

# Ashbeach School SEN(D) Information



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# Working together at Ashbeach



## School:



- Learning for Life - to be the best we possibly can
- Inspiring teaching
- Teaching assistants who promote independence and support learning
- Nurturing Environment
- Friends
- Wide range of opportunities and experiences
- Commitment to team work
- Support for the whole family

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## Professional services

- Specialist Teaching Team
- Educational Psychologist
- START (Statutory assessment and resourcing team)
- Social Care
- Adoption Service



## The Child



## Home:

- Love
- Nourishment
- Nurturing environment
- Emotional support
- Clothes and equipment
- Wide range of opportunities and experiences
- Link with school



## Medical Services



- School Nursing team
- Physiotherapist
- Speech and Language Therapist
- Occupational Therapist
- Hearing impairment and Visual impairment teams
- CAMHs

## Locality Team

- Parenting support
- Advice
- Children's Centre
- Support groups
- Courses



## What are Special Needs and Disabilities?

Children who have special educational needs (SEN) do not necessarily have a disability and some disabled children and young people do not have special educational needs.

### What do we mean by "SEN"?

The term special educational needs (SEN) has a legal definition which is set out in the Education Act 2002. It applies to children who have learning difficulties or disabilities that make it significantly harder for them to learn or access education than most other children of their age.

The term SEN covers a wide range of types of need including:

- specific learning difficulties
- moderate learning difficulties
- speech, language and communication needs
- social emotional and mental health needs
- autistic spectrum conditions
- visual and hearing impairment
- physical disability
- multi-sensory impairment
- profound and multiple learning difficulties

About 20% of children and young people are identified with SEN at some stage in their education. The vast majority have their needs met with the support available in their local school. A relatively small number of children with more significant and complex SEN may need more specialist support.

At Ashbeach School we have well established arrangements for identifying and responding to special educational needs and disabilities. We expect to meet the needs of most children with SEN and disabilities without external specialist services needing to be involved, however where it is necessary formal procedures and specialist services provided by the Local Authority are used.

At Ashbeach we work in partnership with the Local Authority and aim to work closely with parents, other agencies and voluntary organisations as well as the child in responding to individual needs.

### What do we mean by "disability"?

The Equality Act, 2010, defines a child with a disability if they have a physical or mental impairment that has a substantial or long term effect on their ability to carry out normal day to day activities. The definition of disability includes a broad range of needs. Research suggests that about 6-7% of children are disabled.

In Cambridgeshire we expect that around 1.2% of children have very complex needs that require specialist services. They will require support in areas of health, education or physical, intellectual, emotional, social or behavioural development due to disabilities including:

- multiple and complex health needs or chronic illness
- sensory impairment such as hearing loss, visual impairment or deaf-blindness
- a significant and long term learning difficulty
- a physical disability
- autistic spectrum disorder
- a severe communication disorder
- a significant pre-school developmental delay

At Ashbeach we expect **all** children to make good progress and meet the expectations set as their individual targets. This includes children with additional needs.

# Our Graduated Response to SEND

## Quality First Teaching: The universal offer to all children

*(Enables all learners to make good progress within mainstream lessons  
With any reasonable adaptation for particular need and differentiated teaching)*

100% children

## Targeted Support:

**for those children with identified specific often short term difficulties**

*(Catch up Programmes advice from fellow professionals / other external services enables identified children to meet age related expectations and make good progress over time.)*

10% - 20% children

## Personalised Provision:

**Long term and often complex needs**

*(specific programmes included in education health care plans /  
medical / physical needs not met within the universal offer or  
through targeted support.)*

0-5% children

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# Children with Medical Conditions



Section 100 of the Children and Families Act 2014 places a duty on governing bodies of maintained schools to make arrangements for supporting pupils at their school with medical conditions. The Department does not provide a definition of 'medical conditions', or a list of conditions that would be classified as such.

