

Ordinarily Available Provision

Support for the Early Years Foundation Stage (Birth to 5 years)

Guidance and practical strategies to help early years settings support all children through inclusive practice and high-quality teaching.



About this document

This document has been written with early years providers in mind and contains a range of strategies and suggestions for our youngest children.

It highlights the support and expectations that early years settings can ordinarily provide for a child without the need for additional support from an Education Health Care Plan or additional funding.



Who is this for?

This document is for all early years settings, including childminders, nurseries, pre-schools and maintained settings, to use as a practical guide to support inclusive practice for children aged birth to 5 years.



What will you find inside?

Guidance, examples of presenting needs and practical strategies organised under the four areas of need from the SEND Code of Practice, with an additional medical section.



Communication and Interaction

Strategies to develop and support communication, language and social interaction.



Cognition and Learning

Ideas to support learning, attention, play and problem solving.



Social, Emotional and Mental Health

Approaches to support emotional wellbeing, self-regulation and positive behaviour.



Sensory and/or Physical Needs

Strategies to support sensory processing, physical development and access to the environment.



Medical

Information to support practice where a medical condition may impact on a child's access to education.



Using this document

The strategies can be used to inform your planning and practice as part of the graduated approach (Assess, Plan, Do, Review). They are not dependent on a formal diagnosis and should be tailored to each child's individual strengths and needs.



Review date

This document has been reviewed in **September 2026** to ensure it continues to meet the needs of early years settings and reflects current guidance and good practice.



EARLY YEARS
SEND TEAM



PLAY
LEARN
BELONG



SUPPORT
INCLUDE
THRIVE



A BRIGHTER
TOMORROW

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ABOUT THIS GUIDANCE

This document has been written with early years providers in mind and contains a range of strategies and suggestions for our youngest children. It highlights support and expectations that early years settings can ordinarily provide without the need for an Education, Health and Care Plan or additional funding.

The additional needs of most children can be met through inclusive quality-first teaching and reasonable adjustments using funding and resources already available in the setting. This is known as ordinarily available provision.

The Assess, Plan, Do, Review cycle is at the heart of the graduated approach. Observations, feedback on strategies and the progress a child makes are vital to careful planning and implementation.

Provision should reflect each child's individual strengths and needs and should not depend on a formal diagnosis. Dysregulated behaviours may indicate unmet needs, so reflect on behaviour and practice to understand how best to support the child.

The guidance is arranged around the four areas of need in the SEND Code of Practice, with an additional medical section. Children may have needs across more than one area. Work with children, parent carers, SENCOs, your Locality Lead and relevant specialists to identify, implement and review strategies.

Review date: September 2026

Communication And Interaction

Identified barrier and/or need	
Difficulties in being understood and with what they want to say.	
STRATEGIES AND APPROACHES	
Use gestures and signs	Support verbal explanations using pictures and object of reference
Model language Reflect correcting speech rather than correcting	Repeat what the child has said and add one word
Label accessible equipment with photos and pictures	Observe child's preferred ways to communicate this may include non-verbal gestures and body language
Encourage children to work in pairs and small groups Give opportunities to interact with children who can provide good language models	Introduce a variety of language through rhymes and songs
Ensure that all attempts to speak are acknowledged and valued	Provide an additional method of communicating Makaton, Visual signs, Visual aids, Aided language boards to support verbal communication
If recommended by a specialist, and provided with training, use a symbol communication (e.g pecs)	Develop way of communication with families with EAL Meet regularly with parent carers to establish communication levels at home and share suitable advice and strategies

Communication And Interaction

Identified barrier and/or need	
Difficulties understanding what is being said to them.	
STRATEGIES AND APPROACHES	
Label equipment with pictures, signs and words	Check you have engaged the child's attention before talking to them, use the child's name to attract attention
Consider how many information-carrying words a child can manage when giving instructions Adapt use of language and method, for example simple choices, reduce complexity and sentence length	Check that hearing has been tested
Ensure the adult is physically at child's level	Plan specific opportunities to teach new vocabulary Provide opportunities to revisit and practice, to develop understanding and use of new words
Provide visual prompts alongside language Include key vocabulary, visual timetables, now and next, gestures	Consider use of 'first and then' or 'now and next' supported by visual prompts
Give extra/allow take up time to process what has been said	Meet regularly with parent carers Discuss how advice and strategies can be continued and strengthened when used at home
Think about the environment and how to limit any distractions	Repeat key words and phrases

