Sandford Primary School

SEND School Provision Map

Date: September 2022

Review Date: September 2023

SEND Whole School Provision Map

Below, are some examples of different types of Provision for SEND using the Areas of Need identified in the SEND CoP: 0-25 years (2015). The use of Edukey Provision Map enables staff to continually update and review provisions for pupils

Universal: Quality First Teach (Wave 1) Quality first teaching is provided for all our pupils on a daily basis by all staff. Pupils are working within the normal range/expectation for that year group.	Intervention Support (Wave 2) This provision is targeted and is additional to that which is provided for all pupils. This normally takes place in small groups in order to accelerate the progress of learners. These interventions are not primarily for pupils with SEND and are designed to close the gap in a pupil's learning so that they can return to Universal Provision. Pupils are beginning to work below the normal range for that year group.	SEND Support (Wave 3) This is targeted and personalised teaching for pupils with SEND who are identified as requiring additional support. Pupils are working well below the normal range for that year group. Pupils are struggling to access the Curriculum and, despite interventions, are also struggling to make any sustainable or measurable progress. Pupils require a 'next steps' targeted approach to their learning, known as SMART target setting.
Communication and Interaction This includes speech delay and speech difficulties/Social Interaction		
Scaffolded curriculum planning, delivery, success criteria and outcome. Visual timetables Talk partners Position in class Talk for writing strategies Concrete maths activities Structured routines, clear instructions that are matched to the level of need. Staff speak clearly and appropriately to pupils modelling speech that is age –appropriate. Consistent levels of support and guidance given by all staff across the school. Pupils are given thinking time to compose what they want to say and are scaffolded supportively. Modelled, effective language is reflected for the pupil to rehearse and apply. Individualised reward system. Tag pupil to follow instructions. Show and tell/speaker of the day/week. Role play/drama. Learning powers.	Talk Boost group Small group support for pre- topic enrichment activities e.g. language games, sharing a book to find out about a topic that will be taught in class. Task bar/ Now and Next trays. Pupils are warned in advanced of changes to routines when known or expected by all staff. Busy tray/ time out/de-escalation area in the classroom/fiddle toys. Shortened/ modified tasks and targets for small groups and individuals. Social Stories are used to support learning and interaction. Circle of friends. Sensory support play box.	Individual Speech and Language programs implemented following recommendations made by the Speech Therapist. Use of diagnostic screening toolkits to determine programs of support and interventions. Communication and Interaction program personalised support following the recommendations of the Communication and Autism team. E.g. Managing feelings and Behaviour, Zones of regulation, Lego therapy, Pragmatics in pictures, Friendship Terrace. Use of balance cushion, peanut ball, wobble seating recommended by OT/Physio. Managed transitions/modified timetable arrangements. Individual Behaviour management plans. Diagnostic toolkits are used to profile the need and identify individual targets e.g. attachment disorders, spoiling psychology, ADHD, ODD versus Autistic Spectrum Disorder.

Mapping of early concerns takes place using Provision Map.		Individualised self-help/care program e.g. toileting Pupils is raised at Trust LISS meetings. Educational Psychologist involvement/review/referral. Paediatric support. TAC/TAF/CAMHS.

Cognition and Learning
This includes pupils' ability to make progress in their learning.

An inclusive approach is taken to scaffold Curriculum planning, delivery, success criteria and outcome by all staff across the school so that all pupils can access learning in their classroom. Writing frames. Word and phonics mats. Spelling prompts. Number lines and number prompts are used to support learning Concrete, pictorial, abstract support in Maths for all learners. Over teaching/ kinaesthetic methods used to support pupils with dyscalculia and dyslexia: brain breaks, busy tray, overlays, coloured backgrounds and paper in the classroom. Individualised spelling program Individualised tables program Mapping of early concerns takes place using Provision Map.	Unlocking letters and Sounds 1:1 sessions (up to 4 sessions a week for 10 weeks). Focused writing support group work with an HLTA/TA and modified task/targets (up to 4 sessions a week for 10 weeks) Number Sense small group support (up to 4 sessions a week for 10 weeks). Handwriting catch-up group organised by the class teacher and supervised by TA/HLTA support. Daily reading support provided by the class teacher, TA or volunteer.	Individual Literacy Intervention (3x 30 mins each week) Individual Maths Intervention (3x 30 mins each week) Co-ordination group (daily 10 minutes each week) Use of balance cushion, peanut ball, wobble seating recommended by OT/Physio. These programs are designed to support pupils who have been screened for Dyslexia and Dyscalculia traits using the GL Assessment Materials. Access to technology to bring down barriers for a Specific Learning Difficulty. Implement recommendations from external specialist support services including the Educational Psychologist and Integrated Therapies team including further screening and testing for a Specific Learning Difficulty.

