

EARLY YEARS DESCRIPTORS OF SPECIAL EDUCATIONAL NEEDS PROVISION

**GUIDANCE FOR PRACTITIONERS IN ALL
EARLY YEAR SETTINGS**

January 2020
(Updated May 2023)

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Introduction

Local Authorities (LAs) are required to publish information about provision of education for children with special educational needs and disabilities (SEND) as part of their local offer. The Early Years Descriptors (EYDs) outline the LAs' expectations about types and levels of support which children in Derbyshire early years settings should receive.

This document acknowledges the importance of Quality First Teaching and the responsibility of all practitioners to use their best endeavours to meet the needs of all children.

The EYDs are intended as good practice guidance to inform and support the graduated response in meeting children's individual needs. When referring to the EYDs it is important to consider the primary need of the child and look to the relevant section for information.

SEND Locality Teams

The SEND locality teams are the LA link between families, settings and schools in delivering the statutory processes for SEND. The teams also link with other LA services and agencies from Health and Social Care. They bring together working around the Education Health and Care (EHC) process.

There are 6 SEND locality teams in Derbyshire; each team is made up of a Lead SEND Officer, SEND officers and admin officers. The teams support educational settings to deliver the graduated response of the Assess, Plan, Do, Review cycle as set out in the SEND Code of Practice 0-25 using the Derbyshire My SEND Learning Programme format.

Contact details for the SEND locality teams can be found on the Derbyshire Local Offer.

Early identification and intervention

The SEND Code of Practice acknowledges the benefits of early identification – identifying need at the earliest point, and then making effective provision, improves long term outcomes for children. The SEND COP states that all those who work with young children should be alert to emerging difficulties and respond early. The SEND COP expects that, where a child has a significantly greater difficulty in learning than their peers, or a disability that prevents or hinders a child from making use of the facilities in the setting and requires special educational provision, the setting should make that provision. The Derbyshire Early Years Descriptors are therefore intended to outline that provision. In making such provision, settings are expected to draw on their “normally available resources”.

The Early Years Foundation Stage Curriculum (EYFS)

The Early Years Foundation Stage is a framework for children up to the age of five and specifies requirements for learning and development. Early learning goals summarise the knowledge, skills and understanding that young children should acquire by specific areas. The EYDs set out the provision that settings should make when children need additional support to achieve the EYFS goals.

Parents

The SEND COP stresses the importance of parents, participating as fully as possible in decisions; and being provided with the information and support necessary to enable participation in those decisions. Parents know their children best and it is important that all practitioners listen and understand when parents express concerns about their child's development. When a setting identifies a child as having SEND they must work in partnership with parents to establish the support the child needs.

Derbyshire's Information Advice and Support Service (DIASS) for SEND is available to support families of children with SEND. Contact details for DIASS may be found on the Derbyshire Local Offer website.

The role of the SEN coordinator (SENCO)

Early education settings in both the maintained and the non-maintained sectors are required to identify a member of staff to act as the special educational needs coordinator (SENCO). The SEND COP gives clear guidance on the role of the Setting SENCO

Parents should always be consulted and kept informed of the action taken to help the child, and of the outcome of this action.

Graduated response

The SEND COP describes a graduated response to meeting the needs of children with SEND, which in early years settings, should be led and coordinated by the setting SENCO. Where despite purposeful action by the setting, a child continues to make little or no progress over a sustained period practitioners should consider involving appropriate specialists. The decision to involve specialists should be taken with the child's parents. Where, despite a setting having taken relevant and purposeful action to identify, assess and meet the needs of a child, and the child has not made good progress, the SEND COP suggests that the setting should consider requesting an Education, Health and Care Needs Assessment.

Please refer to the Derbyshire Graduated Response documents for schools and for the Early Years Foundation Stage:

[Graduated Response May 2022 \(localoffer.derbyshire.gov.uk\)](https://localoffer.derbyshire.gov.uk)

[Early Years Graduated Response July 2022 \(localoffer.derbyshire.gov.uk\)](https://localoffer.derbyshire.gov.uk)

Support Services

There are a number of support services available in Derbyshire to support early years practitioners to meet the needs of children with special educational needs. Details of available services and their criteria can be found on the Local Offer website.

Assessment, planning and review

In identifying a child as needing SEN support, the early years practitioner, working with the setting SENCO and the child's parents should carry out an analysis of the child's needs. The assessment should be reviewed regularly to ensure that support is matched to need. The support and intervention provided should be selected to meet the identified outcomes for the child. Any staff development needs should be identified and addressed. The child's key person, with support from the SENCO should oversee the implementation of the interventions or programmes as agreed as part of SEN support. The impact and quality of the support should be reviewed in line with the agreed date. Any changes to the outcomes and support for the child should be agreed.

Funding for SEN support in the early years

Local authorities must ensure that all providers delivering funded early education places meet the needs of children with SEN and disabled children. In order to do this local authorities should make sure funding arrangements for early education reflect the need to provide suitable support for them. In Derbyshire, early years settings can request Early Years Inclusion Funding (EYIF) and settings have been provided with information on the criteria for funding and the process by which to apply.

Equipment

Derbyshire recognises that some specialist customised equipment may need to be provided centrally to ensure that pupils with low incidence, high needs have access to appropriate specialist aids and equipment. Derbyshire LA provides funding for an Individual Children's Equipment Budget to meet these needs. Consideration will be given to requests from schools, settings, parents, LA support services, health and social care, when evidence of need is supplied, or recommendations are made or supported by a member of the LA's Sensory and Physical Support Services.

Training

Training on aspects of SEND is available to settings through the LA's training directory. Derbyshire's specialist services also offer support, training and advice.

The Descriptors

The descriptors are set out in the following tables. **The format of each table is specific to that area of need.** They indicate provision that the LA expects settings to make for early years children who have:

- Cognition and learning
- Profound and multiple learning difficulties
- Social emotional and mental health needs
- Autistic spectrum disorders
- Visual impairments
- Hearing impairments
- Physical impairments
- Communication and language
- Multi-sensory impairment

For each group of children detailed information is then given about the LA's expectations in terms of:

- assessment, planning and review
- teaching environment and grouping
- curriculum and teaching methods
- resources

Cognition and Learning: Learning Difficulties

The child's current rate of progress is inadequate and there is a discrepancy between attainments and chronological age. Despite receiving structured Early Years experiences, the gap between his/ her performance and that of other children the same age is widening.

The child will:

- have significant delay in two or more areas of development, with attainment levels below chronological age
- make slow progress in response to teaching strategies and target setting
- may have difficulty in accessing the curriculum without specific support

Assessment, Planning and Review	Teaching Environment and Grouping	Curriculum and Teaching Methods	Resources
<p>On entry to the setting and throughout the child's time in the setting, assessment must include information and advice from parents/carers and professionals already working with the family.</p> <p>The setting will work collaboratively with the other agencies involved with the child. This may involve contributing to or initiating the Team Around the Child approach.</p> <p>The child's strengths and difficulties will be identified through a range of activities – structured observation, developmental checklists, dialogue with staff and curriculum-related assessment.</p>	<p>Consideration should be given to incoming transition arrangements. Advice and information should be freely available to parents/carers to allow them to prepare the child for the move.</p> <p>The child should have an inclusive and nurturing learning environment with access to their full entitlement of attendance.</p> <p>The child should have access to the whole range of learning environments available in the setting including outdoor and indoor play.</p> <p>There should be appropriate differentiation of equipment and resources to enable the child to achieve success. Clear routines supported by consistent language and visual clues should be in place.</p>	<p>The child should have access to all areas of the Early Years Foundation Curriculum. There should be a recognition that the child's behaviour may be typical of his / her developmental level, and there should be consistent use of strategies that reward positive behaviour.</p> <p>There should be consistent modelling of language at an appropriate level for the child – for example using single words or short phrases.</p> <p>There should be consistent use of visual support for spoken language - Makaton gestures and symbols, photographs, or objects of reference appropriate to the level of the child.</p> <p>Suitably differentiated curriculum and teaching methods will reflect the need for ongoing assessment, recording and planning. Strategies to support the child to regulate their emotions should be in place.</p> <p>Specific teaching strategies, as suggested by advice givers should be implemented (e.g. Signing environment, visual supports)</p> <p>There should be access to appropriate IT hardware and programmes.</p> <p>There should be increased flexibility within the timetable to create opportunities to address the child's learning needs and to build on strengths and interests.</p>	<p>ADVICE Advice will be available from the setting SENCO and may be available from specialist support services. (See page 8)</p> <p>STAFFING There should be flexibility within the staffing arrangements to allow for support for children with additional support needs, which use the setting's normally available resources in the most effective way (including, for maintained settings, the delegated Special Educational Needs budget) Consideration should be given to identification of key member/s of staff with responsibility for the child.</p> <p>All setting practitioners are responsible for working with the child on a regular basis through flexible groupings.</p>

Assessment, Planning and Review	Teaching Environment and Grouping	Curriculum and Teaching Methods	Resources
<p>The setting will maintain a profile of the child's developmental level in line with the Early Years Foundation Stage.</p> <p>In planning for the child, there should be a recognition of the child's learning styles and agreement about appropriate teaching strategies</p> <p>The setting's planning for the child will include SMART targets at a developmentally appropriate level, specifying teaching arrangements and resources.</p> <p>Targets should be reviewed through family friendly meetings regularly. Parents/carers should be invited in order to ensure targets are supported in the home. Imaginative ways of including the child's views should be explored.</p> <p>There should be celebration of small steps in progress</p> <p>A comprehensive Health Care Plan and / or Risk Assessment should be in place where appropriate and regularly reviewed.</p>	<p>There should be the opportunity for individual and small group work enabled by the flexible use of staffing, in order to promote independent learning.</p> <p>Opportunities should be made available to work in partnership with parents to promote the learning environment at home.</p>	<p>Identified targets for the child should reflect individual learning styles and appropriate teaching strategies.</p> <p>Adults and children should have clearly identified ways of celebrating success.</p>	<p>It is important that a key worker is identified to facilitate liaison with parents/carers and other professionals. There may be access to specialist support services</p> <p>RESOURCES Additional equipment may be necessary to support the assessed needs of the child</p> <p>ADAPTATIONS The requirements of the Equality Act need to be considered. The school or setting will make reasonable adjustments to its environment, and some building adaptations may be necessary. This may be particularly relevant to this group of children with regard to personal care facilities.</p> <p>TRAINING Settings should have a coherent professional development policy that addresses the needs of children with learning difficulties in order to increase the expertise of staff, so that settings maximise their effectiveness.</p>

Autism and Social Communication difficulties

Autism is a term used to describe a neurological difference in brain development. Children with autism will have differences in terms of their social interaction and communication, processing information and sensory processing.

Every child on the autism spectrum will have a range of differences and abilities in the areas listed. Many children on the spectrum have high levels of anxiety which may also impact on their behaviour.

A Unique Child

Staff in your setting understand that children with autism develop differently to their peers and may have an uneven profile of strengths and challenges.

Your setting gathers information about strengths and challenges from parents / carers and professionals already working with the family

You observe and assess the child in a range of situations and with a range of different people.

You keep records of the child's strengths, difficulties and special interests and use this information to create an individual profile of the child (for example, My SEND learning plan).

Appropriate outcomes should be identified, shared with all involved, and reviewed regularly.

A Health Care Plan and/ or Risk Assessment may be appropriate and should be regularly reviewed.

Information to support smooth transition should be provided, both on entry to the placement and on leaving.

Suggested resources:

[AET Progression Framework Resource](https://www.autismeducationtrust.org.uk/resources/progression-framework)

(<https://www.autismeducationtrust.org.uk/resources/progression-framework>)

[Autism Education Trust One Page Profile example](https://www.autismeducationtrust.org.uk/sites/default/files/2021-10/standards-framework-ey-additional-examples-and-resources.pdf)

(<https://www.autismeducationtrust.org.uk/sites/default/files/2021-10/standards-framework-ey-additional-examples-and-resources.pdf>)

Positive Relationships

Your setting builds effective relationships through collaborative work with children and parents/ carers.

The child will have access to a key adult who can support their development of other relationships with adults and with their peers.

Your setting uses strategies to support children to express their preferences and to communicate their views.

The setting should promote the attitude that all children, including those with SEND and autism, have the same rights as other children to access the EYFS curriculum.