Communication And Interaction

Identified barrier and/or need	
Child can find it difficult to understand or use social rules of communication.	
STRATEGIES AND APPROACHES	
Use modelling / role play	Implement small group sessions
Use visual supports for routines For example, Now (you are doing this) and Next (you are going to be doing that) boards.	Use social stories
Give prompts – symbols, signing systems	

Communication And Interaction

Identified barrier and/or need	
Difficulties with language and social communication.	
STRATEGIES AND APPROACHES	
Use the child's name first to draw their attention followed by key word instructions, for example "Jamie...Stop."	Give clear simple instructions (avoiding idioms)
Use literal language Avoiding sarcasm and figures of speech	Use objects of reference to support routine
Have an awareness of an appropriate environment, noise, temperature, lighting, layout	Use of symbols communication such as Picture Exchange Communication System If recommended by a specialist who has also provided training to enable practitioners to implement the system correctly
Be aware of your own body language 93% of what we communicate is non-verbal, 7% is communicated through spoken word, 38% through tone of voice, and 55% through body language	Have an awareness of an appropriate tone of voice, calm and not too loud
Have an awareness of use of language Some children may need a language rich environment; others may need it to be kept simple	

Communication And Interaction

Identified barrier and/or need	
Limited imaginative play.	
STRATEGIES AND APPROACHES	
The child may benefit from being taught and modelled imaginative play sequences sometimes referred to as structured play	Familiar adults introduce simple pretend play, using familiar objects to model new play
Plan time for partner play Be a playful partner for the child	Role play and drama, use of props, for example puppets, hats or materials, acting out familiar stories
Duplicating favourite resources – one for the adult and one for the child	Modelling; Providing a narrative for the child’s play
Use of techniques This could include helicopter stories to engage children in making up their own stories	Storytelling
Singing and improvisation	

Communication And Interaction

Identified barrier and/or need	
Difficulty with social communication and developing relationships.	
STRATEGIES AND APPROACHES	
Mirror, copy and mimic the child's play as a way into reciprocal interaction and to show that it is valued	Use intensive interaction strategies
Model functional language For example, "hello, please can I play?", "help me", "Hello, Gavin wants to play"	Planning of small groupings and opportunities to develop social understanding and inference
Promote a calm learning environment	Consistent use of natural gestures For example, pointing, facial expressions, open body language/position at child's level
Organise small group or 1 to 1 tasks and activities For example, which involve turn taking and learn each other's names, build up the size of the group gradually, adult to child, adult to two children etc.	Be clear and consistent in your communication of expectations
Ensure staff support child to label their own and other's emotions	Creating communication friendly spaces for the child

Communication And Interaction

Identified barrier and/or need	
Anxiety due to communication in busy, unpredictable environments.	
STRATEGIES AND APPROACHES	
Prepare the child for change of activity or routine For example, use of visual resources and objects of reference	Organise small group / 1 to 1 tasks and activities to be available if needed
Provide adults to be available to support the child's emotions For example, the use of feelings area / sensory corner	Ensure that there is a calm learning environment
Provide access to a haven / low arousal space when needed	Provide emotional language When the child is calm, name their emotions and those of others in a natural way
Use a visual timetable in your provision and make sure it is used to prepare children for changes in your regular routine Make sure it is used consistently, referred to regularly and updated after each activity is finished	Ensure staff monitor key transition points For example, drop off, pick up, snack, lunchtime, visitors and changes to routines with strategies to reduce anxiety
Use STAR chart for observations and to see if there is a trigger to any changes of behaviour	

Communication And Interaction

Identified barrier and/or need	
Sensitivity to sensory stimuli.	
STRATEGIES AND APPROACHES	
Provide sensory breaks This might help to reduce the potential pressure from social overload	Be aware of sensory needs Explore this further with parent carers and be flexible with routine
Consider the environment For example, noise, room temperature, visual stimuli, proximity. Use of an audit tool may be helpful	Have a flexible approach to transition times within the day or session
Provide access to a haven/ low arousal space if needed	Complete the ‘All about me’ with the family to support the child’s sensory needs
Consider staff knowledge of sensory issues and access further training	

