talk back in a natural way. Use commentary style questions and comments. Avoid direct questions. Talk to the child about what you are doing, without expecting an answer. Identifying a key adult for the child to build rapport and confidence with. Find time at school for periods of unpressured 1:1 time. Encourage independence and ensure success. Rather than doing things for the child, do things with them initially and then withdraw, or make things easier. Carefully support the child's transition between year groups.		



Key Stage Three

SKILL	WHAT TO DO FIRST *Identifying and supporting need*	ASKING FOR HELP *Starting Assess, Plan, Do, Review*	WHEN MORE HELP IS NEEDED *Targeted support*
Social Communication *Pupils with social communication needs can often have sensory processing differences – please also see the Sensory and/or Physical Needs section*	Whole School: Schools to have access to a robust, consistent symbol-based system to support all children and provide communication opportunities. Examples of these include Boardmaker, Twinkl and Widget (cost included to purchase) Access Mainstream Schools Forum for general advice and strategies *(tamesidelocaloffer.co.uk/wp-content/uploads/2025/12/School-forum.pdf).* School staff to refer to specialist services (ISCAN SALT) for any immediate concerns e.g. breakdown in placements, risk of exclusion, complex safeguarding issues.	Provide a personalised curriculum allowing flexibility in the organisation of the learning environment and the school day. For example, you could offer access to a low stimulus, distraction-free base either within or outside of the classroom for certain tasks. Adapt group and individual activities in line with the individual's sensory needs and communication and interaction profile. Consider carrying out targeted interventions in individual or small groups to support interaction and communication: Attention Autism Home - Attention Autism Ltd | UK & Ireland (attentionautism.co.uk)	Provide a more personalised curriculum allowing increased flexibility in the organisation of the learning environment and the school day, (e.g. offering access to additional adult support to enable the child to participate in the less structured parts of the school day such as break time, and provide access to a quiet, distraction-free place in school if a child feels anxious, ensuring access to a safe and trusted key person). Regular staff briefings, linking in with families where possible, centred around the child's strengths and support needs, particularly if multiple staff members are involved in support (e.g. sharing and updating the One

	(tamesidechildrenandyoungpeople. nhs. uk/our-services/childrens-salt) *Classroom:* *Establish consistent and predictable routines. Refer to advice and visual resources to support routines and transitions as a full class approach: Using visual supports such as first-then boards and visual schedules.* *Transitions cues(verbal warnings, transition songs, timers, traffic lights.* *Using start/finished task boxes, task lists. Ensure expectations of tasks are clear.* *Prepare for upcoming changes to routine, supported by visual aids (e.g., Symbols, photos, drawing)*	An intervention model which aims to develop natural and spontaneous communications through the use of visually based and highly motivationg activities. Blacksheep Press Resources BSP, Speecj & language resources for schoold, therapists & parents. Resources around building interencing, situational and social awareness. (blacksheeppress.co. uk) TalkAbout a programme aimes at developing self-esteem, as well as social and friendship skills. Lego therapy an intervention to help improve social competence which conducting fun, naturally rewarding Lego clubs, Speech and Language offer training on Lego Therapy. Social Stories - Can be created to provide children with a concrete	Page Profile, discussing therapy plans, ensuring training completed). Multi-agency assessment to identify persistent and complex needs (e.g. access advice from external services such as SEN TSOSS, Children's Speech and Language Therapy :: Tameside Children and Young People and the Tameside Educational Psychology Service), to tailor programmes and activities to support their communication development. Multi-agency assessment to highlight any onward referrals required (e.g., diagnostic multi-disciplinary teams such as MAAT, Paediatrician) Speech and Language Therapy *(tamesidechildrenandyoungpeople.nhs.uk/our-services/childrens-salt)*. Tameside Educational Psychology Service *(tameside.gov.uk/Education/Educational-Psychology-Service)*.

	Encourage a total communication approach and accept all forms of communication (e.g., spoken, gesture, signs, written word, Alternative and Augmentative Communication, AAC). Recognise that 'good listening' and 'good looking' may look different for everyone. Don't expect eye contact or sitting still. Sensory or movement breaks are incorporated into lessons. Try to avoid the use of non-literal language (e.g. idioms and sarcasm) and explain any abstract concepts in as concrete a way as possible (e.g. with pictures or objects). Refer to advice sheets and resources for interaction and communication strategies and embed into all classroom activities. Visuals available for:	way to prepare for future situations, or better understand social situations. It is important that these follow the official and recommended format. Consider consultation with ISCAN SLT for further support in generating these. Comic Strip Converstations: Can be used as a visual teaching tool to explore situations and others perspectives. Zones of Regulation is an intervention that supports the development of self-regulation and emotional control. zoneofregulation.com Speech and Language offer training on Zones of Regulation	School staff deliver and support daily, individualised targeted interventions, based on support and guidance from external services. Certain interventions may require specialist training from ISCAN Speech and Language Therapy Team. Use of a robust, bespoke high or low AAC system, embedded within all routine and learning activities, accessible at all times to the student with specialist training, targets and support from the ISCAN Speech and Language Therapy Team. ISCAN SLT may complete onward referal for external specialist services (e.g. The ACE Centre) PECS (Picture Exchange (pecs-unitedkingdom.com/pecs)

	Creating communication opportunities: (youtube. com/watch? v=8eaKqRvvUrw). Activity specific communication boards for aided language modelling: (tamesidelocaloffer.co. uk/wp-content/uploads/2025/12/ Communication-boards-for-settin gs.pdf). Visuals pack – symbols and photos for aspects of the routine and areas in school: (tamesidechildrenandyoungpeople .nhs. uk/application/files/7816/7758/34 54/Visuals_Pack_UPDATED_FEB_23. pdf) Helping children interact: (tamesidelocaloffer.co. uk/wp-content/uploads/2025/12/h elping-children-interact.pdf). Individual Pupil Consult with key people in the child's life (e.g., parents, carers, previous settings, professionals	The Incredible Five Point Scale – a tool to explore emotional regulation and tools to support this. Language for Thinking an approach aimed at developing the verbal reasoning and thinking skills of children aged 4-11 through drawings, written scenarios, and questions. (thinkingtalking.co. uk/language-for-thinking). Language for Behaviour and Emotions - practical, interactive resource to be used individually or in groups to support language, social and emotional development. Use of personalised visuals (e.g. objects of reference, photos and symbols, now/next, choice boards, activity boards, traffic lights, sand timers). Consider seeking further advice from the SALT team regarding personalisation and implementation of visuals.	



	currently involved) to understand individual current communication skills, preferences, strengths and challenges. If struggling to embed and apply strategies, or more personalised, bespoke communication systems required, consider accessing further help from SALT team. Consider referral to ISCAN Speech and Language therapy for further support: Children's Speech and Language Therapy :: Tameside Children and Young People (tamesidechildrenandyoungpeopl.nhs.uk/our-services/childrens-salt).	For all students requiring access to alternative communication systems, referral to ISCAN Speech and Language Therapy is required. Additional resources and support for aided language modelling, choice boards and core word teaching are available on: The Ace Centre: Resources | Ace Centre (acecentre.org.uk/resources). AssistiveWare: AAC Resources - AssistiveWare (assistiveware.com/ resources). Use of a Sensory Checklist – and environmental adaptations to minimise impact of sensory distractions and sensory processing differences (e.g. opportunities to work in quieter spaces with reduced distractions when completing	

		focused activities, access to tailored sensory activities or resources). *(tamesidelocaloffer.co.uk/education/sensory-toolkit)* Consider referral to ISCAN Speech and Language therapy for further support and advice around targeted resources Children's Speech and Language Therapy :: Tameside Children and Young People Speech and Language Therapy (tamesidechildrenandyoungpeople.nhs.uk/our-services/childrens-salt) Consider referral to EPS for developing a personalised support plan.	
Expressive Language	Whole School: Access to a robust, consistent symbol-based system to support all children and provide communication opportunities. Examples of these include	Continue to embed Communication Friendly Classroom strategies Embed more targeted approaches to the whole classroom and support carry over to curriculum-	

	Boardmaker, Twinkl and Widget (cost included to purchase) Access Mainstream Schools Forum for general advice and strategies *(tamesidelocaloffer.co.uk/wp-content/uploads/2025/12/School-forum.pdf)*. Refer to specialist services (ISCAN SALT) for any immediate concerns e.g. Breakdown in placements, risk of exclusion, complex safeguarding issues. *(tamesidechildrenandyoungpeople.nhs.uk/our-services/childrens-salt)*. Classroom Create a communication friendly classroom offering opportunities to continue to develop children's expressive language, vocabulary, grammar and participation in learning and social activities.	based activities within the classroom. Access Supporting Language in the Primary Classroom Training delivered by EP team. Consider carrying out targeted interventions in small groups to support expressive language and communication. Examples of these may include: Using Narratives: Narrative Training 2023 *(youtube.com/watch?v=inKr_jFGTXU)*. Developing Spoken Vocabulary: Vocabulary training (Part 1) (youtube.com/watch?v=6sLQO9-ykVY) Vocabulary training (Part 2) (youtube.com/watch?v=MzUz5eBhVmo)	

	Access Language Friendly Classrooms Training delivered by ISCAN SALT team: ISCAN Language Friendly Classrooms training *(youtube.com/watch?v=4MV_6wD1eAM)*. A Language Friendly Classroom Handout *(tamesidechildrenandyoungpeople.nhs.uk/application/files/2016/7111/4562/a_language_friendly_classroom.pdf)* Encourage a total communication approach and accept all forms of communication (e.g., spoken, gesture, signs, written word, Alternative and Augmentative Communication, AAC). Refer to advice sheets and visual support resources for expressive support and embed into all classroom activities. Visuals available for:	Colourful Semantics to develop sentence structure: *(youtube.com/watch?v=Se0gAOgfNvg)*. Introduction to Alternative and Augmentative Communication (AAC) (part 1): *(youtube.com/watch?v=rGml4iF6QRA)*. Modelling and demo of AAC (part 2): Augmentative and Alternative Communication Training *(youtube.com/watch?v=-557ppkq92s)*. Consider purchasing a targeted evidence-based language intervention to support use of language e.g. Wellcomm screening toolkit and intervention (The Big Book of Ideas). *Age ranges available 6 months – 6 years (Early Years) and 6 -11 years (Primary)* WellComm - GL Assessment *(gl-*	

	Creating communication opportunities: (youtube. com/watch?v=8eaKqRvvUrw). Activity specific communication boards for aided language modelling: (tamesidelocaloffer.co. uk/wp-content/uploads/2025/12/C ommunication-boards-for-settings. pdf). Supporting vocabulary knowledge and vocabulary checklist: (thinkingtalking.co. uk/word-aware). Supporting narrative skills: (youtube. com/watch?v=inKr_jFGTXU). Individual Pupil If struggling to embed and apply strategies, or more personalised, bespoke communication systems required, consider accessing further help from SALT team. Consider referral to ISCAN Speech and Language therapy for further	assessment.co. uk/assessments/products/wellco mm). Word Aware (supporting the understanding of new vocabulary) Word Aware – Thinking Talking (thinkingtalking.co. uk/word-aware). Blacksheep Press resources BSP, speech & language resources for schools, therapists & parents (blacksheeppress.co. uk). Nuffield Early Language Intervention (NELI) (speechandlanguage.org. uk/what-works/nuffield-early-lang uage-intervention-neli). Language for Thinking an approach aimed at developing the verbal reasoning and thinking skills of children aged 4-11 through drawings, written scenarios, and questions. (thinkingtalking.co. uk/language-for-thinking). Language Builders 11-16 Elklan	



	support: Children's Speech and Language Therapy :: Tameside Children and Young People (tamesidechildrenandyoungpeople.nhs.uk/our-services/childrens-salt).	Tales Toolkit An online package of resources to develop children's skills in story development and sequencing in small groups. (talestoolkit.com). Victoria Joffe Narrative Intervention programme – This resource helps support the understanding and telling of stories in secondary school students Colourful Stories (ELKLAN) is a visual support strategy which helps children to learn about the structure of stories and to become more confident about telling and writing stories. Colourful Stories encourages oral-narrative skills and introduces written words only when the child is confident about how to structure and tell a story orally. (elklan.co.uk/Shop/Colourful_Stories). For all students requiring access to alternative communication systems, referral to ISCAN Speech and	



		Language Therapy is required. Additional resources and support for aided language modelling, choice boards and core word teaching are available on: The Ace Centre: Resources | Ace Centre *(acecentre.org.uk/resources)*. AssistiveWare: AAC Resources - AssistiveWare *(assistiveware.com/resources)*. Complete a one-page profile on communication styles to share with all members of staff. Access Mainstream Schools Forum for further, specific advice and strategies *(tamesidelocaloffer.co.uk/wp-content/uploads/2025/12/School-forum.pdf)*. Consider referral to ISCAN Speech and Language therapy for further support and advice around targeted resources Children's Speech and Language Therapy ::	



		Tameside Children and Young People *(tamesidechildrenandyoungpeople.nhs.uk/our-services/childrens-salt).* Consult with/refer to specialist services (ISCAN SALT, SEND, TSOSS) for any immediate concerns e.g. Breakdown in placements, risk of exclusion, complex safeguarding issues. Developmental Language Disorder (DLD) When children experience persistent difficulties with using and/or understanding language with no known cause, this is referred to as DLD. This can affect up to 2 in every 30 children and often impacts on children's learning and overall communication skills from starting in childhood and persisting into adulthood. *(tamesidelocaloffer.co.uk/wp-*	



		content/uploads/2025/12/Fact-Sheet-RADLD-1.pdf). Support children with DLD by working alongside the Speech and Language therapy team including following advice and strategies and carrying out advised targeted interventions. Refer to the DLD website for further guidance: (*RADLD.org*). *(speechandlanguage.org.uk/help-for-families/developmental-language-disorder-awareness).*	
Expressive Language - stammering	Classroom Create a communication friendly classroom (see above) Individual Pupil Stammering can be very common in children ages 3-5 years, particularly when they are developing their language skills. Typically, development stammering will naturally resolve within 12 months. For some children,	Create a communication friendly classroom (see above) Ensure the following strategies are in place and that all teaching staff /adults within the school setting are aware of how to support stammering *(tamesidelocaloffer.co.uk/wp-content/uploads/2025/12/Stammering-Advice-for-Teaching-Staff-1.pdf).*	Create a communication friendly classroom (see above) Ensure the following strategies are in place and that all teaching staff/adults within the school setting are aware of how to support stammering *(tamesidelocaloffer.co.uk/wp-content/uploads/2025/12/Stammering-Advice-for-Teaching-Staff-1.pdf).*

	stammering is something that may persist into later childhood and adulthood. Ensure the following strategies are in place and that all teaching staff /adults within the school setting are aware of how to support stammering *(tamesidelocaloffer.co.uk/wp-content/uploads/2025/12/Stammering-Advice-for-Teaching-Staff-1.pdf).* Seek support from websites such as www.stamma.org www.actionforstammeringchildren.org Consider referral to Speech and Language therapy if stammer persists, The child/ young people becomes aware/ concerned about it/ family are concerned about it Children's Speech and Language	School to complete a one-page profile on communication styles to share with all members of staff. Seek support from websites such as www.stamma.org www.actionforstammeringchildren.org. Education are also able to sign up to the Stammer awareness toolkit. Consider setting up small group work around building confidence and resilience skills if appropriate to child/young person. Refer to Speech and Language therapy for further advice/support around stammering Children's Speech and Language Therapy :: Tameside Children and Young People *(tamesidechildrenandyoungpeople.nhs.uk/our-services/childrens-salt).*	Seek support from websites such as: www.stamma.org www.actionforstammeringchildren.org Consider setting up small group work around building confidence and resilience skills if appropriate to child/young person. Refer to Speech and Language therapy for further advice/support around stammering Children's Speech and Language Therapy :: Tameside Children and Young People *(tamesidechildrenandyoungpeople.nhs.uk/our-services/childrens-salt).* Consider referral to Mental health services to support child/young person with significant anxiety.

	Therapy :: Tameside Children and Young People *(tamesidechildrenandyoungpeople.nhs.uk/our-services/childrens-salt).*		
Expressive Language – speech sounds	Whole School Consult Royal College of Speech and Language Therapy website for information on which age we would expect sounds to be developed by Clinical information on speech sound disorders | RCSLT *(rcslt.org/speech-and-language-therapy/clinical-information/speech-sound-disorders).*	Consult Royal College of Speech and Language Therapy website for information on which age we would expect sounds to be developed by Clinical information on speech sound disorders | RCSLT *(rcslt.org/speech-and-language-therapy/clinical-information/speech-sound-disorders).*	Consult Royal College of Speech and Language Therapy website for information on which age we would expect sounds to be developed by Clinical information on speech sound disorders | RCSLT *(rcslt.org/speech-and-language-therapy/clinical-information/speech-sound-disorders).*
	Classroom Refer to advice sheets for working on speech sounds and use them in 1:1/small group activities. Video advice on producing /k/, /g/, /t/, /d/, /s/ blends is available here: Training :: Tameside Children and Young People *(tamesidechildrenandyoungpeople.nhs.uk/getting-help/training).*	Refer to advice sheets for working on speech sounds and use them in 1:1/small group activities. Advice sheets available for: Speech Sound Clusters Cluster Leaflet not group.pdf *(tamesidelocaloffer.co.uk/wp-content/uploads/2026/03/Cluster-Leaflet-not-group.pdf).*	Refer to advice sheets for working on speech sounds and use them in 1:1/small group activities. Advice sheets available for: Speech Sound Clusters Cluster Leaflet not group.pdf *(tamesidelocaloffer.co.uk/wp-content/uploads/2026/03/Cluster-Leaflet-not-group.pdf).*

	For a general overview on how to support early speech sounds youtu.be/yNQN4sWaUsI?si=F-AY-lu-49fdkZh5 (Great Western Hospitals NHS Foundation Trust) Individual Pupil Enquire whether the child has had a hearing test/check whether there are concerns regarding hearing and refer to Audiology as appropriate Paediatric Audiology :: Tameside and Glossop Integrated Care *(tamesideandglossopicft.nhs.uk/services/audiology/paediatric-audiology).* Refer to Speech and Language therapy for further advice/support around speech sounds Children's Speech and Language Therapy :: Tameside Children and Young People *(tamesidechildrenandyoungpeople.nhs.uk/our-services/childrens-salt).*	Fronting/Backing (/t/,/d/,/k/,/g/) F&B not group.pdf *(tamesidelocaloffer.co.uk/wp-content/uploads/2026/03/FB-not-group.pdf).* Final Consonant Deletion FCD not group.pdf *(tamesidelocaloffer.co.uk/wp-content/uploads/2026/03/FCD-not-group.pdf).* Practicing Speech Sounds in Words practicing speech sounds in words.pdf *(tamesidelocaloffer.co.uk/wp-content/uploads/2026/03/practicing-speech-sounds-in-words.pdf).* Speech Sound Awareness Phonological Awareness.pdf *(tamesidelocaloffer.co.uk/wp-content/uploads/2026/03/Phonological-Awareness.pdf).* Video advice on producing /k/, /g/, /t/, /d/, /s/ blends is available here: Training :: Tameside Children and	Fronting/Backing (/t/,/d/,/k/,/g/) F&B not group.pdf *(tamesidelocaloffer.co.uk/wp-content/uploads/2026/03/FB-not-group.pdf).* Final Consonant Deletion FCD not group.pdf *(tamesidelocaloffer.co.uk/wp-content/uploads/2026/03/FCD-not-group.pdf).* Practicing Speech Sounds in Words practicing speech sounds in words.pdf *(tamesidelocaloffer.co.uk/wp-content/uploads/2026/03/practicing-speech-sounds-in-words.pdf).* Speech Sound Awareness Phonological Awareness.pdf *(tamesidelocaloffer.co.uk/wp-content/uploads/2026/03/Phonological-Awareness.pdf).* Video advice on producing /k/, /g/, /t/, /d/, /s/ blends is available here: Training :: Tameside Children and

		Young People *(tamesidechildrenandyoungpeople.nhs.uk/getting-help/training).* As in Phonics, when working on speech sounds use a physical prompt and/or symbol to remind the child of what the target sound is. Carry out interventions as directed by SALT. For a general overview on how to support early speech sounds *youtu.be/yNQN4sWaUsI?si=F-AY-lu-49fdkZh5* (Great Western Hospitals NHS Foundation Trust) Enquire whether the child has had a hearing test/check whether there are concerns regarding hearing and refer to Audiology as appropriate Paediatric Audiology :: Tameside	Young People *(tamesidechildrenandyoungpeople.nhs.uk/getting-help/training).* Carry out interventions as directed by SALT. If Augmentative and Augmentative Communication is required to support communication liaise with Speech and Language Therapy through referral or contact The ACE Centre Ace Centre | Charity specialising in AAC & Assistive Technology *(acecentre.org.uk/resources).* For a general overview on how to support early speech sounds *youtu.be/yNQN4sWaUsI?si=F-AY-lu-49fdkZh5* (Great Western Hospitals NHS Foundation Trust) Enquire whether the child has had a hearing test/check whether there are

		and Glossop Integrated Care *(tamesideandglossopicft.nhs.uk/services/audiology/paediatric-audiology).* Refer to Speech and Language therapy for further advice/support around speech sounds Children's Speech and Language Therapy :: Tameside Children and Young People *(tamesidechildrenandyoungpeople.nhs.uk/our-services/childrens-salt).*	concerns regarding hearing and refer to Audiology as appropriate Paediatric Audiology :: Tameside and Glossop Integrated Care *(tamesideandglossopicft.nhs.uk/services/audiology/paediatric-audiology).* A referral to ENT may also be appropriate if there is a 'blocked nose' quality to the speech or if you are hearing a 'snort' rather than the target sound. Refer to Speech and Language therapy for further advice/support around speech sounds Children's Speech and Language Therapy :: Tameside Children and Young People *(tamesidechildrenandyoungpeople.nhs.uk/our-services/childrens-salt).*
Understanding of Language	Whole School Access Language Friendly Classrooms Training delivered by ISCAN SALT team	Continue to embed Communication Friendly Classroom strategies	Continue to embed Communication Friendly Classroom strategies Multi-agency assessment to identify persistent and complex needs (e.g.

	ISCAN Language Friendly Classrooms training *(youtube.com/watch?v=4MV_6wD1eAM)*. Schools to have access to a robust, consistent symbol based system to support all children. Examples of these include Boardmaker, Twinkl and Widget (cost included to purchase) Access Mainstream Schools Forum for general advice and strategies *(tamesidelocaloffer.co.uk/wp-content/uploads/2025/12/School-forum.pdf)*. Refer to specialist services (ISCAN SALT EP) for any immediate concerns e.g. breakdown in placements, risk of exclusion, complex safeguarding issues.	Embed more targeted approaches to the whole classroom and support carry over to curriculum based activities within the classroom. Consider carrying out targeted interventions in small groups to support understanding of language. Examples of these may include: Understanding Narratives Narrative Training 2023 *(youtube.com/watch?v=inKr_jFGTXU)*. Understanding Vocabulary Vocabulary training (Part 1) *(youtube.com/watch?v=6sLQO9-ykVY)*. Vocabulary training (Part 2) *(youtube.com/watch?v=MzUz5eBhVmo)*. Understanding Information carrying words. Information Carrying Words training	access advice from external services such Children's Speech and Language Therapy :: Tameside Children and Young People and the Tameside Educational Psychology Service), to tailor programmes and activities to support their speech and language development, including attention and listening skills and understanding of language skills. ISCAN Speech and Language Therapy *(tamesidechildrenandyoungpeople.nhs.uk/our-services/childrens-salt)*. Tameside Educational Psychology Service *(tameside.gov.uk/Education/Educational-Psychology-Service)*. School staff deliver and support daily, individualised targeted interventions, based on support and guidance from external services. Certain interventions may require

	Classroom Create a communication friendly classroom offering focused support and prompts/cues from adults to supplement children's understanding and participation in activities. A Language Friendly Classroom Handout *(tamesidechildrenandyoungpeople.nhs.uk/application/files/2016/7111/4562/a_language_friendly_classroom.pdf)*. Access Supporting Language in the Primary Classroom Training delivered by EP team. Refer to visual support advice sheets and resources, make appropriate resources and embed into all classroom activities. If struggling to embed use of visuals across all environments, consider accessing further help from SALT team. Included in the link below are	*(youtube.com/watch?v=wefMZo-ds6k)*. Understanding questions and Blank levels Blank Levels training *(youtube.com/watch?v=tOoMCyaOoyw)*. Schools to consider purchasing a targeted evidence-based language intervention to support understanding of language e.g. Wellcomm screening toolkit and intervention (The Big Book of Ideas). *Age ranges available 6 months – 6 years (Early Years) and 6 -11 years (Primary)* WellComm - GL Assessment *(gl-assessment.co.uk/assessments/products/wellcomm)*. Word Aware *(supporting the understanding of new vocabulary*)	specialist training from the ISCAN Speech and Language Therapy Team. Developmental Language Disorder (DLD) When children experience persistent difficulties with using and/or understanding language with no known cause, this is referred to as DLD. This can affect up to 2 in every 30 children and often impacts on children's learning and overall communication skills from starting in childhood and persisting into adulthood. *(tamesidelocaloffer.co.uk/wp-content/uploads/2025/12/Fact-Sheet-RADLD-1.pdf)*. Education staff should support children with DLD by working alongside the Speech and Language therapy team including following advice and

	examples of first/then boards, visual timetables, traffic lights and communication boards. Visuals Downloadable Pack *(tamesidechildrenandyoungpeople.nhs.uk/application/files/7816/7758/3454/Visuals_Pack_UPDATED_FEB_23.pdf)*. Individual Pupil Consider referral to ISCAN Speech and Language therapy for further support Children's Speech and Language Therapy :: Tameside Children and Young People *(tamesidechildrenandyoungpeople.nhs.uk/our-services/childrens-salt)*.	Word Aware – Thinking Talking *(thinkingtalking.co.uk/word-aware)*. Blacksheep Press resources BSP, speech & language resources for schools, therapists & parents *(blacksheeppress.co.uk)*. Nuffield Early Language Intervention (NELI) *(speechandlanguage.org.uk/what-works/nuffield-early-language-intervention-neli)*. School to complete a one page profile to share with all members of staff. Access Mainstream Schools Forum for further, specific advice and strategies *(tamesidelocaloffer.co.uk/wp-content/uploads/2025/12/School-forum.pdf)*.	strategies and carrying out advised targeted interventions Education staff should also refer to the DLD website for further guidance RADLD *(radld.org)*. Speech and Language UK – DLD awareness *(speechandlanguage.org.uk/help-for-families/developmental-language-disorder-awareness)*.



		Consider referral to ISCAN Speech and Language therapy for further support and advice around targeted resources Children's Speech and Language Therapy :: Tameside Children and Young People *(tamesidechildrenandyoungpeople.nhs.uk/our-services/childrens-salt)*. Refer to specialist services (ISCAN SALT) for any immediate concerns e.g. Breakdown in placements, risk of exclusion, complex safeguarding issues. Developmental Language Disorder (DLD) When children experience persistent difficulties with using and/or understanding language with no known cause, this is referred to as DLD. This can affect up to 2 in every 30 children and often impacts on children's learning and overall communication skills	



		from starting in childhood and persisting into adulthood. *(tamesidelocaloffer.co.uk/wp-content/uploads/2025/12/Fact-Sheet-RADLD-1.pdf).* Education staff should support children with DLD by working alongside the Speech and Language therapy team including following advice and strategies and carrying out advised targeted interventions Education staff should also refer to the DLD website for further guidance RADLD *(radld.org)*. Speech and Language UK – DLD awareness *(speechandlanguage.org.uk/help-for-families/developmental-language-disorder-awareness).*	

Situational mutism/ situational speaking *Speaking fluently in some situations but remaining silent in others*	Whole School Staff have an awareness of situational mutism and understand it is an anxiety-based need. Key staff have access to information about how to support children with situational mutism from online resources including: SMiRA website. *(selectivemutism.org.uk/about-selective-mutism).* Home | Situational Mutism Association Do's & Don'ts at Secondary School - SMIRA *(selectivemutism.org.uk/info-dos-donts-at-secondary-school).* School transition Plan - SMIRA *(selectivemutism.org.uk/info-transition-plan).* Supporting friendships - SMIRA *(selectivemutism.org.uk/info-playdates).*	Referral to ISCAN Speech and Language therapy Children's Speech and Language Therapy :: Tameside Children and Young People. Speech and language therapists will assess receptive language and provide support in this area if required. A language sample from home may also be requested to observe the child's spoken language skills. If receptive language skills fall within typical limits, the pupil will be referred to CAMHS for support with Situational Mutism. If they fall below typical limits, targets will be set to support this and a referral can also be made to CAMHS. *(tamesidechildrenandyoungpeople.nhs.uk/our-services/childrens-salt).* For support in developing a step by step plan refer to Educational Psychology Education Psychology Service - Information for Parents -	Join the Greater Manchester Situational Mutism Network. *(gmsmn.wordpress.com)* *Use of the 'Sliding in Technique' detailed in The Situational Mutism Resource and included on the SMiRA website: (situationalmutism.org.uk/info-the-sliding-in-technique-and-progress-charts).* *The steps can be accomplished either in a single session or over 2–3 weeks. This involves an adult (parent or staff member) as the child's talk partner. Activities are completed on a regular basis within the child's talk partner in a safe and quiet area of the setting. The activity should be simple and involve something that the child enjoys and is familiar with (e.g. a favourite game or book from home). As the child becomes confident, their tolerance to another person gradually coming closer and joining the activity ('sliding in') is increased.*

	School staff to ensure all forms of communication are accepted, including: Pen/paper Whiteboard (if strong writing skills) Communication boards - Visuals Downloadable Pack *(tamesidechildrenandyoungpeople.nhs.uk/application/files/7816/7758/3454/Visuals_Pack_UPDATED_FEB_23.pdf)*. Use of body language; nodding/shaking head, thumbs up/thumbs down, pointing. As SM is an anxiety based need, please refer to SEMH strategies for strategies to support managing anxiety. Classroom Establish a communication friendly environment for children/young people with situational mutism Engage through physical activity and creative projects.	Tameside MBC *(Tameside Educational Psychology Service (tameside.gov.uk/Education/Educational-Psychology-Service)*. As SM is an anxiety based need please refer to SEMH strategies for strategies to support managing anxiety.	For support in developing a step by step plan refer to Educational Psychology Education Psychology Service - Information for Parents - Tameside MBC *(tameside.gov.uk/Education/Educational-Psychology-Service)*. As SM is an anxiety based need please refer to SEMH strategies for strategies to support managing anxiety.



	Support friendships with other children. Encourage them to sit, work or play with friends they talk to in other settings. Organise activities in which children move, sing or talk in unison and activities/games which do not require speech. Encouraging participation through 'show' rather than 'tell'. Providing traffic lights or 'ask for help' cards to allow them to access support non-verbally. <u>Individual Pupil</u> Providing unpressured opportunities for the child to speak. Don't react if the child does speak. If the child whispers or uses gesture, talk back in a natural way. Use commentary style questions and comments. Avoid direct questions. Talk to the child about what you are doing, without expecting an answer.		



	Identifying a key adult for the child to build rapport and confidence with. Find time at school for periods of unpressured 1: 1 time. Encourage independence and ensure success. Rather than doing things for the child, do things with them initially and then withdraw, or make things easier. Carefully support the child's transition between year groups.		



Key Stage Four

SKILL	WHAT TO DO FIRST *Identifying and supporting need*	ASKING FOR HELP *Starting Assess, Plan, Do, Review*	WHEN MORE HELP IS NEEDED *Targeted support*
Social Communication *Pupils with social communication needs can often have sensory processing differences – please also see the Sensory and/or Physical Needs section*	<u>Whole School:</u> Schools to have access to a robust, consistent symbol-based system to support all children and provide communication opportunities. Examples of these include Boardmaker, Twinkl and Widget (cost included to purchase) Access Mainstream Schools Forum for general advice and strategies *(tamesidelocaloffer.co.uk/wp-content/uploads/2025/12/School-forum.pdf).* School staff to refer to specialist services (ISCAN SALT) for any immediate concerns e.g. breakdown in placements, risk of exclusion, complex safeguarding issues.	Provide a personalised curriculum allowing flexibility in the organisation of the learning environment and the school day. For example, you could offer access to a low stimulus, distraction-free base either within or outside of the classroom for certain tasks. Adapt group and individual activities in line with the individual's sensory needs and communication and interaction profile. Consider carrying out targeted interventions in individual or small groups to support interaction and communication: <u>Attention Autism</u> <u>Home - Attention Autism Ltd | UK & Ireland</u> an intervention model	Provide a more personalised curriculum allowing increased flexibility in the organisation of the learning environment and the school day, (e.g. offering access to additional adult support to enable the child to participate in the less structured parts of the school day such as break time, and provide access to a quiet, distraction-free place in school if a child feels anxious, ensuring access to a safe and trusted key person). Regular staff briefings, linking in with families where possible, centred around the child's strengths and support needs, particularly if multiple staff members are involved in support (e.g. sharing and updating the One Page Profile, discussing

	Classroom: Establish consistent and predictable routines. Refer to advice and visual resources to support routines and transitions as a full class approach: Using visual supports such as first-then boards and visual schedules *(tamesidelocaloffer.co.uk/wp-content/uploads/2025/12/using-visual-timetables-schedules.pdf)*. Transition cues (verbal warnings, transition songs, timers, traffic lights) *(tamesidelocaloffer.co.uk/wp-content/uploads/2025/12/Supporting-Transitions.pdf)*. Using start / finished task boxes, task lists. Ensure expectations of tasks are clear. Prepare for upcoming changes to routine, supported by visual aids (e.g., symbols, photos, drawing) Encourage a total communication approach and accept all forms of	which aims to develop natural and spontaneous communication through the use of visually based and highly motivating activities. *(attentionautism.co.uk)*. Blacksheep Press resources BSP, speech & language resources for schools, therapists & parents *(blacksheeppress.co.uk)*. Resources around building inferencing, situational and social awareness. TalkAbout a programme aimed at developing self- esteem, as well as social and friendship skills. *(winslowresources.com/specific-needs/the-talkabout-series.html)*. Lego Therapy an intervention to help improve social competence while conducting fun, naturally rewarding Lego clubs. Speech and Language offer training on Lego Therapy. Social Stories – can be created to provide children with a concrete	therapy plans, ensuring training completed). Multi-agency assessment to identify persistent and complex needs (e.g. access advice from external services such as SEN TSOSS, Children's Speech and Language Therapy :: Tameside Children and Young People and the Tameside Educational Psychology Service), to tailor programmes and activities to support their communication development. Multi-agency assessment to highlight any onward referrals required (e.g., diagnostic multi-disciplinary teams such as MAAT, Paediatrician) ISCAN Speech and Language Therapy *(tamesidechildrenandyoungpeople.nhs.uk/our-services/childrens-salt)*. Tameside Educational Psychology Service

	communication (e.g., spoken, gesture, signs, written word, Alternative and Augmentative Communication, AAC). Recognise that 'good listening' and 'good looking' may look different for everyone. Don't expect eye contact or sitting still. Sensory or movement breaks are incorporated into lessons. Try to avoid the use of non-literal language (e.g. idioms and sarcasm) and explain any abstract concepts in as concrete a way as possible (e.g. with pictures or objects). Refer to advice sheets and resources for interaction and communication strategies and embed into all classroom activities. Visuals available for: Creating communication opportunities:	way to prepare for future situations, or better understand social situations. It is important that these follow the official and recommended format. Consider consultation with ISCAN SLT for further support in generating these. *(tamesidechildrenandyoungpeople.nhs.uk/our-services/childrens-salt)*. Comic Strip Conversations: can be used as a visual teaching tool to explore situations and others perspectives: *(tamesidelocaloffer.co.uk/wp-content/uploads/2025/12/comic-strip-conversations.pdf)*. Zones of Regulation is an intervention that supports the development of self-regulation and emotional control. Speech and Language offer training on Zones of Regulation	*(tameside.gov.uk/Education/Educational-Psychology-Service)*. School staff deliver and support daily, individualised targeted interventions, based on support and guidance from external services. Certain interventions may require specialist training from the ISCAN Speech and Language Therapy Team. Use of a robust, bespoke high or low AAC system, embedded within all routine and learning activities, accessible at all times to the student with specialist training, targets and support from the ISCAN Speech and Language Therapy Team. ISCAN SLT may complete onward referral for external specialist services (e.g., The ACE Centre). The ACE Centre *(acecentre.org.uk/resources)*

	(youtube.com/watch?v=8eaKqRvvUrw). Activity specific communication boards for aided language modelling: *(tamesidelocaloffer.co.uk/wp-content/uploads/2025/12/Communication-boards-for-settings.pdf).* Visuals pack – symbols and photos for aspects of the routine and areas in school: *(tamesidechildrenandyoungpeople.nhs.uk/application/files/7816/7758/3454/Visuals_Pack_UPDATED_FEB_23.pdf)* Helping children interact: *(tamesidelocaloffer.co.uk/wp-content/uploads/2025/12/helping-children-interact.pdf).* <u>Individual Pupil</u> Consult with key people in the child's life (e.g., parents, carers, previous settings, professionals currently involved) to understand individual current communication	(*youtube.com/watch?v=xtESfc5dJ_Y&t=14s).* The Incredible Five Point Scale – a tool to explore emotional regulation and tools to support this. Language for Behaviour and Emotions - practical, interactive resource to be used individually or in groups to support language, social and emotional development. Use of personalised visuals (e.g. objects of reference, photos and symbols, now/next, choice boards, activity boards, traffic lights, sand timers). Consider seeking further advice from the SALT team regarding personalisation and implementation of visuals. For all students requiring access to alternative communication	PECS (Picture Exchange) *(pecs-unitedkingdom.com/pecs)*

	skills, preferences, strengths and challenges. If struggling to embed and apply strategies, or more personalised, bespoke communication systems required, consider accessing further help from SALT team. Consider referral to ISCAN Speech and Language therapy for further support: Children's Speech and Language Therapy :: Tameside Children and Young People *(tamesidechildrenandyoungpeople.nhs.uk/our-services/childrens-salt).*	systems, referral to ISCAN Speech and Language Therapy is required. Additional resources and support for aided language modelling, choice boards and core word teaching are available on: The Ace Centre: Resources | Ace Centre *(acecentre.org.uk/resources).* AssistiveWare: AAC Resources - AssistiveWare *(assistiveware.com/resources).* Use of a Sensory Checklist – and environmental adaptations to minimise impact of sensory distractions and sensory processing differences (e.g. opportunities to work in quieter spaces with reduced distractions when completing focused activities, access to tailored sensory activities or resources).	

		assistiveware.com/resources *(tamesidelocaloffer.co.uk/education/sensory-toolkit)* Consider referral to ISCAN Speech and Language therapy for further support and advice around targeted resources Children's Speech and Language Therapy :: Tameside Children and Young People Consider referral to EPS for developing a personalised support plan. ISCAN Speech and Language Therapy *(tamesidechildrenandyoungpeople.nhs.uk/our-services/childrens-salt)*. Tameside Educational Psychology Service *(tameside.gov.uk/Education/Educational-Psychology-Service)*.	



Expressive Language	<u>Whole School:</u> Access to a robust, consistent symbol-based system to support all children and provide communication opportunities. Examples of these include Boardmaker, Twinkl and Widget (cost included to purchase) Access Mainstream Schools Forum for general advice and strategies *(tamesidelocaloffer.co.uk/wp-content/uploads/2025/12/School-forum.pdf)*. Refer to specialist services (ISCAN SALT) for any immediate concerns e.g. Breakdown in placements, risk of exclusion, complex safeguarding issues. *(tamesidechildrenandyoungpeople.nhs.uk/our-services/childrens-salt)*.	Continue to embed Communication Friendly Classroom strategies Embed more targeted approaches to the whole classroom and support carry over to curriculum-based activities within the classroom. Consider carrying out targeted interventions in small groups to support expressive language and communication. Examples of these may include: Using Narratives: <u>Narrative Training 2023</u> *(youtube.com/watch?v=inKr_jFGTXU)*. Developing Spoken Vocabulary: <u>Vocabulary training Part 1</u> *(youtube.com/watch?v=6sLQO9-ykVY)*.	

