

# Ordinarily Available Guidance

# **EARLY YEARS FOUNDATION STAGE**

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### **Section One: Introduction**

### **SEND Code of Practice (2015)**

It is the education providers responsibility to ensure that children and young people with SEND engage in the activities of the school alongside pupils who do not have SEND.

### Teachers must:

- set goals and outcomes that stretch and challenge learners of all backgrounds, abilities and needs
- be accountable for the attainment, progress and outcomes for all learners
- be aware of the learner's capabilities and prior knowledge and plan teaching to build on these
- demonstrate an awareness of the holistic development of learners at different stages of development
- have a clear understanding of the needs of all learners, including those with special educational needs; exceptional abilities; English as an additional language; disabilities and be able to use and evaluate distinctive evidence based teaching approaches to engage and support their holistic development.

"Ordinarily Available Provision" refers to the setting based interventions and services that all Merton schools, early years and post 16 settings should be able to provide for children/young people, including those with Special Educational Needs and Disabilities (SEND), from within their own resources. By outlining a set of expectations, we are encouraging consistency between schools/settings across Merton.



This guidance is intended to support schools/settings to reflect and develop their inclusive provision to benefit all the children/young people in the school/setting, including those with SEND. The SEND Code of Practice, 2015 **links high quality teaching with ordinarily available provision:** "(Guidance)...higher quality teaching ordinarily available to the whole class is likely to mean that fewer pupils will require such support." (Para 6.15).

This document has been co-produced with Kids First (parents/carer forum), Special Educational Needs Coordinators (SENCOs) and other stakeholders, along with consultation with health and children's services professionals.

Whilst this document is primarily aimed at professionals, we also intend that this document will support parents/carers and children/young people themselves to better understand the support that will be provided for children/young people with SEND without an Education, Health and Care Plan (EHCP). Merton's <u>Local Offer</u> also provides information and details of support services available for children and young people (aged 0-25) with SEND and their families within the borough.

### **How to use Ordinarily Available Guidance**

This guidance covers four broad areas of need: communication and interaction, cognition and learning, social, emotional and mental health, and sensory and/or physical needs. For each area, there are suggestions for strategies and interventions that can be used by all members of school staff and families alike, as well as examples of good practice from schools.

Some of these strategies include:

- Adapting the learning materials that some children use because they learn in a different way to others
- Providing visual aids, symbols, gestures or sign language to support communication
- Using positive behaviour management techniques and rewards to promote self-esteem and motivation
- Providing sensory breaks, equipment or adaptations to reduce stress and anxiety
- Collaborating with external agencies and professionals to access specialist advice and support



This guidance is not a one-size-fits-all approach. It is tailored to the individual needs and strengths of each child, taking into account their views and preferences, as well as those of their parents and carers. It is also flexible and responsive to changes in circumstances and progress over time. All Merton schools are on a journey towards developing their ordinarily available provision within their settings.

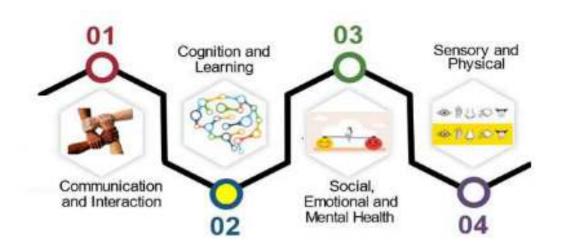
### **High quality teaching**

High quality teaching considers the needs of learners which then informs planning and delivery to make learning accessible - it may include strategies detailed in this toolkit. Ordinarily Available Guidance contains a range of additional strategies and interventions, in addition to high quality teaching, that should be considered for children and young people in line with their assessed special educational needs. It is important to note that all learners are different and not all strategies or interventions will be effective nor can they or should they be provided at the same time. It is important that settings and family carers use this resource to plan the support that is needed and effective.

### **Graduated response**

A graduated response refers to a systematic approach that provides a range of targeted interventions and support, which are carefully tailored to meet the specific needs of individual learners. When additional support is identified as needed for a child or young person the school should apply the "Assess–Plan–Do–Review" model as described by the Code of Practice so that support and actions needed to allow pupils to access the curriculum and make good progress are revisited, reviewed and refined. This approach places the child and family at the centre of the process.





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## <u>Strategies and approaches to identified barrier and/or need</u>

### <u>Links and relevant support</u> <u>available</u>

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#### Identified barrier and/or need:

Difficulties in being understood and with what they want to say.

#### Strategies and approaches:

- Use gestures and signs.
- > Support verbal explanations by consistent use of pictures and object of reference, photos and symbols Model language reflect correct speech rather than correcting.
- Repeat what the child has said and add one word.
- Label accessible equipment with photos/ pictures and words.
- Observe child's preferred ways to communicate which may include non-verbal gestures and body language.
- Encourage children to work in pairs and small groups, giving opportunities to interact with children who can provide good language models.
- Allow time for the child to process and respond (10 second rule).
- Introduce a variety of language through rhymes and songs using actions and words.
- > Ensure that all attempts to communicate are acknowledged and valued.
- Provide an additional method of communicating, for example Makaton, visual signs, visual aids, aided language boards to support all forms of communication.
- > Develop ways of communicating with families with EAL. Meet regularly with parent carers to establish communication levels at home and share suitable advice and strategies.

### **Identified barrier and/or need:**

Difficulties understanding what is being said to them.

### **Strategies and approaches:**

- Check that hearing has been tested.
- Check that a two-year development check been completed by the Health visitor.

### **Training**

Early years Training can be found here, please note that the training programme changes each term.

<u>Childcare workforce information, training</u> <u>and support : Training | Merton Council</u>

Merton Universal offer for providers, meeting the needs of children with additional needs <u>Childcare workforce information</u>, training and support:

<u>Universal Offer for providers | Merton Council</u>



- Consider how many information-carrying words a child can manage when giving instructions adapt use of language and method, for example simple choices, reduce complexity and sentence length.
- Provide visual prompts alongside language, including key vocabulary, visual timetables, now and next, gestures.
- Label equipment with pictures, photos, symbols and words.
- Ensure the adult is physically at child's level.
- > Give extra time / allow take up time to process what has been said. Remember the ten second rule.
- Think about the environment and how to limit any distractions. For example, background music should not be used as it can be distracting for children.
- > Use the child's name to gain the child's attention
- Plan specific opportunities to teach new vocabulary as well as opportunities to revisit and practice, to develop understanding and use of new words.
- > Use 'first and then' or 'now and next' supported by visual prompts.
- Meet regularly with parent carers to discuss how advice and strategies can be continued and strengthened when used at home.
- Repeat key words and phrases.

