Ordinarily Available Provision

The document is separated into the four main areas of need:

Please note, this document is best used electronically

Introduction

OWN Mission Statement

To provide the best education, we create opportunities for working together, nurturing talent, ideas and wellbeing.

OWN Vision

To have transformed aspirations, changed attitudes and raised achievements for our community through our passionate belief in the power of education.

This document has four sections reflecting the main areas of need outlined in the SEND Code of Practi... ...screte category and several areas may need to be consulted for a pupil. Every child is unique with their own ... expected that every child will need every support strategy outlined. Teachers will identify those that are most useful to a pupil at that particular time and review this as they make their way through the year.

Any or all of the ordinarily available provision outlined in here is available to our pupils and there is no requirement for additional assessment, threshold criteria or diagnosis for a pupil to access these provisions. This is our social model for accelerating progress and engagement based on an acceptance of diversity.

Ordinarily Available Provision is not about treating everyone the same, it is about making adaptations and small changes so all children get the same opportunities.
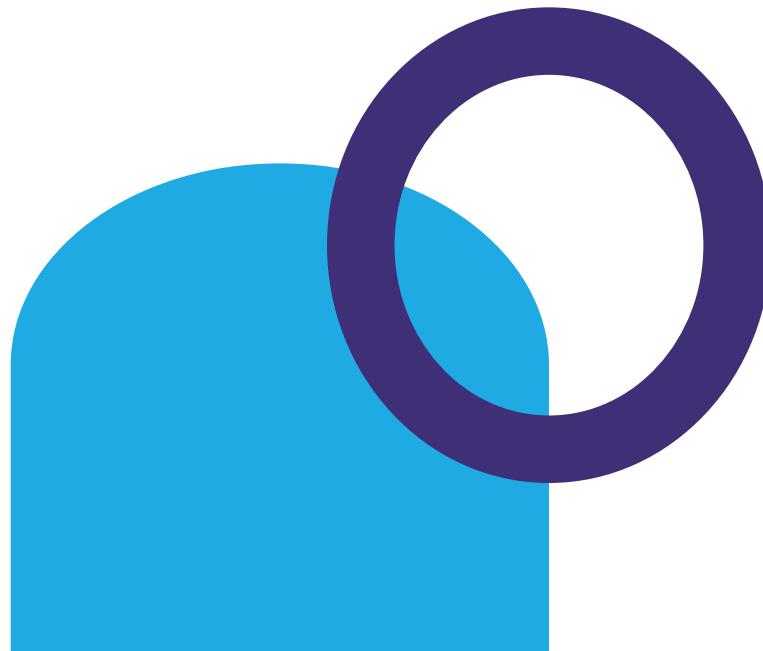
Communication and Interaction

What does it look like?	Ordinarily Available Provision	Resources Available	So what?
Attention and listening Child may have no or poor eye contact and may not respond to their name Child may be easily distracted, find attending to task difficult and wish to flit between one thing and another Child may not be able to listen and do something at the same time Child may appear to be in their own world or on their own agenda and it may be difficult to get them to fully engage	**Environment:** • Reduce visual distractions to support attention and concentration • Be aware of noise levels in the classroom e.g. the use of soft furnishing or creating focused work station or a reading areas • Avoid sitting the child near competing sound sources e.g. computer monitors or outside. • Turn off IT equipment when not in use **Experiences and Opportunities:** • Know about and follow the child's current interests or motivators • Offer a range of sensory experiences to engage the child • Check that hearing has been tested. **Strategies:** • Use the child's name before communicating with them • Use eye contact, gestures, tone of voice and nonverbal communications. Get down to the child's level • Try not to walk around when talking • Provide personalised visual timetables or visual prompt such as a task-board • Backward chaining e.g. chain parts of the task together (build the sequence at the last part of the task and working back so the child experiences success and then gradually work back to increase more elements until they can do the entire task). • Use visual prompts to chart the noise levels in the classroom and manage noise levels. • Keep instructions brief and use the same set phrases for routines • Use visuals or objects of reference to support attention skills • Share key strategies with parents and carers to ensure a consistent approach	⇨ **People Games** ⇨ **Positive language and praising** ⇨ **Intensive Interaction Activities** ⇨ **Helping Attention in Class** ⇨ **Mentally Healthy Schools: Teaching for Neurodiversity** ⇨ **Attention, listening and organisation guide for schools**	• Visual prompts and task board in place to support attention and focus, tailoring and building from their pupils starting point. • Pupil feels successful • Inclusive and equitable practice are apparent.

