

# Ordinarily Available Provision

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EARLY YEARS (BIRTH TO 5 YEARS)

# ORDINARILY AVAILABLE PROVISION

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

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 a range of 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. The additional needs of most children can be met by inclusive quality first teaching and reasonable adjustments from the funding and resources that are already or 'ordinarily' available in their setting. This is known as 'ordinarily available provision'.

The Assess, Plan, Do, Review cycle is at the heart of the graduated approach to support children's individual needs. Your observations and feedback on the strategies that are being used and the progress the child makes are vital to this process. Use this document to identify the strategies that would be appropriate for child to inform careful planning and implementation of strategies that will improve outcomes for children and may show that a child has a delay in their learning rather than SEND.

Any provision or support should be provided in line with the needs of the child; it should not be dependent on any formal diagnosis. Even if a diagnosis has been given, it is paramount to remember that each child has strengths and needs which are unique to them.

Dysregulated behaviours can be a sign of unmet needs and it is important to reflect on behaviours and practice to understand how best to support them.

A 'Medical' section has also been added to support practice. Although a medical diagnosis or disability does not imply the child has a special educational need, some may have a medical condition that can impact on their access to education.

The SEND Code of Practice, 2015 (para 6:15) says "A pupil has SEN where their learning difficulty or disability calls for special educational provision, namely provision different from or additional to that ordinarily available to pupils of the same age.

For ease of use, this document has been arranged by the four areas of need as set out in the SEND Code of Practice. However, many children may have needs across more than one category and their presentation may not fall neatly into one area.

Staff will need to work with the child and their parents, and at times more specialist staff, such as SENCOs, your Area SENCO, Locality Lead or external specialists, to identify, implement and evaluate more individualised strategies. As a practitioner, key person, room lead, or manager it is important that you implement the advice that is provided from specialist services, as you are key in implementing the strategies within your provision.

We know that adapting practice to meet the needs of all children does bring its challenges. It is our hope that this accessible resource will be used to prompt discussion and facilitate planning to create inclusive learning environments and experiences.

## COMMUNICATION AND INTERACTION

In addition to the quality first teaching expectations, additional provision and interventions may be required. Examples of presenting needs and suggested strategies are given below as a starting point for your planning and practice.

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

## COMMUNICATION AND INTERACTION

In addition to the quality first teaching expectations, additional provision and interventions may be required. Examples of presenting needs and suggested strategies are given below as a starting point for your planning and practice.

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

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In addition to the quality first teaching expectations, additional provision and interventions may be required. Examples of presenting needs and suggested strategies are given below as a starting point for your planning and practice.

<b>IDENTIFIED BARRIER AND/OR NEED:</b> Child can find it difficult to understand or use social rules of communication.	
<b>STRATEGIES AND APPROACHES</b>	
<input type="checkbox"/> <b>Use modelling / role play</b>	<input type="checkbox"/> <b>Implement small group sessions</b>
<input type="checkbox"/> <b>Use visual supports for routines</b> For example, Now (you are doing this) and Next (you are going to be doing that) boards.	<input type="checkbox"/> <b>Use social stories</b>
<input type="checkbox"/> <b>Give prompts – symbols, signing systems</b>	

## COMMUNICATION AND INTERACTION

In addition to the quality first teaching expectations, additional provision and interventions may be required. Examples of presenting needs and suggested strategies are given below as a starting point for your planning and practice.

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

## COMMUNICATION AND INTERACTION

In addition to the quality first teaching expectations, additional provision and interventions may be required. Examples of presenting needs and suggested strategies are given below as a starting point for your planning and practice.

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

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In addition to the quality first teaching expectations, additional provision and interventions may be required. Examples of presenting needs and suggested strategies are given below as a starting point for your planning and practice.