	Classroom Create a communication friendly classroom offering opportunities to continue to develop children's expressive language, vocabulary, grammar and participation in learning and social activities. 14-17 years - Speech and Language UK: Changing young lives *(speechandlanguage.org.uk/educators-and-professionals/ages-and-stages/14-17-years)*. Access Language Friendly Classrooms Training delivered by ISCAN SALT team: ISCAN Language Friendly Classrooms training *(youtube.com/watch?v=4MV_6wD1eAM)*. A Language Friendly Classroom Handout	Vocabulary training part 2 *(youtube.com/watch?v=MzUz5eBhVmo)*. Colourful Semantics to develop sentence structure: Colourful Semantics demonstration - YouTube *(youtube.com/watch?v=Se0gAOgfNvg)*. Introduction to Alternative and Augmentative Communication (AAC) (part 1): Introduction to AAC - YouTube *(youtube.com/watch?v=rGml4iF6QRA)*. Modelling and demo of AAC (part 2): Augmentative and Alternative Communication Training *(youtube.com/watch?v=-557ppkq92s)*. Consider purchasing a targeted evidence-based language intervention to support use of language	

	(tamesidechildrenandyoungpeople.nhs.uk/application/files/2016/7111/4562/a_language_friendly_classroom.pdf). Encourage a total communication approach and accept all forms of communication (e.g., spoken, gesture, signs, written word, Alternative and Augmentative Communication, AAC). Refer to advice sheets and visual support resources for expressive support and embed into all classroom activities. Visuals available for: Creating communication opportunities: *(youtube.com/watch?v=8eaKqRvvUrw).* Activity specific communication boards for aided language modelling: *(tamesidelocaloffer.co.uk/wp-*	Word Aware (supporting the understanding of new vocabulary) Word Aware – Thinking Talking *(thinkingtalking.co.uk/word-aware).* Blacksheep Press resources BSP, speech & language resources for schools, therapists & parents *(blacksheeppress.co.uk).* Nuffield Early Language Intervention (NELI) *(speechandlanguage.org.uk/what-works/nuffield-early-language-intervention-neli).* Language Builders 11-16 Elklan Tales Toolkit An online package of resources to develop children's skills in story development and sequencing in small groups. *(talestoolkit.com).* Victoria Joffe Narrative Intervention programme – This resource helps support the	

	content/uploads/2025/12/Communication-boards-for-settings.pdf). Supporting vocabulary knowledge and vocabulary checklist: (thinkingtalking.co.uk/word-aware) Supporting narrative skills: *(youtube.com/watch?v=inKr_jFGTXU)* Individual Pupil If struggling to embed and apply strategies, or more personalised, bespoke communication systems required, consider accessing further help from SALT team. Consider referral to ISCAN Speech and Language therapy for further support: Children's Speech and Language Therapy :: Tameside Children and Young People *(tamesidechildrenandyoungpeople.nhs.uk/our-services/childrens-salt).*	understanding and telling of stories in secondary school students Colourful Stories (ELKLAN) is a visual support strategy which helps children to learn about the structure of stories and to become more confident about telling and writing stories. Colourful Stories encourages oral-narrative skills and introduces written words only when the child is confident about how to structure and tell a story orally. *(elklan.co.uk/Shop/Colourful_Stories).* For all students requiring access to alternative communication systems, referral to ISCAN Speech and Language Therapy is required. Additional resources and support for aided language modelling, choice boards and core word teaching are available on:	

		The Ace Centre: Resources | Ace Centre *(acecentre.org.uk/resources)*. AssistiveWare: AAC Resources - AssistiveWare *(assistiveware.com/ resources)*. Complete a one-page profile on communication styles to share with all members of staff. Access Mainstream Schools Forum for further, specific advice and strategies *(tamesidelocaloffer.co.uk/wp-content/uploads/2025/12/School-forum.pdf)*. Consider referral to ISCAN Speech and Language therapy for further support and advice around targeted resources Children's Speech and Language Therapy :: Tameside Children and Young People Consult with/refer to specialist services (ISCAN SALT, SEND,	



		TSOSS) for any immediate concerns e.g. Breakdown in placements, risk of exclusion, complex safeguarding issues. *(tamesidechildrenandyoungpeople.nhs.uk/our-services/childrens-salt).* Developmental Language Disorder (DLD) When children experience persistent difficulties with using and/or understanding language with no known cause, this is referred to as DLD. This can affect up to 2 in every 30 children and often impacts on children's learning and overall communication skills from starting in childhood and persisting into adulthood. *(tamesidelocaloffer.co.uk/wp-content/uploads/2025/12/Fact-Sheet-RADLD-1.pdf).*	



		Support children with DLD by working alongside the Speech and Language therapy team including following advice and strategies and carrying out advised targeted interventions. Refer to the DLD website for further guidance: *www.RADLD.org* *www.speechandlanguage.org.uk/help-for-families/developmental-language-disorder-awareness*	
Expressive Language - stammering	Classroom Create a communication friendly classroom (see above) Individual Pupil Stammering can be very common in children ages 3-5 years, particularly when they are developing their language skills. Typically, development stammering will naturally resolve within 12 months. For some children, stammering is something that may	Create a communication friendly classroom (see above) Ensure the following strategies are in place and that all teaching staff /adults within the school setting are aware of how to support stammering *(tamesidelocaloffer.co.uk/wp-content/uploads/2025/12/Stammering-Advice-for-Teaching-Staff-1.pdf).*	Create a communication friendly classroom (see above) Ensure the following strategies are in place and that all teaching staff/adults within the school setting are aware of how to support stammering *(tamesidelocaloffer.co.uk/wp-content/uploads/2025/12/Stammering-Advice-for-Teaching-Staff-1.pdf).*

	persist into later childhood and adulthood. Ensure the following strategies are in place and that all teaching staff /adults within the school setting are aware of how to support stammering *(tamesidelocaloffer.co.uk/wp-content/uploads/2025/12/Stammering-Advice-for-Teaching-Staff-1.pdf).* Seek support from websites such as www.stamma.org www.actionforstammeringchildren.org Consider referral to Speech and Language therapy if stammer persists, The child/ young people becomes aware/ concerned about it/ family are concerned about it Children's Speech and Language Therapy :: Tameside Children and	School to complete a one-page profile on communication styles to share with all members of staff. Seek support from websites such as www.stamma.org www.actionforstammeringchildren.org. Education are also able to sign up to the Stammer awareness toolkit. Consider setting up small group work around building confidence and resilience skills if appropriate to child/young person. Refer to Speech and Language therapy for further advice/support around stammering Children's Speech and Language Therapy :: Tameside Children and Young People (tamesidechildrenandyoungpeopl	Seek support from websites such as: *www.stamma.org www.actionforstammeringchildren.org* Consider setting up small group work around building confidence and resilience skills if appropriate to child/young person. Refer to Speech and Language therapy for further advice/support around stammering Children's Speech and Language Therapy :: Tameside Children and Young People *(tamesidechildrenandyoungpeople.nhs.uk/our-services/childrens-salt).* Consider referral to Mental health services to support child/young person with significant anxiety.

	Young People *(tamesidechildrenandyoungpeople.nhs.uk/our-services/childrens-salt).*	e.nhs.uk/our-services/childrens-salt)	
Expressive Language – speech sounds	Whole School Consult Royal College of Speech and Language Therapy website for information on which age we would expect sounds to be developed by Clinical information on speech sound disorders | RCSLT *(rcslt.org/speech-and-language-therapy/clinical-information/speech-sound-disorders).* Classroom Refer to advice sheets for working on speech sounds and use them in 1:1/small group activities. Video advice on producing /k/, /g/, /t/, /d/, /s/ blends is available here: Training :: Tameside Children and Young People *(tamesidechildrenandyoungpeople.nhs.uk/getting-help/training).*	Consult Royal College of Speech and Language Therapy website for information on which age we would expect sounds to be developed by Clinical information on speech sound disorders | RCSLT Refer to advice sheets for working on speech sounds and use them in 1:1/small group activities. Advice sheets available for: Speech Sound Clusters Cluster Leaflet not group.pdf *(tamesidelocaloffer.co.uk/wp-content/uploads/2026/03/Cluster-Leaflet-not-group.pdf).* Fronting/Backing (/t/,/d/,/k/,/g/) F&B not group.pdf *(tamesidelocaloffer.co.uk/wp-*	Consult Royal College of Speech and Language Therapy website for information on which age we would expect sounds to be developed by Clinical information on speech sound disorders | RCSLT Refer to advice sheets for working on speech sounds and use them in 1:1/small group activities. Advice sheets available for: Speech Sound Clusters Cluster Leaflet not group.pdf Fronting/Backing (/t/,/d/,/k/,/g/) F&B not group.pdf Final Consonant Deletion FCD not group.pdf Practicing Speech Sounds in Words practicing speech sounds in words.pdf

	For a general overview on how to support early speech sounds *youtu.be/yNQN4sWaUsI?si=F-AY-lu-49fdkZh5* (Great Western Hospitals NHS Foundation Trust) Individual Pupil Enquire whether the child has had a hearing test/check whether there are concerns regarding hearing and refer to Audiology as appropriate Paediatric Audiology :: Tameside and Glossop Integrated Care *(tamesideandglossopicft.nhs.uk/services/audiology/paediatric-audiology).* Refer to Speech and Language therapy for further advice/support around speech sounds Children's Speech and Language Therapy :: Tameside Children and Young People	*content/uploads/2026/03/FB-not-group.pdf).* Final Consonant Deletion FCD not group.pdf *(tamesidelocaloffer.co.uk/wp-content/uploads/2026/03/FCD-not-group.pdf).* Practicing Speech Sounds in Words practicing speech sounds in words.pdf *(tamesidelocaloffer.co.uk/wp-content/uploads/2026/03/practicing-speech-sounds-in-words.pdf).* Speech Sound Awareness Phonological Awareness.pdf *(tamesidelocaloffer.co.uk/wp-content/uploads/2026/03/Phonological-Awareness.pdf).* Video advice on producing /k/, /g/, /t/, /d/, /s/ blends is available here: Training :: Tameside Children and Young People *(tamesidechildrenandyoungpeople.nhs.uk/getting-help/training).*	Speech Sound Awareness Phonological Awareness.pdf Video advice on producing /k/, /g/, /t/, /d/, /s/ blends is available here: Training :: Tameside Children and Young People Carry out interventions as directed by SALT. If Augmentative and Augmentative Communication is required to support communication liaise with Speech and Language Therapy through referral or contact The ACE Centre Ace Centre | Charity specialising in AAC & Assistive Technology *(acecentre.org.uk/resources).* For a general overview on how to support early speech sounds *youtu.be/yNQN4sWaUsI?si=F-AY-lu-*

	(tamesidechildrenandyoungpeople.nhs.uk/our-services/childrens-salt).	As in Phonics, when working on speech sounds use a physical prompt and/or symbol to remind the child of what the target sound is. Carry out interventions as directed by SALT. For a general overview on how to support early speech sounds youtu.be/yNQN4sWaUsI?si=F-AY-lu-49fdkZh5 (Great Western Hospitals NHS Foundation Trust) Enquire whether the child has had a hearing test/check whether there are concerns regarding hearing and refer to Audiology as appropriate Paediatric Audiology :: Tameside and Glossop Integrated Care *(tamesideandglossopicft.nhs.uk/ser*	*49fdkZh5* (Great Western Hospitals NHS Foundation Trust) Enquire whether the child has had a hearing test/check whether there are concerns regarding hearing and refer to Audiology as appropriate Paediatric Audiology :: Tameside and Glossop Integrated Care *(tamesideandglossopicft.nhs.uk/services/audiology/paediatric-audiology).* A referral to ENT may also be appropriate if there is a 'blocked nose' quality to the speech or if you are hearing a 'snort' rather than the target sound. Refer to Speech and Language therapy for further advice/support around speech sounds Children's Speech and Language Therapy :: Tameside Children and Young People



		vices/audiology/paediatric-audiology). Refer to Speech and Language therapy for further advice/support around speech sounds Children's Speech and Language Therapy :: Tameside Children and Young People *(tamesidechildrenandyoungpeople.nhs.uk/our-services/childrens-salt).*	*(tamesidechildrenandyoungpeople.nhs.uk/our-services/childrens-salt).*
Understanding of Language	Whole School Access Language Friendly Classrooms Training delivered by ISCAN SALT team ISCAN Language Friendly Classrooms training *(youtube.com/watch?v=4MV_6wD1eAM).* Schools to have access to a robust, consistent symbol based system to support all children. Examples of these include Boardmaker, Twinkl	Continue to embed Communication Friendly Classroom strategies Embed more targeted approaches to the whole classroom and support carry over to curriculum based activities within the classroom. Consider carrying out targeted interventions in small groups to	Continue to embed Communication Friendly Classroom strategies Multi-agency assessment to identify persistent and complex needs (e.g. access advice from external services such Children's Speech and Language Therapy :: Tameside Children and Young People and the Tameside Educational Psychology Service), to tailor programmes and activities to support their speech and

	and Widget (cost included to purchase) Access Mainstream Schools Forum for general advice and strategies *(tamesidelocaloffer.co.uk/wp-content/uploads/2025/12/School-forum.pdf)*. Refer to specialist services (ISCAN SALT EP) for any immediate concerns e.g. breakdown in placements, risk of exclusion, complex safeguarding issues. Classroom Create a communication friendly classroom offering focused support and prompts/cues from adults to supplement children's understanding and participation in activities. 14-17 years - Speech and Language UK: Changing young lives	support understanding of language. Examples of these may include: Understanding Narratives Narrative Training 2023 *(youtube.com/watch?v=inKr_jFGTXU)*. Understanding Vocabulary Vocabulary training (Part 1) *(youtube.com/watch?v=6sLQO9-ykVY)*. Vocabulary training (Part 2) *(youtube.com/watch?v=MzUz5eBhVmo)*. Understanding Information carrying words. Information Carrying Words training *(youtube.com/watch?v=wefMZo-ds6k)*. Understanding questions and Blank levels Blank Levels training *(youtube.com/watch?v=tOoMCyaOoyw)*.	language development, including attention and listening skills and understanding of language skills. ISCAN Speech and Language Therapy *(tamesidechildrenandyoungpeople.nhs.uk/our-services/childrens-salt)*. Tameside Educational Psychology Service *(tameside.gov.uk/Education/Educational-Psychology-Service)*. School staff deliver and support daily, individualised targeted interventions, based on support and guidance from external services. Certain interventions may require specialist training from the ISCAN Speech and Language Therapy Team. Developmental Language Disorder (DLD) When children experience persistent difficulties with using and/or understanding language with no

	(speechandlanguage.org.uk/educators-and-professionals/ages-and-stages/14-17-years). A Language Friendly Classroom Handout *(tamesidechildrenandyoungpeople.nhs.uk/application/files/2016/7111/4562/a_language_friendly_classroom.pdf).* Refer to visual support advice sheets and resources, make appropriate resources and embed into all classroom activities. If struggling to embed use of visuals across all environments, consider accessing further help from SALT team. Included in the link below are examples of first/then boards, visual timetables, traffic lights and communication boards. Visuals Downloadable Pack *(tamesidechildrenandyoungpeople.n*	Schools to consider purchasing a targeted evidence-based language intervention to support understanding of language. Word Aware *(supporting the understanding of new vocabulary)* Word Aware – Thinking Talking *(thinkingtalking.co.uk/word-aware).* Blacksheep Press resources BSP, speech & language resources for schools, therapists & parents *(blacksheeppress.co.uk).* Nuffield Early Language Intervention (NELI) *(speechandlanguage.org.uk/what-works/nuffield-early-language-intervention-neli).* School to complete a one page profile to share with all members of staff.	known cause, this is referred to as DLD. This can affect up to 2 in every 30 children and often impacts on children's learning and overall communication skills from starting in childhood and persisting into adulthood. *(tamesidelocaloffer.co.uk/wp-content/uploads/2025/12/Fact-Sheet-RADLD-1.pdf).* Education staff should support children with DLD by working alongside the Speech and Language therapy team including following advice and strategies and carrying out advised targeted interventions Education staff should also refer to the DLD website for further guidance RADLD *(radld.org).* Speech and Language UK – DLD awareness

	hs.uk/application/files/7816/7758/3454/Visuals_Pack_UPDATED_FEB_23.pdf) Individual Pupil Follow ISCAN Speech and Language Therapy team's Language and Communication Standard for Reception aged children: Language and Communication Standard *(tamesidechildrenandyoungpeople.nhs.uk/application/files/9516/7589/2164/updated_standard.pdf).* Consider referral to ISCAN Speech and Language therapy for further support Children's Speech and Language Therapy :: Tameside Children and Young People *(tamesidechildrenandyoungpeople.nhs.uk/our-services/childrens-salt).*	Access Mainstream Schools Forum for further, specific advice and strategies *(tamesidelocaloffer.co.uk/wp-content/uploads/2025/12/School-forum.pdf).* Consider referral to ISCAN Speech and Language therapy for further support and advice around targeted resources Children's Speech and Language Therapy :: Tameside Children and Young People *(tamesidechildrenandyoungpeople.nhs.uk/our-services/childrens-salt).* Refer to specialist services (ISCAN SALT) for any immediate concerns e.g. Breakdown in placements, risk of exclusion, complex safeguarding issues.	*(speechandlanguage.org.uk/help-for-families/developmental-language-disorder-awareness).*



		Developmental Language Disorder (DLD) When children experience persistent difficulties with using and/or understanding language with no known cause, this is referred to as DLD. This can affect up to 2 in every 30 children and often impacts on children's learning and overall communication skills from starting in childhood and persisting into adulthood. *(tamesidelocaloffer.co.uk/wp-content/uploads/2025/12/Fact-Sheet-RADLD-1.pdf)*. Education staff should support children with DLD by working alongside the Speech and Language therapy team including following advice and strategies and carrying out advised targeted interventions	



		Education staff should also refer to the DLD website for further guidance *www.RADLD.org* *www.speechandlanguage.org.uk/help-for-families/developmental-language-disorder-awareness* Education staff to access Supporting Language in the Primary Classroom Training delivered by EP team.	
Situational mutism/ situational speaking *Speaking fluently in some situations but remaining silent in others*	Whole School Staff have an awareness of situational mutism and understand it is an anxiety-based need. Key staff have access to information about how to support children with situational mutism from online resources including: SMiRA website *(selectivemutism.org.uk/about-selective-mutism).*	Referral to ISCAN Speech and Language therapy Children's Speech and Language Therapy :: Tameside Children and Young People. Speech and language therapists will assess receptive language and provide support in this area if required. A language sample from home may also be requested to observe the child's spoken language skills. If receptive language skills fall	Join the Greater Manchester Situational Mutism Network. *(gmsmn.wordpress.com).* Use of the 'Sliding in Technique' detailed in The Situational Mutism Resource and included on the SMiRA website: *(selectivemutism.org.uk/info-the-sliding-in-technique-and-progress-charts).* The steps can be accomplished either in a single session or over 2–3 weeks. This

	Home | Situational Mutism Association Do's & Don'ts at Secondary School - SMIRA *(selectivemutism.org.uk/info-dos-donts-at-secondary-school).* School transition Plan - SMIRA *(selectivemutism.org.uk/info-transition-plan).* Supporting friendships - SMIRA *(selectivemutism.org.uk/info-playdates).* School staff to ensure all forms of communication are accepted, including: Pen/paper Whiteboard (if strong writing skills) Communication boards - Visuals Downloadable Pack *(tamesidechildrenandyoungpeople.nhs.uk/application/files/7816/7758/3454/Visuals_Pack_UPDATED_FEB_23.pdf).*	within typical limits, the pupil will be referred to CAMHS for support with Situational Mutism. If they fall below typical limits, targets will be set to support this and a referral can also be made to CAMHS. *(tamesidechildrenandyoungpeople.nhs.uk/our-services/childrens-salt).* For support in developing a step by step plan refer to Educational Psychology Education Psychology Service - Information for Parents - Tameside MBC *(tameside.gov.uk/Education/Educational-Psychology-Service).* As SM is an anxiety based need please refer to SEMH strategies for strategies to support managing anxiety.	involves an adult (parent or staff member) as the child's talk partner. Activities are completed on a regular basis within the child's talk partner in a safe and quiet area of the setting. The activity should be simple and involve something that the child enjoys and is familiar with (e.g. a favourite game or book from home). As the child becomes confident, their tolerance to another person gradually coming closer and joining the activity ('sliding in') is increased. For support in developing a step by step plan refer to Educational Psychology Education Psychology Service - Information for Parents - Tameside MBC *(tameside.gov.uk/Education/Educational-Psychology-Service).* As SM is an anxiety based need please refer to SEMH strategies for

	Use of body language; nodding/shaking head, thumbs up/thumbs down, pointing. As SM is an anxiety based need, please refer to SEMH strategies for strategies to support managing anxiety. <u>Classroom</u> Establish a communication friendly environment for children/young people with situational mutism Engage through physical activity and creative projects. Support friendships with other children. Encourage them to sit, work or play with friends they talk to in other settings. Organise activities in which children move, sing or talk in unison and activities/games which do not require speech. Encouraging participation through 'show' rather than 'tell'.		strategies to support managing anxiety.



	Providing traffic lights or 'ask for help' cards to allow them to access support non-verbally <u>Individual Pupil</u> Providing unpressured opportunities for the child to speak. Don't react if the child does speak. If the child whispers or uses gesture, talk back in a natural way. Use commentary style questions and comments. Avoid direct questions. Talk to the child about what you are doing, without expecting an answer. Identifying a key adult for the child to build rapport and confidence with. Find time at school for periods of unpressured 1:1 time. Encourage independence and ensure success. Rather than doing things for the child, do things with them initially and then withdraw, or make things easier. Carefully support the child's transition between year groups.		

Helpful links

Social Communication

- Language and Communication Standard
  https://tamesidechildrenandyoungpeople.nhs.uk/application/files/9516/7589/2164/updated_standard.pdf
- Mainstream Schools Forum
  https://tamesidelocaloffer.co.uk/wp-content/uploads/2025/12/School-forum.pdf
- Early Years Forum
  https://tamesidelocaloffer.co.uk/wp-content/uploads/2025/12/Early-Years-Forum-Jan-2024.pdf
- Using visual timetables and schedules
  https://tamesidelocaloffer.co.uk/wp-content/uploads/2025/12/using-visual-timetables-schedules.pdf
- Supporting transitions
  https://tamesidelocaloffer.co.uk/wp-content/uploads/2025/12/Supporting-Transitions.pdf
- Creating opportunities to communicate (video)
  https://www.youtube.com/watch?v=8eaKqRvvUrw
- Activity specific communication boards
  https://tamesidelocaloffer.co.uk/wp-content/uploads/2025/12/Communication-boards-for-settings.pdf
- Visuals pack
  https://tamesidechildrenandyoungpeople.nhs.uk/application/files/4616/7171/6843/Visual_pack.pdf
- Helping children interact
  https://tamesidelocaloffer.co.uk/wp-content/uploads/2025/12/helping-children-interact.pdf
- Children's Speech and Language Therapy – Tameside
  https://tamesidechildrenandyoungpeople.nhs.uk/our-services/childrens-salt
- Tameside sensory toolkit
  https://tamesidelocaloffer.co.uk/education/sensory-toolkit



Expressive Language

- Creating a communication supportive environment (Early Years)
  https://speechandlanguage.org.uk/educators-and-professionals/resource-library-for-educators/creating-a-communication-supportive-environment-early-years
- Creating a communication supportive environment (Primary)
  https://speechandlanguage.org.uk/educators-and-professionals/resource-library-for-educators/creating-a-communication-supportive-environment-primary
- Language Friendly Classrooms training (ISCAN)
  https://www.youtube.com/watch?v=4MV_6wD1eAM
- Language Friendly Classroom handout
  https://tamesidechildrenandyoungpeople.nhs.uk/application/files/2016/7111/4562/a_language_friendly_classroom.pdf
- Narrative training
  https://www.youtube.com/watch?v=inKr_jFGTXU
- Vocabulary training – part 1
  https://www.youtube.com/watch?v=6sLQO9-ykVY
- Vocabulary training – part 2
  https://www.youtube.com/watch?v=MzUz5eBhVmo
- Word Aware
  https://thinkingtalking.co.uk/word-aware
- Tales Toolkit
  https://www.talestoolkit.com
- Colourful Stories (ELKLAN)
  https://elklan.co.uk/Shop/Colourful_Stories



- WellComm
  https://www.gl-assessment.co.uk/assessments/products/wellcomm

Stammering

- Stammering advice for teaching staff
  https://tamesidelocaloffer.co.uk/wp-content/uploads/2025/12/Stammering-Advice-for-Teaching-Staff-1.pdf
- Stamma
  https://stamma.org
- Action for Stammering Children
  https://actionforstammeringchildren.org
- Children's Speech and Language Therapy – Tameside
  https://tamesidechildrenandyoungpeople.nhs.uk/our-services/childrens-salt

Speech Sounds

- RCSLT – speech sound disorders
  https://www.rcslt.org/speech-and-language-therapy/clinical-information/speech-sound-disorders
- ISCAN speech sound training videos
  https://tamesidechildrenandyoungpeople.nhs.uk/getting-help/training
- Supporting early speech sounds (overview video)
  https://www.youtube.com/watch?v=yNQN4sWaUsI
- Paediatric Audiology – Tameside and Glossop
  https://tamesideandglossopicft.nhs.uk/services/audiology/paediatric-audiology



Understanding of Language / DLD

- Information Carrying Words
  https://www.youtube.com/watch?v=wefMZo-ds6k
- Blank Levels
  https://www.youtube.com/watch?v=tOoMCyaOoyw
- DLD fact sheet (Local Offer)
  https://tamesidelocaloffer.co.uk/wp-content/uploads/2025/12/Fact-Sheet-RADLD-1.pdf
- RADLD
  https://radld.org
- Speech & Language UK – DLD awareness
  https://speechandlanguage.org.uk/help-for-families/developmental-language-disorder-awareness

Situational / Selective Mutism

- SMiRA – What is situational mutism
  https://selectivemutism.org.uk/about-selective-mutism
- Situational Mutism Association
  https://selectivemutism.org
- Do's and Don'ts (Pre/Primary)
  https://selectivemutism.org.uk/info-dos-donts-at-pre-and-primary-school
- School transition planning
  https://selectivemutism.org.uk/info-transition-plan
- Supporting friendships
  https://selectivemutism.org.uk/info-playdates



Cognition and Learning

Key Stage One

SKILL	WHAT TO DO FIRST *Identifying and supporting need*	ASKING FOR HELP *Starting Assess, Plan, Do, Review*	GETTIN WHEN MORE HELP IS NEEDED *Targeted support*
General	Individual pupil: Adaptive teaching- e.g. task sheets; providing PowerPoint printouts; timers; breaking down skills; understanding of 'small steps' approaches; targeted questions at different levels. Scaffolding of work- e.g. task plans; word banks; sentence starters; writing frames. Promoting independence - e.g. scaffolding; timers; visuals; sharing expectations; work pitched at pupils' level; effective deployment of support staff; offering mediation	Further assessment of need through observation, collating assessment data, and gathering the views of staff, parents/ carers and pupils, following a graduated approach and assess-plan-do-review- learn cycles. *(tameside.gov.uk/TamesideMBC/media/sen/GraduatedApproachModelAssessPlan.pdf).* *(teachertoolkit.co.uk/2018/05/21/assess-plan-do-review).* Awareness of pupils who may benefit from additional support at	Use appropriate assessments to identify difficulties early, establish a greater understanding of the pupil's needs and inform appropriate referral to other services. Over rehearsal of information to enable pupils to progress through the hierarchy of learning (see General section) e.g. Precision Teaching (PT) intervention, Toe By Toe. PT intervention is suitable for those who struggle with working memory difficulties and retaining information and is used as an

	at a lower level first before increasing, where necessary (See Asking for Help column). *(educationendowmentfoundation.org.uk/education-evidence/guidance-reports/teaching-assistants)* <u>Classroom:</u> Create a supportive learning environment. Consider strategies such as 'help box' with appropriate resources in each classroom; folders in classrooms (on tables) containing resources such as word mats; using off-white paper (not black text on white paper); colour coding/ dyslexia friendly environment; working walls and purposeful displays (e.g. key vocabulary); prompts/ reminders/ 'to do' lists; seating selection; visual cues and timetables; timed rewards and consequences; changing visuals (e.g. Smart boards – changing images, clips, texts and colours); brain breaks.	the acquisition and fluency stages of the learning hierarchy (e.g. strategies such as pre-teaching of key concepts/ vocabulary and increased repetition and over-learning with opportunities to revisit concepts more frequently). Facilitate learning activities in <u>smaller and targeted</u> groups, in limited distraction environments where possible. *(educationendowmentfoundation.org.uk/education-evidence/teaching-learning-toolkit/small-group-tuition)*. Individual and/ or small group interventions with appropriate pre- and post- measures to evaluate progress (examples of specific Literacy and Numeracy interventions are suggested below); good starting points for finding out about evidence- based	intensive 1:1 intervention. *(edpsyched.co.uk/blog/what-is-precision-teaching-guide-for-primary-school-teachers, toe-by-toe.co.uk)*. Higher levels of mediation during tasks (see Asking for Help column). Obtain and record pupil's views through pupil voice activities. Obtain and record parental information and views through questionnaires, parents' evenings, assemblies and social media forums. Use of plan-do-review-learn processes to monitor progress and plan individual support. Create individual education plans (IEPs) or similar and adapt termly,

	Multi-sensory teaching methods. Repetition of concepts and skills- e.g. pre-teaching vocabulary; address misconceptions the same day; retrieval practice (last session/ last week/ last topic/ last term); bridging new content and skills with prior learning (e.g. 'where have we seen this before?') Whole school: Staff approaches- e.g. peer observation, joint planning and support (e.g. triad delivery model); chunking verbal instructions. Provide staff and peer feedback that is specific, clear and accurate; which focuses on improvement from previous work; and which supports effort and perseverance. *(educationendowment foundation.org.uk/education-*	interventions, programmes and approaches are: The Education Endowment Foundation's Teaching and Learning Toolkit *(educationendowmentfoundation.org.uk/education-evidence/teaching-learning-toolkit/small-group-tuition)* and Language and Literacy (educationendowmentfoundation.org.uk/education-evidence/guidance-reports/literacy-ks-1) and Mathematics projects. *(educationendowmentfoundation.org.uk/guidance-for-teachers/literacy)*. Evidence 4 Impact – an independent service that supports educators in using evidence-based practice in order to improve outcomes for children *(evidence4impact.org.uk)*. The Early Intervention Foundation guidebook – provides information	with progress against targets routinely reviewed by the SENDCo, relevant staff and child/ parents/ carers. Ensure that any Teaching Assistants (TAs) involved with the pupil understand the purpose of the IEP or group plan and support the pupil to achieve their targets. School staff, SENDCo, parents/ carers and pupil to continue to liaise on a regular basis – a minimum of three meetings with parents within a 12-month period. Refer to external agencies for further support around learning and factors which may impact children's progress (e.g. Educational Psychology Service

	evidence/teaching-learning-toolkit/feedback). Arrange relevant training for staff from external support services, where needed. Staff awareness of the learning hierarchy to support their understanding of the stages involved in developing a skill and identifying which stage pupils have reached/ where additional support to progress may be needed: Acquisition (being introduced to a task, such as recognising a phonic sound, and recognising initial components. Focus is on accuracy and getting it right, rather than speed or use of concepts to problem solve). Fluency (practice phase and becoming familiar with the task; starting to focus on speed as well as accuracy (e.g. identifying sounds	about early intervention programmes that have been evaluated and shown to improve outcomes for children and young people (including the 'Enhancing school achievement and employment' outcome). *(foundations.org.uk/about-the-guidebook).* Different children will require different types, levels and intensity of adult mediation (approaches and strategies used to support during tasks and activities) to maximise their learning of specific skills and to promote increased levels of independence. The focus of mediation may include: Regulation of behaviour (finding out what helps the pupil to manage behaviours associated with learning such as attention, impulsivity and distraction);	(EPS), Speech and Language Therapy (SALT) Service, *(tameside.gov.uk/Education/Educational-Psychology-Service, tameside.gov.uk/ChildrenSocialCare/Speech-and-Language-Referral-Information-to-Parent).* Target Setting: Actionable. Language accessible. Joined up across services. Match targets to child passport. Individualised and meaningful transition process. Joint objectives planning and target setting involving other agencies as needed; reports should feed into provision map. Where a child has an EHCP: Refer to described outcomes and provision and implement.

	more quickly and automatically). Individuals will make different rates of progress). Mastery (task is fully learnt and feels like 'second nature'; pupil has developed a level of proficiency which is not affected by new learning or periods of time without practicing the skill, such as being able to recognise a phonic sound over time). Generalisation (mastered task is now used in other situations; with instruction, the pupil applies the skill with novel materials or under different conditions, such as applying phonics sounds to reading a book with some help. Learning is less prescribed, and reinforcement can take place through everyday experiences, enabling simple problem solving). Adaptation (the mastered skill is fully generalised and the information can be used in novel	Rule teaching (helping and encouraging the pupil to find and apply rules); Insight (helping the pupil to use 'what works' and apply these tactics to new and novel situations - generalising); or Sequencing (helping the pupil to respond in an organised and sequenced way). Modes of mediation may include: Focusing (directing and maintaining attention to a task using prompts such as gesture or verbal and visual cues); Motor (drawing, moving objects into pupil's line of sight, hand over hand guidance); Verbal (using instructions to guide and direct through questions, step-by-step instructions and feedback on what has gone well).	Continue to use the Plan-Do-Review-Learn process against the specified outcomes and provision, using previous SEN Support Plan as 'EHC Implementation Plan'. Regularly update with strategies as they are tried. Complete Annual Review of EHC Plan. Continue to request and act upon advice from external agencies, as necessary. Carry out and review assessments, as advised by external agencies.

	ways and for more complex problem solving, such as applying phonic knowledge to new words. Specific instruction in complex or new situations isn't needed and the pupil can ask themselves what skills or knowledge they might need to solve the problem). *(interventioncentral.org/ academic-interventions/general-academic/instructional-hierarchy-linking-stages-learning-effective-in).* Use effective assessment and monitoring tools to identify all pupils' learning levels and track progress, e.g.: B Squared assessment – broken down into lesson steps to reduce gaps *(bsquared.co.uk).* Learning Ladders assessment framework *(learningladders.info/ product-videos/assessment-frameworks).*	Mediation should begin at the lowest level needed for the pupil; some will need to begin at a higher level than others. Mediation progresses from higher to lower levels as follows: Hand over hand guidance. Modelling with initial guidance which is gradually faded. Modelling the task using specific examples of rules, concepts and strategies. Pointing out general characteristics (but not task-specific). Asking for further applications of previously used strategies. Teaching how to select appropriate strategies using previous input from mediation. Pupil applies previous strategies and rules with increasing flexibility. Previous mediation internalised and fully self-regulating.	

	Comparison and analysis of special pupil attainment (CASPA, *caspaonline.co.uk*). Meaningful moderation of assessment. Establish good links with home to support learning, e.g.: Ensure that the curriculum is accessible for parents so they can help their children. Online homework support systems so pupils don't have to write things down Where possible, support parents to access similar resources to the ones accessed in school. For example, a school license for Clicker8 also allows parents to access the resource at home for free.		
Thinking skills	Individual pupil: Provide sensitive levels of challenge and mediation based on the pupil's needs, encouraging independence where possible	Targeted observation of pupils' executive function skills in the classroom, including self-regulation/ inhibition control, working memory, sustained	For pupils with complex needs, assess key skills and levels of engagement through structured observation (e.g. using The Engagement Profile and Scale) in

	(tes.com/magazine/archive/30-second-briefing-what-zone-proximal-development-0). Classroom: Employ strategies to start to encourage pupils' metacognition and self-regulation (i.e. the ability to monitor, direct and review their own learning, through explicitly thinking about their own learning, setting goals and evaluating progress) and support (these are a set of skills and mental processes that develop throughout childhood and adolescence, which support pupils to self-regulate, initiate, attend to and persevere with activities successfully). Metacognition (*educationendowmentfoundation.org.uk/education-evidence/teaching-learning-toolkit/metacognition-and-self-regulation).*	attention, task initiation, planning/prioritising, organisation, time management, persistence and flexibility. Use of observational data and targeted assessment to clarify strengths and needs (e.g. Working Memory Rating Scale (WMRS) / Automated Working Memory Assessment). WMRS *(pearsonclinical.co.uk/en-gb/Store/Professional-Assessments/Cognition-6-Neuro/Memory/Working-Memory-Rating-Scale).* AWMA *tracypackiam.com/press/2013/2/1/ awma-2-now-available).*	order to create personalised learning pathways. *(complexneeds.org.uk/modules/Module-3.2-Engaging-in-learning---key-approaches/All/downloads/m10p040c/engagement_chart_scale_guidance.pdf).* Access to targeted intervention support to develop key skills on an individual or small group basis (e.g. working on attention and listening skills in small groups or working memory interventions such as Cogmed, (*cogmed.com*). Complement intervention with further strategy-based practice within the classroom (e.g. rehearsing or chunking information). Access to individualised intervention, linked to IEP targets, based on the principles

	Executive functioning *Lbhflearningpartnership.com/wp-content/uploads/2024/04/Document-7.A-Supporting-Executive-Functioning-in-the-Classroom.pdf).* Explicit teaching of metacognitive strategies, following the seven-step model: Activating prior knowledge. Explicit strategy instruction. Modelling of learned strategy. Memorisation of strategy. Guided practice. Independent practice. Structured reflection. (educationendowmentfoundation.org.uk/news/eef-blog-modelling-independence-the-seven-step-model-planning-tool) Organise and structure classroom talk and dialogue, including	Further promote and embed metacognitive talk when working in smaller groups (i.e. explore thinking around a task, how to plan, prepare and use strategies to approach a task with pupils and ways to monitor levels of understanding). Use of technology and ICT-based resources to support planning, organisation and retention (e.g. voice activated software, talking tins/post cards, Clicker, *cricksoft.com/clicker*). Target-setting with groups and/or individual pupils around self-regulation and organisation strategies (personalising approaches outlined in Getting Advice column). Cue individual pupils to remind them of the skill or behaviour they are practising (e.g. listening, waiting, or asking	of distributed practice and overlearning (e.g. daily Precision Teaching), with support to apply learning in context. *(edpsyched.co.uk/blog/what-is-precision-teaching-guide-for-primary-school-teachers).* Use of ICT software and technology to support information recall and independence as a learner, embedded within everyday provision (e.g. use of voice recorders/apps).