At Ashbeach pupils with medical conditions are fully supported so that they have full access to education, including school trips and physical education. Arrangements are in place in to support pupils at school with both short term and long term medical conditions. School leaders consult health and social care professionals, pupils and parents to ensure that the needs of children with medical conditions are effectively supported - A Health Care Plan is drawn up which outlines agreed arrangements and is reviewed at least annually. A range of medical needs are already supported and we adapt and train staff to meet the needs of new conditions as they arise.

Some children with medical conditions may be disabled. Where this is the case the governing body complies with duties under the Equality Act 2010. Some may also have special educational needs (SEN) and may have an Education, Health Care Plan (EHCP) ( or since September 2014 a Statement of Special Educational Needs) which brings together health and social care needs, as well as their special educational provision. For children with SEN, this guidance aligns with the SEN code of practice.

The guidance states that it is good practice to support and encourage children to take responsibility for managing their own medicines, if they are able to do so. In particular, older children with a long-term illness should, whenever possible, "assume responsibility under the supervision of their parents". The school will work with parents in supporting the child to this end.

If your child has a diagnosed medical condition or is undergoing investigation it is always best to talk to us so that we can support both you and your child. Please make an appointment with either the Additional Needs Leader or the Headteacher at your earliest convenience. Our School policy offers advice on medicines in school for short term conditions.

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# I have sensory needs



Most of us are able to make sense all of the sensory information that we constantly face, paying attention to and tolerating important sensory information and disregarding information that is less important at that moment. For some people this is not the case; they have difficulties processing information taken in through the senses. Besides the five senses of smell, taste, sight, hearing, and touch, people can also struggle with their sense of movement and balance.

Some might be **over-sensitive** to certain sensations, which means that just a small amount of that sensation will stimulate them. It is, therefore, very easy to become over-stimulated by that sensation, causing the individual to try to avoid it. An example would be a child who is over-sensitive to sounds, who might cover their ears when in a noisy classroom or when they hear the vacuum at home. A child who is over-sensitive to taste might be quite a picky eater.

Some can also be **under-sensitive** to certain sensations. This means that it takes a lot of that sensation to stimulate that person. Children who are under-sensitive to a sensation will seek out more of it in order to feel satisfied. For example, a child who is under-sensitive to sounds may enjoy turning up the volume on the TV. Or a child who is under-sensitive to movement may want to be constantly on the move. It is possible to have a combination of over- and under-sensitivities (over-sensitive to some things, under-sensitive to others).

What we can offer for any child with these needs:

Home visits (FS), parent consultations, reassurance and awareness from adults, ear defenders, sit n move cushion, Fiddle Thinkers (objects to hold), Sensory Circuits and sensory breaks, small group activities, reasonable adjustments around items of uniform, hats to shade eyes, programmes that improve balance and co-ordination.

Targeted Support

Seek advice from the occupational therapist and act accordingly.

Personalised Provision

Diet of daily activities usually cited within the child's EHCP/Statement.

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## My behaviour is difficult



There is always a reason behind challenging behaviour. Sometimes it can relate to a medical condition; it can link with mental health or sensory issues or can relate to trauma that has been suffered at an earlier stage in life. Very occasionally children simply haven't learned to operate within established boundaries. Whatever the reason, the symptom can be challenging behaviour. This needs to be managed in order for the children to succeed at school.

What we can offer for any child with these needs:

Clear expectations and boundaries, timers, visual timetables, focus on positive behaviours. We use a variety of strategies to ensure that the child can access lessons within the classroom.

### Targeted Support

Sensory Circuits and /or Sensory breaks. Personal work space within the classroom. Circle of friends. Personal targets. Social skills groups. Focused PSHE work 1:1. Advice from specialist services within education, health and locality, including the Educational Psychologist and Child and Adolescent Mental Health Services (CAMHs).

### Personalised Provision

We are a STEPS trained school so have a therapeutic approach to supporting behaviour. We try to find the underlying cause for anti-social or dangerous behaviour so will work to identify protective behaviours and risk factors for some individuals and may map their anxiety throughout the day. We may then create a bespoke support plan, often with support from other professionals. This may include TA support or a place beyond the classroom to minimise both the impact on the child and the rest of the class.