### **Identified barrier and/or need:**

Difficulties in understanding or using social rules of communication.

### **Strategies and approaches:**

- Use modelling / role play.
- > Implement small group sessions.
- Use social stories.
- ➤ Give prompts symbols, signing systems. Use visual supports for routines, for example Now (you are doing this) and Next (you are going to be doing that) boards.

### Identified barrier and/or need:

Difficulties with language and social communication.

### **Strategies and approaches:**

Adults should be aware of you own body language: 93% of what we communicate is non-verbal, 7% is communicated through spoken word, 38% through tone of voice, and 55% through body language



- > Use the child's name first to draw their attention, followed by key word instructions, for example "Jamie ... shoes"
- Consider accessing autism awareness training which includes the attention bucket strategies
- ➤ Give clear simple instructions. "Jamie's shoes on"
- > Use objects of reference photos/pictures/symbols/signs/visual cues to support routine/transitions.
- Use clear simple language.

#### Have an awareness of:

- > an appropriate tone of voice (calm, not too loud).
- an appropriate environment (noise, temperature, lighting, layout).
- → The importance of manage your communication rich environment to support individual needs.

#### **Identified barrier and/or need:**

Limited imaginative play.

### **Strategies and approaches:**

- Familiar adults model simple pretend play using familiar objects/resources/props.
- Role play and drama, use of props, for example puppets, hats or materials, acting out familiar stories.
- Plan time for partner play; be a playful partner for the child.
- > Duplicate favourite resources one for the adult and one for the child.
- ➤ Modelling; providing a narrative for the child's play.
- Storytelling.
- Use of techniques such as Talking stories/Story strings to engage children in making up their own stories.
- Use of singing with story making.
- ➤ When the opportunity arises respond to the child's lead and adapt stories.

### **Identified barrier and/or need:**

Difficulty with social communication and developing relationships.

- > Use intensive interaction strategies; mirror, copy and mimic the child's play as a way into reciprocal interaction and to show that it is valued.
- Deliver small groups and intervention opportunities to develop social understanding.



- Model functional language, for example "hello, please, can I play?", "help me", "Hello, Sonny wants to play".
- > Consistent use of natural gestures, for example pointing, facial expressions, open body language/position at child's level.
- Organise small group or individualise tasks and activities, for example which involve turn taking and learning each other's names, build up the size of the group gradually, adult to child, adult to two children etc.
- Promote a calm learning environment.
- > Be clear and consistent in your communication of expectations.
- Ensure staff support child to label their own and other's emotions.
- Create communication friendly spaces for the child.

#### Identified barrier and/or need:

Anxiety due to communication in busy, unpredictable environments.

### **Strategies and approaches:**

- Prepare the child for change of activity or routine, by using for example your visual timetable, verbal prompts, pictures, photos or symbols.
- Organise small group or consider individual tasks and activities to be available if needed.
- > Ensure that there is a calm learning environment.
- Provide access to a haven/low arousal space when needed.
- > Ensure clear communication of expectations.
- Provide resources and strategies to support the child's emotions, for example emotion box/calm area...
- > Provide emotional language. When the child is calm, name their emotions and those of others in a natural way.
- Use a visual timetable and use this to prepare children for changes in your regular routine. Make sure your visual timetable is used consistently, referred to regularly and updated after each activity is finished.
- Ensure staff monitor key transition points, for example drop-off/pick-up, snack/ lunchtime, visitors and changes to routines with strategies to reduce anxiety.
- > Use ABCC Charts (or whatever tool you use in your setting) to see if there is a trigger to any changes of behaviour.

### Identified barrier and/or need:

Sensitivity to sensory stimuli.



### **Strategies and approaches:**

- > Provide regular sensory breaks if required, to reduce the potential pressure from the social load.
- > Be aware of sensory needs, explore this further with parent carers and be flexible with routine.
- Consider the environment, for example noise, room temperature, visual stimuli, proximity. Use of an environment audit tool could be helpful.
- ➤ Have a flexible approach to transition times within the day or session
- Provide access to a calming / low arousal space if needed.
- Develop a One Page profile with the family to support the child's sensory needs.
- Consider staff knowledge of sensory issues and access further training.

#### Identified barrier and/or need:

Physical outbursts causing harm to others and/or to self and/or damage to property.

- ➤ Share clear expectations, using positive language, in relation to the setting ethos, for example carpet and behaviour expectations. All staff to be consistent in how they support children to remember and follow these expectations.
- All staff use a consistent approach to support the child in distress and keeping other children safe, making "reasonable adjustments" to support individual needs.
- Continue to implement strategies that are reassuring and acknowledge the child's emotions.
- Anticipate the trigger and use distraction to avoid physical interactions.
- Provide the child with safe things and places to throw which meet the physical need to throw but won't hurt.
- Model the use of alternative strategies to express feelings of anger or frustration, for example screaming outside, pushing against a pair of handprints on a wall, banging a drum etc. Monitor so that you have a good understanding of the frequency and location of triggers. Informal observations should be carried out to analyse incidents, develop understanding and plan for adjustments according.
- Encourage two-way communication with families about what might be happening at home (for example divorce, bereavement, illness) and strategies that work/don't work and relaying this information to staff.
- Arrange a safe and calm area / reflective area for children to use when they want to.
- Access Promoting Positive Behaviour training and review practice to employ appropriate de-escalation strategies (e.g. distraction to an activity of interest/offer child's comforter/ preferred adult/calming strategy).



- Implement a risk management plan which includes pro-active strategies, early interventions to reduce anxiety/ harm and reactive strategies to ensure a consistent approach.
- ➤ Implement a clear plan of action (agreed with parents/carers) to keep all children safe if a child is having a physical response to an emotional outburst. A risk assessment must be in place if a child is causing a risk. For example, you may wish to move other children from the area and this would be in your risk assessment.
- Ensure that a child's behaviour plan is read, understood and implemented by all staff,
- Share information with parents/carers and give regular feedback.

Identified barrier and/or need:

Limited attention span compared to developmental age.