Settings should have a coherent professional development policy that addresses the needs of children with autism in order to increase the expertise of staff.

Your setting should promote a consistent approach by all adults involved with the child and support a positive relationship between home and the setting.

Suggested resources:

[Early Years Competency Framework – Autism Education Trust:](https://www.autismeducationtrust.org.uk/resources/early-years-competency-framework)

(<https://www.autismeducationtrust.org.uk/resources/early-years-competency-framework>)

[Other Ways of Speaking \(The Communication Trust\)](https://ican.org.uk/media/3185/other_ways_of_speaking_final.pdf)

(https://ican.org.uk/media/3185/other_ways_of_speaking_final.pdf)

Learning and Development

The curriculum should take into account the specific profile of a child with autism, with emphasis upon the promotion of social communication, life skills, and emotional well-being of the child.

Pupils may need help to develop their play skills, to engage positively with the environment and to interact appropriately with peers.

The staff should observe and use the child's strengths and interests to support learning and engagement.

The setting should establish clear routines with visual and environmental cues.

Your setting understands that children with autism may have difficulties around planning and predicting and may need additional structure throughout the day and support to transition between activities.

Staff should use clear, consistent, and appropriate language that is aimed at the child's level of understanding, using visual cues as appropriate.

Staff will use everyday routines to develop peer awareness, proximity, and interaction as appropriate.

Suggested resources:

[Early Years Standards Framework – Autism Education Trust](https://www.autismeducationtrust.org.uk/resources/early-years-standards-framework)

(<https://www.autismeducationtrust.org.uk/resources/early-years-standards-framework>)

[Autism: A Guide for EY Settings \(ASD info Wales\)](https://autismwales.org/wp-content/uploads/2020/08/A-Guide-for-Early-Years-Settings_Eng.pdf)

(https://autismwales.org/wp-content/uploads/2020/08/A-Guide-for-Early-Years-Settings_Eng.pdf)

[Developing Play in Autistic Children March 2020 \(Autism West Midlands\)](https://autismwestmidlands.org.uk/wp-content/uploads/2020/03/Developing_Play_In_Autistic_Children_March_2020.pdf)

(https://autismwestmidlands.org.uk/wp-content/uploads/2020/03/Developing_Play_In_Autistic_Children_March_2020.pdf)

Enabling Environments

Staff in your setting understand that children may have sensory needs and will consider how these may be addressed.

Staff understand the importance of consistent routines and clearly organized environments.

Staff understand that change can cause anxiety and, where possible, will help to communicate about change to parents/ carers and children.

Appropriate visual and other environmental cues are used to support the child's understanding.

A communication-friendly environment should be established with a range of systems in place to support the needs of each individual pupil with autism. These may include objects, pictures, or signing.

Staff should understand that children with autism may need time to develop their tolerance to others and may need access to quiet, calm spaces within the setting.

Suggested resources:

[Derbyshire Local Area approach to Sensory Processing Needs – Derbyshire SchoolsNet](https://schoolsnet.derbyshire.gov.uk/special-educational-needs-and-disability/specialist-services/sensory-processing-needs.aspx)

(<https://schoolsnet.derbyshire.gov.uk/special-educational-needs-and-disability/specialist-services/sensory-processing-needs.aspx>)

Physical Impairment

General Description of Needs

The child has a defined physical impairment or medical condition that may be subject to regular medical review/intervention. The impact of the impairment/condition may be direct in that it affects the cognitive or physical abilities, behaviour, or emotional state of the child or indirect in that education may be disrupted. The child will have an impairment of motor function, affecting dexterity or mobility within school settings, which may, without intervention, directly obstruct or hamper the child's access to the curriculum.

Every child with a physical impairment is unique. A child's physical functioning will vary from mild to severe. Many physically impaired children will have an associated learning difficulty which may not be immediately obvious. We recognise that having a physical impairment and additional needs has further implications for learning and development and the PI team are happy to liaise closely with other professionals working with these children.

Children with a physical impairment:

- Utilise specialist equipment to enhance their access to the curriculum and/or daily living activities, e.g., laptop computer, adapted ruler, foot box specialist seating.
- Require a level of adult assistance to access the curriculum, manage their condition, or move with safety around the environment.
- Require a level of adult assistance with self-help skills or personal care.
- Require a Health Care Plan.
- Exhibit fatigue, lack of concentration or motivation due to their condition which has a marked effect on classroom performance.
- In addition, the child's needs may impact on their self-esteem and social relationships.

Generally, schools/settings should:

- Assess, plan and review provision
- Arrange teaching groups to suit the individual needs of child with physical impairment
- Adjust the curriculum and teaching methods
- Provide resources and additional TA support

More specifically schools should:

- Seek general advice from relevant professionals e.g., physiotherapy service, occupational therapy service, Sensory and Physical Support Service.
- Address the needs of children with physical impairment/medical needs through In-Service Training as appropriate.
- Consider the implications of the Equality Act for school visits and extra-curricular activities: the school may need to make reasonable adjustments to its environment and some building adaptations may be necessary. Plans for these should be made via the schools/settings accessibility plan.
- Ensure classroom/nursery setting/management takes account of social relationships. Individual support and/or groupings should be considered, including strategic peer support.
- Use a range of differentiation techniques to promote full access to all activities (including extra-curricular).
- Consider the identification of a key worker. Consideration should also be given to the provision of low cost resources.
- Provide additional Teaching Assistant/staff support to address the child's particular needs where appropriate.

Additional support

Children with SEND should receive support of up to £6,000/9.5 TA hours funded by the school once attending a reception class.

Links

Refer to appropriate sections of these descriptors if the child also has difficulties in other areas e.g., cognition and learning, behaviour

Sensory and Physical Support Service - PI

Head of Service SEN
Support Service
Grange Street
Alfreton
Derbyshire
DE55 7JA
Tel: 01629 532171

AREAS OF NEED	INTERVENTIONS	RESOURCES
<p>Access to the environment</p>	<p>Ensure:</p> <ul style="list-style-type: none"> • Well maintained pathways and clutter free corridors • Designated disabled parking • Access to resources • Access to play equipment • Access to all school activities • Consider fire evacuation and ensure a Personal Evacuation and Exit Plan is written • Consideration will need to be given to location of rooms - re-rooming some activities may be necessary • Some adaptations to the environment may be necessary e.g., lowering door handles/food servery counter etc. to wheelchair height 	<p>Children with physical impairment should receive support of up to £6,000/9.5 TA hours funded by the school.</p> <p>Ask Support Service for Physical Impairment for DCC Accessibility Checklist</p> <p>Reasonable Adjustments guide-see above</p> <p>Seek advice from the SPSS teacher. Provided the child meets the service criteria, the teacher will carry out an assessment of a child's functioning in the educational setting.</p>

AREAS OF NEED	INTERVENTIONS	RESOURCES
<p>Getting Ready</p>	<p>Class</p> <ul style="list-style-type: none"> • Provide appropriate desk and seating • Seat child at the front of the room near the door • Ensure the classroom remains uncluttered and place resources so that they are accessible to the child e.g., near the front and at an appropriate height • As for all children you will use the EYFS to assess and set targets that are appropriate • Consider the specific needs of the child with a physical impairment when planning activities e.g., access to inter-active whiteboard, manipulation of resources, differentiation of child activity (if required) • Consider safe moving and handling needs <p>Group</p> <ul style="list-style-type: none"> • Groupings/settings should reflect the child's cognitive ability • Ensure time is spent with children of a similar age group with activities differentiated to meet child's needs. <p>Individual</p> <ul style="list-style-type: none"> • Specialist equipment to improve access may be needed • A child with a physical impairment can get tired more quickly and may have fluctuating strength and stamina 	<p>Seek advice from the SPSS teacher and/or health professionals.</p> <p>Adapted low cost standard equipment may be needed e.g., ruler/pen/scissors/nonslip matting/sloping writing board</p> <p>EYFS Profile</p> <p>Seek Moving and Handling training – SPSS Teacher can put you in contact with DCC Moving and Handling Advisors.</p> <p>Equipment up to £300 will be provided by the setting (or seek charity funding).</p> <p>Larger, more expensive items of equipment will generally be provided by DCC via SPSS (e.g., rise and fall desks).</p>

AREAS OF NEED	INTERVENTIONS	RESOURCES
<p>Understanding of The World</p>	<ul style="list-style-type: none"> • Access to practical activities e.g., baking, painting, cutting and sticking • Encourage the child to try new things and build on success. • Observe carefully - there may be gaps in the child's knowledge and understanding due to limited physical experiences. • Access to outdoor play and outdoor equipment • i.e., push along equipment, low level play surfaces, soft spots for children that are not mobile. • Access to ICT • Provide individual sessions <ul style="list-style-type: none"> ○ To provide extra time to complete tasks ○ To develop skills to use specialist equipment e.g., ICT ○ To teach particular skills to improve mouse control e.g., provide smaller or adapted mouse. 	<p>Smaller and/or consumable items should be provided by the setting e.g., alternative pens/nonslip matting</p> <p>Outdoor Play may need to be modified to make it more accessible e.g., modified rules/parallel activity/change of equipment</p> <p>Computer settings may need to be modified using the accessibility features located in the control panel</p>

AREAS OF NEED	INTERVENTIONS	RESOURCES
<p>Literacy</p>	<p>Class</p> <ul style="list-style-type: none"> • Consideration should be given to the amount of recording required • Appropriate peer groupings should also be considered. <p>Individual</p> <ul style="list-style-type: none"> • Consideration should be given to the use of low- tech aids or equipment (including basic word processors/laptop technology where appropriate). • Differentiate by volume or by modifying tasks • Specific skill development or alternative and more manageable activities may be required. • An independence skills programme may be needed e.g., typing, managing own aids, ICT • Occupational therapy programme(s) • Specific ICT programmes on the advice of the SPSS Teacher • Appropriate peer groupings should also be considered. • Consideration should be given to access to resources i.e., can child hold books independently, turn pages. Can resources be multi-sensory? Could audio books be provided? 	<p>SPSS teachers, Educational Psychologists, Physiotherapists, or Occupational Therapists may provide advice on strategies, equipment, and/or staff training.</p>

AREAS OF NEED	INTERVENTIONS	RESOURCES
Communication and Language	<p>Individual</p> <ul style="list-style-type: none"> • Some children with physical impairment may also have difficulty with their speech and may need alternative communication strategies i.e., use of Makaton signing or low-tech communication aids 	<p>Speech and language teams are likely to be involved to share advice and set targets.</p>
Communication and Language	<p>Class/Group</p> <ul style="list-style-type: none"> • Consideration should be given to positioning and can child see an adult signing. • Can setting encourage all children to try signing? Makaton is good practice for all children. • Ensure clear instructions are given and if appropriate accompanied by visual prompt. 	<p>Makaton Training.</p>
Mathematics	<p>Individual</p> <ul style="list-style-type: none"> • Ensure child knows their body parts and allow the child to use their body to gain understanding of position, space and measurement. • Ensure mathematical resources are chunky and easy to grasp, stack, and join. I.e., magnetic Velcro resources • Provide jigsaws with large pegs for child to easily grasp and manipulate. 	<p>Ask SPSS Teacher if they have any resources available to loan to the setting.</p>

AREAS OF NEED	INTERVENTIONS	RESOURCES
<p>Physical Development</p>	<p>Class</p> <ul style="list-style-type: none"> • Consideration will need to be given to timetabling and location of rooms/outdoor area. • Ensure setting can be negotiated easily by wheelchair or mobility aid users • Support the child to actively explore inside and outside areas. • Provide opportunity for child to move around in their own way. • Find out what motivates the child to move. • Encourage them (if physically appropriate – seek Occupational Therapist/ Physiotherapist advice) to reach up, pivot, turn, exchange objects between hands, bend down to collect things from the floor, grasp and let go of objects, post and thread. <p>Individual</p> <ul style="list-style-type: none"> • Some additional support may be required at periods throughout the day e.g., group/circle time, breaks, and lunchtimes, movement between indoor and outdoor spaces. • Most physically impaired children will require access to a base for therapy or developmental programmes and/or special arrangements to meet personal care needs. • Meet and greet at beginning and end of day • Help with physical aids e.g., splints • Independence skills programme e.g., hand washing, • managing own aids, ICT • Additional support in some activities e.g., outdoor play, mark making, and accessing technology • A key lunchtime supervisor may be required • Consideration should be given to incorporating physiotherapy exercises into general day to day activities. 	<p>SPSS teachers, Educational Psychologists, Physiotherapists, or Occupational Therapists may provide advice on strategies, equipment, or staff training.</p>

