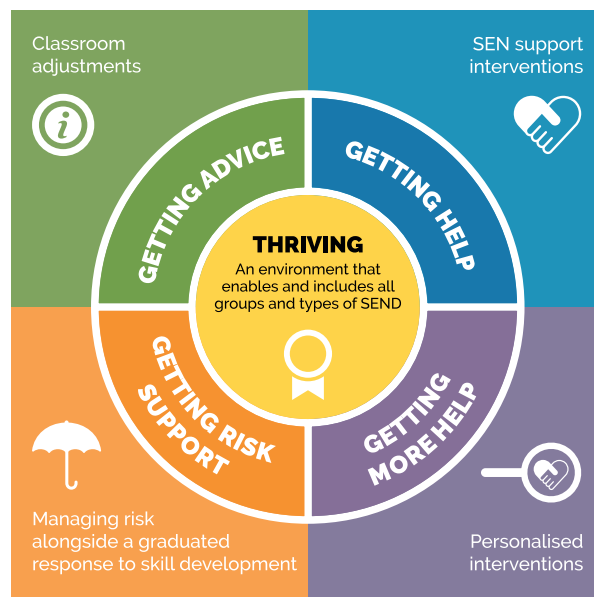




SEND Children Thrive Matching Provision to Need **Early Years**



The THRIVE conceptual framework was developed by a collaboration of authors from the Anna Freud National Centre for Children and Families and the Tavistock and Portman NHS Foundation Trust

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Charlotte Finch (Head of SEND) and SEND
Leadership for Tameside

Tim Bowman - Assistant Director, Education,
Tameside

Elaine Healey - Our Kids Eyes, Tameside

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Help, Neighbourhoods and Early Years
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**Simone Leese, Emma Kay Belcher,
Victoria Buckley, Laura Jenkins** - Autism,
Communication, Education (ACE) Team

Asma Hughes - Team Leader/ Specialist
Teacher within the Cognition and Learning
Team, Learning Support Service (LSS)

Daniel Downes - Team Leader, Visual
Impairment Education Team, Learning
Support Service

Jane Angus - Team Lead for the Service for
the Hearing Impaired / Qualified Teacher of
the Deaf, Learning Support Service

Mary Kean - Qualified Teacher of the Deaf

Mandy Kast - Paediatric Therapy Team
Leader & Highly Specialist Paediatric
Occupational Therapist

Kate Greaves - Highly Specialist Paediatric
Occupational Therapist

Jonathan Riemer - Highly Specialist
Paediatric Physiotherapist

Patricia Stone - Specialist Teacher for the
Visually Impaired

Steve Clarke - Primary Inclusion Team

Elaine Boulger - Safeguarding

Pauline Copeland - Harmful Sexual
Behaviour Pathway

Kay Davidson - Youth Justice Service

Jane Davies - Child and Adolescent Mental
Health Service (CAMHS)

Cath Beresford - Salford SEN Team
Tameside and Glossop Child SALT team

Netty Llewellyn - CLASS, Tameside

**Julie Chorlton, Jane Hopkins and Audrey
Eastwood** - BLISS, Tameside

Amanda Edwards - Advisory Teacher, Pupil
Support

Paula Hull - Healthy Young Minds

Heather Morris - Tameside SEN Team

Angela Daniel - GM i-THRIVE Programme
Manager

Lancashire

Scott Cameron-Flitcroft – Ripley St Thomas
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Angela Daniel - GM i-THRIVE Programme
Manager

Welcome!

This resource was developed by the Educational Psychology Service in consultation with schools, settings and services. It has been a pleasure to hear about all the amazing work that happens across our network of schools and settings. The resource aims to provide a tool to support excellent practice across Special Educational Needs and Disability (SEND) provision in educational settings and promote positive outcomes for children and young people identified as having additional needs. This tool is reflective of the LA's graduated response to SEND and embodies 2014 reforms*, as it is collaborative, puts children and families at the centre, is transparent and it has a focus on outcomes.

We aspired to develop a resource that raised the standards of education and support for SEND children/young people through the sharing of best practice and known evidence-based interventions. The Special Educational Needs and Disability Co-ordinators (SENDCos) of the local areas have contributed with the ways of working that are effective in their schools and settings (practice-based evidence). They have been generous with their ideas and challenged thinking with regards to the high standards they promote and expect for their SEND families.

The THRIVE model has been used because the language is positive and appropriate for families who may want to explore the resource and it brings together the SEND and Mental Health in Education agendas**. We have also developed a one page print out for parents, which can be used to help them explore collaboratively with school staff where their child may sit along the SEND process at different time points.

In the past parents have told us that they have most difficulties with the SEND processes at the early stages of identification of needs and that practice is inconsistent between schools. The aspiration is that children, schools and families can feel confident that needs can be met in all of our schools and educational settings, at all levels of need.

We know our talented and committed SENDCo workforce is keen to ensure that parents feel supported throughout the whole SEND process; that parents and their children are guided to take an active role in decision making from very early on in the process. The best SENDCos are able to do this through high quality chairing of support meetings and through creative ways of ensuring children make a meaningful contribution to their planning.

It is our hope that through this collaborative work, SENDCos will be empowered to advocate for SEND children from classroom practice to points of provision and to help the wider workforce understand that support needs to be targeted, evidence-based and focused. Together we can ensure that SEND children THRIVE!



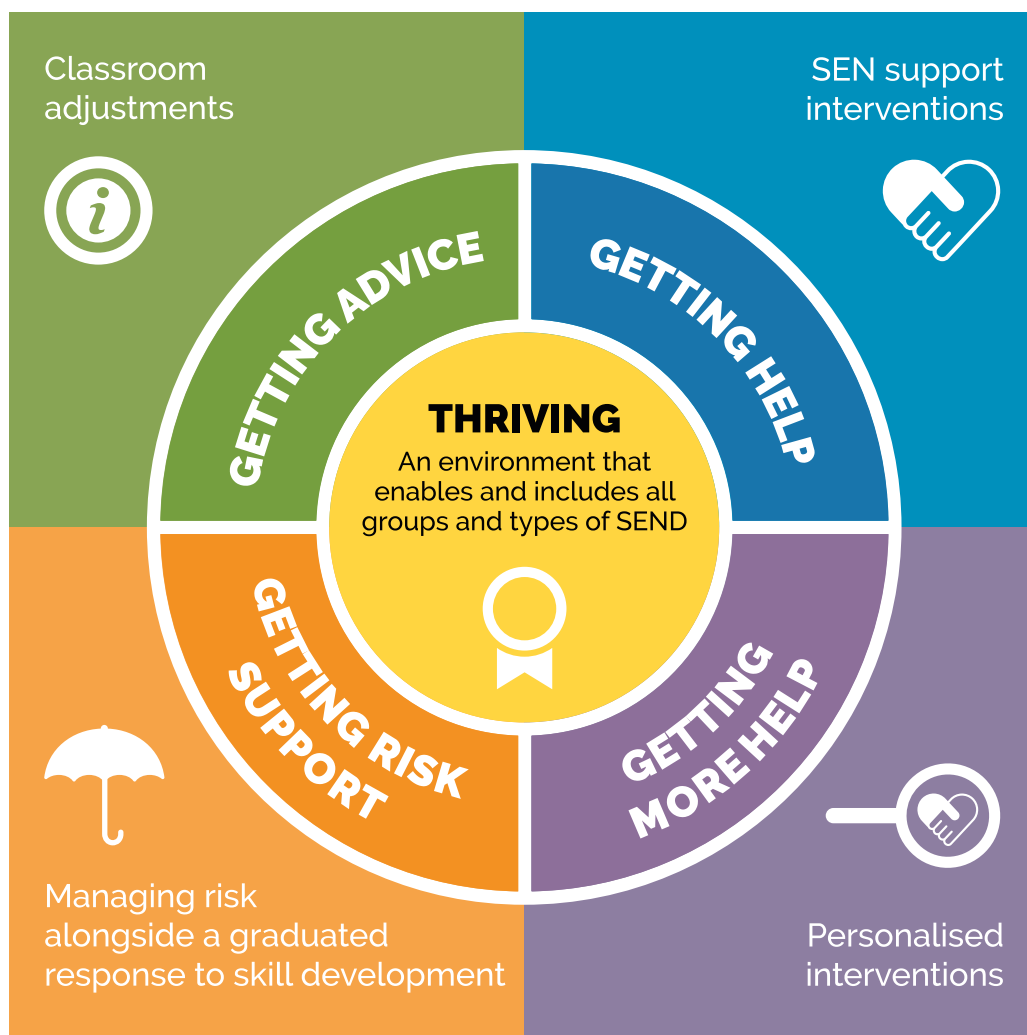
Claire Jackson, Executive Principal Educational Psychologist

*Children and Families Act 2014

**Department of Health; Department of Education; Transforming Children and Young Peoples Mental Health: A Green Paper (December 2017) / Special Educational Need and Disability Code of Practice (0-25) 2014

Thrive Framework and CoP

This resource is aligned to both the SEND Code of Practice and THRIVE Framework, the model for reform to improve services for children and young people's mental health. The aim is to align the processes and use the positive messages from the THRIVE Framework that complement the changes we want to see for SEND children.



How to use this resource

The resource is separated into three parts; 'Best Practice Walkthrough', 'Main THRIVE Tool' and 'Getting Risk Support'.

'Best Practice Walkthrough' gives an overview of Special Educational Needs (SEN) and the graduated response. It also provides guidance documents for parents.

The 'Main THRIVE Tool' is organised by type of need and key stage. The sections cover:

- Getting Advice (Adjustments in the Classroom)
- Getting Help (Targeted Interventions)
- Getting More Help (Specialist Interventions)

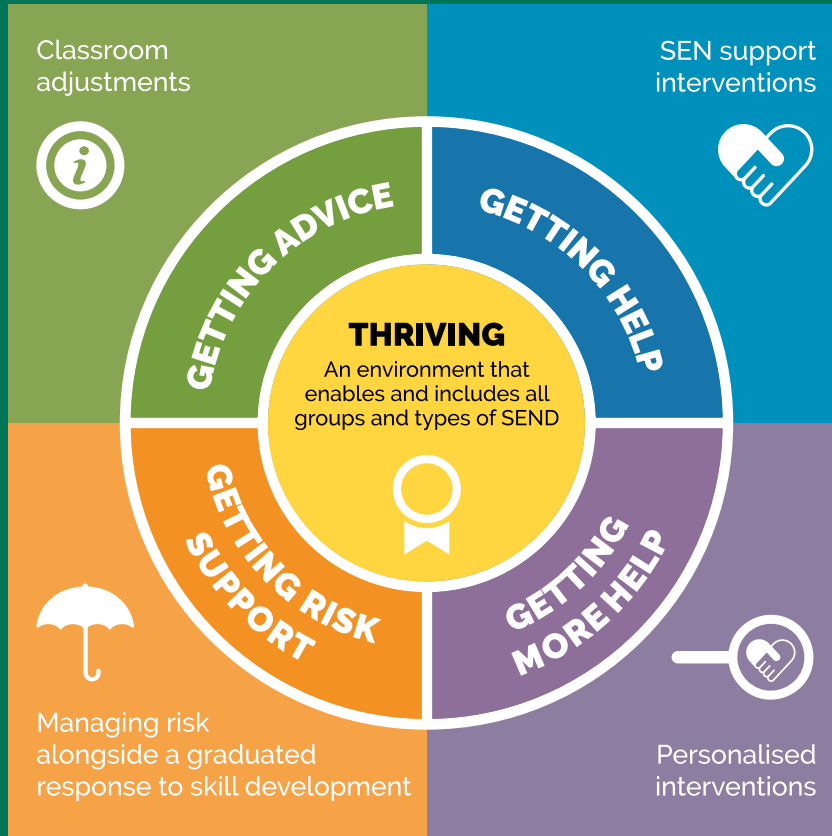
Strategies are suggestions and not a tick list and it should be the case that some children just need the first section and others need the first two and others need all three.

Hyperlinks have been included within the document to make it easy to locate information about suggested approaches and interventions. A glossary is included at the end of each key stage, detailing information and costings for each intervention in response to consultation with schools and settings.

The THRIVE model has an additional section about 'Getting Risk Support' and we have included a corresponding section to support schools and settings to manage risk in relation to SEND. It is acknowledged that this is a standalone section that may be used at any point by staff to support with planning around children presenting with risk alongside the graduated response above. It is in no way a replacement for advice from local safeguarding boards or children mental health pathways.

SEND Children Thrive
Matching Provision to Need

Best Practice Walkthrough Early Years



THRIVING!

Whole setting approaches

Nursery and early years communities that are THRIVING for all staff and children tend to be more effective at meeting Special Educational Needs and Disability (SEND). In the context of a setting with excellent practice and a broad, balanced and stimulating offer, the graduated response to SEND approach will work best.

In settings where SEND is a key focus for the senior management when analysing progress and exclusions data, they use this analysis to effectively inform developments in the setting in relation to SEND. The most experienced SENDCos are involved in developing the setting's SEND and Inclusion Policies and have a good overview of the skill sets of staff in relation to SEND. They will ensure there is access to training for all staff on SEND and vulnerable groups on a needs led basis, linking in with the Early Years Quality Improvement Team to support this. This will lead to key workers having ownership of the progress of all children in their care.

All children will thrive in settings that are nurturing and inclusive; that have good systems for supporting individuals and monitoring issues pertinent to groups, for example, opportunities for feedback from children, staff and parents/carers. Inclusive and differentiated behaviour policies embed reasonable adjustments into the setting's response to behaviour. Examples include:



Behaviour Regulation Policy.pdf

There are programmes and accreditations that can support settings to embed inclusive practice at whole setting level including Emotionally Friendly Settings:

www.emotionallyfriendly.co.uk

SENDCo comment:

Skills audits that come with these whole school approaches help us to understand the strengths of the workforce and identify gaps in knowledge to inform the staff training offer

Emotionally Friendly Schools Champion

Understanding Local Need

The spirit of the changes to SEND legislation in 2014 encourages professionals to identify how they are part of a wider system whereby collaboration with partners is a key duty. It's important that SENDCos and setting leaders are actively engaged in the local vision and priorities for SEND children and families. They will have a good understanding of their setting's data and how that compares to local and national trends. Settings that work in collaboration with the LA on identifying and addressing strategic issues will drive standards across the network of SEND professionals and ultimately have positive outcomes for the SEND population. You can find the current strategic priorities on the [Local Offer](#). Tameside appreciates the time commitment SENDCos give to decision making panels. The feedback we get from participants is that it is mutually beneficial. Get involved!

Setting SEND Data Profile

SENDCos and practitioners should have a good grasp of the legal duties and entitlements of SEND children. We are working together to enable SENDCos to collate and analyse their SEND data and share their findings with multi-agency services in order to maximise the impact of resources. SENDCos need to be able to be creative when planning group support to ensure children access timely and appropriate intervention to address their areas of need and staff understand and are confident to support the needs of the children in their setting.



SEND Data Profile.pdf

Collaboration with Parents

The more experienced SENDCos are also ensuring that SEND families are well informed about provision and approaches used in setting through robust communication systems that provide regular sharing of information between home and setting. They are also gathering the views of SEND families about what they would find helpful more broadly and feeding families' views into the wider planning of support across the provision. For example, through the use of questionnaires and multi-agency coffee mornings alongside sharing information about other SEND support services. They are able to support parents to understand the whole of the SEND pathway and where their child's need are currently being met on the continuum.



Guide to SEND Support.pdf



Guide to EPS.pdf



EPS Leaflet for Settings.pdf

SEND children's voices are also creatively and authentically gathered and used to inform development work and practice across the provider.

Parents of SEND children are used as experts to inform the package and approaches to support their child.

Advice to SENDCo comment from parent:

"Realise that the parents are experts and be open to suggestions of new ways of doing things that have been successful elsewhere"

Special Needs Jungle

SEND and Behaviour

Difficult or withdrawn behaviour does not necessarily mean that a child has SEN. However, where there are concerns, there should be an assessment to determine whether there are any causal factors such as an underlying learning or communication difficulty. If it is thought housing, family or other domestic circumstances may be contributing to the presenting behaviour, a multi-agency approach, supported by the use of approaches such as the Early Help Assessment, should be adopted.

The Equality Act (2010) sets out to ensure that everyone has the right to be treated fairly and protects them from discrimination on the basis of certain characteristics (which includes disability). Settings should ensure that their policies and practices do not discriminate against children by unfairly increasing their risk of exclusion. Behaviour policies should be reviewed by the SENDCo and flexibly applied to ensure that practice doesn't discriminate against any particular type of need.

For detailed information on specific duties and responsibilities for early years settings under the Equality Act (2010) with regards to children with disabilities, see the publication: Council for Disabled Children CDC (2015) Disabled Children and the Equality Act 2010: What Early Years providers need to know and do, including responsibilities to disabled children under the Children and Families Act 2014.

EY Educational Psychology Comment:

Sadly, we have evidence that exclusion can happen to very young children both formally and informally. Children that are having difficulties being included need further assessment and understanding not moving onto a different setting.

Educational Psychologist

What is a Special Educational Need?

In Tameside we advocate for a broad definition of Special Educational Needs and Disability (SEND). If a child 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, as being responsive to individual needs early can have positive impacts on children and 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 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.

A child has a learning difficulty or disability if he or she:

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

(SEND Code of Practice, 2015, pg. 15).

Identification of SEND

The most effective SENDCos have systems and processes in place to support the early identification of children's SEND, which include robust tracking and screening measures, staff confident to work with parents to raise and explore initial concerns and good links with multi-agency teams. Early Years settings can often be the first professionals to identify SEN so it is essential this is done sensitively, leading to a clear plan of support for the child and their family.

Early Years Guide to the 0-25 Code of Practice states:

All early years providers are required to have arrangements in place to identify and support children with SEN or disabilities and to promote equality of opportunity for children in their care. These requirements are set out in the EYFS framework. The EYFS framework also requires practitioners to review children's progress and share a summary with parents. In addition, the 'Early Years Outcomes' is an aid for practitioners, including child minders, nurseries and others such as inspectors, to help them to understand the outcomes they should be working towards.



*Identification of
Need.pdf*



*Case Study -
Categorisation.pdf*

Graduated Response

The graduated response encourages practitioners to revisit, refine and revise decisions and actions that have been made, in order to grow their understanding of the child's needs and support requirements. The SEND Code of Practice (DfE, 2015, pg. 100) encourages us to provide the right support at the right time. It is graduated in that for some children they will require small adjustments within the setting to be successful, whereas for others they will require a highly personalised plan of support and intervention in order to make progress and be included. The code highlights;

- Where a child is identified as having SEND, the setting should take action to remove barriers to learning and put effective special educational provision in place.
- Once a child is identified as having SEND their family must be informed. The setting 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 and their family.

There are teams available across Tameside who can support settings to meet the needs of early years children with a wide range of SEND. These include the Early Years Quality Improvement Team.

It may be decided that specialist advice from professionals is required to meet the needs of children, for example Speech and Language Therapy (SALT); Health Young Minds (HYM), Educational Psychology Service (EPS), Occupational Therapy (OT) and/or Physiotherapy.

Further information about these teams and how to access them is available on the Local Offer page for Tameside. Any recommendations provided by professionals should be clearly incorporated and referenced in planning for the child.

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 child's needs, alongside what supports the child requires 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 response and key to meeting the needs of all children identified as having any form of SEND (see below for further details).

Reflective Practice and SEND

The best practitioners reflect on their interaction style and approach to working with children and revise this based on what works well for them and the individual child they are working with. This is a crucial aspect of working with our SEND population as they are all individuals; what works for one child may not work for another even with a similar SEND profile or

diagnosis. Practitioners with good self-awareness and a willingness to adjust to the children they are supporting experience the greatest success.

'Reflective Practice is learning through and from experience towards gaining new insights of self and practice.' (Finlay, 2008)

Reflective Practice is to critically evaluate experience from both the past and present and to use that information to inform and plan teaching and learning.

Reflective Practice is:

- about learning from others;
- a shared activity;
- about improving your objectivity; and
- a key factor in improving learner experience.

Reflective Practice supports identification of and provision for SEND children and fits well with the Assess, Plan, Do, Review Cycle.

The Assess-Plan-Do-Review Cycle

'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 in the early years when considering longer term planning and the provision needed to make a successful transition to school. A good SENDCo 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.

Our experienced SENDCos have created one-page versions of the Assess-Plan-Do-Review Cycle to support parental understanding.



Parent Explanation.pdf

ASSESS-PLAN-DO-REVIEW Cycle

Review

Following the plan phase, key educational professionals, SENDCo, 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 child themselves.
- A plan for next steps. Does there need to be another cycle of 'assess-plan-do-review'? Does a referral need to be made to another service?
- A written record.

If it is agreed that the child would benefit from further support, then a second round of 'assess-plan-do-review' should begin.

Assess

Clear and comprehensive assessment of the child's needs by key educational professionals, SENDCo, parents/carers and child, based on a combination of:

- Discussions to gather the views and aspirations of the child and their family.
- Universal and targeted assessments and observations carried out by a range of setting staff.
- Child's current attainment and progress.
- Tracking of data and comparisons with national data.
- Any relevant assessment information provided by external agencies e.g. Health, Educational Psychology (EP), 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 all setting staff to implement the plan on a day-to-day basis. This should be supported by the SENDCo. The 'do' phase should involve adults:

- Implementing any adjustments, specific strategies, interventions, or approaches that have been identified within the 'plan' phase.
- Continually assessing and monitoring the child's progress and making any necessary adjustments.
- Communicating how things are going with the child's family and the SENDCo.

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.
- How the child has responded to the strategies and interventions.
- What changes have been seen and what progress towards the success criteria has occurred.

Plan

Following the assessment phase, key educational professionals, SENDCo and parent/carers, meet and agree a plan of action. This plan should be outcome focused (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.
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 practitioners, professionals and the family reflect on what has been learnt (e.g. regarding the child's 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 learning experiences the child receives. In this way there should be a clear thread linking subsequent plans and approaches.

Gathering and Responding to Children's Views

SEND children have the same rights as non-disabled children to participate in decisions and issues that affect them. The importance of the participation of SEND children 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 in decision-making. Sadly, research suggests that despite this, SEND children in practice remain inactive in decisions about their education and future.