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## I'm finding it hard to communicate



There are many reasons why children find it hard to communicate. We can help them in a variety of ways. We have to understand the reason for the difficulty, so we often make links with colleagues who can offer specialist support.

What we can offer for any child with these needs:

Learning to communicate can prove difficult for a variety of reasons. Sometimes children have difficulties forming the sounds required, sometimes they find it difficult to remember the words that they need and sometimes they come out in the wrong order. Occasionally this can link to a diagnosed medical condition. In school we are dedicated to enabling children to express themselves clearly. This may involve linking with the Speech Therapist who provides ideas for exercises that can be carried out with support in school, either within a small group or individually. We use lots of language games and activities to help children to develop the vocabulary that they need within lessons. Learning to read and write can be tricky where communication difficulties exist.

### Targeted Support

Where specific difficulties are identified children work in small groups, often with teaching assistants to learn language structures and vocabulary, using a variety of materials provided by the Speech and Language Service and some of our TAs have been trained to use ELKLAN. Strategies practised are then reinforced during class work. Interventions such as Talking partners may be implemented.

### Personalised Provision

Children can use symbols to support communication. This is established on a personal basis in line with support from services beyond school. Intensive speech therapy and language programmes may be used.

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## I'm finding it hard to learn to read



Children learn to read over time, and it takes an awful lot of practise. They use all of their speaking and listening skills to acquire new skills in reading. Some children can find it difficult to make the links between speech sounds and the written word, others find it difficult to understand what has been written. As skills increase children can also find it difficult to understand what the author was trying to tell them from the hints that were given. Whatever the difficulty, many things can be done to help.

What we can offer for any child with these needs:

All children begin the 'synthetic phonics' approach to learning phonics in their Foundation year. We follow the Little Wandle scheme. They also begin to learn to recognise words that do not follow the phonic code. We have a wide variety of texts that appeal to the children. Learning to read takes lots of practise and much experience of listening to stories and poems so that experience of structures can be gained. Reading and writing are complementary activities, so having a desire to communicate ideas in writing can also bring about a real purpose for reading. Where all of the above fail to support reading development, additional support may need to be provided. Regular quizzing on the Accelerated Reader Scheme helps us monitor how children are progressing with their reading once they have gained some competency as a reader.

### Targeted Support

We use some additional programmes and schemes to support reading development. These can be small group activities or may be carried out for a short period on an individual basis to accelerate learning. Some of the Reading interventions that we have available: Better Reading Partnership (BRP), Toe-by-Toe, Phonics catch-up, Accelerated-Acceleratewrite, Inference Training for example. As reading and writing are the keys to future learning, these activities are timetabled as a priority for those children needing additional support. Sometimes a child may find that the words appear to move on the page and may find the use of a coloured overlay stops this from happening.

### Personalised Provision

Occasionally difficulties are more difficult to overcome. Specific long term learning difficulties may have been diagnosed. Individuals will be provided with individual support to carefully structure learning. Additional interventions may involve precision teaching strategies such as Expanded Rehearsal Technique (ERT) to enable the child to build a bank of known words. Close links will be made between reading and writing; IT packages may be used to reinforce those links.

## I don't understand what you are saying



When children fail to understand what is being said to them there can be a variety of underlying causes. Some children are very literal - if you say "it's raining cats and dogs" they may look for cats and dogs in the sky. Others cannot follow instructions that have more than one step. Whatever the difficulty there are things that we can do to help.

What we can offer for any child with these needs:

We try to identify the difficulties that children are experiencing. We carry out a Speech, language and communication assessment (called S&L descriptors) that helps us to identify the specific area of difficulty. Small group work can often help the child to overcome the difficulty. Sometimes we recommend that physical causes like hearing loss are ruled out. When children experience intermittent hearing loss due to a medical condition it can have an adverse effect on learning.

### Targeted Support

Where progress proves difficult we may call in the support of the specialist teaching team. Expertise in communication and language is helpful in identifying specific programmes and techniques to support children in the classroom. A variety of strategies can be put into place to support the child.