	'Socratic talk' and the use of talk partners *(changingminds.org/techniques/questioning/socratic_questions)* Teacher modelling of own thinking and understanding at a whole-class level (e.g. modelling self-talk when preparing for a task, making mistakes and monitoring own levels of reading comprehension). Whole-class input using visual and auditory cues to support attention and listening. Reduce load on working memory – break instructions down into chunks, offer repetition and visual cues. Use whole-class initiatives which also improve memory and recall skills (e.g. Talk for Writing, *talk4writing.com*).	questions when they do not understand). Small group-based support to develop and practise attention and listening skills (e.g. through games and activities targeted around focused, sustained, and joint attention skills). Support pupils individually and/or in small groups to initiate and persevere with activities through personalised organisation strategies (e.g. task board, lists or charts, markers for start and finish points, or timers) and games (e.g. 'ready, steady, go!'). Play games in small groups to practise memory and recall skills (e.g. identifying missing items, recalling lists, copying figure drawings or repeating number sequences both forwards and	

	Use of visual organisation strategies at a whole- class level (e.g. structured task planners or use of colour coding systems [red- task done; amber- current; green-to do], and visual timers). Provide examples of the expected outcome of a task ('What a good one looks like' [WAGOLL]). Use of multi-sensory learning and access to concrete apparatus across the curriculum (e.g. cubes, counters, number lines, spelling or word mats). Use of spaced learning (content/topics which are taught and revisited at spaced intervals) at a whole- class level. Direct instruction, cueing and positive reinforcement of key skills (e.g. good	backwards). Access to targeted intervention time using age-appropriate games/apps (Cogmed, *cogmed.com*). Daily opportunities to model, teach and practise strategies in small groups to manage verbal information and task sequences (e.g. naming the first 2-3 steps and making a list with different colours, ticking off pictures of equipment needed to initiate a task etc.).	



	listening, putting hand up, waiting etc.).		
Literacy	Classroom: Whole class/ group systematic phonics programmes (e.g. Read Write Inc. *ruthmiskin.com/phonics*), embedded within a rich literacy environment. Whole school: Use of evidence-based approaches to teaching Literacy (e.g. Education Endowment Foundation Improving Literacy in Key Stage 1 guidance report). *educationendowmentfoundation.org.uk/education-evidence/guidance-reports/literacy-ks-1* Development of oral language skills as foundations for reading and writing (e.g. reading books aloud and discussing them; use of books without text to encourage comprehension skills; use of resources and approaches such as	Use of appropriate assessments to identify strengths and areas of need, in order to target intervention at an early stage. This may include: Standardised assessments (e.g. Salford Sentence Reading Test, *risingstars-uk.com*, York Assessment of Reading for Comprehension, *gl-assessment.co.uk*). formative, criterion-referenced and curriculum-based assessments. bench marking using in-depth assessments (e.g. York Assessment of Reading for Comprehension YARC (*gl-assessment.co.uk/assessments/products/yarc).* Whole school dyslexia screen and SALT assessments.	Interventions to develop literacy skills, based on principles of repetition and over-learning, with support to generalise skills (e.g. Precision Teaching, Toe by Toe). Precision Teaching - *edpsyched.co.uk/blog/what-is-precision-teaching-guide-for-primary-school-teachers.* Toe by Toe - *toe-by-toe.co.uk.* Specific assessments- e.g. Sounds Write, Bearing Away/ Bear Necessities, Raven's assessment. Sounds write - *sounds-write.co.uk* Bearing Away- *soundfoundations.co.uk/product/bearing-away*

	Clicker *(cricksoft.com/clicker)* recording devices, word of the week, teaching specific vocabulary; programmes such as Talk for Writing, *talk4writing.com*). Guided reading groups or Reciprocal Teaching groups to enhance reading comprehension skills *(readingrockets.org/classroom/classroom-strategies/reciprocal-teaching).* Whole School: Staff participation in Literacy initiatives and forums (e.g. NASEN SENDCo forum).	Small group targeted 'basic skills' work to supplement and repeat some whole class learning (e.g. phonics, fine motor groups). Resources to support literacy skills for individuals/ small groups (e.g. reading/ spelling squares; recording software – iPads, sound buttons). Tools such as Elklan's Early Language Builders and Language Builders books to support language for literacy may be helpful for individuals/ small groups. *(https://www.elklan.co.uk/Shop).* Peer support (e.g. Year 2 – teaching younger pupils). Pair up lower attaining pupils to read with younger peers in the school. Access to technology and interventions such as:	Bear Necessities - *soundfoundations.co.uk/2015/05/how-bear-necessities-works* Raven's assessment - *pearsonclinical.co.uk/en-gb/Store/Professional-Assessments/Cognition-6-Neuro/Non-Verbal-Ability/Raven7s---Educational/p/P100009247* More specialised interventions, e.g. Reading Recovery - a short-term (12-20 weeks) early intervention programme, aimed at the lowest-achieving 20% of KS1 readers, and delivered by a trained Reading Recovery teacher. *(ucl.ac.uk/reading-recovery-europe/about-reading-recovery).*

		Nessy. *(nessy.com/en-gb).* Clicker. *(cricksoft.com/clicker).* Spelling Shed. *(spellingshed.com/en-gb).* IDL Literacy. *(idlsgroup.com/our-products/literacy).* Accelerated Reader. *(uk.renaissance.com/products/accelerated-reader).* Reading Recovery *(ucl.ac.uk/reading-recovery-europe).* Reading Wise. *(readingwise.com)* Project X CODE. *(global.oup.com/education/content/primary/series/project).* Immersive Reader. *(learn.microsoft.com/en-us/training/educator-center/product-guides/immersive-reader).*	



		Online learning software that the pupil can access without adult support, e.g. IDL, Dyslexia Gold. *(uk.renaissance.com/products/accelerated-reader, dyslexiagold.co.uk).*	
Numeracy	Classroom: Evidence-based whole class approaches to teaching foundational skills to mastery, e.g. Mathematical Reasoning programme. Whole school: Use of evidence-based approaches to teaching Mathematics (e.g. Education Endowment Foundation Improving Mathematics in the Early Years and Key Stage 1 guidance report, *educationendowmentfoundation.org.uk/education-evidence/guidance-reports/early-maths*). Concrete numeracy apparatus Numicon. *(global.oup.com/education/content/pri*	Use of appropriate assessments to identify strengths and areas of need, in order to target intervention at an early stage. This may include standardised assessments (e.g. Sandwell Early Numeracy Test, *gl-assessment.co.uk/assessments/products/sandwell-early-numeracy-test)* as well as formative, criterion-referenced and curriculum-based assessments. Programmes for assessment and intervention where Mathematical difficulties are present (e.g.	Individualised learning opportunities for children with specific numeracy difficulties e.g. 1stClass@Number, A specially trained teaching assistant delivers up to 30 half-hour sessions to a group of up to four children, for 10 -15 weeks. *(edgehill.ac.uk/departments/academic/education/research/every-child-counts/1st-class-number).* More specialised interventions, e.g. Numbers Count – a specially trained teacher gives individuals or small groups at least 3 x 30-minute lessons for a term. Sessions are planned for

	mary/series/ numicon/?region=uk). Base 10 *(group.co.uk/primary/maths/number-place-value/base-ten-sets).* Singapore counters. *(tts-group.co.uk/place-value-counters-multibuy-1125pk-1750pk/1040857.html).* Work through the concrete to pictorial to abstract (CPA) approach *(mathsnoproblem.com/en/approach/concrete-pictorial-abstract).* Access to manipulative resources e.g. Cuisenaire rods (see also Ronit Bird exploring numbers through Cuisenaire Rods). *(ronitbird.com/ebooks-for-learners-with-dyscalculia).*	Dynamo Maths, *dynamomaths.co.uk*). Peer support (e.g. Year 2 pupils teaching younger peers). Targeted 'basic skills' time work, and small group sessions to supplement and repeat some whole class learning and develop basic skills.	individuals based on initial assessments, with a focus on number and calculation. *(edgehill.ac.uk/departments/academic/education/research/every-child-count/1st-class-number).* *(edgehill.ac.uk/departments/academic/education/research/every-child-count/numbers-count).*



Key Stage Two

SKILL	WHAT TO DO FIRST *Identifying and supporting need*	ASKING FOR HELP *Starting Assess, Plan, Do, Review*	WHEN MORE HELP IS NEEDED *Targeted support*
General	Individual pupil: Differentiation- e.g. task sheets; providing PowerPoint printouts; timers; breaking down skills; understanding of 'small steps' approaches; targeted questions at different levels. Scaffolding of work- e.g. task plans; word banks; sentence starters; writing frames. Promoting independence- e.g. scaffolding; timers; visuals; sharing expectations; work pitched at pupils' level; effective deployment of support staff; offering mediation at a lower level first	Further assessment of need through observation, collating assessment data, and gathering the views of staff, parents/ carers and pupils, following a graduated approach and assess-plan-do-review- learn cycles. *(teachertoolkit.co.uk/2018/05/21/assess-plan-do-review)*. *(tameside.gov.uk/TamesideMBC/media/sen/GraduatedApproachModelAssessPlan.pdf)*. Awareness of pupils who may benefit from additional support at the acquisition and fluency stages of the learning hierarchy	Use appropriate assessments to identify difficulties early, establish a greater understanding of the pupil's needs and inform appropriate referral to other services. Over rehearsal of information to enable pupils to progress through the hierarchy of learning (see General section) e.g. Precision Teaching (PT) intervention. PT intervention is suitable for those who struggle with working memory difficulties and retaining information and is used as an intensive 1:1 intervention. *(highlandliteracy.com/precision-teaching)*.



	before increasing, where necessary (See Asking for Help column). (educationendowmentfoundation.org.uk/education-evidence/guidance-reports/teaching-assistants). <u>Classroom:</u> Creating a supportive learning environment- e.g. 'help box' with appropriate resources in each classroom; folders in classrooms (on tables) containing resources such as word mats; using off-white paper (not black text on white paper); colour coding/ dyslexia friendly environment; working walls and purposeful displays (e.g. key vocabulary); prompts/ reminders/ 'to do' lists; seating selection; visual cues and timetables; timed rewards and consequences; changing visuals (e.g. Smart boards – changing images, clips, texts and colours); brain breaks.	(e.g. strategies such as pre-teaching of key concepts/ vocabulary and increased repetition and over-learning with opportunities to revisit concepts more frequently). Facilitate learning activities in <u>smaller and targeted groups</u>, in limited distraction environments where possible. *(educationendowmentfoundation.org.uk/education-evidence/teaching-learning-toolkit/small-group-tuition).* Individual and/ or small group interventions with appropriate pre- and post- measures to evaluate progress (examples of specific Literacy and Numeracy interventions are suggested below); good starting points for finding out about evidence-	Higher levels of mediation during tasks (see Getting Help). Obtain and record pupil's views through pupil voice activities. Obtain and record parental information and views through questionnaires, parents' evenings, assemblies and social media forums. Use of plan-do-review-learn processes to monitor progress and plan individual support. Create individual education plans (IEPs) or similar and adapt termly, with progress against targets routinely reviewed by the Special Educational Needs Co-ordinator (SENDCo), relevant staff and child/ parents/ carers. Ensure that any Teaching Assistants (TAs) involved with the pupil

	Staff approaches- e.g. peer observation, joint planning and support (e.g. triad delivery model); chunking verbal instructions. Multi-sensory teaching methods. Repetition of concepts and skills- e.g. pre-teaching vocabulary; address misconceptions the same day; retrieval practice (last session/ last week/ last topic/ last term); bridging new content and skills with prior learning (e.g. 'where have we seen this before?') Provide staff and peer feedback that is specific, clear and accurate; which focuses on improvement from previous work; and which supports effort and perseverance. *(educationendowmentfoundation.org.uk/education-evidence/teaching-learning-toolkit/feedback).*	based interventions, programmes and approaches are: The Education Endowment Foundation's Teaching and Learning Toolkit *(educationendowmentfoundation.org.uk/education-evidence/teaching-learning-toolkit).* and Language and Literacy and Mathematics projects *(educationendowmentfoundation.org.uk/guidance-for-teachers/literacy).* Evidence 4 Impact – an independent service that supports educators in using evidence-based practice in order to improve outcomes for children *(evidence4impact.org.uk).* This guidance report focuses on the teaching of mathematics to pupils in Key Stages 2 and 3. *(educationendowmentfoundation.org.uk/education-*	understand the purpose of the IEP or group plan and support the pupil to achieve their targets. School staff, SENDCo, parents/ carers and pupil to continue to liaise on a regular basis – a minimum of three meetings with parents within a 12-month period. Refer to external agencies for further support around learning and factors which may impact children's progress (e.g. Educational Psychology Service (EPS), Speech and Language Therapy (SALT) service, Tameside Special Outreach Support Service *(tameside.gov.uk/Education/Educational-Psychology-Service).* *(tameside.gov.uk/ChildrenSocialCare/Speech-and-Language-Referral-Information-to-Parent).*

	Whole school: Arrange relevant training for staff from external support services, where needed. Staff awareness of the learning hierarchy to support their understanding of the stages involved in developing a skill and identifying which stage pupils have reached/ where additional support to progress may be needed: Acquisition (being introduced to a task, such as recognising a phonic sound, and recognising initial components. Focus is on accuracy and getting it right, rather than speed or use of concepts to problem solve). Fluency (practice phase and becoming familiar with the task; starting to focus on speed as well as accuracy (e.g. identifying sounds more quickly and	*evidence/guidance-reports/literacy-ks2).* The Early Intervention Foundation guidebook – provides information about early intervention programmes that have been evaluated and shown to improve outcomes for children and young people (including the 'Enhancing school achievement and employment' outcome). *(foundations.org.uk/about-the-guidebook).* Foundations Guidebook provides information about early intervention programmes that have been evaluated and shown to improve outcomes for children and young people (including the 'Enhancing school achievement and employment' outcome). *(foundations.org.uk/coming-soon-new-updated-foundations-guidebook).*	*(tamesidelocaloffer.co.uk/education/send-services/pupil-support-service).* Target Setting: Actionable. Language accessible. Joined up across services. Match targets to child passport. Individualised and meaningful transition process. Joint objectives planning and target setting involving other agencies as needed; reports should feed into provision map. Where a child has an EHCP: Refer to described outcomes and provision and implement. Continue to use the Plan-Do-Review-Learn process against the specified outcomes and provision, using previous SEN Support Plan as 'EHC Implementation Plan'. Regularly update with strategies as they are tried.

	automatically). Individuals will make different rates of progress). Mastery (task is fully learnt and feels like 'second nature'; pupil has developed a level of proficiency which is not affected by new learning or periods of time without practicing the skill, such as being able to recognise a phonic sound over time). Generalisation (mastered task is now used in other situations; with instruction, the pupil applies the skill with novel materials or under different conditions, such as applying phonics sounds to reading a book with some help. Learning is less prescribed, and reinforcement can take place through everyday experiences, enabling simple problem solving). Adaptation (the mastered skill is fully generalised, and the information can be used in novel ways and for more complex	Different pupils will require different types, levels and intensity of adult mediation (approaches and strategies used to support during tasks and activities) to maximise their learning of specific skills and to promote increased levels of independence. The focus of mediation may include: Regulation of behaviour (finding out what helps the pupil to manage behaviours associated with learning such as attention, impulsivity and distraction); Rule teaching (helping and encouraging the pupil to find and apply rules); Insight (helping the pupil to use 'what works' and apply these tactics to new and novel situations - generalising); or	Complete Annual Review of EHC Plan. Continue to request and act upon advice from external agencies, as necessary. Carry out and review assessments, as advised by external agencies.

	problem solving, such as applying phonic knowledge to new words. Specific instruction in complex or new situations isn't needed and the pupil can ask themselves what skills or knowledge they might need to solve the problem). *(interventioncentral.org/academic-interventions/general-academic/instructional-hierarchy-linking-stages-learning-effective-in)*. Use effective assessment and monitoring tools to identify all pupils' learning levels and track progress, e.g.: B Squared assessment – broken down into lesson steps to reduce gaps, (*bsquared.co.uk)*. Learning Ladders assessment framework, *(learningladders.info/product-videos/assessment-frameworks)*.	Sequencing (helping the pupil to respond in an organised and sequenced way). Modes of mediation may include: Focusing (directing and maintaining attention to a task using prompts such as gesture or verbal and visual cues); Motor (drawing, moving objects into pupil's line of sight, hand over hand guidance); Verbal (using instructions to guide and direct through questions, step-by-step instructions and feedback on what has gone well). Mediation should begin at the lowest level needed for the pupil; some will need to begin at a higher level than others. Mediation progresses from higher to lower levels as follows: Hand over hand guidance.	

	Comparison and analysis of special pupil attainment (CASPA, *caspaonline.co.uk)*. Meaningful moderation of assessment. Establish good links with home to support learning, e.g.: Ensure that the curriculum is accessible for parents so they can help their children. Online homework support systems so pupils don't have to write things down. Where possible, support parents to access similar resources to the ones accessed in school. For example, a school license for Clicker 8 also allows parents to access the resource at home for free.	Modelling with initial guidance which is gradually faded. Modelling the task using specific examples of rules, concepts and strategies. Pointing out general characteristics (but not task-specific). Asking for further applications of previously used strategies. Teaching how to select appropriate strategies using previous input from mediation. Pupil applies previous strategies and rules with increasing flexibility. Previous mediation internalised and fully self-regulating.	
Thinking skills	Individual pupil: Provide sensitive levels of challenge and mediation based on the pupil's needs, promoting	Targeted observation of pupils' executive function skills in the classroom, including: self-regulation/ inhibition control,	For pupils with complex needs, assess key skills and engagement through structured observation (e.g. using The Engagement Profile and Scale) in

	independence as a learner where possible *(tes.com/magazine/archive/30-second-briefing-what-zone-proximal-development)*. Classroom: Employ strategies to develop pupils' metacognition and self-regulation (i.e. the ability to monitor, direct and review their own learning, through explicitly thinking about their own learning, setting goals and evaluating progress) and executive function skills (these are a set of skills and mental processes that develop throughout childhood and adolescence, which support pupils to self-regulate, initiate, attend to and persevere with activities successfully). Explicit teaching of metacognitive strategies, following the seven-step model:	working memory, sustained attention, task initiation, planning/prioritising, organisation, time management, persistence and flexibility. Use of observational data and targeted assessment to clarify strengths and needs (e.g. Working Memory Rating Scale (WMRS), *pearsonclinical.co.uk/en-gb/Store/Professional-Assessments/Cognition-6-Neuro/Memory/Working-Memory-Rating-Scale,* Automated Working Memory Assessment) *tracypackiam.com/press/2013/2/1/awma-2-now-available)*. Promote dialogic teaching, which emphasises classroom dialogue through which pupils learn to reason, discuss, argue, and explain.	order to create personalised learning pathways. *(complexneeds.org.uk/modules/Module-3.2-Engaging-in-learning---key-approaches/All/downloads/m10p040c/engagement_chart_scale_guidance.pdf)*. Access to targeted intervention (e.g. practising self- organisation skills, or supporting working memory, Cogmed, Jungle Memory, Bridge intervention strategies into the general classroom environment. *(cogmed.com)*. Access to individualised intervention, linked to IEP targets, based on the principles of distributed practice and overlearning (e.g. daily Precision Teaching), with support to apply learning in context. Use of individualised strategies, embedded within daily provision, to

	Activating prior knowledge. Explicit strategy instruction. Modelling of learned strategy. Memorisation of strategy. Guided practice. Independent practice. Structured reflection. Organise and structure classroom talk and dialogue, including 'Socratic talk', talk partners and debating. *(changingminds.org/techniques/questioning/socratic_questions.htm).* Teacher modelling of own thinking and understanding at a whole-class level (e.g. modelling self-talk when preparing for a task, making mistakes or monitoring reading comprehension). Whole-class input using visual and auditory cues to support attention and listening.	Further promote and embed metacognitive talk when working in smaller groups (i.e. explore thinking around a task, how to plan, prepare and use strategies to approach a task with pupils and ways to monitor levels of understanding). Use of technology and ICT-based resources to support planning, organisation and retention (e.g. voice activated software, talking tins/post cards, Clicker 8, *cricksoft.com/clicker*). Provide explicit instruction and targeted goal- setting with individual pupils/groups around key skill areas (e.g. self-organisation or basic time management).	support pupils' rehearsal, recall and organisation of information (e.g. voice recorders, comic strip apps, video). For pupils with complex needs, assess key skills and engagement through structured observation (e.g. using The Engagement Profile and Scale) in order to create personalised learning pathways. *(complexneeds.org.uk/modules/Module-3.2-Engaging-in-learning---key-approaches/All/downloads/m10p040c/engagement_chart_scale_guidance.pdf).* Access to targeted intervention (e.g. practising self- organisation skills, or supporting working memory, Cogmed, Jungle Memory, based on clearly identified needs with pre/post measures to monitor progress and impact. Bridge intervention strategies into the general classroom environment (cogmed.com).



	Reduce load on working memory – break instructions down into chunks, offer repetition and visual cues. Use whole-class initiatives which also improve memory and recall skills. Use of visual organisation strategies at a whole- class level - structured task plans, writing frames or use of colour coding system [red- task done; amber- current; green-to do], and visual timers. Use of visual displays and posters for key information in the classroom. Provide examples of the expected outcome of a task ('What a good one looks like' [WAGOLL]).	Use clear, visual organisation aids on an individual basis (e.g. task boards). Small group interventions to develop targeted skills (e.g. access to small group sessions to practise attention and listening skills, working memory: Cogmed). Complement computerised interventions with strategy-based practice within the classroom, explicitly highlighting strategies used to recall/ retain information *(cogmed.com)*.	Access to individualised intervention, linked to IEP targets, based on the principles of distributed practice and overlearning (e.g. daily Precision Teaching), with support to apply learning in context. *(edpsyched.co.uk/blog/what-is-precision-teaching-guide-for-primary-school-teachers)*. Use of individualised strategies, embedded within daily provision, to support pupils' rehearsal, recall and organisation of information (e.g. voice recorders, comic strip apps, video).



	Use of multi-sensory learning opportunities and access to concrete apparatus across the curriculum (e.g. cubes, counters, number lines, spelling or word mats). Use of spaced learning (content/topics which are taught and revisited at spaced intervals) at a whole- class level. Teach and model working memory strategies (information rehearsal, chunking information, use of visual imagery, and creating narratives/stories to remember information). Use of frameworks and mnemonics, displayed visually, to support pupils to plan and review their work (e.g. Plan, Organise, Write, Edit and Review- POWER;		



	Capitalise, Organise, Punctuate, Spell check- COPS). Whole-class intervention around memory and recall strategies.		
Literacy	Classroom: Whole class engagement with an appropriately pitched non-fiction text about a particular issue each day (reading, answering questions, giving opinions and linked writing task). Collaborative learning and peer tutoring approaches (e.g. Paired Reading, Cued Spelling). *(highlandliteracy.com/wp-content/uploads/2017/10/cued-spelling.pdf).* Reading buddy/ peer support/ joint learning. Kagan Structures and mixed-ability groups. Class literacy programmes	Assessments of skills to inform support and intervention plans, e.g. whole school dyslexia screen and SALT assessments; bench marking with in-depth assessments (e.g. York Assessment of Reading for Comprehension YARC, *gl-assessment.co.uk/assessments/products/yarc*). Peer support (e.g. Year 6 – teaching younger pupils). Pair up lower attaining pupils to read with younger peers in the school. Resources to support literacy skills for individuals/ small groups,	Interventions to develop literacy skills, based on principles of repetition and over-learning, with support to generalise skills (e.g. Precision Teaching, Toe by Toe). *(edpsyched.co.uk/blog/what-is-precision-teaching-guide-for-primary-school-teachers).* *(toe-by-toe.co.uk).* Very small group/ paired/ individual interventions to develop literacy skills, e.g.: Word Shark *(wordshark.co.uk).* Acceleread, Accelewrite *(dyslexic.com/product/acceleread-accelewrite-guide-to-using-talking-*

	which can be differentiated for individuals e.g.: *(weareteachers.com/what-are-kagan-strategies).* Whole school: Use of evidence-based approaches to teaching literacy (e.g. Education Endowment Foundation Improving Literacy in Key Stage 2 guidance report). Ensure that Literacy skills are embedded throughout the curriculum (e.g. SMSC lessons). *(educationendowmentfoundation.org.uk/education-evidence/guidance-reports/literacy-ks2).*	e.g. reading and spelling squares, TTS resources. *(tts-group.co.uk).* Targeted 'basic skills' time work and small-group support for pupils struggling with Literacy skills e.g.: Read, Write Inc. Fresh Start acts as a catch-up intervention for children in KS2/3, beginning with systematic teaching of phonics and moving on to improving reading fluency and comprehension. Small guided reading or Reciprocal Teaching groups. *(readingrockets.org/classroom/classroom-strategies/reciprocal-teaching).* Oxford Owl *(home.oxfordowl.co.uk).* Reading Eggs, Learning to Read for Kids | Learn to Read with Phonics | Free Trial – Reading	*computers-to-help-children-learn-to-read-and-write).* Access to resources such as aurally encoded dictionaries. Spode Spelling



		Eggs *(readingeggs.co.uk).* Rapid Reading books, Project X, Immersive reader. *(learn.microsoft.com/en-us/training/educator-center/product-guides/immersive-reader).* Fine motor groups for writing skills. Use of structures to support engagement and motivation (e.g. incentive boards, work then reward format). Access to technology and interventions such as: Nessy. *(nessy.com/en-gb).* Clicker. *(cricksoft.com/clicker).* Spelling Shed. *(spellingshed.com/en-gb).*	



		IDL Literacy. *(idlsgroup.com/our-products/literacy).* Accelerated Reader. *(uk.renaissance.com/products/accelerated).* Reading Recovery. *(ucl.ac.uk/reading-recovery-europe/about-reading-recovery).* Reading Wise. *(readingwise.com).* Project X CODE. *(global.oup.com/education/content/primary/series/project).* Immersive Reader. *(learn.microsoft.com/en-us/training/educator-center/product-guides/immersive-reader).* Online learning software that the pupil can access without adult support, e.g. IDL, Dyslexia Gold. *(idlsgroup.com/our-products/literacy, dyslexiagold.co.uk).*	

		Reading Boosters, e.g.: Moondog. Magic belt.	
Numeracy	Classroom: Collaborative learning and peer tutoring approaches (e.g. Paired Maths– an approach where a 'tutor' and 'tutee' jointly work on Maths questions using a framework of understanding the question, finding an answer and finishing the question by reflecting on what they have done and linking to previous learning). Whole school: Use of evidence-based approaches to teaching Mathematics (e.g. Education Endowment Foundation Improving Mathematics in Key Stages 2 and 3 guidance report). Ensure that Mathematical skills and learning are embedded	Use of appropriate assessments to identify strengths and areas of need, in order to target intervention. This may include standardised assessments (e.g. Sandwell Numeracy test) as well as formative, criterion-referenced and curriculum- based assessments such as Precision Teaching baseline probes. *(gl-assessment.co.uk/assessments/products/sandwell-early-numeracy-test).* *(edpsyched.co.uk/blog/what-is-precision-teaching-guide-for-primary-school-teachers).* Peer support (e.g. Year 6 – teaching younger pupils).	Very small group/ paired/ individual interventions to develop numeracy and underlying skills, e.g.: Working Memory Plus Arithmetic (WM+) – trained TAs work 1:1 with a Year 3 child for 30 minutes followed by 30 minutes of independent related online games. 10 sessions –5 cover working memory, 5 cover arithmetic. Interventions to develop numeracy skills, based on principles of repetition and over-learning, with support to generalise skills (e.g. Precision Teaching, Plus 1). *(edpsyched.co.uk/blog/what-is-precision-teaching-guide-for-primary-school-teachers).* *(123learning.co.uk/plus-1-book).* More specialised interventions, e.g.:

	throughout the curriculum (e.g. SMSC lessons).	Small group interventions to develop numeracy skills, e.g.: FirstClass@Number – trained teaching assistant delivers up to 30 half-hour sessions to a group of up to 4 children, alongside normal class Maths lessons. Mathletics. *(mathletics.com/uk).* Numicon: Breaking Barriers pack. *(thedyslexiashop.co.uk/products/numicon-breaking-barriers-teaching-pack).* Plus 1/Power of 2. *(123learning.co.uk/power-of-2-book).* Dynamo maths *(dynamomaths.co.uk).* Maths recovery Maths Seeds	Numbers Count 1 – a specially trained teacher gives individuals or small groups at least 3 x 30 minute lessons for a term. Sessions are planned for individuals based on initial assessments, with a focus on number and calculation. *(evidence4impact.org.uk).*



Key Stage Three

SKILL	WHAT TO DO FIRST *Identifying and supporting need*	ASKING FOR HELP *Starting Assess, Plan, Do, Review*	WHEN MORE HELP IS NEEDED *Targeted support*
General	Individual pupil: Differentiation- e.g. task sheets; providing PowerPoint printouts; timers; breaking down skills; understanding of 'small steps' approaches; targeted questions at different levels. Scaffolding of work- e.g. task plans; word banks; sentence starters; writing frames. Promoting independence- e.g. scaffolding; timers; visuals; sharing expectations; work pitched at pupils' level; effective deployment of support staff; offering mediation (approaches and strategies used to support during tasks and activities) at a	Further assessment of need through observation, collating assessment data, and gathering the views of staff, parents/ carers and pupils, following a graduated approach and assess-plan-do-review learn cycles. *(teachertoolkit.co.uk/2018/05/21/assess-plan-do-review).* *(tameside.gov.uk/TamesideMBC/media/sen/GraduatedApproachModelAssessPlan.pdf).* Facilitate learning activities in smaller and targeted groups, in limited distraction environments where possible.	Use appropriate assessments to identify difficulties early, establish a greater understanding of the pupil's needs and inform appropriate referral to other services. Over rehearsal of information to enable pupils to progress through the hierarchy of learning (see General section) e.g. Precision Teaching (PT) intervention. PT intervention is suitable for those who struggle with working memory difficulties and retaining information and is used as an intensive 1:1 intervention. *(edpsyched.co.uk/blog/what-is-*



	lower level first before increasing, where necessary (see Asking for Help column). *(educationendowmentfoundation.org.uk/education-evidence/guidance-reports/teaching-assistants).* Pre-teaching vocabulary Classroom: Staff awareness of the learning hierarchy to support their understanding of the stages involved in developing a skill and identifying which stage pupils have reached/ where additional support to progress may be needed: Acquisition (being introduced to a task, such as recognising a phonic sound, and recognising initial components. Focus is on accuracy and getting it right, rather than speed or use of concepts to problem solve).	*(educationendowmentfoundation.org.uk/education-evidence/teaching-learning-toolkit/small-group-tuition).* Awareness of pupils who may benefit from additional support at the acquisition and fluency stages of the learning hierarchy (e.g. strategies such as pre-teaching of key concepts/ vocabulary and increased repetition and over-learning with opportunities to revisit concepts more frequently). See Getting Advice column. Individual and/ or small group interventions with appropriate pre- and post- measures to evaluate progress (examples of specific Literacy and Numeracy interventions are suggested below); good starting points for finding out about evidence-based interventions, programmes and approaches are: The Education Endowment Foundation's Teaching and Learning	*precision-teaching-guide-for-primary-school-teachers).* Higher levels of mediation during tasks (see Getting Help). Obtain and record pupil's views through pupil voice activities. Obtain and record parental information and views through questionnaires, parents' evenings, assemblies and social media forums. Create individual education plans (IEPs) or similar and adapt termly, with progress against targets routinely reviewed by the SENDCo, relevant staff and pupil/ parents/ carers. Ensure that any Teaching Assistants (TAs) involved with the pupil understand the purpose of

	Fluency (practice phase and becoming familiar with the task; starting to focus on speed as well as accuracy (e.g. identifying sounds more quickly and automatically). Individuals will make different rates of progress). Mastery (task is fully learnt and feels like 'second nature'; pupil has developed a level of proficiency which is not affected by new learning or periods of time without practicing the skill, such as being able to recognise a phonic sound over time). Generalisation (mastered task is now used in other situations; with instruction, the pupil applies the skill with novel materials or under different conditions, such as applying phonics sounds to reading a book with some help. Learning is less prescribed and reinforcement can take place through everyday experiences,	Toolkit and Language and Literacy and Mathematics projects. *(educationendowmentfoundation.org.uk/education-evidence/teaching-learning-toolkit/small-group-tuition).* *(educationendowmentfoundation.org.uk/guidance-for-teachers/literacy).* *educationendowmentfoundation.org.uk/projects-and-evaluation/promising-programmes/mathematics-mastery-secondary).* Evidence 4 Impact – an independent service that supports educators in using evidence-based practice in order to improve outcomes for pupils. *(evidence4impact.org.uk).* The Early Intervention Foundation guidebook – provides information about early intervention programmes that have been evaluated and shown to improve outcomes for children and young people (including the 'Enhancing school achievement and employment' outcome). *(guidebook.eif.org.uk).*	the IEP or group plan and support the pupil to achieve their targets. Use of plan-do-review-learn processes to monitor progress and plan individual support. School staff, SENDCo, parents/carers and pupil to continue to liaise on a regular basis – a minimum of three meetings with parents within a 12-month period. Refer to external agencies for further support around learning and factors which may impact children's progress (e.g. Educational Psychology Service (EPS), Speech and Language Therapy (SALT) service, Tameside Pupil Support Service.



	enabling simple problem solving). Adaptation (the mastered skill is fully generalised and the information can be used in novel ways and for more complex problem solving, such as applying phonic knowledge to new words. Specific instruction in complex or new situations isn't needed and the pupil can ask themselves what skills or knowledge they might need to solve the problem). *(interventioncentral.org/academic-interventions/general-academic/instructional-hierarchy-linking-stages-learning-effective-in).* <u>Adaptive teaching techniques</u> – differentiated instruction, scaffolding, active learning strategies.	Different pupils will require different types, levels and intensity of adult mediation (approaches and strategies used to support during tasks and activities) to maximise their learning of specific skills and to promote increased levels of independence. The focus of mediation may include: Regulation of behaviour (finding out what helps the pupil to manage behaviours associated with learning such as attention, impulsivity and distraction); Rule teaching (helping and encouraging the pupil to find and apply rules); Insight (helping the pupil to use 'what works' and apply these tactics to new and novel situations - generalising); or Sequencing (helping the pupil to respond in an organised and sequenced way). Modes of mediation may include:	*(tameside.gov.uk/Education/Educational-Psychology-Service,* *Tameside.gov.uk/ChildrenSocialCare/Speech-and-Language-Referral-Information-to-Parent,* *tamesidelocaloffer.co.uk/education/send-services/pupil-support-service).* Where a pupil has an EHCP: Refer to described outcomes and provision and implement. Continue to use the Plan-Do-Review-Learn process against the specified outcomes and provision, using previous SEN Support Plan as 'EHC Implementation Plan'. Regularly update with strategies as they are tried. Complete Annual Review of EHC Plan.

	Create a supportive learning environment- e.g. 'help box' with appropriate resources in each classroom; folders in classrooms (on tables) containing resources such as word mats; using off-white paper (not black text on white paper); colour coding/ dyslexia friendly environment; working walls and purposeful displays (e.g. key vocabulary); prompts/ reminders/ 'to do' lists; seating selection; visual cues and timetables; timed rewards and consequences; changing visuals (e.g. Smart boards – changing images, clips, texts and colours); brain breaks. Staff approaches- e.g. chunking verbal instructions; repetition of key instructions; allowing thinking time. Multi-sensory teaching methods.	Focusing (directing and maintaining attention to a task using prompts such as gesture or verbal and visual cues); Motor (drawing, moving objects into pupil's line of sight, hand over hand guidance); Verbal (using instructions to guide and direct through questions, step-by-step instructions and feedback on what has gone well). Mediation should begin at the lowest level needed for the pupil; some will need to begin at a higher level than others. Mediation progresses from higher to lower levels as follows: Hand over hand guidance. Modelling with initial guidance which is gradually faded. Modelling the task using specific examples of rules concepts and strategies. Pointing out general characteristics (but not task-specific).	Continue to request and act upon advice from external agencies, as necessary. Carry out and review assessments, as advised by external agencies.



	Repetition of concepts and skills- e.g. pre-teaching vocabulary; address misconceptions the same day; retrieval practice (last session/ last week/ last topic/ last term); bridging new content and skills with prior learning (e.g. 'where have we seen this before?') Whole school: Staff approaches- e.g. peer observation, joint planning and support (e.g. triad delivery model). Provide staff and peer feedback that is specific, clear and accurate; which focuses on improvement from previous work; and which supports effort and perseverance. (*educationendowmentfoundation.org.uk/education-evidence/teaching-learning-toolkit/feedback).*	Asking for further applications of previously used strategies. Teaching how to select appropriate strategies using previous input from mediation. Pupil applies previous strategies and rules with increasing flexibility. Previous mediation internalised and fully self-regulating. Use effective assessment and monitoring tools to identify all pupils' learning levels and track progress, e.g.: B Squared assessment – broken down into lesson steps to reduce gaps. *(bsquared.co.uk).* Learning Ladders assessment framework. *(learningladders.info/product-videos/assessment-frameworks).* Comparison and analysis of special pupil attainment (CASPA). *(caspaonline.co.uk).* Meaningful moderation of assessment.	

	Establish good links with home to support learning, e.g.: Ensure that the curriculum is accessible for parents so they can help their children. Online homework support systems so pupils don't have to write things down.	Arrange relevant training for staff from external support services, where needed. Where possible, support parents to access similar resources to the ones accessed in school. For example, a school license for Clicker 8 also allows parents to access the resource at home for free.	
Thinking Skills	<u>Individual pupil:</u> Access to key information (e.g. subject specific vocabulary, key spellings, number facts etc.) visually to promote independence and reduce working memory loads. Use of verbal and visual cues/prompts to direct or redirect attention – access to opportunities for movement breaks and different modalities of teaching and learning. <u>Classroom:</u>	Promote dialogic teaching at a whole-class and small group level, which emphasises dialogue through which pupils learn to reason, discuss, argue, and explain. Explicitly teach pupils how to organise and effectively manage their learning independently – provide guided practice. Provide exam preparation and self-study support in small groups for targeted pupils. Use of self-evaluation and feedback tools such as '<u>exam wrappers</u>' (a pre-	Access to a highly personalised curriculum incorporating additional support to enable 'readiness for learning' (e.g. self-regulation, planning, preparation, and organisation). Targeted intervention, clearly linked to IEP objectives, for key competencies (e.g. time, inhibition control, working memory intervention e.g, <u>Cogmed</u>). *(cogmed.com)*.

	Organise and structure classroom talk and dialogue, including 'Socratic talk', talk partners and debating. *(changingminds.org/techniques/questioning/socratic_questions.htm)* Teacher modelling of own thinking and understanding at a whole-class level (e.g. modelling self-talk when preparing for a task, making mistakes or monitoring reading comprehension). Use of open questioning to support pupils' thinking around a task (e.g. 'what do we have to do here?' 'how might we start?') Use of structured planning templates (e.g. visual task plans or check lists), teacher modelling, worked examples and breaking down activities into steps.	and post-exam self-evaluation tool). *(globalmetacognition.com/post/designing-effective-exam-wrappers).* Teach and model working memory and recall strategies within small groups (rehearsal and chunking of information, visual memory strategies and creating narratives). Gather observational data and conduct targeted assessment to further clarify strengths and needs (e.g. Working Memory Rating Scale (WMRS)) *(pearsonclinical.co.uk/en-gb/Store/Professional-Assessments/Cognition-6-Neuro/Memory/Working-Memory-Rating-Scale).* Provide explicit instruction and targeted goal-setting with individual pupils/groups around key skill areas	Use of pre/post measures to monitor impact and progress.

	Whole school: Employ strategies to develop pupils' metacognition and self-regulation (i.e. the ability to monitor, direct and review their own learning, through explicitly thinking about their own learning, setting goals and evaluating progress) and executive function skills (these are a set of skills and mental processes that develop throughout childhood and adolescence, which support pupils to self-regulate, initiate, attend to and persevere with activities successfully). *(lbhflearningpartnership.com/wp-content/uploads/2024/04/Document-7.A-Supporting-Executive-Functioning-in-the-Classroom.pdf).*	(e.g. self-management or self-organisation skills). Regularly cue pupils to remind them of the skills they are focusing on before initiating a task, and recognise and reward progress. Small group/individual interventions to develop targeted skills (e.g. access to small group sessions to practise attention and listening skills, working memory instruction/practice: Cogmed. Complement computerised interventions with strategy-based practice within the classroom. *(cogmed.com)* Use of personalised work areas/stations with clear systems for organisation and planning (e.g. using task boards or in-out trays). Provide regular opportunities for short breaks and use of individual items to	

	Explicit teaching of metacognitive strategies, following the seven-step model: • Activating prior knowledge. • Explicit strategy instruction. • Modelling of learned strategy. • Memorisation of strategy. • Guided practice. • Independent practice. • Structured reflection. *(educationendowmentfoundation.org.uk/education-evidence/teaching-learning-toolkit/metacognition-and-self-regulation).*	support attention and concentration within agreed boundaries across lessons (e.g. brief movement breaks and/or access to fiddle items).	
Literacy	Individual pupil: Collaborative learning and peer tutoring approaches (e.g. Paired Reading, Cued Spelling). *(highlandliteracy.com/paired-reading-peer-and-adult).* *(highlandliteracy.com/wp-content/uploads/2017/10/cued-spelling.pdf).*	Targeted assessments e.g. IDL, Lexia, PiXL CODE, SNAP SpLD, Accelerated Reader, Nessy, Connective Learning. IDL: (*idlsgroup.com/our-products/literacy).* Lexia: (*lexiauk.co.uk).* PiXL CODE: (*pixl.org.uk/secondary).* SNAP SpLD: (*hachettelearning.com/assessment/sen-assessments).* Accelerated Reader:	Interventions to develop literacy skills, based on principles of repetition and over-learning, with support to generalise skills (e.g. Precision Teaching, Toe by Toe). See General section. *(edpsyched.co.uk/blog/what-is-precision-teaching-guide-for-primary-school-teachers).*

	Classroom: Use of evidence-based approaches to teaching literacy (e.g. Education Endowment Foundation Improving Literacy in Secondary Schools guidance). *(educationendowmentfoundation.org.uk/education-evidence/guidance-reports/literacy-ks3-ks4).* Reading buddy/ peer support/ joint learning. Class literacy programmes which can be differentiated for individuals. Cross-curricular embedding of basic Literacy skills. Whole school: Effective quality first teaching, whole school approaches, assessment and links with parents (See General section).	(*uk.renaissance.com/products/accelerated-reader).* Nessy: (*nessy.com/en-gb).* Connective Learning: (*connectivelearning.co.uk/attending).* Standardised assessments such as the PhAB, the Detailed Assessment of Speed of Handwriting and the Wide Range Achievement Test 5. PhAB: (*gl-assessment.co.uk/assessments/products/phab2).* Detailed Assessment of Speed of Handwriting and the Wide Range Achievement Test 5: (*pearsonclinical.co.uk/en-gb/wide-range/Wide-Range-Achievement-Test-C-Fifth-Edition).* Small-group support for pupils struggling with literacy, e.g. Read Write Inc. *(ruthmiskin.com/phonics).*	*(toe-by-toe.co.uk).* Very small group/ paired/ individual interventions to develop literacy skills, e.g.: Word Shark *(wordshark.co.uk).* Acceleread, Accelewrite *(dyslexic.com/product/acceleread-accelewrite-guide-to-using-talking-computers-to-help-children-learn-to-read-and-write).* Accelerated Reader *(uk.renaissance.com/products/accelerated-reader).* BoostingReading@Secondary *(educationworks.org.uk/what-we-do/reading-support/boosting-reading).* Access to resources such as aurally encoded dictionaries.

		Reciprocal Teaching to raise reading comprehension levels. *(readingrockets.org/classroom/classroom-strategies/reciprocal-teaching)*. Use of technology such as Clicker 8 and online software such as Dyslexia Gold and Lexia Power Up Literacy. *(cricksoft.com/clicker, dyslexiagold.co.uk, lexiapowerup.com)*. Introduce accessibility tools on Microsoft Word, e.g. Immersive Reader. *(learn.microsoft.com/en-gb/training/educator-center/product-guides/immersive-reader)*. Explore alternative methods or recording such as voice to text, using a keyboard. Use of a reading pen. Bespoke homework clubs/ online homework.	



		Training NASEN. *(nasen.org.uk/events).* Access to books with low reading age and high interest, e.g. Rising Stars. *(risingstars-uk.com).*	
Numeracy	Individual pupil: Collaborative learning and peer tutoring approaches (e.g. Paired Maths– an approach where a 'tutor' and 'tutee' jointly work on Maths questions using a framework of understanding the question, finding an answer and finishing the question by reflecting on what they have done and linking to previous learning). Classroom: Use of evidence-based approaches to teaching Mathematics (e.g. Education Endowment Foundation Improving Mathematics in Key Stages 2 and 3 guidance report).	Use of appropriate assessments to identify strengths and areas of need, in order to target intervention at an early stage. This may include standardised assessments (e.g. Sandwell Numeracy Test) as well as formative, criterion-referenced and curriculum-based assessments such as Precision Teaching baseline probes. *(gl-assessment.co.uk/assessments/products/sandwell-early-numeracy-test).* *(edpsyched.co.uk/blog/what-is-precision-teaching-guide-for-primary-school-teachers).*	More specialised interventions, e.g. Numbers Count – a specially trained teacher gives individuals or small groups at least 3 x 30-minute lessons for a term. Sessions are planned for individuals based on initial assessments, with a focus on number and calculation. *(edgehill.ac.uk/departments/academic/education/research/every-child-counts).* 1stClass@Number can be adapted for older pupils who need to reinforce basic mathematical skills and concepts.