Why gather the views of children with SEND?

Research suggests that listening to the views of children with SEND is beneficial for several reasons. There are clear advantages including increased motivation, independence, perception of personal control and progress. Todd (2003) notes 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 children's views should be sought; every cycle is an opportunity to enable the children to be involved in decision making. It is important to have regard to the views, wishes and feelings of the child 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 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 as an individual.
- Enable the child to express their views, wishes and feelings.
- Enable the child to be part of the process.
- Ensure what is being discussed is easy for child to understand.
- Highlight the child'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 children and their families, is key.

1. Things to consider

- The developmental stage of the child.
- 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 with whom they feel most comfortable being honest? Are parents/carers better placed to gather views at home?

2. What views to gather?

- Likes and dislikes (What activities do they like / like less? What do they like to play with?)
- What support they value (What helps them in setting? What helps them less?)
- Who supports them in setting (Who can they go to in the setting 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?)

3. How can we do it?

A variety of methods can be used to gather children's views. Some children will be happy to talk and complete worksheets whereas others will need the practitioner to be more creative (e.g. children with speech and language delay/disorder or children with profound and multiple learning difficulties). All children should be encouraged to give a view in order to gain a realistic view of how they perceive their early years setting experiences. This will then help highlight actions that will support adaptations to their day-to-day experiences and other more targeted interventions.

For children who may not communicate verbally or prefer using visual supports try non-verbal methods, for example:

- observe them over time and in different environments. What do they consistently seek out to play with, where and with who? What activities do they dislike or actively avoid?
- ask them to take photos of all of their favourite parts of the setting;
- use card sorts activities to pick favourite / least favourite activities;
- line up photos or pictures in order from favourite to least favourite;
- use projective techniques in which they might select a picture that shows how they feel e.g. the [Blob School resources](#)

For children who are able to communicate verbally, use verbal or written methods (adults could write the answers). For example (templates included in the Appendix):

- Three wishes – if you could have three wishes, what would they be?;
- Perfect week – describe your perfect week/day;
- [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 can contribute planning in well structured meetings. Here are two ways of sharing views and representing planning of actions jointly with children in a visual and inclusive way:

- [MAP](#) – a visual way of planning for children with SEND.
- [Planning Alternative Tomorrows with Hope \(PATH\)](#) – a visual tool for longer term planning as a group.

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

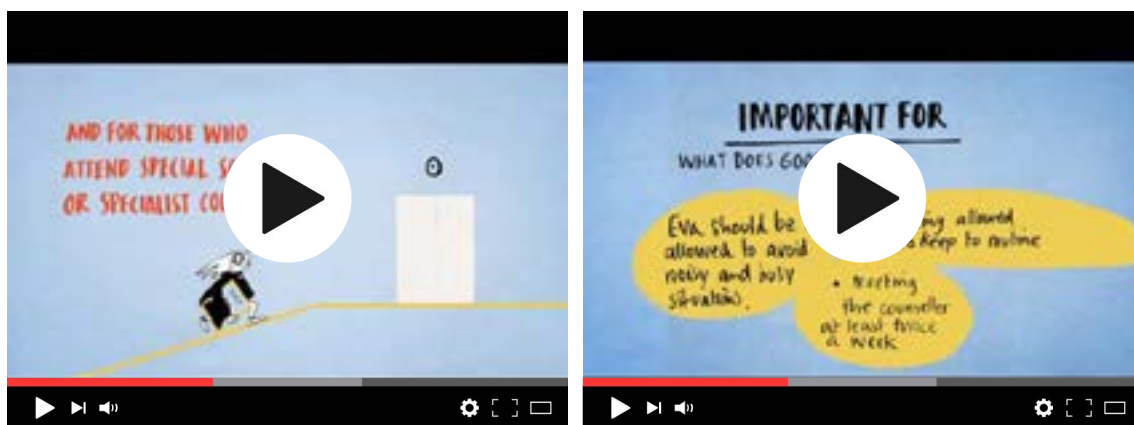
4. Pupil views within Annual Reviews

It can be helpful to ensure that the child's views are gathered well in advance of the meeting, perhaps over several weeks. The child is likely to need support, using some of the non-verbal methods and worksheets described above, to share their views. If appropriate for their level of development, with preparation the child may want to attend the meeting. Alternatively, the child may wish to prepare a video or some photos to share their views, which a trusted adult can share on their behalf.

It can be helpful following the Annual Review for the child to talk through the meeting with a supportive adult; to hear all the positive comments and progress that was celebrated during the meeting, alongside any new actions or changes to their support plan that have been agreed.

Education, Health and Care Plans (EHCP)

Schools and settings have a duty to meet the needs of all their learners and to follow a graduated response to identification and meeting SEND. For a small number of low incidence-high need children settings may need further guidance and resource from the local authority in order to meet their specific individual needs. In these cases, the setting has 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's special educational, health and care needs and what provision (what will be done) to meet their needs in to enable the child to make progress. It is crucial that the family and child are fully informed of the Education, Health, Care assessment process and supported through it. Parents routinely report that they feel set up for a battle and that they have multiple professionals and panels contradicting each other, which causes understandable frustration. It is the duty of all SEND professionals to have a robust and working knowledge of processes locally and nationally so that parents can be supported through the process amicably. There are a number of resources available to explain the EHCP process to parents (please below and the appendix).



Who requires an Education Health and Care Plan?

Generally, only a very small number of children with complex and severe needs, who require very high levels of individualised support, are issued with an EHCP. Most children will access help in their educational placement through the level known as school SEN Support or as we describe it within the Main Thrive tool 'Getting Help' and 'Getting More Help'. The Local Offer in [Tameside](#) can also 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.

Where provision cannot reasonably be provided through services and resources that are normally available, it may be necessary to request an EHC assessment. Schools and settings typically request EHC assessments, but parents and professionals can do too. The child has to have a special educational need that is severe and/or complex and which has persisted in spite of the settings 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's emotional wellbeing.

The EHC Assessment Process

The Referral

This is the first part of the process in making a request for an EHC 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 and any reports should highlight these outcomes.

The decision to draw up an EHCP will depend on the severity of a child'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. This must take the form of a costed provision map completed on the referral template (please only provide the individual child's provision map rather than the whole setting provision map). If a child has support in small groups, please ensure that you divide the cost between the number of children accessing the group.

The **Our Hopes and Aspirations** documents completed by parents/carers and children should be included. It should be evident that the setting have been working on the aspirations highlighted by the child and their family.

Settings 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's rate of progress.

The Timescales

Time line	Action
Week 0	Request for assessment is made to the local authority (LA) by a setting, 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 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 settings and parents/carers with next steps following a 'no to assess' decision is available upon request.
Week 6	<p>If yes to assess the EHC assessment starts. The LA must gather advice and information as to:</p> <ul style="list-style-type: none"> (1) the child'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. <p>The LA must seek:</p> <ul style="list-style-type: none"> (a) advice and information from the child's parent/carer or the young person; (b) educational advice and information from the head teacher or principal of the nursery, 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 LA thinks is appropriate; (g) where the child is in or beyond Year 9, advice and information in relation to provision to assist the child in preparation for adulthood and independent living; (h) advice and information from any person the child's parent/carer and/or young person reasonably requests that the LA seek advice from. <p>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:</p> <ul style="list-style-type: none"> (1) the LA; (2) the original author of that report, and; (3) the parent/carer or young person. <p>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, but must look at each piece of advice and request consent from the author and the parent/carer or young person. The SEND Code of Practice (pg. 155, 9.47) advises that parents and young people should be supported to make an informed decision.</p>

The Timescales

Time line	Action
Week 14	<p>A draft EHCP needs to have been produced and sent to the parent/carer by this time. At the same time, the LA must advise the parent/carer where they can find information about the schools and colleges that are available for the child to attend. The parent/carer then has at least 15 calendar days after receipt of the draft plan in which to:</p> <ol style="list-style-type: none"> 1. make representations to the LA about the contents of the draft EHC plan; 2. ask for a meeting with an LA officer to discuss the draft EHC plan; 3. tell the LA the type of school/college (mainstream or special) and the actual school/college they would like named in the final EHC plan.
Week 16	<p>If the LA decides not to issue an EHC plan, having carried out the EHC needs assessment they must so notify the parent/carer by this date. The parent/carer will have a right of appeal to the Special Educational Needs and Disability Tribunal against the decision to refuse to issue a plan.</p> <p>Where an LA has issued an EHC Plan, the LA must consult with the school/college the parent/carer has requested. School or college should respond to the LA within 15 days (SEND Code paragraph pg. 173, 9.83).</p>
Week 20	<p>Final EHC plan issued by the LA.</p> <p>This must be sent to the parent/carer; the governing body, proprietor or principal of any school, other institution or provider named in the EHC Plan and the responsible commissioning body.</p>

Annual Reviews of Education, Health and Care Plans

Overview

The Annual Review is the statutory process by which a child'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'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 family 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 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, school or 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, 197)

The Annual Review meeting

Before the meeting

- The host (usually the SENDCo in the educational setting) will contact relevant professionals to gather up-to-date reports and must contact the family to invite them to contribute their views, wishes and feelings (this is a helpful [guide for young people](#) to support them in sharing their views).
- 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'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?
 - 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 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

- 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.

Best practice tips/ things to consider

- Ensure adequate time for planning, organising and completing relevant paperwork following the Annual Review. Invite all relevant professionals who have had recent involvement (last 12 months); it may be helpful to think ahead about these arrangements at the start of the year (e.g. during planning meetings with outside agencies).
- Ensure the communication needs and accessibility of information (e.g. written text) has been considered for all attending the meeting. Ensure an interpreter is provided if required (using a professional service rather than a family member or family friend) and consider the use of visuals or other alternative communication methods where appropriate.
- Ensure all attendees are able to contribute to relevant parts of the review. At the start of the meeting it can be helpful to clarify that it is a group process and all attendees are bringing their own skills and expertise to draw upon in the meeting. Using a visual methods (e.g. MAP or PATH) as described in 'Gathering and responding to children's views' above can help make the process collaborative.
- It can be helpful to spend time with child and their family ahead of the Annual Review to explain the process and ensure that all reports and information have been shared in a way that is accessible. If there have been any particular difficulties or issues, it is important that parents/carers are made aware of these concerns outside of and in advance of the Annual Review, and for this information to not be shared for the first time within the context of a multi-agency meeting.

- Ensure attendees are familiar with the outcomes and objectives and how the educational setting has worked with the child and their family to make progress towards outcomes.
- Have relevant paperwork and reports from the last 12 months available; this can help to clarify a timeline of events if necessary (e.g. appointments attended) and plans for future involvement (e.g. if a re-referral is required after a missed appointment).
- Celebrate positives and successes (e.g. sharing examples of the child's work or achievements).
- The Annual Review is the opportunity to revisit, refine and revise the outcomes and provision within the EHCP to ensure it is effective in supporting the child to meet their potential. This should include a detailed discussion about how the provision detailed in the plan has been implemented and the impact it has had in meeting the outcomes and objectives. If something is not working or no progress has been made, it is important to explore the reasons why (e.g. are there barriers to provision being successfully implemented? Is a different approach or type of support needed?) Having these discussions during a multi-agency meeting leads to a collaborative approach to planning provision that draws on the expertise within the room so as to improve the support plan for the coming year.

SENDCo/ Practitioner Wellbeing

The role of the SENDCo has continued to expand with each revision to the Code of Practice. The role is diverse and interesting, but the pace of change has accentuated SENDCo turnover. SENDCos' roles can be emotionally laborious as they are in a position where they are supporting the wellbeing of others: children, families and team members. It is, therefore, essential that they get the support they need to fulfil their vital role for SEND children. Research (Lewis, 2017) suggests that SENDCos' resilience is protected by access to social support from other SENDCos; having a position in school that enables systemic change (within the leadership/management team or clear links to); access to training and learning opportunities; and by individual coping strategies with workload and emotionally charged situations.

Research has shown that peer networks can offer valuable support and development opportunities for SENDCos and school staff (Hayes and Stringer, 2016). Cluster meetings between schools are often a helpful way to share ideas, training costs and generate solutions to commonly occurring challenges. Similarly, finding time to meet as a staff team can be powerful. School staff who engaged in group problem solving sessions reported they were 'productive', 'structured' and 'supportive'. All respondents (10 staff) reported an impact on their understanding of SEN, and 90-80% of respondents reported the groups helped them learn new strategies, try new things in the classroom and feel more confident about SEN. 70% reported the groups helped them feel less stressed (Lyons, 2019).

The Educational Psychology Service can facilitate group problem solving sessions and offer supervision to other professionals such as setting staff, which can provide a safe space to

reflect on your role, concerns and coping; ask your Educational Psychology service for more details.

Using the Following Sections

We hope this overview has given you a good understanding of the best SEND practices within schools. The remainder of this document will support you to meet need within your school across the Getting Advice, Getting Help, Getting More Help (Main Thrive Tool) and Getting Risk Support sections of the Thrive Framework.

References

Finlay, L. (2008). Reflecting on 'Reflective practice'. Practice-based Professional Learning Paper 52, The Open University.

Hayes, M. and Stringer, P. (2016). Introducing Farouk's process consultation group approach in Irish primary schools. *Educational Psychology in Practice*, 32 (2), 145-162.

Lewis, T, F. (2017). Special Educational Need Coordinator (SENDCO) wellbeing: a mixed methods exploration of workplace demands and effective coping actions. University of Birmingham.

Lyons, R. (2019). Reducing Exclusions in Salford: Identifying and Supporting Special Educational Needs (SEN), Summary Report (Part Three). Salford: Salford City Council.

Todd, L. (2003). Enabling pupil participation. *Special Children*. April/May, 22-25.

Appendix 1: Guidance documents for parents

Overview of SEND Support



*Guidance to SEND
Support.pdf*

What to do if you think your child has Special Educational Needs



EHCP Helpsheet 1.pdf

What is an EHCP Needs Assessment?



EHCP Helpsheet 2.pdf

How do I make a parental request for statutory assessment of SEN?



EHCP Helpsheet 3.pdf

What is an Education Health and Care Plan (EHCP)?



EHCP Helpsheet 4.pdf

What is an Annual Review?



EHCP Helpsheet 5.pdf

Timescales/EHCP Pathway



*EHC plan assessment
pathway.pdf*

Educational Psychology Service



Example of a Parent Coffee Morning.pdf

Appendix 2: Examples of tools to gain pupil views

My Three wishes



My Three Wishes.pdf

Perfect Week



Perfect Week.pdf

Relationship Circle



Relationship Circle.pdf

Decision Making Profile



*Decision Making
Profile.pdf*

Good and Bad Days



Good and Bad Days.pdf

How to share your views for your annual review



*How to share your views for
your annual review.pdf*

Appendix 3: EHCP Request and Annual Review paperwork



*1. Referral statutory
assessment - template.pdf*



*0. All about me - hopes and
aspirations template.pdf*



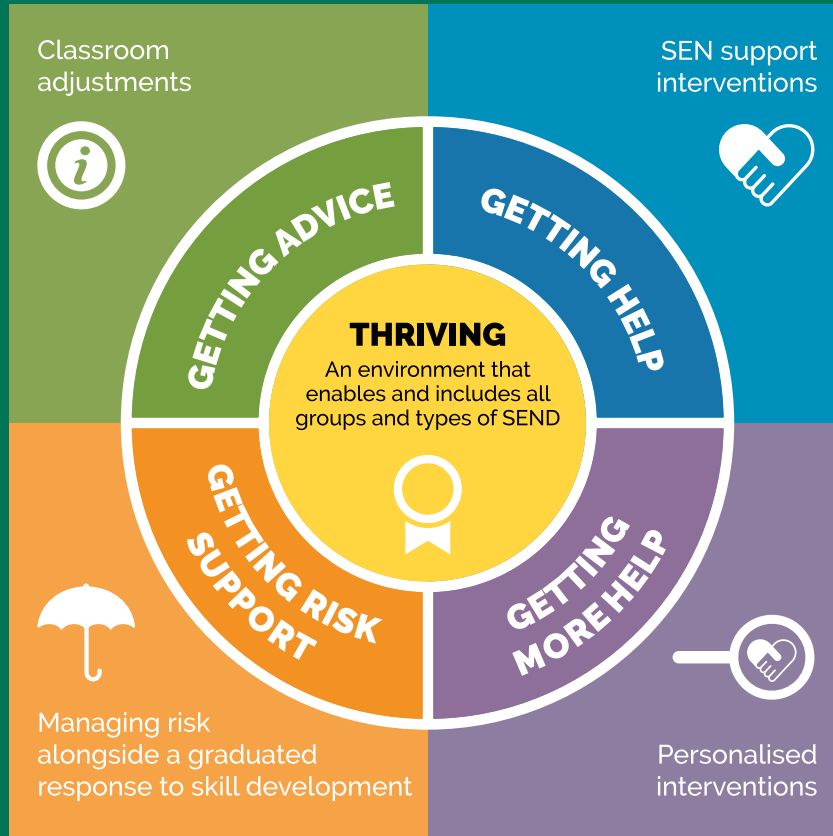
*9a. Local guidance for
reviewing of an EHCP.pdf*



*9. Review of an EHCP -
template.pdf*




SEND Children Thrive
Matching Provision to Need

Main Thrive Tool Early Years Settings



SOCIAL, EMOTIONAL, MENTAL HEALTH

EYFS Links – Personal, Social and Emotional Development and Literacy

SKILL	GETTING ADVICE <small>Classroom adjustments</small> 	GETTING HELP <small>SEN support interventions</small> 	GETTING MORE HELP <small>Personalised interventions</small> 
Social and Emotional Development (General)	<p>Engage in the Emotionally Friendly Settings process.</p> <p>Arrange relevant training for school staff from external support services where needed (e.g. attachment, trauma, Emotion Coaching).</p> <p>Consideration is given to creating a calm environment (e.g. organisation of the space, seating and group dynamics).</p> <p>Clear boundaries and routines are in place, supported by visuals e.g. visual timetables, now and next boards, objects of reference, simple visual rules are displayed (e.g. good looking, good sitting).</p> <p>Transparent system of rewards and natural consequences are in place. Rules and expectations are consistent across staff.</p> <p>The children's attention is gained in a consistent and positive way. For example, attention-grabbing signals may help such as the use of a song or musical instrument at a transition point.</p>	<p>Consider the following group-level emotional wellbeing interventions:</p> <ul style="list-style-type: none"> • Daily mindfulness sessions (training and resources can be provided by Tameside Educational Psychology Service to begin mindfulness sessions with 2-6 year olds). • Use of tummy time and yoga. • Planned time to complete relaxation activities in calm spaces within the setting. • Use of the Baby Room Project, to support baby room practitioners and parents/carers understanding of babies' brain development in the first year. <p>To identify an overall profile of the child, use ongoing tracking through EYFS and other assessments, for example Ages and Stages Questionnaire (ASQ), and Boxall Profile to measure and demonstrate the impact of an intervention or programme over a period of time.</p> <p>Provide a plan and support at unstructured and/or transition times for children who find these times of the day unsettling.</p>	<p>Obtain and record children's views using observation, discussion with key adults and tools such as The Mosaic Approach the Bear cards, picture sort activities (e.g. activities I like and don't like) and the Blob Tree.</p> <p>Obtain and record parental information and views. Ensure regular communication between home and setting (e.g. a minimum of 3 meetings with parents within a 12-month period).</p> <p>Consider risk and protective factors to provide a holistic understanding of the child's needs.</p> <p>Use appropriate assessment tools to identify needs early, establish a greater understanding of the child's support needs and inform appropriate referral to other services. For example the ABC charts, Strengths and Difficulties questionnaire, the Boxall profile or the SMILE score.</p>

SKILL	GETTING ADVICE	GETTING HELP	GETTING MORE HELP
Social and Emotional Development (General)	<p>Children are prepared for changes to activities/ routines/staffing in advance (e.g. using visuals).</p> <p>Ensure adults' expectations are appropriate, for example ensure children are not expected to wait for long periods for example at snack time or lunch time.</p> <p>Use of Emotion Coaching. Provide connection before correcting children's behaviour through responding to children's emotions first.</p> <p>Growth Mindset as a whole setting approach.</p> <p>Share key messages around Five to Thrive in the setting using posters e.g. respond, cuddle, relax, play, talk</p> <p>Use activities themed around the Five to Thrive framework and share these with parents/ carers.</p> <p>Invite selected parents to participate in the Incredible Years course.</p> <p>Consideration of clear and coordinated response to critical incidents (e.g. critical incident policy/ identification of a nominated lead for the setting).</p>		<p>Observe and record the child's presentation and patterns of interaction and behaviour (e.g. using an ABC chart) across a range of varied contexts/ times during their session to understand what they are trying to communicate and to inform possible strategies.</p> <p>Provide key adult support at specific times that have been identified as challenging for the child (e.g. morning transition. 1:1 time to build up a relationship between a child and key adult to be built into the child's timetable).</p> <p>Ensure effective sharing of information and consistent use of strategies (e.g. Use of a One Page Profile).</p> <p>Offer additional transition visits and transition books before the child starts, or when moving between rooms or onto school.</p> <p>Create Play Plans and adapt termly with progress against targets routinely reviewed with the Special Educational Needs and Disability Co-ordinator (SENDCo), key worker and the child/parents/carers where appropriate. Ensure that all staff involved with the child understand the purpose of the Play Plan and are able to support the child to achieve their targets.</p>

SKILL	GETTING ADVICE	GETTING HELP	GETTING MORE HELP
Social and Emotional Development (General)			<p>Implement appropriate interventions for children with specific individual needs. For example, ensure planned opportunities for 'Time In' and flexible access to a key adult/s. Key adult characteristics: nurturing yet able to hold firm boundaries; resilient; patient; empathic; and able to seek and accept support from another adult.</p> <p>Provide time and space for targeted support on a consistent basis (e.g. access to a smaller space to complete interventions, increased staff: child ratios for times when intensive support and interventions are being delivered).</p> <p>Refer to external agencies for additional support (e.g. Early Years Quality Improvement Team, Speech and Language Therapy, Educational Psychology, Paediatrician).</p> <p>Use the Plan-Do-Review process to monitor the child's progress, alongside any external agencies' advice, whilst collating evidence of the impact of the strategies being used (please refer to the Best Practice Walkthrough document).</p> <p>Where the child has an Education, Health and Care Plan (EHCP), refer to described outcomes and provision and implement. Continue to use the Plan-Do-Review process against the specified outcomes and provision. Regularly update with strategies as they are tried. Complete Annual Review of EHCP (please refer to the Best Practice Walkthrough document).</p>