#### Strategies and approaches:

- > Use child's name when giving instructions.
- Use the child's interest as a motivator and to extend engagement.
- Consider use of timers, so the child know they only must focus for a comfortable amount of time.
- > Keep activities short and finish before the child loses interest in order to build on success for the child.
- Use chunking and break tasks down into smaller, manageable steps.
- ➤ Use of visual timetables including some individualised to meet a child's needs.
- > Consider the use of attention building strategies.
- Consider backward chaining, for example break the overall task down into smaller steps. The adult helps the child with all but that last step with the child being taught to do the last step themselves. Once the last step is learnt, the child and adult work backwards, learning other steps of the sequence until the child can do the entire task.

### Useful Resources (such as guidance, parent/family support websites)

- Early Help Assessment Effective Support for Families in Merton
- Merton Children and Families Hub
- Educational Psychology Team Educational.Psychology@merton.gov.uk / Tel: 020 8545 4810
- School Nursing Service



- Virtual School for Looked-After Children | Merton Council
- Merton Virtual Behaviour Service (VBS) | Merton directories
- Merton Special Educational Needs Information, Advice and Support Service (MIASS) miass@merton.gov.uk 020 8543 8854

#### **Help for Early Years Providers**

### **Communication and language**

Access resources, activity ideas and advice for teaching communication and language to early years children.

Communication and language - Help for early years providers - GOV.UK (education.gov.uk)

Support with using visuals can be accessed via your inclusion officer.

#### Calming spaces/low arousal environments

#### **Autism Education Trust**

Strategies for supporting very young children on the Autism Spectrum in the Early Years

<u>Update March 22 - SASS Strategies for supporting children on the Autism Spectrum in the Early Years Guide Updated November 2021</u> (autismeducationtrust.org.uk)

### **Communication friendly spaces**

Website

Welcome to ELIZABETH JARMAN® - Elizabeth Jarman®

Communication Friendly Spaces<sup>™</sup> and Transition in the Early Years

Article by Elizabeth Jarman

Early Years Communication Friendly Spaces and Transition..pdf

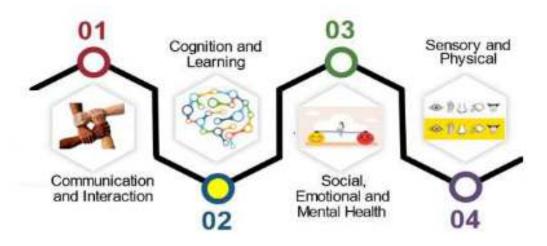


Noise in the environment

Article by Elizabeth Jarman

the-cfs-approach-and-noise-in-learning-environments-.pdf (elizabethjarman.com)





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## Strategies and approaches to identified barrier and/or need

### <u>Links and relevant support</u> <u>available</u>

#### Identified barrier and/or need:

Difficulties with learning, despite appropriate differentiation/individual strategies. The child makes inadequate progress over time across the curriculum and is working below age related expectations.

#### **Strategies and approaches:**

- Assess through making observations in child-initiated learning and adult directed tasks to identify the areas of need.
- Model use of open-ended simple statements such as 'I wonder...' or 'what if ...' rather than direct questions.
- Give clear and simple instructions, breaking down longer instructions and giving one instruction at a time.
- Use visual timetables, visual cues and prompts, for example, objects of reference, photos, pictures, symbols, choice boards, sequences to support instructions.
- Develop personalised stories and books using the child's interests.
- ➤ Give time to process information before a response is needed. Remember the ten second rule, give children time to work out what you have said and what they want to say, wait at least ten seconds for children to formulate and give an answer.
- Make explicit links to prior learning by reminding the child of past events, activities or experiences. Displaying photographs or sharing individual learning journals can support this.
- ➤ Share next steps where appropriate so the child knows what to expect. This can be very informally done through conversation, for example "Well done, next time we can try...". Depending upon the child's level of development the use of visual cues may be appropriate.
- When considering the resources needed to support a child, assess child's developmental stage rather than the age of the child to ensure resources support needs.
- > Use consistent and meaningful strategies to boost self-esteem and confidence. Provide specific meaningful praise and feedback when a child perseveres and / or achieves something new. Staff should praise the child for the process of engagement and learning and "having a go" rather than the outcome.

#### **Training**

Early years Training, can be found here, please note that the training programme changes each term.

<u>Childcare workforce information, training</u> and support: Training | Merton Council

Merton Universal offer for providers, meeting the needs of children with additional needs <u>Childcare workforce</u> <u>information, training and support:</u> <u>Universal Offer for providers | Merton Council</u>



### Identified barrier and/or need:

Specific learning difficulties affecting one or more area of learning, which may result in formal assessment or diagnosis.

Any provision or support should be provided in line with the needs of the children and is <u>NOT</u> dependant on any formal diagnosis.

#### **Strategies and approaches:**

- > Use assessment through observations of child-led play and playful adult-directed tasks to identify the areas of need.
- Support the child to learn short achievable tasks by modelling and giving lots of encouragement.
- > Teach children how to use their "thinking skills" for example ask the child to think in advance about how they will accomplish a task. Talk through and sequence the stages together, social stories may be useful technique.
- > Understand the child's difficulties with learning in consultation with the child and their parent carers, including finding out what works well at home.
- Share visuals used in the setting with parent carers to ensure consistency.
- Ensure resources are specific when using photos and pictures.
- > Support transitions within the day.
- Adopt unique approaches to celebrate the strengths of each child regardless of need.
- Recognise and celebrate success in effort and show interest in other areas of their life.
- Work closely with the Special Educational Needs Coordinator (SENCO) and other specialist staff to understand what strategies or approaches to use in line with advice from assessments or consultation.
- Use strategies and interventions to develop skills, for example increase hand muscle and finger dexterity to support mark making.
- Link learning to real world situations.

### To support memory:

- ➤ Provide memory aids, for example visual cues (objects of reference/photos, pictures, symbols) and timetables referring to these regularly throughout the day, ensure that these are readily available to the child and moved frequently to enable accessibility.
- Provide practical resources to support learning appropriate to the stage of development.
- Ensure your setting has a consistent routine, supporting the child with changes when necessary.
- > Support children visually and kinaesthetically when changes in their environment occur. For example, allow extra time at tidy up time, allocate specific tasks at tidy up time, repeating activities.