	(educationendowmentfoundation.org.uk/education-evidence/guidance-reports/maths-ks-2-3). Cross-curricular embedding of basic Numeracy skills. <u>Whole school:</u> Effective quality first teaching, whole school approaches, assessment and links with parents (See General section).		*(edgehill.ac.uk/departments/academic/education/research/every-child-counts/1st-class-number).*



Key Stage Four

SKILL	WHAT TO DO FIRST *Identifying and supporting need*	ASKING FOR HELP *Starting Assess, Plan, Do, Review*	WHEN MORE HELP IS NEEDED *Targeted support*
General	Individual pupil: Differentiation- e.g. task sheets; providing PowerPoint printouts; timers; breaking down skills; understanding of 'small steps' approaches; targeted questions at different levels. Scaffolding of work- e.g. task plans; word banks; sentence starters; writing frames. Promoting independence- e.g. scaffolding; timers; visuals; sharing expectations; work pitched at pupils' level; effective deployment of support staff; offering mediation (approaches and strategies used to support during tasks and activities) at a lower level first before	Further assessment of need through observation, collating assessment data, and gathering the views of staff, parents/ carers and pupils, following a graduated approach and assess-plan-do-review learn cycles. (*teachertoolkit.co.uk/2018/05/21/assess-plan-do-review).* *(tameside.gov.uk/TamesideMBC/media/sen/GraduatedApproachModelAssessPlan.pdf).* Facilitate learning activities in smaller and targeted groups, in limited distraction environments where possible. *(educationendowmentfoundation.*	Access to a highly personalised curriculum incorporating additional support to enable 'readiness for learning' (e.g. self-regulation, planning, preparation, and organisation). Targeted intervention, clearly linked to IEP objectives, for key competencies (e.g. time, inhibition control, working memory intervention e.g. Cogmed, *cogmed.com).* Use of pre/post measures to monitor impact and progress. Individualised planning around key skills for independence to support plans for post-16 education, employment or training.



	increasing, where necessary (see Asking for Help column). *(educationendowmentfoundation.org.uk/education-evidence/guidance-reports/teaching-assistants).* Classroom: Staff awareness of the learning hierarchy to support their understanding of the stages involved in developing a skill and identifying which stage pupils have reached/ where additional support to progress may be needed: Acquisition (being introduced to a task, such as recognising a phonic sound, and recognising initial components. Focus is on accuracy and getting it right, rather than speed or use of concepts to problem solve). Fluency (practice phase and becoming familiar with the task; starting to focus on speed as well as accuracy (e.g. identifying sounds	*org.uk/education-evidence/teaching-learning-toolkit/small-group-tuition).* Awareness of pupils who may benefit from additional support at the acquisition and fluency stages of the learning hierarchy (e.g. strategies such as pre-teaching of key concepts/ vocabulary and increased repetition and over-learning with opportunities to revisit concepts more frequently). See Getting Advice column. Individual and/ or small group interventions with appropriate pre- and post- measures to evaluate progress (examples of specific literacy and numeracy interventions are suggested below); good starting points for finding out about evidence-	

	more quickly and automatically). Individuals will make different rates of progress). Mastery (task is fully learnt and feels like 'second nature'; pupil has developed a level of proficiency which is not affected by new learning or periods of time without practicing the skill, such as being able to recognise a phonic sound over time). Generalisation (mastered task is now used in other situations; with instruction, the pupil applies the skill with novel materials or under different conditions, such as applying phonics sounds to reading a book with some help. Learning is less prescribed and reinforcement can take place through everyday experiences, enabling simple problem solving). Adaptation (the mastered skill is fully generalised and the	based interventions, programmes and approaches are: The Education Endowment Foundation's Teaching and Learning Toolkit and Language and Literacy and Mathematics projects. *(educationendowmentfoundation.org.uk/education-evidence/teaching-learning-toolkit/small-group-tuition).* *(educationendowmentfoundation..uk/guidance-for-teachers/literacy).* *Educationendowmentfoundation.org.uk/projects-and-evaluation/promising-programmes/mathematics-mastery-secondary).* Evidence 4 Impact – an independent service that supports educators in using evidence-based practice in order	

	information can be used in novel ways and for more complex problem solving, such as applying phonic knowledge to new words. Specific instruction in complex or new situations isn't needed and the pupil can ask themselves what skills or knowledge they might need to solve the problem). *(interventioncentral.org/ academic-interventions/general-academic/instructional-hierarchy-linking-stages-learning-effective-in).* Adaptive teaching techniques – differentiated instruction, scaffolding, active learning strategies. *(https://www.teachertoolkit. co.uk/wp-content/uploads/2023/03/Practical-Adaptive-Teaching-Examples-.pdf)* Multi-sensory teaching methods. Create a supportive learning environment- e.g. 'help box' with appropriate resources in each	to improve outcomes for pupils. *(evidence4impact.org.uk).* Early Intervention Foundation guidebook – provides information about early intervention programmes that have been evaluated and shown to improve outcomes for children and young people (including the 'Enhancing school achievement and employment' outcome). *(guidebook.eif.org.uk).* Different pupils will require different types, levels and intensity of adult mediation (approaches and strategies used to support during tasks and activities) to maximise their learning of specific skills and to promote increased levels of independence.	

	classroom; folders in classrooms (on tables) containing resources such as word mats; using off-white paper (not black text on white paper); colour coding/ dyslexia friendly environment; working walls and purposeful displays (e.g. key vocabulary); prompts/ reminders/ 'to do' lists; seating selection; visual cues and timetables; timed rewards and consequences; changing visuals (e.g. Smart boards – changing images, clips, texts and colours); brain breaks. Repetition of concepts and skills- e.g. pre-teaching vocabulary; address misconceptions the same day; retrieval practice (last session/ last week/ last topic/ last term); bridging new content and skills with prior learning (e.g. 'where have we seen this before?') <u>Whole school:</u>	The focus of mediation may include: Regulation of behaviour (finding out what helps the pupil to manage behaviours associated with learning such as attention, impulsivity and distraction); Rule teaching (helping and encouraging the pupil to find and apply rules); Insight (helping the pupil to use 'what works' and apply these tactics to new and novel situations - generalising); or Sequencing (helping the pupil to respond in an organised and sequenced way). Modes of mediation may include: Focusing (directing and maintaining attention to a task using prompts such as gesture or verbal and visual cues);	



	Staff approaches- e.g. peer observation, joint planning and support (e.g. triad delivery model); chunking verbal instructions. Provide staff and peer <u>feedback</u> that is specific, clear and accurate; which focuses on improvement from previous work; and which supports effort and perseverance. Establish good links with home to support learning, e.g.: Ensure that the curriculum is accessible for parents so they can help their children. Online homework support systems so pupils don't have to write things down. *(educationendowmentfoundation.org.uk/education-evidence/teaching-learning-toolkit/feedback).*	Motor (drawing, moving objects into pupil's line of sight, hand over hand guidance); Verbal (using instructions to guide and direct through questions, step-by-step instructions and feedback on what has gone well). Mediation should begin at the lowest level needed for the pupil; some will need to begin at a higher level than others. Mediation progresses from higher to lower levels as follows: Hand over hand guidance. Modelling with initial guidance which is gradually faded. Modelling the task using specific examples of rules, concepts and strategies. Pointing out general characteristics (but not task-specific).	

		Asking for further applications of previously used strategies. Teaching how to select appropriate strategies using previous input from mediation. Pupil applies previous strategies and rules with increasing flexibility. Previous mediation internalised and fully self-regulating. Use effective assessment and monitoring tools to identify all pupils' learning levels and track progress, e.g.: B Squared assessment – broken down into lesson steps to reduce gaps. *(bsquared.co.uk).* Learning Ladders assessment framework. *(learningladders.info/product-videos/assessment-frameworks).*	



		Comparison and analysis of special pupil attainment (CASPA). *(caspaonline.co.uk).* Meaningful moderation of assessment. Where possible, support parents to access similar resources to the ones accessed in school. For example, a school license for Clicker8 also allows parents to access the resources at home for free. Arrange relevant training for staff from external support services, where needed.	
Literacy	Individual pupil: Collaborative learning and peer tutoring approaches (e.g. Paired Reading, Cued Spelling). Paired reading - *(highlandliteracy.com/paired-reading-peer-and-adult).*	Targeted assessments e.g. IDL, Lexia (Power Up Literacy), PiXL CODE, SNAP SpLD, Accelerated Reader, Nessy, Connective Learning. IDL: (*idlsgroup.com/our-products/literacy).*	Interventions to develop literacy skills, based on principles of repetition and over-learning, with support to generalise skills (e.g. Precision Teaching, Toe by Toe). *(edpsyched.co.uk/blog/what-is-precision-teaching-guide-for-*



	(highlandliteracy.com/wp-content/uploads/2017/10/cued-spelling.pdf). Classroom: Use of evidence-based approaches to teaching literacy (e.g. Education Endowment Foundation Improving Literacy in Secondary Schools guidance). Cross-curricular embedding of basic literacy skills. Whole school: Effective quality first teaching, whole school approaches, assessment and links with parents (See General section).	Lexia: (*lexiauk.co.uk).* PiXL CODE: (*pixl.org.uk/secondary).* SNAP SpLD: (*hachettelearning.com/assessment/sen-assessments).* Accelerated Reader: (*uk.renaissance.com/products/accelerated-reader).* Nessy: (*nessy.com/en-gb).* Connective Learning: (*connectivelearning.co.uk/attending).* Standardised assessments such as the PhAB, the Detailed Assessment of Speed of Handwriting and the Wide Range Achievement Test 5. PhAB: (*gl-assessment.co.uk/assessments/products/phab2).* Detailed Assessment of Speed of Handwriting and the Wide Range Achievement Test 5: (*pearsonclinical.co.uk/en-gb/wide-*	*primary-school-teachers).* *(toe-by-toe.co.uk).* Very small group/ paired/ individual interventions to develop literacy skills, e.g.: Word Shark *(wordshark.co.uk).* Acceleread, Accelewrite *(dyslexic.com/product/acceleread-accelewrite-guide-to-using-talking-computers-to-help-children-learn-to-read-and-write).* Accelerated Reader *(uk.renaissance.com/products/accelerated-reader).* Access to resources such as aurally encoded dictionaries.

		range/Wide-Range-Achievement-Test-C-Fifth-Edition). Small-group support for pupils struggling with literacy, e.g. Reciprocal Teaching to raise reading comprehension levels. *(readingrockets.org/classroom/classroom-strategies/reciprocal-teaching).* Use of technology such as Clicker 8 and online software such as Dyslexia Gold and Lexia Power Up Literacy. *(cricksoft.com/clicker, dyslexiagold.co.uk, lexiapowerup.com).* Introduce accessibility tools on Microsoft Word, e.g. Immersive Reader. *(learn.microsoft.com/en-gb/training/educator-*	



		center/product-guides/immersive-reader). Explore alternative methods or recording such as voice to text, using a keyboard. Use of a reading pen. Bespoke homework club run by TAs (online homework). Training offered by NASEN. *(nasen.org.uk/events).*	
Numeracy	Individual pupil: Collaborative learning and peer tutoring approaches (e.g. Paired Maths– an approach where a 'tutor' and 'tutee' jointly work on Maths questions using a framework of understanding the question, finding an answer and finishing the question by reflecting on what they	Use of appropriate assessments to identify strengths and areas of need, in order to target intervention at an early stage. This may include standardised assessments as well as formative, criterion- referenced and curriculum-based assessments such as Precision Teaching baseline probes.	Individually delivered interventions, e.g. 1stClass@Number (can be adapted for older pupils who need to reinforce basic mathematical skills and concepts). *(edgehill.ac.uk/departments/academic/ education/research/every-child-counts/1st-class-number).*

	have done and linking to previous learning). <u>Classroom:</u> Cross-curricular embedding of basic Maths skills. <u>Whole school:</u> Effective quality first teaching, whole school approaches, assessment and links with parents (See General section).	*(edpsyched.co.uk/blog/what-is-precision-teaching-guide-for-primary-school-teachers).*	

Helpful links

KEY STAGE 1

- General Teaching, Learning & SEND Practice
- *https://educationendowmentfoundation.org.uk/education-evidence/guidance-reports/teaching-assistants*
- Guidance on effective deployment of Teaching Assistants to support learning without creating dependency.
- *https://educationendowmentfoundation.org.uk/education-evidence/teaching-learning-toolkit/feedback*
- Evidence-based guidance on feedback that improves progress and motivation.
- *https://www.interventioncentral.org/academic-interventions/general-academic/instructional-hierarchy-linking-stages-learning-effective-in*
  Explains the learning hierarchy (acquisition to adaptation), helping staff match support to where pupils are in their learning.
- Thinking Skills, Attention & Executive Function
- *https://educationendowmentfoundation.org.uk/education-evidence/guidance-reports/metacognition*

- Guidance on teaching pupils how to plan, monitor and evaluate their learning.
- *https://lbhflearningpartnership.com/wp-content/uploads/2024/04/Document-7.A-Supporting-Executive-Functioning-in-the-Classroom.pdf*
  Practical classroom strategies to support planning, organisation, attention and perseverance.
- *https://educationendowmentfoundation.org.uk/news/eef-blog-modelling-independence-the-seven-step-model-planning-tool*
  Seven-step model for explicitly teaching metacognitive strategies.
- Literacy (Reading, Writing, Phonics)
- *https://www.ruthmiskin.com/phonics/*
  Read Write Inc. systematic phonics programme.
- *https://educationendowmentfoundation.org.uk/education-evidence/guidance-reports/literacy-ks-1*
  EEF guidance report on improving literacy in KS1.
- *https://www.ucl.ac.uk/reading-recovery-europe/about-reading-recovery*
  Reading Recovery intervention for the lowest-attaining readers.

Numeracy

- *https://educationendowmentfoundation.org.uk/education-evidence/guidance-reports/early-maths*
  Evidence-based guidance on early maths teaching.
- *https://global.oup.com/education/content/primary/series/numicon/?region=uk*
  Numicon resources for concrete mathematical understanding.
- *https://www.edgehill.ac.uk/departments/academic/education/research/every-child-counts/1st-class-number/*
  1stClass@Number intervention for early numeracy difficulties.

KEY STAGE 2

General Cognition & Learning Support

- *https://educationendowmentfoundation.org.uk/education-evidence/teaching-learning-toolkit/small-group-tuition*
  Evidence on effective small-group tuition.

- *https://www.evidence4impact.org.uk/*
  Independent resource summarising evidence-based interventions.
- *https://foundations.org.uk/about-the-guidebook/*
  Early Intervention Foundation guidebook to evidence-based programmes.
- Thinking Skills, Working Memory & Organisation
- *https://www.pearsonclinical.co.uk/en-gb/Store/Professional-Assessments/Cognition-6-Neuro/Memory/Working-Memory-Rating-Scale/p/P100009240*
  Working Memory Rating Scale (WMRS) for identifying everyday working memory difficulties.
- *https://tracypackiam.com/press/2013/2/1/awma-2-now-available*
  Automated Working Memory Assessment (AWMA).
- *http://complexneeds.org.uk/modules/Module-3.2-Engaging-in-learning---key-approaches/All/downloads/m10p040c/engagement_chart_scale_guidance.pdf*
  Engagement Profile and Scale focusing on *how* a pupil engages with learning.

Literacy

- *https://educationendowmentfoundation.org.uk/education-evidence/guidance-reports/literacy-ks2*
  EEF guidance on improving literacy in KS2.
- *https://toe-by-toe.co.uk/*
  Toe by Toe reading intervention supporting decoding and fluency.
- *https://www.edpsyched.co.uk/blog/what-is-precision-teaching-guide-for-primary-school-teachers*
  Explanation of Precision Teaching for over-learning and fluency.
- *https://www.wordshark.co.uk/*
  Literacy software for spelling and reading support.

Numeracy



- *https://educationendowmentfoundation.org.uk/education-evidence/guidance-reports/maths-ks-2-3*
  Guidance on improving maths in KS2 and KS3.
- *https://mathsnoproblem.com/en/approach/concrete-pictorial-abstract*
  CPA (Concrete–Pictorial–Abstract) approach explanation.
- *https://dynamomaths.co.uk/*
  Dynamo Maths intervention programme.
- *https://www.edgehill.ac.uk/departments/academic/education/research/every-child-counts/numbers-count/*
  Numbers Count intervention for pupils with significant numeracy difficulties.

KEY STAGE 3

Cognition & Learning – General

- *https://educationendowmentfoundation.org.uk/education-evidence/guidance-reports/maths-ks-2-3*
  EEF maths guidance for KS2–3 transition and secondary provision.
- *https://www.interventioncentral.org/academic-interventions/general-academic/instructional-hierarchy-linking-stages-learning-effective-in*
  Continued relevance of the learning hierarchy in secondary contexts.

Thinking Skills, Metacognition & Learning Independence

- *https://educationendowmentfoundation.org.uk/education-evidence/guidance-reports/metacognition*
  Strategies to explicitly teach pupils how to manage their learning.
- *https://changingminds.org/techniques/questioning/socratic_questions.htm*
  Socratic questioning to develop thinking, reasoning and justification.
- *https://cricksoft.com/clicker/*
  Clicker software supporting organisation, writing and independence.



Literacy (Secondary)

- *https://educationendowmentfoundation.org.uk/education-evidence/guidance-reports/literacy-ks3-ks4*
  EEF guidance on improving literacy in secondary schools.
- *https://www.lexiauk.co.uk/*
  Lexia literacy intervention programmes.
- *https://www.dyslexiagold.co.uk/*
  Literacy and memory support software.

Numeracy

- *https://www.edgehill.ac.uk/departments/academic/education/research/every-child-counts/1st-class-number/*
  1stClass@Number adapted for older pupils requiring reinforcement of basic concepts.

KEY STAGE 4

Cognition & Learning – Preparing for Independence

- *https://educationendowmentfoundation.org.uk/education-evidence/teaching-learning-toolkit/feedback*
  Effective feedback supporting exam preparation and sustained effort.
- *https://educationendowmentfoundation.org.uk/education-evidence/teaching-learning-toolkit/small-group-tuition*
  Small-group interventions for GCSE preparation.
- Executive Function, Organisation & Memory
- *https://www.cogmed.com/*
  Working memory intervention for pupils with significant difficulties.
- *https://www.pearsonclinical.co.uk/en-gb/Store/Professional-Assessments/Cognition-6-Neuro/Memory/Working-Memory-Rating-Scale/p/P100009240*
  WMRS for ongoing monitoring of working memory difficulties.



Literacy

- *https://www.edpsyched.co.uk/blog/what-is-precision-teaching-guide-for-primary-school-teachers*
  Precision Teaching used to support fluency and retention of basic skills.
- *https://www.acceleratedreader.com/*
  Accelerated Reader to promote engagement and reading stamina.

Numeracy

- *https://www.edgehill.ac.uk/departments/academic/education/research/every-child-counts/numbers-count/*
  Numbers Count and similar interventions adapted for KS4 learners.
- Local Authority & Professional Support (All Key Stages)
- *https://www.tameside.gov.uk/Education/Educational-Psychology-Service*
  Tameside Educational Psychology Service.
- *https://tamesidechildrenandyoungpeople.nhs.uk/our-services/childrens-salt*
  Speech and Language Therapy where language impacts learning.
- *https://tamesidelocaloffer.co.uk/*
  Tameside Local Offer including SEND services and outreach.
- *tameside.gov.uk/TamesideMBC/media/sen/GraduatedApproachModelAssessPlan.pdf*
  Assess-Plan-Do-Review guidance.



Social Emotional Mental Health (SEMH)

Key Stage One

SKILL	WHAT TO DO FIRST *Identifying and supporting need*	ASKING FOR HELP *Starting Assess, Plan, Do, Review*	WHEN MORE HELP IS NEEDED *Targeted support*
Social and Interpersonal Skills *Relationships*	Classroom: Use circle Time & PSHE Lessons sessions to explore emotions, friendships, empathy, and conflict resolution. Use of stories, role-play, and discussion to model positive relationships. Tailored narratives to help children navigate social cues and responses. Visual aids (e.g., emotion charts, friendship rules) to reinforce expectations. Group tasks and games that encourage turn-taking, sharing, and teamwork.	Identify and complete appropriate assessments to establish a greater understanding of the child's needs and inform group interventions, for example: Boxall Profile (*new.boxallprofile.org).* Child and Youth Resiliency Measure. *(cyrm.resilienceresearch.org).* The Strengths and Difficulties Questionnaire (SDQ). *(sdqinfo.org/a0.html).* Emotional Literacy Assessment *(gl-assessment.co.uk/products /emotional-literacy).* Offer small group interventions to promote positive peer interactions including: Time to Talk. *(integratedtreatmentservices.co.uk/our*	In consultation with relevant outside agencies (e.g., Educational Psychology Service or Tameside specialist Outreach Service; TSOSS) provide 1:1 tailored intervention planned to enable the child to meet specific targets in relation to peer integration/ friendships. (Educational Psychology Service *tameside.gov.uk/Education/ Educational-Psychology-Service*)

	Teacher-facilitated interactions to model and scaffold social behaviour. Teachers help children label and regulate emotions during social interactions. Use of "feelings boards" or morning check-ins to promote emotional awareness. Whole school: Clear ethos that promotes respect and inclusion. Consistent language and expectations across all staff. Equips staff with strategies to support children's social development. Promote a trauma-informed approach across the school.	*-approaches/speech-therapy-approaches/time-talk).* Circle of Friends. *(inclusive-solutions.com/circles/circle-of-friends/what-is-a-circle-of-friends).* FRIENDS for Life. *(educationendowmentfoundation.org.uk/projects-and-evaluation/projects/friends).* S. S Grin. *(centervention.com/adventures-aboard-the-s-s-grin).* Nurture Groups. *(nurtureuk.org/supporting-you/nurture-groups).*	

	Celebrations of diversity, kindness weeks, and assemblies focused on values. Displays and resources that reflect positive relationships and emotional literacy. Use a whole-school approach embedded in PSHE lessons (e.g., Jigsaw PSHE, *jigsaweducationgroup.com/programmes/pshe-3-16*)		
Social Awareness and Understanding	Classroom: Provide planned opportunities to learn and practise social and emotional skills during structured activities, e.g. role playing. Use stories and other stimuli that generate problem solving around different social situations, modelling and practising the use of skills.	Identify and complete appropriate assessments to establish a greater understanding of the child's needs and inform group interventions, for example: Boxall Profile. (*new.boxallprofile.org).* Child and Youth Resiliency Measure. *(cyrm.resilienceresearch.org)* The Strengths and Difficulties Questionnaire (SDQ).	In consultation with relevant outside agencies (e.g., Educational Psychology Service or Tameside specialist Outreach Service; TSOSS) provide 1:1 tailored intervention planned to enable the child to meet specific targets in relation to peer integration/ friendships.

	Prepare children for changes to activities/routines/ staffing. Provide a plan and support for unstructured and/or transition times where needed. Utilise visual timetables/schedules. Use role play/verbal rehearsal before activities to reinforce behavioural expectations and reduce anxiety. Use Restorative practices to support conflict resolution *(restorative-practice.co.uk)*. Guided conversations about fairness, kindness, and inclusion. Model reflective questioning: "How do you think they felt when that?" to support perspective taking.	*(sdqinfo.org/a0.html)*. Emotional Literacy Assessment *(gl-assessment.co.uk/products/emotional-literacy)*. Blob Tree. *(blobtree.com/pages/frontpage)*. Offer small group interventions to promote positive peer interactions including: Talkabout social skills *(routledgelearning.com/tass/what-is-talkabout)*. Social Stories *(carolgraysocialstories.com/social-stories/what-is-it)*. Time to Talk. *(integratedtreatmentservices.co.uk/our-approaches/speech-therapy-approaches/time-talk)*. Circle of Friends. *(inclusive-solutions.com/circles/circle-of-friends/what-is-a-circle-of-friends)*.	(Educational Psychology Service *tameside.gov.uk/Education/Educational-Psychology-Service*)



	Emphasis on choice rather than control and "take up time" to respond to choose whenever possible. <u>Whole school:</u> Promote a culture that promotes empathy, respect, and inclusion through assemblies, displays, and school rules. Whole-school themes (e.g., "Kindness Week") to reinforce social awareness. Activities that raise awareness of differences (e.g., neurodiversity, cultural backgrounds) in age-appropriate ways. Adults modelling respectful, empathetic interactions. Staff use inclusive/ neuroaffirmative language and highlight positive social behaviours.	FRIENDS for Life. *(educationendowmentfoundation.org.uk/projects-and-evaluation/projects/friends).* S. S Grin. *(centervention.com/adventures-aboard-the-s-s-grin).* Nurture Groups. *(nurtureuk.org/supporting-you/nurture-groups).* Access ELSA <u>Social Skills</u> resources *(elsa-support.co.uk/resources/category/elsa-resources/social-skills-elsa-resources/page/13).*	



Managing Emotions *Emotional Awareness, Understanding and Regulation*	Classroom: Create a calm, positive and nurturing classroom environment (see: ATRCM observation and planning schedule or classroom wellbeing toolkit) *(mentallyhealthyschools.org.uk/resources/classroom-wellbeing-toolkit).* Use whole class approaches to teaching emotional regulation strategies, e.g. Go Noodle, *(gonoodle.com).* Use designated spaces with sensory tools, breathing prompts, and visuals to help children self-regulate Look for opportunity to mindfulness and include short, regular practices to build self-regulation and focus through techniques like "bubble breathing" or "rainbow relaxation." *(youtube.com/@TheMindfulnessTeacher).*	Identify and complete appropriate assessments to establish a greater understanding of the child's needs, for example: Boxall Profile. *(new.boxallprofile.org).* The Strengths and Difficulties. Questionnaire (SDQ). *(sdqinfo.org/a0.html).* Superflex Program. *(socialthinking.com/detective-superflex-series-social-learning-curriculum).* Use appropriate emotional awareness and regulation workbooks or programs within individual or a small group, such as: Think Good, Feel Good. *(onlinelibrary.wiley.com/doi/book/10.1002/9781119395348).* Starving the Anxiety Gremlin. *(socialthinking.com/products/starving-the-anxiety-gremlin).*	Work with a group of key staff to identify the individual profile of the child to gain an understanding of their individual triggers, observable behaviours, as well specific escalating and de-escalating adult responses. Contact Educational Psychology Service, for support. Educational Psychology Service *tameside.gov.uk/Education/Educational-Psychology-Service*) Teach self-calming techniques, such as breathing, visualisation or repetitive, soothing or calming activities (colouring, play dough, theraputty). Ensure access to these activities at all times through use of a 'calm box'.

	Incorporate movement breaks and breathing exercises to help pupils manage their emotional states (see: Moodboosters, *bbc.co.uk/teach/moodboosters*) Use emotional validation strategies when upset, angry or distressed, e.g. an Emotion Coaching approach. Also, including routines where children identify and share how they feel using visual aids. (Emotion Coaching *emotioncoachinguk.com/what-is-emotion-coaching*) Discuss and model feelings and emotions often, using a wide vocabulary of feelings and emotions words. Create displays focused on developing emotional vocabulary (see: Zones of Regulation, *zonesofregulation.com/*)	Starving the Angry Gremlin. *(socialthinking.com/products/starving-the-anger-gremlin)*. Managing our feelings KS1 | Y1 RSHE (PSHE) Lesson Resources | Oak National Academy *(thenational.academy/teachers/programmes/rshe-pshe-primary-ks1/units/emotions-how-do-i-feel-today/lessons/managing-our-feelings)*. Zones of Regulation *(zonesofregulation.com)* Colour Monster *(images.scholastic.co.uk/assets/a/68/63/the-colour-monster-teacher-s-notesresource-pack-2-2242358.pdf)*. Assign a key adult/ team of adults for daily check ins. Complete worksheets/booklets with pupils around CBT style input (see: WeHeartCBT - *weheartcbt.com*).	*(youngminds.org.uk/blog/how-to-make-a-self-soothe-box)*. Use gentle praise when self-calming strategies are attempted, even if unsuccessful. Use the Incredible 5-Point Scale to aid emotional self-regulation. Adults to understand the arousal curve and the arousal continuum to support the child. *(5pointscale.com)*. Utilise specialist therapeutic interventions, e.g. play therapy, art therapy. Seek support from the relevant services within Tameside and signpost with information, see: Children and Young People

	Use of distraction techniques and giving responsibility Whole school: Shared language around emotions used by all staff. Implement mindfulness on a whole school level (see: Teach dots (3-6) - Mindfulness in Schools Project) *(mindfulnessinschools.org/teach-dots-3-6)*. Displays, assemblies, and routines that promote emotional understanding. Staff knowledge around, trauma-informed responses to emotional dysregulation (see: UK Trauma Council or Beacon House for resources and guidance on Childhood Trauma and The Brain, Childhood Trauma and PTSD, Traumatic Bereavement. (UK Trauma Council *uktraumacouncil.org*)		Mental Health Support - Tameside MBC *(tameside.gov.uk/mentalhealth/children)*



	(Beacon House *beaconhouse.org.uk/resources*) Staff are equipped to support children through co-regulation. Embedded practices around emotional regulation (e.g., Zones of Regulation, *zonesofregulation.com*). Implement a whole school approach to mental health and wellbeing (e.g., Emotionally Friendly Schools, *emotionallyfriendly.co.uk*). Gain pupil feedback to inform the whole school approach (see: *birmingham.ac.uk/schools/social-policy/departments/health-services-management-centre/mental-health-and-wellbeing-with-children*) Staff to have an awareness of child development and key concepts that influence this (e.g., attachment) *(mentallyhealthyschools.org.uk/ment*		

	al-health-needs/attachment-and-child-development). Implement an evidence-based framework to help develop a holistic, whole-school or college approach to mental health (see: 5 Steps to Mental Health and Wellbeing – free framework | Anna Freud) *(annafreud.org/resources/schools-and-colleges/5-steps).* Look at creating safe spaces in school. *(mentallyhealthyschools.org.uk/resources/how-to-create-and-use-a-safe-space-in-schools).* Look at implementing whole school opportunities to complete activities to support mental health (see: 5 ways to get children moving for their mental health | Place2Be and the Daily Mile)		

	(place2be.org.uk/about-us/news-and-blogs/2024/may/5-ways-to-get-children-moving-for-their-mental-health). Access websites such as 'MindEd' for information around mental health. *(mindedhub.org.uk).* Follow guidance around supporting mental health in schools (see: Mental health and behaviour in schools) *(assets.publishing.service.gov.uk/media/625ee6148fa8f54a8bb65ba9/Mental_health_and_behaviour_in_schools.pdf).*		
Reducing Anxiety	Classroom: Use soft lighting, calm colours, and tidy spaces to reduce sensory overload. Keep routines consistent and use visual schedules to support transitions.	Identify and complete appropriate assessments to establish a greater understanding of the child's needs, for example: The Strengths and Difficulties Questionnaire (SDQ). *(sdqinfo.org/a0.html).*	Identify and complete appropriate assessments to establish a greater understanding of the child's needs, for example: Schools and Students Health Education Unit (SHEU) surveys. (sheu.org.uk).

	Introduce simple techniques like: Deep breathing ("smell the flower, blow the candle") Butterfly hugs Grounding games (e.g. "5 things you can see…") Practise these regularly, not just in moments of distress. Provide emotion cards, worry monsters, or check-in boards to help children express how they feel. Use stories and puppets to explore common worries and model coping. Acknowledge children's feelings through techniques such as Emotion Coaching and help them name and understand their emotions. Use phrases like "It's okay to feel nervous. Let's take a breath together."	Use stories and therapeutic metaphors to teach about feelings and normalise feelings of anxiety, e.g. Margot Sunderland books. *routledge.com/Helping-Children-with-Feelings/book-series/SMHCWF).* Consider Cognitive Behavioural approaches to group work provided over specified period of time e.g.: Starving the Anxiety Gremlin. *(socialthinking.com/products/starving-the-anxiety-gremlin).* Starving the Angry Gremlin. *(socialthinking.com/products/starving-the-anger-gremlin).* FRIENDS for Life. *(educationendowmentfoundation.org.uk/projects-and-evaluation/projects/friends).* In cases of suspected Emotional Barriers to School Attendance	Provide a daily check in with a key adult/ team of adults. Allow engagement with a neutral task or complete an assigned 'job' at school to reduce feelings of anxiety. Implement a RAMP – Reducing Anxiety Management Plan (contact Educational Psychology Service for further information). (Educational Psychology Service *tameside.gov.uk/Education/Educational-Psychology-Service*).

	(emotioncoachinguk.com/what-is-emotion-coaching). Prioritise connection with key adults, consistent staffing, and warm greetings. Use circle time and play-based activities to build trust and belonging. Focus on effort and progress rather than outcomes. Consider ways to support children transition throughout school 10 Tips For Successful School Transitions - TeacherToolkit *(teachertoolkit.co.uk/2022/05/16/successful-transitions).* Whole school: Use visual timetables and clear daily routines to reduce uncertainty.	(EBSA), please see the below information: padlet.com/spectrumgaming/barriers-to-education-1bnrx2lf6iwfck52. Resources to support this include: School wellbeing cards *(Schoolwellbeingcards.co.uk).* Ideal school – *(nelincs.gov.uk/assets/uploads/2023/08/Drawing-the-Ideal-School.pdf).*	



	Prepare children for changes in routine with advance warnings and visual cues. Provide CPD on recognising signs of anxiety in early years and KS1. Train staff in emotion coaching, low-arousal approaches, and attachment-aware practices. Create designated calm corners or sensory spaces in classrooms and shared areas where children can go to self-regulate. Implement programmes like Zones of Regulation or Colour Monster emotional awareness and coping strategies. (Zones of Regulation *zonesofregulation.com/*) (The Colour Monster		



	tpet.co.uk/hub/the-colour-monster-classroom-resources/) Offer anxious children, workshops or resources for parents/ carers on supporting including routines, sleep, and separation anxiety. Use stories, puppets, or songs in assemblies to explore feelings, bravery, and calming strategies. Implement whole school approaches to support managing anxiety and encourage positive wellbeing (e.g., SCHOOLS | The Worry Wizard or Emotionally Friendly Schools) The Worry Wizard – Schools *theworrywizard.com/schools*) (Emotionally Friendly Schools *emotionallyfriendly.co.uk/*) Look at ways to support staff wellbeing through whole school		

	approaches (see: *early-years-staff-wellbeing-resource-130721.pdf*). Follow governments guidance around supporting mental health and managing behaviours in school (Promoting children and young people's mental health and wellbeing) *(assets.publishing.service.gov.uk/media/614cc965d3bf7f718518029c/Promoting_children_and_young_people_s_mental_health_and_wellbeing.pdf)*		
Self-esteem/ self- efficacy	Classroom: Embed a whole class growth mindset approach coupled with effective differentiation. *(emotionallyfriendly.co.uk/resources/our-blog/posts/growth-mindset).* Implement whole class activities that encourage identification of	Identify and complete appropriate assessments to establish a greater understanding of the child's needs, for example, the Boxall Profile. *(new.boxallprofile.org).* Identify and complete appropriate assessments to establish a greater understanding of the whole class/ whole school's needs, for example:	Identify and complete appropriate assessments to establish a greater understanding of the child's needs. Assign a key adult/team of adults to provide daily opportunities for the child to talk through successes and

	strengths, e.g. creating visual reminders of their strengths through posters, certificates, stickers. These can be collected in a 'Good to be Me' or 'All about Me' book. Offer opportunities for children to take on jobs and responsibilities in class and school. Consider language around praise that focuses on effort, persistence and strategy (e.g., "I noticed how hard you worked on that problem!"). Model self-talk that reinforces resilience (e.g., "This is tricky, but I can try a different way."). Use opportunities for partner work to foster collaboration and mutual encouragement.	Pupils Attitudes to Self and School (PASS) *(gl-assessment.co.uk/assessments/pass)*. Utilise resilience-based frameworks and interventions such as the Boing Boing Framework or Resilience Doughnut. *(boingboing.org.uk/interactive-resilience-framework)*. *(theresiliencedoughnut.com.au)*. Offer small self-esteem groups as a supportive way of building children's confidence and self-esteem. Plan out self-esteem-building exercises as part of a group to enable children to receive positive messages and acceptance from one another.	achievements experienced that day. Plan daily opportunities to spend time identifying and building on strengths with an adult, on a 1:1 basis, e.g. make a strengths jar, use the finding hidden treasures approach (Ioan Rees, 2005)

	Implement lessons on resilience (see: Beano resilience lesson plans | Resources | YoungMinds) *(youngminds.org.uk/professional/resources/beano-resilience-lesson-plans).* <u>Whole school:</u> Train staff in growth mindset principles and embed them in assemblies, lessons, displays, and communications. (see: Mindset Kit | Resources for growth and learning mindsets) *(mindsetkit.org).* Use consistent language across the school to reinforce effort and perseverance. Celebrate non-academic achievements (e.g., kindness, resilience, improvement) in weekly assemblies or newsletters.	Ideas for activities can be found within Emotionally Friendly Schools) Also, available on the ELSA support website. (Emotionally Friendly Schools *emotionallyfriendly.co.uk).* (ELSA self-esteem resources *elsa-support.co.uk/resources/ category/elsa-resources/self-esteem).*	

	Use certificates or “Star of the Week” awards that highlight personal development. Share strategies with parents/ carers to reinforce positive self-beliefs at home. Ensure the curriculum reflects diverse backgrounds and abilities so all children feel seen and valued. Use stories and role models that show overcoming challenges and celebrating uniqueness.		

Key Stage Two

SKILL	WHAT TO DO FIRST *Identifying and supporting need*	ASKING FOR HELP *Starting Assess, Plan, Do, Review*	WHEN MORE HELP IS NEEDED *Targeted support*
Social and Interpersonal Skills Relationships	Classroom: Use PSHE lessons to teach skills like active listening, turn-taking, empathy, and conflict resolution. Role-play common social scenarios (e.g., joining a group, handling disagreements) to build confidence. Regular class discussions to help encourage open communication and helps children understand different perspectives. Use prompts like "How do we show kindness?" or "What makes a good friend?" to guide discussions. Use turn-taking games and co-operative learning activities during subject lessons or during free time that require collaboration, such as jigsaw	Identify and complete appropriate assessments to establish a greater understanding of the child's needs and inform group interventions, for example: Boxall Profile. *(new.boxallprofile.org).* Child and Youth Resiliency Measure. (cyrm.resilienceresearch.org*).* The Strengths and Difficulties Questionnaire (SDQ). *(sdqinfo.org/a0.html).* Emotional Literacy Assessment (gl-assessment.co.uk/products/emotional-literacy).	In consultation with relevant outside agencies (e.g., Educational Psychology Service,), provide 1:1 tailored intervention planned to enable the child to meet specific targets in relation to peer integration/friendships. *(Educational Psychology Service tameside.gov.uk/Education/Educational-Psychology-Service)* Identify and complete appropriate assessments to establish a greater understanding of the child's



	activities or team challenges. Assign rotating roles (e.g., speaker, recorder, encourager) to ensure equal participation. (Co-operative learning activities *tes.com/teaching-resource/cooperative-learning-structures-6363680*). Whole school: Consider implementing Restorative practices to prevent conflict, build relationships and repair harm by enabling people to communicate effectively and positively. Provide access to supervision and training to encourage staff to reflect on their current practice within their school environment, e.g.trauma-informed practice. The EPS can also support with this. *(restorative-practice.co.uk). (traumainformedschools.co.uk/dipl*	Offer small group interventions to promote positive peer interactions including: Time to Talk. *(integratedtreatmentservices.co.uk/our-approaches/speech-therapy-approaches/time-talk).* Circle of Friends. *(inclusive-solutions.com/circles/circle-of-friends/what-is-a-circle-of-friends).* FRIENDS for Life. *(educationendowmentfoundation.org.uk/projects-and-evaluation/projects/friends).* S. S Grin. *(centervention.com/adventures-aboard-the-s-s-grin).* Social thinking curriculum *(socialthinking.com).* Talkabout social skills *(routledgelearning.com/tass/what-is-talkabout).*	needs and inform individual intervention: Emotional Literacy Assessment. *(gl-assessment.co.uk/products/emotional-literacy).*



	oma) Adopt a planned PSHE curriculum that involves whole class discussion and activities that explore different relationships, e.g. Quality Circle Time, Philosophy for Children. (Quality Circle Time *circle-time.co.uk/our-approach/quality-circle-time*). (Philosophy for Children *p4c.com)*. Promote a consistent, positive behaviour policy that values respect, kindness, and inclusion. Implement No Outsiders - a whole school approach to inclusion. *(no-outsiders.com)*. Use restorative approaches to resolve conflicts and rebuild relationships.	Black sheep press *(blacksheeppress.co.uk)*. Friendship groups/ resources *(elsa-support.co.uk/resources/category/elsa-resources/friendship)*. Brick by brick program *(playincluded.com/the-brick-by-brick-programme)*. Nurture Groups. *(nurtureuk.org/supporting-you/nurture-groups)*. Identify and complete appropriate assessments to establish a greater understanding of the whole class/ whole school's needs, for example: Kidscreen.- (*kidscreen.org)*.	