SKILL	GETTING ADVICE	GETTING HELP	GETTING MORE HELP
<p>Making Relationships and Peer Interactions</p> <p><i>Children with interaction needs may also need support with their communication skills—please also see the Communication and Interaction section</i></p>	<p>Ensure every child experiences regular, positive interactions with an adult, including children who appear to prefer solitary play.</p> <p>Describe aloud what the child is doing (at their language level) by giving a running commentary. This supports children's language development and play skills.</p> <p>Reduce questions.</p> <p>Follow the child's lead and join in with their play. Allow a balance of child-led and free play, as well as adult-directed tasks.</p> <p>Adults model positive relationships and social skills.</p> <p>Use turn-taking games and circle time on a regular basis. Ask each child to hold an item (talking object) when they talk so they know whose turn it is to speak and how long they have to wait until their turn.</p> <p>Adults use mind-mindedness (putting yourself in the child's shoes and seeing the world from their eyes) when responding to incidents or children's concerns.</p> <p>Share key messages around Five to Thrive in the setting using posters e.g. respond, cuddle, relax, play, talk .</p> <p>Use activities themed around the Five to Thrive framework and share these with parents/ carers.</p> <p>Plan opportunities to learn and practise social and emotional skills during structured activities (e.g. role playing).</p>	<p>Offer small group interventions to promote positive peer interactions:</p> <ul style="list-style-type: none"> • Use of sensory and interactive play with bubbles and other motivating items. • Use of outdoor games and physical activities (e.g. chasing games, ready-steady-go). • Use of the Attention and Listening Skills intervention to develop joint attention and group work skills (contact Tameside Educational Psychology Service or Early Years Quality Improvement Team for further information).. • Inclusion in small group activities to work on turn taking and social skills, such as Time to Talk. <p>Offer interventions and attachment focused programmes to support relationships between children and adults (early years practitioners and parents/carers) such as:</p> <ul style="list-style-type: none"> • The Baby Room project: A programme to support baby room practitioners and parents understanding of babies' brain development in the first year. • Use of the Five to Thrive materials and principles. • Theraplay activities which are based on building attachments, self-esteem, trust and joy. The activities are centred around structure, engagement, nurture and challenge. 	<p>Use of tools such as the Adult Interaction Checklist (Elklan, 2006, Early Language Builders) to support positive interactions between adults and children and to support adults to respond in an individualised way to children.</p> <p>Identify and complete appropriate assessments to establish a greater understanding of the child's needs to inform individual intervention such as the Social Skills development checklist in the Early Language Builders book (Elks and McLachlan, 2006).</p> <p>Provide regular, additional adult support to ensure all children who struggle with interactions are socially included. Provide individualised, targeted interventions to develop their skills through specific target setting and timely reviews using the Plan-Do-Review process.</p> <p>Use an Intensive Interaction approach to build relationships with children who find it hard to interact. For children who aren't using any words yet, you can copy their actions. If they clap their hands, you clap them too. See what they do; they might look at you and smile to let you know they want you to carry on. Once the child is interacting well with you regularly, invite another child to join you too.</p> <p>Use of transitional objects to support children who find it hard to separate from their parents/ carers (separation anxiety).</p>




SKILL	GETTING ADVICE	GETTING HELP	GETTING MORE HELP
<p>Making Relationships and Peer Interactions</p> <p><i>Children with interaction needs may also need support with their communication skills—please also see the Communication and Interaction section</i></p>	<p>Use stories that generate problem solving around different social situations during circle time. Model and support children to practise the use of these skills (e.g. home corner, shop role play area).</p> <p>Use role play/verbal rehearsal before activities to reinforce behavioural expectations and reduce anxiety (e.g. how to ask for a turn on the bikes).</p> <p>Use of whole group/class interventions to develop social and emotional development (e.g. R time).</p>		
<p>Managing Feelings</p> <p><i>During the Early Years, children are developing their skills to manage their own feelings and understand the emotions of those around them. Managing feelings is a term used to describe a child's ability to manage their thinking, feeling and behaviours. Children's ability to self-regulate in the Early Years is limited, and children will learn how to self-regulate through their interactions with the adults around them.</i></p>	<p>Warm and responsive interactions between adults and children are used to support them to regulate their emotions through co-regulation. This is the first stage of supporting children to develop the skills required for managing feelings independently (co-regulation leads to self-regulation).</p> <p>Create a calm, positive and nurturing environment.</p> <p>Use strategies from the Early Years Development Matters Framework (2012) for supporting self-regulation throughout the Early Years.</p> <p>Whole group approaches to teaching emotional regulation strategies, e.g. Yoga and Mindfulness in the Early Years project (training and support can be provided by the Educational Psychology Service).</p>	<p>Offer small group support to develop skills related to emotional awareness and emotional regulation to support the development of emotional literacy skills, such as:</p> <ul style="list-style-type: none"> • Support to recognise, label and understand emotions in self and others (e.g. mirror play, discussion of emotions during stories/ puppet play, use of feelings visuals or Bear Cards). • Adult's use of "I" message approach. An "I" message is a form of communication that focuses on the feelings or beliefs of the person speaking, rather than the personal qualities or behaviours of the child. Adults can use 'I' messages with children to try and diffuse a situation in a non-threatening way. For example, an adult might say, "I feel very scared and worried when you try to climb over that gate" instead of demanding, "Why are you climbing that gate?" • Opportunities to practise self-calming techniques in a smaller group, such as Mindfulness, breathing activities or yoga. 	<p>Complete appropriate assessments to establish a greater understanding of individual children's needs. For example, observe and record 'impact on learning' across a range of contexts across the day to understand whether a particular need is dependent on a certain context/situation, or what the child may be trying to communicate through their actions, so as to inform strategies as needed (e.g. use of ABC Charts – example 1, example 2).</p> <p>Environmental audits are used to identify aspects of the environment that might lead to increased anxiety, arousal or sensory sensitivity, with monitoring of behavioural responses and adjustment to support plans / adult responses as needed.</p>

SKILL	GETTING ADVICE	GETTING HELP	GETTING MORE HELP
<p>Managing Feelings</p> <p><i>During the Early Years, children are developing their skills to manage their own feelings and understand the emotions of those around them. Managing feelings is a term used to describe a child's ability to manage their thinking, feeling and behaviours. Children's ability to self-regulate in the Early Years is limited, and children will learn how to self-regulate through their interactions with the adults around them.</i></p>	<p>Whole group activities that encourage identification of strengths e.g. creating visual reminders of strengths through posters, certificates, stickers and other visuals, serves to remind children of all the things they are good at. These can be collected in a 'Good to be Me' or 'All about Me' book.</p> <p>Use of attachment aware practices and tuning into the child's feelings and world (attunement). Attunement involves the adult initially recognising the emotion that the child is feeling. The adult then acknowledges this emotion by naming it, and then empathises with the child about how they are feeling. Remaining attuned to the way a child is feeling promotes positive attachments.</p> <p>Discuss and model feelings and emotions often:</p> <ul style="list-style-type: none"> • Use and label a wide vocabulary of feelings and emotions words. • Create displays focused on developing emotional vocabulary. • Use stories and therapeutic metaphors to teach about feelings and normalise a wide range of feelings. • Label the feelings for the child when they are experiencing them. <p>Use of emotional validation strategies when a child is upset, angry or distressed, (e.g. Emotion Coaching approach).</p>	<ul style="list-style-type: none"> • Use of Zones of Regulation to teach strategies for emotional and sensory self-management (4 years plus). <p>Regular 'Reset' breaks incorporated into the day to help children remain calm (e.g. access to quieter spaces, movement breaks and use of sensory resources or sensory rooms).</p> <p>Use of appropriate checklists and assessment tools. For example, the self-esteem developmental milestones within the Early Years Development Matters Framework (2012)</p>	<p>Work with a group of key staff to identify an individual profile of the child and gain an understanding of their individual triggers and observable behaviours, as well specific escalating and de-escalating adult responses. An example of this might be the RAMP (Reducing Anxiety Management Plan). This should form part of a robust risk assessment which is regularly reviewed to support any behaviours associated with difficulties managing feelings (see Getting Risk Support section).</p> <p>Assign a key adult/team of adults to provide daily opportunities for the child to talk through success and achievements experienced that day and to develop their skills. Such as:</p> <ul style="list-style-type: none"> • Daily check ins (may be helpful on arrival and/or part way through the day). • Daily opportunities to spend time identifying and building on strengths with an adult, on a 1:1 basis e.g. make a strengths jar (loan Rees, 2005) using art materials). • Access to teaching and support to develop 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 the use of a 'calm box'. • Use of gentle praise when self-calming strategies are attempted, even if unsuccessful (e.g. "I like that you used your deep breaths")

SKILL	GETTING ADVICE	GETTING HELP	GETTING MORE HELP
<p>Managing Feelings</p> <p><i>During the Early Years, children are developing their skills to manage their own feelings and understand the emotions of those around them. Managing feelings is a term used to describe a child's ability to manage their thinking, feeling and behaviours. Children's ability to self-regulate in the Early Years is limited, and children will learn how to self-regulate through their interactions with the adults around them.</i></p>			<p>Provide access to specialist therapeutic interventions if needed (e.g. play therapy, art therapy, interest -based activities that facilitate discussion and skill rehearsal).</p> <p>Explicit verbalisations of safety (e.g. "you're safe"). Provide access to safe spaces if needed (e.g. pop up tent, quieter area of the setting, use of a sensory room).</p> <p>Ensure reasonable adjustments to behaviour policies and procedures, for example, flexibility of behaviour systems to account for a child's individual needs.</p> <p>Robust risk assessments are in place and regularly reviewed to support any behaviours associated with reduced emotional regulation and communication skills or self-harming behaviours (see Getting Risk Support section).</p>

COGNITION AND LEARNING

EYFS Links – Literacy, Mathematics, Understanding the World, Expressive Arts and Design

SKILL	GETTING ADVICE Classroom adjustments 	GETTING HELP SEN support interventions 	GETTING MORE HELP Personalised interventions 
Thinking skills	<p>Staff awareness of typical developmental patterns for children, to establish realistic expectations, set goals and identify difficulties.</p> <p>Training to develop an understanding of play development and the importance of play for developing cognitive and learning skills.</p> <p>To help develop an understanding of their environment/ the world:</p> <ul style="list-style-type: none"> • Give babies/ small children opportunities to look in mirrors and play with objects that offer different sensory experiences. • Play hide and seek games where children have to find toys. • Play people games. • Provide different objects and places to explore, in both indoor and outdoor areas (e.g. jumping in puddles, running up and down little hills, playing with pots, pans, spoons, paper etc.). 	<p>Targeted small group support and interventions to develop skills for learning, such as sustained, focused and joint attention (e.g. Attention and Listening Skills programme from Tameside Educational Psychology Service.)</p> <p>Play opportunities in small groups that include good peer role models.</p> <p>Differentiation of the adult's role in supporting and facilitating play, depending on the group/ activity being undertaken, e.g.:</p> <ul style="list-style-type: none"> • Modelling skills and feelings. • Observing play. • Providing resources. • Mediating learning (see below). • Physically positioning an adult nearby. • Allowing a balance of child-led and free play, as well as adult-directed tasks. • Questioning and making suggestions. • Joining in when needed or invited. Being a 'play partner' rather than controlling the play. • Supporting and extending child-led play. 	<p>Further adaptation of the adult role in play and learning and the form(s) of mediation needed: Children in this group may need more frequent and higher levels of mediation (e.g. 'hand over hand' guidance).</p> <p>Increased sensory play activities for children with more complex needs.</p> <p>Adaptation of play resources and environments to meet complex needs e.g.:</p> <ul style="list-style-type: none"> • Physical needs • Visual impairment • Hearing impairment <p>Support from specialist services may be required (see Sensory and or/Physical Needs section)</p> <p>Implement appropriate play interventions for children with specific individual needs (e.g. Play Bank or Identiplay).</p> <p>Use individualised Play Plans and or Engagement Profile and Scale to address specific skills identified through assessment.</p>

SKILL	GETTING ADVICE	GETTING HELP	GETTING MORE HELP
Thinking skills	<p>Provide activities to develop early learning and cognitive skills, including verbal and non-verbal reasoning skills. These may include:</p> <ul style="list-style-type: none"> • Attending to relevant cues (looking at a speaker or attending to the source of a sound, looking at target objects or pictures in books). • Cause and effect (hypothetical) reasoning (e.g. games with anticipation of responses such as Round and Round the Garden; cause and effect toys). • Comparison (identifying which item is bigger/ smaller, heavier/ lighter, longer/ shorter etc.). • Categorisation (grouping items by given categories such as colour, size or shape). • Correspondence (assigning number names to objects; sharing things between two or more people). • Focused perception (looking and listening carefully to visual/ verbal/ physical cues or items). • Conservation of constancy (understanding that some things stay the same whilst others change e.g. changing the layout of a group of items but keeping the same number, pouring liquid or sand between containers). • Identifying defining criteria (identification of an object based on colour, size, shape etc.; matching objects to their function). 	<p>Consider which forms of adult mediation are most appropriate or useful for some children:</p> <ul style="list-style-type: none"> • Helping the child feel at ease (building rapport, using familiar and enjoyable activities). • Focusing the child on the task (e.g. using visual and verbal prompts, moving things into their line of sight). • Using 'hand over hand' guidance. • Modelling how to do the activity/ task first. • Mediating meaning by focusing the child on relevant features of the task (e.g. feeling objects, demonstrating use, pointing to buttons/ switches). • Focusing the child on the adult's role and involvement (turn-taking, modelling, demonstrate trying and failing and asking for the child's help). • Assisting generalisation of the skill (e.g. show the child how to use a toy in a different way, or different toys in the same way). • Helping the child to plan (e.g. making tasks visually clearer by reducing the number of items in front of child, providing non-verbal demonstration, talking through what to do next). • Helping the child to break down tasks through modelling and demonstration (do one-step at a time and encourage child to copy); teach the sequences of pretend play). • Helping the child to feel successful (using verbal and non-verbal praise, encouragement and tangible rewards) 	<p>Provide time and space for targeted support on a consistent basis (e.g. access to a smaller space to complete interventions, increased staff: child ratios for times when intensive support and interventions are being delivered).</p> <p>Use the Plan-Do-Review process to monitor the child's progress, alongside any external agencies' advice, whilst collating evidence of the impact of the strategies being used (please refer to the Best Practice Walkthrough document).</p> <p>Where the child has an Education, Health and Care Plan (EHCP), refer to described outcomes and provision and implement. Continue to use the Plan-Do-Review process against the specified outcomes and provision. Regularly update with strategies as they are tried. Complete Annual Review of EHCP (please refer to the Best Practice Walkthrough document).</p>

SKILL	GETTING ADVICE	GETTING HELP	GETTING MORE HELP
Thinking skills	<ul style="list-style-type: none"> • Labelling (using labelling words and concepts to describe objects e.g. colour, heavy/light, big/small, naming things about an object, pointing to or naming specific items on request) • Pattern recognition/seriation (recognising and continuing patterns of colours/ shapes; lining up sticks in order of height). • Planning behaviour (developing capacity to plan actions and not act impulsively (e.g. gathering equipment in advance of an activity; planning how all items will fit into a box; testing out ideas; trial and error reasoning). • Relating past to present experiences (demonstrating that past events have influenced present behaviour e.g. knowing how previously shown toys work, re-enacting familiar actions or situations in role-play area). • Role taking (Theory of Mind) taking on another 'role' and acting as that person or thing would (e.g. different roles in role play; moving like a specific animal). • Self-regulation (physical and behavioural) ability to control impulses (e.g. stopping or starting something when needed; delaying gratification; attending – may be seen through sharing, turn-taking, moving on if something isn't available, persevering if something is difficult). • Sequencing (sequencing letters, number cards, ladybirds with dots on their backs; sequencing routines using picture cards). 	<ul style="list-style-type: none"> • Helping the child feel that they've made progress (providing task-specific praise; stating what they can do at the end that they couldn't at the start). <p>Increased use of play-based assessment for children who may require more fine-grained assessment of their skills, or who may not fit easily into EYFS tracker (e.g. those with language difficulties).</p>	

SKILL	GETTING ADVICE	GETTING HELP	GETTING MORE HELP
Thinking skills	<ul style="list-style-type: none"> • Systematic searching (looking through a set of items to find a specific one or the next one needed e.g. stacking cups by size; looking through pictures to find the odd one out; shape sorting). • Using several sources of information (combine and understand different sources of sensory information, e.g. "Look at the teddy and point to his hat"). <p>Staff training and development in assessing children through play (e.g. Let's Play guide; Play Based Assessment as part of Emotionally Friendly Settings (EFS) from Tameside Educational Psychology Service</p>		
Literacy	<p>General: Implement evidence-based recommendations around preparing for literacy in the Early Years.</p> <p>Staff to receive training in literacy approaches used, to ensure a consistent approach. Staff should also be aware of what to expect at each age and stage, how children's literacy skills typically develop, and how to assess this development.</p> <p>Engage parents/carers and share activities with them, so that children can use the same approaches outside of the setting (e.g. create 'story sacks' or 'toy sacks' for children to take home and share with parents; send the group teddy home for the weekend and ask families to describe activities completed together the following week).</p>	<p>Targeted small-group support, in addition to whole group early literacy activities.</p> <p>Alongside the EYFS tracker identify and complete appropriate assessments to establish a greater understanding of the child's needs. For example:</p> <ul style="list-style-type: none"> • Observation. • Discussion with parents/ carers. • Play-based assessment (see 'Thinking Skills' above). • Fine-grained assessment tools (e.g. Early Support Developmental Journal). • Refer to the Celebratory Approach to SEND Assessment in the Early Years document for further guidance. <p>Increased use of play-based assessment in an ongoing way for children who may require more fine-grained assessment of skills or who may not fit easily into EYFS tracker (e.g. those with language difficulties).</p>	<p>See 'Thinking Skills' section above.</p> <p>Further adaptation of the adult role in play and learning and the form(s) of mediation needed – children in this group may need more frequent and higher levels of mediation (e.g. 'hand over hand' guidance).</p> <p>Increased sensory play for children with more complex needs.</p> <p>Adaptation of play resources and environments to meet complex needs, e.g.:</p> <ul style="list-style-type: none"> • Physical needs • Visual impairment • Hearing impairment <p>Support from specialist services may be required (see Sensory and or/Physical needs section).</p> <p>Use individualised Play Plans and or Engagement Profile and Scale to address specific skills identified through assessment.</p>

SKILL	GETTING ADVICE	GETTING HELP	GETTING MORE HELP
Literacy	<p>Regular tracking and assessment/ observation of children's early reading and writing skills.</p> <p><u>Combined early literacy approaches</u>, e.g.:</p> <ul style="list-style-type: none"> • Story-telling and group reading. • Activities to develop letter knowledge, knowledge of sounds and early phonics. • Singing songs and rhymes together; missing out words of familiar songs to allow children to fill in the gaps. • Introductions to different kinds of writing. <p>Approaches should cover a <u>range of activities</u> and focus on both early reading and writing skills.</p> <p>Reading:</p> <ul style="list-style-type: none"> • Collect a range of books appropriate to the age and developmental stage of the children. • Allow children to handle books from an early age and draw their attention to pictures. • Read board or cloth books to babies. Allow them to hold the book as you read and talk to them about what you can see in the pictures. • Create an attractive book area where adults and children can share books together – use puppets, soft toys and real objects as props to share stories. • Provide frequent opportunities for children to read books with adults, where adults model reading skills and comment on pictures. • Adults point to words as they read them. • Adults ask questions about concrete information from the story. 	<p>Use of appropriate mediation strategies (see 'Thinking Skills above).</p>	<p>Use of appropriate mediation strategies (see 'Thinking Skills above).</p>

SKILL	GETTING ADVICE	GETTING HELP	GETTING MORE HELP
Literacy	<ul style="list-style-type: none"> • Create a 'print-rich' environment where children can learn words and model the language of print. • Provide opportunities to act out stories in play. • Adults demonstrate phonic decoding of words (e.g. by using 'big books'). • Sort pictures or real life objects into semantic categories (e.g. clothes vs toys) to support understanding of different types of words. • Use Story Pictures/Story Stones to create a story. The child chooses cards/stones which each contain features of a story (e.g. location, characters etc.) and then think of a story. • Use Black Sheep Press Narrative icons to support structuring stories. <p>Early phonics activities:</p> <ul style="list-style-type: none"> • Clapping syllables. • Actions/noises for keywords (i.e. clap when you hear...). • Story bags – pick out an object that's mentioned in a story. Lift the object up when they hear the object. • Tongue twisters. • Singing and rhyming games to encourage recognition of rhyme, the sounds in words, patterns, rhythm. • Tuning into sounds (e.g. nature sounds, different instruments). • Listening, remembering and copying sounds (clapping patterns etc.) • Support in recognising their own name (e.g. read name on coat peg etc). 		

SKILL	GETTING ADVICE	GETTING HELP	GETTING MORE HELP
Literacy	<ul style="list-style-type: none"> • Picture sequencing (i.e. providing child with pictures which tell a story, ask the child to order the pictures to tell the story in the correct order. This supports understanding of story patterns, sequencing etc). • Phonics programmes such as Letters and Sounds, Jolly Phonics etc. • Activities/games to support phonological processing: matching sounds to pictures/objects (e.g. things with a 'ch' sound); Robot phonics (breaking words up into phonemes accompanied by robot arms); looking for the same letter/sounds in a book. <p>Writing:</p> <ul style="list-style-type: none"> • Ensure that babies hear a wide variety of words. • Allow babies to explore what happens when they use their hands and feet. • Draw and paint with the child and comment on what you're drawing. • Attach meanings to marks in various contexts (e.g. point out simple words on displays and read what they say). • Provide regular access to activities to develop gross and fine motor skills underpinning handwriting skills (e.g. painting big pictures/ circles to build shoulder strength and stability, use of playdough and hand and finger exercises to improve fine muscle control, such as Dough Disco). • Provide frequent mark-making opportunities using different techniques (e.g. sand writing, painting etc.) to encourage recognition of spelling patterns and familiarity with writing words. 		