AREAS OF NEED	INTERVENTIONS	RESOURCES
Personal, Social and Emotional Development (PSED)	Individual approach <ul style="list-style-type: none"> • Provide support for personal care (toileting), dressing and feeding as appropriate • May need a Health Care Plan in conjunction with appropriate medical practitioner. • Provide structured programmes to develop self- help skills in conjunction with appropriate external agencies • Some additional support may be required at periods throughout the day e.g., outdoor play, movement between activities and lunchtimes • Consideration will need to be given to accessibility of the toilet, changing facilities. • Independence skills programme 	Refer to: Toilet Anxiety - ERIC website (https://eric.org.uk/information/toilet-anxiety/) Potty Training Children with Additional Needs - ERIC website (https://eric.org.uk/potty-training/children-additional-needs/) Children's Continence - Derbyshire Healthcare NHS Foundation Trust (https://www.derbyshirehealthcareft.nhs.uk/services/childrens-complex-health-derby-and-southern-derbyshire/specialist-nursing) Supporting pupils with medical conditions at school- GOV.UK (https://www.gov.uk/government/publications/supporting-pupils-at-school-with-medical-conditions--3)
Personal, Social and Emotional Development (PSED)	Class <ul style="list-style-type: none"> • The child should remain with his chronological age group for the vast majority of activities • Include the child in all activities e.g., trips • Raise peer awareness of the student's physical impairment • Promote positive attitudes to disabilities 	Take advice from relevant professionals who visit the school.
Personal, Social and Emotional Development (PSED)	Group <ul style="list-style-type: none"> • Provide sensitive grouping arrangements to promote socialisation with others • Arrange small group support for: <ul style="list-style-type: none"> ○ social interaction skills ○ peer mentoring / buddying. ○ Positive Play ○ Nurture Group 	

AREAS OF NEED	INTERVENTIONS	RESOURCES
Personal, Social and Emotional Development (PSED)	Individual <ul style="list-style-type: none"> • Provide opportunities for supporting the development of friendships as appropriate • Use a positive home-school book • Meet and greet 	Individual counselling or therapeutic support from external agencies e.g., Educational Psychologist may be appropriate.
Expressive Arts and Design	Class <ul style="list-style-type: none"> • Ensure child has access to resources and that there are a variety of chunky, easy grip mark making resources. • Can child access mark making on an easel or would it be better on a table. • Think about gluing and sticking activities – Is a glue stick more manageable than PVA glue with a spreader, can scissors be adapted i.e. block scissors, can resources be ready cut out? • Use ICT to create designs and artwork- touch screen technology if appropriate. • Ensure musical instruments are accessible i.e., chunky beaters, wrist bells. • Use hand under hand approach when exploring materials/resources. 	Discuss planned activities with SPSS PI Teacher so they can offer advice and share ideas.
Fatigue	Individual <ul style="list-style-type: none"> • Quite time opportunities to encourage child to rest • Meet and greet with a familiar adult daily • Use strategic withdrawal for specific skills work or therapeutic input 	SPSS teachers, Educational Psychologists, Physiotherapists, or Occupational Therapists may provide advice on expectations and strategies

Personal, Social and Emotional Development

This document should be regarded as good practice guidance that will support you with your graduated response to an individual child's needs.

Children can present with a range of difficulties in this area, even after differentiated learning and the application of usual behaviour management strategies. Behaviours may be obvious and observable, for example a child may hit out, refuse to follow adult requests or have great difficulty sharing and engaging in joint play. Alternatively, behaviours can be more subtle and less easy to identify as a concern: the child may withdraw from social situations, become less confident or more anxious. Whether obvious or subtle, all of these could affect the development of the individual child and create barriers to learning.

Underpinning this section is a belief that all behaviour, no matter how challenging, has a reasonable purpose (or function) underlying it. Hence, difficulties with behaviour in this sense reflect an unmet need. A critical element in moving forwards is developing your best understanding of what underlies the behaviour, so that you can try to enable the unmet need to be met more appropriately. If the underlying purpose is not considered, and the focus is simply on getting rid of the unwanted behaviour, it is most likely that the behaviour will persist, or that you are successful in extinguishing one behaviour but another arises to replace it, as the underlying need remains unmet.

A range of information can help us to understand the behaviour better:

- Good information about the child's skills in all areas, as we need to consider behaviour in the context of developmental levels rather than chronological age. The child may have identified diagnoses with implications for their development.
- Information about what happens before and after the behaviour, so that you develop a picture of what makes it more (and less) likely to happen, and what outcomes might make it more likely to happen again (e.g., if the child gains something from the behaviour, such as a toy to themselves, or more adult interaction)
- Information about the child's background: past or current trauma, bereavements, lack of basic essentials such as housing, food etc., can all result in unmet needs (including attachment difficulties) that are reflected in a child's behaviour. A child's behaviour results from a complex mix of their experiences and interaction with the current environment. You might not be able to influence past events but knowledge can help develop your understanding of current behaviour, and you can also make changes in their current environment to better meet their needs.

Research also shows that positive strategies are more likely than negative (punitive) strategies to result in positive behaviour change, and so the focus here is on developing a range of positive proactive strategies to address the needs of the child, along with strategies to manage safely situations where the behaviour still arises.

Area of Need	Interventions / Activities	Resources
<p>Understanding the behaviour</p>	<ul style="list-style-type: none"> • Observations / records of the behaviour to identify how often the behaviour occurs; for how long; how severe; what happens before and after the behaviour (often captured in an ABC chart – Antecedents, Behaviour, Consequences). • Use your assessment and tracking tools to gain a comprehensive picture of the child’s development across all EYFS areas. • Discuss with parents / carers the history of the behaviour, where/when it occurs most / least, significant events in the child’s life, current circumstances etc. Regular and honest communication between the setting and home is crucial, particularly when changes in behaviour occur suddenly: all behaviour occurs for a reason. • Consider what is the behaviour communicating? What is the child’s ‘I message’? If the behaviour could talk, what might it be saying, for example “I’m frightened”, “I’m angry”, “I want daddy”. • Consider what the child appears to hain from behaviour, what is the unmet need, e.g.: <ul style="list-style-type: none"> ○ More interaction with adults or children ○ Avoidance of something ○ Control, making choices ○ Expressing emotion (e.g., anger, anxiety, excitement) ○ Sensory stimulation (reducing/increasing) 	<ul style="list-style-type: none"> • When PSED difficulties are severe and long term a referral to the Educational Psychology Service may be appropriate. They may suggest that a Multi Element Plan or Emotional Wellbeing Support Plan might be appropriate. • When PSED difficulties are accompanied by significant cognitive difficulties, a referral to the EYSENS may be appropriate. • Referrals to both EPS and EYSEN are made through the EY Panel using this <i>form</i>. • You can contact the EYSEN helpline – email: earlyyears.senhelpline@derbyshire.gov.uk • Derbyshire EYIS Roots and Wings training suite available through cs.eys@derbyshire.gov.uk • Behaviour and Attitudes 1: Confident Capable and Caring • Behaviour and Attitudes 2: Strategies that Work <p>Both available through Eventbrite</p> <p>EYSEN training</p> <ul style="list-style-type: none"> ○ SEMH – becoming curious, calm and confident practitioners in response to complex behaviour see Eventbrite <p>EYSEN and EYIS also offer bespoke training on request and can advise on what training might be suitable.</p>

Area of Need	Interventions / Activities	Resources
<p>Understanding the behaviour (continued)</p>	<ul style="list-style-type: none"> • Consider drawing up a more formal behaviour plan / Multi-Element Plan, enlisting support from parents/carers and other professionals. • If you have not already done so, consider completing the ECaT Assessment Tool – Communication and Language Assessment, including social development, listening, and attention. • Consider completing the ECaM Assessment Tool. • Consider using sensory audit if you have received training. 	<p>ECaT Assessment Tool and ECaM Assessment Tool available in setting or through request to cs.eyes@derbyshire.gov.uk</p>

Area of Need	Interventions / Activities	Resources
<p>Proactive strategies – Environmental</p>	<ul style="list-style-type: none"> • Positive behaviour policy in place and shared with all practitioners in the setting. • Shared understanding between practitioners and parents/carers of strategies to be used with individual children; then consistent implementation. • Consider all aspects of the environment, and use information gathered regarding what makes the difficult behaviour more / less likely to occur: <ul style="list-style-type: none"> ○ Physical aspects – lighting, heating, noise, size of space etc. ○ Social aspects – group sizes, support for interactions with others, language used (considering vocabulary, complexity of sentences used etc.), visual cues used to aid understanding (sign, gesture, objects/photos of reference, etc.). ○ Teaching approaches / resources used / expectations – are they developmentally appropriate / accessible to the child? Clear routines, visual timetables, now... next..., countdowns etc. to support engagement / transitions. ○ Meeting basic need – e.g., can you provide snack if the child arrives hungry, can you provide a jumper if they do not have adequate clothing? • Children are frequently reminded of the setting rules in a proactive way (through discussion as well as visual reminders around the setting), as well as consequences of adhering to them and breaking them. The number of rules a child should be expected to understand should be linked to their age and stage of development. 	

Area of Need	Interventions / Activities	Resources
Proactive strategies – Skill Development (continued)	Building on strengths and interests <ul style="list-style-type: none"> • Identify strengths, areas where the child succeeds, what they are interested in, when they are happy. Provide opportunities for the child to show these strengths and enjoy these positive experiences. • Introduce new activities that you think the child might enjoy given what you know about them. • Use areas of strength to build relationships and self- esteem, e.g., let them help younger children if they do that well. 	Derbyshire ECaT Assessment Tool
Proactive strategies – Skill Development (continued)	Areas of difficulty, especially where they might contribute to the behaviour <ul style="list-style-type: none"> • Identify their particular areas of difficulty and provide opportunities to develop in these areas, potentially including but not limited to: <ul style="list-style-type: none"> ○ Play skills ○ Social skills ○ Communication skills ○ Physical skills 	See other sections of Early Years descriptors according to particular areas of child’s needs. Small Steps framework to help current level of development and next steps.

Area of Need	Interventions / Activities	Resources
Proactive strategies – Skill Development (continued)	Coping strategies <ul style="list-style-type: none"> • Skills relating to understanding and management of feelings should be taught through role modelling, visual cues, stories, talking, and praise. Reminders about what constitutes appropriate behaviour may be needed on a regular basis – visual reminders for all can be helpful – symbols or photos. • Role play opportunities in the home corner or similar. Supporting the child to assume and maintain a role, and play out a scenario of their choice, will help to develop skills of self-control. • Support children to recognise their own emotions and to express them appropriately. • Use of social stories / comic strip conversations and role play to explore situations that children may find difficult and to teach appropriate responses to these. 	
Proactive strategies – Rewards	Consistent use of positive recognition of any improvement in behaviour. Rewards should be: <ul style="list-style-type: none"> • Relevant / interesting / motivating to the child. • Given as soon as possible after the behaviour being rewarded, with specific praise of the behaviour so the link between the positive behaviour and the reward is clear. • Varied to keep interest, mix up different types of rewards. Rewards can be: <ul style="list-style-type: none"> ○ Tangible (i.e., of value in themselves – toys, crayons, etc. etc.) ○ Social (where the rewarding element is the social aspect, e.g., time with special adult reading a book, or simply someone praising them) ○ Activity ○ Token (ticks on a chart, stamps, stickers etc.) <p>Success should be communicated to parents and carers.</p>	

Area of Need	Interventions / Activities	Resources
Reactive strategies – Responding to difficulties	<ul style="list-style-type: none"> • Early intervention is important here in avoiding situations escalating and increasing the chance of harm. Hence it is important to: <ul style="list-style-type: none"> ○ Identify a child’s “early warning signs” of them finding things difficult – record the information and share with all who work with the child. ○ Ensure adults act on these early warning signs when they appear. • What will help to avoid escalation or resolve a difficulty that has developed will vary from one child to the next; and be informed by your understanding of the child (above). Common strategies include: <ul style="list-style-type: none"> ○ Diversion to another activity, a different area. ○ Direction to a calming place / activity (e.g., tent, sensory area, sharing a book, slowing breathing by blowing bubbles), give space and time to calm. ○ Cuddle/massage. ○ Engage in sensory activity, e.g., rocking. ○ Reminders of targets / rewards / Golden Rules agreed strategies – visual reminders may be helpful as often when distressed, further verbal input is hard to process and can even worsen the situation. • Agreement amongst practitioners and parents regarding the strategies that will be used to deal with difficult behaviour if it occurs • Adult: calm, quiet voice, acknowledging the difficulty the child is having, modelling containment of emotions. • Reduce verbal input. • Avoid physically moving the child, it may be possible to move others to ensure safety. • Introduce soft items (e.g., cushions, beanbags) to reduce danger of throwing harder items. <p>Where developmentally appropriate, “debrief” with the child once they are calm again, not to ask “Why did you do that?”, but ask how they were feeling, what they were thinking, explore what they could do another time they felt like that. Remind of strategies available / discuss new ones. The debrief should not be too soon after an incident, it may reignite the situation.</p>	

Deafness and Hearing Impairment (HI)

This document acknowledges quality first teaching for all children and the requirement/duty to use best endeavour to meet their needs. If you have a child within your setting who meets the criteria set out below and does not yet have a teacher of the deaf involved, please make a referral to the Sensory and Physical Support Service (SPSS).