### Personalised Provision

Where there is a dramatic impact on learning, the educational psychologist may need to analyse the problem further. An education, health care plan may be necessary if the problem is found to be both long term and complex. The support of a teaching assistant may be necessary to teach the child specific coping strategies in order to access the curriculum within the classroom.

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# I worry too much



Sometimes children experience anxieties. These are very real and on occasions they come out in the wrong way and appear as poor behaviour. We have to work with both children and their parents to help to unpick and help to resolve the issue. Sometimes it can be a simple task and at other times we need to engage the support of other professionals who are qualified in specific fields, this can be a play therapist, an educational psychologist or one of the health professionals.

What we can offer for any child with these needs:

In school we are able to deal with the simple things, overcoming anxiety about specific times of day or areas of study. We are able to support children in understanding their own anxieties by use of an 'anxiety barometer', a visual timetable or social stories, for example.

## Targeted Support

For some children whose anxieties cannot be resolved so easily other strategies will be agreed. Sensory Circuits may be an appropriate way to support an anxious child, or 'Meet and Greet' where an adult will allow time to chat about any anxieties before the start of the school day. Sometimes the 'Circle of Friends' can be a supportive intervention. A child may carry a card which enables them to leave the class for some quiet time and lets the teacher or friends know that they need to go to their 'safe' place for a short while.

## Personalised Provision

If the worries get too much, then external advice may need to be sought to implement specific strategies to overcome particular issues.

# I can't do writing



This is not an unusual problem - Children who 'can't do writing' may have problems expressing themselves or organising their thoughts; they may have difficulties with fine motor control, spelling or a combination of any or all of these. Analysing the problem is our first priority in overcoming the barrier to learning. Where known conditions like autistic spectrum disorder (ASD), Dyslexia or ADHD exist, problems with writing are more common. Sometimes, children with ASD can't see the point of writing when you know that they know and they could tell you. Children with ADHD sometimes have shaky hands causing pencil control problems.

What we can offer for any child with these needs:

All of the children are supported in the classroom by 'working walls' and scaffolding to help with the structure of their writing tasks. Handwriting is taught separately and over time children employ their skills across the range of writing in the classroom. Teachers plan to make writing purposeful, which helps with motivation. 'Feedback Marking' breaks down next steps and allows the child to understand, practise and move their learning on. The children all focus on the spelling of high frequency words as well as those that follow patterns.

## Targeted Support

Children may need individual scaffolding to help them structure their work. They may use 'Talk Buttons' or personal word banks. Sometimes children attend small writing groups several times a week so they can focus on specific targets and have extra practise. Children may also be included in specific programmes to help them to improve their hand strength or fine motor control. Some children benefit from doing their writing on coloured paper.

## Personalised Provision

Where writing proves to be a specific area of difficulty, a child may be encouraged to write using an I-pad or laptop. Children may also use a scribe to allow them to express themselves freely without worry over the secretarial aspects of writing. We engage the support of the specialist teaching team, occupational therapist and educational psychologist as needed.

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# My fingers don't work properly



Some children find it difficult to make their handwriting neat or form letters correctly (fine motor control). This can link with other conditions or may relate to maturity and experience. The majority of children are helped to overcome their difficulties and this avoids frustration often linked with the act of writing. As writing is a key to communicating learning, it is important that difficulties are tackled over time but without causing additional stress.

What we can offer for any child with these needs:

In foundation stage children are encouraged to take part in daily activities that help to develop good fine motor control, such as finger exercises, bead threading, using tweezers to pick up small objects or rolling/manipulating play dough. At Ashbeach we use a Handwriting Scheme called Pen Pals to teach and practise handwriting skills several times a week.

## Targeted Support

Occasionally children experience particular difficulties. They may attend additional small group activities to either practise handwriting or to carry out activities to strengthen fingers, hands and wrists. We use activities from the 'fizzy' programme recommended by the physiotherapists or occupational therapists. Children may also be encouraged to use specific tools / grips for writing to encourage a correct and comfortable grip or the use of a sloped writing board.