SKILL	GETTING ADVICE	GETTING HELP	GETTING MORE HELP
Literacy	<ul style="list-style-type: none"> Record things that children say to highlight that what they say can be written down and read by others (e.g. write something they say to share with parents). Model writing for a purpose (e.g. shopping list, letters to friends they can pretend to post, messages or cards for parents). Provide opportunities for writing during role-play activities (e.g. notepads in doctor's surgery role-play). 		
Mathematics	<p>General: Implement evidence-based recommendations around Improving Mathematics in the Early Years.</p> <p>Staff to receive training in mathematics approaches used, to ensure a consistent approach. Staff should also be aware of what to expect at each age and stage and understand how children's Maths skills typically develop, and how to assess this development.</p> <p>Engage with parents and share activities with them, so that children can use the same approaches out of setting.</p> <p>Regular tracking and assessment/ observation of children's early maths skills.</p> <p>Use of concrete resources (e.g. cubes, counters, small toys).</p>	<p>Opportunities for small group work and play activities around early Maths skills. A balance of guided interaction with direct teaching and child-led activities (depending on age/ capabilities of the child).</p> <p>Alongside the EYFS tracker Identify and complete appropriate assessments to establish a greater understanding of the child's needs. For example:</p> <ul style="list-style-type: none"> Observation. Discussion with parents/ carers. Play-based assessment (see 'Thinking Skills' above). Fine-grained assessment tools (e.g. Early Support Developmental Journal). Refer to the Celebratory Approach to SEND Assessment in the Early Years document for further guidance. <p>Increased and ongoing use of play-based assessment for children who may require more fine-grained assessment of skills or who may not fit easily into EYFS tracker (e.g. those with language difficulties).</p>	<p>See 'Thinking Skills' section above.</p> <p>Further adaptation of the adult role in play and learning and the form(s) of mediation needed – children in this group may need more frequent and higher levels of mediation (e.g. 'hand over hand' guidance).</p> <p>Increased sensory play for children with more complex needs.</p> <p>Adaptation of play resources and environments to meet complex needs, e.g.:</p> <ul style="list-style-type: none"> Physical needs Visual impairment Hearing impairment <p>Support from specialist services may be required (see Sensory and/or Physical needs section).</p> <p>Use individualised Play Plans and or Engagement Profile and Scale to address specific skills identified through assessment.</p> <p>Use of appropriate mediation strategies (see 'Thinking Skills' above).</p>




SKILL	GETTING ADVICE	GETTING HELP	GETTING MORE HELP
Mathematics	<p>Games/activities for developing <u>early Maths skills</u>:</p> <ul style="list-style-type: none"> • Hold babies' hands and help them to clap as you sing songs. • Sing songs/ rhymes with numbers and actions. • Give opportunities to explore categories (e.g. different types of spoon, different shapes). • Count with children as you do things (e.g. put on their coats or fasten the buttons on their coats). • Allow opportunities to make choices between different objects, modelling the language relating to different categories (e.g. colour, size, shape). • Activities where children can order or categorise by size, shape, number etc. <p>Number: Support understanding and use of numerical concepts/language:</p> <ul style="list-style-type: none"> • Modelling numerical language (big, bigger, small, smaller, more, less, how many, enough etc.) • Opportunities for sand/water play e.g. filling containers and transferring water/sand to different containers, which encourage thinking about quantity/amount. • Use language such as 'full' and 'empty' alongside water/ sand play. <p>Opportunities for counting:</p> <ul style="list-style-type: none"> • Model touching/moving objects in order to count them. • Model arranging objects (e.g. into a line) to make counting easier. • Chanting with visuals to match words to numbers. • Building towers and counting blocks as you go. 	Use of appropriate mediation strategies (see 'Thinking Skills above).	

SKILL	GETTING ADVICE	GETTING HELP	GETTING MORE HELP
Mathematics	<ul style="list-style-type: none"> • Purposeful counting opportunities (e.g. number of children allowed in an area at once; games that allow counting such as Hide and Seek). • Regularly singing counting songs (e.g. 3 cheeky monkeys, 3 little men in a flying saucer, 10 green bottles) <p>Encourage recognition of graphical representation of numbers (matching number cards). Display number lines in the environment.</p> <p>Encourage subitising (recognising small numbers of objects without counting). Offer subitising games and activities using visual picture cards/small numbers of objects.</p> <p>Encourage use of numeracy in roleplay activities (e.g. coins at the supermarket, tickets for a bus).</p> <p>Shape/ space/ measure:</p> <ul style="list-style-type: none"> • Give babies and young children opportunities to play and find out what their hands and feet can do. Encourage this by providing toys of interest, cause and effect toys etc. • Opportunities to play with puzzles where pieces go into matching spaces. • Point out and label different shapes in the environment, complete shape hunts where children have to find and sort shapes. • Provide different sizes and shapes of containers (e.g. role play, sand and water play) so that children can experiment with quantities and measures and find where things belong. 		

SKILL	GETTING ADVICE	GETTING HELP	GETTING MORE HELP
Mathematics	<ul style="list-style-type: none"> • Play games that involve children positioning themselves or objects (e.g. inside, behind, on top etc.). Adults use and model this vocabulary as they play. • Copy box games (one box contains a set of objects, child to collect the same objects). • Activities/games involving looking for or recognising patterns; provide collections of interesting things for children to sort and label in their play. • Identifying times of day – morning, afternoon etc. 		

COMMUNICATION AND INTERACTION

EYFS Links – Communication and Language, Personal, Social and Emotional Development, Literacy, Understanding the World, Expressive Arts and Design

SKILL	GETTING ADVICE Classroom adjustments 	GETTING HELP SEN support interventions 	GETTING MORE HELP Personalised interventions 
Communication and Interaction Development (General)	<p>Ensure that all staff have a clear understanding of typical speech, language and communication development and realistic expectations of skills for children of different ages within the setting (e.g. ‘An Introduction to Speech Language and Communication’ is a free online course alongside Universally Speaking guides are available from The Communication Trust).</p> <p>All staff are aware of the Greater Manchester Ten Tips for Talking - a set of evidence-based key messages for families and early years practitioners which promote interaction between young children and their families, from birth to age 5, to support early years development.</p> <p>Please also see ISCAN Speech and Language Therapy Training Programme.</p>	<p>If the child is under 30 months and scored on the WellComm assessment either red on their age section, or amber on their age and amber the age below refer them to the communication groups at the children centres (small talk and toddler talk).</p> <p>Use the Communication Development Pyramid (see the Communication Trust for more information) to assess the child’s abilities on the lower levels and implement individualised support depending on the child’s ability.</p> <p>Increase observations to understand how the child communicates, with who and where they communicate best, what their strengths and interests are, and how these can be used to encourage engagement in activities. Monitor how the child responds to your communication with them and whether they follow the words you are saying and/or the gestures you are using.</p> <p>Use the Early Years Foundation Stage Profile (Listening & Attention, Understanding, Speaking) and discussions with parents/carers to understand current skills and next steps for development. See the Celebratory Approach to SEND Assessment in the Early Years for ideas to support observations and holding supportive conversations with parents.</p>	<p>Strategies and approaches to support fine-grained assessment and individualised planning is in place and based on specialists’ advice.</p> <p>A Speech and Language Therapist overseeing a programme of individualised targets and the delivery of interventions at home/ in the setting.</p> <p>Regular multi-agency meetings in place to co-ordinate, plan and review support and progress. Refer to external agencies for additional support as needed (e.g. Early Years Quality Improvement Team, ISCAN Speech and Language Therapy, Educational Psychology, Paediatrician).</p> <p>Close links between the home and the setting and good communication ensure that the child’s strengths and special interests are more clearly understood and included within their personalised planning (e.g. communication book, One Page Profile).</p> <p>High quality training is provided for all key staff involved in delivering and monitoring targeted provision. See ISCAN Speech and Language Therapy Training programme.</p>

SKILL	GETTING ADVICE	GETTING HELP	GETTING MORE HELP
<p>Communication and Interaction Development (General)</p>	<p>Staff understand age appropriate skills using checklists such as The 'Progress Checker' from ICAN or Talking Point Progress Tracker. These Progress Checkers have been written by Speech and Language Therapists, based on typical developmental milestones from 6 months – 11 years. Their resources can help you to identify the signs of a child who is struggling to communicate, and ensure they get the support they need.</p> <p>Staff should be aware of the children's level of understanding of spoken language and adapt their language accordingly.</p> <p>Display the free Communication Development Pyramid in each room (see the Communication Trust for more information). Staff can be trained in the pyramid to understand how to adapt their communication cues so that they can 'step up' or 'step down' with a child as necessary.</p> <p>Identify designated Communication Champions or Leads.</p> <p>Complete environmental checklists to evaluate whether the space supports communication and interaction, such as the 'Communication Friendly Environment Checklist' from the Communication Trust. Create 'communication friendly space/s' (ELKLAN accredited), designated quiet spaces or talking areas (such as 'Talking Tables').</p>	<p>Plan and adapt tasks and activities to take account of the child's individual communication needs – ensuring an enabling environment and inclusion at all times of the day.</p> <p>Provide frequent practice to develop communication skills through recall and repetition.</p> <p>Develop close home and setting links to ensure strategies are used across both environments to support the generalisation of skills. Signpost parents to relevant information and activities on the BBC Tiny Happy People website.</p> <p>Agree clear plans and the use of support strategies to achieve agreed outcomes in the child's Play Plan or similar. Ensure regular meetings to review progress (every 6-8 weeks).</p> <p>Access additional staff training on supporting children with specific communication and interaction needs (e.g. Early Years Quality Improvement Team, Speech and Language Therapist, Educational Psychologist).</p> <p>Access additional staff training to support key adults to understand and respond to behaviours associated with Communication and Interaction difficulties (e.g. frustration at not being able to communicate, distressed behaviours as a result of not understanding spoken instructions or expectations).</p>	<p>Provide time and space for targeted support on a consistent basis (e.g. access to a smaller space to complete interventions, increased staff: child ratios for times when intensive support and interventions are being delivered).</p> <p>Ensure robust risk assessments are in place and regularly reviewed to support any behaviours associated with reduced communication skills or any personal care requirements.</p> <p>Use the Plan-Do-Review process to monitor the child's progress, alongside any external agencies' advice, whilst collating evidence of the impact of the strategies being used (please refer to the Best Practice Walkthrough document).</p> <p>Where the child has an Education, Health and Care Plan (EHCP), refer to described outcomes and provision and implement. Continue to use the Plan-Do-Review process against the specified outcomes and provision. Regularly update with strategies as they are tried. Complete Annual Review of EHCP (please refer to the Best Practice Walkthrough document). Continue to request and act on advice from external agencies as necessary.</p>

SKILL	GETTING ADVICE	GETTING HELP	GETTING MORE HELP
<p>Communication and Interaction Development (General)</p>	<p>Observe and listen to children's non-verbal cues as well as verbal and respond promptly, accurately and consistently to best develop gesture as a precursor to language.</p> <p>Watch what babies and children are interested in and use this to think about what they might be wanting to communicate with you – this allows you to make sure the language you're modelling matches what the child may be intending to communicate or is thinking about.</p> <p>Reduce questions and increase the use of comments especially for children at an early language level.</p> <p>Early identification of Speech Language and Communication Needs, for example, using identification tools such as WellComm (WellComm Early Years and the new WellComm Primary toolkits enable you to identify children needing speech and language support, and come with an ideas age-appropriate WellComm Big Book of Ideas, providing a total of around 150 instant, play-based activities linked to screening results.</p> <p>Follow Every Child a Talker (ECAT) guidance for Early Language Lead Practitioners.</p>	<p>Ensure additional support is in place to develop emotional vocabulary using visual and real-life situations (e.g. mirror play, discussion of emotions during stories/ puppet play, use of feelings visuals, or Bear Cards).</p> <p>Ensure the regular delivery of targeted interventions through play: including attention and listening skills, understanding skills and speech/ communication skills.</p> <p>Take inspiration from the WellComm Big Book of Ideas providing a total of around 150 instant, play-based activities linked to screening results).</p> <p>Provide regular communication groups, working on speech and language skills on a frequent basis with a small group of children. It can be helpful to include good role models alongside children who need additional support. Sessions may be themed, for example using ideas from Talking Boxes.</p> <p>ELKLAN - accredited courses for education and other staff working with those with speech, language and communication needs and for parents.</p>	

SKILL	GETTING ADVICE	GETTING HELP	GETTING MORE HELP
<p>Communication and Interaction Development (General)</p>	<p>The Helping Early Language and Literacy Outcomes (HELLO) improvement framework is a quality improvement tool for Early Years settings that want to improve their communication, language and literacy provision. The self-evaluation framework provides prompts, critical questions and resources to help settings identify their strengths and areas for development. HELLO framework (National Literacy Trust)</p> <p>Ensure all children have opportunities to experience a language rich environment; to develop their confidence and skills in expressing themselves; and to speak and listen in a range of situations.</p> <p>Use specific praise frequently (labelled praise) so children know when and what they have done well, so they know what is expected and when to repeat the behaviour.</p> <p>See the The Royal College of Speech and Language Therapists website See the ISCAN Speech and Language Therapy website for resources and ideas around children's speech, language and communication development.</p> <p>English as an Additional Language (EAL) If children are learning English as an additional language it is important to work with parents/carers to find out what their skills in their home language are like. These children may need specific strategies in place to support their understanding of English and their learning (e.g. use of visuals to support their understanding), but it should not be assumed that they have a special educational need.</p>	<p>Early Language Builders from ELKLAN is a practical book which provides detailed advice and activities to promote the speaking and listening skills of all children aged between 2 and 6 years.</p> <p>Early Years Attention Skills intervention involves small group sessions to develop joint, sustained and focused attention skills, suitable for EYFS. The training and activity pack can be provided through Tameside Educational Psychology Service.</p>	

SKILL	GETTING ADVICE	GETTING HELP	GETTING MORE HELP
Communication and Interaction Development (General)	If a child has not been exposed to English previously, they may be 'silent' for a period of time (up to a year). Although the child may not be speaking English, they are watching, actively listening and tuning in developing new meanings. Keep talking to the child, picking up on non-verbal responses and including them in activities and experiences.		
Receptive Language (Understanding what is said)	<p>Provide a language friendly environment offering regular, focused support and prompts from an adult, including cues to support all children's understanding and participation in play and activities. These cues should be multi-sensory. For example: visual (e.g. signs, objects and symbols), audio (e.g. songs), and smell (e.g. spraying different scents on different days of the week).</p> <p>Provide structure to the day through the use of a Visual Timetable, Now and Next boards (using photographs or pictures to show the routine of the day), gestures or Signalong, to ensure all children's understanding.</p> <p>Adults should use consistent language for equipment and routines, for example, all staff use the same term at meal times (e.g. dinner or lunch) rather than different terms being used.</p>	<p>Use of visual approaches to communicate information, such as Objects of Reference (real objects) used to represent activities and times of the day, pictures (visual timetables or Now and Next board), and/or signing (e.g. Signalong).</p> <p>Adults provide additional support during daily transitions, by giving time warnings and using environmental cues (e.g. tidy up time song, visual traffic light system) and prepare the child in advance for any changes to daily routines.</p> <p>Adults simplify and repeat instructions to ensure they are understood. Adults say the child's name to gain their attention first and place themselves where the child can see their face clearly.</p> <p>Display question prompts on the wall for staff to initiate communication. Begin with simple questions (e.g. What? Who?) before progressing to more difficult questions (e.g. Why? Where? How?).</p>	<p>Provide a Total Communication Environment that uses a range of teaching and learning styles with emphasis on use of gestures, signing, Objects of Reference, key visuals and concrete examples to support spoken language.</p> <p>Additional differentiation and scaffolding of tasks, which may require individualised planning for much of the day.</p> <p>Adults deliver and support daily one-to-one targets or small group interventions based on support and guidance from external services.</p> <p>Use an Intensive Interaction approach to build relationships with children who find it hard to interact. For children who aren't using any words yet, you can copy their actions. If they clap their hands, you clap them too. See what they do; they might look at you and smile to let you know they want you to carry on. Once the child is interacting well with you regularly, invite another child to join you too.</p>

SKILL	GETTING ADVICE	GETTING HELP	GETTING MORE HELP
<p>Receptive Language (Understanding what is said)</p>	<p>Adults prepare children for any changes in routines, for example, signal a change in activity using songs or a musical instrument to gain the children's attention first; talk to children in advance if there is going to be a change in the daily routine or staffing; include photos of adults on notice boards or linked to activities on the daily timetable.</p> <p>Adults promote joint attention, for example stating the child's name before giving information or asking a question.</p> <p>Adults slow down the pace of delivery to allow for extra processing time. Encourage children to repeat out loud the information back to themselves (verbal rehearsal) to help them remember key instructions.</p> <p>Adults model good interaction skills and physically get down to the child's level when communicating with them.</p> <p>Adults use a structured approach for tasks and activities with a clear beginning middle and end, for example (e.g. using Start and Finish trays).</p> <p>Provide opportunities to listen to stories or complete activities within a quieter environment or small groups.</p> <p>Use of Circle Time to help children develop their social, attention and listening skills. Additional adult support should be used to support group work (e.g. one adult leading, with another adult supporting the children's engagement).</p>	<p>Use pictures, key visuals and gestures alongside concrete examples to support spoken language during activities.</p> <p>Use pre-teaching to introduce new, specific vocabulary and concepts, before these are included in group or circle time activities.</p> <p>Draw upon small group programmes to develop listening and receptive language skills e.g. The BLAST programme (Boosting Language Auditory Skills and Talking) can be used with children aged 3-5 years.</p> <p>Infant Language Link to support children (4-8 years old) with mild to moderate language and communication needs and those new to English.</p> <p>TALC - This resource is designed to help Speech and Language Therapists and practitioners to assess and develop the verbal reasoning skills of under 5s who experience difficulty understanding what is said to them.</p>	<p>Black Sheep provides resources for practitioners and speech and language therapists working with children (3 years and above) with Developmental Language Disorder (DLD) and speech, language & communication needs (SLCN).</p>

SKILL	GETTING ADVICE	GETTING HELP	GETTING MORE HELP
Receptive Language (Understanding what is said)	<p>Adults model good looking and listening behaviours and support these with visuals and use of specific (labelled) praise when children demonstrate these wanted behaviours.</p> <p>Define key words simply and display new vocabulary as it is introduced as part of topic work.</p> <p>Ensure equipment is labelled with photographs or pictures. Twinkl, Boardmaker and Widgit provide a wide range of visuals and symbols which can be used around the environment and for displays. Be consistent in symbol use, e.g. avoid using Twinkl picture for one symbol and Boardmaker for another.</p> <p>Activity ideas and resources: DFE Hungry Little Minds - simple and fun activities for 0-5 year old to increase adult-child interactions. It includes video clips and is broken down into five age bands.</p> <p>BBC Tiny Happy People - activities and advice, for parents and professionals, to support development of communication skills.</p>		
Expressive Language (Communicating with others and talking)	<p>Ensure all staff are aware of the Greater Manchester Ten Tips for Talking -- a set of evidence-based key messages for families and early years practitioners which promote interaction between young children and their families, from birth to age 5, to support early years development.</p> <p>Adults give babies and children their whole attention when interacting with them, getting down to their level.</p>	<p>Adults teach specific, functional vocabulary (e.g. more, hello, please, toilet) using appropriate Early Years strategies e.g. pairing words with a visual, using Signalong.</p> <p>Adults offer children choices (e.g. for food, songs, stories, activities) making sure that a choice is supported visually with objects, pictures or symbols.</p>	<p>Adults deliver and support daily one-to-one targets or small group interventions based on support and guidance from external services (e.g. Speech and Language Therapist).</p> <p>Additional adult support is provided to contribute to group activities using a range of communication methods (e.g. gesture, vocalisations, instruments, visuals) alongside/ instead of spoken language.</p>

SKILL	GETTING ADVICE	GETTING HELP	GETTING MORE HELP
<p>Receptive Language (Understanding what is said)</p>	<p>When interacting with babies, adults copy the sounds the babies make back to them, to develop a two way flow as if in conversation.</p> <p>Adults attach meaning to babies and children's vocalisations, through watching their actions and saying out loud what they might be thinking 'Oh you're sad, I wonder if you're hungry?'</p> <p>Adults copy the facial expressions babies make during interactions. Adults exaggerate their own facial expressions and change the pitch and tone of their voice to capture the baby's interest.</p> <p>Adults keep their spoken language simple and comment on their own, as well as, the children's play (running commentary), reducing the number of questions.</p> <p>Adults give the babies and children time to process language and then respond (e.g. Pineapple Pause - pause for the time it takes to say 'pineapple' three times). Babies especially need extra time to process. Adults encourage use of gesture (e.g. pointing) and, if/when appropriate, encourage use of accompanying language by modelling using objects, e.g. 'Which one, ball or box?' and saying back the correct language.</p> <p>Adults model language and extend children's phrases by one word at a time. When using language extensions, instead of adding colour/size try to model use of verbs too (e.g. "push the car" ..."the car's stopped").</p>	<p>Adults model and support skills to promote communication and language with peers (e.g. support to join group games, use of musical instruments/ actions to allow inclusion in circle time, structured physical games during outdoor play such as races and chase games which don't depend on spoken language skills).</p> <p>Provide alternative ways to record learning (e.g. photos or video recording) so children can share their ideas and progress can be captured.</p> <p>Adults provide regular access to small group interventions to develop skills, for example:</p> <p>Can Do Music (programme for children aged 3-5 to develop communication and interaction).</p> <p>JabberJacks provide a targeted intervention to develop EYFS children's speech and language and through the fun music and physical activities. The sessions also help develop their gross motor skills to an expected level for that age group.</p> <p>Talk Boost is a targeted intervention that narrows the gap between 4-7 year olds with language delay and their peers.</p> <p>Tales Toolkit provides a package of small group resources to develop children's skills in story development and sequencing.</p> <p>Progression in Language Structures helps identify appropriate sentence starters for different ages. It can be used to support EAL learners or children with delayed language skills to construct sentences by giving them a familiar structure to work from.</p>	<p>Use of an additional or augmented communication system. (ACC) These may include:</p> <p>Signalong is a key word sign-supported communication system. It uses speech, sign, body language, facial expression and voice tone to link between sign and spoken word.</p> <p>Makaton is a language programme that uses symbols, signs and speech to enable people to communicate.</p> <p>PECS (Picture Exchange Communication System) is an alternative augmentative communication system in which simple picture cards are used to communicate simple needs initially, but then work towards more complex sentence structures, signing, or high-tech communication systems and software (such as Proloquo2Go).</p> <p>PODD Pragmatic Organisation Dynamic Display (PODD) which may be used include direct access boards.</p> <p>Variable level of support is provided which is reduced/ increased as appropriate to develop the child's independence (e.g. 'hand over hand', modelling, visual strategies – see mediation strategies in 'Thinking Skills' section of Cognition and Learning).</p>