Communication And Interaction

Identified barrier and/or need	
Physical outbursts causing harm to others and/or to self and/or damage to property.	
STRATEGIES AND APPROACHES	
Share clear expectations Use positive language, in relation to the setting ethos, for example kind hands, listening ears etc. verbally and visually. All staff need to be consistent in how they support children to remember and follow these expectations	All staff use a consistent approach to support the child in distress and keeping other children safe. Making “reasonable adjustments” to support individual needs
Continue to implement strategies that are reassuring and acknowledge the child’s emotions	Anticipate the trigger and use distraction to avoid physical interactions
Provide the child with safe things and places to throw which meet the physical need to throw but will not hurt	Model the use of alternative strategies to express feelings of anger or frustration For example, screaming outside, pushing against a pair of handprints on a wall, banging a drum.
Monitor use of alternative strategies so that you have a good understanding of the frequency and location of triggers You could use frequency charts; star chart; observation sheet. Informal observations should be carried out to analyse incidents, develop understanding and plan for adjustments according.	Encourage 2-way communication with families about what might be happening at home (e.g. divorce, bereavement, illness) and strategies that work / don’t work and relaying this information to staff
Put preventative strategies in place For example, avoiding high arousal situations such as busy noisy environments or groups of children in small spaces	Arrange a safe and calm/ reflective area, chosen in agreement with the child

Communication And Interaction

Strategies and approaches (continued)

STRATEGIES AND APPROACHES

Access Positive Behaviour training Review practice to employ appropriate de-escalation strategies (e.g. distraction to an activity of interest, offer child’s comforter, preferred adult, calming strategy)	Implement a risk management plan This should include pro-active strategies, early interventions to reduce anxiety/harm and reactive strategies to ensure a consistent approach
Consider self-regulation in early years training	

Communication And Interaction

Identified barrier and/or need	
Limited attention span compared to developmental age.	
STRATEGIES AND APPROACHES	
Use child's name when giving instructions	Ask the child to repeat back what activity they are going to do
Use the child's interest as a motivator and to extend engagement	Consider use of timers, so the child knows they must only focus for a comfortable amount of time
Keep activities short and finish before the child loses interest in order to build on success for the child	Use chunking Break down tasks into smaller, manageable steps
Use of visual timetable Including some individualised visuals to meet the child's needs.	Consider the use of attention building strategies Speak to your locality lead about training for this including Attention Autism – Bucket time etc
Consider backward chaining For example, break the overall task down into smaller steps. The adult helps the child with all but the last step with the child being taught to do the last step themselves. Once the last step is learnt, the child and adult work backwards, learning other steps of the sequence until the child can do the entire task.	

Cognition And Learning

Identified barrier and/or need	
Difficulties with learning, despite appropriate differentiation/ individual strategies. The child is working below age related expectations across the curriculum.	
STRATEGIES AND APPROACHES	
Assess through making observations in child-initiated learning and adult directed tasks to identify area of need	Model use of open-ended simple pondering statements such as 'I wonder...' or 'What if...' rather than direct questions
Give clear and simple instructions, breaking down longer instructions and giving one at a time	Use visual timetables, visual cues and prompts For, example, objects, pictures, photos, symbols, choice boards, sequences to support instructions
Develop personalised stories and books using the child's interests	Give time to process information before a response is needed
Use pre-teaching to support the child If there is a new interest that is planned to be expanded or a new book explored, it may be useful to share this with the child prior to others. It may be helpful to introduce specific language and vocabulary.	Make explicit links to prior learning by reminding the child of past events, This can be done by reminding the child of past events, activities or experiences. Displaying photographs or sharing individual learning journals can support this
When considering the resources needed to support a child, scrutinise the developmental stage rather than the age of the child to ensure resources support needs	Use meaningful continuous strategies to boost self-esteem and confidence. Provide specific meaningful praise and feedback when a child perseveres and/or achieves something new. Staff should praise the child for the process of engagement and learning and 'having a go' rather than the outcome.

Cognition And Learning

Identified barrier and/or need

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

Any provision or support should be provided in line with the needs of the children and is NOT dependent on any formal diagnosis.