Social, Emotional and Mental Health
This includes pupils' abilities to cope emotionally, socialise and work independently.

Pupils all receive PSHE lessons. Class/pupil reward systems are firmly embedded and used consistently throughout the school by all staff. Celebration assembly Learning Power Certificates Golden Time A restorative approach is taken to support pupils. Busy tray/ de-escalation areas and activities are available in each classroom Class Dojo and Behaviour Book scheme is shared and understood by all pupils and is implemented consistently by all staff in the school.	Pupils identified for support are raised with the Learning Mentor, ELSA, Pupil Premium mentor and SENDCo. Modified task and reward systems are agreed. Individual Positive Behavioural support implemented by the teacher and Head Teacher is used to support the pupil and contact is made with the family to raise concerns. Management Plan has been shared and agreed with the pupil, school and parents. It is reviewed regularly by all parties.	Pupils requiring external agency support are referred using the Single Point of Entry process and Safeguarding recommendations. This may include Educational Psychologist and Paediatric Services. Withdrawal/de-escalation areas are available around the school to support/protect pupils and staff. Staff trained to support using 'Team teach' are deployed. Accurate records of incidences are kept and used to identify triggers. TAC/TAS/CAMHS/TAF are used to support pupils experiencing SEMH difficulties.

Pupils have the opportunity to take on leadership roles in the classroom. All pupils can become members of the school leadership teams and school council. Pupils are tagged so that they are clear about instructions Tasks and instructions are broken down to make them achievable Staff understand how to identify and monitor pupils whose progress may be inhibited by SEMH difficulties. Mapping of early concerns takes place using Provision Map.		ELSA support is given and reviewed, followed by a touch base adult mentor support approach. Diagnostic toolkits are used to profile the need and identify individual targets e.g. attachment disorders, spoiling psychology, ADHD, ODD versus Autistic Spectrum Disorder.

Physical/Sensory Needs
This includes physical impairment and disability that impacts on learning.

Pupils are monitored for low level impairments that may inhibit their learning e.g. short/long sight, difficulty hearing that may appear as not paying attention. Mapping of early concerns takes place using Provision Map. Parents are advised to have their child's sight/hearing checked or to make an appointment with the G.P. Staff check to ensure that pupils are positioned appropriately so that they can see and hear properly. Resources take in to account the need for pupils to be able to see and hear. Noise levels and visual distractions are taken into consideration when planning lessons. The classroom environment and lay out is adapted to ensure that pupils can move and work independently. Pencil grips, writing slopes, modified recording methods are used e.g. the teacher or TA acts as a scribe, uses technology to record evidence of learning	TAs and HLTAS are deployed to support pupils with Sensory/Physical needs for specific lessons or activities e.g. supported transitions around the school, moving of equipment, 1:1 support in P.E., using the Trim Trail. Pupils with Physical/Sensory needs can access lessons and group activities in small group withdrawal areas e.g. The Calm Space, to reduce factors that prevent them from learning in a larger group or classroom setting.	Adaptations, appropriately trained staff and specialist equipment are available in the classroom, across the school site and for the purposes off-site visits so that a pupil's physical need does not prevent them from taking part in learning and school life. Modified timetabling arrangements are in place for personal care needs. Staff are trained to meet the needs of the pupil e.g. Manual Handling training, using specialist resources to support learning including technology and IT such as Pro-Lo-Quo-To-Go, sign language for the deaf. Recommendations for individualised programs from the Children with Disabilities team, OT, Physiotherapists, Nutricia feeding, Sensory team. Paediatricians are implemented and monitored for impact. Pupils with high needs have PEPs Staff are able to use signing and other communication methods including technology to support learning. Individualised self-help/care program e.g. toileting