## Personalised Provision

Expert advice can be sought from the occupational therapist team where difficulties cannot be overcome at the school level. Children may be encouraged to learn to touch type to enable them to focus on the communication aspects of writing and may be given specific programmes to support them.

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## I'm clumsy

OOPS!

Sometimes children just need to grow into their own bodies and understand where everything is without actually looking. For other children the problems can become frustrating or can cause issues with peers who can get understandably annoyed about being knocked into or sat on! Some children need little more than time and guidance, others need more specific intervention; especially where apparent 'clumsiness' links to another diagnosed condition.

What we can offer for any child with these needs:

All children are encouraged to understand their personal space and to respect that of others. PE contributes to improving gross motor control and improved co-ordination. Fine motor activities also help children to increase hand-eye co-ordination. Classrooms are organised to allow space for movement and easy access to resources.

### Targeted Support

Some children need additional help in organising their bodies in space and also in planning routes from one area to another. Teachers ensure that the position of coat-hooks and trays etc. support any child experiencing difficulty. Some children may need to carry out specific regular physical activities to help them to understand where their arms and legs are without looking and to improve movement and balance. These activities are largely found within the 'fizzy programme' and 'sensory circuits' recommended by physiotherapists and occupational therapists. These activities can be carried out with individuals or in small groups at appropriate times of day.

### Personalised Provision

Where the problems are perceived to be more extreme or link with other diagnosed conditions we seek advice from relevant health professionals who devise specific programmes that can be carried out and supported in school.

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## I'm ANGRY!



Everyone gets angry from time to time. We all have to understand how to act and react in proportion with the event that caused annoyance. Over time we learn to self-regulate and this enables us to reduce the impact of our anger on things and people around us. Some children find this very difficult. It could be that this anger relates to trauma that has been experienced in earlier life and something that the child cannot recover without appropriate help. Anger can also be the result of frustration or anxiety, which has become overwhelming. Getting to the root of the problem is key and means that the Team Around the Child work closely together.

What we can offer for any child with these needs:

All children are given advice and strategies on both behaviour and attitude as part of PSHE and Circle Time. We have clear expectations in school; these relate to the rights of every teacher to teach and every pupil to learn. When children appear angry they are given 'time out' sometimes with an adult to help them to talk through the situation. We aim to try to understand a child's frustration and listen to all sides of the story.

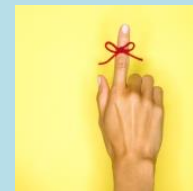
### Targeted Support

Where a child finds it more difficult to regulate their anger, they might be supported through specific programmes either as an individual or as a part of a small group. Activities to improve social skills may be undertaken in an age appropriate fashion. Anger management strategies may be provided through programmes like 'volcano in my tummy' or through use of specific Emotional barometers.

### Personalised Provision

Where anger cannot be managed, a child can be at risk of exclusion. Following our STEPS approach we may create a bespoke support plan, often with support from other professionals, the aim will be to reduce anxiety and therefore reduce dangerous behaviours.

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## I can't remember

As we progress through life, we all have an increasing number of things to remember. New learning builds on previous learning and on experience, so if we struggle to remember things, learning can become increasingly tricky. Once something is securely learnt it remains within the long term memory so that we can use the information almost without thinking. For some children short term memory can be problematic. Some children find it hard to remember the sequence to tasks like getting dressed or going to the toilet. Occasionally this can link to a diagnosed condition like Autistic Spectrum Disorder or Foetal Alcohol Spectrum Disorder. Dyslexia can also cause short term memory difficulties; whatever the problem, strategies can be put into place to support the child.

What we can offer for any child with these needs:

School routines follow a regular pattern. Teachers try to ensure that parents are informed via newsletter and the website so that everyone knows what will be covered during a term and which days PE kit is likely to be required. Teachers use visual timetables so that the children are aware of the outline plan for the day. Lessons are structured so that learning builds gradually over time. Teachers often recap on previous learning so that child can recall information and apply learning to new situations. For most children, this works well.