<b>IDENTIFIED BARRIER AND/OR NEED:</b>	
Difficulty with social communication and developing relationships.	
<b>STRATEGIES AND APPROACHES</b>	
<input type="checkbox"/> <b>Mirror, copy and mimic the child's play as a way into reciprocal interaction and to show that it is valued</b>	<input type="checkbox"/> <b>Use intensive interaction strategies</b>
<input type="checkbox"/> <b>Model functional language</b> For example, "hello, please can I play?", "help me", "Hello, Gavin wants to play"	<input type="checkbox"/> <b>Planning of small groupings and opportunities to develop social understanding and inference</b>
<input type="checkbox"/> <b>Promote a calm learning environment</b>	<input type="checkbox"/> <b>Consistent use of natural gestures</b> For example, pointing, facial expressions, open body language/position at child's level
<input type="checkbox"/> <b>Organise small group or 1 to 1 tasks and activities</b> 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.	<input type="checkbox"/> <b>Be clear and consistent in your communication of expectations</b>
<input type="checkbox"/> <b>Ensure staff support child to label their own and other's emotions</b>	<input type="checkbox"/> <b>Creating communication friendly spaces for the child</b>

## COMMUNICATION AND INTERACTION

In addition to the quality first teaching expectations, additional provision and interventions may be required. Examples of presenting needs and suggested strategies are given below as a starting point for your planning and practice.

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

## COMMUNICATION AND INTERACTION

In addition to the quality first teaching expectations, additional provision and interventions may be required. Examples of presenting needs and suggested strategies are given below as a starting point for your planning and practice.

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

## COMMUNICATION AND INTERACTION

In addition to the quality first teaching expectations, additional provision and interventions may be required. Examples of presenting needs and suggested strategies are given below as a starting point for your planning and practice.

<b>IDENTIFIED BARRIER AND/OR NEED:</b>	
Physical outbursts causing harm to others and/or to self and/or damage to property.	
<b>STRATEGIES AND APPROACHES</b>	
<input type="checkbox"/> <b>Share clear expectations</b> 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	<input type="checkbox"/> <b>All staff use a consistent approach to support the child in distress and keeping other children safe. Making “reasonable adjustments” to support individual needs</b>
<input type="checkbox"/> <b>Continue to implement strategies that are reassuring and acknowledge the child’s emotions</b>	<input type="checkbox"/> <b>Anticipate the trigger and use distraction to avoid physical interactions</b>
<input type="checkbox"/> <b>Provide the child with safe things and places to throw which meet the physical need to throw but will not hurt</b>	<input type="checkbox"/> <b>Model the use of alternative strategies to express feelings of anger or frustration</b> For example, screaming outside, pushing against a pair of handprints on a wall, banging a drum.
<input type="checkbox"/> <b>Monitor use of alternative strategies so that you have a good understanding of the frequency and location of triggers</b> 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.	<input type="checkbox"/> <b>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</b>
<input type="checkbox"/> <b>Put preventative strategies in place</b> For example, avoiding high arousal situations such as busy noisy environments or groups of children in small spaces	<input type="checkbox"/> <b>Arrange a safe and calm/ reflective area, chosen in agreement with the child</b>

CONT:

PHYSICAL OUTBURSTS CAUSING HARM TO OTHERS AND/OR TO SELF AND/OR DAMAGE TO PROPERTY.

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

## COMMUNICATION AND INTERACTION

In addition to the quality first teaching expectations, additional provision and interventions may be required. Examples of presenting needs and suggested strategies are given below as a starting point for your planning and practice.

<b>IDENTIFIED BARRIER AND/OR NEED:</b> Limited attention span compared to developmental age.	
<b>STRATEGIES AND APPROACHES</b>	
<input type="checkbox"/> <b>Use child's name when giving instructions</b>	<input type="checkbox"/> <b>Ask the child to repeat back what activity they are going to do</b>
<input type="checkbox"/> <b>Use the child's interest as a motivator and to extend engagement</b>	<input type="checkbox"/> <b>Consider use of timers, so the child knows they must only focus for a comfortable amount of time</b>
<input type="checkbox"/> <b>Keep activities short and finish before the child loses interest in order to build on success for the child</b>	<input type="checkbox"/> <b>Use chunking</b> Break down tasks into smaller, manageable steps
<input type="checkbox"/> <b>Use of visual timetable</b> Including some individualised visuals to meet the child's needs.	<input type="checkbox"/> <b>Consider the use of attention building strategies</b> Speak to your locality lead about training for this including Attention Autism – Bucket time etc
<input type="checkbox"/> <b>Consider backward chaining</b> 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

In addition to the quality first teaching expectations, additional provision and interventions may be required. Examples of presenting needs and suggested strategies are given below as a starting point for your planning and practice.