What does it look like?	Ordinarily Available Provision	Resources Available	So what?
Expressive Language (expressing themselves or talking) Child may have less expressive communications, avoid speaking and struggle to makes themselves understood	• Use the 10 second rule to give children time to process and understand the words and gestures used. • Model the correct language to children without expectation for the child to repeat the phrase e.g. Child: **'Cat runned away.'** Adult: 'Yes, the cat ran away.' • All attempts to communicate and speak are encouraged. • Providing an additional method of communicating, for example, use of ICT, symbol communication (PECS). • All classrooms should be communication friendly: Speech and Language UK - Creating Supportive Environments • Arrange assessments – BPVS, Blank Levels, Nuffield NELI (Reception pupils) to inform targeted intervention.	⇨ **NHS CPFT Speech and Language Toolkit** ⇨ **Expressive Language activities** ⇨ **Video: Introducing a child to PECS (Phase 1)**	• Staff have clear knowledge of pupil's need, identify gaps and target support. • Pupil has developed confidence, they feel success and thrive. • Pupil is confident in their own voice, expressing own needs and being a self-advocate • There are opportunities to know vocab and use in other contexts which in turn closes the gap. • Pupil takes ownership of their own work. • Staff demonstrate equitable and inclusive practice in the school community. • Clear baseline and tracking show progress over time. • Pupil has reduced dependence on adults
What does it look like?	Ordinarily Available Provision	Resources Available	So what?
Receptive language (understanding) Over reliance on non-verbal communication Struggles to follow simple instructions	**Environment** • Display reminders of key vocabulary with visual supports • Reduce distractions in the environment • Colourful Semantics visuals **Experiences and Opportunities:** • Provide opportunities for real life, first-hand experiences to facilitate new	⇨ **NHS CPFT Speech and Language Toolkit** ⇨ **Blank Levels of Questioning Leaflet**	As above

| Difficulty making choices

May have high levels of anxiety, withdrawal, challenging behaviour and/or low levels of wellbeing

Avoids tasks and activities where there is a reliance on understanding language

Struggles to follow routines without support – waits and copies what others do | vocabulary
• Utilise different parts of the day as opportunities to interact one on one
• Directly teach new vocabulary and make learning more meaningful
• Re-visit words and experiences to embed vocabulary in a variety of contexts
Strategies:
• Assessment through observation/teaching, for example, are there parts of the routine/curriculum that they find easier to manage than others?
• Simplify language when necessary to aid understanding
• Colourful Semantics approach
• Avoid turning instructions into questions e.g. by adding 'shall we' to the start.
• Use simple instructions which provide positive direction, for example tells the child what you do want them to do and not what you don't want them to do.
• Use objects of reference, photos or visuals to support the child's understanding
• Avoid asking too many questions
• Offer choices with a visual support even when you may already know what they want e.g. 'do you want an apple or banana?'
• All adults to try to use the same word/phrase rather than using a range of words to describe the same thing e.g. packed lunch, sandwiches or pack up | ⇨ **Colourful Semantics Guide**

⇨ ICAN: **Communication friendlyenvironments**

⇨ **Ideas and activities for EYFS Speaking and listening** | |
| **What does it look like?** | **Ordinarily Available Provision** | **Resources Available** | **So what?** |