- > Ensure resources are clearly labelled with photos/pictures and words and are at the child's level allowing independence.
- ➤ Provide photographs of the setting including important people, such as keyworker, teacher, teaching assistant, and the environment, such as where their put their coat, water bottle, lunch box, book bag for home, so that these can be shared with the child at home.

#### For literacy difficulties:

- > Ensure indoor and outdoor opportunities are provided and across all areas of learning.
- Ensure that activities are interesting, exciting and motivating.
- Sing songs and rhymes and use action rhymes.
- Encourage and support the child's responses to picture books and stories you read with them.
- Use different voices to tell stories and rhymes and encourage the child to join in wherever possible, for example leaving gaps in repeated refrains.
- > Tell stories in a variety of ways, for example the child can make up their own stories using photos/pictures or scrap books, children can use props, puppets or small world play to tell stories, adults can childrens ideas to build interactive, imaginative stories.
- > Be creative where stories are shared using all areas of the indoor and outdoor environment.
- Include opportunities for mark making and writing across all areas of provision and play.
- Consider peers within small group experiences so the child has access to good role models for language and communication.
- In reception classes, consider use of appropriate learning resources, for example pencil grips, spelling aids and alternative methods for recording information including verbal and ICT methods.
- Provide opportunities and experiences for the child to build on their understanding through repetition with skilful adults who model and scaffold learning.

### For numeracy difficulties:

- > Ensure indoor and outdoor opportunities are provided across all areas of learning.
- > Sing counting songs and rhymes using props/visual aids/cues which help to support the child's understanding of number, such as '5 Little Speckled Frogs'.
- > Use objects of reference, photos, pictures, symbols and objects to illustrate counting songs, rhymes and number stories, cooking activities.
- > Provide collections of interesting things for the child to sort, order, count and label in their play.
- Ensure mathematical language is embedded throughout the environment and used in all play and routine opportunities.



> Support the child to gain an understanding of individual number sense, for example the 'twoness of 2' - I have 2 hands, 2 eyes, I can collect 2 objects etc.

#### In Reception classes:

- > Provide access to concrete resources, for example counting objects, number lines, Numicon etc.
- Use concrete resources to develop number knowledge before teaching number symbols.
- Extend the child's number understanding so they can confidently demonstrate the 'twoness of 2', for example 1 more than 1 is 2, one less than 3 is 2, double 2 is 4.

For developmental co-ordination difficulties (previously known as dyspraxia) please see the Sensory and Physical Needs section.

#### Identified barrier and/or need:

Generalised learning difficulties, for example difficulties across the curriculum but with some areas of strength. A child with an uneven "spikey" profile of skills and attainment.

- Ensure the child has full access to the breadth of learning by making reasonable adjustments and modifications to differentiate the curriculum across all areas of learning.
- > Support the characteristics of effective teaching and learning, and plan activities designed to develop skills which will support them to become independent learners.
- > Support the child to develop their self-esteem through celebration and reinforcement of strengths and successes.
- > Support the child to draw on their own experiences in their play and support them to extend and build on their ideas, concepts and skills.
- Extend the child's interests and introduce them to new experiences by providing a variety of activities using creative and playful approaches.
- > Provide first-hand real-life experiences as part of your everyday routines for the child to explore and discover.
- Plan and resource a challenging environment where the child's play can be supported and extended.
- Encourage and support the child to persevere through difficulties, to ask questions, problem-solve and take risks.
- ldentify and support next steps in learning utilising information from home to offer the child consistent challenge.



### **Useful Resources and Support Available**

- Early Help Assessment Effective Support for Families in Merton
- Merton Children and Families Hub
- Educational Psychology Team Educational.Psychology@merton.gov.uk / Tel: 020 8545 4810
- School Nursing Service
- Virtual School for Looked-After Children | Merton Council
- Merton Virtual Behaviour Service (VBS) | Merton directories
- Merton Special Educational Needs Information, Advice and Support Service (MIASS) miass@merton.gov.uk 020 8543 8854

Help for Early Years Providers

Meeting the needs of all children

Meeting the needs of all children - Help for early years providers - GOV.UK (education.gov.uk)

Birth to Five Matters

Birth To 5 Matters – Guidance by the sector, for the sector

National Autistic Society
Information and guidance on social stories

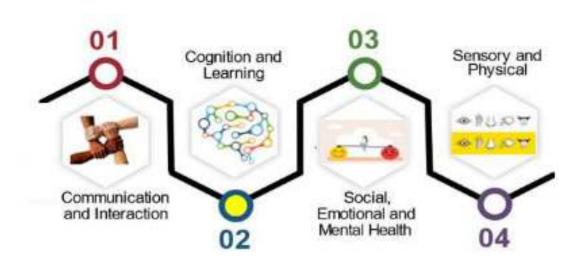
National Autistic Society (autism.org.uk)

Tiny Happy People

Includes a range of rhymes, nursery rhymes and counting songs

Children's language development and parenting advice - BBC Tiny Happy People





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## What is the child's behaviour communicating? Why is the child displaying this behaviour?

### Links and relevant support available

- Ensure that there is an understanding within the setting that behaviour that challenges/ behaviours of concern are a form of communication.
- ➤ Understand the function of the behaviour before implementing strategies try to identify why the child is displaying behaviours before planning how to support them. Consider the use of ABCC charts and behaviour plans.
- Identify what is not working well through engagement with the child as early as possible.
- Ensure that there is a positive, robust key person system in place that supports the relationship.
- Consider what the behaviour may be reflecting. Are the behaviours communicating a sensory, escape, attention or tangible need? Is there an unmet communication, or social, emotional and mental health need?
- Look at the history, when did the behaviour start to change? Can you identify triggers? Talk to the parent carers to understand the child's experiences at home and if the family have similar concerns.
- Liaise and collaborate with home to understand the wider picture.
- Keep a note of concerns, liaise with designated professional (SENCO, key person or safeguarding lead) within your setting.
- ➤ Be aware if the child has been prescribed medication, feedback any changes or concerns to the parent carers so that they can discuss with their GP to rule out health issues.
- ➤ Analyse the behaviours what lies behind them?
- Include additional learning opportunities to develop prosocial behaviours for example social skills groups.
- Facilitate the implementation of specialist advice, for example substitutes for self-harming behaviours.
- Consider a low arousal approach.

#### Training

Early years Training, including training around self-regulation and rethinking behaviour, social stories can be found here, please note that the training programme changes each term.