SKILL	GETTING ADVICE	GETTING HELP	GETTING MORE HELP
Receptive Language (Understanding what is said)	<p>If a child mispronounces a word, adults model a correct form of the word rather than directly correcting, (e.g. If the child says 'tar' say, 'Yes, that is a star'.)</p> <p>Adults support the development of sharing and turn-taking in small groups and on an individual basis as needed.</p> <p>Children are supported to contribute during group activities (e.g. give clear routines for showing who's turn it is during group work such as a using a 'talking object'; children are prepared in advance by practising or being introduced to key vocabulary before being expected to use it in a group situation).</p> <p>Activity ideas and resources: Small Talk is a guide to find out what helps children learn to talk, including developmental milestones and strategies for parents and carers.</p> <p>Toddler Talk is an activity pack to promote communication development of toddlers from 18 months to 3 years old. Chatting with Children promotes communication development of children from 3 to 5 years old. Both are available from ICAN.</p> <p>Share ideas and tips with parents to encourage talking at home e.g. through encouraging the use of websites (such as Hungry Little Minds) or displays/ handouts, such as this one from Talking Point.</p>	<p>A structured language intervention may need to be devised in consultation with external professionals (e.g. Speech and Language Therapists) with support to generalise skills taught.</p>	

SKILL	GETTING ADVICE	GETTING HELP	GETTING MORE HELP
Receptive Language (Understanding what is said)	<p>Colourful Stories (ELKLAN) is a visual support strategy which helps children to learn about the structure of stories and become more confident about telling and eventually writing stories.</p>		
Social Communication Skills <i>Children with social communication needs can often experience sensory processing differences – please also see the Sensory and/ Or Physical Needs section</i>	<p>Adults ensure every baby and child has positive interactions with an adult at various times during their session, including those children who appear to prefer solitary play.</p> <p>Any predictable changes are explained and supported by the use of a Visual Timetable. This can also demonstrate timings of activities.</p> <p>Behavioural expectations supported with visual cues (e.g. good sitting and looking prompts). Regular use of specific (labelled) praise when wanted behaviours are observed.</p> <p>Regular sharing of information (between staff and between home and setting) centred on the child (e.g. Use of a One Page Profile).</p> <p>Clearly labelled learning environment by learning zones/play areas. Twinkl, Boardmaker and Widgit provides a wide range of symbols which can be used to signpost around the environment, for displays and to create visual timetables. Be consistent in symbol use, e.g. avoid using Twinkl picture for one symbol and Boardmaker for another.</p>	<p>Personalised visual supports (e.g. objects of reference, now/next, working for boards, activity boards, sand timers). If a child has a personalised Visual Timetable they will need to be told as early as possible about any changes to their routine.</p> <p>All adults consistently use visuals (e.g. objects, signs or symbols) to support spoken language, depending on the child's current level of understanding.</p> <p>Access to staff training on the use of visuals to support communication.</p> <p>Use of tracking and monitoring tools specifically measuring the development of social communication and interaction skills development, which are used to develop SMART targets and monitor progress (e.g. Observation Profile included within Autism in the Early Years resource).</p> <p>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).</p>	<p>An individualised programme is in place informed by a specialist multi-agency team (e.g. ISCAN Speech and Language Therapy, Educational Psychology, Occupational Therapy).</p> <p>Opportunities to build relationships through play, for example using Intensive Interaction: an approach designed to help develop pre-communication skills such as joint attention through sensory and shared play activities.</p> <p>Social Stories help to develop social understanding by using short descriptions of a particular situation, event or activity, that include specific information about what to expect in and how the child should respond.</p> <p>Use of a structured interventions such as Identiplay to teach play skills.</p> <p>All adults consistently use visuals (e.g. objects, signs or symbols) to support spoken language, depending on the child's current level of understanding.</p>

SKILL	GETTING ADVICE	GETTING HELP	GETTING MORE HELP
<p>Social Communication Skills</p> <p><i>Children with social communication needs can often experience sensory processing differences – please also see the Sensory and/ Or Physical Needs section</i></p>	<p>Changes to the environment to support understanding of expectations. The TEACCH approach is a way to provide high levels of visual structure and clarity to support children's understanding of the environment, expectations and activities. The use of 'finished boxes' and 'work stations' to help children understand the difference between work/ adult-led activities and play are often helpful. It is not a single method and can be used alongside other approaches.</p> <p>Use of circle/carpet time help children to develop their social, attention and listening skills.</p> <p>Sensory breaks incorporated into the day (e.g. access to quieter spaces, movement breaks and use of sensory resources).</p>	<p>Support to engage in group activities. Attention Autism is a group intervention model which aims to develop natural and spontaneous communication through the use of visually based and highly motivating activities.</p> <p>Inclusion in small group activities to work on turn taking and social skills, such as Time to Talk, a 40-session programme for children aged 4-8 that teaches and develops oral language and social interaction skills with Ginger the Bear.</p> <p>Teaching of play skills alongside peers who can act as a good role model (e.g. Play Bank; the Educational Psychology Service can provide further information).</p> <p>Targeted support to understand emotions in others and develop self-regulation of own emotions (e.g. mirror play, discussion of emotions during stories/ puppet play, use of feelings visuals or Bear Cards).</p>	<p>Augmented communication systems are in place to support communication development such as: PECS (Picture Exchange Communication System) where picture cards are used to communicate simple needs initially but work towards more complex sentence structures; signing, or high-tech communication systems and software (such as Proloquo2Go).</p> <p>Environmental audits are used to identify aspects of the environment that might lead to increased anxiety, arousal or sensory sensitivity, with monitoring of behavioural responses and adjustment to support plans / adult responses as needed (e.g. use of ABC Charts – example 1, example 2).</p> <p>Work with a group of key staff to identify an individual profile of the child and 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). This should form part of a robust risk assessment which is regularly reviewed to support any behaviours associated with difficulties heightened anxiety, sensory sensitivity and managing feelings (see Getting Risk Support section).</p>

SKILL	GETTING ADVICE	GETTING HELP	GETTING MORE HELP
<p>Selective Mutism (Selective Speaking; speaking fluently in some situations but remaining silent in others)</p>	<p>Staff have an awareness of selective mutism and understand it is an anxiety-based need. Key staff have access to information about how to support children with selective mutism for example from the SMiRA website.</p> <p>Check the Dos and Don'ts Guide to providing an anxiety-free environment and Pre-School and Nursery Guidelines developed by www.selectivemutism.org.uk.</p> <p>Provide a communication safe environment:</p> <ul style="list-style-type: none"> • Identify key adult for the child to build rapport and confidence with. Focus on discovering their interests and strengths and having fun together. • Be patient. Provide opportunities to speak without putting pressure on the child to speak and do not 'over' react if the child does speak. • Make comments rather than ask questions. • Provide non-verbal ways to respond and join in during group activities (e.g. using music instruments or actions alongside words). • Encourage participation through 'show' rather than 'tell'. • Use of question starters such as 'I wonder...' • Encourage joint activities with a quiet child. • Provide traffic lights or 'ask for help' cards to allow support to be requested non-verbally. • Use informal ways to support the child's confidence to speak. 	<p>Seek multi-agency support from outside services and work with the child's family to devise an individualised support plan.</p> <p>Refer for assessment of core speech and language skills if concerned/unsure of skills.</p> <p>Join the Greater Manchester Selective Mutism Network.</p> <p>Use of the 'Sliding in Technique' detailed in The Selective Mutism Resource and included on the SMiRA website: http://www.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.</p> <p>Carefully support the child's transition to school.</p> <p>Further information about selective mutism can be found at www.selectivemutism.org.uk.</p>	

SENSORY AND/OR PHYSICAL

SKILL	GETTING ADVICE Classroom adjustments 	GETTING HELP SEN support interventions 	GETTING MORE HELP Personalised interventions 
General	<p>Overall Early Years setting approach.</p> <p>Use of EYFS curriculum/ screeners.</p> <p>Specific staff teaching/ support.</p> <p>Set-up of indoor and outdoor play areas.</p> <p>Involvement with parents/ carers and child.</p> <p>Link with assess-plan-do-review-learn.</p> <p>Staff training and awareness in all areas.</p> <p>Awareness of key documents such as SEN Code of Practice, Equality Act, Children and Families Bill</p>	<p>Overall Early Years setting classroom approach.</p> <p>Whole setting staff training.</p> <p>Use of EYFS curriculum/ screeners/ assessment.</p> <p>Targeted teaching/ support, including targeted group interventions.</p> <p>Understanding of effective differentiation.</p> <p>Involvement with parents/ carers and child.</p> <p>Link with assess-plan-do-review-learn.</p>	<p>Overall Early Years setting approach.</p> <p>Use of EYFS curriculum/ screeners/ assessment.</p> <p>Request involvement from external services e.g. Occupational Therapy (OT), Tameside Pupil Support Service, Educational Psychology Service (EPS) to create more personalised curriculum, including specialist advice and support, individual interventions.</p> <p>Staff with increasing knowledge and experience/ specialist teachers.</p> <p>Capacity building and training for Nursery/ Pre-school staff using support from the Area SENDCO and online sources e.g. NASEN.</p> <p>A more individualised programme of support/ highly personalised EYFS curriculum including specific staff teaching/ support, including targeted small group and individual interventions.</p> <p>Individualised set-up of play area e.g. taking into account accessibility, safety and environmental stimulation.</p>

SKILL	GETTING ADVICE	GETTING HELP	GETTING MORE HELP
Visual Impairment	<p>Concerns about a child's vision should be raised with parents/ carers and a referral should be made to the local Orthoptist and Visual Impaired Team (Tameside Pupil Support Service).</p> <p>Information to aid understanding of visual impairment should be shared with parents/ carers and staff.</p> <p>Develop staff awareness of the child's needs, SEND guidance, specialist support and available resources.</p> <p>Staff to be aware that the child may be experiencing visually related learning difficulties and provide support to enable them to plan appropriately. Information relating to learning and play, social inclusion, mobility and independence and appropriate Early Years settings can be found at RNIB.</p> <p>Incorporate ideas for the inclusion of children with sight loss in Early Years settings, using the Early Years Foundation Stage (EYFS) curriculum.</p> <p>Create a 'clutter-free' environment. Pay attention to layout of furniture, seating and adult position in the setting. It may be helpful to complete an environmental audit of the setting including indoor and outdoor areas.</p> <p>Creation of a One-Page Profile which is shared with all staff.</p> <p>Assessment by Qualified Teacher of children with Visual Impairments (QTVI) and report distributed to key staff.</p>	<p>Early Years practice which facilitates access to the EYFS curriculum, social/ emotional development and participation. Draw upon information contained within specialist websites, such as RNIB.</p> <p>Development tracked using the Oregon Project or Developmental Journal for Children with Visual Impairments.</p> <p>Setting must access specific VI related training provided by the VI Team (Pupil Support Service).</p> <p>Access to wider staff training e.g. Early Developmental Support Programme, e-learning for Health Care and RNIB.</p> <p>On-going assessment, advice, support, monitoring and training from a QTVI, up to 6 hours annually.</p> <p>Staff must implement advice as suggested by the Qualified Teacher of the Visually Impaired (QTVI).</p> <p>Provide access to a quiet space for VI Teacher to work with the child.</p> <p>Curriculum plan reflects levels of achievement and must include an individually focused Play Plan.</p> <p>Teaching methods based on experiential and tactile learning with a strong verbal emphasis, which facilitate access to the curriculum and participation.</p> <p>Opportunities for individual and small group work.</p> <p>Opportunities for explanation, and exploration of resources before they are used in an activity e.g. through pre-teaching</p>	<p>Home visits as necessary, ongoing support for parents/ carers and training to be attended.</p> <p>QTVI Liaison with the local Eye Hospital.</p> <p>QTVI to make referral to a local Low Vision clinic.</p> <p>Parents/carers to use the Developmental Journal for Children with Visual Impairments.</p> <p>Opportunities will be provided for the child/ parents/ carers to meet other students with VI in the local area (e.g. Henshaws).</p> <p>VI Team to attend all review/ planning meetings.</p> <p>On-going assessment, teaching, advice, support and monitoring from a QTVI, to work with the child, their family and with setting staff.</p> <p>Allocated key person with time to adapt resources/ attend training and conduct individual work.</p> <p>Regular planning sessions between QTVI and key person.</p> <p>Planning based on previous visual performance and/ or prognosis of possible changes.</p> <p>30 hours (20 annual sessions) from a QTVI to provide all the teaching and support outlined above.</p> <p>Advice, assessment, teaching, support and programme of work from Mobility Officer regarding mobility and independence skills; frequency based on assessed need, block of work equivalent to weekly contact.</p>

SKILL	GETTING ADVICE	GETTING HELP	GETTING MORE HELP
Visual Impairment	<p>Recommendations of the report implemented in the setting to enable full inclusion within the setting.</p> <p>The Early Years setting must monitor progress in this respect.</p> <p>Learning materials must be selected and prepared for their clarity.</p> <p>Make basic adaptations to activities and materials to facilitate access for a visually impaired child e.g. oral descriptions of visual materials, saying child's name before asking question. Information about adapted resources is available at Sight Advice.</p> <p>Low level adjustments may need to be made to activities e.g. reducing length of visual tasks. Break up visually demanding tasks with other activities. Standard adjustments advised include:</p> <ul style="list-style-type: none"> • Non cursive, bold size 14 font • Increased letter spaces • Clear images in books • Use of high contrast colours e.g. cream background and black text (in print and on screen) <p>Teaching methods which facilitate access to the EYFS curriculum, social/ emotional development and class/ group participation.</p> <p>ICT is used to increase access to the curriculum, where appropriate e.g. iPads for reading.</p> <p>Use of information relating to a range of resources and agencies, within the Local Authority and the wider community e.g. Victaparents and Look UK and RNIB.</p>	<p>Specific interventions may be necessary and advice should be followed from QTVI.</p> <p>Opportunities for group interventions to develop social inclusion with peers e.g. Circle of Friends.</p> <p>Environmental adaptations: must have attention to seating and lighting in the setting.</p> <p>Accessibility of outside environment including edges clearly marked.</p> <p>Access to equipment, including the use of iPad, as necessary. Further information about assistive technology can be found at Sight Advice, RNIB, Living Made Easy.</p>	<p>The report written by a QTVI in conjunction with the Mobility specialist will be shared with all stakeholders and will include information as outlined in the Universal offer.</p> <p>Staff member to become a Vision Champion within the setting by completing a training course offered by the Sensory Support Team or companies such as Positive Eye.</p> <p>Training for staff on Cerebral Visual Impairment (CVI) along with implications for learning and necessary resources.</p> <p>Input from a QTVI to work with the child and with Early Years staff, and to facilitate contact with parents, as above.</p> <p>Access to assistive technology and equipment such as an iPad, a Braille etc.</p> <p>Access to VI Service technician, as appropriate.</p> <p>Opportunities for tactile exploration of the environment and resources. Pre and post tutoring of activities.</p> <p>Presentation of learning materials in alternative formats, including Braille, tactile diagrams, audio/ speech.</p> <p>Staff to facilitate a pre-Braille learning programme as advised by the QTVI.</p>

SKILL	GETTING ADVICE	GETTING HELP	GETTING MORE HELP
Visual Impairment	<p>Involvement of parents/ carers and provision of information relevant to them e.g. using resources available at RNIB, Vision UK, Guide Dogs.</p> <p>Considerations for good transitions between rooms, and how to plan and prepare for these e.g. opportunities to walk with an adult, repeating the process, moving towards more independence, talking the child through the route, noting key points, textures or space to feel for.</p> <p>Development of a transition plan for children starting pre-school or moving between Nursery and Reception. An example plan can be found at twinkl.</p>		
Hearing Impairment	<p>Concerns about a child's hearing should be raised with parents/ carers and a referral should be made to the local Audiologist and Hearing Impaired Team (Learning Support Service).</p> <p>Information for staff and parents/ carers can be found at NDCS and Action Hearing Loss.</p> <p>Awareness of the child's needs and how key developmental milestones are affected by hearing loss, particularly communication, language acquisition and play and fine and gross motor skills N.B. Some forms of hearing loss are associated with balance and delayed milestones e.g. late to walk/ sit/ balance issues.</p> <p>Creation of a One-Page Profile which is shared with all staff.</p> <p>Assessment by Qualified Teacher of the Deaf (QToD) and report distributed to key staff.</p>	<p>Teaching practice which facilitates access to the curriculum, social/ emotional development and nursery participation.</p> <p>Development tracked and monitored using the Early Support guidance.</p> <p>Involve the HI Team in completion of baseline assessments and development of Play Plans.</p> <p>Setting must access specific deaf related training provided by the Hearing Impaired (HI) Team.</p> <p>Access to wider training for staff e.g. NDCS.</p> <p>Staff must implement advice as suggested by the Qualified Teacher of the Deaf (QToD).</p> <p>Provide access to a quiet space for Qualified Teacher of the Deaf/ specialist TA/ audiologist session/ visit.</p>	<p>Key worker from the HI Team identified from initial audiology referral, who will link with the setting, parents/carers and professionals.</p> <p>Home visits, as required, arranged in agreement with families for newly diagnosed deaf babies up to school entry.</p> <p>Opportunities for parents/carers, children and extended family to attend a local High Hopes parent support group.</p> <p>Attendance at audiology clinic appointments by a QToD to support families through diagnosis and hearing aid fitting.</p> <p>Support by a QToD through the referral process for cochlear implantation.</p> <p>Access to Radio Aid equipment for use at home and nursery until school entry.</p>

SKILL	GETTING ADVICE	GETTING HELP	GETTING MORE HELP
Hearing Impairment	<p>Recommendations of the report implemented in the setting to enable full inclusion within the setting.</p> <p>The Early Years setting must monitor progress in this respect.</p> <p>Make basic adaptations to activities and materials to facilitate access for a hearing impaired child. Follow advice about how to support and include young children who are deaf or hearing impaired in the EY setting.</p> <p>Seek advice from the HI Team on effects of hearing loss and classroom strategies.</p> <p>Carry out an assessment of room acoustics and make reasonable adjustments by adapting the physical environment and reducing background noise.</p> <p>Staff awareness of areas of potential risk associated with childhood hearing impairment e.g. social and emotional impact, reduced opportunity for incidental learning.</p> <p>Involvement of parents/ carers and provision of information relevant to them. Use resources available at Council for Disabled Children.</p> <p>Considerations for good transitions between rooms, and how to plan and prepare for these e.g. allowing the child to have extra visits to the new setting and ensure transfer of information.</p> <p>Development of a transition plan for children starting pre-school or moving between Nursery and Reception. An example plan can be found at twinkl.</p>	<p>Curriculum plan reflects levels of achievement and must include individually focused Play Plan.</p> <p>Specific interventions for language development, speaking and listening e.g. Lip reading, Auditory Verbal Therapy, Natural Aural Approach, Cued Speech, Sign Language, Total Communication Approach.</p> <p>Opportunities for explanation, clarification and reinforcement of session content and language.</p> <p>Must have attention to seating, lighting and acoustics of the setting.</p> <p>Opportunities for individual and small group work in a quiet room.</p> <p>A key person, who is trained in working with children with a hearing impairment and understands hearing equipment, to:</p> <ul style="list-style-type: none"> • Reinforce session content • Deliver modified EYFS curriculum activities • Support language development • Daily check of child's hearing aids <p>Seek advice from other professionals e.g. Speech and Language Therapist, Cochlear Implant Programmes, as appropriate.</p> <p>Use of equipment and technology, including: use of radio aids/ soundfield speaker systems as appropriate to meet assessed needs. Also seek advice about how to link equipment to Interactive White Boards, computers, iPads etc.</p>	<p>Advice and guidance on suitable technology and apps e.g. NDCS.</p> <p>Specifically devised programmes targeting attending, listening and vocalising on the advice of the HI Team and following Early Years research findings e.g. NDCS.</p> <p>Clear monitoring and recording process e.g. using Early Support Monitoring Protocol for deaf babies and children or MacArthur-Bates Communicative Development Inventories (CDIs).</p> <p>Liaising with other, external agencies for advice and guidance to offer a multi-agency approach.</p> <p>Regular reviews of nursery-based interventions to ensure progression and adaption, if necessary.</p> <p>Qualified Teacher of The Deaf providing individual support sessions based on National Sensory Impairment Partnership (NATSIP) criteria.</p> <p>Access to support from an additional person in the setting to facilitate and support, providing opportunities to model:</p> <ul style="list-style-type: none"> • Communication • Language • Play skills • Inference • Circle time • Semantic links • Theory of mind • Pragmatics