	Recognise and reward acts of kindness, teamwork, and empathy in assemblies or newsletters. All staff to model respectful communication and emotional regulation. Encourage staff to narrate their own social problem-solving to model strategies for pupils. Access to Mental Health First Aid training for staff to support their understanding of fostering positive peer relationships. *(mhfaengland.org)*.		
Social Awareness and Understanding	Classroom: Use stories, role-play, and drama to explore how characters feel and why they act the way they do.	Identify and complete appropriate assessments to establish a greater understanding of the child's needs and inform group interventions, for example:	Identify and complete appropriate assessments to establish a greater understanding of the child's needs, for example: Emotional Literacy Assessment Blob Tree



	Ask reflective questions like, "How do you think they felt?" or "What would you do in their shoes? Use daily check-ins with emotion charts or zones of regulation to help children identify and express their feelings. Encourage children to notice and respond to how others are feeling. Choose books and videos that highlight diverse experiences, cultures, and emotions. Discuss characters' motivations and how their actions affect others. Narrate your own thinking when responding to others' emotions (e.g., "I can see you're upset, and I want to help."). After group tasks, guide pupils to reflect on how they worked	Boxall Profile. *(new.boxallprofile.org)* Child and Youth Resiliency Measure. *(cyrm.resilienceresearch.org).* The Strengths and Difficulties Questionnaire (SDQ). *(sdqinfo.org/a0.html).* Offer small group interventions to promote positive peer interactions including: Social thinking curriculum *(socialthinking.com).* Talkabout social skills *(routledgelearning.com/tass/what-is-talkabout).* Black sheep press *(blacksheeppress.co.uk).* Friendship groups/ resources *(elsa-support.co.uk/resources/category/elsa-resources/friendship).* Brick by brick program *(playincluded.com/the-brick-by-brick-programme).*	(Emotional Literacy Assessment *gl-assessment.co.uk/products/emotional-literacy/*) (Blob Tree *blobtree.com/pages/frontpage*)

	together: "What went well?" "How did we support each other?" Ensure preparation for changes to activities/ routines/staffing. Provide a plan and support for unstructured and/or transition times. Utilise visual timetables/schedules. *(autism.org.uk/about/strategies/visual-supports.aspx).* Use role play/verbal rehearsal before activities to reinforce behavioural expectations and reduce anxiety. Implement 'Talk Time', a timetabled opportunity to discuss PHSE related topics, news, class concerns, etc. Whole school: Embed monthly or termly themes (e.g., empathy, respect, inclusion) into assemblies, displays, and newsletters.	Use personalised resources like Social Stories (Carol Gray) to reaffirm understanding of behavior in specific situations according to the needs of the individual child. Use Comic Strip Conversations to reflect on real-life events and consider alternative ways of responding. *(autism.org.uk/about/strategies/social-stories-comic-strips.aspx).* Access ELSA Social Skills resources (*elsa-support.co.uk/resources/category/elsa-resources/social-skills-elsa-resources/page/13/*)	



	Use real-life examples and pupil stories to highlight these values. Encourage peer-led initiatives that promote kindness and understanding. Celebrate cultural, religious, and neurodiversity awareness days to foster understanding and appreciation of differences. Involve pupils in planning and presenting these events. Use restorative conversations to help pupils understand the impact of their actions on others. Focus on repairing relationships rather than assigning blame. Encourage consistent language and approaches across the school.		
Managing Emotions	<u>Classroom:</u> Create a calm, positive and nurturing classroom environment	Identify and complete appropriate assessments to	Work with a group of key staff to identify the individual profile of the child to gain an



Emotional Awareness, Understanding and Regulation	(see: ATRCM observation and planning schedule or classroom wellbeing toolkit) *(mentallyhealthyschools.org.uk/resources/classroom-wellbeing-toolkit)*. Embed whole-class approaches such as Go Noodle., *Zones of Regulation*, or *Mindfulness* to teach calming and self-regulation techniques. (Go Noodle *gonoodle.com*). (Zones of Regulation *zonesofregulation.com*). (Mindfulness in Schools – free resources *mindfulnessinschools.org/free-resources*). Incorporate movement breaks and breathing exercises to help pupils manage their emotional states (see: Moodboosters) *(bbc.co.uk/teach/moodboosters*). Use a wide emotional vocabulary in daily conversations and teaching moments.	establish a greater understanding of the child's needs, for example: Boxall Profile. *(new.boxallprofile.org)*. The Strengths and Difficulties. Questionnaire (SDQ). *(sdqinfo.org/a0.html)*. Superflex Program. *(socialthinking.com/detective-superflex-series-social-learning-curriculum).* Use appropriate emotional awareness and regulation workbooks or programs within individual or a small group, such as: Think Good, Feel Good. *(onlinelibrary.wiley.com/doi/book/10.1002/9781119395348)*. Starving the Anxiety Gremlin. *(socialthinking.com/products/starving-the-anxiety-gremlin).*	understanding of their individual triggers, observable behaviours, as well specific escalating and de- escalating adult responses. Contact Educational Psychology Service. *(tameside.gov.uk/Education/Educational-Psychology-Service*) Assign a key adult/ team of adults for daily check ins. Use the Incredible 5-Point Scale to aid emotional self-regulation. Adults to understand the arousal curve and the arousal continuum to support the child. *(5pointscale.com).* Utilise specialist therapeutic interventions, e.g. play therapy, art .



	Discuss feelings openly, using real-life scenarios, stories, or characters to explore emotional responses and appropriate coping strategies. Create classroom displays that promote emotional literacy (such as: emotion thermometers or zones). Identify patterns to determine whether emotional needs are situational or more generalised and adapt strategies accordingly. Whole school: Embed whole class approaches to teaching emotional regulation strategies e.g. Emotionally Friendly Settings. *(emotionallyfriendly.co.uk/about-efs)* Embed mindfulness on a whole school level (see: Teach Paws b (7 - 11) - Mindfulness in Schools Project)	Starving the Angry Gremlin. *(socialthinking.com/products/starving-the-anger-gremlin)*. Use resources to scaffold and support establishing difficulties within incidents, see: Exploring Situations and Problems (ESP) *(drawingtheidealself.co.uk/esp-cards)*. Complete worksheets/booklets with pupils around CBT style input (see: WeHeartCBT - *weheartcbt.com*). Use gentle praise when self-calming strategies are attempted, even if unsuccessful. Consider the child's individual sensory profile with interventions planned in line with this. Provide movement breaks for those with sensory needs.	(Play Therapy *playtherapy.org.uk/*) (Art Therapy *baat.org/*) Reintegration to class/school following therapeutic work needs to be managed sensitively and appropriately. Seek support from the relevant services within Tameside and signpost with information, see: Children and Young People Mental Health Support - Tameside MBC *(tameside.gov.uk/mentalhealth/children)*



	(mindfulnessinschools.org/teach-paws-b). Consistent use of dysregulation strategies and language by staff in school. Provide CPD on Emotion Coaching, trauma-informed practice, and recognising emotional dysregulation. *(emotioncoachinguk.com/what-is-emotion-coaching).* Staff knowledge around, trauma-informed responses to emotional dysregulation (see: UK Trauma Council or Beacon House for resources and guidance on Childhood Trauma and The Brain, Childhood Trauma and PTSD, Traumatic Bereavement. (UK Trauma Council *uktraumacouncil.org*). (Beacon House	Teach self-calming techniques, such as breathing, visualisation or repetitive, soothing or calming activities (colouring, play dough, theraputty). Ensure access to these activities at all times through use of a 'calm box' *(youngminds.org.uk/blog/how-to-make-a-self-soothe-box/).*	

	beaconhouse.org.uk/resources). *(beaconhouse.org.uk/resources)* Encourage staff to model emotional regulation and reflective practice. Create designated calm areas or sensory spaces where pupils can go to self-regulate. Ensure these are accessible, non-punitive, and supported by trained staff. Implement school-wide systems for emotional check-ins (e.g., morning feelings boards, check-in cards).Use this data to identify pupils who may need additional support. Share emotional regulation strategies with parents/ carers through workshops, newsletters, or home packs to encourage consistent language and approaches between home and school.		

	Use emotional validation strategies when a child is upset, angry or distressed, e.g. Emotion Coaching approach. Discuss and model feelings and emotions often, using a wide vocabulary of feelings and emotions words. *(emotioncoachinguk.com/what-is-emotion-coaching*). Create displays focused on developing emotional vocabulary. Gain pupil feedback to inform the whole school approach (see: *birmingham.ac.uk/schools/social-policy/departments/health-services-management-centre/mental-health-and-wellbeing-with-children*). Staff to have an awareness of child development and key concepts that influence this (e.g., attachment - *mentallyhealthyschools.org.uk/menta*		



	l-health-needs/attachment-and-child-development). Implement an evidence-based framework to help develop a holistic, whole-school or college approach to mental health (see: 5 Steps to Mental Health and Wellbeing – free framework | Anna Freud - *annafreud.org/resources/schools-and-colleges/5-steps).* Look at creating safe spaces in school. *(mentallyhealthyschools.org.uk/resources/how-to-create-and-use-a-safe-space-in-schools).* Look at implementing whole school opportunities to complete activities to support mental health (see: 5 ways to get children moving for their mental health | Place2Be and the Daily Mile -		

	place2be.org.uk/about-us/news-and-blogs/2024/may/5-ways-to-get-children-moving-for-their-mental-health). Access websites such as 'MindEd' for information around mental health. (*mindedhub.org.uk*). Follow guidance around supporting mental health in schools (see: Mental health and behaviour in schools) *(assets.publishing.service.gov.uk/media/625ee6148fa8f54a8bb65ba9/Mental_health_and_behaviour_in_schools.pdf).*		
Reducing Anxiety	Classroom: Use whole class approaches to teaching emotional regulation strategies, e.g. Zones of Regulation, cosmic kids yoga, peer massage, calm boxes. (Zones of Regulation	Identify and complete appropriate assessments to establish a greater understanding of the child's needs, for example: The Strengths and Difficulties Questionnaire (SDQ). *(sdqinfo.org/a0.html*)	Identify and complete appropriate assessments to establish a greater understanding of the child's needs, for example:

	zonesofregulation.com). (Cosmic Kids Yoga *cosmickids.com*). Practice calming strategies as a class routinely, particularly after a transition from break or lunch, e.g. colouring or mindful breathing exercise. Use consistent routines, visual schedules, and clear expectations. Keep the classroom low-arousal with calm tones, tidy spaces, and soft lighting where possible. Introduce and regularly practise mindfulness techniques like: Box breathing Grounding games (e.g. "5-4-3-2-1" senses) Worry jars or journals Use these proactively, not just in moments of distress.	Use stories and therapeutic metaphors to teach about feelings and normalise feelings of anxiety, e.g. Margot Sunderland books. *(routledge.com/Helping-Children-with-Feelings/book-series/SMHCWF*) Consider Cognitive Behavioural approaches to group work provided over specified period of time e.g.: Starving the Anxiety Gremlin. *socialthinking.com/products/starving-the-anxiety-gremlin*). Starving the Angry Gremlin. *socialthinking.com/products/starving-the-anger-gremlin*). FRIENDS for Life. *(educationendowmentfoundation.org.uk/projects-and-evaluation/projects/friends*). Implement Pyramid Club. *(uwl.ac.uk/pyramid).*	Schools and Students Health Education Unit (SHEU) surveys. *(sheu.org.uk).* Provide a daily check in with a key adult/ team of adults. Allow engagement with a neutral task or complete an assigned 'job' at school to reduce feelings of anxiety. Implement a RAMP – Reducing Anxiety Management Plan (contact Educational Psychology Service for further information). (Educational Psychology Service *tameside.gov.uk/Education/Educational-Psychology-Service*)



	Provide emotion check-in boards, worry monsters, or "I need help" cards. Use stories, videos, or characters to explore common worries and model coping. Use Emotion Coaching, techniques to acknowledge and name pupils' feelings before guiding them to problem-solve. Use phrases like "It's okay to feel nervous—let's think about what might help." (*emotioncoachinguk.com/what-is-emotion-coaching*). Offer choices in how pupils complete tasks (e.g. drawing, writing, talking). Allow movement breaks, quiet workspaces, or extra processing time.	In cases of suspected Emotional Barriers to School Attendance (EBSA), please see the below information: *(padlet.com/spectrumgaming/barriers-to-education-1bnrx2lf6iwfck52)*. Resources to support this include: School wellbeing cards *(schoolwellbeingcards.co.uk).* Ideal school *(nelincs.gov.uk/assets/uploads/2023/08/Drawing-the-Ideal-School.pdf*). Be aware of potential anxious behaviours and how it may manifest itself in physical forms (e.g., Tics) *(kch.nhs.uk/wp-content/uploads/2023/09/3731-How-to-Manage-Tics-at-School-v3_FINAL.pdf)*.	

	Prioritise connection through key adults, consistent staffing, and warm greetings. Use circle time and collaborative activities to build trust and peer support. Focus on effort and progress, not just outcomes. Consider ways to support children transition throughout school 10 Tips For Successful School Transitions - TeacherToolkit *(teachertoolkit.co.uk/2022/05/16/successful-transitions*). Whole school: Use visual timetables and clear daily structures to reduce uncertainty. Prepare pupils for changes (e.g. supply teachers, trips) with advance notice and visual or verbal cues.		



	Provide CPD on recognising anxiety in children and using strategies like emotion coaching, low-arousal responses, and trauma-informed practice. Designate calm areas in classrooms or shared spaces where pupils can go to self-regulate. Allow access to these spaces without stigma or needing to "earn" it. Offer workshops or resources for parents/ carers on supporting anxious children, including routines, sleep, and managing school-related stress. Follow guidance around supporting mental health in schools (see: Promoting children and young people's mental health and wellbeing - *assets.publishing.service.gov.uk/media/614cc965d3bf7f718518029c/Prom*		



	oting_children_and_young_people_s_mental_health_and_wellbeing.pdf).		
Self-esteem/ self-efficacy	Classroom: Reinforce the value of effort, persistence, and learning from mistakes. Use language like "Mistakes help us learn." Focus feedback on strategies used, effort shown, and progress made. Avoid comparisons between pupils and highlight individual growth. Help pupils set personal learning goals and reflect on their progress. Use journals or learning logs to track achievements and build self-awareness. Create routines for pupils to share achievements with peers (e.g. "Star of the Week", shout-out boards). Encourage pupils to recognise and celebrate each other's strengths.	Identify and complete appropriate assessments to establish a greater understanding of the child's needs, for example, the Boxall Profile. *(new.boxallprofile.org).* Offer small self-esteem groups as a supportive way of building children's confidence and self-esteem. Plan out self-esteem building exercises as part of a group to enable children to receive positive messages and acceptance from one another. Self- esteem building programmes can be used e.g., Cool Connections or Think Good, Feel Good. (Cool Connections *uk.jkp.com/products/cool-*	Identify and complete appropriate assessments to establish a greater understanding of the whole class/ whole school's needs, for example: Pupils Attitudes to Self and School (PASS) *(gl-assessment.co.uk/assessments/pass*). Identify and complete appropriate assessments to establish a greater understanding of the child's needs, for example: Multidimensional Students Life Satisfaction Scale (MSLSS) (*corc.uk.net/outcome-measures-guidance/directory-of-outcome-measures/multidimensional-*

	Teachers model how to speak kindly to oneself and reframe negative thoughts. Use classroom mantras like "I can do hard things" or "I am proud of my effort." Foster a classroom culture where mistakes are normal and risk-taking is encouraged. Use inclusive and neuroaffirmative language and avoid public comparisons. Implement lessons on resilience (see: Beano resilience lesson plans | Resources | YoungMinds) *(youngminds.org.uk/professional/resources/beano-resilience-lesson-plans*).	*connections-with-cbt-for-groups-2nd-edition*) (Think Good, Feel Good *onlinelibrary.wiley.com/doi/book/10.1002/9781119395348*) Ideas for activities can be found within Emotionally Friendly Schools and an intervention package is available on the ELSA support website. (Emotionally Friendly Schools *emotionallyfriendly.co.uk/*) (ELSA self-esteem resources *elsa-support.co.uk/resources/category/elsa-resources/self-esteem/*)	*students-life-satisfaction-scale-mslss).* Assign a key adult/team of adults to provide daily opportunities for the child to talk through success and achievements experienced that day. Provide daily opportunities to spend time identifying and building on strengths with an adult, on a 1:1 basis. E.g. make a strengths jar, use the Finding hidden treasures approach (Ioan Rees, 2005) using strengths cards.

	Whole school: Promote a growth mindset across the school through assemblies, displays, and shared language. Celebrate effort, progress, and resilience—not just achievement. Use praise postcards, certificates, and assemblies to highlight personal growth, kindness, and perseverance. Ensure recognition is inclusive and not limited to academic success. Train staff to use process-focused praise and to support children in building confidence through challenge and reflection. Involve pupils in decision-making through school councils, eco teams, or digital leaders.		



	Offer leadership roles to build agency and self-worth. Share strategies with parents/ carers to reinforce positive self-talk and celebrate effort at home. Encourage parents/ carers to focus on progress and personal strengths. Implement programmes like Jigsaw PSHE that explicitly teach self-esteem, resilience, and emotional literacy. (*jigsaweducationgroup.com/programmes/pshe-3-16).* Train staff in growth mindset principles and embed them in assemblies, lessons, displays, and communications. (see: Mindset Kit | Resources for growth and learning mindsets) *(mindsetkit.org).*		




Tameside
Metropolitan Borough

Key Stage Three

SKILL	WHAT TO DO FIRST *Identifying and supporting need*	ASKING FOR HELP *Starting Assess, Plan, Do, Review*	WHEN MORE HELP IS NEEDED *Targeted support*
Social and Interpersonal Skills *Peer integration/ friendships*	Classroom: Use collaborative and cooperative learning activities in subject lessons. Rotate groups regularly to build inclusiveness and a range of social skills. Adopt a planned PSHE curriculum with whole-class discussions on relationships Use PSHE to explore healthy friendships, empathy, and emotional literacy. Use drama to explore social scenarios and reflect on how actions affect others.	Identify and complete appropriate assessments to establish a greater understanding of the child's needs and inform group interventions, for example: Boxall Profile. *(new.boxallprofile.org).* Child and Youth Resiliency Measure. *(cyrm.resilienceresearch.org).* The Strengths and Difficulties Questionnaire (SDQ). *(sdqinfo.org/a0.html).* Emotional Literacy Assessment *(gl-assessment.co.uk/products/ emotional-literacy).*	Implement 1:1 tailored interventions that have been planned to enable the young person to meet specific targets in relation to peer integration/friendships. Provide key adult support at specific times that have been identified as challenging for the young person, e.g., unstructured times. Small group or paired provision at breaks and lunchtimes, modelled and structured by an adult.



	Provide opportunities to practise conflict resolution and empathy. Use compliment slips or positive notes to reinforce prosocial behaviour. Offer specific praise for inclusive and respectful interactions. Use regular check-ins or circle time to build trust and emotional awareness. Whole school: Promote respect, empathy, and inclusion through assemblies, displays, and school values. Consider implementing Restorative practices to prevent conflict, build relationships and repair harm by enabling people to communicate effectively and positively. Provide access to supervision and training to encourage staff to reflect on their current practice within their school environment, e.g. Trauma informed practice.	Offer small group interventions to promote positive peer interactions including: Social thinking curriculum *(socialthinking.com)*. Talkabout social skills *(routledgelearning.com/tass/what-is-talkabout)*. Black sheep press (*blacksheeppress.co.uk)*. Friendship groups/ resources (*elsa-support.co.uk/resources/category/elsa-resources/friendship)* Brick by brick program (*playincluded.com/the-brick-by-brick-programme)*. Philosophy for Children (P4C) *(p4c.com)*. Restorative Practice Circles (*restorativeresources.org/uploads/5/6/1/4/56143033/principles_and_practice_of_circle.pdf*). Peer Mentoring Programs	Adult support in class to scaffold any group/paired work. If negative thoughts are a barrier to the young person engaging with their peers, try cognitive behavioural approaches such as Think Good Feel Good. (*amazon.co.uk/Think-Good-Cognitive-Behaviour-Psychology/dp/0470842903*). Use of programmes such as Why Try *(whytry.org)*

	(restorative-practice.co.uk). Implement whole-school anti-bullying policies and programmes. Set up peer mentoring or buddy systems, especially during unstructured times. Offer interest-based clubs (e.g. gardening, gaming) to encourage social interaction. Offer Mental Health First Aid training to help staff support positive peer relationships. *(mhfaengland.org).* Train staff in programmes like the Developing Emotional Awareness and Listening Programme (Samaritans). *(samaritans.org/how-we-can-help/schools/deal).*	Nurture Groups. Identify and complete appropriate assessments to establish a greater understanding of the whole class/ whole school's needs. *(nurtureuk.org/supporting-you/nurture-groups).*	



	Involve parents/carers through workshops and regular communication about social development. Assign key adults to build trusting relationships with students, using tools like one-page profiles.		
Social understanding	Classroom: Include task boards to support transitions understanding. Give advance notice of changes to routines, activities, or staffing. Allow extra time or adult support for students who find transitions difficult. Use calming strategies or transition objects for students who benefit from sensory regulation. Incorporate cooperative learning tasks and turn-taking games into subject lessons. Rotate groupings regularly to	Identify and complete appropriate assessments to establish a greater understanding of the child's needs and inform group interventions, for example: Boxall Profile. *(new.boxallprofile.org).* Child and Youth Resiliency Measure. *(cyrm.resilienceresearch.org).* The Strengths and Difficulties Questionnaire (SDQ). *(sdqinfo.org/a0.html).* Offer small group interventions to promote positive peer interactions including:	Identify and complete appropriate assessments to establish a greater understanding of the pupil's needs, for example: Emotional Literacy Assessment. Blob Tree. (Emotional Literacy Assessment *gl-assessment.co.uk/products/emotional-literacy/*). (Blob Tree *blobtree.com/pages/frontpage*). Use personalised Social Stories (Carol Gray) to reaffirm

	build a range of peer relationships and social skills. Pair students with peer buddies for group work or social tasks. Encourage inclusive seating plans and group rotations to foster belonging. Whole school: Maintain consistent daily routines across departments. Share changes to staffing, activities, or environments in advance via school comms, visual displays, or tutor time. Display clear signage and transition prompts to support movement between lessons. Provide structured lunchtime clubs or quiet zones for students who find social times challenging.	Social thinking curriculum *(socialthinking.com)*. Talkabout social skills *(routledgelearning.com/ tass/what-is-talkabout)*. Black sheep press (*blacksheeppress.co.uk)*. Friendship groups/ resources (*elsa-support.co.uk/resources/category/elsa-resources/friendship)* Brick by brick program (*playincluded.com/the-brick-by-brick-programme)*. Philosophy for Children (P4C) *(p4c.com)*. Restorative Practice Circles (*restorativeresources.org/uploads/5/6/1/4/56143033/principles_and_practice_of_circle.pdf*). Peer Mentoring Programs Nurture Groups. Identify and complete appropriate assessments to establish a greater	appropriate behaviour in specific situations according to the needs of the individual young person. *(autism.org.uk/about/ strategies/social-stories-comic-strips.aspx).* An appropriately trained adult, (supported by the SENDCo, Educational Psychologist or CAMHS professional), to be available to provide de-escalation and reflection work following any confrontation with peers. One tool that might be used is Comic Strip Conversations to support the young person to reflect on real-life events and consider alternative ways of responding. *(autism.org.uk/about/strategies/ social-stories-comic-strips.aspx).*

	Implement peer mentoring or buddy systems to support inclusion and reduce social anxiety. Develop school-wide protocols for transitions (e.g. between lessons, year groups, or key stages). Use transition passports or one-page profiles for students needing additional support. Train all staff in autism awareness, social communication needs, and trauma-informed practice. Encourage consistent use of visual supports and positive behaviour strategies.	understanding of the whole class/ whole school's needs. *(nurtureuk.org/supporting-you/nurture-groups).* Access ELSA Social Skills resources *(elsa-support.co.uk/resources/category/elsa-resources/social-skills-elsa-resources/page/13).*	
Managing Emotions	Classroom: Create a calm, positive and nurturing classroom environment.	Identify and complete appropriate assessments to establish a greater understanding of the pupil's needs, for example:	Assign a Key adult/ team of adults for daily check ins with the young person. Teach self-calming techniques, such as breathing, visualisation



Emotional Awareness, Understanding and Regulation	Use Emotion Coaching approaches to validate feelings and support regulation when students are upset, angry, or distressed. *(emotioncoachinguk.com/what-is-emotion-coaching).* Regularly discuss and model a wide range of emotions. Use emotional vocabulary in context and encourage students to do the same. Create classroom displays focused on emotional vocabulary and regulation strategies. Use visual timetables and cues to support predictability and reduce anxiety. Integrate short mindfulness practices or breathing exercises into the school day.	Boxall Profile. *(new.boxallprofile.org).* The Strengths and Difficulties. Questionnaire (SDQ). *(sdqinfo.org/a0.html*). Blob Tree. *(blobtree.com/pages/frontpage).* Offer small group support to develop skills related to emotional regulation and emotional literacy e.g. recognising and labelling emotions, self-calming techniques and using Zones of Regulation or Lego Therapy. *(zonesofregulation.com/index.html).* Use gentle praise when self-calming strategies are attempted, even if unsuccessful. Provide a 'safe' place for a young person to take time out and calm.	or repetitive, soothing or sensory activities (colouring, play dough, theraputty). Always ensure access to these activities at all times through use of a 'calm box'. *(youngminds.org.uk/blog/how-to-make-a-self-soothe-box).* Work with a group of key staff to identify the individual profile of the young person to gain an understanding of their individual triggers, observable behaviours, as well specific escalating and de- escalating adult responses. Contact Educational Psychology Service for information. (Educational Psychology Service *tameside.gov.uk/Education/Educational-Psychology-Service*). Use the Incredible 5-Point Scale to aid emotional self-regulation.

	Provide access to calming tools or quiet areas within the classroom. Staff should model emotional awareness, self-regulation, and resilience. Reinforce that it's okay to feel strong emotions and to ask for help. Whole- school Foster a school-wide ethos of emotional safety and respect. Embed mindfulness on a whole school level (see: Teach .breathe - an introduction to mindfulness or Teach .b (11 - 18) - Mindfulness in Schools Project) (Teach .breathe – Mindfulness in Schools Project *mindfulnessinschools.org/breathe).* (Teach .b (11–18) – Mindfulness in Schools Project *mindfulnessinschools.org/teach-dot-b).*	Provide time within the curriculum for one to one work with an appropriately accredited therapist, e.g. play therapy, art therapy. Reintegration to class/ school following therapeutic work needs to be managed sensitively and appropriately. (Play Therapy *playtherapy.org.uk*). (Art Therapy *baat.org).* Use resources to scaffold and support establishing difficulties within incidents, see: Exploring Situations and Problems (ESP) *(drawingtheidealself.co.uk/esp-cards*). Complete worksheets/booklets with pupils around CBT style input (see: WeHeartCBT) *(weheartcbt.com).*	Put an appropriate support plan in place (may be a behaviour/risk management plan), which has been devised with the young person according to what they feel helps them to feel calm. This might include a safe-handling plan. Any plan should include post incident learning to allow reflection on behaviour and debriefing for staff and the young person. (Incredible 5-Point Scale *5pointscale.com).* Seek support from the relevant services within Tameside and signpost with information, see: Children and Young People Mental Health Support - Tameside MBC *(tameside.gov.uk/mentalhealth/children*)

	Ensure consistent, predictable routines with flexibility for individual needs. Display emotional vocabulary and regulation strategies in shared spaces. Encourage staff to model emotional expression and show that making mistakes is part of learning. Provide whole school training in: De-escalation techniques Emotion Coaching approaches (see EPS for guidance) *(emotioncoachinguk.com/what-is-emotion-coaching)*. Staff knowledge around, trauma-informed responses to emotional dysregulation (see: UK Trauma Council or Beacon House for resources and guidance on Childhood Trauma and The Brain, Childhood Trauma and PTSD, Traumatic Bereavement.		



	(UK Trauma Council *uktraumacouncil.org*). (Beacon House *beaconhouse.org.uk/resources).* Embed structured whole school approaches to managing mental health and wellbeing (e.g., Emotionally Friendly Schools) *(emotionallyfriendly.co.uk*). Ensure consistency across classrooms while allowing flexibility for additional needs. Provide: Safe spaces or calm areas for emotional regulation Sensory breaks or sensory diets Visual supports (e.g. timetables, emoji cards, time-out cards) Daily mindfulness or check-in opportunities		

	Gain pupil feedback to inform the whole school approach (see: *(birmingham.ac.uk/schools/social-policy/departments/health-services-management-centre/mental-health-and-wellbeing-with-children)*. Implement an evidence-based framework to help develop a holistic, whole-school or college approach to mental health (see: 5 Steps to Mental Health and Wellbeing – free framework | Anna Freud) *(annafreud.org/resources/schools-and-colleges/5-steps)* Look at creating safe spaces in school. *(mentallyhealthyschools.org.uk/resources/how-to-create-and-use-a-safe-space-in-schools)*. Access websites such as 'MindEd' for information around mental health. *(mindedhub.org.uk)*.		

	Follow guidance around supporting mental health in schools (see: Mental health and behaviour in schools) *(assets.publishing.service.gov.uk/media/625ee6148fa8f54a8bb65ba9/Mental_health_and_behaviour_in_schools.pdf).*		
Reducing Anxiety	Classroom: Practice calming techniques as a class, especially after high-energy times like lunch or PE. Use breathing exercises, grounding techniques, or quiet reflection time. Embed emotional literacy into form time—discuss emotions, triggers, and coping strategies (see: Talking Mental Health: Animation & Teacher Toolkit | Anna Freud) *(annafreud.org/resources/schools-and-colleges/talking-mental-health-animation-and-teacher-toolkit).*	Explicitly teach about anxiety, its physical signs, and regulation strategies. Use emotion wheels, body maps, and calming toolkits. Teach CBT-style strategies to challenge unhelpful thoughts. Use appropriate emotional awareness and regulation workbooks or programmes within individual or a small group, such as: Think Good, Feel Good. *(onlinelibrary.wiley.com/doi/book/10.1002/9781119395348).*	Identify and complete appropriate assessments to establish a greater understanding of the child's needs, for example: Schools and Students Health Education Unit (SHEU) surveys. *(sheu.org.uk).* Provide a daily check in with a key adult/ team of adults. Allow engagement with a neutral task or complete an assigned 'job' at school to reduce feelings of anxiety.

	Model calm responses and show that it's okay to feel anxious or overwhelmed. Use visual cues for transitions, expectations, and calming strategies. Provide access to time-out cards for students to signal when they need support. Consider ways to support young people transition throughout school 10 Tips For Successful School Transitions - TeacherToolkit *(teachertoolkit.co.uk/2022/05/16/successful-transitions*). Whole school: Use positive language around effort, mistakes, and learning. Train staff in recognising signs of anxiety and using de-escalation and co-regulation strategies.	Starving the Anxiety Gremlin. *(socialthinking.com/products/starving-the-anxiety-gremlin*). Starving the Angry Gremlin. (*socialthinking.com/products/starving-the-anger-gremlin*). In cases of suspected Emotional Barriers to School Attendance (EBSA), please see the below information: *(padlet.com/spectrumgaming/barriers-to-education-1bnrx2lf6iwfck52)*. Resources to support this include: School wellbeing cards Ideal school (School wellbeing cards *schoolwellbeingcards.co.uk*). (Ideal School resource *nelincs.gov.uk/assets/uploads/2023/08/Drawing-the-Ideal-School.pdf*).	Work with a group of key staff to identify the individual profile of the young person to gain an understanding of their individual triggers, observable behaviours, as well specific escalating and de- escalating adult responses. An example of this might be the RAMP (Reducing Anxiety Management Plan). Contact Educational Psychology Service for information. *(tameside.gov.uk/Education/Educational-Psychology-Service*).

	Use Emotion Coaching approach. to validate feelings and guide students through regulation. *(emotioncoachinguk.com/what-is-emotion-coaching*). Create calm, predictable routines across the school day. Use visual timetables, clear signage, and consistent transitions to reduce uncertainty. . Provide access to calm rooms or quiet zones for students to self-regulate. Offer sensory breaks or tools for students who benefit from them. Incorporate daily or weekly mindfulness practices (e.g. breathing exercises, guided visualisations). Use short, structured activities like "3-minute silent starts" after transitions.	Be aware of potential anxious behaviours and how it may manifest itself in physical forms (e.g., Tics) *(kch.nhs.uk/wp-content/uploads/2023/09/3731-How-to-Manage-Tics-at-School-v3_FINAL.pdf*).	



	Follow guidance around supporting mental health in schools (see: Promoting children and young people's mental health and wellbeing) *(assets.publishing.service.gov.uk/media/614cc965d3bf7f718518029c/Promoting_children_and_young_people_s_mental_health_and_wellbeing.pdf)*		
Self-esteem/ self- efficacy	Classroom: Reinforce the value of effort and persistence in daily teaching. Use language that encourages students to embrace challenges and learn from setbacks. Apply strategies like PIP & RIP (Praise in Public, Reprimand in Private) to maintain a respectful and encouraging classroom environment. Give specific feedback that highlights the learning process, such as problem-solving strategies, resilience, and improvement over time.	Conduct appropriate assessments such as: Self Image Profile *(pearsonclinical.co.uk/Psychology/ChildMentalHealth/ChildMentalHealth/SelfImageProfiles(SIP)/SelfImageProfiles(SIP).aspx).* Pupil's Attitude to Self and School *(gl-assessment.co.uk/products/pupil-attitudes-to-self-and-school-pass).* Offer small self-esteem groups as a supportive way of building a young person's confidence and	

	Build in regular opportunities for students to reflect on and share their achievements with peers, such as through "shout-out" boards or end-of-week celebrations. Encourage students to set personal goals, reflect on progress, and take ownership of their learning and development. Whole school: Train staff in growth mindset principles and embed them in assemblies, lessons, displays, and communications. (see: Mindset Kit | Resources for growth and learning mindsets) *(mindsetkit.org)*. Create systems to regularly recognise and celebrate student achievements in assemblies, newsletters, and displays—highlighting both academic and personal growth.	self-esteem. Ideas for activities can be found within Emotionally Friendly Schools and on the ELSA website. (Emotionally Friendly Schools *emotionallyfriendly.co.uk*). (ELSA self-esteem resources *elsa-support.co.uk/category/self-esteem-resources*). Plan out self-esteem building exercises as part of a group to enable pupils to receive positive messages and acceptance from one another. Set self-esteem building programmes can be used. For example, Cool Connections or Think Good, Feel Good. (Cool Connections *uk.jkp.com/products/cool-connections-with-cbt-for-groups-2nd-edition)*.	

	Offer a wide range of clubs and activities (e.g., debating, gaming, gardening) to help students discover and showcase their strengths beyond the classroom. Share student successes with parents/ carers through regular updates, praise postcards, or digital platforms to reinforce positive self-perception at home.	(Think Good, Feel Good, *onlinelibrary.wiley.com/doi/ book/10.1002/ 9781119395348)*. Offer groups such as Pyramid clubs to support the transition between Year 6 and Year 7 for pupils who are shy, anxious and withdrawn, and therefore tend to find transition difficult to manage. (Pyramid Club – Secondary *guidebook.eif.org.uk/ programme/pyramid-club-secondary*) Interventions to support unhelpful thoughts which are impacting upon self-esteem such as Starving the Anxiety Gremlin. (*socialthinking.com/products/starving-the-anxiety-gremlin*).	



		If self-esteem is impacting upon engagement with exams and ability to manage stress, try evidence- based exam stress groups which involve positive affirmations and relaxation activities.	
Resilience	Classroom: Create a classroom culture where mistakes are seen as learning opportunities whole class growth mindset approach. *(mindsetkit.org/topics/teaching-growth-mindset*). Use language like "struggle means you're learning" or "this is hard, and that's okay." Integrate short activities or discussions on managing stress, breathing techniques, or problem-solving strategies.	Identify and complete appropriate assessments to establish a greater understanding of the young person's needs and inform group interventions, for example: Child and Youth Resiliency Measure. (cyrm.resilienceresearch.org). Consider group interventions to develop resilience in young people, e.g. Smart Moves®. *(eikon.org.uk/for-professionals/eikon-in-schools/smart-moves-building-resilience).*	Consider risk and protective factors to provide a profile of the young person, e.g. BOING BOING.*(boingboing.org.uk/interactive-resilience-framework).*



	Use check-ins or emotion thermometers to help students identify and manage feelings. Share your own experiences of overcoming challenges or setbacks. Use stories, videos, or role models to illustrate resilience in action. Provide tasks that stretch students just beyond their comfort zone with appropriate scaffolding. Celebrate effort and persistence, not just correct answers. Use journals or reflection prompts to help students process setbacks and identify what helped them move forward. Encourage students to set small, achievable goals and track progress. Whole school: Embed resilience themes into assemblies, displays, and school		



	values (e.g., perseverance, adaptability, courage). Train staff in growth mindset principles and embed them in assemblies, lessons, displays, and communications. (see: Mindset Kit | Resources for growth and learning mindsets) *(mindsetkit.org)*. Share stories of overcoming adversity—real-life or fictional—to model resilience. Equip staff with strategies to support students experiencing adversity or emotional dysregulation. Encourage consistent, calm, and supportive adult responses to student behaviour. Develop peer mentoring or resilience ambassador programs where students support each other through challenges.		



	Offer workshops or resources for parents on supporting resilience at home (e.g., managing failure, encouraging independence).		



Key Stage Four

SKILL	WHAT TO DO FIRST *Identifying and supporting need*	ASKING FOR HELP *Starting Assess, Plan, Do, Review*	WHEN MORE HELP IS NEEDED *Targeted support*
Social and Interpersonal Skills *Peer Integration/ Friendships*	Classroom: Use project-based learning and group tasks that require cooperation and shared responsibility. Allow some student choice in groupings while encouraging diversity and inclusion. Explore real-life social issues (e.g. peer pressure, online conflict, toxic friendships) through structured discussions and debates. Use case studies to build empathy and perspective-taking.	Gather student voice, observe social interactions, and use tools like PASS to identify students who struggle to ask for help or engage with peers. Identify and complete appropriate assessments to establish a greater understanding of the child's needs and inform group interventions, for example: Boxall Profile *(new.boxallprofile.org).* Child and Youth Resiliency Measure. *(cyrm.resilienceresearch.org).* The Strengths and Difficulties Questionnaire (SDQ). (*sdqinfo.org/a0.html*)	Implement 1:1 tailored interventions that have been planned to enable the young person to meet specific targets in relation to peer integration/friendships. Provide key adult support at specific times that have been identified as challenging for the young person, e.g. unstructured times. Small group or paired provision at breaks and lunchtimes, modelled and structured by an adult. Adult support in class to scaffold any group/paired work. If negative thoughts are a barrier to the young person engaging with their



	Teach and model assertive communication, active listening, and respectful disagreement. Use role play or scenario-based learning to practise navigating social challenges. Use personalised praise, compliment slips, or digital platforms to recognise inclusive and respectful behaviour. Highlight examples of positive peer support during lessons or tutor time. Use regular check-ins, anonymous feedback tools, or wellbeing journals to help students reflect on their social experiences and needs. Involve students in shaping classroom norms and	Offer bespoke interventions based on presenting needs. Or small group interventions to promote positive peer interactions including: Boing Boing Framework *(boingboing.org.uk/ interactive-resilience-framework)*. Use social stories and comic strip conversations to support navigating social situations	peers, try cognitive behavioural approaches such as Think Good Feel Good. *(amazon.co.uk/Think-Good-Cognitive-Behaviour-Psychology/dp/0470842903*).

	expectations around respect and inclusion. Use surveys or suggestion boxes to gather ideas for improving peer relationships. Use of the freely available Developing Emotional Awareness and Listening Programme (Samaritans) training for teachers and whole class session plans. *(samaritans.org/how-we-can-help/schools/deal)*. Whole school: Encourage students to lead clubs, societies, or wellbeing campaigns that promote inclusion and shared interests. Create opportunities for students to co-design social events or peer support schemes. Encourage students as peer mentors for younger students or		



	as wellbeing ambassadors to support social inclusion. Offer leadership roles in school councils, anti-bullying teams, or digital safety groups. Embed restorative conversations and circles to resolve peer conflict and rebuild trust. Train staff and students in Restorative practices to promote empathy and accountability. *(restorative-practice.co.uk)*. Use assemblies to promote kindness, respect, and diversity. Run themed weeks (e.g. Anti-Bullying Week, Friendship Week) with student involvement. Offer interest-based clubs (e.g. music production, coding,		



	debate) to help students connect over shared passions. Provide safe, supervised social spaces during breaks for students who may struggle with unstructured time. Train staff in adolescent mental health, trauma-informed practice, and how to support students with social anxiety or peer difficulties. (see: Trauma https://uktraumacouncil.org/ for resources and guidance on Childhood Trauma and The Brain, Childhood Trauma and PTSD, Traumatic Bereavement) *(uktraumacouncil.org)*. Offer workshops or resources for parents on supporting adolescent friendships, online safety, and emotional wellbeing.		