Social Communication	Environment:	Social communication groups	• Staff scaffold social situations to support pupils in completing task with reduced adult support.
Child may avoid situations where language is involved. Child may appear isolated or over-bearing Child may find emotional vocabulary learning a challenge May have high levels of anxiety, withdrawal, challenging behaviour and/or low levels of wellbeing	• When children feel comfortable and safe, they are more likely to communicate. • Be aware that different cultures may have different social rules. Make sure you speak to parents about what is expected in their culture • Be aware that a child with EAL may just needs time to immerse in the new language • Calm learning environment **Experiences and Opportunities:** • Consistency in staff response to reduce anxiety • Small group tasks and activities. • Clear communication of expectations. • Social stories • Exposure. modelling and rehearshal of emotion vocab	⇨ **Early learners: Opportunities to communicate** ⇨ **Social Skills and Interaction incl. Social Stories**	• Adults model social skills; both positive and negative enabling pupils to reflect, with staff support, how to deal with contexts. Therefore, normalising feelings • The pupils is given the language to discuss emotions and know its ok to feel different feelings • Staff are able to make informed decisions about adjustments made. • Dysregulated behaviour/activity is

Strategies:

- Routines are very important for children with social interaction difficulties. Make the routine clear (e.g. by using a visual) and warn children in advance of any changes during the session

- Children may find it challenging to stay in the group for a long period of time so have realistic expectations for individual children.

- Follow the child's lead and make the context and reason for communication motivating and interesting

- Praise the child for 'good listening' or 'good looking' or for taking turns in an activity.

- Value and recognise all forms of communication including non-verbal.

- Recording and sharing of frequency and location of triggers and the severity and duration of unregulated behaviours in order to understand and adjust provision with an aim to reduce frequency and intensity.

- Coproduction of a behavior plan of de-escalation strategies and agreed actions

- Model social skills; both positive and negative enabling pupils to reflect, with support, how to deal with contexts. Therefore, normalising feelings

accurately recorded.
- Reduction in negative behaviour
- Everyone in the school community feels safe
- All are involved and engaged through clear communication
- Everyone knows what will happen and when.

Cognition and Learning

What does it look like?	Ordinarily Available Provision	Resources Available	So what?
Through observation children may have: Poor memory skills An inability to retain basic play skills, perhaps repetitive and needs lots of practice Fleeting / poor concentration Difficulty or inability to make a choice Over reliance on adults A reluctance to take risks or problem solve Lack of confidence to approach new tasks and experiences due to limited understanding Difficulties affecting progress in one or more area of learning (for example literacy skills or numeracy skills) Unwanted behaviour Child may appear isolated and disconnected from others Difficulty sequencing	o Collecting pupils voice around pupil's perception of how they are doing/coping o Assessment through observation or teaching for clearer identification of the areas of need, in consultation with the learner. o Metacognition approaches such as learning to learn and self-review to understand the learner's difficulty and asking them what helps. o Use strategies that support receptive language skills (understanding) including pre-teaching of some of the key vocabulary and concepts in a new topic o Scaffolding and modelling. o Careful use of questioning. Oracy techniques, talk partners, articulating learning. o Seating plans and groupings take account of individual needs and routinely provide opportunities for access to role- models, mixed-ability groups, structured opportunities for sharing of ideas o Whole setting training or cascaded training accessed by setting as appropriate e.g. dyslexia friendly classrooms o Evidence based interventions to develop skills e.g. spelling, reading, number skills **Support for attention and concentration** o Reduce the group size for some teaching inputs o Breaking tasks down to ensure learning successes for pupils. o Visual schedules help children to follow the structure of the day and learn common sequences e.g. changing for PE or ready for hometime o Now/next /then systems close to the child o Use shorter, more interactive sessions for direct teaching and use visual props and key word visuals, particularly for new	⇨ **Using pictures and symbols** Remember photos are a good place to start for visuals. For further sources of visuals use Widget. ⇨ **Video: Objects of reference** ⇨ **Now and next boards** ⇨ **Visual schedules and timetables** ⇨ **Supporting Dyslexia in the Classroom (not diagnosis dependent)** ⇨ **'I do it, you do it, we do it' one pager** An electronic timer/sand timer can be helpful to use as an aid to extend concentration	• Staff have a clearer identification of need and the pupil's gaps in learning, this allows for individualised provision to meet needs. • Staff can respond in the moment to make adaptations to meet need. • Evidence of support • Learning 'sticks' and can be recalled. • A more accessible curriculum is provided. • Pupils are more engaged and make progress in their learning. • Pupils have increased confidence.