Criteria for involvement:

The child is a resident of Derbyshire and/or attends a Derbyshire setting and has one or more of the following:

- An average hearing loss of 30dB or more - this is taken over the mid frequencies for both ears, according to British Association of Teacher of the Deaf guidelines.
- A moderate, severe or profound hearing loss in one ear.
- A moderate, severe or profound high-frequency hearing loss.
- A diagnosis of auditory neuropathy.

Some deaf and HI children require minimal support in settings and others will need high levels of individualised and specialist help. Deaf and HI children have the same potential to achieve and attain as any other child given the right levels of support and access to the curriculum. It is important to know the degree and nature of the child's hearing loss. It could be:

- Mild, moderate, severe or profound
- Fluctuating (glue ear) or permanent
- Affecting one or both ears

Deaf and HI children *may* use hearing technologies: hearing aids, cochlear implants, bone-anchored hearing aids or bone-conduction hearing aids. N.B. Hearing technology does not replace normal hearing. Some children may also have a radio aid.

Deafness and hearing impairment can impact on spoken language development. Deaf and HI children may not have access to incidental spoken language which can also impact on language development.

Deaf and hearing-impaired children may require adaptations to their environment or specific differentiation of materials in order to access their early learning goals. Some modifications may need to be made to the presentation of the curriculum, the setting environment, or the management of the child e.g. positioning in setting, use of equipment etc.

We recognise that having both a hearing impairment and other additional needs may give rise to further implications for learning and development and the Deaf and HI team are happy to liaise closely with other professionals working with these children.

Area of need	Curriculum Access/Intervention	Resources
<p>Deafness/hearing impairment</p> <p>Every child is unique and the impact of deafness will vary according to each child. Some contributing factors may include:</p> <ul style="list-style-type: none"> • the child’s communication mode • the age at which the child became deaf • the age at which the child was prescribed hearing technology (if appropriate) • the consistency of hearing technology usage • the child’s cognitive abilities • the level of support surrounding the child • the child’s character. 	<ul style="list-style-type: none"> • Understand the degree and nature of the child’s deafness/hearing impairment and language level. • Gain an awareness of the effects of deafness/hearing impairment upon curriculum access. • Ensure you are aware of the child’s preferred mode of communication. • Assess and set targets that are appropriate to the child’s cognition and learning levels. • Establish a consistent routine in a well-planned environment. • Provide opportunities for pre and post-learning of activities. • Allow the child more time to explore new things and provide opportunities for repetition. • Understand that children who are deaf/hearing impaired need more processing time. • Allow more opportunities to help develop the child’s auditory memory. 	<p>NDCS (National Deaf Children’s Society) booklet Supporting the achievement of deaf children in early years setting: (https://www.ndcs.org.uk/documents-and-resources/supporting-the-achievement-of-hearing-impaired-children-in-early-years-settings/)</p> <p>Early Support - Information about deafness and hearing loss: (https://councilfordisabledchildren.org.uk/sites/default/files/uploads/files/earlysupportdeafness-and-hearing-loss-final.pdf)</p> <p>Liaison with the SPSS for Deaf and Hearing Impairment (HI) (https://www.derbyshire.gov.uk/education/schools/special-educational-needs/support/deaf-hearing-impaired/sensory-and-physical-support-service-for-children-and-young-people-who-are-deaf-or-hearing-impaired.aspx)</p> <p>Speech Blog UK – Games to improve auditory memory: (https://speechbloguk.com/games-to-improve-auditory-memory)</p>

Area of Need	Curriculum Access/Intervention	Resources
<p>Fatigue</p> <p>Deaf and HI children have to work extra hard to listen/watch (concentrate) as well as process and do (learn).</p>	<ul style="list-style-type: none"> • Ensure there are opportunities for some 'down time'. • Allow/encourage the child to retreat to a quieter space. • Reassure the child that it is okay to be tired. 	
<p>Working with people involved with the child</p> <p>If the child meets the criteria, refer to the SPSS if a teacher of the deaf is not yet involved.</p>	<ul style="list-style-type: none"> • Meet with the teacher of the deaf to identify the child's individual needs. • The teacher of the deaf will carry out training as appropriate. • Learn how to check and maintain any equipment the child uses. 	<p>Liaison with the SPSS for Deaf and Hearing Impairment (HI) (https://www.derbyshire.gov.uk/education/schools/special-educational-needs/support/deaf-hearing-impaired/sensory-and-physical-support-service-for-children-and-young-people-who-are-deaf-or-hearing-impaired.aspx)</p>

Area of Need	Curriculum Access/Intervention	Resources
<p>Health and safety</p>	<ul style="list-style-type: none"> • Be aware that the child may not hear you in background noise which could have safety implications. Will they hear a fire alarm or a shouted warning of danger? • Be aware of the health and safety implications of cochlear implants. • Be mindful of the child hitting their head because of their implant/s. • Be aware of the health and safety implications of small batteries and ear wax etc. if the child wears hearing aids. • Liaise with their teacher of the deaf for training and advice on the equipment the child uses. • Be aware that deaf and HI children may lose their balance more easily. • During outdoor play and physical activity, it is important to remember the range within which the child can hear most effectively. • Be mindful that some children may find some physical activities, such as climbing, difficult because they lose their balance easily • Consider writing a care plan. 	<p>Liaison with the SPSS for Deaf and Hearing Impairment (HI) (https://www.derbyshire.gov.uk/education/schools/special-educational-needs/support/deaf-hearing-impaired/sensory-and-physical-support-service-for-children-and-young-people-who-are-deaf-or-hearing-impaired.aspx)</p>

Area of Need	Curriculum Access/Intervention	Resources
<p>Supporting the use of hearing technology (hearing aids/ cochlear implants etc.)</p> <p>If the child has any hearing technology, It is essential that it is working optimally at all times to ensure the child has access to language and learning.</p>	<ul style="list-style-type: none"> • Liaise with the teacher of the deaf on how to check and maintain the aids. • Check the hearing technology is working at the beginning of each session (am and pm). • If the child uses a radio aid, check this is working each session (am and pm). Please adhere to the guidance provided by the teacher of the deaf on how to check and use the radio aid correctly. 	<p>NDCS – How do hearing aids work? (https://www.ndcs.org.uk/information-and-support/childhood-deafness/hearing-aids/how-do-hearing-aids-work/)</p> <p>NDCS – How does a Cochlear Implant work? (https://www.ndcs.org.uk/information-and-support/childhood-deafness/hearing-implants/cochlear-implants/how-does-a-cochlear-implant-work/)</p>
<p>Create a good listening environment to enable access to spoken information</p> <p>The impact of deafness may mean a young child has difficulty being able to:</p> <ul style="list-style-type: none"> • Listen when there is background noise • Concentrate or listen for long periods of time • Locate sources of sound • Follow instructions. <p>In addition, hearing aids amplify background noise which makes listening in noise more difficult.</p> <p>Distance impacts on how well hearing aids work.</p> <p>Reverberation (echo) also impacts on speech perception.</p> <p>Deaf children may also make use of lip reading to aid their listening and understanding.</p>	<ul style="list-style-type: none"> • Create a good listening environment and create a quiet area where there are lower levels of noise. • Be aware of hard surfaces – try to improve listening environments through using more soft furnishings: rugs/ cushions/curtains etc. • All activities should be undertaken in good lighting to allow the child to follow facial expressions, body language and enable better lip reading when necessary. • Keep background noise to a minimum when talking to the child or group including the child. • Be close to the child so they can hear you (ideally up to 1 metre) to help the child discriminate speech. • Use small groups in a quiet environment to support the child’s listening and learning. • Point out new sounds in the setting and name them. • Position the child close to the speaker but ensure the child can turn easily to see the other children too. • Allow for repetition and reinforcement. 	<p>NDCS – Creating Good Listening Conditions (https://www.ndcs.org.uk/information-and-support/being-deaf-friendly/information-for-professionals/creating-good-listening-conditions-for-education-settings/)</p> <p>Liaison with the SPSS for Deaf and Hearing Impairment (HI) (https://www.derbyshire.gov.uk/education/schools/special-educational-needs/support/deaf-hearing-impaired/sensory-and-physical-support-service-for-children-and-young-people-who-are-deaf-or-hearing-impaired.aspx)</p>

Area of Need	Curriculum Access/Intervention	Resources
<p>Supporting communication</p> <p>The deaf child may struggle to hear clearly when being spoken to and when instructions are being given out etc.</p> <p>Some deaf children may use signing as their main mode of communication.</p> <p>The child may have delayed language and may struggle to make sense of what people say and to understand what is happening around them.</p>	<ul style="list-style-type: none"> • Make sure you get the child’s attention before talking to them by saying their name or gently touching them on the arm, otherwise they may not follow the first part of the conversation or instructions. • Face the child when you are speaking; do not cover your face with hands, hair, objects. • Do not stand/sit with your back to the light source e.g., a window as this can make it difficult for the child to see your lip patterns or facial expressions. • Use clear routines supported by consistent language and visual cues. • Ensure that spoken language is re-enforced by visual cues and clues. • Position the child so they have an uninterrupted view of the speaker in group situations. Where there is a small or large group activity, the child may need to be seated at the front and side of the group for full access. • Frequently check that the child has heard and understood – for example by using open question techniques or visual resources. • Where the child uses signs as their main mode of communication, all staff should become familiar with at least everyday words and phrases and staff working directly with the child should have a commitment to achieving a high level of competence in signing. • Show the child what activities are available each day and where they are, using this as an opportunity to repeat and model language for familiar setting routines and activities and introducing vocabulary for new ones. 	<p>NDCS (National Deaf Children’s Society) Supporting the achievement of deaf children in early years setting (https://www.ndcs.org.uk/documents-and-resources/supporting-the-achievement-of-hearing-impaired-children-in-early-years-settings/)</p> <p>NDCS Tips to be deaf friendly Communicating with deaf children (https://www.ndcs.org.uk/information-and-support/being-deaf-friendly/communicating-with-a-deaf-child/)</p> <p>Liaison with the SPSS for Deaf and Hearing Impairment (HI) (https://www.derbyshire.gov.uk/education/schools/special-educational-needs/support/deaf-hearing-impaired/sensory-and-physical-support-service-for-children-and-young-people-who-are-deaf-or-hearing-impaired.aspx)</p>