	Utilise Restorative Justice Practice for conflict resolution. *(restorativejustice.org.uk/ restorative-practice-schools).*		
Social Awareness and Understanding	Classroom: Use PSHE, English, or humanities lessons to explore moral dilemmas, social justice, and ethical issues that require perspective-taking. Use realistic social scenarios to help students practise interpreting body language, tone, and intent. Reflect on how different people might feel or respond. Analyse characters' motivations and relationships in books, films, or news stories to build empathy and critical thinking. Use structured discussions to explore how students are feeling	Identify and complete appropriate assessments to establish a greater understanding of the child's needs and inform group interventions, for example: Boxall Profile. *(new.boxallprofile.org).* Child and Youth Resiliency Measure. *(cyrm.resilienceresearch.org).* The Strengths and Difficulties Questionnaire (SDQ). (*sdqinfo.org/a0.html*). Emotional Literacy Assessment *(gl-assessment.co.uk/ products/emotional-literacy).* Blob Tree. *(blobtree.com/pages/ frontpage).*	Identify and complete appropriate assessments to establish a greater understanding of the pupil's needs, for example: Emotional Literacy Assessment. *(gl-assessment.co.uk/products/ emotional-literacy).* Blob Tree. *(blobtree.com/pages/frontpage*). Use personalised Social Stories (Carol Gray) to reaffirm appropriate behaviour in specific situations according to the needs of the individual young person. An appropriately trained adult, (supported by the SENDCo, Educational Psychologist or CAMHS professional), to be available to provide de-escalation and reflection work following

	and how their actions affect others. Encourage respectful listening and sharing. Involve students in setting classroom norms around respect, inclusion, and communication. Use surveys or feedback tools to understand social dynamics. Acknowledge and praise students when they demonstrate empathy, active listening, or inclusive behaviour. <u>Whole school:</u> Use assemblies, campaigns, and displays to highlight themes like kindness, respect, and understanding others' perspectives. Celebrate diversity and challenge stereotypes through student-led initiatives and awareness weeks. Embed restorative conversations and circles to help students	Offer small group interventions to promote positive peer interactions including: <u>Social thinking curriculum</u> *(socialthinking.com).* <u>Talkabout social skills</u> *(routledgelearning.com/tass/what-is-talkabout).* <u>Black sheep press</u> *(blacksheeppress.co.uk).* <u>Friendship groups/ resources</u> *(elsa-support.co.uk/resources/category/elsa-resources/friendship).* <u>Social Stories</u> *(carolgraysocialstories.com/social-stories/what-is-it).* <u>Brick by brick program</u> *(playincluded.com/the-brick-by-brick-programme).*	any confrontation with peers. One tool that might be used is <u>Comic Strip Conversations</u> to support the young person to reflect on real-life events and consider alternative ways of responding. *(autism.org.uk/about/strategies/social-stories-comic-strips.aspx*).

	reflect on how their actions affect others and repair relationships. Train students to support peers through mentoring or ambassador roles, focusing on listening skills, empathy, and emotional literacy. Provide training on supporting students with social communication difficulties, including those with autism or SEMH needs. Offer resources or workshops for parents/ carers on supporting adolescents with social understanding, including managing online interactions and peer conflict. Create safe spaces and interest-based clubs that encourage		



	interaction between diverse groups of students.		
Managing Emotions *Emotional Awareness, Understanding and Regulation*	Classroom: Create a calm, positive and nurturing classroom environment (see: ATRCM observation and planning schedule or classroom wellbeing toolkit) *(mentallyhealthyschools.org.uk/resources/classroom-wellbeing-toolkit)/* Discuss and model feelings and emotions often, using a wide vocabulary of feelings and emotions words. Create displays focused on developing emotional vocabulary (see: Zones of Regulation) *(zonesofregulation.com).* Embed emotional literacy into form time—discuss emotions,	Identify and complete appropriate assessments to establish a greater understanding of the child's needs, for example: Boxall Profile. *(new.boxallprofile.org).* The Strengths and Difficulties. Questionnaire (SDQ). *(sdqinfo.org/a0.html*). Superflex Program. *socialthinking.com/products/superflex)* Blob Tree *(blobtree.com/pages/frontpage).* Teach self-calming techniques, such as breathing, visualisation or repetitive, soothing or sensory activities.	Work with a group of key staff to identify the individual profile of the young person to gain an understanding of their individual triggers, observable behaviours, as well specific escalating and de- escalating adult responses. Contact Educational Psychology Service for information. (Educational Psychology Service *tameside.gov.uk/Education/Educational-Psychology-Service*) Assign a key adult/ team of adults for daily check ins with the young person. Use gentle praise when self-calming strategies are attempted, even if unsuccessful. Use the Incredible 5-Point Scale to aid emotional self-regulation. *(5pointscale.com).*

	triggers, and coping strategies (see: Talking Mental Health: Animation & Teacher Toolkit | Anna Freud) *(annafreud.org/resources/schools-and-colleges/talking-mental-health-animation-and-teacher-toolkit).* Use programmes like .b curriculum, or integrate short regulation activities (e.g. breathing, journaling) into the school day. *(mindfulnessinschools.org/teach-dot-b/dot-b-curriculum).* Staff should openly model emotional vocabulary and regulation and reinforce that making mistakes is part of learning and emotional growth. Offer discreet tools like emotion cards or exit passes for students	Complete worksheets/booklets with pupils around CBT style input (see: WeHeartCBT) *(weheartcbt.com).*	Put an appropriate support plan in place (may be a behaviour/risk management plan), which has been devised with the young person according to what they feel helps them to feel calm. This might include a safe-handling plan. Any plan should include how to reflect upon, learn from the 'incident' or behaviour, and debriefing for staff and the young person. Provide a 'safe' place for a young person to take time out and calm. Provide time within the curriculum for one to one work with an appropriately accredited therapist , e.g., art therapy *(baat.org).* Reintegration to class/ school following therapeutic work needs to be managed sensitively and appropriately. Seek support from the relevant services within Tameside and signpost with information, see: Children and Young



	to signal when they need a break. Whole school: Have a whole school approach in supporting mental health and wellbeing (e.g., Emotionally Friendly Schools *(emotionallyfriendly.co.uk)*. Use emotional validation strategies when upset, angry or distressed, e.g. an Emotion Coaching approach. *(emotioncoachinguk.com/what-is-emotion-coaching)*. Embed mindfulness within the school day (see: Teach .b (11 - 18) - Mindfulness in Schools Project) *(mindfulnessinschools.org/teach-dot-b)*. Staff knowledge around, trauma-informed responses to emotional		People Mental Health Support - Tameside MBC *(tameside.gov.uk/mentalhealth/children)* .



	dysregulation (see: UK Trauma Council or Beacon House for resources and guidance on Childhood Trauma and The Brain, Childhood Trauma and PTSD, Traumatic Bereavement. (UK Trauma Council *uktraumacouncil.org).* (Beacon House *beaconhouse.org.uk/resources)* Implement an evidence-based framework to help develop a holistic, whole-school or college approach to mental health (see: 5 Steps to Mental Health and Wellbeing – free framework | Anna Freud) *(annafreud.org/resources/schools-and-colleges/5-steps/)* Look at creating safe spaces in school.		



	(mentallyhealthyschools.org.uk/resources/how-to-create-and-use-a-safe-space-in-schools). Access websites such as 'MindEd' for information around mental health. *(mindedhub.org.uk).* Follow guidance around supporting mental health in schools (see: Mental health and behaviour in schools) *(assets.publishing.service.gov.uk/media/625ee6148fa8f54a8bb65ba9/Mental_health_and_behaviour_in_schools.pdf).*		
Reducing Anxiety	Classroom: Use consistent routines, clear instructions, and visual supports to reduce cognitive load. Keep the classroom low-arousal with calm tones, tidy spaces, and minimal sensory distractions.	Identify and complete appropriate assessments to establish a greater understanding of the child's needs, for example: The Strengths and Difficulties Questionnaire (SDQ). *(sdqinfo.org/a0.html).*	Identify and complete appropriate assessments to establish a greater understanding of the child's needs, for example: Schools and Students Health Education Unit (SHEU) surveys. *(sheu.org.uk).*

	Model self-regulation and talk openly about managing stress and mistakes. Allow movement breaks, quiet workspaces, or extended time where appropriate. Provide discreet tools like time-out cards or "I need help" signals. Focus on effort and progress over perfection. Prioritise relational approaches—greet students by name, notice changes in mood, and offer regular check-ins. Where appropriate, be flexible deadlines and differentiated tasks to reduce performance pressure.	Allow engagement with a neutral task or complete an assigned 'job' at school to reduce feelings of anxiety. Consider targeted Interventions through small group programs like: ELSA sessions focused on coping strategies. Consider Cognitive Behavioural approaches to group work provided over specified period of time e.g.: Starving the Anxiety Gremlin. (socialthinking.com/ products/starving-the anxiety-gremlin). Starving the Angry Gremlin. *(socialthinking.com/ products/starving-the-anger-gremlin).* FRIENDS for Life.	Provide a daily check in with a key adult/ team of adults. Implement a RAMP – Reducing Anxiety Management Plan (contact Educational Psychology Service for further information). *(tameside.gov.uk/Education/ Educational-Psychology-Service).*



	Whole school: Provide exam stress workshops and revision planning support. Implement quiet zones or calm corners in classrooms and communal areas. Embed opportunities for mindfulness or wellbeing sessions during tutor time or PSHE. Train staff to recognise signs of anxiety (e.g., avoidance, perfectionism, irritability). Use emotional validation strategies when upset, angry or distressed, e.g. an Emotion Coaching approach. *(emotioncoachinguk.com/what-is-emotion-coaching)*.	*(educationendowment foundation.org.uk/projects-and-evaluation/projects/friends)*. Assign a team of key adult(s) for students with higher anxiety needs. In cases of suspected Emotional Barriers to School Attendance (EBSA), please see the below information: *(padlet.com/spectrumgaming/barriers-to-education-1bnrx2lf6iwfck52)*. Resources to support this include: School wellbeing cards *schoolwellbeingcards.co.uk* Ideal school *(nelincs.gov.uk/assets/uploads/2023/08/Drawing-the-Ideal-School.pdf)*.	

	Create student wellbeing ambassadors or peer mentors. Use anonymous worry boxes or digital check-ins (e.g., Google Forms). Involve students in shaping wellbeing policies and spaces. Host parent/ carer information evenings on adolescent anxiety and exam stress. Share home strategies (e.g., sleep hygiene, screen time boundaries). Provide signposting to local services (e.g., CAMHS, Kooth, Early Help). Embed mental health awareness days and campaigns (e.g., World Mental Health Day).	Be aware of potential anxious behaviours and how it may manifest itself in physical forms (e.g., Tics) *(kch.nhs.uk/wp-content/uploads/2023/09/3731-How-to-Manage-Tics-at-School-v3_FINAL.pdf)*.	

	Use assemblies and tutor time to normalise conversations about anxiety. Follow guidance around supporting mental health in schools (see: Promoting children and young people's mental health and wellbeing) *(assets.publishing.service.gov.uk/media/614cc965d3bf7f718518029c/Promoting_children_and_young_people_s_mental_health_and_wellbeing.pdf)*.		
Self-esteem/ self- efficacy and Resilience	Classroom: Identify and complete appropriate assessments to establish a greater understanding of the whole class/ whole school's needs, for example: Pupils Attitudes to Self and School (PASS) *(gl-assessment.co.uk/assessments/pass)*.	Conduct appropriate assessments such as: Self Image Profile. *(pearsonclinical.co.uk/Psychology/ChildMentalHealth/ChildMentalHealth/SelfImageProfiles(SIP)/SelfImageProfiles(SIP).aspx)*. Pupil's Attitude to Self and School. *(gl-assessment.co.uk/products/*	Assign a key adult/team of adults to provide daily opportunities for the young person to talk through successes and achievements experienced that day. Provide daily opportunities to spend time identifying and building on personal strengths and qualities with an adult, on a 1:1 basis: Make a strengths jar.

	Embed a whole class growth mindset approach which focuses on effort over achievement. *(mindsetkit.org).* Use positive classroom management strategies such as PIP & RIP – praise in pubic and reprimand in private. Provide regular opportunities for pupils to identify and celebrate success and achievements and share these with others. Ensure praise is specific and focuses on the learning process i.e. learning from mistakes and taking on challenges. Opportunities for pupils to engage extra-curricular activities which allow them to showcase their strengths for example	*pupil-attitudes-to-self-and-school-pass).* Offer small self-esteem groups as a supportive way of building a young person's confidence and self-esteem. Ideas for activities can be found within Emotionally Friendly Schools and on the ELSA website. *(emotionallyfriendly.co.uk).* Plan out self-esteem building exercises as part of a group to enable pupils to receive positive messages and acceptance from one another. Set self-esteem building programmes can be used. For example, For example, Cool Connections or Think Good, Feel Good. (Cool Connections *uk.jkp.com/products/cool-*	Use the finding hidden treasures approach (Ioan Rees, 2005). Use strengths cards. Use person centred reviews and meetings as an opportunity to evidence and celebrate positive achievements, with an audience of people who are significant to the young person. *(helensandersonassociates.com/person-centered-approaches-programs/person-centered-planning-for-a-good-life).* Consider Exam Access arrangements.

	debating club, gaming club or gardening club. Whole school: Create a culture in school which recognises and celebrates effort. Ensure that pupils' successes and achievements are shared with parents and carers.	*connections-with-cbt-for-groups-2nd-edition)* (Think Good, Feel Good *onlinelibrary.wiley.com/doi/book/10.1002/9781119395348)* Interventions to support unhelpful thoughts which are impacting upon self-esteem such as Starving the Anxiety Gremlin. *(socialthinking.com/products/starving-the-anxiety-gremlin).* If self-esteem is impacting upon engagement with exams and ability to manage stress, try evidence- based exam stress groups which involve positive affirmations and relaxation activities.	

Helpful links

Key Stage 1 (KS1)
Managing Emotions / Emotional Regulation

- Go Noodle – movement and regulation activities - *gonoodle.com/*



- Zones of Regulation – emotional awareness and self-regulation *zonesofregulation.com/*
- Emotion Coaching – supporting emotional regulation through adult responses *emotioncoachinguk.com/what-is-emotion-coaching*
- The Colour Monster – emotional literacy resources - *tpet.co.uk/hub/the-colour-monster-classroom-resources/*
- Mindfulness resources (early years) - *mindfulnessinschools.org/teach-dots-3-6/*
- Mindfulness Teacher (breathing and calming videos) *youtube.com/@TheMindfulnessTeacher*
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Reducing Anxiety

- Supporting transitions - *teachertoolkit.co.uk/2022/05/16/successful-transitions/*
- The Worry Wizard – anxiety support for schools - *theworrywizard.com/schools*
- School wellbeing activities - *schoolwellbeingcards.co.uk/*
- Ideal School activity - *nelincs.gov.uk/assets/uploads/2023/08/Drawing-the-Ideal-School.pdf*

Social Skills / Relationships

- Circle of Friends - *inclusive-solutions.com/circles/circle-of-friends/what-is-a-circle-of-friends/*
- Time to Talk -*integratedtreatmentservices.co.uk/our-approaches/speech-therapy-approaches/time-talk/*
- FRIENDS for Life (early intervention) - *educationendowmentfoundation.org.uk/projects-and-evaluation/projects/friends*
- Nurture Groups - *nurtureuk.org/supporting-you/nurture-groups/*

Assessment and Profiling

- Boxall Profile - *new.boxallprofile.org/*
- Strengths and Difficulties Questionnaire (SDQ) - *sdqinfo.org/a0.html*
- Emotional Literacy Assessment - *gl-assessment.co.uk/products/emotional-literacy/*
- Blob Tree - *blobtree.com/pages/frontpage*



Key Stage 2 (KS2)
Managing Emotions / Emotional Literacy

- Zones of Regulation
  zonesofregulation.com/
- Emotion Coaching
  emotioncoachinguk.com/what-is-emotion-coaching
- Mentally Healthy Schools – classroom wellbeing
  mentallyhealthyschools.org.uk/resources/classroom-wellbeing-toolkit/
- Mindfulness in Schools (KS2)
  mindfulnessinschools.org/teach-paws-b/
- WeHeartCBT – CBT-informed resources
  weheartcbt.com/

Reducing Anxiety

- Cosmic Kids Yoga - *cosmickids.com/*
- Starving the Anxiety Gremlin - *socialthinking.com/products/starving-the-anxiety-gremlin*
- FRIENDS for Life - *educationendowmentfoundation.org.uk/projects-and-evaluation/projects/friends*
- Pyramid Club - *uwl.ac.uk/pyramid*
- EBSA support resources - *padlet.com/spectrumgaming/barriers-to-education-1bnrx2lf6iwfck52*

Social Skills / Peer Relationships

- Talkabout Social Skills - *routledgelearning.com/tass/what-is-talkabout/*
- Social Thinking resources - *socialthinking.com/*
- Brick by Brick Programme -*playincluded.com/the-brick-by-brick-programme/*

- Black Sheep Press - *blacksheeppress.co.uk/*
- ELSA social skills resources - *elsa-support.co.uk/resources/category/elsa-resources/social-skills-elsa-resources/page/13/*

Self-esteem / Resilience

- Growth mindset resources -*mindsetkit.org/*
- Beano resilience lesson plans - *youngminds.org.uk/professional/resources/beano-resilience-lesson-plans/*
- Boing Boing Resilience Framework -*boingboing.org.uk/interactive-resilience-framework/*

Key Stage 3 (KS3)

Managing Emotions

- Emotion Coaching - *emotioncoachinguk.com/what-is-emotion-coaching*
- Zones of Regulation - *zonesofregulation.com/*
- Mental health animation and toolkit (Anna Freud) - *annafreud.org/resources/schools-and-colleges/talking-mental-health-animation-and-teacher-toolkit/*
- Superflex Programme - *socialthinking.com/products/superflex*
- Incredible 5-Point Scale - *5pointscale.com/*

Reducing Anxiety

- Think Good, Feel Good - *onlinelibrary.wiley.com/doi/book/10.1002/9781119395348*
- Starving the Anxiety Gremlin - *socialthinking.com/products/starving-the-anxiety-gremlin*
- School wellbeing resources -*schoolwellbeingcards.co.uk/*
- Managing tics in school - *kch.nhs.uk/wp-content/uploads/2023/09/3731-How-to-Manage-Tics-at-School-v3_FINAL.pdf*

Social Understanding

- Social Stories - *autism.org.uk/about/strategies/social-stories-comic-strips.aspx*
- Comic Strip Conversations - *autism.org.uk/about/strategies/social-stories-comic-strips.aspx*



- Restorative Practice Circles - *restorativeresources.org/uploads/5/6/1/4/56143033/principles_and_practice_of_circle.pdf*

Resilience

- Child and Youth Resiliency Measure (CYRM) - *.resilienceresearch.org/*
- Smart Moves resilience programme - *eikon.org.uk/for-professionals/eikon-in-schools/smart-moves-building-resilience/*

Key Stage 4 (KS4)

Managing Emotions

- Emotionally Friendly Schools- *emotionallyfriendly.co.uk/*
- Mindfulness in Schools (.b curriculum) - *mindfulnessinschools.org/teach-dot-b/*
- UK Trauma Council- *uktraumacouncil.org/*
- Beacon House trauma resources - *beaconhouse.org.uk/resources/*
- MindEd mental health training - *mindedhub.org.uk/*

Reducing Anxiety

- Exam and anxiety support – FRIENDS - *educationendowmentfoundation.org.uk/projects-and-evaluation/projects/friends*
- EBSA guidance -*padlet.com/spectrumgaming/barriers-to-education-1bnrx2lf6iwfck52*
- RAMP and anxiety planning support - *tameside.gov.uk/Education/Educational-Psychology-Service*

Social Relationships / Peer Integration

- Restorative Practice - *restorative-practice.co.uk/*
- Restorative Justice in schools - *restorativejustice.org.uk/restorative-practice-schools*
- Samaritans – DEAL programme - *samaritans.org/how-we-can-help/schools/deal/*

Self-esteem / Resilience

- Self-Image Profile (SIP) - *pearsonclinical.co.uk/Psychology/ChildMentalHealth/ChildMentalHealth/SelfImageProfiles(SIP)/SelfImageProfiles(SIP).aspx*
- PASS assessment - *gl-assessment.co.uk/products/pupil-attitudes-to-self-and-school-pass/*
- Cool Connections -*uk.jkp.com/products/cool-connections-with-cbt-for-groups-2nd-edition*
- Pyramid Club (Secondary) - *guidebook.eif.org.uk/programme/pyramid-club-secondary*
- Person-centred planning - *helensandersonassociates.com/person-centered-approaches-programs/person-centered-planning-for-a-good-life/*



Sensory and Physical

Key Stage One

Please also reference the Sensory Toolkit alongside the following interventions, Sensory Toolkit - Tameside SEND Local Offer, *(Tamesidelocaloffer.co.uk/education/sensory-toolkit)* and also the following Webinars that were delivered as part of the Tameside Sensory Series: (Tameside Sensory Series - Webinar Recordings (March 2026) - YouTube *(youtube.com/playlist?list=PLqnJOndprdkStxpN4zrHLP0qmWAqvORTD)*

SKILL	WHAT TO DO FIRST Identifying *and supporting need*	ASKING FOR HELP *Making a referral for specialist advice*	WHEN MORE HELP IS NEEDED *Integrating specialist advice*
Fine and gross motor	Universal Level (Whole School/Whole Class) These strategies apply broadly across the school or classroom to support all children: • Awareness of a child's physical needs and how these may impact on developmental mile stones, socialisation and learning. • Teaching practice which facilitates access to the curriculum, inclusion and participation. • Create a 'clutter-free' environment. It may be helpful to complete a risk assessment of the setting including	ISCAN Occupational Therapy Universal advice - find more help using these links: Occupational Therapy Resource Library :: Tameside Children and Young People (*tamesidechildrenandyoungpeople.nhs.uk/advice-information-and-resources/ot-advice-library)*. Training modules (within universal sensory advice) • Strategies to support physical education *(youtube.com/watch?v=Vq_tPeGm_kQ&feature=youtu.be)*.	Following getting advice from appropriate professionals e.g. Occupational Therapy (OT Physiotherapy (PT) services., the following may be considered to support the integration of professional advice: • Staff accessing training provided by Learning Support Service e.g., fine motor skills, gross motor and co-ordination skills training. • Access to support from an additional key person in the setting to facilitate access to the curriculum,



	indoor and outdoor areas and trips outside of the school. • Consider the organisation of the classroom and seating plans to make sure that it enables CYP to move freely between them and allows for sufficient working space. • ISCAN OT Universal advice sheets - Occupational Therapy Resource Library • Tameside Children and Young People (tamesidechildrenandyoungpeople.nhs.uk/advice-information-and-resources/ot-advice-library). Advice sheets available on here: Good sitting *(tamesidechildrenandyoungpeople.nhs.uk/application/files/1416/9539/0171/Good_Sitting.pdf)* Supporting readiness for play and learning *(tamesidechildrenandyoungpeople.nhs.uk/application/files/2616/9599/9959/Supporting_readiness_for_Play_and_Learning.pdf)*. (This is helpful for both physical and difficulties)	• Strategies to support practical subjects *(youtube.com/watch?v=-ay1PV6_n7w)*. If you think a child or young person has a fine or gross motor difficulty that is a barrier to their daily activities, please refer to ISCAN OT. The quidance below outlines how to make a good referral to the service: • Children's Occupational Therapy :: Tameside Children and Young People *(tamesidechildrenandyoungpeople.nhs.uk/our-services/childrens-occupational-therapy)*. • Making great occupational therapy referrals | RCOT *(rcot.co.uk/explore-resources/children-young-people-families/making-great-occupational-therapy-referrals)*. Early consideration and planning for transition through school or to alternative settings.	help the child manage their condition, or move with safety around their environment. • Flexible support in the setting to include personal care such as dressing and toileting, as required or requested by the CYP. • Consider whether assistance or supervision is needed for outside play, break and lunchtimes to ensure mobility and safety of the CYP. Plan activities during unstructured times which are inclusive and promote the CYP's independence. • Inclusion of OT/ PT on any reviews and planning meetings for the child. • Ensure any suggested specialist advice from OT/ PT is shared with all staff and incorporated into the CYP's IEP or SEN Support Plan. • Implement an accessibility plan to move around the school and give

	Scissor skills *(tamesidechildrenandyoungpeople.nhs.uk/application/files/9617/2502/5716/Scissor_Skills_-_Final.pdf).* Ruler skills *(tamesidechildrenandyoungpeople.nhs.uk/application/files/8017/2502/5810/Ruler_Skills_-_Final.pdf).* Dressing *(tamesidechildrenandyoungpeople.nhs.uk/application/files/6917/2502/5570/Dressing_Skills.pdf).* Clothing *(tamesidechildrenandyoungpeople.nhs.uk/application/files/5517/0420/3762/clothing.pdf)*. Eating and drinking *(tamesidechildrenandyoungpeople.nhs.uk/application/files/3217/2502/5479/Eating__Drinking_-_Final.pdf).* Toileting *(tamesidechildrenandyoungpeople.nhs.uk/application/files/4517/2502/5054/Toileting.pdf).*		thought to if an individualised fire evacuation plan is required. • Ensure access to additional and specialist equipment, as advised by professionals such as Occupational Therapists (OT) and Physiotherapists (PT). • Ensure all staff in the setting receive relevant training e.g. manual handling. • Allocated key person with time to adapt resources/ attend training and conduct individual work. SENDCo to support the key person in planning and using differentiated activities and more specialist strategies and resources to support the CYP. • Early consideration and planning for transition through school or to alternative settings. • Consider the need to differentiate physical curriculum and need to incorporate OT/ PT exercises into

	Bottom wiping *(tamesidechildrenandyoungpeople.nhs.uk/application/files/8917/0420/6950/Bottom_Wiping.pdf).* • Include different physical play activities incorporating aspects of the EY curriculum as possible to support specific skill development and targets. • Incorporate physical play activities e.g. fine and gross motor opportunities into as many aspects of the curriculum as possible to support specific skill development and targets. • Consider activities which focus on spatial awareness, planning and body awareness. • Encourage peer support through whole class awareness sessions. • Consider supporting of feet using step or box. • Provide a locker for child or young person to store books, bags and coats etc. rather than needing to carry them around during the day.		everyday routines and/ or general class/ PE lessons. • Incorporate moving and handling plans and care plans into planning, as advised by professionals. • Ensure any plans are meeting need. Request a review should any aspects change. • Ensure any specialist equipment continues to meet the child's needs and contact relevant OT/ PT/ liaise with family regarding any repairs or alterations. • Carry out risk assessments on a regular basis and incorporate any actions and strategies into planning. • Make advised adaptations to the school environment e.g. changing plinths/ ramps/ hoists. • Consider space needed to accommodate specialist equipment e.g. walker, standing frame.

	• Provide option for the child or young person to sit on a chair rather than on the floor at carpet time/ assemblies. Can have a classmate do the same if appropriate. • Appropriate size and height chairs/tables to encourage a correct posture and to support fine motor function and writing. • Ensure child or young person is able to reach and use facilities e.g. hand basins/taps/coat pegs / lockers. • Provide additional classroom resources such as sloping board, adapted cutlery/chairs/scissors and pencil grips etc. • Staff understanding of when to refer to Occupational Therapy and or Physiotherapy. • Links with other local schools to observe and share good practice. • Whole setting interventions: • Write Dance (suitable for KS1) • Motor Skills United • Clever Fingers		• Ensure access to specialised seating and/or height adjustable tables. • Carry out lessons on ground floor if there is no suitable access to classrooms on upper floors.

	• Teodorescu Write from the Start • Squiggle Whilst You Wiggle • Keyboarding without Tears • Ready Steady Write • Active Tameside • Physical Literacy • Balance bikes • Yoga <u>Group Level</u> These strategies are best suited for small groups of children with similar needs: • Undertake Co-ordination Matters activities and record outcomes. • Opportunities for 1:1 and small group work e.g. Aqua beads, chopsticks game, Lego, iron on beads, finger gym, letter join and jigsaws. • Fine and gross motor skill interventions (previously listed) that may be carried out in small groups and targeted towards a child's needs. • Incorporate handwriting/ hand strengthening activities into daily plans e.g. using age appropriate resources such as Theraputty, elastic bands, shoe		



	lace tying, aqua/iron on beads, tweezer and chopstick games, peg activities, threading, jigsaws, Lego, funky fingers and finger gym. • Keep withdrawals from class to a minimum. <u>Individual Level</u> These strategies are tailored to meet the specific needs of an individual child or young person: • Concerns about a child's physical needs should initially be raised with parents/ carers and discussed with relevant professionals e.g. SENDCo. • Use observation in a variety of settings and contexts e.g. home visits, indoor and outdoor play to identify any barriers that affect the child's access to play and participation. • Discussions with parents/ carers to identify any strengths and needs can be helpful for planning. • Creation of a One Page Profile which is shared with all staff.		



	• Consider positioning of child or young person in the classroom to minimise distractions. • Allow additional time for the CYP to complete tasks. • Consider any additional support for self-care tasks, when required or requested by the CYP. • Take account of potential fatigue and reduce the pace of structured lessons, providing regular opportunities for breaks and rest. Adaptations to support writing • Consider access arrangements for assessments and exams, and apply for and implement them, as necessary. • Consider alternatives to handwriting e.g., voice recorder, iPad, laptop or netbook. • Consider use of pen rather than pencil to improve fluency. If pen licences are used within school, consider suitability for child and the potential to a give pen licence for reasons other than neatness etc.		



	• Provide lined paper with spaces sufficiently wide enough to for writing tasks. Adaptations to learning resources • Consider modifying activities that CYP with perceptual difficulties may find challenging such as work sheets with lots of information, word searches or crosswords. • Provide additional equipment or resources such as sloping board, adapted cutlery/ chairs/ scissors and pencil grips etc. • Consider transportations of any required additional resources between lessons when appropriate. • Use technology to support learning including apps e.g. Dexteria Jr, Blobble Write and Hairy Letters. Environmental adaptations • Give consideration to transporting of food at lunchtime e.g. providing assistance with trays and seating. Consider sitting on a standard chair at the end of bench style folding tables		

	rather than on attached stools to improve postural support. • Consider timetabling and location of rooms where possible to facilitate movement whilst continuing to take into consideration access to facilities and fatigue. • Consider giving additional time to change for PE lessons. • Teach sequencing skills for everyday tasks to increase independence, for example putting on clothes in the right order etc. • Teach strategies to improve self - organisation, including use of task planners and checklists of daily equipment needed.		
Sensory	<u>Whole School</u> ISCAN OT Universal advice *(tamesidechildrenandyoungpeople.nhs.uk/about-us/integrated-service-children-additional-needs-iscan).* Occupational Therapy Resource Library :: Tameside Children and Young People	Develop more in-depth understanding of sensory needs and behaviour amongst all staff. If appropriate, complete initial sensory processing audit *(sensationalbrain.com/wp-content/uploads/2010/03/SB-School-*	Carry out more detailed sensory assessments/audits in collaboration with outside agencies such as Occupational Therapy and implement appropriate modifications.



	(tamesidechildrenandyoungpeople.nhs.uk/advice-information-and-resources/ot-advice-library). ISCAN Universal Support for children with sensory processing differences *(tamesidechildrenandyoungpeople.nhs.uk/download_file/471/182).* Training modules *(tamesidechildrenandyoungpeople.nhs.uk/getting-help/training).* • Introduction to sensory processing *(youtube.com/watch?v=Bstxz-fbVll).* • Creating a sensory friendly school environment *(youtube.com/watch?v=ScLc_9oDw_c)* • Sensory detective at school *(youtube.com/watch?v=snCRzYFtHDM).* • Sensory strategies to help with focus and attention *(youtube.com/watch?v=_E7vv8tzQlU).* • Strategies to support physical education *(youtube.com/watch?v=Vq_tPeGm_kQ).* • Strategies to support practical subjects *(youtube.com/watch?v=-ay1PV6_n7w).*	*Checklist.pdf)* and environmental audit checklists. *(solihull.gov.uk/sites/default/files/2021-12/SEND-Sensory-audit-for-schools-and-classrooms.pdf).* *(tamesidelocaloffer.co.uk/education/sensory-toolkit).* Build access to activities which meet the CYP's sensory needs into the day, for example: timetabled movement breaks, sensory circuits and access to other personalised sensory activities dependent on the outcome of the sensory assessments conducted. *(gatesheadhealth.nhs.uk/wp-content/uploads/2025/02/Sensory-Circuits.pdf).* Plan individual/small group activities dependent on the sensory needs identified. These activities may form part of an individual 5 point scale or RAMP. *(5pointscale.com/downloadables.html).*	Referral to ISCAN OT: Children's Occupational Therapy :: Tameside Children and Young People *(tamesidechildrenandyoungpeople.nhs.uk/our-services/childrens-occupational-therapy).* Recommended guidance for making a referral to OT: Making great occupational therapy referrals | RCOT *(rcot.co.uk/explore-resources/children-young-people-families/making-great-occupational-therapy-referrals).* From the sensory assessment checklist(s) devise a bespoke sensory diet and implement. SENDCo and outside agencies to support the key person/Teaching Assistant to plan differentiated

	Advice • School environmental checklist *(sensationalbrain.com/wp-content/uploads/2010/03/SB-School-Checklist.pdf).* • Supporting sensory regulation in school *(tamesidechildrenandyoungpeople.nhs.uk/application/files/6317/6909/9579/Strategies_to_support_sensory_regulation_in_school.pdf).* • Proprioception advice *(tamesidechildrenandyoungpeople.nhs.uk/application/files/4217/6899/7801/Proprioception_handout_sheet.pdf).* • Sensory strategies to support concentration *(tamesidechildrenandyoungpeople.nhs.uk/application/files/4117/7218/7467/Strategies_to_support_concentration_in_the_classroom.pdf).* Advice sheets Supporting readiness for play and learning (*Physical and sensory combined*)	Providing access to small calm, quiet space, e.g. a small pop-up tent or room with low level noise and lighting. Referral to ISCAN OT Children's Occupational Therapy :: Tameside Children and Young People *(tamesidechildrenandyoungpeople.nhs.uk/our-services/childrens-occupational-therapy).* Recommended guidance for making a referral to OT Making great occupational therapy referrals | RCOT *(rcot.co.uk/explore-resources/children-young-people-families/making-great-occupational-therapy-referrals).*	activities and strategies to support the CYP. Continue to liaise with any Health Professionals, as appropriate. Ongoing monitoring and reviewing of specific strategies and advice given by professionals e.g. Occupational Therapists and the Learning Support Service. Advanced sensory training and parent/carer training to further develop understanding of sensory behaviours and to develop a plan for the individual CYP. Access to a sensory room or designated space.

	(tamesidechildrenandyoungpeople.nhs.uk/application/files/2616/9599/9959/Supporting_readiness_for_Play_and_Learning.pdf) Supporting sensory processing Differences with Dressing *(tamesidechildrenandyoungpeople.nhs.uk/application/files/6217/0420/4431/Sensory_Processing_Differences_with_Dressing.pdf).* Supporting sensory processing differences with eating and drinking *(tamesidechildrenandyoungpeople.nhs.uk/application/files/9017/0420/5201/SPD_Eating__Drinking.pdf).* Supporting sensory processing differences with toileting (tamesidechildrenandyoungpeople.nhs.uk/application/files/6317/0420/7148/SPD_Toileting.pdf). Useful websites for schools: Joining in with Sensory Differences | NHS GGC *(nhsggc.org.uk/kids/life-skills/joining-in-with-sensory-differences).*		



	Sensory Resources For Schools | SIS *(sensoryinclusiveschools.org/pages/resources).* Useful websites for schools: Joining in with Sensory Differences | NHS GGC *(nhsggc.org.uk/kids/life-skills/joining-in-with-sensory-differences).* Sensory Resources For Schools | SIS *(sensoryinclusiveschools.org/pages/resource)* Phase Transitions Proactive planning supports children moving between year groups or educational phases. Include: • Extra visits to new settings • Transfer of sensory strategies and pupil-specific adaptations • Familiarisation with routines and staff • Extra visits to new settings • Transfer of sensory strategies and pupil-specific adaptations		

	• Familiarisation with routines and staff Staff Development in Sensory Processing Staff should be equipped with a foundational understanding of sensory processing differences. Training may include: • Introduction to sensory systems and sensory diets • Links between sensory regulation and behaviour • Embedding universal sensory strategies into the daily routine Neurodiversity and Developmental Trauma Awareness Recognise that sensory processing differences are commonly seen in autistic children and those who have experienced developmental trauma. Ensure language is neuro-affirming and that staff: • View sensory needs as typical within neurodivergent development		



	• Are confident in adapting approaches without pathologising behaviours • Work collaboratively to identify and implement supportive strategies. <u>Classroom</u> Consideration of classroom environment, including low stimulus areas, use of Hessian backgrounds for displays, use of cream coloured paint for walls and plain soft furnishings. (wigan.gov.uk/Docs/PDF/Business/Professionals/SEN/Graduated-Approach/GM-OAIP-Wigan.pdf). Introduce new activities or play equipment in a multi-sensory way e.g. by showing, listening, saying, looking, writing, drawing. • Make use of resources such as: Move n sit cushion • Busy Legz • Fiddle/fidget toys • Ear defenders • Wobble cushion • Chewelry • Putty		

	• Therabands <u>Individual</u> In discussion with parents, talk about the child or young person's (CYP's) sensory preferences and dislikes in order to build a picture of their sensory needs. Look at how the CYP responds to the environment and make changes as appropriate. Examples include adjusting lighting, reducing noise levels, managing odours, and modifying layout. Ensure a One-page profile is in place and shared with all teaching and non-teaching staff. Adaptations should be recognised as regulation strategies; CYP should not receive consequences for using them or avoiding sensory input. (spurgeons.org/media/w0vngu5f/sensory-processing.pdf).		
Hearing Impairment	<u>Universal Level (Whole School / Whole Class)</u> These strategies apply broadly across the school or classroom to support all children:	The referral process typically follows the following pathway, • A member of staff is concerned about a child/pupil's ability to hear and	Following getting advice from professionals from the Service for Children and Young People with a Hearing Impairment the following recommendations should be considered



	• Make sure that you have the deaf child's attention before you begin. • Face the light so that your facial movements can be easily seen. • Avoid covering the mouth or walking around when speaking. • Avoid walking around when speaking. Speech sound decreases over distance and becomes difficult to hear with movement or a change in direction. • Repeat key words and concepts, and check the child understands through open questions and closed questions. • If you have group discussions, repeat useful contributions from other children. • Check the understanding of new vocabulary. • If you use slang words, idioms, phrases that have a double meaning or non-	shares the concern with parent/primary caregiver. • Parent/caregiver takes the pupil to the GP to outline their concern. • The GP offers intervention/treatment or refers the child/pupil to ENT/Audiology Department to request a hearing test. • An audiologist will conduct a hearing test. Should a hearing loss be evident, the audiologist may refer the child/pupil to our service. The Service for Children and Young People with a Hearing Impairment will, • Send a consent form to the parents/caregivers for them to agree we can visit their child/pupil in the home or educational placement and share relevant information. • Teacher of the Deaf arranges a visit to the home/school.	to support the integration of professional advice: • Assessment by a Teacher of the Deaf identifies a NATSIP score of more than 70%. • Highly personalised support plan throughout the day which enables specialist teaching and support to access the mainstream learning environment. • Additional support in all key areas of the National Curriculum areas. • May need direct teaching input from a Teacher of the Deaf for language development. • In class support from a specialist Teaching Assistant, improved access to communication in the classroom. • School radio aids available to deaf pupils throughout the day. • Pre teaching and post teaching support to consolidate class learning.

	literal meanings, provide an explanation. • Use more vocabulary that is familiar to the child and break up complex sentences into short sentences. • Give extra time for the child to consider a question and formulate an answer. • Use additional visual aids and objects to further support understanding. • Be mindful when using multimedia resources such as TV, videos etc. If the child is a good reader, use subtitles, otherwise provide key information at the beginning, and summarise at the end. Background Noise • Be mindful of the noise levels in the classroom. Too many people speaking at once will make it difficult to listen and hear as hearing aids are programmed to amplify all speech. Good classroom management where noise levels are	The Teacher of the Deaf will assess the level of support required for each child/pupil from direct work, information from the audiologist, parents/caregivers, school staff, and any other agencies involved.	• All curriculum assessments are completed in a quiet distraction free environment. • Adaptations and modifications to enable learning to be better accessible. • Special considerations for internal and external examinations where necessary, such as extra time, language modification, scribe, note taker. • Background noise kept to a minimum. • Hearing equipment maintained by parents/carers and school staff. Specialist Teaching Assistants to carry out listening checks. • Teacher of the Deaf to check all hearing equipment is working to specification and to contact audiology if a problem arises. • Deaf Awareness training provided for all school staff. • There are strategies in place to ensure regular communication



	kept to a minimum will help the child hear more clearly. • Hearing aids not only amplify the main speaking voice, but all background noise too such as, class chatter, scraping chairs, rustling papers, computers, fans, background music etc. These noises may be uncomfortable to listen to and prevent the child from listening to the main speaking voice. Practical Lessons • When demonstrating a practical process, it is important to talk and demonstrate separately to ensure the child has full access to the learning • A visual signal to stop and attend to the teacher may need to be devised in addition to all the guidelines listed above. An example, use the light switch to turn the light on and off to gain attention.		between parents/carers and school e.g. telephone, email and school website. • Specialist support staff supports educational day time trips. • Parents/carers are invited to review progress including the annual review for pupils' EHCP. • The Service for Children and Young People with a Hearing Impairment work closely with other outside agencies, such as Deaf CAMHS, SALT and audiology services. • Parents/caregivers, careers service, school and specialist staff provide support for the individual pupil with school transitions and preparation for adulthood. • Pupil voice is at the heart of planning and outcomes to enable children and young people to fulfil their aspirations.

	Individual Level • Creation of a One Page Profile which is shared with all staff. • Allow additional time for the CYP to complete tasks. Seating Arrangements • It is important that the child/pupil is seated in an advantageous position in the classroom. They should be facing the teacher with good access to lip pattern and facial expressions'		

Health & Safety Considerations.

- In the event of a fire or evacuation/lockdown, the supervising teacher should ensure that the child is aware of what is happening and that they have understood all the necessary instructions.

Hearing Aids/Hearing Devices

- These should be always worn in the classroom.
- If the child arrives to school not wearing the aid/s or they appear to be broken, contact the parents at once.
- The aids need to be checked at the beginning of each day by a member of staff.



• All staff in the classroom must know where spare batteries are kept and be able to fit them into the hearing aids. Hearing aids work best at close quarters (1-2 metres) in quiet conditions. As the distance between the speaker and listener increases, the effectiveness of the aids decreases.			
Vision Impairment	<u>Whole School</u> Once a diagnosis has been ascertained the VI Team will work closely with parents and schools to develop awareness of the child's needs. The school should monitor pupil progress in this respect e.g. carrying out reading assessment in different fonts (the VI Team will adapt the resources) A range of resources and agencies, within the LA and the wider community e.g Henshaws, Look UK, Victa, OKE, Tameside Umbrella Parent Carer Forum, and the RNIB are made available to parents and carers. Henshaws - *henshaws.org.uk* Look UK - *look-uk.org* Victa - *victa.org.uk* OKE - *ourkidseyes.org* Tameside Umbrella Forum - *facebook.com/people/Tameside-Umbrella-*	Ongoing assessment, advice, support, monitoring and training from a Qualified Teacher of Children with Vision Impairments (QTVI) and to attend review meetings as appropriate. Teachers should implement advice including specific interventions as suggested by the Qualified Teacher of Children with Vision Impairments (QTVI). Provide access to a quiet space for the Qualified Teacher of Children with Vision Impairments (QTVI) to work with the CYP for assessments and one -to one inventions. Schools to follow the recommendations following the FVA regarding curriculum access.	Following the assessment from the Qualified Teacher of Children with Vision Impairments (QTVI) home visits may be necessary to focus on early intervention and visual skills. Qualified Teacher of Children with Vision Impairments (QTVI) to liaise with the Eye Hospital for further medical information. Continuing advice regarding VI (changes and needs). Advising parents to request a Low Vision Aid Assessment if necessary. This can be done by the VI Team if the student attends Tameside Hospital.