STRATEGIES AND APPROACHES

Assessment through observations of child-led play and playful adult-directed tasks to identify the areas of need	Support the child to learn short achievable tasks by modelling and giving lots of encouragement
Ask the child to think in advance about how they will accomplish a task. Talk through and sequence the stages together	Understand the child's difficulties with learning in consultation with the child and their parent carers, including finding out what works well at home
Adopt a neurodiverse approach to celebrate the strengths of each child	Recognise and celebrate success in effort and show interest in other areas of their life
Work closely with the SENCO and other specialist staff to understand what strategies or approaches to use in line with advice from assessments or consultation	Use evidence-based interventions to develop skills For example, increase hand muscle and finger dexterity to support mark making
Link learning to real world situations	

Cognition And Learning

Identified barrier and/or need

Specific learning difficulties affecting one or more areas of learning which may result in formal assessment or diagnosis: To support memory

Any provision or support should be provided in line with the needs of the children and is NOT dependent on any formal diagnosis.

STRATEGIES AND APPROACHES

Provide memory aids For example, visual cues and timetables referring to these regularly throughout the day, ensure that these are readily available to the child and moved frequently to enable accessibility	Provide practical resources to support learning appropriate to the stage of development For example, you may want to use name or picture cards and rhymes or songs
Ensure your setting has a consistent routine, supporting the child with changes when necessary	Support children visually and kinesthetically when changes in the environment occur For example, allow extra time at tidy up time, allocate specific tasks at tidy up time, repeating activities
Ensure resources are clearly labelled with pictures and words at the child's level promoting independence	Provide photographs of the setting These should include important people such as keyworker, teacher/ leader, and the environment such as where they put their coat, water bottle, lunch box, bag for home so that these can be shared with the child at home

Cognition And Learning

Identified barrier and/or need

Specific learning difficulties affecting one or more areas of learning which may result in formal assessment or diagnosis: For literacy difficulties

Any provision or support should be provided in line with the needs of the children and is NOT dependent on any formal diagnosis.

STRATEGIES AND APPROACHES

Ensure indoor and outdoor opportunities are provided and across all areas of learning	Encourage and support the child's responses to picture books and stories you read with them
Use different voices to tell stories and encourage the child to join in wherever possible For example, leaving gaps in repeated catchphrases	Tell stories in a variety of ways For example, the child uses pictures, make picture scrap books so they can design their own stories, use puppets or small world play, use the child's ideas to build interactive imaginative stories
Be creative where stories are shared using all areas of the indoor and outdoor environment	Include opportunities for mark making and writing across all areas of provision and play
Consider peers within small group experiences so the child has access to good role models for language and communication	Provide opportunities and experiences for the child to build on their understanding through repetition with skillful adults scaffolding learning

Cognition And Learning

Identified barrier and/or need	
Specific learning difficulties affecting one or more areas of learning which may result in formal assessment or diagnosis: For numeracy difficulties Any provision or support should be provided in line with the needs of the children and is NOT dependent on any formal diagnosis.	
STRATEGIES AND APPROACHES	
Ensure indoor and outdoor opportunities are provided and across all areas of learning	Sing counting songs and rhymes using visual aids/ cues which help to support the child’s understanding of number For example, 5 little speckled frogs, 10 green bottles, 5 little men in a flying saucer etc.
Use pictures and objects to illustrate counting songs, rhymes and number stories, cooking activities	Provide collections of interesting things for the child to sort, order, count, label in their play
Ensure mathematical language is embedded throughout the environment and used in all play and routine opportunities	Support the child to gain an understanding of individual number sense For example, the ‘twoness of two’ – I have 2 hands, 2 eyes, I can collect 2 objects

Cognition And Learning

Identified barrier and/or need	
Generalised learning difficulties, for example difficulties across the curriculum but with some areas of strength. A child with an uneven profile of skills and attainment	
STRATEGIES AND APPROACHES	
Ensure the child has full access to the breadth of learning by adjusting and modifying to differentiate the curriculum, right across the board	Support the characteristics of effective teaching and learning and plan activities designed to develop skills which will support them to become independent learners
Support the child to develop their self-esteem through celebration and reinforcement of strengths and successes	Support the child to draw on their own experiences in their play and support them to expand and build on their ideas, concepts and skills
Extend the child’s interests and introduce them to new experiences by providing a variety of activities using creative and playful approaches	Provide real life experiences as part of your everyday routines for the child to explore and discover
Plan and resource a challenging environment where the child’s play can be supported and extended	Encourage and support the child to persevere through difficulties, to ask questions, problem solve and take risks
Identify and support next steps in learning utilizing information from home to offer the child consistent challenge	