Targeted Support

Some children need additional support to recall information. This is often done in a small group where vocabulary and skills will be revisited so that the information is fresh in the memory. Other things will require daily practise - 'over-learning' in order to secure it in the working memory.

Personalised Provision

For some children this will still not be enough. Tasks will need to be broken down into small steps for a child to follow - plan - do - review. This will encourage the development of thinking and planning ahead, organising equipment etc. Every task will effectively need its own visual timetable. Learning will need to be broken down and taken in very small steps - precision teaching - revising and adding a little something new every day. Advice will be sought from the specialist teaching team, the educational psychologist and health professionals as necessary.

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# I think I'm rubbish at everything!

A lack of confidence can undermine everyone from time to time. Sometimes the way that we perceive ourselves can be a barrier to learning and getting along with others. As we grow up we recognise our own strengths and weaknesses. We learn strategies to cope and overcome difficulties and develop the resilience to pick ourselves up and take a different approach when something goes wrong.

What we can offer for any child with these needs:

We try to ensure that all of our children recognise and develop their own personal strengths and feel valued as a member of the school community. This message is regularly reinforced to ensure that children recognise the hard work that they are putting into their own personal progress. A broad and balanced curriculum ensures that strengths can be used and built upon. We use our school code to promote self-esteem and confidence. Teachers provide clear success criteria so that children can self-assess their own learning at the end of each task to give the teacher a clear idea both of learning and of confidence levels.

## Targeted Support

Children sometimes need help to recognise their own feelings and accept their own strengths and feelings about what they have achieved. This can be done individually or in a small group to help boost self-confidence. Some children just need to know that they are getting better at something each day; precision teaching can reinforce this message. We are currently training a TA to deliver the Emotional Literacy Support interventions (ELSA).

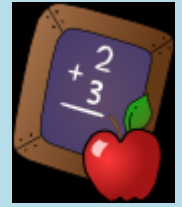
## Personalised Provision

For a few children lack of self-confidence and poor self-esteem can be damaging. This may need specific intervention from a specialist health professional, often within Child and Adolescent Mental Health Services (CAMHS) who can provide advice and support for the child and the teams around the child at home and at school.

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# I can't deal with numbers



Some children find numbers difficult to understand. Adults can unwittingly add to the problem by telling a child that they were rubbish at maths when they were at school. A bit like specific learning difficulties relating to reading and writing, strategies can be put into place to support a child in overcoming the difficulties that they face. Occasionally there can be links to other diagnosed conditions that make areas of mathematics particularly difficult.

What we can offer for any child with these needs:

All teachers use a variety of visual images to help children to understand abstract concepts. Practical resources are available and easily accessible to enable the children to model what they are doing on paper. Children have regular practise of basic mathematical skills. They are encouraged to learn number facts to support development of arithmetic skills. Children are made aware of areas for development through regular assessment and assertive mentoring meetings with their teachers. For most children differentiated quality first teaching is enough to help them over barriers to learning.

## Targeted Support

Some children find it difficult to visualise numbers. They find it hard to make the one to one correspondence that enables them to count. Some children will benefit from extension of early strategies and using 'numicon' as a tool, this can be done individually or within a small group depending on the severity of the problem. Some children need the additional support to target the specific area of difficulty. Others need small group teaching focused on a specific gap or area of learning. Interventions such as Talking Maths, First Class@Number, Success@Arithmetic are interventions that are also available as appropriate.

## Personalised Provision

Occasionally a problem cannot be overcome easily. This may link to another identified condition. Additional advice and support can be sought from the specialist teaching team or the educational psychologist who may recommend a specific approach or programme for a child.

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## I can't concentrate.



Children are expected to concentrate on tasks for prolonged periods in school. This period of concentration extends as children progress through the school. By the end of their time in primary school children will be encouraged to organise and use their time to complete a given task. This requires a wide range of skills and application thereof. Some children find concentration difficult. This may relate to sensory issues or other diagnosed conditions.