Area of Need	Curriculum Access/Intervention	Resources
<p>Helping the deaf child communicate with other children</p> <p>Deaf children may struggle more to communicate with their peers.</p>	<ul style="list-style-type: none"> • Encourage children to follow your lead in not covering their faces with hands, hair, objects or looking away when speaking. • When appropriate, teach and use signs with all the children in the setting, this will benefit everyone. • Deliver deaf awareness sessions to other children so they know how to help the child communicate. • Support the child to learn how to take turns in games and conversations. • Make 'quiet zones' where lower noise levels are encouraged and established. Deaf and other children can take part in quieter activities, such as sharing books, completing puzzles or talking. 	<p>Consider purchasing some books with deaf characters. Here is a list of some which are available:</p> <p><i>Freddie and the Fairy</i> by Julia Donaldson</p> <p><i>What the Jackdaw Saw</i> by Julia Donaldson</p> <p><i>Fairy Magic</i> by Cerrie Burnell</p> <p><i>Elephant and the Lost Blanket</i> by Alex Naidoo</p> <p><i>Daisy and Ted's Awesome Adventures</i> by Alex Naidoo</p>

Area of Need	Curriculum Access/Intervention	Resources
<p>EYFS ELGs</p> <p>Communication and language development</p> <p>Deaf children may have delayed language and communication skills.</p> <p>Deaf children miss out on overhearing language (incidental language) and therefore may have a reduced repertoire of vocabulary and limited functional language and linguistic social skills.</p>	<ul style="list-style-type: none"> • Play games to help develop the child’s attention skills such as <i>Ready, Steady, Go</i> and encourage the child to wait for the word/sign ‘Go’. • Give additional focus to modelling new language and instructions and check the child has understood. • Give extra time for rhymes, activities, and games with lots of repetition. • Keep language simple, repeating key words. • Use regular, structured lessons to teach social use of language in a small group. • Provide activities and opportunities to develop learning new language and vocabulary. • Provide constant opportunities for the child to hear/see and use language in meaningful situations 	<p>Amazon Word Aware Teaching Vocabulary (https://www.amazon.co.uk/Word-%20Aware-Teaching-Vocabulary-%20Early/dp/1909301671/ref=sr_1_4?key%20words=teaching+vocabulary&qid=157%205374978&s=books&sr=1-4)</p> <p>I CAN's Talking Point (https://ican.org.uk/i-cans-talking-point/)</p>

Area of Need	Curriculum Access/Intervention	Resources
<p>Literacy</p> <p>A strong language base is essential for literacy development. Deaf children may have delayed language skills which may impact on their literacy development.</p>	<ul style="list-style-type: none"> • Provide books with characters wearing hearing aids/cochlear implants. • Make stories visual by using a story sack and books with pictures that match the story line or words. • Provide books about everyday routines, familiar environments and special times (e.g., birthdays) to consolidate or introduce new vocabulary. • Use pattern books and wordless books to help develop language and literacy skills. • Where appropriate, ensure the child is in a smaller group to aid listening when working on letters and sounds. • Ensure the child is seated appropriately to hear/see the text/signs as appropriate. • Ensure you are familiar with the impact of the child’s hearing loss – they may not be able to hear particular speech sounds. 	<p>See the books listed above.</p> <p>Reading Rockets (https://www.readingrockets.org/article/teaching-vocabulary)</p> <p>Pattern Books:</p> <ul style="list-style-type: none"> • If You Give a Mouse a Cookie • Brown Bear, Brown Bear, What Do You See? • The Very Hungry Caterpillar <p>Wordless Books</p> <ul style="list-style-type: none"> • One Frog Too Many – Mercer Mayer • You Choose – Nick Sharratt • Just Imagine – Nick Sharatt • The Chicken Thief – Beatrice Rodriguez <p>NDCS - Teaching phonics to deaf children (https://www.ndcs.org.uk/documents-and-resources/teaching-phonics-to-deaf-children-guidance-for-teachers/)</p>

Area of Need	Curriculum Access/Intervention	Resources
<p>Mathematics</p> <p>The child must use many skills associated with literacy to be able to understand maths. These include speaking, listening, reading and writing.</p>	<ul style="list-style-type: none"> • Sing lots of rhyming and number songs and encourage the child to clap and sing along. • Play games such as hiding the object under a blanket. • When reading books, ask where the big/small animal is etc. • Liaise with the family regarding the rhyming/counting songs etc. so the family can sing them at home too to help embed them. • Count items/stairs/children during everyday activities/routines. • Talk through routines using, first, next, after and so on. • Talk through everyday events such as ‘more juice’, ‘less gravy’. • Refer to the NDCS booklet: <i>Helping your deaf child to develop early maths skills</i> for more guidance. 	<p>NDCS – Helping your deaf child to develop early maths skills (https://www.ndcs.org.uk/information-and-support/education-and-learning/helping-your-deaf-child-learn-at-home/helping-your-deaf-child-with-maths/early-maths-skills/)</p>
<p>Physical Development</p> <p>The child may not have the language needed to communicate their health and self-care needs.</p>	<p><i>Moving and handling</i></p> <ul style="list-style-type: none"> • During outdoor play and physical activity, it is important to remember the range within which the child can hear most effectively. • Be mindful that some children may find some physical activities, such as climbing, difficult because they lose their balance easily. <p><i>Health and self-care</i></p> <ul style="list-style-type: none"> • Give the child the language of their self-care routines through consistent communication regarding what is happening using either (or a combination of) spoken, signed or visual cues e.g., nappy, toilet, etc. 	

Area of Need	Curriculum Access/Intervention	Resources
<p>Personal, social, emotional development</p> <p>The child may need additional support to communicate with peers and may be affected socially and emotionally by the implications of their hearing impairment. They may struggle to understand and express what they are feeling and to manage their emotions.</p>	<ul style="list-style-type: none"> • Provide opportunities for interactions with others. • Some deaf and hearing impaired children may tend to assume a passive role, others may only like to be in charge so that they know what to expect. An adult may need to sensitively steer group play. • Provide an environment with a positive attitude to deafness. • Help the child to understand their emotions and give them the language needed. • Encourage/guide the child to express their emotions. • Refer to the NDCS guide: <i>What are you feeling? A guide to help deaf children understand and identify their emotions</i> for more guidance. 	<p>NDCS - Supporting the achievement of deaf children in early years setting (https://www.ndcs.org.uk/documents-and-resources/supporting-the-achievement-of-hearing-impaired-children-in-early-years-settings/)</p> <p>NDCS - What are you feeling? A guide to help deaf children understand and identify their emotions (https://www.ndcs.org.uk/documents-and-resources/what-are-you-feeling-a-guide-to-help-deaf-children-understand-and-identify-their-emotions/)</p> <p>Toy Like Me (https://www.toylikeme.org/)</p> <p>Build a Bear (https://www.buildabear.co.uk/)</p>

Area of Need	Curriculum Access/Intervention	Resources
<p>Expressive arts and design</p> <p>There may be gaps in the child’s knowledge and understanding due to limited access to language and sounds.</p>	<ul style="list-style-type: none"> • Help the child with imaginative play – the child may have not had the same experience as their hearing peers. • Give the child more time to explore musical instruments and the sounds they make. • Give them the language of musical sounds and the names of the musical instruments. • Make songs visual by using a song bag with items from the song, e.g., ‘Old MacDonald’ – put some farm animals in the bag. • Put lots of emphasis on the sounds the animals/vehicles etc. make. • Send the words/titles of songs home so families can sing them as well to help embed the words/refrains. • Introduce the child to different textures, flavours, sounds and constantly give them the language for these new experiences. • Encourage the child to try new things and build on success. 	
<p>Understanding of the world</p>	<ul style="list-style-type: none"> • Encourage families to provide photos and information about their families, pets, events, traditions and so on to help give the children visual and/or familiar prompts to talk about events in their own lives. 	

Acknowledgements to: NDCS, Council for Disabled Children, Ear Foundation

Vision Impairment

This document acknowledges quality first teaching for all children and the requirement/duty to use best endeavour to meet their needs. If you have a child within your setting who meets the criteria set out below and does not yet have a Vision Impairment teacher involved, please make a referral to the Sensory and Physical Support Service

Vision Impairment refers to a range of difficulties from reduced vision to partial sight through to blindness. Pupils with vision impairments cover the whole ability range. **We generally only accept referrals if there has been a medical diagnosis of a vision impairment. Once a referral has been accepted the VI teacher will visit to assess what levels of support that child will need. Some children may not remain on our caseloads long term, but other children will.** For educational purposes pupils are considered to be vision impaired if they have a medically recognised condition or have a vision impairment that is not corrected by glasses and requires adaptations to their environment or specific differentiation of learning materials in order to access the curriculum. Some modifications may need to be made to the presentation of the curriculum, the setting environment, or the management of the pupil e.g., positioning in class, use of equipment etc. We recognise that having a vision impairment and additional needs has further implications for learning and development and the VI team are happy to liaise closely with other professionals working with these children.

The information below is for guidance and is not an exhaustive list.

- Vision is our main way of gaining information. It stimulates curiosity, integrates information, and makes us want to explore.
- More intense use of the other senses doesn't automatically develop to compensate for lack of vision. We have to develop them through providing experiences, practice and supported learning.
- Learning through other senses can be slower and doesn't always provide all the information needed to make complete sense of a situation.
- Poor vision can have a huge impact on social interactions: body language, gestures, facial expressions, and eye contact might be missed or misinterpreted.

EYFS Area	Interventions/Activities	Resources
<p>Getting Ready</p>	<ul style="list-style-type: none"> • As for all children you will use the EYFS to assess and set targets that are appropriate. • Provide a quiet area where the child feels safe and establish a consistent routine in a well-planned environment. • A child with a vision impairment can get tired more quickly and may have fluctuating vision. • Need to establish a good relationship with a key person – gradually this can be extended to others. • A child with a vision impairment may have missed out on opportunities for incidental learning and will need formal and informal opportunities for pre and post learning of activities. Understand the child’s needs with regard to picture/print size/lighting /sound levels and organisation as advised by the QTVI. 	<ul style="list-style-type: none"> • EYFS Profile • Early Support Developmental Journal for Vision Impairment • Quest • Focus on Foundation booklet from the RNIB • Early Support Information Booklet for Parents – Vision Impairment, Part Two, Early Years • EYSENS Small Steps profiles • Check if the child has already been referred to the Support Service for Vision Impairment. If ‘yes’, ensure contact is made with the specialist teacher. If ‘no’, discuss referral with the family.

EYFS Area	Interventions/Activities	Resources
<p>Personal, Social and Emotional development</p>	<ul style="list-style-type: none"> • Encourage the child to become as independent as possible. • Encourage the child to try new things and build on success. • If items move out of reach assist the child in finding them instead of returning the items to the child. • If the child has repetitive behaviours try to distract them by offering an attractive alternative. • Observe and listen to the child’s reactions to find out what interests them and what they enjoy. Children with a vision impairment can react differently to others. • Need to provide opportunities for interactions with others. Some children with a vision impairment will tend to assume a passive role, others may only like to be in charge so that they know what to expect. An adult may need to sensitively steer group play. • Staff need to be proactive in enabling play alongside a variety of others so that the child can find out who they like to be with by using a hands-on approach and modelling their peers/staff actions. The child may need help to learn how to take turns in games and conversations. 	<ul style="list-style-type: none"> • A teacher from the Support Service for Vision Impairment may be able to provide some tailor-made training for you.

EYFS Area	Interventions/Activities	Resources
<p>Physical development (Orientation Movement and Mobility)</p>	<ul style="list-style-type: none"> • A child with a vision impairment may have experienced fewer opportunities to be active so they may need additional support and encouragement. • Support the child in actively exploring inside and outside areas. • Provide opportunities to move around freely and experience different movements. Textures and sounds can be used to aid orientation. • Develop listening skills so the child will follow direction and use cues for orientation. • Find out what motivates the child to move. • Staff need to be proactive. Using a hands-on approach and modelling. • It is important to teach directional language e.g., up, down, left, right etc. so that these can be used in giving clear instructions. • Consider reducing visual and physical clutter in the environment. 	<ul style="list-style-type: none"> • This could include advice on a range of resources and profile assessments used by the VI team and could include: • Sense Messy play hierarchy. • RNIB Messy and Muddy. • RNIB Let me play. • Fantastic fingers. • Sense -Making play inclusive.

EYFS Area	Interventions/Activities	Resources
<p>Communication and Language</p>	<ul style="list-style-type: none"> • The verbal skills of a child with a vision impairment may need extra practical activities to ensure that the concepts involved are understood. Explore concepts using the child’s own body. • Use very specific language, e.g. Not ‘over there’ but ‘beside the sink’ etc. • Develop the child’s listening and memory skills: work will be needed in a quiet environment as well as in the main setting. • Give the child a verbal commentary about all events taking place in the room and always tell the child what you are about to do with them. This helps to provide knowledge of the language needed for the child to express his/herself another time. • Always say your name/child’s name when you start an activity with them and always tell the child when the activity has finished and that you are going. • Objects of reference and personal signifiers can be helpful in encouraging the child to understand the daily routine and what is going to happen next. 	