	Parent-Carer-Forum/61568513227370 RNIB - *rnib.org.uk* <u>Classroom</u> Staff to be aware that the CYP may be experiencing visually related difficulties in the accessing curriculum and will provide support. Consider environmental recommendations and strategies available on the VI Website: Children's Vision Impairment Team - Tameside MBC *(tameside.gov.uk/socialcare/tamesidevi)*. Teaching methods which facilitate access to the curriculum, social/emotional development and class/group participation. ICT to be used to increase access to the curriculum where appropriate eg. IPads for reading/screen sharing. <u>Individual Pupil</u> Concerns about a CYP's vision should be raised with parents and carers. Prior to a referral being made advice can be sought from the VI Team website. Gather the views of the young person, using person-centred approaches	Continuing advice regarding VI (changes). School staff should be aware that they need to adapt their teaching styles to support the VI Team. The Team offer an adaptation service for the curriculum – from N18 print. Opportunities for individual and small group work to facilitate learning and inclusion. For school staff to provide the VI student with 'real objects' and provide real experiences. Environmental considerations e.g seating, stairs, lighting, screen sharing and high contrasted step edges, matt laminated. NO WORK SHOULD BE ENLARGED ONTO A3. This distorts the image and makes it harder for the VI student to scan.	Signpost parent and carers to organisations via the website (Equipment Grants, Events in the local area e.g Henshaws): Children's Vision Impairment Team - Tameside MBC *(tameside.gov.uk/socialcare/tamesidevi)*. Ongoing assessment. Teaching, advice, programmes, support and monitoring from the Qualified Teacher of Children with Vision Impairments (QTVI) to work with the CYP, their family and with school staff. An environmental audit can be offered in necessary for reasonable adjustments specifically for a transition. The VI team will provide training to support:



	regarding their opinions and preferred strategies. Once all the information has gathered (eye hospital) a functional assessment will be completed by a Qualified Teacher of Children with Vision Impairments (QTVI) and shared with all staff and parents. Qualified Teacher of Children with Vision Impairments (QTVI) to liaise with the Eye Hospital for further medical information. Recommendations from the report are implemented to enable full inclusion. To develop a transition plan for the CYP moving between year groups, key stages, primary and secondary school and post 16 provision. The Qualified Teacher of Children with Vision Impairments (QTVI) will work closely with the educational provisions to ensure a smooth transition.	A range of specialist equipment to support the student access may include, IPad/Laptop (provided by the school) with screen sharing. Speech software, Zychem Machine, Braille Note and Braillers will be provided by the team. Additional visits for the CYP with a VI can be arranged with the VI Team following the allocation of the school. This includes environmental recommendations and strategies.	• Facilitating inclusive and independent learning. • Providing in class support • Preparing specialist resources. • Advise on risk assessments Further support for mobility will be assessed by the specialist Qualified Teacher of Children with Vision Impairments (QTVI) (this includes cane skills and independent travel). The FVA report is shared with the named school, parents and carers. Students who have transitioned between key stages will be prioritised for autumn term visits, assessment, advice and observations. Training for staff is available via INSET/additional courses if applicable from outside agencies

			(VIEW). *(viewweb.org.uk).* The recommendation of individual equipment for the CYP provided by the school e.g. Laptops and iPads. Access to a VI service technician, as appropriate



Key Stage Two

Please also reference the Sensory Toolkit alongside the following interventions, Sensory Toolkit - Tameside SEND Local Offer, *(Tamesidelocaloffer.co.uk/education/sensory-toolkit)* and also the following Webinars that were delivered as part of the Tameside Sensory Series: (Tameside Sensory Series - Webinar Recordings (March 2026) - YouTube *(youtube.com/playlist?list=PLqnJOndprdkStxpN4zrHLP0qmWAqvORTD)*

SKILL	WHAT TO DO FIRST *Identifying and supporting need*	ASKING FOR HELP *Making a referral for specialist advice*	WHEN MORE HELP IS NEEDED *Integrating specialist advice*
Fine and gross motor	Universal Level (Whole School / Whole Class) These strategies apply broadly across the school or classroom to support all children: • Awareness of a child's physical needs and how these may impact on developmental mile stones, socialisation and learning. • Teaching practice which facilitates access to the curriculum, inclusion and participation. • Create a 'clutter-free' environment. It may be helpful to complete a risk assessment of the setting including indoor and outdoor areas and trips outside of the school. • Consider the organisation of the classroom and seating plans to make sure that it enables CYP to move freely	ISCAN Occupational Therapy Universal advice - find more help using these links Occupational Therapy Resource Library :: Tameside Children and Young People Training modules (within universal sensory advice) • Strategies to support physical education (*youtube.com/watch?v=Vq_tPeGm_kQ*). • Strategies to support practical subjects (*youtube.com/watch?v=-ay1PV6_n7w*).	Following getting advice from appropriate professionals e.g. Occupational Therapy (OT Physiotherapy (PT) services., the following may be considered to support the integration of professional advice: • Staff accessing training provided by Learning Support Service e.g., fine motor skills, gross motor and co-ordination skills training. • Access to support from an additional key person in the setting to facilitate access to



	between them and allows for sufficient working space. • ISCAN OT Universal advicse sheets - Occupational Therapy Resource Library :: Tameside Children and Young People (*tamesidechildrenandyoungpeople.nhs.uk/advice-information-and-resources/ot-advice-library*) <u>Advice sheets:</u> Good Sitting (*tamesidechildrenandyoungpeople.nhs.uk/application/files/1416/9539/0171/Good_Sitting.pdf*) Core stability – pending upload Motor planning skills – pending upload Hand strength – pending upload Recording information – pending upload Scissor skills (*tamesidechildrenandyoungpeople.nhs.uk/application/files/9617/2502/5716/Scissor_Skills-Final.pdf*) Ruler skills (*tamesidechildrenandyoungpeople.nhs.uk/application/files/8017/2502/5810/Ruler_Skills-Final.pdf*)	If you think a child or young person has a fine or gross motor difficulty that is a barrier to their daily activities, please refer to ISCAN OT. The quidance below outlines how to make a good referral to the service: • Children's Occupational Therapy :: Tameside Children and Young People (*tamesidechildrenandyoungpeople.nhs.uk/our-services/childrens-occupational-therapy*). • Making great occupational therapy referrals | RCOT *(rcot.co.uk/explore-resources/children-young-people-families/making-great-occupational-therapy-referrals*). Early consideration and planning for transition through school or to alternative settings.	the curriculum, help the child manage their condition, or move with safety around their environment. • Flexible support in the setting to include personal care such as dressing and toileting, as required or requested by the CYP. • Consider whether assistance or supervision is needed for outside play, break and lunchtimes to ensure mobility and safety of the CYP. Plan activities during unstructured times which are inclusive and promote the CYP's independence. • Inclusion of OT/ PT on any reviews and planning meetings for the child. • Ensure any suggested specialist advice from OT/ PT is shared with all staff and incorporated



	Dressing (*tamesidechildrenandyoungpeople.nhs.uk/application/files/6917/2502/5570/Dressing_Skills.pdf).* Clothing *(tamesidechildrenandyoungpeople.nhs.uk/application/files/5517/0420/3762/clothing.pdf).* Eating and drinking (*tamesidechildrenandyoungpeople.nhs.uk/application/files/3217/2502/5479/Eating__Drinking-Final.pdf*) Incorporate physical play activities e.g. fine and gross motor opportunities into as many aspects of the curriculum as possible to support specific skill development and targets. Consider activities which focus on spatial awareness, planning and body awareness. Encourage peer support through whole class awareness sessions. Consider supporting of feet using step or box. Provide a locker for child or young person to store books, bags and coats etc. rather than needing to carry them around during the day.		into the CYP's IEP or SEN Support Plan. • Implement an accessibility plan to move around the school and give thought to if an individualised fire evacuation plan is required. • Ensure access to additional and specialist equipment, as advised by professionals such as Occupational Therapists (OT) and Physiotherapists (PT). • Ensure all staff in the setting receive relevant training e.g. manual handling. • Allocated key person with time to adapt resources/ attend training and conduct individual work. SENDCo to support the key person in planning and using differentiated activities and more specialist strategies and resources to support the CYP.

	• Provide option for the child or young person to sit on a chair rather than on the floor at carpet time/ assemblies. Can have a classmate do the same if appropriate. • Appropriate size and height chairs/tables to encourage a correct posture and to support fine motor function and writing. • Ensure child or young person is able to reach and use facilities e.g. hand basins/taps/coat pegs / lockers. • Provide additional classroom resources such as sloping board, adapted cutlery/chairs/scissors and pencil grips etc. • Staff understanding of when to refer to Occupational Therapy and or Physiotherapy. • Links with other local schools to observe and share good practice. • Whole setting interventions: • Motor Skills United • Clever Fingers • Teodorescu Write from the Start • Keyboarding without Tears • Ready Steady Write		• Early consideration and planning for transition through school or to alternative settings. • Consider the need to differentiate physical curriculum and need to incorporate OT/ PT exercises into everyday routines and/ or general class/ PE lessons. • Incorporate moving and handling plans and care plans into planning, as advised by professionals. • Ensure any plans are meeting need. Request a review should any aspects change. • Ensure any specialist equipment continues to meet the child's needs and contact relevant OT/ PT/ liaise with family regarding any repairs or alterations.



	• Active Tameside • Physical Literacy • Yoga <u>Group Level</u> These strategies are best suited for small groups of children with similar needs: • Undertake Co-ordination Matters activities and record outcomes. • Opportunities for 1:1 and small group work e.g. Aqua beads, chopsticks game, Lego, iron on beads, finger gym, letter join and jigsaws. • Fine and gross motor skill interventions (previously listed) that may be carried out in small groups and targeted towards a child's needs. • Incorporate handwriting/ hand strengthening activities into daily plans e.g. using age appropriate resources such as Theraputty, elastic bands, shoe lace tying, aqua/iron on beads, tweezer and chopstick games, peg activities, threading, jigsaws, Lego, funky fingers and finger gym.		• Carry out risk assessments on a regular basis and incorporate any actions and strategies into planning. • Make advised adaptations to the school environment e.g. changing plinths/ ramps/ hoists. • Consider space needed to accommodate specialist equipment e.g. walker, standing frame. • Ensure access to specialised seating and/or height adjustable tables. • Carry out lessons on ground floor if there is no suitable access to classrooms on upper floors. • Consider adaptations required in practical lessons • e.g. ovens in cookery to be wheelchair accessible.



	• Keep withdrawals from class to a minimum. <u>Individual Level</u> These strategies are tailored to meet the specific needs of an individual child or young person: • Concerns about a child's physical needs should initially be raised with parents/ carers and discussed with relevant professionals e.g. SENDCo. • Use observation in a variety of settings and contexts e.g. home visits, indoor and outdoor play to identify any barriers that affect the child's access to play and participation. • Discussions with parents/ carers to identify any strengths and needs can be helpful for planning. • Creation of a One Page Profile which is shared with all staff. • Consider positioning of child or young person in the classroom to minimise distractions. • Allow additional time for the CYP to complete tasks.		

	• Consider any additional support for self-care tasks, when required or requested by the CYP. • Take account of potential fatigue and reduce the pace of structured lessons, providing regular opportunities for breaks and rest. Adaptations to support writing • Consider access arrangements for assessments and exams, and apply for and implement them, as necessary. • Consider further assessment of handwriting e.g. DASH assessment if the child over 9 years. • Consider alternatives to handwriting e.g., voice recorder, iPad, laptop or netbook. • Consider use of pen rather than pencil to improve fluency. If pen licences are used within school, consider suitability for child and the potential to a give pen licence for reasons other than neatness etc. • Provide lined paper with spaces sufficiently wide enough to for writing tasks. Adaptations to learning resources		



	• Consider modifying activities that CYP with perceptual difficulties may find challenging such as work sheets with lots of information, word searches or crosswords. • Provide additional equipment or resources such as sloping board, adapted cutlery/ chairs/ scissors and pencil grips etc. • Consider transportations of any required additional resources between lessons when appropriate. • Use technology to support learning including apps e.g. Dexteria Jr, Blobble Write and Hairy Letters. Environmental adaptations • Give consideration to transporting of food at lunchtime e.g. providing assistance with trays and seating. Consider sitting on a standard chair at the end of bench style folding tables rather than on attached stools to improve postural support. • Allow CYP to leave lessons early when travelling between rooms or buildings to		



	avoid large groups in corridors and enable extra travel time. • Consider timetabling and location of rooms where possible to facilitate movement whilst continuing to take into consideration access to facilities and fatigue. • Consider giving additional time to change for PE lessons. • Teach sequencing skills for everyday tasks to increase independence, for example putting on clothes in the right order etc. • Teach strategies to improve self - organisation, including use of diaries, planners, and checklists of daily equipment needed.		
Sensory	Whole School ISCAN OT Universal advice *(tamesidechildrenandyoungpeople.nhs.uk/about-us/integrated-service-children-additional-needs-iscan).* Occupational Therapy Resource Library :: Tameside Children and Young People	Develop more in-depth understanding of sensory needs and behaviour amongst all staff. If appropriate, complete initial sensory processing audit and environmental audit checklists. (*sensationalbrain.com/wp-*	Carry out more detailed sensory assessments/audits in collaboration with outside agencies such as Occupational Therapy and implement appropriate modifications. Referral to ISCAN OT: Children's Occupational

	(tamesidechildrenandyoungpeople.nhs.uk/advice-information-and-resources/ot-advice-library). ISCAN Universal Support for children with sensory processing differences *(tamesidechildrenandyoungpeople.nhs.uk/download_file/471/182).* Training modules *(tamesidechildrenandyoungpeople.nhs.uk/getting-help/training).* • Introduction to sensory processing *(youtube.com/watch?v=Bstxz-fbVlI)* • Creating a sensory friendly school environment *(youtube.com/watch?v=ScLc_9oDw_c)* • Sensory detective at school *(youtube.com/watch?v=snCRzYFtHDM)* • Sensory strategies to help with focus and attention *(youtube.com/watch?v=_E7vv8tzQlU)* • Strategies to support physical education *(youtube.com/watch?v=Vq_tPeGm_kQ)* • Strategies to support practical subjects *(youtube.com/watch?v=-ay1PV6_n7w)* Advice	*content/uploads/2010/03/SB-School-Checklist.pdf*) (*solihull.gov.uk/sites/default/files/2021-12/SEND-Sensory-audit-for-schools-and-classrooms.pdf*) Build access to activities which meet the CYP's sensory needs into the day, for example: timetabled movement breaks, sensory circuits and access to other personalised sensory activities dependent on the outcome of the sensory assessments conducted. *(gatesheadhealth.nhs.uk/wp-content/uploads/2025/02/Sensory-Circuits.pdf).* Plan individual/small group activities dependent on the sensory needs identified. These activities may form part of an individual 5 point scale or RAMP. *(5pointscale.com/downloadables.html).*	Therapy :: Tameside Children and Young People *(tamesidechildrenandyoungpeople.nhs.uk/our-services/childrens-occupational-therapy)* Recommended guidance for making a referral to OT: Making great occupational therapy referrals | RCOT *(rcot.co.uk/explore-resources/children-young-people-families/making-great-occupational-therapy-referrals)* From the sensory assessment checklist(s) devise a bespoke sensory diet and implement. SENDCo and outside agencies to support the key person/Teaching Assistant to plan differentiated activities



	• School environmental checklist *(sensationalbrain.com/wp-content/uploads/2010/03/SB-School-Checklist.pdf)* • Supporting sensory regulation in school *(tamesidechildrenandyoungpeople.nhs.uk/application/files/6317/6909/9579/Strategies_to_support_sensory_regulation_in_school.pdf)* • Proprioception advice *(tamesidechildrenandyoungpeople.nhs.uk/application/files/4217/6899/7801/Proprioception_handout_sheet.pdf)* • Sensory strategies to support concentration *(tamesidechildrenandyoungpeople.nhs.uk/application/files/4117/7218/7467/Strategies_to_support_concentration_in_the_classroom.pdf)*. Advice sheets Supporting readiness for play and learning (*Physical and sensory combined*) *(tamesidechildrenandyoungpeople.nhs.uk/application/files/2616/9599/9959/Supporting_readiness_for_Play_and_Learning.pdf)*	Providing access to small calm, quiet space, e.g. a small pop-up tent or room with low level noise and lighting. Referral to ISCAN OT Children's Occupational Therapy :: Tameside Children and Young People (*tamesidechildrenandyoungpeople.nhs.uk/our-services/childrens-occupational-therapy*) Recommended guidance for making a referral to OT Making great occupational therapy referrals | RCOT (*rcot.co.uk/explore-resources/children-young-people-families/making-great-occupational-therapy-referrals*)	and strategies to support the CYP. Continue to liaise with any Health Professionals, as appropriate. Ongoing monitoring and reviewing of specific strategies and advice given by professionals e.g. Occupational Therapists and the Learning Support Service. Advanced sensory training and parent/carer training to further develop understanding of sensory behaviours and to develop a plan for the individual CYP. Access to a sensory room or designated space.

	Supporting sensory processing Differences with Dressing (*tamesidechildrenandyoungpeople.nhs.uk/application/files/6217/0420/4431/Sensory_Processing_Differences_with_Dressing.pdf)* Supporting sensory processing differences with eating and drinking *(tamesidechildrenandyoungpeople.nhs.uk/application/files/9017/0420/5201/SPD_Eating__Drinking.pdf)* Supporting sensory processing differences with toileting (*tamesidechildrenandyoungpeople.nhs.uk/application/files/6317/0420/7148/SPD_Toileting.pdf)* Useful websites for schools: Joining in with Sensory Differences | NHS GGC *(nhsggc.org.uk/kids/life-skills/joining-in-with-sensory-differences).* Sensory Resources For Schools | SIS *(sensoryinclusiveschools.org/pages/resources).* Phase Transitions Proactive planning supports children moving between year groups or educational phases. Include:		



	• Extra visits to new settings • Transfer of sensory strategies and pupil specific adaptations • Familiarisation with routines and staff Staff Development in Sensory Processing Staff should be equipped with a foundational understanding of sensory processing differences. Training may include: • Introduction to sensory systems and sensory diets • Links between sensory regulation and behaviour • Embedding universal sensory strategies into the daily routine Neurodiversity and Developmental Trauma Awareness Recognise that sensory processing differences are commonly seen in autistic children and those who have experienced developmental trauma. Ensure language is neuro-affirming and that staff: • View sensory needs as typical within neurodivergent development		



	• Are confident in adapting approaches without pathologising behaviours • Work collaboratively to identify and implement supportive strategies. <u>Classroom</u> Consideration of classroom environment, including low stimulus areas, use of Hessian backgrounds for displays, use of cream coloured paint for walls and plain soft furnishings. (wigan.gov.uk/Docs/PDF/Business/Professionals/SEN/Graduated-Approach/GM-OAIP-Wigan.pdf). Introduce new activities or play equipment in a multi-sensory way e.g. by showing, listening, saying, looking, writing, drawing. Make use of resources such as: • Move n sit cushion • Busy Legz • Fiddle/fidget toys • Ear defenders • Wobble cushion • Chewelry • Putty		

	• Therabands <u>Individual</u> In discussion with parents, talk about the child or young person's (CYP's) sensory preferences and dislikes in order to build a picture of their sensory needs. Look at how the CYP responds to the environment and make changes as appropriate. Examples include adjusting lighting, reducing noise levels, managing odours, and modifying layout. Ensure a One-page profile is in place and shared with all teaching and non-teaching staff. Adaptations should be recognised as regulation strategies; CYP should not receive consequences for using them or avoiding sensory input (spurgeons.org/media/w0vngu5f/sensory-processing.pdf).		
Hearing Impairment	<u>Universal Level (Whole School / Whole Class)</u> These strategies apply broadly across the school or classroom to support all children:	The referral process typically follows the following pathway,	Following getting advice from professionals from the Service for Children and Young People with a Hearing Impairment, the

	• Make sure that you have the deaf child's attention before you begin.
	• Face the light so that your facial movements can be easily seen.
	• Avoid covering the mouth or walking around when speaking.
	• Avoid walking around when speaking. Speech sound decreases over distance and becomes difficult to hear with movement or a change in direction.
	• Repeat key words and concepts, and check the child understands through open questions and closed questions.
	• If you have group discussions, repeat useful contributions from other children.
	• Check the understanding of new vocabulary.
	• If you use slang words, idioms, phrases that have a double meaning or non-literal meanings, provide an explanation.
		• A member of staff is concerned about a child/pupil's ability to hear and shares the concern with parent/primary caregiver.
		• Parent/caregiver takes the pupil to the GP to outline their concern.
		  • The GP offers intervention/treatment or refers the child/pupil to ENT/Audiology Department to request a hearing test.
		  • An audiologist will conduct a hearing test. Should a hearing loss be evident, the audiologist may refer the child/pupil to our service.
		The Service for Children and Young People with a Hearing Impairment Team will,
		• Send a consent form to the parents/caregivers for them to
			following recommendations should be considered to support the integration of professional advice:
			• Assessment by a Teacher of the Deaf identifies a NATSIP score of more than 70%.
			• Highly personalised support plan throughout the day which enables specialist teaching and support to access the mainstream learning environment.
			• Additional support in all key areas of the National Curriculum areas.
			• May need direct teaching input from a Teacher of the Deaf for language development.
			• In class support from a specialist Teaching

	• Use more vocabulary that is familiar to the child and break up complex sentences into short sentences. • Give extra time for the child to consider a question and formulate an answer. • Use additional visual aids and objects to further support understanding. • Be mindful when using multimedia resources such as TV, videos etc. If the child is a good reader, use subtitles, otherwise provide key information at the beginning, and summarise at the end. Background Noise • Be mindful of the noise levels in the classroom. Too many people speaking at once will make it difficult to listen and hear as hearing aids are programmed to amplify all speech. Good classroom management where noise levels are kept to a minimum will help the child hear more clearly. • Hearing aids not only amplify the main speaking voice, but all background noise	agree we can visit their child/pupil in the home or educational placement and share relevant information. • Teacher of the Deaf arranges a visit to the home/school. The Teacher of the Deaf will assess the level of support required for each child/pupil through direct work, information from the audiologist, parents/caregivers, school staff, and any other agencies involved.	Assistant, improved access to communication in the classroom. • School radio aids available to deaf pupils throughout the day. • Pre teaching and post teaching support to consolidate class learning. • All curriculum assessments are completed in a quiet distraction free environment. • Adaptations and modifications to enable learning to be better accessible. • Special considerations for internal and external examinations where necessary, such as extra time, language modification, scribe, note taker.

	too such as, class chatter, scraping chairs, rustling papers, computers, fans, background music etc. These noises may be uncomfortable to listen to and prevent the child from listening to the main speaking voice. Practical Lessons • When demonstrating a practical process, it is important to talk and demonstrate separately to ensure the child has full access to the learning • A visual signal to stop and attend to the teacher may need to be devised in addition to all the guidelines listed above. An example, use the light switch to turn the light on and off to gain attention. <u>Individual Level</u> • Creation of a One Page Profile which is shared with all staff. • Allow additional time for the CYP to complete tasks. Seating Arrangements		• Background noise kept to a minimum. • Hearing equipment maintained by parents/carers and school staff. Specialist Teaching Assistants to carry out listening checks. • Teacher of the Deaf to check all hearing equipment is working to specification and to contact audiology if a problem arises. • Deaf Awareness training provided for all school staff. • There are strategies in place to ensure regular communication between parents/carers and school e.g. telephone, email and school website.

	• It is important that the child/pupil is seated in an advantageous position in the classroom. • They should be facing the teacher with good access to lip pattern and facial expressions'		• Specialist support staff supports educational day time trips. • Parents/carers are invited to review progress including the annual review for pupils' EHCP. • The Service for Children and Young People with a Hearing Impairment work closely with other outside agencies, such as Deaf CAMHS, SALT and audiology services. • Parents/caregivers, careers service, school and specialist staff provide support for the individual pupil with school transitions and preparation for adulthood. Pupil voice is at the heart of planning and outcomes to enable children and young



			people to fulfil their aspirations.
Health & Safety Considerations. • In the event of a fire or evacuation/lockdown, the supervising teacher should ensure that the child is aware of what is happening and that they have understood all the necessary instructions. Hearing Aids/Hearing Devices • These should be always worn in the classroom. • If the child arrives to school not wearing the aid/s or they appear to be broken, contact the parents at once. • The aids need to be checked at the beginning of each day by a member of staff. • All staff in the classroom must know where spare batteries are kept and be able to fit them into the hearing aids. Hearing aids work best at close quarters (1-2 metres) in quiet conditions. As the distance between the speaker and listener increases, the effectiveness of the aids decreases.			
Vision Impairment	Whole School Once a diagnosis has been ascertained the VI Team will work closely with parents and schools to develop awareness of the child's needs. The school should monitor pupil progress in this respect e.g. carrying out reading assessment in different fonts (the VI Team will adapt the resources) A range of resources and agencies, within the LA and the wider community e.g Henshaws,	Ongoing assessment, advice, support, monitoring and training from a Qualified Teacher of Children with Vision Impairments (QTVI) and to attend review meetings as appropriate. Teachers should implement advice including specific interventions as suggested by the Qualified Teacher of Children with Vision Impairments (QTVI).	Following the assessment from the Qualified Teacher of Children with Vision Impairments (QTVI) home visits may be necessary to focus on early intervention and visual skills. Qualified Teacher of Children with Vision Impairments (QTVI) to liaise with the Eye Hospital

	Look UK, Victa, OKE, Tameside Umbrella Parent Carer Forum and the RNIB are made available to parents and carers. Henshaws - *henshaws.org.uk* Look UK - *look-uk.org* Victa - *victa.org.uk* OKE - *ourkidseyes.org* Tameside Umbrella Forum - *facebook.com/people/Tameside-Umbrella-Parent-Carer-Forum/61568513227370* RNIB - *rnib.org.uk*	Provide access to a quiet space for the Qualified Teacher of Children with Vision Impairments (QTVI) to work with the CYP for assessments and one -to one inventions. Schools to follow the recommendations following the FVA regarding curriculum access. Continuing advice regarding VI (changes).	for further medical information. Continuing advice regarding VI (changes and needs). Advising parents to request a Low Vision Aid Assessment if necessary. This can be done by the VI Team if the student attends Tameside Hospital. Signpost parent and carers to organisations via the website (Equipment Grants, Events in the local area e.g Henshaws): Children's Vision Impairment Team - Tameside MBC (tameside.gov.uk/socialcare/tamesidevi). Ongoing assessment. Teaching, advice, programmes, support and monitoring from the Qualified Teacher of
	Classroom Staff to be aware that the CYP may be experiencing visually related difficulties in the accessing curriculum and will provide support. Consider environmental recommendations and strategies available on the VI Website: Children's Vision Impairment Team - Tameside MBC *(tameside.gov.uk/socialcare/tamesidevi).* Teaching methods which facilitate access to the curriculum, social/emotional development and class/group participation.	School staff should be aware that they need to adapt their teaching styles to support the VI Team. The Team offer an adaptation service for the curriculum – from N18 print. Opportunities for individual and small group work to facilitate learning and inclusion.	

	ICT to be used to increase access to the curriculum where appropriate eg. IPads for reading/screen sharing. <u>Individual Pupil</u> Concerns about a CYP's vision should be raised with parents and carers. Prior to a referral being made advice can be sought from the VI Team website. Gather the views of the young person, using person-centred approaches regarding their opinions and preferred strategies. Once all the information has gathered (eye hospital) a functional assessment will be completed by a Qualified Teacher of Children with Vision Impairments (QTVI) and shared with all staff and parents. Qualified Teacher of Children with Vision Impairments (QTVI) to liaise with the Eye Hospital for further medical information. Recommendations from the report are implemented to enable full inclusion. To develop a transition plan for the CYP moving between year groups, key stages, primary and secondary school and post 16 provision.	For school staff to provide the VI student with 'real objects' and provide real experiences. Environmental considerations e.g seating, stairs, lighting, screen sharing and high contrasted step edges, matt laminated. NO WORK SHOULD BE ENLARGED ONTO A3. This distorts the image and makes it harder for the VI student to scan. A range of specialist equipment to support the student access may include, IPad/Laptop (provided by the school) with screen sharing. Speech software, Zychem Machine, Braille Note and Braillers will be provided by the team.	Children with Vision Impairments (QTVI) to work with the CYP, their family and with school staff. An environmental audit can be offered in necessary for reasonable adjustments specifically for a transition. The VI team will provide training to support: • Facilitating inclusive and independent learning. • Providing in class support • Preparing specialist resources. • Advise on risk assessments Further support for mobility will be assessed by the specialist Qualified Teacher of Children with Vision Impairments (QTVI) (this

	The Qualified Teacher of Children with Vision Impairments (QTVI) will work closely with the educational provisions to ensure a smooth transition.	Additional visits for the CYP with a VI can be arranged with the VI Team following the allocation of the school. This includes environmental recommendations and strategies.	includes cane skills and independent travel). The FVA report is shared with the named school, parents and carers. Students who have transitioned between key stages will be prioritised for autumn term visits, assessment, advice and observations. Training for staff is available via INSET/additional courses if applicable from outside agencies (VIEW). *(viewweb.org.uk)*. The recommendation of individual equipment for the CYP provided by the school e.g. Laptops and iPads.



			Access to a VI service technician, as appropriate



Key Stage Three

Please also reference the Sensory Toolkit alongside the following interventions, Sensory Toolkit - Tameside SEND Local Offer, *(Tamesidelocaloffer.co.uk/education/sensory-toolkit)* and also the following Webinars that were delivered as part of the Tameside Sensory Series: (Tameside Sensory Series - Webinar Recordings (March 2026) - YouTube *(youtube.com/playlist?list=PLqnJOndprdkStxpN4zrHLP0qmWAqvORTD)*

SKILL	WHAT TO DO FIRST *Identifying and supporting need*	ASKING FOR HELP *Making a referral for specialist advice*	WHEN MORE HELP IS NEEDED *Integrating specialist advice*
Fine and gross motor	Universal Level (Whole School / Whole Class) These strategies apply broadly across the school or classroom to support all children: • Awareness of a child's physical needs and how these may impact on developmental mile stones, socialisation and learning. • Teaching practice which facilitates access to the curriculum, inclusion and participation. • Create a 'clutter-free' environment. It may be helpful to complete a risk assessment of the setting including indoor and outdoor areas and trips outside of the school.	ISCAN Occupational Therapy Universal advice - find more help using these links Occupational Therapy Resource Library :: Tameside Children and Young People Training modules (within universal sensory advice) • Strategies to support physical education *(youtube.com/watch?v=Vq_tPeGm_kQ)* • Strategies to support practical subjects (*youtube.com/watch?v=-ay1PV6_n7w*)	Following getting advice from appropriate professionals e.g. Occupational Therapy (OT Physiotherapy (PT) services., the following may be considered to support the integration of professional advice: • Staff accessing training provided by Learning Support Service e.g., fine motor skills, gross motor and co-ordination skills training. • Access to support from an additional key person in the setting to facilitate access to



	• Consider the organisation of the classroom and seating plans to make sure that it enables CYP to move freely between them and allows for sufficient working space. • ISCAN OT Universal advice sheets - Occupational Therapy Resource Library :: Tameside Children and Young People <u>Advice sheets:</u> Good Sitting (*tamesidechildrenandyoungpeople.nhs.uk/application/files/1416/9539/0171/Good_Sitting.pdf*) Core stability – pending upload Motor planning skills – pending upload Hand strength – pending upload Recording information – pending upload Scissor skills (*tamesidechildrenandyoungpeople.nhs.uk/application/files/9617/2502/5716/Scissor_Skills-Final.pdf*) Ruler skills (*tamesidechildrenandyoungpeople.nhs.uk/application/files/8017/2502/5810/Ruler_Skills-Final.pdf*)	If you think a child or young person has a fine or gross motor difficulty that is a barrier to their daily activities, please refer to ISCAN OT. The guidance below outlines how to make a good referral to the service: • Children's Occupational Therapy :: Tameside Children and Young People (*tamesidechildrenandyoungpeople.nhs.uk/our-services/childrens-occupational-therapy*) • Making great occupational therapy referrals | RCOT (*rcot.co.uk/explore-resources/children-young-people-families/making-great-occupational-therapy-referrals*) Early consideration and planning for transition through school or to alternative settings.	the curriculum, help the child manage their condition, or move with safety around their environment. • Flexible support in the setting to include personal care such as dressing and toileting, as required or requested by the CYP. • Consider whether assistance or supervision is needed for outside play, break and lunchtimes to ensure mobility and safety of the CYP. Plan activities during unstructured times which are inclusive and promote the CYP's independence. • Inclusion of OT/ PT on any reviews and planning meetings for the child. • Ensure any suggested specialist advice from OT/ PT is shared with all staff and

	Dressing (*tamesidechildrenandyoungpeople.nhs.uk/application/files/6917/2502/5570/Dressing_Skills.pdf*). Clothing (*tamesidechildrenandyoungpeople.nhs.uk/application/files/5517/0420/3762/clothing.pdf*). Eating and drinking (*tamesidechildrenandyoungpeople.nhs.uk/application/files/3217/2502/5479/Eating__Drinking-Final.pdf*) • Incorporate fine and gross motor opportunities into as many aspects of the curriculum as possible to support specific skill development and targets. • Consider activities which focus on spatial awareness, planning and body awareness. • Encourage peer support through whole class awareness sessions. • Consider supporting of feet using step or box. • Provide a locker for child or young person to store books, bags and coats		incorporated into the CYP's IEP or SEN Support Plan. • Implement an accessibility plan to move around the school and give thought to if an individualised fire evacuation plan is required. • Ensure access to additional and specialist equipment, as advised by professionals such as Occupational Therapists (OT) and Physiotherapists (PT). • Ensure all staff in the setting receive relevant training e.g. manual handling. • Allocated key person with time to adapt resources/ attend training and conduct individual work. SENDCo to support the key person in planning and using differentiated activities and more specialist strategies and resources to support the CYP.

	etc. rather than needing to carry them around during the day. • Provide option for the child or young person to sit on a chair rather than on the floor at carpet time/ assemblies. Can have a classmate do the same if appropriate. • Appropriate size and height chairs/tables to encourage a correct posture and to support fine motor function and writing. • Ensure child or young person is able to reach and use facilities e.g. hand basins/taps/coat pegs / lockers. • Provide additional classroom resources such as sloping board, adapted cutlery/chairs/scissors and pencil grips etc. • Staff understanding of when to refer to Occupational Therapy and or Physiotherapy. • Links with other local schools to observe and share good practice. <u>Whole setting interventions:</u> • Motor Skills United		• Early consideration and planning for transition through school or to alternative settings. • Consider the need to differentiate physical curriculum and need to incorporate OT/ PT exercises into everyday routines and/ or general class/ PE lessons. • Incorporate moving and handling plans and care plans into planning, as advised by professionals. • Ensure any plans are meeting need. Request a review should any aspects change. • Ensure any specialist equipment continues to meet the child's needs and contact relevant OT/ PT/ liaise with family regarding any repairs or alterations. • Carry out risk assessments on a regular basis and incorporate

	• Keyboarding without Tears • Ready Steady Write • Active Tameside • Physical Literacy • Balance bikes • Yoga <u>Group Level</u> These strategies are best suited for small groups of children with similar needs: • Undertake Co-ordination Matters activities and record outcomes. • Opportunities for 1:1 and small group work e.g. Aqua beads, chopsticks game, Lego, iron on beads, finger gym, letter join and jigsaws. • Fine and gross motor skill interventions (previously listed) that may be carried out in small groups and targeted towards a child's needs. • Incorporate handwriting/ hand strengthening activities into daily plans e.g. using age appropriate resources such as Theraputty, elastic bands, crochet or knitting, aqua/iron on beads, tweezer and chopstick games, peg		any actions and strategies into planning. • Make advised adaptations to the school environment e.g. changing plinths/ ramps/ hoists. • Consider space needed to accommodate specialist equipment e.g. walker, standing frame. • Ensure access to specialised seating and/or height adjustable tables. • Carry out lessons on ground floor if there is no suitable access to classrooms on upper floors. • Consider adaptations required in practical lessons e.g. ovens in cookery to be wheelchair accessible.



	activities, bead bracelet making, jigsaws and Lego. • Keep withdrawals from class to a minimum. <u>Individual Level</u> These strategies are tailored to meet the specific needs of an individual child or young person: • Concerns about a child's physical needs should initially be raised with parents/ carers and discussed with relevant professionals e.g. SENDCo. • Use observation in a variety of settings and contexts e.g. home visits, P.E. and unstructured time to identify any barriers that affect the child's access to play and participation. • Discussions with parents/ carers to identify any strengths and needs can be helpful for planning. • Creation of a One Page Profile which is shared with all staff. • Consider positioning of child or young person in the classroom to minimise distractions.		

	• Allow additional time for the CYP to complete tasks. • Consider any additional support for self-care tasks, when required or requested by the CYP. • Take account of potential fatigue and reduce the pace of structured lessons, providing regular opportunities for breaks and rest. Adaptations to support writing • Consider access arrangements for assessments and exams, and apply for and implement them, as necessary. • Consider further assessment of handwriting e.g. DASH assessment if the child over 9 years. • Consider alternatives to handwriting e.g., voice recorder, iPad, laptop or netbook. • Provide lined paper with spaces sufficiently wide enough to for writing tasks. Adaptations to learning resources • Consider modifying activities that CYP with perceptual difficulties may find		

	challenging such as work sheets with lots of information, word searches or crosswords. • Provide additional equipment or resources such as sloping board, adapted scissors and pencil grips etc. • Consider transportations of any required additional resources between lessons when appropriate. • Use technology to support learning including apps e.g. Dexteria Jr, Blobble Write and Hairy Letters. Environmental adaptations • Give consideration to transporting of food at lunchtime e.g. providing assistance with trays and seating. Consider sitting on a standard chair at the end of bench style folding tables rather than on attached stools to improve postural support. • Allow CYP to leave lessons early when travelling between rooms or buildings to avoid large groups in corridors and enable extra travel time.		



	• Consider timetabling and location of rooms where possible to facilitate movement whilst continuing to take into consideration access to facilities and fatigue. • Consider giving additional time to change for PE lessons. • Teach strategies to improve self - organisation, including use of diaries, planners, and checklists of daily equipment needed		
Sensory	Whole School ISCAN OT Universal advice (tamesidechildrenandyoungpeople.nhs.uk/about-us/integrated-service-children-additional-needs-iscan). Occupational Therapy Resource Library :: Tameside Children and Young People (tamesidechildrenandyoungpeople.nhs.uk/advice-information-and-resources/ot-advice-library). ISCAN Universal Support for children with sensory processing differences	Develop more in-depth understanding of sensory needs and behaviour amongst all staff. If appropriate, complete initial sensory processing audit and environmental audit checklists. (*sensationalbrain.com/wp-content/uploads/2010/03/SB-School-Checklist.pdf*)	Carry out more detailed sensory assessments/audits in collaboration with outside agencies such as Occupational Therapy and implement appropriate modifications. Referral to ISCAN OT: Children's Occupational Therapy :: Tameside Children and Young People (*tamesidechildrenandyoungpeople.nhs.uk/our-services/childrens-occupational-therapy*)



	(tamesidechildrenandyoungpeople.nhs.uk/download_file/471/182). Training modules (tamesidechildrenandyoungpeople.nhs.uk/getting-help/training). • Introduction to sensory processing *(youtube.com/watch?v=Bstxz-fbVlI)* • Creating a sensory friendly school environment *(youtube.com/watch?v=ScLc_9oDw_c)* • Sensory detective at school *(youtube.com/watch?v=snCRzYFtHDM)* • Sensory strategies to help with focus and attention *(youtube.com/watch?v=_E7vv8tzQlU)* • Strategies to support physical education *(youtube.com/watch?v=Vq_tPeGm_kQ)* • Strategies to support practical subjects *(youtube.com/watch?v=-ay1PV6_n7w)* Advice • School environmental checklist *(sensationalbrain.com/wp-content/uploads/2010/03/SB-School-Checklist.pdf)*	(*solihull.gov.uk/sites/default/files/2021-12/SEND-Sensory-audit-for-schools-and-classrooms.pdf*) Build access to activities which meet the CYP's sensory needs into the day, for example: timetabled movement breaks, sensory circuits and access to other personalised sensory activities dependent on the outcome of the sensory assessments conducted. (*gatesheadhealth.nhs.uk/wp-content/uploads/2025/02/Sensory-Circuits.pdf*) Plan individual/small group activities dependent on the sensory needs identified. These activities may form part of an individual 5 point scale or RAMP. (*5pointscale.com/downloadables.html*)	Making great occupational therapy referrals | RCOT (*rcot.co.uk/explore-resources/children-young-people-families/making-great-occupational-therapy-referrals*) From the sensory assessment checklist(s) devise a bespoke sensory diet and implement. SENDCo and outside agencies to support the key person/Teaching Assistant to plan differentiated activities and strategies to support the CYP. Continue to liaise with any Health Professionals, as appropriate. Ongoing monitoring and reviewing of specific strategies and advice given by professionals e.g. Occupational Therapists and the Learning Support Service.

	• Supporting sensory regulation in school *(tamesidechildrenandyoungpeople.nhs.uk/application/files/6317/6909/9579/Strategies_to_support_sensory_regulation_in_school.pdf)* • Proprioception advice *(tamesidechildrenandyoungpeople.nhs.uk/application/files/4217/6899/7801/Proprioception_handout_sheet.pdf)* • Sensory strategies to support concentration *(tamesidechildrenandyoungpeople.nhs.uk/application/files/4117/7218/7467/Strategies_to_support_concentration_in_the_classroom.pdf).* Advice sheets Supporting readiness for play and learning (*Physical and sensory combined*) *(tamesidechildrenandyoungpeople.nhs.uk/application/files/2616/9599/9959/Supporting_readiness_for_Play_and_Learning.pdf)* Supporting sensory processing Differences with Dressing	Providing access to small calm, quiet space, e.g. a small pop-up tent or room with low level noise and lighting. Referral to ISCAN OT Children's Occupational Therapy :: Tameside Children and Young People (*tamesidechildrenandyoungpeople.nhs.uk/our-services/childrens-occupational-therapy*) Making great occupational therapy referrals | RCOT (*rcot.co.uk/explore-resources/children-young-people-families/making-great-occupational-therapy-referrals*)	Advanced sensory training and parent/carer training to further develop understanding of sensory behaviours and to develop a plan for the individual CYP. Access to a sensory room or designated space.