Childcare workforce information, training and support: Training | Merton Council

Merton Universal offer for providers, meeting the needs of children with additional needs <u>Childcare workforce</u> <u>information, training and support:</u> <u>Universal Offer for providers | Merton Council</u>



Strategies and approaches to identified barrier and/or need	Links and relevant support available
Identified barrier and/or need: Difficulties participating and presenting as withdrawn or isolated.	
<ul> <li>Strategies and approaches:</li> <li>Understand the function of the behaviour before implementing strategies - try to identify why the child is displaying behaviours before planning how to support them.</li> <li>Make sure all adults are aware of their reactions to the observed behaviour and ensure a consistent response.</li> <li>Consider or ask what may make that child feel more at ease/safe? Provide a feelings/calm area with resources such as blankets, soft toys, sensory/fidget items, offer some time outside.</li> <li>Support the child to develop the skills to self-regulate their feelings. Ensure all adults understand and support the child in this.</li> <li>Revise your setting behaviour management policy to ensure it focuses on supporting the child's social and emotional development including supporting self-regulation.</li> <li>Observe play interests along with finding out what the child likes to play with at home, use these to plan interesting activities to support all areas of learning in the setting.</li> <li>Be calm and sensitive, take the pressure off by limiting the number of questions.</li> <li>Use assessment through play. Are there parts of the EYFS/areas of learning, learning environment and routines that they find easier to manage than others? Use these to develop confidence.</li> <li>Analyse all observations made to identify the child's needs and how to support them. Plan specific observations if needed.</li> <li>Discuss with colleagues and your SENCO, check if there are staff members who seem to get a more positiv response. Understand the strategies that they are using and support others to replicate these.</li> <li>Differentiate tasks to ensure that all children experience success in the learning environment.</li> <li>Ensure all staff recognise that promoting prosocial behaviour (feelings of empathy and concern for others includes wider range of actions such as helping, sharing, comforting and cooperation) is an effective strategy to sup</li></ul>	



- > Try small group work, for example friendship or social skills, nurture groups.
- Give the child responsibility for looking after someone else.
- Use buddying /peer mentoring to enable the child to take on both roles, so that they both receive support from and provide support to a peer.
- > Try activities and experiences which provide the child with a sense of belonging or importance to the group.

#### Identified barrier and/or need:

Displaying behaviours which may negatively impact their learning and / or the learning of other children.

- Understand the function of the behaviour before implementing strategies try to identify why the child is displaying behaviours before planning how to support them. Use ABCC chart observations to identify potential triggers to the behaviour.
- Consider if the child needs support to regulate their feelings, look at and share 'emotions' toolbox to help the child find a good strategy for them to use or be reminded of when a situation arises.
- Talk with parent carers, are they experiencing similar behaviours at home? Develop a shared understanding and plan appropriate strategies to be used at home and in school and setting.
- ➤ Review routines, practice and provision in the setting identify and make changes that will support all children. Ask questions about why you do things the way you do and who it benefits. Be open and flexible if it isn't working, make a change.
- Consider using movement breaks/brain breaks.
- Share strategies with all adults and ensure they are used consistently.
- Explore the use of peer observations or videoing good staff interactions and use of strategies to develop other practitioners' skills and confidence.
- Create a quiet, calm space with the child where they can go when they feel overwhelmed. For example, a small tent, a box of familiar toys, a favourite book/activity, sensory toys which may help them feel more secure.
- Encourage the use of emotional language. When the child is calm name their feelings and emotions and those of others in a natural way.
- > Through modelling support the child to find alternative ways to express their feelings, for example using their words, showing an adult.
- Model positive interactions and language to support collaborative play, turn taking and negotiation with peers. For example, using visual prompts such as timers, moving to another experience while they wait for their turn, being able to use their voice to say 'stop' or 'no' rather than using physical communication.
- > Plan a proactive rather than reactive approach to support the child and improve their experiences.



- Observe the child's play and plan exciting activities to engage them in which follows their interests.
- Observe what is happening when the child is engaged/calm/happy and provide regular similar experiences.
- Notice the positives and comment on what it was that the child did well.
- Explore what motivates the child and use this to support them develop their prosocial behaviour. This could be giving them a role that they see as important, providing praise, an activity of interest, a challenge or something new and exciting.
- Consider using a therapeutic approach (Rules, Praise, Ignore) to supporting positive behaviour. Staff consider the positive/ prosocial behaviours as well as "anti-social" (behaviours of concern) to gain a full picture of the child's needs and strengths.
- > Consider a low arousal approach.
- Use 'wondering out loud' to support emotional understanding, for example "I can see you are...tapping/stamping/shouting etc. ....I wonder if you are ...worried/cross/stuck...shall we...go for a walk/take a break/get a drink of water/ read a book/ do some climbing etc.?
- ➤ Give a consistent message but flexible approach, for example "I want you to be in class and join in" is the consistent message; the approach to support this happening may vary or be flexible depending on individual needs.
- Offer clear guidance explicit messages letting the child know what is expected of them Golden rules.
- Offer a 'get out with dignity' choice letting the child leave the situation.
- Monitor so that you have a good understanding of the frequency and location of triggers. E.g., frequency charts; ABCC observation sheet; informal observations can be carried out to inform understanding.
- Devise a risk management plan agreed with parent carers, which includes pro-active strategies, early interventions to reduce anxiety/harm and reactive strategies to ensure a consistent approach.
- Employ a clear plan of action, agreed with parent carers to encourage and support pro-social behaviour. Develop a one-page profile or individual learning plan to support all staff to understand the child and provide consistent, appropriate support.
- Use choices to allow the child some control with the same result, for example "Would you like to talk to me now or in one minute?".
- > Teach the child different ways to get their needs met, such as developing social skills or strategies to self-regulate emotional states.
- > Use readiness to learn strategies and routines (after breaks or between tasks for example).
- Consider the impact of the routines and how you prepare a child for transitions within the day, timer count down/visuals cues/now and next boards.
- Plan for transition between activities, rooms, and outside play including 'what works well' in terms of in differentiation and support professionals meeting to unpick the behaviour.



#### Identified barrier and/or need:

Physical symptoms that are medically unexplained, for example soiling, stomach pains.