Difficulties understanding and recalling routines

Misinterpretation of social contexts

concepts

o Work trays (red and green) help to focus on short task and brings a clear structure to activities. Start with one task and increase over time.
o Use set phrases "one more then finished" to extend concentration on activities

Support to develop positive approaches to learning
o Give positive praise which is relevant to the child for all attempts not just successes
o Provide breaks in learning for children who may not be able to attend for longer periods.
o Teach the child a phrase to obtain assistance in a neutral way
o Strategies that foster collaboration and working together with positive regard are used to support teaching and classroom relationships.
o Share success with other children and adults (if this is appropriate).
o Ensure parents are fully involved in supporting the child by sharing approaches, strategies and successes

Support to develop learning in social situations
o Include the child in social communication groups. Include children who are good role models within each session
o Plan in independent time periods for children who are over reliant on adults. Give children a visual cue to show that the adult is busy at the moment but will be available soon
o Teach a strategy/script to initiate interaction with peers
o Adults can anticipate what might happen in a social situation and give this a narrative
o Opportunities for shared enjoyment

Support to develop play skills in EYFS
• Copy children's play and pause to see if the child responds
• Model and extend play and then introduce a new action e.g. stirring the tea during a tea party
• Include choice boards
• Have two sets of toys/activities to model play sequences. This

Sensory resources

Green tray with tasks in wallets or zip bags

⇨ **Copy Me Box**

⇨ **Choice board**

⇨ **OT Toolbox: Visual**

will help the child to copy play sequences

Perception Play

- Use some hand over hand techniques to support the teaching of new skills e.g. putting a finger in messy play materials

- Create opportunities for paired and turn taking activities

- Create a calm, quiet and distraction free area to introduce and model new skills

- Allow lots of opportunities to practice then generalise skills

Social, Emotional and Mental Health

What does it look like?	Ordinarily Available Provision	Resources Available	So what?
Children who find it difficult to regulate their behaviours and emotions	o Movement and sensory regulation breaks – indoors and outside o Sensory/calm box available for free and independent access (may include worry dolls, glitter tubes, emotion stones etc) o Feelings thermometer or The 5 Point Scale (handbook available from SENCO) o Emotion coaching approach o Identification of key adults to build positive and trusting relationship with o Continued use of unconditional positive regard to ensure fresh start each lesson o A clear and consistent response to behaviours from all which may include selected scripts. o Being aware of times of the day that may be more difficult for example before lunch if hungry. o Understanding the reasons; is there a pattern? Use of ABC, STAR chart or similar, to identify patterns. o Focus on reducing anxiety including minimising unknowns in the day e.g. give warnings for transitions, clearly map out task steps/task expectation and display schedules for the day o Engage pupils to give their voice.	Books to explore for practitioners: Heather Geddes; *Attachment in the Classroom* (2006), London, Worth Publishing. Niels Rygaard; *Severe attachment disorder in childhood a practical guide* (2006), New York, Springer-Verlag. John Bowlby; *A Secure Base* (1988), Oxford, Routledge ⇨ **NHS CPFT psychology toolkit** ⇨ **Video: Taking CARE to promote mental health in schools**	o Scripts for individuals are known by staff and used. o Relationships are developed. o The voices of pupils are heard. o •Age appropriate supports are used.
What does it look like?	Ordinarily Available Provision	Resources Available	

| Children who may present with extreme emotions | o Behaviour tracking charts such as ABC charts
o Staff understanding of patterns of behaviour and that behaviour is a form of communication
o Trauma informed approach (see links)
o Understanding anxiety in children (see links)
o Provide structure during unstructured times
o Use of transitional objects e.g. a little trinket in their pocket
o Provide calm spaces
o Role of adult – change of adult to support de-escalation
o Consistent approach to managing emotions and behaviours which are shared
o Well-being groups
o Social stories
o Explicitly label emotions – "I can see that you look cross, would you like help?"
o Use of choices to allow the child some control with the same end result
o Direct teaching of calming/self-regulation strategies (visualisations, meditation, breathing)
o Use of emotion coaching/ scripted language style techniques and unconditional positive regard to help repair rupture relationships after an incident.
o Communication with home/family to understand what is going on and to agree strategies.
o Communication with other agencies to understand their involvement or possible involvement. | ⇨ Little Parachutes – social stories **https://www.littleparachutes.com/**