Social, Emotional And Mental Health Difficulties

Identified barrier and/or need	
What is the child's behaviour communicating? Why is the child displaying this behaviour?	
STRATEGIES AND APPROACHES	
Ensure that there is an understanding within the setting that behaviours of concern are a form of communication	Understand the function of the behaviour before implementing strategies Try to identify why the child is displaying behaviours before planning how to support them
Identify what is not working well through engagement with the child as early as possible Ensure there is a positive robust key person system in place that supports the relationship	Facilitate the implementation of specialist advice For example, substitutes for self-harming behaviours such as elastic bands or marbles
Consider what the behaviour may be reflecting Are the behaviours communicating a sensory, escape, attention or tangible need? Is there an unmet communication, or social, emotional and mental health need?	Look at the history, when did the behaviour start to change? Can you identify triggers? Talk to the parent carers to understand the child's experiences at home and if the family have similar concerns
Liaise and collaborate with home to understand the wider picture	Keep a note of concerns, liaise with designated professional within your setting (Senco, key person, Safeguarding lead)
Be aware if the child has been prescribed medication, feedback any changes or concerns to the parent carers so that they can discuss with their GP to rule out health issues	Include additional learning opportunities to develop pre-social behaviours

Social, Emotional And Mental Health Difficulties

Identified barrier and/or need	
Difficulties participating and presenting as withdrawn or isolated	
STRATEGIES AND APPROACHES	
Make sure all the adults are aware of their reactions to the observed behaviour and ensure a consistent response	Understand the function of the behaviour before implementing strategies Try to identify why the child is displaying behaviours before planning how to support them
Consider or ask what may make the child feel more at ease/ safe Provide a feelings/ calm area with resources such as blankets, soft toys, sensory/fidget items, offer some time outside	Support the child to develop the skills to self-regulate their feelings Ensure all adults understand and support the child in this
Revise your setting behaviour management policy Ensure it focuses on supporting the child's social and emotional development including supporting self-regulation	Observe play interest along with finding out what the child likes to play at home Use these to plan interesting activities to support all areas of learning in the setting
Be calm and sensitive, take the pressure off by limiting the number of questions	Use assessment through play Are there parts of the EYFS/ areas of learning, learning environment and routines that they find easier to manage than others? Use these to develop confidence
Analyse all observations to identify the child's needs and how to support them. Plan specific observations if needed	Discuss with your SENCO if there are staff members who seem to get a more positive response. Understand the strategies that they are using and support others to replicate these

Social, Emotional And Mental Health Difficulties

Strategies and approaches (continued)

STRATEGIES AND APPROACHES

Differentiate tasks to ensure that all children experience success in the learning environment.	Ensure that all staff recognise that promoting prosocial behaviour is an effective strategy to support behaviour expectations
Try small group work For example, friendship or social skills nurture groups	Try activities and experiences which provide the child with a sense of belonging or importance to the group

Social, Emotional And Mental Health Difficulties

Identified barrier and/or need	
Displaying behaviours which may negatively impact their learning and/or the learning of other children	
STRATEGIES AND APPROACHES	
Understand the function of the behaviour before implementing strategies Try to identify why the child is displaying behaviours before planning how to support them. Use the STAR chart to identify potential triggers	Consider if the child needs support to regulate their feelings Look at and share the zone of to help the child find a good strategy for them to use or be reminded of when situations arise
Talk with parent carers, are they experiencing similar behaviours at home Develop a shared understanding and plan appropriate strategies to be used at home and in the setting	Review routines, practice and provision in the setting Identify and make changes that will support all children. Ask questions about why you do things the way you do and who it benefits. Be open and flexible – If it is not working, make a change
Share strategies with all adults and ensure they are used consistently	Explore the use of peer observation or videoing good staff interactions and use of strategies to develop other practitioners' skills and confidence
Create a quiet, calm space with the child where they can go when they feel overwhelmed For example, a small tent, a box of familiar toys, a favourite book/ sensory toy	Encourage the use of emotional language When the child is calm name their feelings and emotions and those of others in a natural way