### 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

<input type="checkbox"/> <b>Assess through making observations in child-initiated learning and adult directed tasks to identify area of need</b>	<input type="checkbox"/> <b>Model use of open-ended simple pondering statements such as 'I wonder...' or 'What if...' rather than direct questions</b>
<input type="checkbox"/> <b>Give clear and simple instructions, breaking down longer instructions and giving one at a time</b>	<input type="checkbox"/> <b>Use visual timetables, visual cues and prompts</b> For, example, objects, pictures, photos, symbols, choice boards, sequences to support instructions
<input type="checkbox"/> <b>Develop personalised stories and books using the child's interests</b>	<input type="checkbox"/> <b>Give time to process information before a response is needed</b>
<input type="checkbox"/> <b>Use pre-teaching to support the child</b> 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.	<input type="checkbox"/> <b>Make explicit links to prior learning by reminding the child of past events,</b> This can be done by reminding the child of past events, activities or experiences. Displaying photographs or sharing individual learning journals can support this
<input type="checkbox"/> <b>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</b>	<input type="checkbox"/> <b>Use meaningful continuous strategies to boost self-esteem and confidence.</b> 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

In addition to the quality first teaching expectations, additional provision and interventions may be required. Examples of presenting needs and suggested strategies are given below as a starting point for your planning and practice.

### 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

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

## COGNITION AND LEARNING

In addition to the quality first teaching expectations, additional provision and interventions may be required. Examples of presenting needs and suggested strategies are given below as a starting point for your planning and practice.

### 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

<input type="checkbox"/> <b>Provide memory aids</b> 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	<input type="checkbox"/> <b>Provide practical resources to support learning appropriate to the stage of development</b> For example, you may want to use name or picture cards and rhymes or songs
<input type="checkbox"/> <b>Ensure your setting has a consistent routine, supporting the child with changes when necessary</b>	<input type="checkbox"/> <b>Support children visually and kinesthetically when changes in the environment occur</b> For example, allow extra time at tidy up time, allocate specific tasks at tidy up time, repeating activities
<input type="checkbox"/> <b>Ensure resources are clearly labelled with pictures and words at the child's level promoting independence</b>	<input type="checkbox"/> <b>Provide photographs of the setting</b> 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

In addition to the quality first teaching expectations, additional provision and interventions may be required. Examples of presenting needs and suggested strategies are given below as a starting point for your planning and practice.

### 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

<input type="checkbox"/> <b>Ensure indoor and outdoor opportunities are provided and across all areas of learning</b>	<input type="checkbox"/> <b>Encourage and support the child's responses to picture books and stories you read with them</b>
<input type="checkbox"/> <b>Use different voices to tell stories and encourage the child to join in wherever possible</b> For example, leaving gaps in repeated catchphrases	<input type="checkbox"/> <b>Tell stories in a variety of ways</b> 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
<input type="checkbox"/> <b>Be creative where stories are shared using all areas of the indoor and outdoor environment</b>	<input type="checkbox"/> <b>Include opportunities for mark making and writing across all areas of provision and play</b>
<input type="checkbox"/> <b>Consider peers within small group experiences so the child has access to good role models for language and communication</b>	<input type="checkbox"/> <b>Provide opportunities and experiences for the child to build on their understanding through repetition with skillful adults scaffolding learning</b>

## COGNITION AND LEARNING

In addition to the quality first teaching expectations, additional provision and interventions may be required. Examples of presenting needs and suggested strategies are given below as a starting point for your planning and practice.

### 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

<input type="checkbox"/> Ensure indoor and outdoor opportunities are provided and across all areas of learning	<input type="checkbox"/> 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.
<input type="checkbox"/> Use pictures and objects to illustrate counting songs, rhymes and number stories, cooking activities	<input type="checkbox"/> Provide collections of interesting things for the child to sort, order, count, label in their play
<input type="checkbox"/> Ensure mathematical language is embedded throughout the environment and used in all play and routine opportunities	<input type="checkbox"/> 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

In addition to the quality first teaching expectations, additional provision and interventions may be required. Examples of presenting needs and suggested strategies are given below as a starting point for your planning and practice.