⇨ **Mentally Healthy Schools: Teaching for Neurodiversity**

⇨ **Mentally Healthy Schools: Challenging Behaviour**

⇨ **Video: understanding and advice on self-harm**

⇨ **Young Minds: Supporting Anxiety**

How are you feeling? – also contains strategies when experiencing different emotions
Colour Monster – a monster who is feeling confused about his emotions
'Ish' and 'Dot' by Peter Reynolds are helpful to explore making mistakes
Beautiful Oops! By Barney Saltzberg
'Only One You' by Linda Kranz

⇨   **Therapeutic stories** are also a useful way to support children to develop their emotional literacy skills: Read a story and talk about the feelings of the characters. | • Increased confidence of adults in responding to pupils who demonstrate challenging or dangerous behaviour.
• Staff note fewer incidents of behaviours which challenge.
• Pupil can self-regulate more frequently.
• Adult responses are consistent.
• There is a reduction in time taken to return to learning.
• Staff see a reduction of lesson withdrawal
• Pupil present and increase in pro social behaviours
• There is a reduced need for external professional input
• pupil is able to speak positively about their school experiences.
• •Transitions are smoother. |

What does it look like?	Ordinarily Available Provision	Resources Available	So what?
Children who may be withdrawn, isolated or unable to participate.	• Visuals – objects of reference, photos, timers, now/next, schedules, task list. Schedule displayed of what staff are in the that class across the week. Chances to build a bond with these adults. • Whole setting approach to develop professional curiosity to further explore the child's presentation – why are they withdrawn/overactive/have poor concentration? • Use of an object from home to help them feel safe and secure • WOW boards – 'what I did well today' • Engage pupil to give their voice. • Consider buddying • Small group work for example, friendship or social skills, nurture style groups where available • Giving responsibility for looking after someone or something else. • Focus on developing (thickening and deepening) existing relationships with adults and peers. • Continued use of unconditional positive regard to ensure fresh start each lesson/ session.	⇨ **Social communication group** ⇨ **WOW boards**	• Preferred learning approached are known by staff and used. • The voice of the pupil is heard. • Visual cues are in place and effectively used. • Improved positive relationships between adult and pupil. • Pupil have positive peer relationships • Pupil has increasing confidence boosting self-esteem. • There is a reduction in anxiety of the pupil. • Pupil is more willing to engage positively.
What does it look like?	**Ordinarily Available Provision**	**Resources Available**	**So what?**
Children who may present with eating, sleeping difficulties or physical symptoms that are medically unexplained e.g. soiling, stomach pains.	o Consider rest/calm breaks o Notes situations which prompt anxiety o Home-setting communication book o A smaller space to eat in a calm/quiet area o Avoid commenting on what they have eaten o School to signpost to external agencies e.g. sleep support or School Nurse Service o Liaison and collaboration with home to understand the wider picture. This should be frequent. o Liaise with safeguarding colleagues as appropriate. o Engage pupils to give their voice where appropriate.	⇨ **NHS CPFT Sleep and Bedtime advice** ⇨ **NHS CPFT Eating Difficulties leaflet**	• There are reduced incidents of anxiety related responses. • Staff see an increased attendance of pupils to school and complete lessons. • Engaged in learning. • Pupil feels heard.

Children who may not follow adult instructions	o Know the child – what are their motivators/interests? o Visuals (now/next, personal timer and task lists/planners) o Modified language delivered in shorter chunks o Individualised reward system linked to the child's interests, small steps o Provide take up time o Give an element of control through controlled choices o Give the child responsibility for certain tasks o Positive scripts using positive language to re-direct, reinforce expectations for example, use of others as role models (for example, emotion coaching strategies).	⇨ **Helpful approaches summary for PDA**	• Staff know which aspects of the curriculum/learning pupils find a challenge and put in place support which helps. • Scripts are in place and effectively support pupils. • Visual cues are in place and effectively used.
Children who may struggle to make and maintain friendships	o Social communication groups o Use buddy systems o Plan for turn taking activities o Group tasks with selected peers o Focus on developing existing relationships with adults and peers. o Restorative approaches to enable repair to take place following a relationship fracture		• Friendship support strategies are in place and used. • Pupil have positive peer relationships • Pupil is more willing to engage positively.