SKILL	GETTING ADVICE	GETTING HELP	GETTING MORE HELP
Hearing Impairment			Access to a Communication Support Worker (CSW) with appropriate British Sign Language (BSL)/ communication skills, when advised.
Fine and Gross Motor	<p>Concerns about a child's physical needs should initially be raised with parents/ carers and discussed with relevant professionals e.g. Health Visitor. Information from a child's 2 year old check may be available.</p> <p>Awareness of a child's physical needs and how these may impact on developmental milestones particularly in communication, play and socialisation.</p> <p>Use observation in a variety of settings and contexts e.g. home visits, indoor and outdoor play to identify any particular barriers that affect the child's access to play and participation.</p> <p>Discussions with parents/ carers to identify strengths and any needs can be helpful for planning. Early Years practice which facilitates access to the EYFS curriculum, inclusion and participation.</p> <p>Creation of a One Page Profile which is shared with all staff.</p> <p>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 setting.</p>	<p>Access to support from an additional key person in the setting to facilitate access to the EYFS curriculum, help the child manage their needs, or move with safety around their environment.</p> <p>Flexible support in the setting to include personal care e.g. dressing and toileting.</p> <p>Ensure access to additional and specialist equipment, as advised by professionals such as Occupational Therapists (OT) and Physiotherapists (PT).</p> <p>Ensure all staff in the setting receive relevant training e.g. manual handling.</p> <p>Provide the child with additional time to complete activities.</p> <p>Use of Now and Next or visual activity timeline to increase motivation and reinforce achievements.</p> <p>Use appropriate size and height chairs and tables to encourage a correct posture and to support fine motor function and writing.</p> <p>Should appropriate height tables and chairs not be possible for all activities, consider support for the child's feet.</p> <p>Provide handrails on stairs. Consider grab bars or rails within the toilet area or provide access to a disabled toilet.</p>	<p>Seek advice from the appropriate health profession should the child have a diagnosis that affects their participation in play and physical activities.</p> <p>Request involvement from external services e.g. Occupational Therapy (OT)/ Physiotherapy (PT) Services.</p> <p>Staff to access training provided by Pupil Support Service e.g. fine motor skills, gross motor and co-ordination skills training.</p> <p>Inclusion of OT/ PT on any reviews and planning meetings for the child.</p> <p>Ensure any suggested specialist advice from OT/ PT is shared with all staff, parents/carers and incorporated into the child's Play Plan.</p> <p>Settings must allocate the key person with time to adapt resources/ attend training and conduct individual work.</p> <p>SENDCo to support the key person in planning and using differentiated activities and more specialist strategies and resources to support the child.</p> <p>Incorporate moving and handling plans and care plans into planning, as advised by professionals. Ensure the plans are meeting need. Request a review should any aspects change.</p>

SKILL	GETTING ADVICE	GETTING HELP	GETTING MORE HELP
Fine and Gross Motor	<p>Consider the organisation of play areas and make sure that it enables children to move freely between them and allows for sufficient playing space. Implement an accessibility plan to move around the setting and give thought to if an individualised fire evacuation plan is required.</p> <p>Provide additional equipment or resources such as sloping board, adapted cutlery/ chairs/ scissors and pencil grips etc.</p> <p>Include different physical literacy and physical play activities into as many aspects of the EY curriculum as possible to support specific skill development and targets.</p> <p>Consider activities which focus on spatial awareness, planning and body awareness.</p> <p>Consider whether the child is developing hand dominance and complete activities to support and encourage hand dominance.</p> <p>Monitor the child's performance and preference.</p> <p>Take account of potential fatigue and reduce the pace of structured sessions and provide opportunities for breaks and rest.</p> <p>Use technology to support early learning including apps e.g. Dexteria Jr. Blobble Write. Hairy Letters and LetterSchool.</p> <p>Teach sequencing skills for everyday tasks to increase independence e.g. putting on clothes in the right order etc. Use of visual timeline can assist with dressing sequence.</p>	<p>Consider the use of a ring reducer for toilets as well as support for feet to promote correct posture and feeling of safety.</p> <p>Ensure the child is able to reach and use the equipment and facilities in the setting, such as wash basins, taps and pegs.</p> <p>Provide additional resources e.g. sloping board, adapted cutlery, bowls, cups, scissors and pencil grips etc.</p> <p>Provide a peg for the child with a visual prompt of their name and relevant picture to store their book bag, coat, spare clothes etc.</p> <p>Provide the option for the child to sit on a chair rather than on the floor at carpet time/ group sessions. Allow a peer or peers to do the same, if appropriate.</p> <p>Consider trialling a move 'n' sit or disc 'o' sit to improve sitting posture and attention and concentration.</p> <p>Contact other EY settings to observe and share good practice.</p> <p>Set up an indoor or outdoor obstacle course using equipment of different heights to encourage a range of movements e.g. climbing, crawling, tummy wriggling, rolling and sliding.</p> <p>Support children and their families to access universal and targeted services as appropriate in their local Children's Centres and Local Offer.</p>	<p>Ensure any specialist equipment continues to meet the child's needs and contact relevant OT/ PT/ liaison with family regarding any repairs or alterations.</p> <p>Carry out risk assessments on a regular basis and incorporate any actions and strategies into planning.</p>

SKILL	GETTING ADVICE	GETTING HELP	GETTING MORE HELP
Fine and Gross Motor	<p>Attach paper to table, easel or wall with masking tape when mark making to assist the child and improve shoulder stability.</p> <p>Incorporate pre-handwriting/ hand strengthening activities into daily plans e.g. using playdough, thickened sand, elastic bands, tying skills, tweezers, peg boards, threading, funky fingers and finger gym and tennis ball mouth.</p> <p>Consider completing a gross motor task prior to a focused or challenging fine motor task as this can facilitate improved concentration and focus.</p> <p>Consider if avoidance of activities is evident. If a child is struggling with fine/ gross motor skills, they may avoid these activities especially during free play.</p> <p>Ideas for whole setting interventions:</p> <ul style="list-style-type: none"> • Write From the Start (Teodorescu Perceptuo-Motor Programme) • Squiggle Whilst You Wiggle • Ready Steady Write • Dough Disco • Write Dance • Motor Skills United • Clever Fingers • Handwriting Without Tears • Keyboarding Without Tears <p>Considerations for good transitions between rooms, and how to plan and prepare for these e.g. opportunities to walk with an adult, repeating the process, moving towards more independence.</p>	<p>Opportunities for individual and small group fine motor skill development work using play equipment e.g. Aqua beads, chopsticks game, Lego, iron on beads and jigsaws.</p> <p>Specific fine and gross motor skill interventions (previously listed) that may be carried out in small groups and targeted towards a child's needs.</p>	

SKILL	GETTING ADVICE	GETTING HELP	GETTING MORE HELP
Fine and Gross Motor	<p>Talking the child through the route, noting key points, textures or space to feel for. Advice for transition planning can be found at: SEN and Disability in the Early Years: A Toolkit</p> <p>Development of a transition plan for children starting pre-school or moving between Nursery and Reception.</p>		
Sensory	<p>Information to aid understanding of a child's sensory needs should be shared with parents/ carers and staff and can be found at: Early Support Information about Multi-Sensory Impairment and A Practical Approach at Home for Parents and Carers Making Sense of Sensory Behaviour.</p> <p>Whole staff training</p> <p>Creation of a One Page Profile which is shared with all staff.</p> <p>Introduce new activities or play equipment in a multi-sensory way to the child e.g. by showing, listening, saying, looking, writing, drawing.</p> <p>Use observation in a variety of settings and contexts e.g. home visits, indoor and outdoor play to notice how the child responds and make changes to environmental aspects such as lighting, noise level, smell and tactile materials.</p> <p>Consider creating low stimulus areas in the setting, using neutral backgrounds for displays, minimising hanging items in the carpet area and paying attention to the colours of equipment and décor.</p>	<p>Increase activities meeting the child's sensory needs in the day, e.g. with regular movement breaks, sensory play activities/ circuits, use of a beanbag or specific chair, weighted blanket or pop up tent.</p> <p>Consider providing a small calm, quiet space, e.g. a small pop up tent or room with reduced noise and lighting.</p> <p>Consider providing a workstation and/or set up a low stimulation area for targeted small group or individual activities. Use a privacy board on a group table or a personal table with few distractions but informative visual information and support.</p> <p>If appropriate, complete an initial sensory processing audit (e.g. Autism Education Trust's Sensory Assessment).</p> <p>Increase the child's tolerance of certain messy play activities slowly e.g. start off with dry sand and slowly add liquid, use a favoured toy in the sand tray etc.</p> <p>Implement strategies and advice given by professionals, such as Occupational Therapists and the Learning Support Service.</p>	<p>Carry out sensory audits and implement appropriate modifications in the setting.</p> <p>Devise a bespoke sensory diet for the child using the sensory assessment checklists and implement it. Continue to liaise with any Health Professionals, as appropriate, and involve parents/carers in planning and reviews.</p> <p>Seek advice from the appropriate health professional should the child have a diagnosis that affects their participation in play and physical activities. More specialist advice can be found online.</p> <p>SENDCo to support the key person in planning and using differentiated activities and more specialist strategies and resources to support the child.</p> <p>Ongoing monitoring and reviewing of specific strategies and advice given by professionals, such as Occupational Therapists and the Learning Support Service.</p> <p>Staff and parents/carers to access further training to develop increased understanding of sensory needs and behaviours.</p> <p>Access to sensory room or space.</p>

SKILL	GETTING ADVICE	GETTING HELP	GETTING MORE HELP
Sensory	<p>Provide an area such as a calm, quiet space by zoning off or using a small pop up tent.</p> <p>Talk with parents/carers about the child's preferences and provide materials and play equipment that they enjoy using at home.</p> <p>Have a corner/area/box or bag with sensory activities and toys that the child can use at any time.</p> <p>Include ideas and resources such as:</p> <ul style="list-style-type: none"> • Move 'n' sit/wobble cushions • Busylegz footrest • Movement breaks • Fiddle/fidget toys • Ear defenders <p>Include specific activities to provide sensory feedback for the child e.g. lifting and tidying outdoor play equipment away, putting on a backpack, using a weighted blanket.</p> <p>If children are unwilling to touch certain play materials, offer alternatives such as tools in the sand, zip bags filled with messy play items, cling film over Play Dough etc.</p> <p>Considerations for good transitions between rooms, and how to plan and prepare for these e.g. opportunities to walk with an adult, repeating the process, moving towards more independence, talking the child through the route, noting key points, textures or space to feel for. Advice for transition planning can be found at: SEN and Disability in the Early Years: A Toolkit.</p> <p>Development of a transition plan for children starting pre-school or moving between Nursery and Reception.</p>	<p>Training to develop staff and parents/carers understanding of sensory needs.</p> <p>Plan individual and small group activities focusing on sensory play such as resistance activities e.g. pushing heavy play equipment, leaning into a wall, using resistance bands and peer massage.</p> <p>Increased use of sensory resources, as appropriate e.g. fidget/chew toys (Chewelry), putty, Therabands, weighted equipment and ear defenders etc. Consider adapting unstructured provision in the setting.</p>	

Glossary

Social Emotional and Mental Health

Name	Description	Cost
Ages and Stages Questionnaire (3rd edition)	ASQ-3 is a developmental and social-emotional screening tool for children from birth up to the age of 5 ½ years. It can be completed by parents and early years staff within about ten minutes and takes two minutes to score. It can help to identify strengths and needs and figure out next steps.	£210
Attention and Listening skills programme	The Attention and Listening skills programme is a training package developed by Salford Educational Psychology Service , which includes staff training and a colour coded activity pack, which practitioners can use to plan group sessions around developing joint, sustained and focussed attention. The programme highlights the importance of early attention skills for learning, language, play and social development and supports Early Years Practitioners' understanding of attention skills and strategies and group activities they may use to develop young children's attention skills (2-6 years). The training package can be accessed via Tameside Educational Psychology Service .	Available upon request Contact Tameside EPS , for further information on their training package and intervention delivery
Autism Education Trust's Sensory Assessment	Autism Education Trust's Sensory Assessment is a sensory profile checklist which helps practitioners assess and create an environment which enables the participation of those with autism.	Free
Boxall Profile	The Boxall Profile is an online resource for the assessment of pupils' social, emotional and behavioural development in all educational settings. The Boxall Profile is a two-part assessment tool designed to track the progress of cognitive development and behavioural traits of pupils through their education. The two-part checklist, which is completed by staff, is quick and identifies the levels of skills the pupils possess to access learning.	Minimum: Tokens for individual users (1 token = 1 assessment and 1 learning plan) aimed at users looking to assess a small number of pupils in their setting. 20 tokens for £30.00+ VAT Maximum: Yearly subscription for organisations Up to 300 pupils £325.00+ VAT. 301-600 pupils £500.00+VAT.601-2000 pupils £900.00+VAT
Elklan	Elklan have a range of courses to suit you whether you are an early years worker, teacher or assistant working with children with Speech, Language and Communication Needs (SLCN). Their courses can enable you to develop the speech and language skills of ALL children but especially those with speech and language difficulties. Delivered by local tutors throughout the UK they give practical advice and strategies that are also suitable for children with English as an additional language and other special educational needs.	Price can vary according to provider If supplied by Elklan the current fee is £395 plus VAT to include the accreditation fee and the book The current fee for eLearning courses is £350 plus VAT
Emotion Coaching	Emotion Coaching is a whole school approach, which focuses on using emotional validation strategies when a child is upset, angry or distressed. Through empathetic engagement the child's emotional state is verbally acknowledged and validated, promoting a sense of security and feeling 'felt'. This activates changes in the child's neurological system and allows the child to calm down, physiologically and psychologically.	Contact Tameside EPS , for further information on their training package and intervention delivery Lots of free resources available online

Name	Description	Cost
Five to Thrive	Five to Thrive is a training package based on attachment theory. Resources are available online.	Pricing available on request
Incredible Years	Incredible Years parent training intervention is an evidence-based series of programmes focused on strengthening parenting competencies (monitoring, positive discipline, confidence) and fostering parents' involvement in children's school experiences in order to promote children's academic, social and emotional competencies and reduce conduct problems. The Parent programmes are grouped according to age: BASIC Early Childhood (3-8 years) and BASIC School-Age (6-12 years). You can signpost parents to the Incredible Years training .	Freely available for suitable parents/ carers for whom an Early Help assessment has been completed
Intensive Interaction	Intensive Interaction is an approach designed to help develop pre-communication skills such as joint attention through sensory and shared joy activities.	Can be delivered with no resources, but a range of resources can be purchased from £10 - £100
Mindfulness in the Early Years	There are several resources available to support mindfulness within the Early Years . This book includes a range of activities and audio recordings to support mindfulness in the early years setting.	£29.95 Contact Tameside EPS , for further information on their training package and intervention delivery
Mosaic approach	The Mosaic Approach can support you to gather the views of very young children.	£47.98 for resource book
Northamptonshire Baby Room Project	A 3 part training session with two follow up visits to your setting can be offered by the Educational Psychology Service. This course focuses on baby brain development, emotional development and playing and laughing.	Contact Tameside EPS , for further information on their training package and intervention delivery
R-Time	R-Time is a structured programme that builds and enhances relationships for children from Early Years to the end of Primary School.	£75 main manual £3 - £35 for additional resources
Reducing Anxiety Management Plan (RAMP)	Information about developing a RAMP . There is also a resource manual to support with this.	Free online resources Textbook is £41.99 Contact Tameside EPS , for further information on their training package and intervention delivery
Smile Score	SMILE score is a tool that can help people of any age to live better.	Free
The Strengths and Difficulties Questionnaire (SDQ)	A brief behavioural screening measure for early detection of strengths and emotional problems in pupils and adolescents. It covers five key areas of emotional development: emotional symptoms, conduct problems, hyperactivity/inattention, peer relationship problems, pro-social behaviour. A full can profile to be gathered as it includes views from parents and staff as well as the pupil or young person.	Free
The Bear Cards	The Bear Cards includes games activities that provide a safe and fun way to explore and engage in conversations about feelings.	£23.40

Name	Description	Cost
The Blob Tree	The Blob Tree is a tool to explore children's feelings in a fun and visual way.	£5.00 digital download
Theraplay ® type activities	Thera-play is an intervention to build attachment, self esteem, trust and joyful engagement. Level 2 and Level 2 training course are available. Thera-play type activities can be accessed through the practical guide .	Pricing available on request Resource book available on Amazon for £27.99
Theraputty	Theraputty is often used by occupational therapists to strengthen hand movements. Some children may also find this resource helps them to regulate themselves.	Available online £14
Wellcomm	WellComm Early Years and the new WellComm Primary toolkits enable you to identify children needing speech and language support, and come with an age-appropriate 'Big Book of Ideas' providing a total of around 150 instant, play-based activities.	£449 - EY or Primary full set, £799 EY and Primary
Zones of Regulation	Zones of Regulation is an intervention that supports the development of self-regulation and emotional control.	Free resources on website Contact Tameside EPS , for further information on their training package and intervention delivery

Cognition and Learning

Name	Description	Cost
Attention and Listening Skills programme from the Salford Educational Psychology Service	The Attention and Listening skills programme is a training package developed by Salford Educational Psychology Service , which includes staff training and a colour coded activity pack, which practitioners can use to plan group sessions around developing joint, sustained and focused attention. The programme highlights the importance of early attention skills for learning, language, play and social development and supports Early Years Practitioners' understanding of attention skills and strategies and group activities they may use to develop young children's attention skills (2-6 years). The training package can be accessed via Tameside Educational Psychology Service .	Available upon request Contact Tameside EPS , for further information on their training package and intervention delivery
Celebratory Approach to SEND Assessment in the Early Years	A Celebratory Approach to SEND Assessment in the Early Years - Online toolkit is an assessment tool for children with special educational needs and/or disabilities. This assessment was developed by a group of Early Years professionals and was funded by the Department for Education.	Free
Early Support Developmental Journal	The Early Support Developmental Journal is designed for families who want to find out more about early child development and how they can track change and progress over time, to best support their child's development and learning.	Free
The Engagement Profile and Scale	The Engagement Profile and Scale is a classroom tool , which allows educators to focus on the child's engagement as a learner and create personalised learning pathways.	Free

Name	Description	Cost
EYFS tracker	The EYFS Tracker is a web-based recording system, which helps Early Years settings record and analyse children's progress through the Early Years Foundation stage (from birth to reception).	On request
Jolly Phonics	Jolly Phonics is a 'fun and child centred approach' to teaching literacy through synthetic phonics. This program uses a multi-sensory method to facilitate engagement and letters sounds taught in seven groups.	On request
The Let's Play Guide; Emotionally Friendly Settings (EFS) manual	The Let's Play Guide: Emotionally Friendly Settings (EFS) manual takes you through the process of becoming an Emotional Friendly Setting. Within the manual it explains Salford Educational Psychology Service's training and action planning process to become an Emotional Friendly Setting.	On request
Letters and Sounds	Letters and sounds is an activity book which promotes speaking and listening skills, oral blending and phonological awareness.	Free
Supporting positive behaviour audit	The Supporting positive behaviour audit is designed to help Early Years Practitioners to evaluate the provision and practice in their setting and to promote more positive outcomes for children.	Free
Teaching Play to Children with Autism: Practical Interventions using Identiplay	The Identiplay intervention is a resource book, which helps children on the autistic spectrum and those with communication disorders, learn to play. Using play scripts, the resource seeks to promote the development of social skills, imagination, understanding and exploration.	£31.99
What to expect, when? Guidance to your child's learning and development in the Early Years foundation stage.	This booklet is designed to help parents and carers find out more about how their child is learning and developing during their first five years.	Free

Communication and Interaction

Name	Description	Cost
Attention Autism	Attention Autism is a group intervention model which aims to develop natural and spontaneous communication through the use of visually based and highly motivating activities.	Free resources on website
Attention and Listening skills programme	The Attention and Listening skills programme is a training package developed by Salford Educational Psychology Service , which includes staff training and a colour coded activity pack, which practitioners can use to plan group sessions around developing joint, sustained and focused attention. The programme highlights the importance of early attention skills for learning, language, play and social development and supports Early Years Practitioners' understanding of attention skills and strategies and group activities they may use to develop young children's attention skills (2-6 years). The training package can be accessed via Tameside Educational Psychology Service .	Available upon request Contact Tameside EPS , for further information on their training package and intervention delivery
BBC Tiny Happy People	BBC Tiny Happy People has activities and advice, for parents and professionals, to support development of communication skills.	Free resources on website

Name	Description	Cost
BLAST (Boosting Language, Auditory Skills and Talking)	The BLAST programme (Boosting Language Auditory Skills and Talking) can be used with children aged 3-5. BLAST 1 is designed for all children in nursery aged from 3-4. BLAST 2 is designed for all children in reception aged from 4-5. There are 30 consecutive sessions fully planned and resourced to deliver to a group of 4-8 children.	£215 per pack £20 per place online training course
Boardmaker	Boardmaker provides a wide range of symbol-based communication and visual supports which can be used around the environment, for displays and to create visual timetables.	Tiered pricing depending on number of installations/ packages Inclusive Solutions offer a 1 year subscription for multiple users to Boardmaker Online for £585 Boardmaker V6 is available for £203 and allows for two installations
Can Do Music	Can Do Music is a programme for children aged 3-5 years to develop communication and interaction.	Free resources on website. £90 for full day training
Chatting with Children (ICAN)	Chatting with Children is an activity pack to promote communication development of children from three to five years old.	£9.99
Colourful Stories (ELKLAN)	Colourful Stories (ELKLAN) is a visual support strategy which helps children to learn about the structure of stories and 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 the structure of a story and how to tell a story orally.	£25 plus VAT and P&P
Communication Friendly Environment Checklists (The Communication Trust)	Communication Friendly Environment Checklists help to evaluate whether the space supports communication and interaction.	Free resources on website
Communication Trust	The Communication Trust offer a range of information and tools to enable practitioners to improve their practice, many of which are free to download. Their resources include the Communication Development Pyramid. Staff can be trained in the pyramid and to understand how to adapt their communication cues so that they can 'step up' or 'step down' with a child as necessary.	Free
Early Language Builders (ELKLAN)	Early Language Builders (ELKLAN) is a practical book which provides detailed advice and activities to promote the speaking and listening skills of all children aged between 2 and 6 years.	£22
Elklan	Elklan have a range of courses to suit you whether you are an early years worker, teacher or assistant working with children with Speech, Language and Communication Needs (SLCN). Their courses can enable you to develop the speech and language skills of ALL children but especially those with speech and language difficulties. Delivered by local tutors throughout the UK they give practical advice and strategies that are also suitable for children with English as an additional language and other special educational needs.	Price can vary according to provider If supplied by Elklan the current fee is £395 plus VAT to include the accreditation fee and the book The current fee for eLearning courses is £350 plus VAT