### 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

<input type="checkbox"/> Ensure the child has full access to the breadth of learning by adjusting and modifying to differentiate the curriculum, right across the board	<input type="checkbox"/> Support the characteristics of effective teaching and learning and plan activities designed to develop skills which will support them to become independent learners
<input type="checkbox"/> Support the child to develop their self-esteem through celebration and reinforcement of strengths and successes	<input type="checkbox"/> 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
<input type="checkbox"/> Extend the child's interests and introduce them to new experiences by providing a variety of activities using creative and playful approaches	<input type="checkbox"/> Provide real life experiences as part of your everyday routines for the child to explore and discover
<input type="checkbox"/> Plan and resource a challenging environment where the child's play can be supported and extended	<input type="checkbox"/> Encourage and support the child to persevere through difficulties, to ask questions, problem solve and take risks
<input type="checkbox"/> Identify and support next steps in learning utilizing information from home to offer the child consistent challenge	

# SOCIAL, EMOTIONAL AND MENTAL HEALTH DIFFICULTIES

In addition to the quality first teaching expectations, additional provision and interventions may be required. Examples of presenting needs and suggested strategies are given below as a starting point for your planning and practice.

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

# SOCIAL, EMOTIONAL AND MENTAL HEALTH DIFFICULTIES

In addition to the quality first teaching expectations, additional provision and interventions may be required. Examples of presenting needs and suggested strategies are given below as a starting point for your planning and practice.

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

CONT: Difficulties participating and presenting as withdrawn or isolated

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

# SOCIAL, EMOTIONAL AND MENTAL HEALTH DIFFICULTIES

In addition to the quality first teaching expectations, additional provision and interventions may be required. Examples of presenting needs and suggested strategies are given below as a starting point for your planning and practice.

## IDENTIFIED BARRIER AND/OR NEED:

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

## STRATEGIES AND APPROACHES

<input type="checkbox"/> <b>Understand the function of the behaviour before implementing strategies</b> Try to identify why the child is displaying behaviours before planning how to support them. Use the STAR chart to identify potential triggers	<input type="checkbox"/> <b>Consider if the child needs support to regulate their feelings</b> 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
<input type="checkbox"/> <b>Talk with parent carers, are they experiencing similar behaviours at home</b> Develop a shared understanding and plan appropriate strategies to be used at home and in the setting	<input type="checkbox"/> <b>Review routines, practice and provision in the setting</b> 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
<input type="checkbox"/> <b>Share strategies with all adults and ensure they are used consistently</b>	<input type="checkbox"/> <b>Explore the use of peer observation or videoing good staff interactions and use of strategies to develop other practitioners' skills and confidence</b>
<input type="checkbox"/> <b>Create a quiet, calm space with the child where they can go when they feel overwhelmed</b> For example, a small tent, a box of familiar toys, a favourite book/ sensory toy	<input type="checkbox"/> <b>Encourage the use of emotional language</b> When the child is calm name their feelings and emotions and those of others in a natural way

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

<input type="checkbox"/> <b>Plan a proactive rather than reactive approach to support the child and improve their experiences</b>	<input type="checkbox"/> <b>Observe the child's play and plan exciting activities to engage them in which follows their interests</b>
<input type="checkbox"/> <b>Notice the positives and comment on what it was that the child did well</b>	<input type="checkbox"/> <b>Explore what motivates the child and use this to support them develop their prosocial behaviour</b> This could be giving them a role that they see as important, providing praise, an activity of interest, a challenge or something new and exciting
<input type="checkbox"/> <b>Use 'wondering out loud' to support emotional understanding</b> For example, "I can see you are ... tapping/stamping etc..... I wonder if you are ... worried/cross/stuck... shall we... go for a walk/ take a break/ get a drink/ read a book etc.?"	<input type="checkbox"/> <b>Give a consistent message but flexible approach</b> For example, "I want you to be in the group and join in" is the consistent message; the approach to support this happening may vary or be flexible depending on the individual needs
<input type="checkbox"/> <b>Offer clear guidance</b> Explicit messages letting the child know what is expected of them	<input type="checkbox"/> <b>Plan for transitions between activities, rooms and outside play</b> This should include 'what works well' in terms of differentiation and support professionals meeting to unpick behaviour
<input type="checkbox"/> <b>Monitor so that you have a good understanding of the frequency and location of triggers</b> For example, frequency charts; STAR observation sheet; informal observations can be carried out to inform understanding	<input type="checkbox"/> <b>Devise a risk management plan agreed with parent carers</b> This should include proactive strategies, early interventions to reduce anxiety/ harm and reactive strategies to ensure a consistent approach
<input type="checkbox"/> <b>Employ a clear plan of action, agreed with parent carers to encourage and support pro-social behaviour</b> Develop a one-page profile / all about me and individual support plan to support staff to understand the child and provide consistent, appropriate support	<input type="checkbox"/> <b>Use choices to allow the child some control with the same result</b> For example, "Would you like to talk to me now or in one minute?"
<input type="checkbox"/> <b>Teach the child different ways to get their needs met</b> Such as developing social skills or strategies to self-regulate emotional stress	<input type="checkbox"/> <b>Consider the impact of routines and how you prepare them for transitions</b>