What we can offer for any child with these needs:

Work is differentiated throughout the school to account for the development of concentration. Children in the lower phase of the school are set simple tasks which take a short time. These increase in length and complexity as the children progress.

### Targeted Support

Some children will need assistance in managing their time to allow for their limited concentration. Strategies like 'first.... and then....' are used as an incentive to get a task done in a given time. Timers or task sheets may be used to aid concentration. Strategies to overcome sensory difficulties may also be employed as necessary.

### Personalised Provision

Some children will need to have tasks structured into small steps with breaks built in to maximise concentration. These will often build on the targeted strategies. Adult intervention will be used to ensure that the task is broken into those steps until the child is able to do this with a greater degree of independence. Advice will be sought from the Educational Psychologist, specialist teaching team and colleagues in the medical profession as necessary.

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## I can't see / hear well



Occasionally children experience particular difficulties with their vision or their hearing. Where these difficulties are more acute they are often linked with specialist medical practitioners. Being unable to see or hear clearly has an impact on learning. If children can't see letters or hear sounds clearly it is likely to impact on literacy development in particular. Children with intermittent hearing loss, often linked to ear, nose and throat problems, can on occasions experience problems that are more difficult to initially detect as they tend to miss elements of teaching but not everything; this causes gaps in learning.

### Universal offer

Differentiated teaching will support children to resolve difficulties along with reasonable adjustment in the classroom, like seating position. These can resolve many minor issues. Some children will be given a prescription by an optician that will assist them as their vision develops.

### Targeted Support

Where there is a particular difficulty for a child the specialist teaching team can conduct assessments to ensure that the child has appropriate resources to support learning. Their specialist advice and resources are invaluable in meeting the needs of the child in school as particular adjustments can be beyond our range of expertise. Some children benefit from using a coloured overlay when reading or writing on coloured paper.

### Personalised Provision

Even with specialist resources children most severely affected will need particular support in school to ensure that they are able to operate effectively, safely and progress along with their peers in school. Some children may need an education, health and care plan to support them and help them on the journey towards independence.

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## I have mobility problems



Some children experience mobility problems. These are often linked with other conditions. In school we work with a range of medical professionals to support children in school. Where the need arises we are able work together to afford access to the full curriculum in school.

What we can offer for any child with these needs:

Our school is accessible. We have a toilet that is adapted for wheelchair users, a ramp to the front entrance and an additional mobile ramp. We try to ensure that our communal areas and classrooms allow space for movement. Reasonable adaptations are made to seating and to allow for wheelchairs and walking frames and other equipment as needed.

Targeted Support

We work with health professionals to support identified children with regular physiotherapy and also act upon advise from occupational therapists. Together we work to maximise the child's mobility.

Personalised Provision

Where the need is long-term and complex and requires additional adult support in school beyond the school's own resources an education health and care plan may be needed. The plan will detail the individual needs of the child.

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# I have lots of needs and they all come together to make things tricky for me



Sometimes children have a number of difficulties that appear together as one package. We describe these as complex needs and some of them can be long-term. We try to unpick whatever presents itself to us, using colleagues in the medical profession, the locality and the specialist teaching team.

What we can offer for any child with these needs:

Reasonable adaptations and differentiated teaching will support learning across the curriculum.

## Targeted Support

Particular areas of difficulty will be identified and worked upon separately in order to promote progress and learning in specific areas. The range of skills will gradually be expanded and built upon.

## Personalised Provision

If progress cannot be secured, extra advice and support will be sought from specialists within health and education. All professionals will work with parents as the Team Around the Family. As soon as it is possible the child will be included as a part of that team so that they are able to sense some degree of control over what is happening. Children can make valuable contributions when deciding what helps them most. Ultimately, where the needs are agreed as long term and complex an education health and care assessment can be undertaken to secure support for the child for the foreseeable future or until such a time that the support is no longer required.

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## Where can my family find extra help?

There are lots of places where families can seek additional help. Help can be at hand locally through our locality team, the children's centre, the specialist teaching team and through medical professionals. Sometimes it is worth taking time with one of us to fill in a Early Help Assessment Form as this will help everyone to understand your child's story and enable the right people to join the Team Around your Family.