EYFS Area	Interventions/Activities	Resources
Literacy	<ul style="list-style-type: none"> • Use real objects and concrete experiences wherever possible as they can be helpful in understanding and reinforcing concepts as well as developing vocabulary. • The child with a vision impairment may be slower to develop imaginative play: the child may not have had the same experience of seeing activities as others and therefore can't incorporate them in play. • Make stories multisensory by having objects and sounds etc. • Provide opportunities for developing tactile exploration skills. 	
Mathematics (Concept Development)	<ul style="list-style-type: none"> • Ensure the child knows their body parts and allow the child to use their body to gain understanding of position, space, and measurement. • Use appropriate objects for sound cues when counting. • Give time for the child to practice mathematical words, ideas, concepts, and language in their own play. • Provide practical activities / firsthand experiences. • Support the child in the use of technology to develop a positive attitude; it is likely that technology will be important in supporting independent learning and access in the future. • Provide lots of opportunities to explore real things made of different materials that are different weights and temperatures. Consider using Treasure Baskets. 	

EYFS Area	Interventions/Activities	Resources
Understanding the world	<ul style="list-style-type: none"> • Allow plenty of time to explore new things and opportunities for repetition. • Allow the child to explore objects and materials with different parts of their bodies. Toys may be explored differently. • A child with a vision impairment may mouth, tap, and bang toys as ways of exploring them for longer than others. • Show the child what activities are available each day and where they are. • Use good contrast equipment with sound cues in a defined play area. 	
Expressive Arts and Design	<ul style="list-style-type: none"> • The child will need a variety of sensory experiences to encourage mark making. • Use hand under hand approach when exploring materials. • Talk about colour. Encourage strategies to identify colour – perhaps using a sighted partner; labelling colours; or using smelly pens etc. • Give the child time to familiarise him / herself with musical instruments and the sounds they make. Encourage the child to find words to describe the sounds. • If exploring tactile materials, ensure that verbal description is given. • A child with a vision impairment may be tactile selective. They may prefer hard objects to soft / changeable materials. Assist the child sensitively to explore using hand under hand approach. • A child with a vision impairment needs to access experiential learning activities including tactile and auditory resources. 	<ul style="list-style-type: none"> • Tac Pac materials • Messy play

Multi-Sensory Impairment

This document acknowledges quality first teaching for all children and the requirement/duty to use best endeavour to meet their needs. If you have a child within your setting who meets the criteria set out below and does not yet have a Vision Impairment teacher and Hearing Impairment teacher involved, please make a referral to the Sensory and Physical Support Service. We generally only accept referrals if there has been a medical diagnosis of a vision and hearing impairment. A child with MSI will be supported as appropriate by the relevant Teacher (s) from the Sensory and Physical Support Service.

Children who are born with a combination of both vision and hearing impairments will need to use their other senses – touch, body awareness in space, balance, taste, and smell – to access information which is more easily available to other children. This can delay development. Communication and learning are significant challenges for children born with deaf blindness, and key concepts are often achieved later than might be expected. Developing an awareness of others, self-perception, and the impact of actions on others can all be affected. This can sometimes lead to a misdiagnosis of autism or a severe learning disability, when in fact the key factor impacting on learning is the combined sight and hearing loss.

“Deaf-blindness is not just a deaf person who cannot see, or a blind person who cannot hear. The two impairments together increase the effects of each other”.

<https://www.sense.org.uk/information-and-advice/conditions/deafblindness/>

Multi-sensory impairment (MSI) is generally associated with children who are **born with** a sight and hearing loss. They may have a range of other disabilities that affect their ability to process information and communicate. (*Northamptonshire’s Special Educational Needs Descriptors 2004*)

What does MSI mean for children and young people?

MSI makes a significant difference to children and young people’s learning and development. Most will have difficulties with accessing information about what is happening around them. They are likely to struggle with communication, forming relationships and mobility. The level of difficulty they experience will depend on the extent to which they have some useful hearing and vision.

MSI makes children and young people learn more gradually, because they get information that is of poorer quality.

This does not mean that they necessarily have learning difficulties/impairments. Learning through touch is much slower than learning through sight; and understanding visual or auditory information takes more time when you have a vision or hearing impairment. Nevertheless, children and young people with MSI can and do learn effectively.

Initially, children with MSI may seem unresponsive to parent/ carers because they can’t see or hear the smiles, looks and speech that most babies respond to. They may sometimes seem to be unwilling to be held, especially if they have needed a lot of medical treatment, but most ‘tune in’ gradually as contact increases.

Sight is the spatial sense and hearing underpins our understanding of time passing, so pupils with MSI often need help literally to know where they are in the world.

Most children and young people with MSI will have specific needs in the following areas:

Area of Need	Intervention/Access	Description of Resources
<p>MSI makes a significant difference to children’s learning and development. Most will have difficulties accessing information about what is happening around them. They are likely to struggle with communication, forming relationships and mobility. The level of difficulty they experience will depend on the extent to which they have some useful hearing and vision.</p>	<p>The curriculum may need to be modified to take into account their unique ways of learning e.g., tactile, auditory, multisensory.</p> <p>All programmes will be set following liaison with the appropriate Specialist Sensory Support Teacher.</p> <p>The progress of some MSI children may be lateral rather than linear.</p>	<p>A range of individualised high- and low-tech specialised resources are likely to be needed to support the development of communication and independence skills.</p> <p>EYFS</p> <p>EYSENS - Small Steps Quest for Learning</p> <p>Nat SIP MSI Toolkit linked to MSI Victoria Curriculum (https://www.natsip.org.uk/msi/3279-victoria-msi-unit-curriculum-toolkit-help-with-feedback-wanted-2)</p> <p>NatSIP - MSI (https://www.natsip.org.uk/msi)</p> <p>SENSE - Making play inclusive (https://www.sense.org.uk/information-and-advice/for-professionals/resources-for-education-and-early-years-professionals/making-play-inclusive/)</p> <p>Advice regarding inclusive play activities SENSE Play Toolkits</p> <p>MSI Developmental Journal</p> <p>SENSE - Messy Play Texture Hierarchy (https://www.sense.org.uk/information-and-advice/for-professionals/resources-for-education-and-early-years-professionals/making-play-inclusive/)</p> <p>Koenig essential literacy experiences</p>

Area of Need	Intervention/Access	Description of Resources
<p>Social relationships and emotional development</p> <p>(English/PHSE/communication)</p> <p>Building a relationship is naturally more difficult when a child has impaired vision and hearing.</p> <p>This is because babies usually begin to develop relationships by making eye contact and by hearing their own voice, or other people's voices.</p>	<p>Have a specific individual greeting routine which is always used on meeting the child.</p> <p>Build relationships with child by responding consistently to their actions and develop child's trust in them. Try to stay close to your child as much as possible, so that they can pick up information about you through smell, touch, and warmth, as well as sight and hearing.</p> <p>Spend time holding them closely, echoing any small movements with your own. In this way you will be alert to personal signals from them (changes in breathing pattern, for example), and be able to respond in a way that they can pick up.</p> <p>Very familiar daily activities developed to include distinct identifiers for other pupils – for example, tactile cards, photos, or musical styles for singing names.</p> <p>Creative activities such as art, music and to explore emotional and aesthetic responses and concepts. Staff give names to pupils' moods or emotions where appropriate.</p> <p>Offer opportunities for a range of group activities such as drama, art, music, movement, sensitive support from setting staff to facilitate play and interaction with peers.</p>	<p>Use of personal identifiers</p> <p>Intensive Interaction Institute (https://www.intensiveinteraction.org/)</p> <p>Tac Pac group work (https://tacpac.co.uk/)</p> <p>Teaching Strategies: Quest for Learning Materials</p> <p>Social Interaction Quest Maps - Quest for Learning Materials</p> <p>EDU Framework for curriculum severe and profound learning needs (https://www.southlanarkshire.gov.uk/info/200187/additional_support_needs_schools_information/1522/supporting_pupils_with_severe_and_profound_learning_needs)</p>

Area of Need	Intervention/Access	Description of Resources
<p>Communication</p> <p>Children with MSI get less feedback about the effect of their actions and so may take longer to learn how to try to communicate. Babies with MSI may not smile gurgle or babble but may interact by moving their arms, legs or by stilling to attend to your presence.</p> <p>Children with MSI will take longer to respond.</p>	<p>Offer a total communication approach. This could include speech, BSL, Makaton, Deaf/Blind signing, TaSSeLs, Objects of Reference.</p> <p>Communication approaches to be led by the child's needs.</p> <p>Be sensitive to the child's subtle movements and observe these closely, respond by acknowledging purposeful and unintentional attempts at communication and actively reinforce this.</p> <p>Be prepared to wait for a response although it may feel strange. Pausing is a vital part of Intensive Interaction. Watch and wait.</p> <p>Encourage young children to explore your face. If your child wants to do this, let them feel your breath and show them how your mouth moves, and your throat vibrates when you talk.</p> <p>Some children may also like to feel your jaw move as you chew - this helps them understand more about the process of eating.</p>	
<p>Conceptual development:</p> <p>(Maths/Understanding the World)</p> <p>Acquisition of learning and skills can be distorted and fragmented. This means that children are likely to be slower at developing securing and applying concepts.</p>	<p>New concepts that are taught need to be based on repeated familiar experiences, using real objects.</p> <p>It is important to give lots of opportunities for repetition.</p> <p>Use of objects of reference /routine is likely to help facilitate development of concepts.</p> <p>Use hand under hand approach.</p> <p>Give opportunities for cause /effect activities.</p> <p>Be aware that learning through the sense of touch can be much slower than learning through other senses. Be aware that the child may have unique ways of exploring.</p> <p>They need to have abstract concepts linked to practical/familiar activities. Children with MSI are likely to need activities repeated over a long period of time to allow the consolidated learning of concepts</p>	

Area of Need	Intervention/Access	Description of Resources
<p>Sensory responses (Expressive Arts)</p> <p>Using limited residual vision/hearing is tiring</p> <p>Some children have fluctuating (varying) levels of sight and/or hearing, so one day they may see an object or hear a sound, but the next day they will not. This can be confusing and frustrating, and it often leads other people to make false assumptions about what the child is or is not capable of doing.</p> <p>Some children are unwilling to touch or be touched. This is sometimes called tactile defensiveness. Tactile sensitivity means children are unwilling to touch particular textures.</p>	<p>Create frequent rest breaks.</p> <p>Minimise competing sensory stimuli for example if playing and singing use a quiet distraction free area.</p> <p>Allow time for a child to get used to hearing aids/glasses. Be sensitive to the child's need to remove them for comfort as needed.</p>	
<p>Understanding of time and place (Understanding the world)</p> <p>Many children with MSI find large spaces threatening or too big to understand. They may be more willing to explore within a very small environment.</p>	<p>Encourage participation by touching tasting or smelling. Allow lots of time for exploration, repetition.</p> <p>Children need a designated semi enclosed area such as a 'little room' which has clear boundaries that can easily be touched.</p>	

Area of Need	Intervention/Access	Description of Resources
<p>Orientation, movement, and mobility</p> <p>(Physical development)</p> <p>May have difficulties accessing and perceiving distance information.</p> <p>May have difficulties making sense of their environment.</p> <p>May have difficulties perceiving the consequences of their own actions, affecting understanding of cause and effect.</p> <p>May have difficulties accessing incidental learning opportunities.</p> <p>Likely to have difficulties recognising own position in space.</p>	<p>Offer numerous opportunities for exploration through touch.</p> <p>Develop set routines</p> <p>Lay out physical environment in the same way every time.</p> <p>Use or create small environments that give sensory feedback.</p> <p>Use cues prompts, verbal, and tactile commentary to include the child and alert them to changes such as placing a hearing aid in their ear or moving their physical position.</p> <p>Consider child's best physical position for accessing learning and social opportunities.</p> <p>Use massage, vibration, music poetry, anything with rhythm to help vestibular and proprioceptive needs.</p>	<p>Texas School for the Blind and Visually Impaired the development of tactile skills (https://www.tsbvi.edu/fall-2016-issue/5263-the-development-of-tactile-skills)</p> <p>Tacpac (https://tacpac.co.uk/)</p>
<p>Ownership of learning</p> <p>(Understanding the World and communication)</p>	<p>Encourage the child to have some control over their environment and exercise independence wherever possible.</p> <p>It is important for adults supporting the child to remain in the same place when the child ventures out to explore.</p>	
<p>Fatigue</p> <p>Children may be unable to use more than one sense at a time. For example, they may be able to look or listen, but not to do both at once.</p>	<p>Rest breaks are essential</p> <p>Reduce competing stimuli</p>	

Acknowledgements to: Developmental Journal MSI, Batod, SENSE, Victoria school MSI curriculum. NATSIP (MSI)

Speech, Language and Communication Needs (SLCN)

The child you are considering may have poorly developed receptive and expressive language skills and/or speech sound skills that do not follow a typical pattern, which will have an impact on his or her access to the curriculum and could hinder social progress. Following the guidance below will assist you in better understanding the child’s SLCN and support the child have a more successful communication experience. The range of difficulties observed may indicate a speech and language delay, impairment, or disorder. The child’s SLCN maybe a single issue or part of other needs e.g., children for whom language and communication difficulties are the result of a permanent sensory or physical impairment. The guidance may also apply to some children with learning difficulties.