**Through modelling, support the child to find alternative ways to express their feelings.**

For example, using their words, showing an adult

**Model positive interactions and language to support collaborative play, turn taking and negotiation with peers**

For example, using timers, being able to use their voice to say 'stop' or 'no' rather than physical communication

# SOCIAL, EMOTIONAL AND MENTAL HEALTH DIFFICULTIES

In addition to the quality first teaching expectations, additional provision and interventions may be required. Examples of presenting needs and suggested strategies are given below as a starting point for your planning and practice.

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

# SOCIAL, EMOTIONAL AND MENTAL HEALTH DIFFICULTIES

In addition to the quality first teaching expectations, additional provision and interventions may be required. Examples of presenting needs and suggested strategies are given below as a starting point for your planning and practice.

## IDENTIFIED BARRIER AND/OR NEED:

Low level disruption  
 For example, interruptions, fiddling etc.

## STRATEGIES AND APPROACHES

<input type="checkbox"/> Differentiate your use of voice, gesture and body language	<input type="checkbox"/> Focus on reducing anxiety and thereby behaviours
<input type="checkbox"/> Use positive reinforcement of expectations through verbal scripts and visual prompts	<input type="checkbox"/> 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

In addition to the quality first teaching expectations, additional provision and interventions may be required. Examples of presenting needs and suggested strategies are given below as a starting point for your planning and practice.

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

# SOCIAL, EMOTIONAL AND MENTAL HEALTH DIFFICULTIES

In addition to the quality first teaching expectations, additional provision and interventions may be required. Examples of presenting needs and suggested strategies are given below as a starting point for your planning and practice.

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

## SOCIAL, EMOTIONAL AND MENTAL HEALTH DIFFICULTIES

In addition to the quality first teaching expectations, additional provision and interventions may be required. Examples of presenting needs and suggested strategies are given below as a starting point for your planning and practice.

<b>IDENTIFIED BARRIER AND/OR NEED:</b> Presenting as significantly unhappy or stressed	
<b>STRATEGIES AND APPROACHES</b>	
<input type="checkbox"/> Identify a key figure within the setting who can provide emotional support and build upon the child's interests	<input type="checkbox"/> Establish a calm area which is chosen and agreed with the child
<input type="checkbox"/> Ensure feedback is used to collaborate and plan with parent carers, to ensure consistency between the home and setting	<input type="checkbox"/> Consider the use of comic strip conversations to identify triggers and identify alternative actions
<input type="checkbox"/> Provide opportunities to reflect emotional states and use strategies to support self - regulation	

## SENSORY AND/OR PHYSICAL NEEDS

In addition to the quality first teaching expectations, additional provision and interventions may be required. Examples of presenting needs and suggested strategies are given below as a starting point for your planning and practice.

If there are concerns regarding a child's hearing, vision or mobility, the family should contact their GP.

For children with a diagnosed sensory or physical need, advice should be sought from the sensory support team or health professionals via the SENCO, to enable a detailed assessment and appropriate advice to be given

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

## SENSORY AND/OR PHYSICAL NEEDS

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### 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

<input type="checkbox"/> <b>Develop the child's core stability</b> For example, wobble cushion, exercises and games	<input type="checkbox"/> <b>Ensure correct seating position with appropriately sized tables and chairs.</b> Practitioners to discuss any specialist equipment needs with the most appropriate professional
<input type="checkbox"/> <b>Provide physical activities to support development of gross motor skills</b> 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.	<input type="checkbox"/> <b>Provide a variety of opportunities for mark making</b> 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.
<input type="checkbox"/> <b>Develop fine motor skills</b> 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	<input type="checkbox"/> <b>Provide sequencing and organizational skills</b> For example, now/next boards, visual timetables and clear consistent routines