Physical and/or Sensory

What does it look like?	Ordinarily Available Provision	Resources Available	So what?
Physical Needs these could include, but are not limited to: • Cerebral palsy • Spina bifida • Duchenne muscular dystrophy • Loss of limb • Degenerative disease • Rheumatoid arthritis	• Enable access to enabling IT equipment • Ensure in the arrangement of the room there is space to move around with a walker or in a wheelchair • Keep a tidy, clutter free room to help children with visual and physical difficulties • Allow opportunities of rest throughout the day - set up a quiet area for children to go to, beanbag, quiet resources, blankets. • Make reasonable adjustments to allow access to toys such as putting toys in a Tuff spot on the floor • Toys or resources in a tray on table to prevent things falling off • Audit access in toileting area as may need grab rails or steps • Use Dycem matting to stop bowls/plates/toys slipping off or Sellotape paper to table/floor to stop it falling off • Offer the opportunity to sit on a chair at group times • Ensure the children can be included in all activities at an appropriate level. Provide a range of options such as different type of scissors, a variety of sizes of crayons/ pens, stick paper to the table to stop it slipping. • Have personal evacuations plans in place for children with physical difficulties	Books to explore – *The Same But Different* By Molly Potter. *Amazing* – by Steve Anthony (wheelchair user) *What Happened to You?* By James Catchpole (mobility issues) *The Christmasaurus* by Tom Fletcher. Brave Huxley **Book** by Dan Hipkiss. ⇨ Newlife Disability Charity – **www.newlifecharity.co.uk**	• Correct equipment is available as suggested in professional reports. • School trips are accessible. Risk assessments are in place. • Adjustments are made to rooms when necessary • Accessibility plans detail support required and available. • Staff incorporate professional advice.

What does it look like?	Ordinarily Available Provision	Resources Available	So what?
Physical Needs Child may not be meeting physical milestones Child may be very clumsy, movements slow or awkward Child may have spatial awareness difficulties. Child may struggle with skills in sports and games Handwriting skills may be slow to progress	o Develop the child's core stability, for example wobble cushion, exercises and games. o Provide physical activities to support development of gross motor skills, for example throwing, catching, hopping, riding a trike etc. In addition, offer opportunities for a child to cross the mid-line such as waving scarves, ribbons, pom poms etc. o Develop fine motor skills, for example hand and arm exercises such as dough disco, specialist scissors, pegboards, threading, play dough, pincer grips activities, such as pegs onto washing line or sorting with tweezers. o Sensory break activities o Clutter free environment o Ensure absence of sight difficulty o Vary recording methods/task type to avoid excessive handwriting o Correct size seat, writing slope, pencil grips o Break down task into smaller components o Avoid situations in PE where the pupil may be perceived as letting his/her side down o Consider referral to local OT services	⇨ **Active Tots Physical Activity Guide** ⇨ **Cambs NHS Community Services OT Toolkit website** ⇨ **Fine Motor Skill Development Pack** ⇨ **Dyspraxia Foundation** ⇨ **Cambs Community Services: Strategies for DCD** ⇨ **Adaptations for PE and Games leaflet**	• Professional advice has been shared • Adjustments for written/fine motor tasks in place.
Hearing Impairment needs these could include, but are not limited to: Hearing loss which is not aided. Has a fluctuating hearing loss. Requires equipment to support their listening, for example hearing aids or cochlear implant	o Consider body language including facial expressions, adult positioning at children's level, eye contact and not being too close so face can be seen. o Gain the child's attention prior to giving an instruction o Use visuals (objects or reference, photographs, signs and symbols) together with speech o Display key words as you talk during direct teaching times o Use of modelling o Give warning regarding fire alarms.	Story: *Freddie and the Fairy* by Julia Donaldson ⇨ **NCDS: Deaf Friendly Teaching in Primary Schools** ⇨ **Video: The Role of TAs in Supporting Deaf and**	• Staff follow guidance of teacher of deaf • Staff know child's individual needs so right equipment in place. • Pupil is able to access learning to make expected progress for the child. • Pupil is given time to pre-