Area of need	Priority approaches and interventions	Resources and additional information
Attention and Listening Skills	<ul style="list-style-type: none"> • Observe the child closely and record what promotes optimum listening and attention, identify whether his/her need is weighted towards attention and focus or listening skills development as this will direct you towards suitable strategies. • Carefully select where focused learning (adult led or child led) can take place that allows for maximum participation and minimal peer, visual or physical distractions. • Position the child so he/she has an uninterrupted or best view of the speaker in group situations. Take into account the guidance given for sensory impairments. • Demonstrate, teach, and embed good listening and attention skills in all learning activities. This is about giving a model and reference point to quality listening skills rather than compliance to rules in and of themselves. • Teach active listening skills. • Create opportunities for play and turn-taking games led by an adult or peers. • Provide support to promote listening and on-task behaviour. This may be verbal prompts and praise or a visual support such as count ups/count downs to convey a sense of focus and task duration. 	<p>Observation check lists for attention and listening are available at Elklan (https://www.elklan.co.uk/) as well as part of the Derbyshire ECaT: Every Child a Talker training and DCC early interventions resources. (ECaT Assessment Tool – see page 26)</p> <p>Taking a ‘distraction’ or noise audit can be useful to identify best and worst learning areas, activities and interactions regarding attention and listing skills development. This can be part of a broader audit tool such as ECERS or Communication friendly settings – details in the DCC Early Years training directory.</p> <p>Seek further guidance from specialist services – EYSENS, SALT</p>

Area of need	Priority approaches and interventions	Resources and additional information
<p>Understanding</p>	<ul style="list-style-type: none"> • Carefully select objects of reference that sensitively represent the different routines, activities and learning of the child. Be consistent in the chosen approach and seek specialist teacher or SALT advice if unsure of impact or lack of progress. • Use and regularly refer to labels and drawings in the setting to increase understanding of what is being said or shown/explained. Remember real life examples and objects are easier to understand than a photo and a quality photo is easier to understand than a black and white line drawing. Review the quality of your labels and drawings and adapt as needed. • Use simplified language, repeat, and expand by only 1-2 words/concepts at one time. • Make explicit reference to changes e.g., "another way to say this is...", "are you ready to listen?" • Speak sensitively, using moderate volume and 'mild' tone to enable children to listen and understand with reduced fear of failure. • Act out or demonstrate what you want the child to do. <p>Check understanding by getting the child to do, show or explain instructions they have been given.</p> <ul style="list-style-type: none"> • Provide additional time and structured opportunities to check the child's understanding of key phrases and meanings. • Teach children to say or show when they don't understand rather than passively waiting for someone to notice. Normalise asking for help by encouraging a whole class approach instead of targeting specific children. • Enable other children or adults to assist in asking for help AFTER the child has communicated their need i.e., don't jump in too soon to help. 	<p>The communication trust have produced FREE resources and flow charts to help with Observation, Assessment and Planning around speech, language, and communication needs.</p> <p>Speech, Language and Communication Framework (SLCF) (https://www.slcframework.org.uk/)</p> <p>ICAN - The Communication Trust and Consortium Resources (https://ican.org.uk/i-cans-talking-point/professionals/tct-resources/)</p> <p>ICAN - What works database (https://ican.org.uk/i-cans-talking-point/professionals/tct-resources/what-works-database/)</p> <p>Widget (https://www.widgit.com/) has brief outlines of class and individual visual supports for communication. Further advice or training can also be available through EYSENS and other specialist teachers.</p> <p>DCC - 'Ready for School' resources for professionals and parents (https://www.derbyshire.gov.uk/education/early-years-childcare/ready-for-school/ready-for-school-in-derbyshire.aspx)</p> <p>National initiatives have a wealth of ideas for engaging parents in the communication and language of young children. For example:</p> <p>Hungry Little Minds (https://hungrylittleminds.campaign.gov.uk/)</p> <p>BBC - Tiny Happy People (https://www.bbc.co.uk/tiny-happy-people)</p>

Area of need	Priority approaches and interventions	Resources and additional information
Expression	<ul style="list-style-type: none"> • Provide visual supports and objects of reference for the child to use in explaining what they mean or want. • Demonstrate ‘thinking aloud’ as a way to enhance expression and model talking with the child. • Use questions carefully and increase your focus on commenting on the child’s ideas, learning and communication. • Create genuine purpose for expression – this can start with immediate needs but then develop into preferences, interests, and exploration. • Model how to develop and share ideas e.g., providing sample ideas or sentence starters. • Use regular, structured lessons to teach social use of language in a small group. 	
Speech and Fluency (Stammer)	<ul style="list-style-type: none"> • Support the communication first. Do you understand what the child is trying to express? Respond to that message. Build confidence in positive and successful communications. • Create points of shared understanding – this can be a poster or a scrapbook. Ideally it can be used by all children but plan to represent the interests of the child with unclear speech first. You will need pictures, photos and mementos of places, people, characters, and stories the children are enjoying but you may not have easy access to. When the child is hard to understand, you support the child to ‘show you’ the context of his/her conversation by using the scrapbook/poster. • Rather than correcting speech errors, encourage all adults to repeat back the word clearly and with the corrected sounds emphasized. Please do not ask the child to repeat afterwards as this is counterproductive. • Use a calm and steady pace when speaking with children who tend to speak fast or possibly stammer. If you are consistently slower in pace than they are, children will tend to slow down to match your speed. This can be very supportive as it gives children time to plan and respond with a little more control in their speech. 	<p>Seek advice from your local SALT service if a child is observed having stammering behaviours for longer than 3 months e.g., bouncy repeats of words or part words, getting stuck on words or overstretching words.</p>

Area of need	Priority approaches and interventions	Resources and additional information
Managing expectations, wellbeing, and environments	<ul style="list-style-type: none"> • Be patient; allow extra time for thinking, processing, and responding; encourage and praise communication efforts. • Work positively to minimise other children’s negative reactions/responses to the child’s language or communication difficulties. • Use Circle Time to encourage positive attitudes in other children. • Observe which situations, with high levels of language demand, create a stressful response from the child e.g., explaining or justifying behaviours, listening to prolonged stories or explanations, school concerts. Pre-empt these stressful times by using simple stories to explain the event, break information down into smaller ‘chunks’, pre-warn or pre-teach specific vocabulary that could help with the transition of activities or levels of involvement with peers. • Observe and build up knowledge of triggers for frustration. Ask parents what strategies are working at home. Make a plan for adapting these strategies to the setting/school situation. • Provide a quiet area away from intense or unnerving sounds when the child becomes distressed. See further guidance for children with sensory needs. 	

Cognition and Learning: Profound and Multiple Learning Difficulties

Level and Description of Difficulty:

Children with profound and multiple learning difficulties will have:

- Severe communication delay – typically functioning at a pre-verbal level of communication
- Severe cognitive delay
- May have a severe medical need

In addition, the children will typically have severe physical and / or sensory impairment. In view of all this, the children are likely to:

- Require a high level of adult support for their learning needs and usually for their personal care
- Make slow progress
- Need sensory stimulation and a curriculum broken into small steps
- Lose skills
- Have frequent illnesses
- May have a limited life expectancy

Because of the severity of the needs of children with Profound and Multiple Learning Difficulties, it is likely that they will reach the threshold for an Education, Health and Care needs assessment at an early age.

Assessment, Planning and Review

On entry to the setting and throughout the child's time in the setting, assessment must include information and advice from parents / carers and professionals already working with the family.

The setting will work collaboratively with the other agencies involved with the child.

Assessment of children with Profound and Multiple Learning Difficulties must be holistic. Observation of the child, effective communication and joint working with parents, liaison with other professionals and the appropriate use of structured assessments will be required.

The main purpose of assessing a child is to enable them to make the best possible progress in developing skills, knowledge and understanding. It is important that the focus is on the child's abilities not disabilities.

The purpose of assessment is to:

- Monitor the child's understanding
- Provide information about the child's achievements
- To evaluate and improve the provision you make
- Inform future planning

The child's strengths and difficulties will be identified through structured observation developmental checklists, dialogue with staff and curriculum-related assessment.

Some appropriate assessment schedules include:

- EYSEN EYFS small steps profiles
- Quest for learning
- Developmental journal for young children with multiple needs

The setting will maintain a profile of the child's developmental level in line with the Early Years Foundation Stage.

Assessment is not a one-off event, and the child needs to be observed over time, in different situations, working with familiar adults in familiar environments.

Assessment, Planning and Review

(Continued...)

The setting's planning for the child will include SMART targets, linked to a sensory curriculum, written in the context of the child's overall slow progress and should acknowledge the significance of experience of a range of possibilities which may constitute significant achievements for children, for example, the seven steps of engagement:

- Encounter
- Awareness
- Attention and response
- Participation
- Involvement
- Initiating an interaction

In planning for the child, there should be a recognition of the child's learning styles and agreement about appropriate teaching strategies.

Outcomes/short term targets should be reviewed through regular review and planning meetings. Parents / carers should be invited in order to ensure targets are supported in the home. The child's progress is likely to be slow and may not be reflected in developmental schedules. Adults working with the child need to be sensitive to the impact of small steps to learning on the family.

Children with Profound and Multiple Learning difficulties have limited means to contribute to reviews of their progress.

Adults working with them need to be familiar with and sensitive to the repertoire of the child's responses to ensure that feedback from the child is incorporated into the review process.

There should be celebration of a comprehensive Health Care Plan and / or Risk Assessment should be in place where appropriate and regularly reviewed.

Teaching Environment and Grouping

Consideration should be given to incoming transition arrangements and advice and information should be freely available to parents / carers to allow them to prepare the child for the move.

The child should have an inclusive and nurturing learning environment with access to their full entitlement of attendance. The child needs to feel secure with the people around them. The child should have access to the whole range of learning environments available in the setting including outdoor and indoor play.

The child's learning environment should be comfortable and take account of the child's level of mobility and need for rest periods.

There should be appropriate differentiation of equipment and resources to enable the child to achieve success. The child should be able to access a multi-sensory environment including access to soft play areas, specialist IT equipment.

Simple communication strategies will need to be used at the appropriate level to avoid overloading the child.

Flexible group arrangements will be needed to take account of the variations in the child's level of awareness/well-being/tiredness during the day.

The child should have access to social situations with a consistent group of people including other children. The child should have opportunities to experience a wide range of social situations.

Opportunities should be made available to work in partnership with parents to promote the learning environment at home.

The framework of progression could be used to represent a scale of engagement that the child may move through in their learning from day to day and from experience to experience.