## SENSORY AND/OR PHYSICAL NEEDS

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### 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

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

## CONT: Hearing impairment

<input type="checkbox"/> <b>Be aware that during physical games and activities, particularly in large open spaces, it will be more difficult to follow instructions. Planned activities may need to be adapted</b>	<input type="checkbox"/> <b>Consider that words being spoken on an audio/visual recording may need a person to repeat what is being said</b>
<input type="checkbox"/> <b>Consider the environment</b> For example, carpeting, soft furnishings, rubber feet on the table and chair legs will reduce noise	<input type="checkbox"/> <b>Seat the child away from any source of noise</b> For example, window, corridor, fan heater, projector, the center of the room etc.
<input type="checkbox"/> <b>Provide prompts for good listening behaviour: sitting still, looking and listening</b>	<input type="checkbox"/> <b>Encourage children to ask when not sure what to do</b>
<input type="checkbox"/> <b>Establish quiet spaces within the environment, particularly for specific listening work</b>	<input type="checkbox"/> <b>Ensure all staff and visitors who work with a child with hearing impairment are aware how best to support.</b> For example, they should be familiar with the child's one page profile or equivalent
<input type="checkbox"/> <b>Arrange for adults working directly with children with hearing impairment to have appropriate training</b> For example, British sign language, Makaton, say it sign it	<input type="checkbox"/> <b>Employ techniques to monitor and support the child with noise levels</b>
<input type="checkbox"/> <b>Use visual reinforcement (pictures and other visual prompts), to support learning as well as pointing and gestures</b>	<input type="checkbox"/> <b>Use visual timetables and visual cues, such as sand timers to support sharing</b>

## SENSORY AND/OR PHYSICAL NEEDS

In addition to the quality first teaching expectations, additional provision and interventions may be required. Examples of presenting needs and suggested strategies are given below as a starting point for your planning and practice.

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### 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

<input type="checkbox"/> <b>Work together with other professionals to share strategies and advice to support the child to successfully access to learning environment</b> For example, use of ICT, alternative visual resources	<input type="checkbox"/> <b>Gain a good understanding of the child's level of vision, seek training through the sensory support team</b>
<input type="checkbox"/> <b>Provide additional resources for inclusive play</b> For example, a bell in a ball so all can play together	<input type="checkbox"/> <b>Ensure time for a child to map the room and allow this to occur daily or when in.</b> Allow re-mapping to occur when furniture and resources change place to reduce confusion and potential injury
<input type="checkbox"/> <b>Consider lighting and position at group time/ lunch time and how it supports the child's vision</b>	<input type="checkbox"/> <b>Provide uncluttered space and reduce display backgrounds to help the child focus on the appropriate object</b>
<input type="checkbox"/> <b>Use talking books and consider talking equipment</b>	<input type="checkbox"/> <b>Ensure labelling and pictures for the content of resources are in a style that is clear to the child</b>
<input type="checkbox"/> <b>Take account of mobility needs to ensure the child has access to the whole environment</b>	<input type="checkbox"/> <b>Provide access to visual aids at an appropriate height for children</b>

## SENSORY AND/OR PHYSICAL NEEDS

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### 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

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

## SENSORY AND/OR PHYSICAL NEEDS

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### 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

<input type="checkbox"/> <b>Set up a 'no scent' zone</b> For example, free from air fresheners, flowers, perfume	<input type="checkbox"/> <b>Staff should consider the perfume/ aftershave and other products that have a smell that they wear</b>
<input type="checkbox"/> <b>Be aware of smells from the outdoor environment</b> For example, refuse collection and mitigate these smells where possible	<input type="checkbox"/> <b>Consider if cleaning materials have a strong smell</b>
<input type="checkbox"/> <b>Provide scented playdough, pens, toys to support sensory seeking</b>	<input type="checkbox"/> <b>Allow the child opportunities to bake and cook to create different smells</b>