Social, Emotional And Mental Health Difficulties

Identified barrier and/or need	
Attention difficulties	
STRATEGIES AND APPROACHES	
Ensure that experiences and activities are suitable for the child For example, the length, timing, interests	Explore what motivates the child and use their motivation to support them to maintain attention
Provide consistent structure and routines to the day/ session/ task	Give clear simple directions
Provide adult support for the child that is away from distractions and demonstrate good ‘learning’ role models	Think about potential reasons and identify any patterns
Record behaviour But remember to analyse and review trends	Allow plenty of time for movement or frequent small concentration periods
Plan activities in small manageable chunks	Be aware of times of the day that may be more difficult
Provide calm spaces	Remember to consult with eh child’s parent carers so they can share with you their perspective

Social, Emotional And Mental Health Difficulties

Identified barrier and/or need	
Low level disruption For example, interruptions, fiddling etc.	
STRATEGIES AND APPROACHES	
Differentiate your use of voice, gesture and body language	Focus on reducing anxiety and thereby behaviours
Use positive reinforcement of expectations through verbal scripts and visual prompts	Focus on the behaviour and what it is you would like the child or young person to do What is it you (the adult) want to achieve? Provide support to achieve the aim

Social, Emotional And Mental Health Difficulties

Identified barrier and/or need	
Difficulty in making and maintaining healthy relationships	
STRATEGIES AND APPROACHES	
Use small group/ nurture group activities to support personal, social and emotional development	Model appropriate emotional responses to disagreements or difficulties with sharing or turn taking etc.
Think about who the child can maintain a relationship with (adults only, younger children) Try and understand the reasons for this and use this information to build their capacity to maintain relationships	Use and model a conflict resolution approach to help manage upsets and disagreements Use restorative approaches when relationships break down
Try different opportunities for social and emotional development For example, buddy system/ paired learning activities/ scaffolding group work	Use a key worker to rehearse and replay more appropriate social communication methods Provide opportunities to practice their social communication skills

Social, Emotional And Mental Health Difficulties

Identified barrier and/or need	
Difficulties following and accepting adult direction	
STRATEGIES AND APPROACHES	
Look for patterns and triggers to identify what may be causing behaviours For example, use of language	Be aware that these behaviours may indicate an unmet need for safety
Use positive scripts Positive language to re-direct and reinforce expectations, for example use of others as role models	Consider calming scripts to de-escalate For example, use of sand timers for ‘thinking time’
Provide limited choices to give the child a sense of control whilst following adult led activities	Use meaningful positive feedback to reward prosocial behaviours with whatever the child is personally motivated by For example, LEGO, superhero play, jigsaws, technology
Consider creating a visual timetable and using visual cues such as sand timers to support the end of activities and sharing	

Social, Emotional And Mental Health Difficulties

Identified barrier and/or need	
Presenting as significantly unhappy or stressed	
STRATEGIES AND APPROACHES	
Identify a key figure within the setting who can provide emotional support and build upon the child’s interests	Establish a calm area which is chosen and agreed with the child
Ensure feedback is used to collaborate and plan with parent carers, to ensure consistency between the home and setting	Consider the use of comic strip conversations to identify triggers and identify alternative actions
Provide opportunities to reflect emotional states and use strategies to support self - regulation	

Sensory And/Or Physical Needs

Identified barrier and/or need	
Physical sensitivity including hyper and hypo responses and sensory processing differences	
STRATEGIES AND APPROACHES	
Consult with parent carers to identify potential trigger times and activities	Consider conducting a sensory audit of the setting environment
Share the strategies and advice with all members of staff to support the child's sensory diet	Consider referral to occupational therapy service
Access staff training (such as sensory integration) if needed	Identify activities which help the child regulate. Use these at appropriate times of the day to promote access to learning
Consider the impact of break times, lunch time and transitions Work with the child to develop strategies which help them feel ready to learn	Consider using sensory reduction planning
Consider using individual workstations	Build resilience using timers

Sensory And/Or Physical Needs

Identified barrier and/or need

Developmental co-ordination difficulties (previously known as dyspraxia)
In addition to the strategies in Cognition and learning section, the following may be of help