Soiling: Causes for soiling could be due to:

- > Development exploring the sensation
- > Sensory stimulus the pupil likes the feel
- Not toilet trained
- Abuse

**Strategies and approaches:** 

- > Use activities that are stress reducing, for example games, dance, colouring, gardening, animals, forest school and settings.
- ➤ Keep a log and analyse pattern or trends to identify triggers. Follow setting procedures and speak to the SENCO, health visitor or safeguarding lead regarding your concerns if issue persists.
- Remember that pain can affect children in many ways. Autistic children and those who have social communication differences or who have experienced trauma may experience pain in different ways to people who are neurotypical.

Identified barrier and/or need:

Attention difficulties.

### Strategies and approaches:

- Ensure that experiences and activities are suitable for the child, for example the length / timing/ interests.
- Explore what motivates the child and use their motivations to support them to maintain attention.
- Provide consistent structure and routines to the day/ session/task.
- Give clear simple directions.
- Provide adult support for the child that is away from distractions and demonstrate good "learning" role models.
- Think about potential reasons and identify any patterns.
- Record behaviour using ABCC charts but remember to analyse and review trends.
- Allow plenty of time for movement or frequent small concentration periods.
- Plan activities in small manageable chunks.
- Be aware of times of the day that may be more difficult.
- Provide calm / low arousal spaces.

For support with strategies and interventions, for example Attention Autism; what's in the box; social skills groups, language groups please consult your inclusion officer.



> Remember to consult with the child's parent carers so they can share with you, their perspective.

#### Identified barrier and/or need:

Difficulty in making and maintaining healthy relationships.

#### **Strategies and approaches:**

- > Use small group/nurture group activities to support personal social and emotional development.
- Model appropriate emotional responses to disagreements or difficulties with, for example sharing/turn taking.
- Think about who the child can maintain a relationship with (adults only, younger children). Try and understand the reasons for this and use this information to build their capacity to maintain relationships.
- ➤ Use and model a conflict resolution approach (high scope/emotion coaching) to help manage upsets and disagreements. Use restorative approaches when relationships break down.
- Try differentiated opportunities for social and emotional development, for example buddy system/paired learning activities/scaffolding group work.
- ➤ Use a key worker to rehearse and replay more appropriate social communication methods, provide opportunities to practise their social communication skills.

### **Identified barrier and/or need:**

Difficulties following and accepting adult direction.

- ➤ Look for patterns and triggers to identify what may be causing behaviours, for example use of language.
- > Be aware that these behaviours may indicate an unmet need for safety.
- Use positive scripts positive language to re-direct and reinforce expectations, for example use of others as role models.
- Consider calming scripts to de-escalate including, for example use of sand timers for 'thinking time'.
- Provide limited choices to give the child a sense of control whilst following adult led activities.
- Use meaningful positive feedback to reward prosocial behaviours with whatever the child is personally motivated by, for example LEGO, superhero play, jigsaws, technology.
- > Use visual cues such as sand timers, now and next board, visual timetable to support the end of activities and sharing.



#### Identified barrier and/or need:

Presenting as significantly unhappy or stressed.

#### **Strategies and approaches:**

- Identify a key figure within the setting who can provide an emotional support and build upon the child's interests.
- Establish a calm area which is chosen and agreed with the child.
- Ensure feedback is used to collaborate and plan with parent carers, to ensure consistency between the home and setting.
- Consider the use of social stories conversations to identify triggers and identify alternative actions.
- Provide opportunities to reflect emotional states and use strategies to support self-regulation.

### Identified barrier and/or need:

Patterns of non-attendance.

#### Strategies and approaches:

- > Talk to parent carers to identify barriers of non-attendance.
- In reception classes, consider accessing Merton's materials, as these can be useful diagnostic tools for early intervention.

### Useful Resources (such as guidance, parent/family support websites)

- Early Help Assessment Effective Support for Families in Merton
- Merton Children and Families Hub
- Educational Psychology Team <a href="mailto:Educational.Psychology@merton.gov.uk">Educational.Psychology@merton.gov.uk</a> / Tel: 020 8545 4810
- School Nursing Service
- Virtual School for Looked-After Children | Merton Council
- Merton Virtual Behaviour Service (VBS) | Merton directories
- Merton Special Educational Needs Information, Advice and Support Service (MIASS) miass@merton.gov.uk 020 8543 8854



### **Birth to Five Matters Self regulation**

Self-regulation – Birth To 5 Matters

This section on self-regulation includes key points. The resources section <u>Self-regulation resources – Birth To 5 Matters</u> includes links to articles and practical guidance.

### Help for early years providers

Resources, activity ideas and advice for teaching personal, social and emotional development to early years children.

Personal, social and emotional development - Help for early years providers - GOV.UK (education.gov.uk)

#### **Wandle Early Years Hub**

**Nurturing Future Minds** 

Building Strong families, resources for parents and practitioners

Nurturing Future Minds - Practitioner

#### **Action for Children**

Parent leaflet/information

How can I teach my child social skills?

How can I teach my child social skills? - Support for Parents from Action For Children

### **Anna Freud Centre**

### Early years in Mind

Early Years in Mind is a free online network for early years practitioners. The network provides easy to read and easy to use guidance on supporting the mental health of babies, young children and their families. The network was developed by mental health experts and shares practical and clinical expertise, and advice on using attachment-informed practice.

Early Years Practitioner Guidance | Babies, Young Children Mental Health & Wellbeing | Early Years In Mind | Anna Freud

### **Early Years Alliance**

Article Emotion Coaching in the Early Years

Emotion Coaching in the Early Years | early years alliance (eyalliance.org.uk)

### **Cambridge Community Trust (NHS)**

Leaflet about movement breaks

Movement Breaks (cambscommunityservices.nhs.uk)



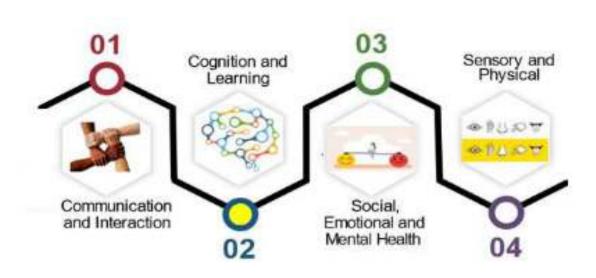
Attention Autism, (Gina Davies)

High scope-conflict resolution

Welcome to HighScope! - HighScope Changing the trajectory of the world, one child at a time ERIC, the Children's Bowel and Bladder Charity

About us - ERIC





### **CONTENTS – Sensory and Physical - 04**

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### Sensory and Physical: Strategies and approaches to identified barrier and/or need

### Links and relevant support available

### Identified barrier and/or need:

- Physical sensitivity including hyper and hypo responses and sensory processing differences.
- > Value the positive impact that recognising and planning for a child's sensory differences and needs has on their learning and emotional well-being.