	(*tamesidechildrenandyoungpeople.nhs.uk/application/files/6217/0420/4431/Sensory_Processing_Differences_with_Dressing.pdf)* Supporting sensory processing differences with eating and drinking *(tamesidechildrenandyoungpeople.nhs.uk/application/files/9017/0420/5201/SPD_Eating__Drinking.pdf)* Supporting sensory processing differences with toileting (*tamesidechildrenandyoungpeople.nhs.uk/application/files/6317/0420/7148/SPD_Toileting.pdf)* Useful websites for schools: Joining in with Sensory Differences | NHS GGC *(nhsggc.org.uk/kids/life-skills/joining-in-with-sensory-differences).* Sensory Resources For Schools | SIS *(sensoryinclusiveschools.org/pages/resources)* Phase Transitions Proactive planning supports children moving between year groups or educational phases. Include:		



	• Extra visits to new settings • Transfer of sensory strategies and pupil-specific adaptations Familiarisation with routines and staff Staff Development in Sensory Processing Staff should be equipped with a foundational understanding of sensory processing differences. Training may include: • Introduction to sensory systems and sensory diets • Links between sensory regulation and behaviour • Embedding universal sensory strategies into the daily routine Neurodiversity and Developmental Trauma Awareness Recognise that sensory processing differences are commonly seen in autistic children and those who have experienced developmental trauma. Ensure language is neuro-affirming and that staff:		



	• View sensory needs as typical within neurodivergent development • Are confident in adapting approaches without pathologising behaviours • Work collaboratively to identify and implement supportive strategies. <u>Classroom</u> <u>Consideration of classroom environment</u>, including low stimulus areas, use of Hessian backgrounds for displays, use of cream coloured paint for walls and plain soft furnishings. Introduce new activities or play equipment in a multi-sensory way e.g. by showing, listening, saying, looking, writing, drawing. Make use of resources such as: • Move n sit cushion • Busy Legz • Fiddle/fidget toys • Ear defenders • Wobble cushion • Chewelry • Putty		

	• Therabands <u>Individual</u> In discussion with parents, talk about the child or young person's (CYP's) sensory preferences and dislikes in order to build a picture of their sensory needs. Look at how the CYP responds to the environment and make changes as appropriate. Examples include adjusting lighting, reducing noise levels, managing odours, and modifying layout. Ensure a <u>One-page profile</u> is in place and shared with all teaching and non-teaching staff. Adaptations should be recognised as regulation strategies; CYP should not receive consequences for using them or avoiding sensory input.		



Hearing Impairment	<u>Universal Level (Whole School / Whole Class)</u> These strategies apply broadly across the school or classroom to support all children: • Make sure that you have the deaf child's attention before you begin. • Face the light so that your facial movements can be easily seen. • Avoid covering the mouth or walking around when speaking. • Avoid walking around when speaking. Speech sound decreases over distance and becomes difficult to hear with movement or a change in direction. • Repeat key words and concepts, and check the child understands through open questions and closed questions. • If you have group discussions, repeat useful contributions from other children. • Check the understanding of new vocabulary.	The referral process typically follows the following pathway, • A member of staff is concerned about a child/pupil's ability to hear and shares the concern with parent/primary caregiver. • Parent/caregiver takes the pupil to the GP to outline their concern. • The GP offers intervention/treatment or refers the child/pupil to ENT/Audiology Department to request a hearing test. An audiologist will conduct a hearing test. Should a hearing loss be evident, the audiologist may refer the child/pupil to our service.	Following getting advice from professionals from the Service for Children and Young People with a Hearing Impairment, the following recommendations should be considered to support the integration of professional advice: • Assessment by a Teacher of the Deaf identifies a NATSIP score of more than 70%. • Highly personalised support plan throughout the day which enables specialist teaching and support to access the mainstream learning environment. • Additional support in all key areas of the National Curriculum areas. • May need direct teaching input from a Teacher of the Deaf for language development.

	• If you use slang words, idioms, phrases that have a double meaning or non-literal meanings, provide an explanation. • Use more vocabulary that is familiar to the child and break up complex sentences into short sentences. • Give extra time for the child to consider a question and formulate an answer. • Use additional visual aids and objects to further support understanding. • Be mindful when using multimedia resources such as TV, videos etc. If the child is a good reader, use subtitles, otherwise provide key information at the beginning, and summarise at the end. Background Noise • Be mindful of the noise levels in the classroom. Too many people speaking at once will make it difficult to listen and hear as hearing aids are programmed to amplify all speech. Good classroom management where noise levels are kept to a minimum will help the child hear more clearly.	The Service for Children and Young People with a Hearing Impairment will, • Send a consent form to the parents/caregivers for them to agree we can visit their child/pupil in the home or educational placement and share relevant information. • Teacher of the Deaf arranges a visit to the home/school. The Teacher of the Deaf will assess the level of support required for each child/pupil through direct work information from the audiologist, parents/caregivers, school staff, and any other agencies involved.	• In class support from a specialist Teaching Assistant, improved access to communication in the classroom. • School radio aids available to deaf pupils throughout the day. • Pre teaching and post teaching support to consolidate class learning. • All curriculum assessments are completed in a quiet distraction free environment. • Adaptations and modifications to enable learning to be better accessible. • Special considerations for internal and external examinations where necessary, such as extra time, language modification, scribe, note taker.

	Hearing aids not only amplify the main speaking voice, but all background noise too such as, class chatter, scraping chairs, rustling papers, computers, fans, background music etc. These noises may be uncomfortable to listen to and prevent the child from listening to the main speaking voice. Practical Lessons • When demonstrating a practical process, it is important to talk and demonstrate separately to ensure the child has full access to the learning • A visual signal to stop and attend to the teacher may need to be devised in addition to all the guidelines listed above. An example, use the light switch to turn the light on and off to gain attention. <u>Individual Level</u> • Creation of a One Page Profile which is shared with all staff. • Allow additional time for the CYP to complete tasks. Seating Arrangements		• Background noise kept to a minimum. • Hearing equipment maintained by parents/carers and school staff. Specialist Teaching Assistants to carry out listening checks. • Teacher of the Deaf to check all hearing equipment is working to specification and to contact audiology if a problem arises. • Deaf Awareness training provided for all school staff. • There are strategies in place to ensure regular communication between parents/carers and school e.g. telephone, email and school website. • Specialist support staff supports educational day time trips.



	• It is important that the child/pupil is seated in an advantageous position in the classroom. • They should be facing the teacher with good access to lip pattern and facial expressions'		• Parents/carers are invited to review progress including the annual review for pupils' EHCP. • The Service for Children and Young People with a Hearing Impairment work closely with other outside agencies, such as Deaf CAMHS, SALT and audiology services. • Parents/caregivers, careers service, school and specialist staff provide support for the individual pupil with school transitions and preparation for adulthood. Pupil voice is at the heart of planning and outcomes to enable children and young people to fulfil their aspirations.



<table>
<tr><td colspan="4">Health & Safety Considerations.
In the event of a fire or evacuation/lockdown, the supervising teacher should ensure that the child is aware of what is happening and that they have understood all the necessary instructions.
Hearing Aids/Hearing Devices
These should be always worn in the classroom.
If the child arrives to school not wearing the aid/s or they appear to be broken, contact the parents at once.
The aids need to be checked at the beginning of each day by a member of staff.
All staff in the classroom must know where spare batteries are kept and be able to fit them into the hearing aids.
Hearing aids work best at close quarters (1-2 metres) in quiet conditions. As the distance between the speaker and listener increases, the effectiveness of the aids decreases.</td></tr>
<tr><td>Vision Impairment</td><td><u>Whole School</u>
Once a diagnosis has been ascertained the VI Team will work closely with parents and schools to develop awareness of the child's needs.
(tameside.gov.uk/socialcare/tamesidevi)

The school should monitor pupil progress in this respect e.g. carrying out reading assessment in different fonts (the VI Team will adapt the resources)
A range of resources and agencies, within the LA and the wider community e.g <u>Henshaws</u>, <u>Look UK</u>, <u>Victa</u>, <u>OKE</u>, <u>Tameside</u></td><td>Ongoing assessment, advice, support, monitoring and training from a Qualified Teacher of Children with Vision Impairments (QTVI) and to attend review meetings as appropriate.

Teachers should implement advice including specific interventions as suggested by the Qualified Teacher of Children with Vision Impairments (QTVI).</td><td>Following the assessment from the Qualified Teacher of Children with Vision Impairments (QTVI) home visits may be necessary to focus on early intervention and visual skills.
Qualified Teacher of Children with Vision Impairments (QTVI) to liaise with the Eye Hospital for further medical information.
Continuing advice regarding VI (changes and needs).</td></tr>
</table>



	Umbrella Parent Carer Forum and the RNIB are made available to parents and carers. Henshaws - (*henshaws.org.uk*) Look UK - (*look-uk.org*) Victa - (*victa.org.uk*) OKE - (*ourkidseyes.org*) Tameside Umbrella Parent Carer Forum - (*facebook.com/people/Tameside-Umbrella-Parent-Carer-Forum/61568513227370*) RNIB - (*rnib.org.uk*)	Provide access to a quiet space for the Qualified Teacher of Children with Vision Impairments (QTVI) to work with the CYP for assessments and one -to one inventions. Schools to follow the recommendations following the FVA regarding curriculum access. Continuing advice regarding VI (changes).	Advising parents to request a Low Vision Aid Assessment if necessary. This can be done by the VI Team if the student attends Tameside Hospital. Signpost parent and carers to organisations via the website (Equipment Grants, Events in the local area e.g Henshaws): Children's Vision Impairment Team - Tameside MBC Ongoing assessment. Teaching, advice, programmes, support and monitoring from the Qualified Teacher of Children with Vision Impairments (QTVI) to work with the CYP, their family and with school staff. An environmental audit can be offered in necessary for reasonable adjustments specifically for a transition. The VI team will provide training to support:
	Classroom Staff to be aware that the CYP may be experiencing visually related difficulties in the accessing curriculum and will provide support. Consider environmental recommendations and strategies available on the VI Website: Children's Vision Impairment Team - Tameside MBC Teaching methods which facilitate access to the curriculum, social/emotional development and class/group participation. (*tameside.gov.uk/socialcare/tamesidevi*)	School staff should be aware that they need to adapt their teaching styles to support the VI Team. The Team offer an adaptation service for the curriculum – from N18 print. Opportunities for individual and small group work to facilitate learning and inclusion.	



	ICT to be used to increase access to the curriculum where appropriate eg. IPads for reading/screen sharing. <u>Individual Pupil</u> Concerns about a CYP's vision should be raised with parents and carers. Prior to a referral being made advice can be sought from the VI Team website. Gather the views of the young person, using person-centred approaches regarding their opinions and preferred strategies. Once all the information has gathered (eye hospital) a functional assessment will be completed by a Qualified Teacher of Children with Vision Impairments (QTVI) and shared with all staff and parents. Qualified Teacher of Children with Vision Impairments (QTVI) to liaise with the Eye Hospital for further medical information. Recommendations from the report are implemented to enable full inclusion. To develop a transition plan for the CYP moving between year groups, key stages, primary and secondary school and post 16 provision.	For school staff to provide the VI student with 'real objects' and provide real experiences. Environmental considerations e.g seating, stairs, lighting, screen sharing and high contrasted step edges, matt laminated. NO WORK SHOULD BE ENLARGED ONTO A3. This distorts the image and makes it harder for the VI student to scan. A range of specialist equipment to support the student access may include, IPad/Laptop (provided by the school) with screen sharing. Speech software, Zychem Machine, Braille Note and Braillers will be provided by the team. Additional visits for the CYP with a VI can be arranged with the VI	• Facilitating inclusive and independent learning. • Providing in class support • Preparing specialist resources. • Advise on risk assessments Further support for mobility will be assessed by the specialist Qualified Teacher of Children with Vision Impairments (QTVI) (this includes cane skills and independent travel). The FVA report is shared with the named school, parents and carers. Students who have transitioned between key stages will be prioritised for autumn term visits, assessment, advice and observations. Training for staff is available via INSET/additional courses if applicable from outside



	The Qualified Teacher of Children with Vision Impairments (QTVI) will work closely with the educational provisions to ensure a smooth transition.	Team following the allocation of the school. This includes environmental recommendations and strategies.	agencies (VIEW). (*viewweb.org.uk*) The recommendation of individual equipment for the CYP provided by the school e.g. Laptops and iPads. Access to a VI service technician, as appropriate



Key Stage Four

Please also reference the Sensory Toolkit alongside the following interventions, Sensory Toolkit - Tameside SEND Local Offer, *(Tamesidelocaloffer.co.uk/education/sensory-toolkit)* and also the following Webinars that were delivered as part of the Tameside Sensory Series: (Tameside Sensory Series - Webinar Recordings (March 2026) - YouTube *(youtube.com/playlist?list=PLqnJOndprdkStxpN4zrHLP0qmWAqvORTD)*

SKILL	WHAT TO DO FIRST *Identifying and supporting need*	ASKING FOR HELP *Making a referral for specialist advice*	WHEN MORE HELP IS NEEDED *Integrating specialist advice*
Fine and gross motor	Universal Level (Whole School / Whole Class) These strategies apply broadly across the school or classroom to support all children: • Awareness of a child's physical needs and how these may impact on developmental milestones, socialisation and learning. • Teaching practice which facilitates access to the curriculum, inclusion and participation. • Create a 'clutter-free' environment. It may be helpful to complete a risk assessment of the setting including indoor and outdoor areas and trips outside of the school. • Consider the organisation of the classroom and seating plans to make sure	ISCAN Occupational Therapy Universal advice - find more help using these links Occupational Therapy Resource Library :: Tameside Children and Young People (tamesidechildrenandyoungpeople.nhs.uk/advice-information-and-resources/ot-advice-library) Training modules (within universal sensory advice) • Strategies to support physical education (*youtube.com/watch?v=Vq_tPeGm_kQ*)	Following getting advice from appropriate professionals e.g. Occupational Therapy (OT Physiotherapy (PT) services, the following may be considered to support the integration of professional advice: • Staff accessing training provided by Learning Support Service e.g., fine motor skills, gross motor and co-ordination skills training. • Access to support from an additional key person in the setting to facilitate access to the



	that it enables CYP to move freely between them and allows for sufficient working space. • ISCAN OT Universal advice sheets - Occupational Therapy Resource Library: Tameside Children and Young People (*tamesidechildrenandyoungpeople.nhs.uk/advice-information-and-resources/ot-advice-library*) • <u>Advice sheets:</u> Good Sitting (*tamesidechildrenandyoungpeople.nhs.uk/application/files/1416/9539/0171/Good_Sitting.pdf*) • (*tamesidechildrenandyoungpeople.nhs.uk/application/files/9617/2502/5716/Scissor_Skills-Final.pdf*) • Ruler skills (*tamesidechildrenandyoungpeople.nhs.uk/application/files/8017/2502/5810/Ruler_Skills-Final.pdf*) Dressing (*tamesidechildrenandyoungpeople.nhs.uk/application/files/6917/2502/5570/Dressing_Skills.pdf*)	• Strategies to support practical subjects (*youtube.com/watch?v=-ay1PV6_n7w*) If you think a child or young person has a fine or gross motor difficulty that is a barrier to their daily activities, please refer to ISCAN OT. The quidance below outlines how to make a good referral to the service: • Children's Occupational Therapy :: Tameside Children and Young People (*tamesidechildrenandyoungpeople.nhs.uk/our-services/childrens-occupational-therapy*) • Making great occupational therapy referrals | RCOT (*rcot.co.uk/explore-resources/children-young-people-*	curriculum, help the child manage their condition, or move with safety around their environment. • Flexible support in the setting to include personal care such as dressing and toileting, as required or requested by the CYP. • Consider whether assistance or supervision is needed for outside play, break and lunchtimes to ensure mobility and safety of the CYP. Plan activities during unstructured times which are inclusive and promote the CYP's independence. • Inclusion of OT/ PT on any reviews and planning meetings for the child. • Ensure any suggested specialist advice from OT/ PT is shared with all staff and incorporated into the CYP's IEP or SEN Support Plan.

	• Clothing *(tamesidechildrenandyoungpeople.nhs.uk/application/files/5517/0420/3762/clothing.pdf).* • Eating and drinking (*tamesidechildrenandyoungpeople.nhs.uk/application/files/3217/2502/5479/Eating__Drinking-Final.pdf*) • Incorporate fine and gross motor opportunities into as many aspects of the curriculum as possible to support specific skill development and targets. • Consider activities which focus on spatial awareness, planning and body awareness. • Encourage peer support through whole class awareness sessions. • Consider supporting of feet using step or box. • Provide a locker for child or young person to store books, bags and coats etc. rather than needing to carry them around during the day. • Appropriate size and height chairs/tables to encourage a correct posture and to support fine motor function and writing.	*families/making-great-occupational-therapy-referrals*) Early consideration and planning for transition through school or to alternative settings.	• Implement an accessibility plan to move around the school and give thought to if an individualised fire evacuation plan is required. • Ensure access to additional and specialist equipment, as advised by professionals such as Occupational Therapists (OT) and Physiotherapists (PT). • Ensure all staff in the setting receive relevant training e.g. manual handling. • Allocated key person with time to adapt resources/ attend training and conduct individual work. SENDCo to support the key person in planning and using differentiated activities and more specialist strategies and resources to support the CYP. • Early consideration and planning for transition through school or to alternative settings.

	• Ensure child or young person is able to reach and use facilities e.g. hand basins/taps/coat pegs / lockers. • Provide additional classroom resources such as sloping board, adapted scissors and pencil grips etc. • Staff understanding of when to refer to Occupational Therapy and or Physiotherapy. • Links with other local schools to observe and share good practice. <u>Whole setting interventions:</u> • Motor Skills United • Keyboarding without Tears • Ready Steady Write • Active Tameside • Physical Literacy • Balance bikes • Yoga <u>Group Level</u> These strategies are best suited for small groups of children with similar needs: • Undertake Co-ordination Matters activities and record outcomes.		• Consider the need to differentiate physical curriculum and need to incorporate OT/ PT exercises into everyday routines and/ or general class/ PE lessons. • Incorporate moving and handling plans and care plans into planning, as advised by professionals. • Ensure any plans are meeting need. Request a review should any aspects change. • Ensure any specialist equipment continues to meet the child's needs and contact relevant OT/ PT/ liaise with family regarding any repairs or alterations. • Carry out risk assessments on a regular basis and incorporate any actions and strategies into planning. • Make advised adaptations to the school environment e.g.

	• Opportunities for 1:1 and small group work e.g. Aqua beads, chopsticks game, Lego, iron on beads, and jigsaws. • Fine and gross motor skill interventions (previously listed) that may be carried out in small groups and targeted towards a child's needs. • Incorporate handwriting/ hand strengthening activities into daily plans e.g. using age appropriate resources such as Theraputty, elastic bands, crochet or knitting, aqua/iron on beads, tweezer and chopstick games, peg activities, bead bracelet making, jigsaws and Lego. • Keep withdrawals from class to a minimum. <u>Individual Level</u> These strategies are tailored to meet the specific needs of an individual child or young person: • Concerns about a child's physical needs should initially be raised with parents/ carers and discussed with relevant professionals e.g. SENDCo.		changing plinths/ ramps/ hoists. • Consider space needed to accommodate specialist equipment e.g. walker, standing frame. • Ensure access to specialised seating and/or height adjustable tables. • Carry out lessons on ground floor if there is no suitable access to classrooms on upper floors. • Consider adaptations required in practical lessons e.g. ovens in cookery to be wheelchair accessible.



	• Use observation in a variety of settings and contexts e.g. P.E. and unstructured time to identify any barriers that affect the child's access to play and participation. • Discussions with parents/ carers to identify any strengths and needs can be helpful for planning. • Creation of a One Page Profile which is shared with all staff. • Consider positioning of child or young person in the classroom to minimise distractions. • Allow additional time for the CYP to complete tasks. • Consider any additional support for self-care tasks, when required or requested by the CYP. • Take account of potential fatigue and reduce the pace of structured lessons, providing regular opportunities for breaks and rest. Adaptations to support writing • Consider access arrangements for assessments and exams, and apply for and implement them, as necessary.		



	• Consider further assessment of handwriting e.g. DASH assessment if the child over 9 years. • Consider alternatives to handwriting e.g., voice recorder, iPad, laptop or netbook. • Provide lined paper with spaces sufficiently wide enough to for writing tasks. Adaptations to learning resources • Consider modifying activities that CYP with perceptual difficulties may find challenging such as work sheets with lots of information, word searches or crosswords. • Provide additional equipment or resources such as sloping board, adapted scissors and pencil grips etc. • Consider transportations of any required additional resources between lessons when appropriate. • Use technology to support learning including apps e.g. Dexteria Jr, Blobble Write and Hairy Letters. Environmental adaptations		



	• Give consideration to transporting of food at lunchtime e.g. providing assistance with trays and seating. Consider sitting on a standard chair at the end of bench style folding tables rather than on attached stools to improve postural support. • Allow CYP to leave lessons early when travelling between rooms or buildings to avoid large groups in corridors and enable extra travel time. • Consider timetabling and location of rooms where possible to facilitate movement whilst continuing to take into consideration access to facilities and fatigue. • Consider giving additional time to change for PE lessons. • Teach strategies to improve self - organisation, including use of diaries, planners, and checklists of daily equipment needed.		
Sensory	<u>Whole School</u> ISCAN OT Universal advice	Develop more in-depth understanding of sensory needs and behaviour amongst all staff.	Carry out more detailed sensory assessments/audits in collaboration with outside



	Occupational Therapy Resource Library :: Tameside Children and Young People ISCAN Universal Support for children with sensory processing differences (tamesidechildrenandyoungpeople.nhs.uk/advice-information-and-resources/ot-advice-library) (tamesidechildrenandyoungpeople.nhs.uk/about-us/integrated-service-children-additional-needs-iscan) Training modules Introduction to sensory processing (youtube.com/watch?v=Bstxz-fbVlI) Creating a sensory friendly school environment (youtube.com/watch?v=ScLc_9oDw_c) Sensory detective at school (youtube.com/watch?v=snCRzYFtHDM) Sensory strategies to help with focus and attention (youtube.com/watch?v=E7vv8tzQlU) Strategies to support physical education (youtube.com/watch?v=Vq_tPeGm_kQ)	If appropriate, complete initial sensory processing audit and environmental audit checklists. Build access to activities which meet the CYP's sensory needs into the day, for example: timetabled movement breaks, sensory circuits and access to other personalised sensory activities dependent on the outcome of the sensory assessments conducted. (*gatesheadhealth.nhs.uk/wp-content/uploads/2025/02/Sensory-Circuits.pdf*) Plan individual/small group activities dependent on the sensory needs identified. These activities may form part of an individual 5 point scale or RAMP. (*5pointscale.com/downloadables.html*) Providing access to small calm, quiet space, e.g. a small pop-up tent or	agencies such as Occupational Therapy and implement appropriate modifications. Referral to ISCAN OT: Children's Occupational Therapy :: Tameside Children and Young People (*tamesidechildrenandyoungpeople.nhs.uk/our-services/childrens-occupational-therapy*) Making great occupational therapy referrals | RCOT (*rcot.co.uk/explore-resources/children-young-people-families/making-great-occupational-therapy-referrals*) From the sensory assessment checklist(s) devise a bespoke sensory diet and implement.



	Strategies to support practical subjects (youtube.com/watch?v=-ay1PV6_n7w) <u>Advice</u> •School environmental checklist (sensationalbrain.com/wp-content/uploads/2010/03/SB-School-Checklist.pdf) •Supporting sensory regulation in school (tamesidechildrenandyoungpeople.nhs.uk/application/files/6317/6909/9579/Strategies_to_support_sensory_regulation_in_school.pdf) Proprioception (tamesidechildrenandyoung *people.nhs.uk/application/files/4217/6899/7801/Proprioception_handout_sheet.pdf)* • Sensory strategies to support concentration *(tamesidechildrenandyoungpeople.nhs.uk/application/files/4117/7218/7467/Strategies_to_support_concentration_in_the_classroom.pdf).* <u>Advice sheets</u>	room with low level noise and lighting. Referral to ISCAN OT <u>Children's Occupational Therapy :: Tameside Children and Young People</u> (*tamesidechildrenandyoungpeople.nhs.uk/our-services/childrens-occupational-therapy*) Recommended guidance for making a referral to OT (*rcot.co.uk/explore-resources/children-young-people-families/making-great-occupational-therapy-referrals*)	SENDCo and outside agencies to support the key person/Teaching Assistant to plan differentiated activities and strategies to support the CYP. Continue to liaise with any Health Professionals, as appropriate. Ongoing monitoring and reviewing of specific strategies and advice given by professionals e.g. Occupational Therapists and the Learning Support Service. Advanced sensory training and parent/carer training to further develop understanding of sensory behaviours and to develop a plan for the individual CYP. Access to a sensory room or designated space.

	Supporting readiness for play and learning (*Physical and sensory combined*) *(tamesidechildrenandyoungpeople.nhs.uk/application/files/2616/9599/9959/Supporting_readiness_for_Play_and_Learning.pdf)* Supporting sensory processing Differences with Dressing (*tamesidechildrenandyoungpeople.nhs.uk/application/files/6217/0420/4431/Sensory_Processing_Differences_with_Dressing.pdf)* Supporting sensory processing differences with eating and drinking *(tamesidechildrenandyoungpeople.nhs.uk/application/files/9017/0420/5201/SPD_Eating__Drinking.pdf)* Supporting sensory processing differences with toileting (*tamesidechildrenandyoungpeople.nhs.uk/application/files/6317/0420/7148/SPD_Toileting.pdf)*		



	Useful websites for schools: Joining in with Sensory Differences | NHS GGC *(nhsggc.org.uk/kids/life-skills/joining-in-with-sensory-differences).* Sensory Resources For Schools | SIS *(sensoryinclusiveschools.org/pages/resources)* Phase Transitions Proactive planning supports children moving between year groups or educational phases. Include: • Extra visits to new settings • Transfer of sensory strategies and pupil-specific adaptations Familiarisation with routines and staff Staff Development in Sensory Processing Staff should be equipped with a foundational understanding of sensory processing differences. Training may include: • Introduction to sensory systems and sensory diets • Links between sensory regulation and behaviour		



	• Embedding universal sensory strategies into the daily routine • Neurodiversity and Developmental Trauma Awareness Recognise that sensory processing differences are commonly seen in autistic children and those who have experienced developmental trauma. Ensure language is neuro-affirming and that staff: • View sensory needs as typical within neurodivergent development • Are confident in adapting approaches without pathologising behaviours • Work collaboratively to identify and implement supportive strategies. <u>Classroom</u> Consideration of classroom environment, including low stimulus areas, use of Hessian backgrounds for displays, use of cream coloured paint for walls and plain soft furnishings. Introduce new activities or play equipment in a multi-sensory way e.g. by showing, listening, saying, looking, writing, drawing.		



	Make use of resources such as: Move n sit cushion • Busy Legz • Fiddle/fidget toys • Ear defenders • Wobble cushion • Chewelry • Putty • Therabands <u>Individual</u> In discussion with parents, talk about the child or young person's (CYP's) sensory preferences and dislikes in order to build a picture of their sensory needs. Look at how the CYP responds to the environment and make changes as appropriate. Examples include adjusting lighting, reducing noise levels, managing odours, and modifying layout. Ensure a One-page profile is in place and shared with all teaching and non-teaching staff. Adaptations should be recognised as regulation strategies; CYP should not receive		

	consequences for using them or avoiding sensory input.		
Hearing Impairment	<u>Universal Level (Whole School / Whole Class)</u> These strategies apply broadly across the school or classroom to support all children: • Make sure that you have the deaf child's attention before you begin. • Face the light so that your facial movements can be easily seen. • Avoid covering the mouth or walking around when speaking. • Avoid walking around when speaking. Speech sound decreases over distance and becomes difficult to hear with movement or a change in direction. • Repeat key words and concepts, and check the child understands through open questions and closed questions. • If you have group discussions, repeat useful contributions from other children. • Check the understanding of new vocabulary.	The referral process typically follows the following pathway, • A member of staff is concerned about a child/pupil's ability to hear and shares the concern with parent/primary caregiver. • Parent/caregiver takes the pupil to the GP to outline their concern. • The GP offers intervention/treatment or refers the child/pupil to ENT/Audiology Department to request a hearing test. • An audiologist will conduct a hearing test. Should a hearing loss be evident, the audiologist may refer the child/pupil to our service.	Following getting advice from professionals from the Service for Children and Young People with a Hearing Impairment, the following recommendations should be considered to support the integration of professional advice: • Assessment by a Teacher of the Deaf identifies a NATSIP score of more than 70%. • Highly personalised support plan throughout the day which enables specialist teaching and support to access the mainstream learning environment. • Additional support in all key areas of the National Curriculum areas.

	• If you use slang words, idioms, phrases that have a double meaning or non-literal meanings, provide an explanation. • Use more vocabulary that is familiar to the child and break up complex sentences into short sentences. • Give extra time for the child to consider a question and formulate an answer. • Use additional visual aids and objects to further support understanding. • Be mindful when using multimedia resources such as TV, videos etc. If the child is a good reader, use subtitles, otherwise provide key information at the beginning, and summarise at the end. Background Noise • Be mindful of the noise levels in the classroom. Too many people speaking at once will make it difficult to listen and hear as hearing aids are programmed to amplify all speech. Good classroom management where noise levels are kept to a minimum will help the child hear more clearly. • Hearing aids not only amplify the main speaking voice, but all background noise	The Service for Children and Young People with a Hearing Impairment will, • Send a consent form to the parents/caregivers for them to agree we can visit their child/pupil in the home or educational placement and share relevant information. • Teacher of the Deaf arranges a visit to the home/school. The Teacher of the Deaf will assess the level of support required for each child/pupil using the Natsip Eligibility Framework, information from the audiologist, parents/caregivers, school staff, and any other agencies involved.	• May need direct teaching input from a Teacher of the Deaf for language development. • In class support from a specialist Teaching Assistant, improved access to communication in the classroom. • School radio aids available to deaf pupils throughout the day. • Pre teaching and post teaching support to consolidate class learning. • All curriculum assessments are completed in a quiet distraction free environment. • Adaptations and modifications to enable learning to be better accessible. • Special considerations for internal and external



	too such as, class chatter, scraping chairs, rustling papers, computers, fans, background music etc. These noises may be uncomfortable to listen to and prevent the child from listening to the main speaking voice. Practical Lessons • When demonstrating a practical process, it is important to talk and demonstrate separately to ensure the child has full access to the learning • A visual signal to stop and attend to the teacher may need to be devised in addition to all the guidelines listed above. An example, use the light switch to turn the light on and off to gain attention. <u>Individual Level</u> • Creation of a One Page Profile which is shared with all staff. • Allow additional time for the CYP to complete tasks.		examinations where necessary, such as extra time, language modification, scribe, note taker. • Background noise kept to a minimum. • Hearing equipment maintained by parents/carers and school staff. Specialist Teaching Assistants to carry out listening checks. • Teacher of the Deaf to check all hearing equipment is working to specification and to contact audiology if a problem arises. • Deaf Awareness training provided for all school staff. • There are strategies in place to ensure regular communication between parents/carers and school e.g. telephone, email and school website.

	Seating Arrangements • It is important that the child/pupil is seated in an advantageous position in the classroom. • They should be facing the teacher with good access to lip pattern and facial expressions'		• Specialist support staff supports educational day time trips. • Parents/carers are invited to review progress including the annual review for pupils' EHCP. • The Service for Children and Young People with a Hearing Impairment work closely with other outside agencies, such as Deaf CAMHS, SALT and audiology services. • Parents/caregivers, careers service, school and specialist staff provide support for the individual pupil with school transitions and preparation for adulthood. Pupil voice is at the heart of planning and outcomes to enable children and young people to fulfil their aspirations.



Health & Safety Considerations.

- In the event of a fire or evacuation/lockdown, the supervising teacher should ensure that the child is aware of what is happening and that they have understood all the necessary instructions.

Hearing Aids/Hearing Devices

- These should be always worn in the classroom.
- If the child arrives to school not wearing the aid/s or they appear to be broken, contact the parents at once.
- The aids need to be checked at the beginning of each day by a member of staff.
- All staff in the classroom must know where spare batteries are kept and be able to fit them into the hearing aids.

Hearing aids work best at close quarters (1-2 metres) in quiet conditions. As the distance between the speaker and listener increases, the effectiveness of the aids decreases.

Vision Impairment	Whole School Once a diagnosis has been ascertained the VI Team will work closely with parents and schools to develop awareness of the child's needs. The school should monitor pupil progress in this respect e.g. carrying out reading assessment in different fonts (the VI Team will adapt the resources) A range of resources and agencies, within the LA and the wider community e.g Henshaws,	Ongoing assessment, advice, support, monitoring and training from a Qualified Teacher of Children with Vision Impairments (QTVI) and to attend review meetings as appropriate. Teachers should implement advice including specific interventions as suggested by the Qualified Teacher of Children with Vision Impairments (QTVI).	Following the assessment from the Qualified Teacher of Children with Vision Impairments (QTVI) home visits may be necessary to focus on early intervention and visual skills. Qualified Teacher of Children with Vision Impairments (QTVI) to



	Look UK, Victa, OKE, Tameside Umbrella Parent Carer Forum and the RNIB are made available to parents and carers. Henshaws - *henshaws.org.uk* Look UK - *look-uk.org* Victa - *victa.org.uk* OKE - *ourkidseyes.org* Tameside Umbrella Forum - *facebook.com/people/Tameside-Umbrella-Parent-Carer-Forum/61568513227370* RNIB - *rnib.org.uk*	Provide access to a quiet space for the Qualified Teacher of Children with Vision Impairments (QTVI) to work with the CYP for assessments and one -to one inventions. Schools to follow the recommendations following the FVA regarding curriculum access. Continuing advice regarding VI (changes).	liaise with the Eye Hospital for further medical information. Continuing advice regarding VI (changes and needs). Advising parents to request a Low Vision Aid Assessment if necessary. This can be done by the VI Team if the student attends Tameside Hospital. Signpost parent and carers to organisations via the website (Equipment Grants, Events in the local area e.g Henshaws): Children's Vision Impairment Team - Tameside MBC Ongoing assessment. Teaching, advice, programmes, support and monitoring from the Qualified Teacher of Children with Vision Impairments (QTVI) to work with
	Classroom Staff to be aware that the CYP may be experiencing visually related difficulties in the accessing curriculum and will provide support. Consider environmental recommendations and strategies available on the VI Website: Children's Vision Impairment Team - Tameside MBC (*tameside.gov.uk/socialcare/tamesidevi*) Teaching methods which facilitate access to the curriculum, social/emotional development and class/group participation.	School staff should be aware that they need to adapt their teaching styles to support the VI Team. The Team offer an adaptation service for the curriculum – from N18 print. Opportunities for individual and small group work to facilitate learning and inclusion.	



	ICT to be used to increase access to the curriculum where appropriate eg. IPads for reading/screen sharing. <u>Individual Pupil</u> Concerns about a CYP's vision should be raised with parents and carers. Prior to a referral being made advice can be sought from the VI Team website. Gather the views of the young person, using person-centred approaches regarding their opinions and preferred strategies. Once all the information has gathered (eye hospital) a functional assessment will be completed by a Qualified Teacher of Children with Vision Impairments (QTVI) and shared with all staff and parents. Qualified Teacher of Children with Vision Impairments (QTVI) to liaise with the Eye Hospital for further medical information. Recommendations from the report are implemented to enable full inclusion. To develop a transition plan for the CYP moving between year groups, key stages, primary and secondary school and post 16 provision.	For school staff to provide the VI student with 'real objects' and provide real experiences. Environmental considerations e.g seating, stairs, lighting, screen sharing and high contrasted step edges, matt laminated. NO WORK SHOULD BE ENLARGED ONTO A3. This distorts the image and makes it harder for the VI student to scan. A range of specialist equipment to support the student access may include, IPad/Laptop (provided by the school) with screen sharing. Speech software, Zychem Machine, Braille Note and Braillers will be provided by the team.	the CYP, their family and with school staff. An environmental audit can be offered in necessary for reasonable adjustments specifically for a transition. The VI team will provide training to support: • Facilitating inclusive and independent learning. • Providing in class support • Preparing specialist resources. • Advise on risk assessments Further support for mobility will be assessed by the specialist Qualified Teacher of Children with Vision Impairments (QTVI) (this includes cane skills and independent travel).



	The Qualified Teacher of Children with Vision Impairments (QTVI) will work closely with the educational provisions to ensure a smooth transition.	Additional visits for the CYP with a VI can be arranged with the VI Team following the allocation of the school. This includes environmental recommendations and strategies.	The FVA report is shared with the named school, parents and carers. Students who have transitioned between key stages will be prioritised for autumn term visits, assessment, advice and observations. Training for staff is available via INSET/additional courses if applicable from outside agencies (VIEW). (*viewweb.org.uk*) The recommendation of individual equipment for the CYP provided by the school e.g. Laptops and iPads. Access to a VI service technician, as appropriate



Helpful links

Fine and Gross Motor

- Occupational Therapy universal advice and resources for fine and gross motor development:
- *tamesidechildrenandyoungpeople.nhs.uk/advice-information-and-resources/ot-advice-library*
  Guidance on making effective Occupational Therapy referrals (RCOT):
- *rcot.co.uk/explore-resources/children-young-people-families/making-great-occupational-therapy-referrals*
- Advice sheet – Good Sitting:
- *tamesidechildrenandyoungpeople.nhs.uk/application/files/1416/9539/0171/Good_Sitting.pdf*
- Advice sheet – Supporting readiness for play and learning (physical and sensory):
- *tamesidechildrenandyoungpeople.nhs.uk/application/files/2616/9599/9959/Supporting_readiness_for_Play_and_Learning.pdf*
- Advice sheet – Scissor skills:
- *tamesidechildrenandyoungpeople.nhs.uk/application/files/9617/2502/5716/Scissor_Skills_-_Final.pdf*
- Advice sheet – Ruler skills:
- *tamesidechildrenandyoungpeople.nhs.uk/application/files/8017/2502/5810/Ruler_Skills_-_Final.pdf*
- Advice sheet – Dressing skills:
- *tamesidechildrenandyoungpeople.nhs.uk/application/files/6917/2502/5570/Dressing_Skills.pdf*
- Advice sheet – Clothing:
- *tamesidechildrenandyoungpeople.nhs.uk/application/files/5517/0420/3762/clothing.pdf*
- Advice sheet – Eating and drinking:
- *tamesidechildrenandyoungpeople.nhs.uk/application/files/3217/2502/5479/Eating__Drinking_-_Final.pdf*

Sensory

- Integrated Service for Children with Additional Needs (ISCAN):
- *tamesidechildrenandyoungpeople.nhs.uk/about-us/integrated-service-children-additional-needs-iscan*
- Occupational Therapy Resource Library – sensory and physical needs:
- *tamesidechildrenandyoungpeople.nhs.uk/advice-information-and-resources/ot-advice-library*
- ISCAN universal sensory support guidance:



- *tamesidechildrenandyoungpeople.nhs.uk/download_file/471/182*
- Training video – Introduction to sensory processing:
- *youtube.com/watch?v=Bstxz-fbVlI*
- Training video – Creating a sensory friendly school environment:
- *youtube.com/watch?v=ScLc_9oDw_c*
- Training video – Sensory detective at school:
- *youtube.com/watch?v=snCRzYFtHDM*
- Training video – Sensory strategies to support focus and attention:
- *youtube.com/watch?v=_E7vv8tzQlU*
- Training video – Strategies to support physical education:
- *youtube.com/watch?v=Vq_tPeGm_kQ*
- Training video – Strategies to support practical subjects:
- *youtube.com/watch?v=-ay1PV6_n7w*
- Advice sheet – Supporting sensory regulation in school:
- *tamesidechildrenandyoungpeople.nhs.uk/application/files/6317/6909/9579/Strategies_to_support_sensory_regulation_in_school.pdf*
- Advice sheet – Proprioception support:
- *tamesidechildrenandyoungpeople.nhs.uk/application/files/4217/6899/7801/Proprioception_handout_sheet.pdf*
- Advice sheet – Sensory strategies to support concentration:
- *tamesidechildrenandyoungpeople.nhs.uk/application/files/4117/7218/7467/Strategies_to_support_concentration_in_the_classroom.pdf*
- Advice sheet – Sensory processing differences with dressing:
- *tamesidechildrenandyoungpeople.nhs.uk/application/files/6217/0420/4431/Sensory_Processing_Differences_with_Dressing.pdf*
- Advice sheet – Sensory processing differences with eating and drinking:
- *tamesidechildrenandyoungpeople.nhs.uk/application/files/9017/0420/5201/SPD_Eating__Drinking.pdf*
- Advice sheet – Sensory processing differences with toileting:
- *tamesidechildrenandyoungpeople.nhs.uk/application/files/6317/0420/7148/SPD_Toileting.pdf*
- School sensory environment checklist:
- *sensationalbrain.com/wp-content/uploads/2010/03/SB-School-Checklist.pdf*



- SEND sensory audit for schools and classrooms (Solihull):
- *solihull.gov.uk/sites/default/files/2021-12/SEND-Sensory-audit-for-schools-and-classrooms.pdf*
- Sensory circuits guidance:
- *gatesheadhealth.nhs.uk/wp-content/uploads/2025/02/Sensory-Circuits.pdf*
- 5 Point Scale – emotional regulation tool:
- *5pointscale.com/downloadables.html*

Visual Support

- Children's Vision Impairment Team – Tameside:
- *tameside.gov.uk/socialcare/tamesidevi*
- Henshaws – visual impairment support:
- *henshaws.org.uk*
- LOOK UK – support for families of children with vision impairment:
- *look-uk.org*
- VICTA – support for children and young people with vision impairment:
- *victa.org.uk*
- Our Kids Eyes – information and resources:
- *ourkidseyes.org*
- RNIB – national visual impairment charity:
- *rnib.org.uk*
- VIEW – Vision Impairment Education Workforce training:
- *viewweb.org.uk*