## SENSORY AND/OR PHYSICAL NEEDS

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<b>IDENTIFIED BARRIER AND/OR NEED:</b> Touch (tactile) differences	
<b>STRATEGIES AND APPROACHES</b>	
<input type="checkbox"/> <b>Consider the proximity of others</b> For example, would a carpet tile help?	<input type="checkbox"/> <b>Allow the child to be at the front or back of the line, if helpful</b>
<input type="checkbox"/> <b>Approach the child within their visual field</b>	<input type="checkbox"/> <b>Consider the challenges that a child may face with different floor surfaces; they may find it challenging to sit on the carpet</b>
<input type="checkbox"/> <b>Ensure that there are opportunities for the child to engage in sensory play</b> For example, sand, water, oats, gloop	

## SENSORY AND/OR PHYSICAL NEEDS

In addition to the quality first teaching expectations, additional provision and interventions may be required. Examples of presenting needs and suggested strategies are given below as a starting point for your planning and practice.

If there are concerns regarding a child's hearing, vision or mobility, the family should contact their GP.

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<b>IDENTIFIED BARRIER AND/OR NEED:</b> <b>Proprioceptive differences</b> A child may seek extra input for their proprioceptive sense	
<b>STRATEGIES AND APPROACHES</b>	
<input type="checkbox"/> <b>Offer opportunities for the child to run, jump, join in weight bearing activities</b> For example, crawling, pushing, pulling games	<input type="checkbox"/> <b>Recognise that a child may seek further sensory input via learning</b> For example, table or wall pushes
<input type="checkbox"/> <b>Be aware that a child may rock on their chair, or place the chair legs on their feet to seek 'grounding'</b> 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	<input type="checkbox"/> <b>Consider the challenges that a child may face with different floor surfaces; they may find it challenging to sit on the carpet</b>
<input type="checkbox"/> <b>Ensure that there are opportunities for the child to engage in sensory play</b> For example, sand, water, oats, gloop	<input type="checkbox"/> <b>Ask the child to carry a box or bag (appropriately heavy) of toys or work for next activity</b>
<input type="checkbox"/> <b>Provide pushing/ pulling boxes with heavier items in</b>	<input type="checkbox"/> <b>Offer riding vehicles</b> For example, tricycles, bicycles and scooters
<input type="checkbox"/> <b>Offer jumping on a trampette</b>	<input type="checkbox"/> <b>Suggest using a space hopper</b>

**Use timers to support the start and finish of the activity**

**Provide sensory circuits to support the children**

## SENSORY AND/OR PHYSICAL NEEDS

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### IDENTIFIED BARRIER AND/OR NEED:

Vestibular differences

### STRATEGIES AND APPROACHES

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

## SENSORY AND/OR PHYSICAL NEEDS

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### IDENTIFIED BARRIER AND/OR NEED:

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

### STRATEGIES AND APPROACHES

<input type="checkbox"/> <b>Ensure that you have the equipment that you need</b> 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	<input type="checkbox"/> <b>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</b>
<input type="checkbox"/> <b>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</b> Consider having duplicates at different locations in the setting	<input type="checkbox"/> <b>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</b>
<input type="checkbox"/> <b>Ensure parent carers and staff have access to the medication policy to be reviewed and updated regularly</b> This would include gaining parent carers permission in writing to administer medication and ensure it is prescribed	<input type="checkbox"/> <b>Ensure that transition arrangements have been put into place prior to the child joining the setting</b> This would include ensuring that the necessary adaptations are in place

## CONT: Severe and complex medical needs

<input type="checkbox"/> <b>Consider how you establish and maintain good communication links with parent carers and how you share information in a timely manner</b>	<input type="checkbox"/> <b>Identify what additional support may be required to diet, toileting, use of equipment, cooking, mealtimes and taking part in outings</b>
<input type="checkbox"/> <b>Provide achievable opportunities for the child to experience success and be as independent as possible</b> Provide scaffolding to enable the child to take part in paired or small group work.	<input type="checkbox"/> <b>Consider fatigue levels and how these impact on the child's ability to engage</b> Make plans for rest and sleep as required
<input type="checkbox"/> <b>Ensure understanding of how medical conditions can impact on the child's ability to learn</b>	<input type="checkbox"/> <b>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</b>
<input type="checkbox"/> <b>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</b>	<input type="checkbox"/> <b>Ensure health care plans and /or other documentation are regularly updated, are shared with and are accessible to appropriate staff</b>
<input type="checkbox"/> <b>Have a good understanding of any documents related to managing medical needs in the setting</b>	