### Strategies and approaches:

- > Consult with parent carers to identify potential trigger times and activities.
- Consider conducting a sensory audit of the setting environment.
- Share strategies and advice with all members of staff to support the child's sensory diet.
- Consider referral to the Sensory support team
- Access staff training (such as sensory integration) if needed.
- Work together with other professionals to share strategies and advice to support the child's sensory diet.
- Identify activities which help the child regulate. Use these at appropriate times of day to promote access to learning.
- > Consider the impact of mealtimes and transitions. Work with the child to develop strategies which help them feel ready to learn.
- Consider using sensory reduction planning. Consider using individual workstations.
- Build resilience using timers.

### Identified barrier and/or need:

### Developmental co-ordination difficulties (previously known as dyspraxia)

In addition to the strategies suggested in the Cognition and Learning section, the following may be of help.

### Strategies and approaches:

- > Develop the child's core stability, for example wobble cushion, exercises and games.
- Ensure correct seating position with appropriately sized table and chairs.
- Discuss any specialist equipment needs with the most appropriate professional.

#### **Training**

Early years Training, can be found here, please note that the training programme changes each term. Childcare workforce information, training and support: Training | Merton Council

Merton Universal offer for providers, meeting the needs of children with additional needs Childcare workforce information, training and support: Universal Offer for providers | Merton Council

**Merton Sensory Support Service** (Sensory Team)

0208545 4810



- Provide physical activities to support development of gross motor skills, for example throwing, catching, hopping, scootering, riding a trike etc. In addition, offer opportunities for a child to cross the mid-line such as waving scarves, ribbons, pom poms etc.
- Provide a variety of opportunities for mark making, such as water and paint brushes, mud and sticks, wet and dry sand before progressing on to using more formal mark making tools such as pencils/crayons etc. Pencil grips and/or sloping boards may support the use of these more formal tools.
- ➤ Develop fine motor skills, for example hand and arm exercises such as dough disco, specialist scissors, pegboards, threading, play dough, pincher grips activities, such as pegs onto washing line or sorting with tweezers.
- Provide sequencing and organisational skills, for example now/next boards, visual timetables, photos, pictures, symbols.
- Use clear and consistent routines.

### **Identified barrier and/or need:**

#### Hearing impairment.

A child may mishear words or instructions and need reinforcement and reassurance before beginning task.

Fluctuations in attention, may struggle concentrating.

Difficulty in understanding peers in group discussions or in noisier environments.

May have delayed language.

### **Strategies and approaches:**

- Remove or reduce background noise, for example do not play music in the background as this is distracting. . Where appropriate, use hanging objects to support sounds to bounce back to child level.
- Ensure staff work together with other professionals, for example Sensory Support Team.
- ➤ Use appropriate seating and visual materials see Individual Plan and One Page Profile for requirements.
- Ensure instructions are specific and delivered clearly and at an appropriate volume.
- ➤ Check instructions have been effectively communicated and understood, particularly when delivering new information and/ or using unfamiliar vocabulary. Provide gesture or visual cues to support this such as basic Makaton and re-visit the instruction with the child if not understood.
- > Repeat / rephrase comments made by other children ensuring the child accesses those comments.
- Be aware the child may use lip-reading and visual cues to support their hearing. Ensure that they are face on when you are giving instructions. Try not to move around the room whilst talking.
- > Be aware of non-verbal communication including eye contact, body language and facial expressions.
- Use visual reinforcement photos, pictures, symbols to support learning as well as pointing and gestures.
- Use visual timetables and visual cues, such as sand timers, to support sharing.

Eleri.Morley@merton.gov.uk SEN@merton.gov.uk



- ➤ Be aware that during physical games and activities, particularly in large open spaces, it will be more difficult to follow instructions. Therefore, planned activities may need to be adapted.
- Consider that words spoken on an audio/visual recording may need a person to repeat what is being said.
- Consider the environment, for example carpeting, soft furnishing, rubber feet on the table and chair legs etc. will reduce noise.
- > Seat the child away from any source of noise, for example window, corridor, fan heater, projector, the centre of the room etc.
- Provide visual prompts for good listening, sitting, looking and listening behaviours.
- > Encourage children to ask when not sure what to do.
- Establish quiet spaces within the environment, particularly for specific listening work.
- Ensure all staff and visitors who work with a child with hearing impairment are aware how best to support. They should be familiar with the child's One Page Profile or equivalent.
- Arrange for adults working directly with children with hearing impairment to have appropriate training.
- Work together with other professionals to share strategies and advice to support the child.
- Employ techniques to monitor and support the child with noise levels.
- Give prior warning regarding fire alarms. If appropriate use an alternative exit route.

### **Identified barrier and/or need:**

### Visual impairment

Deterioration in visual behaviours, for example handwriting, copying, moving text closer to eyes, identifying peers in playground, during low light.

- Work together with other professionals, for example the Sensory Support Team. to share strategies and advice to support the child and access to learning environment, for example use of ICT, alternative visual resources.
- Figure 2. Gain a good understanding of child's level of vision, seek training through the Sensory Support Team.
- > Provide additional resources for inclusive play, for example a bell in the ball so all can play together.
- Ensure time for a child to map the room and allow this to occur daily or when in. Allow re-mapping to occur when furniture and resources change place to reduce confusion and potential injury.
- Consider lighting and position at different times of the day and when different activities are taking placefor example, group time, mealtimes and how it supports the child's vision.
- > Provide uncluttered space and reduce display backgrounds to help the child focus on the appropriate object.
- Use auditory reinforcements.
- Use talking books & literature/books in Braille.



- Ensure labelling and pictures that denote the content of resources are in a style that is clear to the child.
- Take account of mobility needs to ensure the child can access the whole environment.
- Provide access to visual aids at an appropriate height for children.
- Consider using talking equipment.
- Provide access to quieter spaces within the environment.

### Identified barrier and/or need:

### Tasting (gustatory) differences.

A child may have aversion to certain food tastes and textures.