STRATEGIES AND APPROACHES

Develop the child's core stability For example, wobble cushion, exercises and games	Ensure correct seating position with appropriately sized tables and chairs. Practitioners to discuss any specialist equipment needs with the most appropriate professional
Provide physical activities to support development of gross motor skills For example, throwing, catching, hopping, scootering etc. in addition, offer opportunities for a child to cross the mid-line such as waving scarves, ribbons, pom poms etc.	Provide a variety of opportunities for mark making For example, water and paint brushes, mud and sticks, wet and dry sand before progressing on to using more formal mark making tools such as pencils/ crayons etc.
Develop fine motor skills For example, hand and arm exercises such as dough disco, specialist scissors, pegboards, threading, play dough, pincer grip activities such as pegs onto washing line or sorting with tweezers	Provide sequencing and organizational skills For example, now/next boards, visual timetables and clear consistent routines

Sensory And/Or Physical Needs

Identified barrier and/or need

Hearing impairment

A child may mishear words or instructions and need reinforcement and reassurance before starting a task, fluctuations in attention, may struggle concentrating, difficulty in understanding peers in group discussions or in noisier environments, may have delayed language

STRATEGIES AND APPROACHES

Remove or reduce background noise	Where appropriate, use hanging objects to support sounds to bounce back to child level
Ensure staff work together with other professionals For example, sensory support team	Use appropriate seating and visual materials Use individual support plans and one-page profiles for requirements
Ensure instructions are specific and delivered clearly and at an appropriate volume	Check instructions have been effectively communicated and understood, particularly when delivering new information and/ or using unfamiliar vocabulary For example, provide gesture or visual cues to support this such as basic Makaton and re-visit the instruction with the child if not understood
Be aware the child may use lip-reading and visual cues to support their hearing. Ensure that they are face on when you are giving instructions. Try not to move around the room whilst talking	Be aware of non-verbal communication For example, eye contact, body language and facial expressions

Sensory And/Or Physical Needs

Identified barrier and/or need	
Visual impairment Deterioration in visual behaviours, for example mark making, copying, moving items closer to eyes, identifying peers, during low light	
STRATEGIES AND APPROACHES	
Work together with other professionals to share strategies and advice to support the child to successfully access to learning environment For example, use of ICT, alternative visual resources	Gain a good understanding of the child's level of vision, seek training through the sensory support team
Provide additional resources for inclusive play For example, a bell in a ball so all can play together	Ensure time for a child to map the room and allow this to occur daily or when in. Allow re-mapping to occur when furniture and resources change place to reduce confusion and potential injury
Consider lighting and position at group time/ lunch time and how it supports the child's vision	Provide uncluttered space and reduce display backgrounds to help the child focus on the appropriate object
Use talking books and consider talking equipment	Ensure labelling and pictures for the content of resources are in a style that is clear to the child
Take account of mobility needs to ensure the child has access to the whole environment	Provide access to visual aids at an appropriate height for children

Sensory And/Or Physical Needs

Identified barrier and/or need	
Tasting (gustatory) differences A child may have aversion to certain food tastes and textures, a child may also seek input from foods and food textures	
STRATEGIES AND APPROACHES	
Use visual supports to help with choices and awareness of what is for lunch, snack, dinner	Have a consistent mealtime routine involving opportunities for positive role modelling from the adult and positive support for the child
Offer an element of choice For example, peas or carrots	Allow and provide opportunities for the child to explore food texture with their hands
Encourage positive interactions between child and adult to build confidence	Keep pressure to eat low, especially when trying new foods
Ensure that there are alternatives available at mealtimes and foods that suit a sensory preference	Plan carefully how the child will access meals and snacks to reduce stress and any pressure to eat

Sensory And/Or Physical Needs

Identified barrier and/or need	
Smelling (olfactory) differences A child may have a strong aversion to smells or indeed seek out smells	
STRATEGIES AND APPROACHES	
Set up a ‘no scent’ zone For example, free from air fresheners, flowers, perfume	Staff should consider the perfume/ aftershave and other products that have a smell that they wear
Be aware of smells from the outdoor environment For example, refuse collection and mitigate these smells where possible	Consider if cleaning materials have a strong smell
Provide scented playdough, pens, toys to support sensory seeking	Allow the child opportunities to bake and cook to create different smells