Name	Description	Cost
Hello framework (National Literacy Trust)	The Helping Early Language and Literacy Outcomes (HELLO) improvement framework is a quality improvement tool for early years settings who want to improve their communication, language and literacy provision. The self-evaluation framework provides prompts, critical questions and resources to help settings identify their strengths and areas for development.	Requires an account to access free materials £100 per school annually to access premium CPD and resources
Hungry Little Minds (DfE)	DfE Hungry Little Minds provides simple and fun activities for 0-5 year old to increase adult-child interactions. Includes video clips and is broken down into 5 age bands.	Free resources on website
Identiplay	The Identiplay intervention helps children on the autistic spectrum, and those with specific communication disorders, learn to play. Through the use of play scripts, the approach promotes the development of social skills, understanding, imagination and exploration. By learning these skills, the child can enjoy reciprocal play with an adult or peer. The new edition of this popular book includes: - More on developing your own scripts - How to assess the child's current play skills - The adult's role in play - The use of visual/verbal support - New case studies - New scripts - Advice on taking learning outdoors - Links to resources and useful websites. A supporting CD ROM contains video clips of the intervention in practice, printable scripts and a PowerPoint presentation to facilitate professional training.	£25
Intensive Interaction	Intensive Interaction is an approach designed to help develop pre-communication skills such as joint attention through sensory and shared joy activities.	Can be delivered with no resources, but a range of resources can be purchased from £10 - £100
Jabberjacks	Jabberjacks provide a targeted intervention to develop EYFS children's speech and language and through the fun music and physical activities, the sessions also help develop their gross motor skills to an expected level for that age group.	10 week course of Jabberjacks sessions as part of classroom delivery for up to 20 children - £700
Language Link (Infant)	Infant Language Link can be used to support children (4-8 years old) with mild to moderate language and communication needs and those new to English. The pack contains 500 colourful resources, 12 planned termly language groups, 24 individual teaching plans and 52 handouts for parents.	£425 for first year, £275 subsequent years
Observation Profile (within Autism in the Early Years)	Observation Profile (within Autism in the Early Years) provides tracking and monitoring tools specifically measuring the development of social communication and interaction skills development to develop SMART targets and monitor progress.	£23.18
PECS	PECS (Picture Exchange Communication System) - an alternative / augmentative communication system in which simple picture cards are used to communicate simple needs initially but work towards more complex sentence structures), signing, or high-tech communication systems and software (such as Proloquo2Go).	£65 for training manual. Additional products £5 - £50
PODD (Pragmatic Organisation Dynamic Display)	PODD is a book or device that contains symbols and words to support communication between people with complex communication needs and their communication partners (family, friends or teaching staff).	Software bundles to create communication books start from £199
Progression in Language Structures	Progression in Language Structures helps identify appropriate sentence starters for different ages. It can be used to support EAL learners or children with delayed language skills to construct sentences by giving them a familiar structure to work from.	£13.99 (excluding VAT)

Name	Description	Cost
Proloquo2Go	Proloquo2Go . Children, teens and adults who can't speak can use this Augmentative and Alternative Communication (AAC) app for iOS as a daily communication tool and to build language skills. From the first time someone opens the app, a few taps are all it takes to start talking to the world.	£250
Quality Circle Time	Quality Circle Time helps pupils to develop their social, attention and listening skills. Additional adult support should be used to support group work (e.g. one adult leading, with another adult supporting the children's engagement).	Range of resources from £5.99-79.95
Sensory Assessment Checklist (Autism Education Trust)	Sensory Assessment Checklist (Autism Education Trust) can be used to minimise the impact of sensory distractions and sensory processing differences.	Free
Signalong	Signalong is a key word sign-supported communication system. It uses speech, sign, body language, facial expression and voice tone to link between sign and spoken word.	£22 - £60 per vocabulary bundle
Sliding in Technique	Use of the ' Sliding in Technique ' , a technique that can be used to support a child to talk in front of new people.	Free
Small Talk (The Communication Trust)	Small Talk is a guide to find out what helps children learn to talk, including developmental milestones and strategies for parents and carers.	Free
TALC (Test of Abstract Language Comprehension)	TALC (Test of Abstract Language Comprehension) is designed to help Speech and Language Therapists and practitioners to assess and develop the verbal reasoning skills of all under 5s who experience difficulty understanding what is said to them.	£45 plus P&P
Tales Toolkit	Tales Toolkit provides a package of training and small group resources to develop children's skills in story development and sequencing.	£800
Talk Boost	Talk Boost is a targeted intervention that narrows the gap between 4-7 year olds with language delay and their peers.	£500
Talking Point (ICAN) Progress Checker	These Talking Point Progress Checkers have been written by speech and language therapists, based on typical developmental milestones from 6 months – 11 years. Their resources can help you identify signs of a child who is struggling to communicate, and ensure they get the support they need.	Free
TEACCH	The TEACCH approach is a way to provide high levels of visual structure and clarity to support children's understanding of the environment, expectations and activities. It is not a single method and can be used alongside other approaches.	Free guidance on website
The Bear Cards	The Bear Cards includes games activities that provide a safe and fun way to explore and support development of emotional vocabulary.	£23.40
Time to Talk	Time to Talk has been specifically created to teach and develop social interaction skills and improve oral language skills for children aged 4 - 6 years old. Time to talk contains over 40 sessions which are designed for children who will be seen two to three times each week. The book will also help teachers to develop the basis of interaction with the help of a friendly and approachable character, Ginger the Bear who is a core feature in all of the activities.	£17 - £25 Workbook available to buy in a variety of places

Name	Description	Cost
Toddler Talk (ICAN)	Toddler Talk is an activity pack to promote communication development of toddlers from 18 months to 3 years old.	£9.99
Universally Speaking guides (The Communication Trust)	Universally Speaking guides are a series of booklets that show typical communication development for children of different ages.	Free resources on website.
WellComm	WellComm Early Years and the new WellComm Primary toolkits enable you to identify children needing speech and language support and come with an age-appropriate 'Big Book of Ideas' providing a total of around 150 instant, play-based activities.	£449 - EY or Primary full set, £799 EY and Primary
Widgit	Widgit provides a wide range of symbols which can be used around the environment, for displays and to create visual timetables.	Widgit Essentials Bundle has tiered pricing depending on number of installations £289 – 1 installation Up to £1449 for 30 installations

Sensory and/or Physical

Name	Description	Cost
A Know How Guide: The EYFS progress check at age two	A Know How Guide: the EYFS progress check at two commissioned by the Department for Education, The National Children's Bureau has produced a guidance document for practitioners on how settings provide information to parents.	Free downloadable resource on website
Approaches to support physical needs	Approaches to support physical needs is a downloadable pdf document from Cheshire East Local Authority providing ideas for physical play activities.	Free downloadable resource on website
A Practical Approach at Home for Parents and Carers Making Sense of Sensory Behaviour	A Practical Approach at Home for Parents and Carers Making Sense of Sensory Behaviour is an information resource which is designed to help staff, parents and carers become more aware of the effects of sensory information and how it may impact on life skills and behaviour. It provides further support on the thinking and planning of positive sensory experiences and how to help children best manage over or underwhelming situations.	A Practical Approach at Home for Parents and Carers Making Sense of Sensory Behaviour
Autism Education Trust's Sensory Assessment	Autism Education Trust's Sensory Assessment is a sensory profile checklist which helps practitioners assess and create an environment which enables the participation of those with autism.	Autism Education Trust's Sensory Assessment
Blobble Write	Blobble Write is an app that help young children develop their handwriting skills and learn to write letters and numbers.	£2.99
Be Sensory Aware	Be Sensory Aware is a training course which is designed to help practitioners identify and support children with a variety of sensory difficulties. The course also provides a variety of strategies to support children that can be implementing in your setting. The course is three hours and is provided by Salford Local Authority.	£25

Name	Description	Cost
Circle of Friends	Circle of Friends is an approach to enhancing the inclusion, in a mainstream setting, of any pupil or young person who is experiencing difficulties in school because of disability, personal crisis or because of their challenging behaviour towards others. Circle of Friends works by mobilising the young person's peers to provide support and engage in problem solving with the person in difficulty. This intervention is aimed at pupils aged 5 to 18 years.	Creating Circle of Friends Book £17.99 Contact Tameside EPS , for further information on their training package and intervention delivery
Clever Fingers	Clever Fingers are creative activities that have been specifically selected to support children to develop their fine motor skills.	£49-£225 plus P&P
Dexteria Jr.	Dexteria Jr is an app that supports the development of fine motor skills and handwriting readiness through hand and finger exercises. The activities are suitable for children aged 2-6 years.	£3.99
Dough Disco	Dough Disco This free and simple activity involves moulding play dough in time to music such as rolling, squeezing and flattening to develop fine motor skills.	Free
Early Support Information about multi-sensory impairment	Early Support Information about Multi-Sensory Impairment is an information resource to support parents and carers who have a child with multi-sensory impairment or who are in the process of getting a diagnosis. This resource was developed by Sense for Early Support.	Free
Funky Fingers and Finger Gym	Funky fingers and finger gym encourages the development of fine motor skills and pre-handwriting skills using play activities.	Free
Hairy Letters	Hairy Letters is an app for children aged 4-6 years learn the letters of the alphabet and trace the letter shape using their fingers.	£2.99
Handwriting Without Tears	Handwriting Without Tears curriculum provides developmentally appropriate, multisensory strategies for early writing including teaching pencil grip, letter formation, and the literacy skills that are needed for print and cursive handwriting.	Resources range from \$2.36- \$428.30
Keyboarding Without Tears	Keyboarding Without Tears is a programme that teaches pre-keyboarding and keyboarding skills to children.	Resources range from \$13.80-\$26.34
LetterSchool	LetterSchool is an alphabet tracing and handwriting app.	Free
Move 'n' sit/ 'disc 'o' sit	Move 'n' sit/ disc 'o' sit wobble cushions helps to improve sitting posture and attention and concentration.	£22.99
Motor Skills United	Motor Skills United was developed by Stockport Children's Occupational Therapy Service and consists of 70 large and small room activities to support the development of fine and gross motor skills.	£59.94 inc. VAT
One Page Profile	The One Page Profile is a template which allows practitioners to personalise support for each individual child.	Free
Ready Steady Write	Ready Steady Write is a free Occupational Therapy programme to support children to improve their ability to produce fluent, spontaneous and legible handwriting.	Free

Name	Description	Cost
SEN and Disability in the Early Years: A Toolkit	SEN and Disability in the Early Years: A Toolkit is based on the statutory requirements and the guidance from the early years, the SEN and the disability frameworks, and draws on a range of relevant practice guidance.	Free downloadable resource on website
SEN and Disability in the Early Years: A Toolkit- Section 10	SEN and Disability in the Early Years: A Toolkit is based on the statutory requirements and the guidance from the early years, the SEN and the disability frameworks, and draws on a range of relevant practice guidance. Section 10 is about transitions for SEND children: from home into an Early Years setting, changing between providers, or moving from a setting into school.	Free downloadable resource on website
Squiggle Whilst You Wiggle	Squiggle Whilst You Wiggle is a kinaesthetic approach to stimulate early writing.	£36
Write Dance	Write Dance incorporates music and dance to develop the skills needed for handwriting.	Books range from £30.99-£31.74 Training packages range from £395 to £850
Write From The Start (Teodorescu Perceptuo-Motor Programme)	Write From the Start (Teodorescu Perceptuo-Motor Programme) contains over 400 graded activities to support perceptual and fine-motor development.	£34.99

SEND Children Thrive
Matching Provision to Need

Getting Risk Support Early Years

GETTING RISK SUPPORT



Managing risk alongside a
graduated response to
skill development

Introduction

This document has been produced to be used alongside the main Special Educational Needs and Disability (SEND) Thrive document. The main SEND Thrive tool covers the Getting Advice, Getting Help and Getting More Help parts of the THRIVE framework (see diagram below). This document covers the fourth part—Getting Risk Support. It covers aspects of SEND that typically present early years settings with challenges, such as responding to self-injurious or distressed behaviours. It is intended as an initial guidance and signposting document, rather than an all-encompassing document with detailed advice of how to respond to each need. Due to the complex nature of the needs described within this document, it will be necessary to take an individualised approach to children's needs and involve relevant professionals in planning how best to respond, but we hope that this guidance will be helpful in getting you started.

THRIVE Framework



A common thread that runs through each section of this document is the importance of working closely with others in relation to risk. It is important that professionals **do not** work in silo around matters relating to safeguarding and **always** involve the Designated Safeguarding Lead within their setting. Not only does a team approach benefit the child, as there is increased opportunity for effective support, it also contributes positively to staff wellbeing, as staff working within teams around risk are more likely to feel well supported. It is essential that there are clear structures in place within all settings in relation to safeguarding children and transparent plans for managing any safeguarding concerns that are regularly reviewed alongside national and local guidance.

For any safeguarding concern or concern relating to risk, [Multi Agency Request for Service](#) can be contacted for initial advice, support and signposting.

Self-injurious Behaviours

What are self-injurious behaviours?

Self-injurious behaviours can be defined as any actions or behaviours through which a child causes harm to themselves. This might include but is not limited to: head banging or shaking; biting of the limbs; face or head slapping; hair pulling and skin picking. These behaviours can understandably cause alarm for staff supporting young children.

Why might children engage in self-injurious behaviours?

There are a number of reasons why a child might engage in behaviours that cause themselves harm and it is important for adults working with young children to consider the possible functions of the behaviour.

Considering the functions of the behaviour will help in deciding how best to support the child. The child is likely to be communicating a need through their behaviour. This may include:

- a physical need, such as feeling hungry, thirsty, tired, wet or unwell;
- a sensory need, including feeling over stimulated (e.g. too much noise, too much light, specific smells, too cold, too warm etc.) or under-stimulated (leading to sensory seeking). The behaviour may provide the child with sensory feedback that they find satisfying;
- expressing an emotion, such as feeling excited, worried, scared or frustrated; or
- expressing that they want or do not want something (e.g. a toy, game or activity).

Reducing the occurrence of self-injurious behaviours

- Explore the function of the child's behaviour by completing structured observations (see ABC Charts and STAR in the appendix).
- Work closely with the child's family to explore when/ where the behaviour occurs outside of the setting to better understand patterns and the function of the behaviour.
- Increase structure and routine – establishing clear routines and structure can help to reduce anxiety. Provide additional support around transitions throughout the day.
- Consider the sensory demands of the environment – create small, contained, break-out spaces for the child to access at planned times.
- Provide opportunities for alternative sensory experiences throughout the day that could meet the same need for the child (e.g. jumping on a trampoline, swinging, or biting on soft or edible items).
- Support communication with visuals – try to give the child other ways to communicate what they want or need (e.g. objects of reference, pictures of different items or body parts).
- Offer praise that is sensitive to the child's individual preferences (e.g. not too overwhelming if a child struggles with praise) and provide meaningful rewards for the behaviour that you want to see.

How to help when the behaviour occurs

- Reduce any demands on the child – if they have been given an activity or an instruction, come back to this when they are calm.
- Reduce uncomfortable physical or sensory stimuli where possible.
- Keep responses low key - it is important to respond very calmly, reduce your language, speak in a consistent tone and limit your expression of emotion.
- Do not ask or tell the child to stop engaging in the behaviour. If it is safe to do so, you can give the child clear instructions to redirect their behaviour

towards what you want them to do (e.g. 'Jack, hands down'). This could be supported with a visual prompt.

- Keep the child safe – create a barrier between the child and what is causing them harm. For example, provide a soft mat between a child's head and a wall, or a pillow between the child's head and hand. Offer replacement items such as a soft item to bite on.
- Gently redirect the child's attention if it is safe to do so (e.g. towards a favoured toy or activity).

Signposting and further information

It can be helpful to discuss a child's self-injurious behaviour within a multiagency group. Contact your Early Years Quality Improvement Team for support in the first instance. Specialist Learning Disability Nurses can offer support to develop individualised plans for children, based on a robust understanding of the function of the behaviour (what need it is meeting or expressing for the child).

Examples of **sensory checklists** are available online, such as Autism Education Trust (AET): www.aettraininghubs.org.uk/wp-content/

[uploads/2012/05/37.2-Sensory-assessment-checklist.pdf](#)

Out Of Sync Child Website includes links to books, articles and resources around sensory processing difficulties: <https://out-of-sync-child.com>

The National Autistic Society (NAS). (2016, October). Self-injurious behaviour. Retrieved from

www.autism.org.uk/about/behaviour/challenging-behaviour/self-injury.aspx

Distressed Behaviour

What is distressed or Physically Aggressive Behaviour?

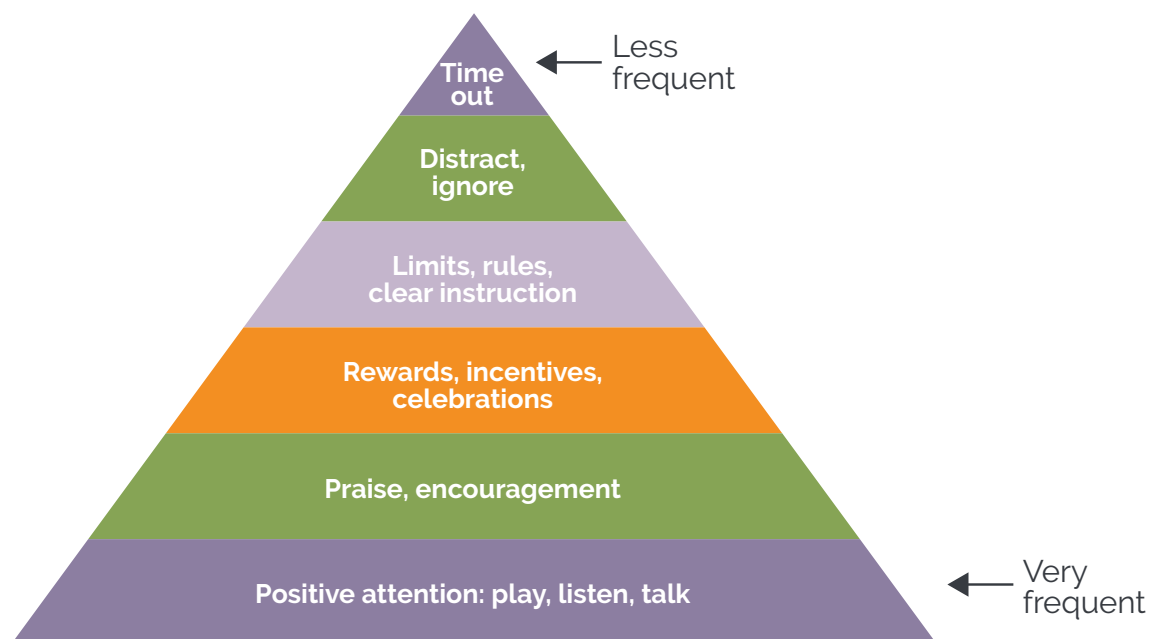
Distressed or Physically Aggressive Behaviour (PAB) can be defined as: 'behaviour causing or threatening physical harm towards others. It includes hitting, kicking and intentionally throwing items at others. It can also include breaking toys or other possessions'.

There are two types of PAB to reflect differences in the function of children's behaviours, they may be communicating a need or responding to others when feeling angry or fearful (Kaye & Eardley, 2011). PAB does not include behaviours that are typical for a child's stage of development within the early years (e.g. tantrums, refusals, biting can be typical up to around 3 years of age).

Positive behaviour management:

How do you create a positive environment? How do you make children feel important and loved? Positive behaviour management begins with **positive attention and praise**.

Children are dependent on the adults around them to **teach and model** wanted behaviours and **motivate** them to engage in those behaviours, through high levels of praise, **encouragement** and **rewarding** wanted behaviours whenever they occur, by adults looking out for, labelling and commenting on desirable behaviours. Your attention is often the biggest reward, so provide it often when unwanted behaviours aren't occurring. It is also really important to give clear limits and rules.



Why might some children display distressed behaviours?

• *'Proactive PAB': Understanding behaviour as communication*

Understanding why a child is displaying distressed behaviour can enable you to provide them with effective support and reduce the risk of the behaviour reoccurring. Some children display behaviours as they serve a function and help them to get their needs met. These needs are often difficult to express and so their behaviour serves as a method of communication. Functions of behaviour include expressing emotion/ emotional regulation; gaining social interaction with adults or peers; obtaining things or events; avoidance of people, situations, events, activities etc.; and trying to gain control or feel secure.