A child may also seek input from foods and food textures.

### **Strategies and approaches:**

- > Use visual supports to help with choices and awareness of what is for lunch, snack, dinner.
- ➤ Have a consistent mealtime routine involving opportunities for positive adult role modelling and positive support for the child.
- Offer an element of choice, for example peas or carrots.
- Allow and provide opportunities for the child to explore food texture with their hands.
- > Encourage positive interactions between child and adult to build confidence.
- Keep pressure to eat low, especially when trying new foods.
- Ensure that there are alternatives available at mealtimes and foods that suit a sensory preference.
- > Plan carefully how the child will access meals and snacks to reduce stress and any pressure to eat.

### Identified barrier and/or need:

### Smelling (olfactory) differences.

A child may have a strong aversion to smells or indeed seek smells out.

- > Set up a 'no scent' zone, free from air fresheners, flowers, perfumes etc.
- > Staff should consider the perfume/ aftershave and other products that have a smell that they wear.
- > Consider if the cleaning materials have a strong smell.
- Provide scented playdough, pens and toys to support sensory seeking.
- Allow the child opportunities to bake and cook to create different smells.



➤ Be aware of smells from the outdoor environment, for example refuse collection and mitigate these smells where possible.

#### Identified barrier and/or need:

### **Touch (tactile differences)**

### **Strategies and approaches:**

- Consider the proximity of others would a carpet tile help?
- Allow the child to be at the front or the back of a line, if helpful.
- Approach the child within their visual field.
- Consider the challenges that a child may face with different floor surfaces; they may find it challenging to sit on the carpet.
- Ensure that there are opportunities for the child to engage in sensory play, for example sand, water, oats, gloop.

#### Identified barrier and/or need:

Proprioceptive differences - A child may seek extra input for their proprioceptive sense.

- > Offer opportunities for the child to run, jump, join in weight bearing activities such as crawling, pushing and pulling games.
- Recognise that a child may seek further sensory input via leaning, for example table or wall pushes.
- ➤ Be aware that a child may rock on their chair, or place the chair legs on their feet to seek "grounding": what opportunities are on offer to support this. For example, a child may benefit from move and sit cushions or wedges to give feedback to sit comfortably.
- Consider table/wall pushes.
- Ask the child to carry a box or bag (heavy) of toys or work for next activity.
- > Provide pushing/pulling boxes with heavier items in.
- > Offer riding vehicles e.g. tricycles, bicycles & scooters.
- Offer jumping on trampette.
- Suggest using a space hopper.
- Use timers to support the start and finish of the activity.
- Provide sensory circuits to support children.



Offer Brain breaks

#### Identified barrier and/or need:

Vestibular differences.

#### Strategies and approaches:

- Give the child daily opportunities to perform gentle stretches, rocking back and forth, slowly marching; consider Yoga activities.
- Provide opportunities to work in pairs with another child working on 'rowing' (sitting opposite, legs in a 'V' touching feet with partner, holding hands, gently 'row' forward and back), wheelbarrows etc.
- A child may need support negotiating space, walking up the stairs and with balancing activities.
- Vestibular activities can help to raise a child's level of arousal or alertness. Activities may include jumping / working against gravity, crunchy strong-tasting foods, climbing, running, movement breaks, moving furniture.

#### Identified barrier and/or need:

Interoceptive differences.

### **Strategies and approaches:**

- Ensure adults regularly talk about internal feelings both physical and emotional.
- Consider building mindful activities into daily routine.

## Medical Needs: Strategies and approaches to identified barrier and/or need

### Identified barrier and/or need:

Severe and complex medical needs including a life-threatening diagnosis or condition.



- Ensure that you have the equipment that you need, for example support equipment such as lockable medicine cabinets, first aid bags, fridge. Some medications such as inhalers, blood glucose testing and adrenaline pens should be immediately available.
- > Ensure staff know which medicines need to be locked away and which need to be accessible.
- Ensure staff know where a child's medication is stored, especially if it may be needed urgently. Consider having duplicates at different locations in the setting (e.g. epi-pen in office/on child/in classroom).
- Ensure more than one member of staff has the knowledge and skills required to support a child, so that if the member of staff is absent the child's support is not impacted.
- Ensure parent carers and staff have access to the medication policy to be reviewed and updated regularly. Gain parent carer's permission in writing to administer medication and ensure it is prescribed.
- Ensure that transition arrangements have been put into place prior to the child's entry to the setting. This would include ensuring that the necessary adaptations are in place.
- Have a good understanding of any documents related to managing medical needs in the setting.
- Ensure health care plans and/or other documentation are regularly updated, are shared with and are accessible to appropriate staff.
- Access training prior to transition, such as rotated medication, care training, or manual handling
- Consider how you establish and maintain good communication links with parent carers and how you share information in a timely manner.
- Identify what additional support may be required in relation to diet, toileting, use of equipment, cooking, mealtimes and taking part in outings.
- ➤ Make sure you feel supported and equipped to support the child, their family and your class through any losses (by discussing with your SENCO/lead professional or having accessed bereavement training or policies for example).
- Review and update individual support plans (Health & Care Plan and or risk management plan) with your SENCO to ensure that they reflect the level of need being presented and are informative for other members of staff (cover teachers for example).
- It may also be helpful to discuss use of ICT equipment with your SENCO to support communication and learning.



### <u>Useful Resources (such as guidance, parent/family support websites)</u>

- Early Help Assessment Effective Support for Families in Merton
- Merton Children and Families Hub
- Educational Psychology Team Educational.Psychology@merton.gov.uk / Tel: 020 8545 4810
- School Nursing Service
- Virtual School for Looked-After Children | Merton Council
- Merton Virtual Behaviour Service (VBS) | Merton directories
- Merton Special Educational Needs Information, Advice and Support Service (MIASS) miass@merton.gov.uk 020 8543 8854

The <u>NDCS</u> (National Deaf Children's Society) provides information, advice and support for children with hearing needs, their families and settings. to find guidance and support for early years put early years in the search box.

#### **RNIB**

Effective Practice Guide
Learning through play in the early years

EPG Learning Through Play Early Years FFMxzOs.docx (live.com)

#### **RNIB**

Effective Practice Guide
Social Inclusion and Social Bonding - Early Years
EPG Social Inclusion Social Bonding Early Years.docx (live.com)