The framework of progression:

- **Encounter:** The child is present during the activity
- **Awareness:** The child shows a brief awareness that something has happened
- **Responsiveness:** The child begins to respond often inconsistently
- **Focused attention:** The child shows more consistent attention
- **Participation:** the child begins to share and take turns
- **Involvement:** The child reaches out and joins in with the activity and responds to others

Curriculum and Teaching Methods

The child should have access to all areas of the Early Years Foundation Curriculum. The child should be able to access a sensory curriculum which:

- Encompasses the development of all the senses including body awareness
- Is interactive and practical
- Helps to establish channels for learning to take place

In order to build up a profile of how the child learns and responds, it is important for an adult to build a close relationship with the child.

Individual guidance and support within small groups is likely to be required for the majority of learning experiences.

Adults will need to use objects of reference and interactive signing as part of home / setting routines to help communicate needs and support the development of anticipation and understanding of routines. The child's responses may vary widely from day to day and in different contexts.

Skills taught in one context or by a particular member of staff may not readily transfer to other situations and or people and may need re-teaching to ensure that the child will use the skill more widely.

The child's progress can only be seen through careful observation across a range of activities, situations and staff. When observing children with PMLD the adult should:

- Clearly plan and structure observations
- Make sense of the child's responses
- Ensure all adults working with the child contribute to the observation process

Observers should be looking for:

- A small change in the child's breathing pattern
- Tensing or relaxing of muscles
- A change in facial expression
- Vocalisation, body movement

Children with PMLD are often slow to make a response. They need to be given adequate waiting time to process the information. Providing this ensures that the child does not miss experiences and learning opportunities.

The child will need immediate and consistent feedback on their responses. Adults will need to make consistent and imaginative use of IT to support communication and learning.

Joint working with other professionals will be essential.

Resources

ADVICE

Advice will be available from the setting SENCO and will need to be sought from specialist support services.

STAFFING

There should be flexibility within the staffing arrangements to allow for support for children with additional support needs, which use the setting's normally available resources in the most effective way (including, for maintained settings, the delegated Special Educational Needs budget).

There should be access to staff who are skilled in developing very finely graded developmental programmes for children with severe and complex learning difficulties. All setting practitioners are responsible for working with the child on a regular basis through flexible groupings. It is important that a key worker is identified to facilitate liaison with parents / carers and other professionals.

RESOURCES

Additional equipment may be necessary to support the assessed needs of the child. Specialist equipment will be required for moving and handling, sitting, and standing.

Specialist IT equipment will be required.

ADAPTATIONS

The requirements of the Equality Act need to be considered. The school or setting will make reasonable adjustments to its environment, and some building adaptations may be necessary. This may be particularly relevant to this group of children with regard to personal care facilities.

Communication passports can be used to record and share important information about the child in an accessible and child friendly way.

They can present key information about

- Day to day requirements
- Likes and dislikes
- Methods of communication
- Responses and their possible meaning
- To share information with family and adults working with the child

TRAINING

Settings should have a coherent professional development policy that addresses the needs of children with profound and multiple learning difficulties in order to increase the expertise of staff, so that settings maximise their effectiveness.

The EYSEN service offer a range of training courses, workshops, and bespoke training about working with young children with complex needs.

TRANSFER ARRANGEMENTS FOR CHILDREN WITH SEND

For children preparing for phase transfer there needs to be well planned, thorough transition procedures which may include:

- Close liaison and planning with all professionals working with children
- Additional preparatory visits by some children, including the opportunity to meet key staff
- Visits by staff from the receiving school to observe/familiarise themselves with the child
- Liaison with parents to discuss child's needs and provision in their new setting
- Information for staff on child's needs and strategies to meet them
- Support for the child in understanding school organisation, expectations, and routines both prior to and on entry
- Child mentors/buddy support to facilitate transfer
- Use of All About Me/Passport

GLOSSARY OF TERMS USED

Differentiation - when the differences between learners are accommodated so that all students have the best possible chance of learning.

Small steps – when you break down a big task like putting a coat on into small, more easily achievable steps.

Forward chaining – once a task has been broken down into small steps you may choose to start to teach the first step, first.

Backward chaining – when you teach the last step, first

Team Around the Child – all the adults that are closely involved in supporting the child

Inclusive – ensuring that the child is able to fully access all aspects of provision. This does not mean that activities/approaches/provision cannot be differentiated to best meet the child with SEND's needs and therefore, may look different to what the other children are doing.

Transition – movement from one room/setting to another over time, for example, a move from the baby room to the toddler room or from pre-school /nursery to school.

Makaton – a signing system that gives a multi-sensory approach to communication

Visual Cues – photos, symbols, pictures, and objects of reference

Long Term Outcomes – a set of targets that the child is expected to achieve over a longer period of time (usually 6 months)

SMART Targets (Short Term Targets) – Small, Measurable, Achievable, Realistic and Time Limited.

Health Care Plan – this must be in place to address any severe health or medical needs, for example, asthma, severe allergies, and epilepsy. This is usually completed with the appropriate health professional

Regulate emotions – how a child might manage and moderate their emotions

Equality Act 2010 –is the legal framework to underpin equality of opportunity for disabled children and advocates the principle that children with disabilities should have equal opportunities

Reasonable Adjustments – settings must make reasonable changes to their practice, provision, and environment to best accommodate children with SEND.

Graduated Response – the cycle of Assess, Plan, Do and Review

Support for young children with additional needs

The benefits of early identification (of SEN) are widely recognised – identifying need at the earliest point; and then making effective provision, improves long- term outcomes for children (Special Educational Needs Code of Practice 2014).

Specialist Teachers from **The Early Years SEN Service** are available to provide specialist early years SEN knowledge and advice on a range of subjects including:

- Learning objectives and teaching strategies
- Appropriate resources and effective environments
- Supporting families and signposting to other services
- Referrals for specialist intervention
- Funding possibilities
- Training opportunities



Support is available for anyone including parents, Early Years Foundation Stage (EYFS) practitioners, Health Visitors, Paediatricians, Teachers, Children’s Centre Workers and Speech and Language Therapists.

Contact: EarlyYears.SENHelpline@derbyshire.gov.uk

Please provide brief details of your query, including the age of the child (in months). Include your contact telephone number so that we can get back to you.

The EYSEN Service was formerly known as The Support Service for Pre School Children with Special Educational Needs (SSPSCSEN) and now encompasses both the Derbyshire Portage Service and The Early Years Specialist Teaching Service.

Derbyshire Early Years SEND Pathways

Derbyshire County Council Children's SEND Services have a strong network of support for children, educational professionals, and parents throughout the Early Years. Most SEND provision within the Early Years is accessed through the Early Years Panel although some resources are accessed independently through direct referral. All referral forms are available on the DCC website and the Local Offer (see below for web links).

THE EARLY YEARS SEN PANEL REFERRALS

THE EARLY YEARS SPECIAL EDUCATIONAL NEED AND DISABILITIES (SEND) PANEL PRACTICES AN OPEN REFERRAL POLICY SO THAT HEALTH PROFESSIONALS, THE EARLY YEARS PRIVATE, VOLUNTARY AND INDEPENDENT (PVI) SECTOR, SOCIAL CARE AND SCHOOLS CAN ALL MAKE APPLICATIONS

The following EYs Support Services are accessed via the Referral for a Derbyshire Specialist Support Service for Children in the Foundation Stage

<p>Support Service for Physically Impaired (SPI)/ Support Service for Sensory Impaired (SSI-VI/HI)</p> <p>These support services are for all age children; referrals for young children are made through the EYRs Panel</p>	<p>The Early Years SEN Specialist Teaching Service and Portage Home Visiting Service</p> <p>This service works with children who have complex and long-term needs within the PVI sector/in their homes. Generally, but not exclusively accessed as part of Derbyshire's Graduated Response for Children with SEND</p>	<p>The Educational Psychology Service</p> <p>This service includes the Infant Mental Health Project (IMHP) and requests for Education Psychology assessment.</p>	<p>Specialist Service for Special Educational Needs (SSSEN)</p> <p>This service works with children in maintained nursery schools or nursery classes who have complex and long-term needs.</p>
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Notification to the Local Authority of a child with SEND

The NHS has a legal obligation to notify the County Council of any child who they are aware of that may have a special educational need. This notification is made via the Referral for a Derbyshire Specialist Support Service for Children in the Foundation Stage form

The following EYs Support Services are accessed via the Early Years Panel but have unique referral forms

Early Years SEN Inclusion Fund

The Early Years SEN Inclusion Fund application form should be completed for EYSEN IF funding applications.

Assessment places in Specialist Nurseries

This referral form requests 12-week assessment places for children who need more specialist assessment and interventions at Foundation Stage. There are currently 2 assessment nurseries in the Chesterfield area of the county offering 15 hours a week placements.

All the above services can be accessed through the following links:

[Early Years Special Educational Needs Support Service - Derbyshire County Council](https://www.derbyshire.gov.uk/education/schools/special-educational-needs/support/pre-school-sen/early-years-special-educational-needs-support-service.aspx)

(<https://www.derbyshire.gov.uk/education/schools/special-educational-needs/support/pre-school-sen/early-years-special-educational-needs-support-service.aspx>)

[Derbyshire Local Offer](https://www.localoffer.derbyshire.gov.uk/home.aspx)

(<https://www.localoffer.derbyshire.gov.uk/home.aspx>)

The following EY support resources are accessed via individual procedures:

EY SEND Helpline:

An Early Years SEND helpline is available for advice relating to young children with SEND living in Derbyshire. The helpline is typically accessed by parents, health professionals, PVI nursery sector and maintained sector nursery providers.

Contact: EarlyYears.SENHelpline@derbyshire.gov.uk

The Helpline can provide support by:

- Signposting enquiries to appropriate services and resources
- Advising on inclusive practice
- Directing EYRS providers to relevant early years descriptors as part of graduated response to the child's needs
- Non-child specific advice for children with emerging or moderate needs
- Advising on criteria and process for accessing EYIF/Inclusion Panel funding/Education Health and Care Plans (EHCP)

Training:

The EYSEN Support Service provides training on various topics; both SEND condition specific, strategies for teaching and national and local SEN initiatives. Training can be accessed directly with the EYSEN team, via the Derbyshire Services for Schools site and the [Eventbrite online platform](https://www.eventbrite.co.uk/o/derbyshire-eysen-service-34416713297) (<https://www.eventbrite.co.uk/o/derbyshire-eysen-service-34416713297>)

Disability Access Fund:

- Disability Access Fund (DAF) is available to support 3 and 4 years old who are in receipt of nursery entitlement and Disability Living Allowance.
- Accessed via the agreement between settings and parents via the LA funding portal.
- DAF is a one-off annual payment to be used to support the child as nursery deem most appropriate.

Local Authority Education Support Services Available for Young Children with Special Educational Needs Early Years Foundation Stage

SUPPORT	AT HOME	NON-MINTAINED SECTOR	MAINTAINED SECTOR
SUPPORT TO THE CHILD	EYSENS – Derbyshire Portage Service / SPSS-PI / SPSS-HI / SPSS-PI / EPS Access through Early Years SEN Panel.	EYSENS / SPSS-VI / SPSS-HI / SPSS-PI / EPS Access through Early Years SEN Panel.	SSSEN / SPSS-VI / SPSS-HI / SPSS-PI / EPS / BSS Please see Local Offer for referral details.
SUPPORT TO THE FAMILY	EYSENS – Derbyshire Portage Service / SPSS-VI / SPSS-HI / SPSS-PI / EPS Access through Early Years SEN Panel.	EYSENS / SPSS-VI / SPSS-HI / SPSS-PI / EPS Access through Early Years SEN Panel.	SPSS-VI/SPSS-HI/SPSS-PI/EPS Please see Local offer for referral details.
SUPPORT TO THE SETTING	EYSENS /SPSS-VI / SPSS-HI / SPSS-PI / EPS Access through Early Years SEN Panel. SOs	EYSENS / SPSS-VI / SPSS-HI / SPSS-PI / EPS Access through Early Years SEN Panel. EYIOs/SOs	SSSEN / SPSS-VI / SPSS-HI / SPSS-PI / EPS / BSS Please see Local Offer for referral details. SOs

Glossary of Abbreviations

Abbreviation	Name
EYSENS	Early Years SEN Service
BSS	Behaviour Support Service
EPS	Educational Psychology Service
SSSEN	Support Service for Special Educational
SO	SEND Officers
EYIO	Early Years Improvement Officers
SPSS (PI), (VI), (HI)	Sensory & Physical Support Service for Physical Impairment, Visual Impairment, Hearing Impairment