		Hearing Impaired Children by PCC	learn vocabulary.
	o Stand still and don't turn towards board when giving instructions to support children who may be lip reading.		• Pupil has a way to show they haven't heard something. • There is a shared celebration of deaf culture within school
Visual impairment needs these could include, but are not limited to: Impairment of sight, which cannot be fully corrected. Visual impairment may result in the appearance of delayed physical and cognitive responses. May be physically tired. May find it difficult to make and maintain friendships May struggle with early literacy and pre-writing skills	o Think about contrast e.g., paper and crayons, place toys or resources on a plain background that contrasts. o Consideration of best placement of child in the learning environment for seated tasks o Provide additional resources for inclusive play, for example a bell in the ball so all can play together. o Ensure time for a child to map the room o Allow re-mapping to occur when furniture and resources change place to reduce confusion and potential injury o Use recordable devices e.g., Talking Tins o Use blinds to reduce glare in the room o Adults to ensure they don't stand with their backs to the windows when talking to the child o For children who wear glasses ask for a spare pair to be kept at the setting if they are regularly forgotten	⇨ **VISTA** – training and resources 'Off to the Park' – By Chettham Stephen (visual impairment) ⇨ **Video by PCC: How Visual Impairment May Impact Access to the Curriculum**	• Correct support in assessments • Advised size fonts/colour/sitting position etc are in place • Classroom/school is tidy and clear • Signage is clear around school. • Lots of concrete are used to support learning. • Risk assessment is in place and followed • Physical changes to buildings are identified in the accessibility plan.

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Medical Need these could include, but are not limited to: Epilepsy Diabetes Tracheostomy Severe allergies Haemophilia Severe asthma Children with cancer Children with life-limiting conditions Incontinence conditions Cystic fibrosis Hydrocephalus Heart conditions Children may tire easily and appear unwell.	• On transition provide parents with chance to share their insight • Consider fatigue levels and how these impact on children's ability to engage • Make plans for rest and sleep. • Make all staff in the classroom aware of the Health Care Plan that has been agreed by parents • Procedures in place for the administration and storage of medicines, including for trips • Equipment e.g. walkers, standing frame or chair must be checked by health professionals periodically • First aid room/area. • Regular home setting contact when/if child is not attending to maintain 'sense of belonging' with peers and school community		• Staff have a good understanding/knowledge of condition. Where possible experts talk to members of staff to ensure they are well informed. • Individual health care plan is in place • Staff receive training from appropriate organisations. • Attendance support is informed if there is an effect on schooling. • Medicines are correctly stored

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Sensory Processing Need these could include, but are not limited to: Can appear withdrawn Can have limited listening and attention skills Can be fidgety and move around in seat Can chew and bite clothing or resources May avoid apparatus in PE or playground May self-soothe through rocking or head banging May avoid textures such as messy play Children may appear to have periods of 'sensory overload' when they are being overstimulated.	o Complete a sensory environment audit o Request through SENCO a sensory profile document - collaborate with parents and carers to assess sensory needs. o Plan to reduce sensory load o Be aware child may tire more easily o Provide sensory breaks. o Sensory resources available e.g. ear defenders o Flexibility with uniform policy. o Consideration to the environment e.g. noise, room temperature, visual stimuli, proximity to sources o Access to calm place when reaching towards overload o Offer distractions that are highly motivating and divert focus o Offer alternatives which are safe to mouth e.g. Chewelry o Be aware of contents of items like paint, playdough – are these safe if accidentally digested? o Explore with child what strategies they feel helps them	⇨ **Sensory Audit for classrooms** ⇨ **Cambs NHS Community Services Sensory Differences online learning**	o Suggestions from professionals are followed o Reasonable adjustments such as; different uniform, ear defenders, other sensory equipment are in place. o Environmental sensory audit is undertaken alongside the pupils. • Teachers develop and think about classroom environment.