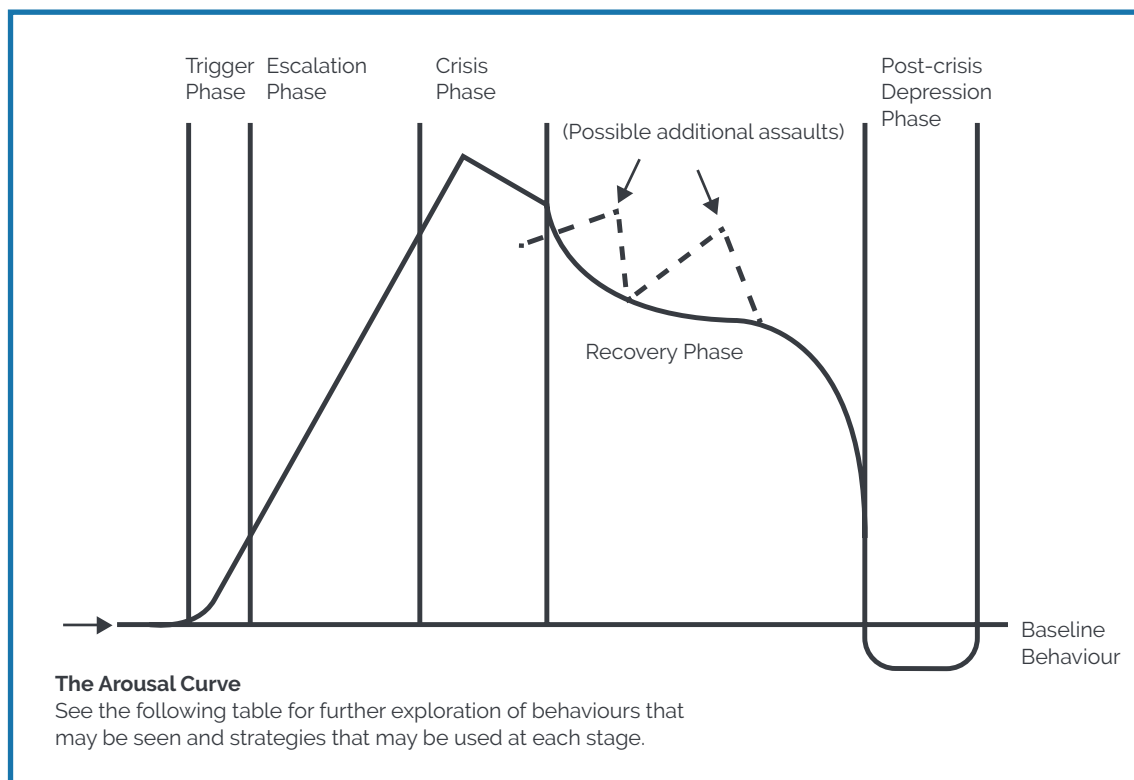
It is a good idea to observe the behaviours, perhaps using an ABC or STAR chart (see appendix), in order to pinpoint the different times and situations when a child's behaviour changes. This is a helpful way of understanding what the child's behaviour is communicating. This can help practitioners and parents/ carers to distract the child before the need arises, or to help identify what skills the child needs teaching to provide them with an alternative method to get their needs met. Further support can be provided by your Early Years Quality Improvement Team.

• *'Reactive PAB': Understanding Fight/ Flight and the Arousal Curve*

Flight/ fight is the body's automatic and unconscious response to a perceived physical or psychological threat/ danger within the environment. When this happens, the emotional part of the brain takes over and so we are unable to make reasoned or informed decisions. Some children may therefore display PAB as a result of their body's fight/ flight response. Some children who have experienced trauma are more likely to enter the fight/ flight response and may appear to become emotionally heightened more quickly in response to certain situations. The arousal curve (image overleaf) is commonly used to depict the fight/ flight response and it can be helpful to create a plan for how you may support child at each stage of the curve (see the following table). Further information about the flight/ flight response can be found in the signposting section below.

A note on Staff Wellbeing

Working with children and young people who display PAB can have an emotional and physical impact upon staff who support them. It is important to consider the wellbeing of these staff and how they can be supported in setting. Please see Supportive Conversations in the appendix.



Creating a calm environment:

Developing an emotionally friendly approach to wellbeing can be supportive in creating a calm environment that may reduce the likelihood of children displaying PAB (you can contact the Educational Psychology Service for further information about Emotionally Friendly Settings). Creating a calm environment can also help in promoting feelings of safety in setting. Things that can help to achieve this include the below (please also see the SEMH section within the main EY SEND Thive tool):

- using behaviour management techniques that help children to understand and manage their emotions such as **Emotion Coaching** (see appendix);
- creating predictable routines (e.g. through use of **visual timetables**);
- use of **softer lighting**/ natural light and **reducing brightly coloured displays**;
- regularly engaging in class **mindfulness** or **yoga**;
- and creating **calming corners** or sensory spaces.

De-escalation and Proactive Support:

In addition to the above, some children identified as being more likely to display PAB may benefit from: direct **teaching of emotional regulation skills** and **relaxation techniques**; the identification of a specific **Key Adult** with whom they can build a supportive and trusting relationship; the use of **Social Stories** in relation to PAB; and the development of an **agreed planned response to PAB** developed with the child's parent/carers, emphasising de-escalation and preventing PAB (e.g. [RAMP](#)).

Developing a planned response:

There may be occasions where, despite using de-escalation strategies, children may continue to move up the arousal curve and display PAB. When this happens, adults may be required (in extreme circumstances) to use positive handling techniques. These should only be used when absolutely necessary and for as short a time as possible, in order to keep the child and others safe.

It is important there is a planned response that is agreed with the child's family and consistently applied by all staff when responding to the child's behaviour throughout the day. This should consider all stages of the arousal curve and is sometimes called a Reducing Anxiety Management Plan (RAMP). It is important to involve relevant professionals and support services at an early stage when exploring the underlying reasons for a child's PAB in setting, which may include:

- Early Years Quality Improvement Team
- Speech and Language Therapist
- Educational Psychologist
- Paediatrician
- Social Care (Children with Disabilities)

Stage	Characterised by....	Strategies
The Trigger Stage	<ul style="list-style-type: none"> • Something happens that the child interprets as a personal attack or threat to their self-esteem or their belongings. • Triggers feelings of frustration, worry or fear. • Leading to changes in their behaviour which might be subtle at first. 	<ul style="list-style-type: none"> • Distraction (change task, activity or use a pre-planned alternative, e.g. favourite book). • Relocation (e.g. encouragement to move to outdoor area to engage in physical activity such as running, jumping, throwing balls). • Time in with a Key Adult to engage in some preferred relaxation activities.
The Escalation Stage	<ul style="list-style-type: none"> • The body begins preparing itself for fight or flight (e.g. tension in the muscles, change to breathing, may become flushed or warm). • Energy level rises, leading to pacing, vocalising or talking more quickly/loudly. • Ability to listen reduces. • Becoming focused on a particular issue. • Others' behaviour becoming over-interpreted and perceived as threatening. 	<p>Some of the strategies used at the Trigger Stage may still be helpful together with:</p> <ul style="list-style-type: none"> • Moving to a pre-agreed place to calm down (i.e. remove from the immediate environment). • Access to calming resources or activities that the child is familiar with (and has used when in a calm state) which are aimed at physical calming (e.g. sensory toys, mindful movement, breathing, high intensity physical activity). • Adults to use a calming voice and avoid using language which may make the child feel more threatened and escalate things more quickly (e.g. stop that right now!) • Adults to use calming non-verbal communication (e.g. adult should sit down, 'soften' eye contact, speak more quietly).
The Crisis Stage	<ul style="list-style-type: none"> • A high state of physiological arousal. • Completely 'in the moment' and so less able to make 'good choices' if prompted, or respond to consequences. • Confusion, combined with absolute focus on particular issue. • Control over aggressive impulses lessens. • May result in physically aggressive behaviour as a result (e.g. kicking, lashing out). 	<p>The strategies at this stage should be around management of the situation:</p> <ul style="list-style-type: none"> • Give plenty of space. • Remove potentially dangerous things. • Remove other children, if necessary. • Adult needs to be assertive but not overly emotional; aware of volume and tone of voice, use of eye contact and proximity (closeness to the child). • Send for help if needed. • Assume the child will calm quickly.
The Plateau / Recovery Stage	<ul style="list-style-type: none"> • The end of the immediate crisis. • Slow subsiding of anger and anxiety. • The real possibility of re-escalation. • Over sensitivity to triggers and others' behaviour. • Guilt feelings may be starting to emerge, alongside vulnerability and confusion. 	<ul style="list-style-type: none"> • Awareness that the aroused state can last up to 90 minutes and children can be easily be re-triggered back into the crisis phases when in this period, with little / no build up, so need to protect from exposure to repeating / fresh triggers. • Provide a space and time with a Key Adult which feels safe. • Calm tone and body language from trusted adult/s. • No demands to discuss the events at this point, just comfort and reassurance.
Post-Crisis / Depression Stage	<ul style="list-style-type: none"> • The need to rest and recover. • Beginning to think beyond the immediate moment. • The likelihood of unhappiness about what has happened. • Guilt leading to negative feelings about self. • Threats to self-esteem. 	<ul style="list-style-type: none"> • Help the child to distinguish between feelings about self and feelings about behaviour (e.g. what they did when they were angry wasn't kind but it doesn't mean they are 'unkind' and can't be kind at other times; you are kind when you share with your friends). • Look for ways to help child start to put things right. • Encourage the child to believe you want to help them make it better. • Discuss how things can be done differently next time. Role play this with the child.

Risk Assessment Prompts:

Most children who display PAB can be managed safely in settings with appropriate levels of support and clear risk management plans. If you are concerned that a child is showing PAB, please refer to the prompts below to ensure you are involving the right people and services to assess and manage the risk appropriately:

- Have you developed a calm and emotionally friendly setting environment?
- Does your setting's behaviour policy outline a planned and approved response across the setting for responding to PAB? Is this policy well understood and consistently applied by all staff?
- Have you considered the functions underlying the child's behaviour and provided them with alternative methods to communicate and meet these needs?
- Have you tracked the occurrence of PAB, identifying antecedents and consequences (e.g. using the ABC Chart or STAR approach), to identify any potential triggers to this behaviour?
- Have you considered the arousal curve and how you can utilise de-escalation strategies with the child to prevent PAB?
- Where PAB is displayed, are you using a multi-agency approach to inform a holistic assessment in order to provide a support plan for the child? Have you made referrals to external services e.g. Educational Psychology, Speech and Language Therapy, Paediatrician as appropriate?
- Have you considered the immediate safety of children and staff? It is important to be guided by relevant national legislation and guidance; organisational policies, procedures and guidance; human rights; the identified risks or needs of the child; and the potential or real risks to others.
- Have you considered how to support the wellbeing of staff who regularly work with the child displaying PAB?

Signposting and Further Information:

Emotion Coaching information: <https://www.emotioncoachinguk.com/what-is-emotion-coaching>

The Three R's: <https://beaconhouse.org.uk/wp-content/uploads/2019/09/The-Three-Rs.pdf>

Fight or Flight mode: <https://beaconhouse.org.uk/wp-content/uploads/2019/09/What-Are-You-Feeling.pdf>

How to Talk to Children about fight or flight: <https://makingsenseoftrauma.com/wp-content/uploads/2016/02/How-to-Talk-to-Children-about-Freeze-Flight-and-Fight.pdf>

Social Stories information: <https://carolgraysocialstories.com/social-stories/what-is-it/>

Kaye A.J., Erdley C.A. (2011). Physical Aggression. In: Goldstein S., Naglieri J.A. (eds) Encyclopedia of Child Behavior and Development. Springer, Boston, MA

Tricia M. Benish & Ronald K. Bramlett (2011). Using social stories to decrease aggression and increase positive peer interactions in normally developing preschool children, Educational Psychology in Practice, 27:1, 1-17, DOI: [10.1080/02667363.2011.549350](https://doi.org/10.1080/02667363.2011.549350)

Appendices

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GETTING RISK SUPPORT



Managing risk alongside a
graduated response to
skill development

ABC Charts Antecedent-Behaviour-Consequences

If a child's behaviour is confusing or concerning, it can be helpful to gather information over time, so that you can better understand the behaviour and spot any patterns.

The antecedent - behaviour - consequence (ABC) chart is a direct observation tool that provides information about what is happening in the child's environment. It helps to:

- collect information on what is causing the behaviour (what happens before the behaviour starts?);
- gain a clear understanding of the behaviour itself (what actually happens?); and
- identify anything which is maintaining the behaviour (how is the behaviour responded to/ what happens afterwards?).

Specifically, the ABC looks at:

"A" antecedent, or the event or activity that happens immediately before a problem behaviour.

"B" behaviour, what behaviours the child specifically

shows at that time.

"C" consequence, or the event that immediately follows the problem behaviour.

Keeping it simple. Use the form on page 93 to collect data. This should not take a lot of time; the shorter and clearer it is, the easier it will be to spot patterns.

Build up evidence. By building up evidence over several observations, patterns in the behaviours that are happening start to appear. Depending on the individual child, five to ten ABC charts may be a good place to start.

Identifying patterns. Once charts are completed, identify patterns across the ABC charts to give a clear understanding of the behaviours and think about effective solutions.

Developing solutions:

Antecedents

- What are the triggers for a behaviour happening? Think about short and long-term triggers.
- Think about exceptions, when does this antecedent / trigger not create the behaviour? How can we use this information to help the child?
- How can we remove the antecedent / trigger?
- If we cannot remove the trigger, can we help the child to feel more comfortable with it?
- Is there something this antecedent / trigger tells us about the child (e.g. limited language leading to frustration and 'lashing out'; not wanting to try something which may indicate low self-esteem)?

Behaviours

- Describe very factually what happens.
- How could the child react differently when feeling this way or in this situation?
- When we have planned out how we would like the child to react, it is particularly important that these alternative behaviours are practised / role-played. Doing so will increase confidence, help them to learn these new skills and increase the chances of these positive behaviours being used in the future.
- Make sure the child is provided with lots of supported opportunities for success, and praise!

Consequences

Consequences can be pleasant or unpleasant. A pleasant consequence will encourage the behaviour and increase the chance that it happens again (e.g. "When I scream, everyone gives me what I want") while a negative consequence will discourage behaviour (e.g. "When I shout, everyone ignores me"). Creating effective responses can bring about positive change.

- Can we remove any pleasant / positive consequences of the inappropriate behaviour?
- Can we provide a pleasant / positive consequence for a positive behaviour?
- Can we respond differently to de-escalate the behaviour (e.g. calm voice, distract or re-direct the child to another activity, teach an alternative behaviour).

ABC: Finding patterns and solutions

Date: _____

Completed by: _____

Antecedent	Behaviour	Consequence
<p>Time behaviour started:</p> <p>Setting Area (where did it happen? Was it hot, noisy, cramped, brightly-lit?):</p> <p>Activity at time of start of behaviour (what were they doing?):</p> <p>Key Trigger (were there any key triggers such as an adult request, frustration with peers, not getting attention?):</p> <p>Events before behaviour started (had anything happened earlier in the day which might have influenced the behaviour?):</p>	<p>Behaviours seen (please list what you saw with times / durations):</p> <p>The child's appearance/mood (e.g. did their facial colour change, were they laughing or staring, did they seem tired or excitable? – please describe):</p> <p>Any other information:</p>	<p>What was the reaction of adults (e.g. intervention, redirection, ignoring)? Please state who did what and for how long.</p> <p>How did the child feel after / What might they have gained (e.g. escape from the situation / connection seeking / sensory stimulation)?</p> <p>Any other information:</p>

STAR Approach

What is the STAR Approach?

The STAR approach was designed to address what are described as distressed behaviours or Physically Aggressive Behaviour (PAB) in settings. The approach recognises that all behaviour is communication and acknowledges the importance of identifying triggers to develop solutions.

The STAR approach involves several interrelated strategies.

1 'Unlearning' inappropriate behaviour that is:

- preventing the current behaviour from achieving positive results for the child;
- finding a way of communicating to the child that the behaviour is unacceptable.

2 Often, distressed or Physically Aggressive behaviours (PAB) are unacceptable ways of achieving quite acceptable outcomes (e.g. the child screams because he wants a toy another child has taken from him, or the child hits others to get attention). Often, the child does not have the right skills for achieving these outcomes (e.g. hits because they don't have the language skills to gain attention in a verbal way). Therefore, it may be necessary to teach acceptable alternative behaviours which achieve the same outcomes for the child as the behaviour you want to reduce. This can be done by:

- finding ways of encouraging any existing appropriate behaviours which he or she does not use much;
- teaching new skills.

3 It may be necessary to find ways of helping a child with a personal problem (e.g. ear ache, illness, side-effects of medication, emotional upset).

4 Often, it helps if we can change any aspects of the environment and routines which may be contributing to the occurrence of the behaviour (e.g. room is too crowded, too much noise, too many distractions).

The STAR approach offers a mix of principles and strategies and involves analysis and intervention at the following levels:

S Settings

T Triggers

A Actions

R Results

S

Settings are defined as the general contexts in which behaviour occurs. They determine the individual's motivation to achieve, and work for, results which might be available to him at any time. Every attempt is made to find out why the behaviour arose initially. Settings can be internal or external to the individual.

The external influences might be:

- life events (e.g. loss, change, trauma, abuse);
- current social environment (e.g. close relationships, exposure to conflict, hostility or domestic abuse, lack of routine, lack of control, unnecessarily strict control);
- current activities (e.g. level and type of stimulation, access to preferred activities);
- current physical environment (e.g. noise level, temperature, levels of lighting).

Internal and personal influences may include, a lack of self-esteem; anxiety; sadness; boredom; communication problems; pain; tiredness and poor physical health; a lack of social understanding; underdeveloped play skills, etc.

T

Triggers are defined as the particular signals which set off specific actions. They occur just before the behaviour and either increase a personal want, suggest a likely threat, or signal the availability of a desired reward. Examples include a change in activity, a new instruction, a high noise level, a memory of an event, the presence of a person who always responds in a desired way.

A

Actions are the behaviours themselves. The STAR approach emphasises that the behaviour to be reduced must be defined in term of observable behaviours.

R

Results are the consequences which immediately follow the behaviour. Results may be positive, negative or neutral. The important step is to clearly define what is causing a concern in terms of observable behaviours (i.e. describe very clearly what can be seen happening). Some behaviours may occur as a cluster (e.g. a temper tantrum may include spitting, screaming, self-injury). Therefore, a decision has to be made whether to describe the behaviours separately or as a group. Several behaviours may form a sequence escalating in intensity and so a description of the sequence will be necessary (e.g. cries then throws).

Gathering the information

The first crucial step is to clearly describe observable behaviours which are causing concern (the target behaviour). This may be an individual behaviour, a cluster or sequence of behaviours.

Observations and discussions with parents/carers and key workers are used to gather information to help explore and understand the function of the child's behaviour. This is explored by looking at what the behaviour appears to achieve/ gain for the child and/or the triggers which seem to set it off.

The STAR observation chart has four columns headed Settings, Triggers, Actions and Results. There are also columns for Date and Time. Each time the target behaviour occurs you should note the situation at the time and the context (Setting), what occurred just before the behaviour (Trigger) and what happened just after (Results) as well as the behaviour itself (Action). Please see the table below.

STAR Chart					
Date	Time	Setting	Trigger	Action	Result

Understanding the information

In addition to use the table above, it is helpful to use the discussions and observations of the child to also develop a strengths list (Zarkowska and Clements, 1994).

A list of strengths should show:

- the child's skills and relative strengths in their development tracker;
- the child's preferences and strong motivators;
- the conditions which evoke positive behaviour from the child;
- the conditions in which the child learns best.

The next step is to arrive at a formulation or an understanding of what the behaviour is communicating, or the function it has for the child. This will include details about:

- the behaviour(s) that cause concern;
- the results the behaviour appears to achieve;
- apparent triggers for the behaviour;
- environmental triggers (things that happen in the environment around the child);
- skills the child needs support to develop which will reduce reliance on current behaviours to communicate or meet their needs (e.g. language, emotional expression, play skills, motor skills).

The table below provides a template for recording the STAR process of information gathering and analysis.

STAR ANALYSIS OF BEHAVIOUR: THE FORMULATION
Name:
Description of behaviour that causes concern:
Appears to achieve the following results:
Appears to be set off by the following triggers:
Seems to occur in the context of the following environments/ situations:
Appears to be related to the following personal/ relationship needs:
Appears to be associated with a need to develop skills in the following area(s)

Creating a support plan

Targets should be set based on the skills the child needs as identified through the STAR process. Targets need to be SMART targets (i.e. they are specific, measurable, achievable, realistic and time-related). The management of behaviour usually involves support at a number of levels. First focus on changing the results of behaviour/s, so less wanted behaviours are discouraged and alternative behaviours are encouraged and rewarded. This often requires support to teach and help the child practice the new skills needed to engage in the appropriate behaviour. Risk factors are reduced by being aware of the triggers and being able to avoid these where possible, until the child has better developed skills, or put extra support in place or respond at an earlier stage when triggers can't be avoided.

It is important to involve the child's family at all stages and involve them in reviews of the child's support plan, highlighting and celebrating small steps of progress and achievements as they occur.

References:

Clements, J. and Zarkowska, E. (2000) Behavioural Concerns and Autistic Spectrum Disorders: Explanations and Strategies for Change London: Jessica Kingsley Publishers).

Zarkowska, E. and Clements, J. (1994) Problem Behaviour and People with Severe Learning Disabilities: the S.T.A.R. Approach. London: Chapman and Hall. 2nd Edition.

Supportive Conversations

What are Supportive Conversations?

They are a way of structuring conversations around the sharing of information after a specific event has taken place. This is usually when the event has been highly unusual or very stressful.

The purpose is to support the re-building of relationships, ensuring everyone's wellbeing. They also provide opportunities to learn from the event and plan for the future.

How can they help?

- After a stressful event at work it is important staff feel supported by one another.
- Supportive conversations allow those involved to process the event and reflect on its impact. They allow feelings to be discussed, shared and acknowledged.
- They can help identify ways to repair relationships (between adults, and adults and children).
- They can help to figure out what has been learnt from the event, which can help to improve processes or systems in the future.

What can you do?

- Offer a supportive conversation to a member of staff if they have experienced a very stressful event at work. This may be around a safeguarding concern, a difficult conversation with a parent (for example raising concerns for the first time), or as a result of a child's distressed behaviour.
- Agree a time and a confidential place to meet. As there is usually a 'dip' in energy and mood following a highly stressful event, it can sometimes help to meet later in the day rather than straight away. But check with each practitioner what they would prefer, as we all respond to events in our own way.
- Agree who will lead the supportive conversation. This will need to be someone who is a good listener and can offer support non-judgementally.
- Use a template to structure the conversation (see the example on the following page).
- Agree how the notes from the meeting are going to be taken, stored and shared.
- It may be helpful to include the supportive conversations process in your staff supervision or wellbeing policies. This can help establish:
 - what circumstances may lead to a supportive conversation being offered;
 - where the conversations will be held and which staff will lead them;
 - what structure or template will be used; and
 - how the meeting and any future actions will be recorded.

Supportive Conversations Template

(Adapted from Page, D. (2009). Multi-Element Plans, Derbyshire County Council)

MOVING FORWARDS	
What happened?	
What were you thinking?	
What were you feeling?	
What needs to be done to put things right?	
What could be done differently another time?	
What would help you to do that?	

Emotion Coaching