Please use the links below. They will help you to source advice and will lead you to the most up to date contact details. Please ask the [Additional Needs Leader, Emily Hawke](#) for advice and support whenever it is needed. You can also speak to your child's class teacher or Mrs D Smith. It is always better to talk rather than to worry.

[SEN Code of Practice: for 0 - 25 years](#)

[SEND Guide for Parents and Carers](#)

[The Cambridgeshire Local Offer](#)

[SENDIASS](#)

[Pinpoint](#)

You may also find guidance through links to charitable societies linked to specific conditions like:

[The Autistic Society](#)

[National Organisation for FASD](#)

[The dyslexia association](#)

[SCOPE](#)

There are many charitable organisations that link to specific conditions, this list is by no means exhaustive.

Thanks to Glebelands Primary School who kindly gave us permission to use their SEND Information report to customise for our school.

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# A brief explanation of terms used in the Ashbeach

## SEND Information Report

### AcceleRead AcceleWrite

A programme which uses a computer with text to speech software, to improve reading, writing, spelling and listening skills of pupils who are experiencing literacy difficulties. This is achieved through structured

### Better Reading Partnership

A 1-1 reading approach which aims to help children become better readers by following structured sessions focussing on the development of independent reading strategies. Children discuss the text and develop the skills needed to read independently. Sessions follow a regular format of re-reading a known and familiar text, re-reading a book recently taken home and introducing a new text.

### Circle of friends

The Circle of Friends is a process used to develop social and communication skills in older pupils. Unlike other interventions, is not based on ignoring difficult behaviour but encourages the development of a support network for the child in focus within the class. Those in the peer group are encouraged to look at their own behaviour and also to develop an understanding of the focus child's behaviour and difficulties in order to develop strategies and practical solutions to help the individual. It is not an approach to provide instant friendship, but over the course of meetings and the evaluation of set targets, it is hoped that the focus child will be able to build closer and better relationships with other children.

### EHC Plan - Education, Health and Care Plan

It details the education, health and social care support that is to be provided to a child or young person who has special educational needs or a disability. It is drawn up by the local authority and parents/carers and the child/ young person, after an EHC needs assessment of the child or young person has determined that an EHC Plan is necessary, and after consultation with relevant partner agencies.

### Elklan

A practical training course for staff working with children with learning needs. It teaches them to develop linguistic concepts and methods to develop and encourage pupil's interaction and effective communication.

### Expanded Rehearsal Technique

ERT is a phonics and whole word literacy program which focuses on improving children's reading fluency and confidence. It is based on psychological research on the most effective teaching strategies.

### First Class @ number

The intervention is delivered by a trained teaching assistant to a group of up to 4 children outside the classroom as a supplement to their daily maths lesson. It focuses on core mathematical skills and understanding.

### Inference training

Inference training is a group intervention for pupils in KS2 and KS3 who decode adequately but fail to get full meaning and enjoyment from their reading. Inference training teaches key comprehension strategies through “instructional conversations” in groups to help boost reading comprehension.

### Numicon

Numicon is a multi-sensory mathematics teaching programme using visual Numicon images in a series of practical teaching activities currently comprising three stages.

### Sensory circuits

A sequence of activities done repeatedly to provide a child with the right type of sensory input in order to calm and organise them for the day ahead ready for learning to occur. The aim is to focus concentration in readiness for the day’s learning. The circuit also encourages the development of the child’s sensory processing skills. Many children can benefit from attending a Sensory Circuit, even for a short period of time.

### Success @ Arithmetic

A calculation-based intervention for learners in Key Stage 2 and Key Stage 3 who have difficulties with arithmetic proficiency and need support to improve their understanding of number and written calculation skills. It helps them to make faster progress and to catch up with their peers through a mastery approach.

### Toe by Toe

A 1-1 highly structured multi-sensory approach to reading, particularly useful for those with specific literacy difficulties.