Sensory And/Or Physical Needs

Identified barrier and/or need	
Touch (tactile) differences	
STRATEGIES AND APPROACHES	
Consider the proximity of others For example, would a carpet tile help?	Allow the child to be at the front or back of the line, if helpful
Approach the child within their visual field	Consider the challenges that a child may face with different floor surfaces; they may find it challenging to sit on the carpet
Ensure that there are opportunities for the child to engage in sensory play For example, sand, water, oats, gloop	

Sensory And/Or Physical Needs

Identified barrier and/or need	
Proprioceptive differences A child may seek extra input for their proprioceptive sense	
STRATEGIES AND APPROACHES	
Offer opportunities for the child to run, jump, join in weight bearing activities For example, crawling, pushing, pulling games	Recognise that a child may seek further sensory input via learning For example, table or wall pushes
Be aware that a child may rock on their chair, or place the chair legs on their feet to seek 'grounding' Consider what opportunities are on offer to support this; for example, a child may benefit from move and sit cushions or wedges to give feedback to sit comfortably	Consider the challenges that a child may face with different floor surfaces; they may find it challenging to sit on the carpet
Ensure that there are opportunities for the child to engage in sensory play For example, sand, water, oats, gloop	Ask the child to carry a box or bag (appropriately heavy) of toys or work for next activity
Provide pushing/ pulling boxes with heavier items in	Offer riding vehicles For example, tricycles, bicycles and scooters
Offer jumping on a trampette	Suggest using a space hopper
Use timers to support the start and finish of the activity	Provide sensory circuits to support the children

Sensory And/Or Physical Needs

Identified barrier and/or need	
Vestibular differences	
STRATEGIES AND APPROACHES	
Give the child daily opportunities to perform gently stretches For example, rocking back and forth, slowly marching, consider yoga activities	Provide opportunities to work in pairs with another child on ‘rowing’ Sitting opposite, legs in v, touching feet with partner, holding hands, gently ‘row’ forward and back
A child may need support negotiating space, walking up the stairs and with balancing activities	Vestibular activities can help to raise a child’s level of arousal or alertness. Activities may include jumping, working against gravity, crunchy strong-tasting foods, climbing, running, movement breaks, moving furniture

Sensory And/Or Physical Needs

Identified barrier and/or need	
Severe and complex medical needs including a life-threatening diagnosis or condition	
STRATEGIES AND APPROACHES	
Ensure that you have the equipment that you need For example, support equipment such as lockable medicine cabinets, first aid bags, fridge. some medications such as inhalers, blood glucose testing and adrenaline pens should be immediately available	Review and update individual support plans (health care plan and or risk management plan) with your Senco to ensure that they reflect the level of need being presented and are informative for another member
Ensure staff know which medicines need to be locked away and which need to be accessible. Do staff know where a child’s medication is stored, especially if it may be needed urgently Consider having duplicates at different locations in the setting	Ensure more than one staff member has the knowledge and skills required to support a child, so that if the member of staff is absent the child is not impacted
Ensure parent carers and staff have access to the medication policy to be reviewed and updated regularly This would include gaining parent carers permission in writing to administer medication and ensure it is prescribed	Ensure that transition arrangements have been put into place prior to the child joining the setting This would include ensuring that the necessary adaptations are in place

Sensory And/Or Physical Needs

Strategies and approaches (continued)

STRATEGIES AND APPROACHES

Consider how you establish and maintain good communication links with parent carers and how you share information in a timely manner	Identify what additional support may be required to diet, toileting, use of equipment, cooking, mealtimes and taking part in outings
Provide achievable opportunities for the child to experience success and be as independent as possible Provide scaffolding to enable the child to take part in paired or small group work.	Consider fatigue levels and how these impact on the child's ability to engage Make plans for rest and sleep as required
Ensure understanding of how medical conditions can impact on the child's ability to learn	Consider how you could promote regular contact with the home when/if a child is not in the setting, to maintain a 'sense of belonging' with peers and the setting community
Absence from provision due to medical needs may require a reintegration plan to address learning gaps and support the child to feel safe and secure	Ensure health care plans and /or other documentation are regularly updated, are shared with and are accessible to appropriate staff
Have a good understanding of any documents related to managing medical needs in the setting	

