

Introduction to SEN Guide Materials

The fundamental importance of excellent teaching in the process of delivering an effective SEN service is explicit within the Code of Practice where it states; “Special educational provision is underpinned by high quality teaching and is compromised by anything less” (DfE/DoH, 2014 at 25). In fact, the Code of Practice later on is even more categorical, stating that **teachers are responsible and accountable for the progress and development of pupils within their class including where pupils access support from teaching assistants or specialist staff** (op. cit. at 99).

Also, as mentioned in our school training session, the SEN and Disability Review (2010) stated that:

“As many as half of children on School Action[receiving SEN Support] would not be identified as having SEN if schools focused on improving teaching and learning for all”.

It is clear therefore, that High Quality Teaching is fundamental to SEN provision in Broughton Hall. Below is a guide to the different condition/needs our children present with. There are also tips as to how to help children with special educational needs access the learning material. Please remember that it is Broughton Hall policy **that all teachers use the individual Learning Support Plans in each lesson taught.** Further, it is expected that each teacher undertakes to communicate and check the understanding of each student with SEN during each lesson. Constant communication and encouragement throughout the lesson makes tailored, individualised learning possible.

If you come across any difficulties, or are in need of support, please let us know.

ADHD

Attention deficit hyperactivity disorder (ADHD) is a medical condition of brain dysfunction in which individuals have difficulties in controlling impulses, inhibiting appropriate behaviour and sustaining attention. As a result of these difficulties, a child or young person can experience a range of educational, behavioural, social and related issues.

Specific learning difficulties, such as dyslexia, dyspraxia and dyscalculia, occur in approximately 40 per cent of children with ADHD, while disruptive behavioural disorders, such as oppositional defiant disorder and conduct disorder, occur in about 50 per cent of cases. Finally, anxiety disorders occur in about 30 per cent of all individuals with ADHD.

Education and social interaction

Many factors need to be taken into account when helping children with ADHD cope with the educational, behavioural and social aspects of school. Though academic and behavioural issues within the school programme usually appear to be high on the agenda, a main area of concern for children with ADHD is interaction with other children. Initially, pupils with ADHD can appear quite amusing within a group of learners, but the “class clown” effect soon wears thin, to be replaced by impatience and intolerance of the constant interruptions that can take place. This can lead to the isolation of the individual from his/her peer group.

In addition, many problems for children with ADHD stem from their inability to handle the wide variety of environmental stimuli they can be exposed to. They tend to operate most effectively when they have a consistent structure to rely on, which provides them with the safety and security to stay on task and out of trouble. It should be noted that often children can be prescribed medication to help them stay on task and concentrate. This can have a hugely positive impact on the individual child and the lesson environment but it is common to find that parents are reluctant to take medical advice - perhaps feeling concerned about the possible stigma. At time of writing, that is very much the case with a

number of children at BH. Nonetheless, a number of things can help to minimise disruption to both the child's learning and the learning of others.

Classroom tips

- Know the student and her needs. Use the LSP. Check progress and communicate throughout the lesson.
 - seat the child near the teacher but include him/her as part of the regular class
 - Allow timed breaks to occur in lesson time

 - place the child up front with her back to the rest of the class, keeping others out of view
 - allow her to use objects to manipulate when sitting, as aids to concentration
 - surround the child with potential role models
 - encourage peer tutoring and cooperative learning
 - avoid distracting stimuli. Try not to place the child near heaters, doors or windows or other potential distractions, such as gas taps in science lab.
 - try to avoid changes in schedules, physical relocation or unnecessary transitions. These children do not respond well to change or unplanned activities, so monitor them closely on extra-curricular activities such as field trips
 - maintain eye contact with her during verbal instruction
 - make directions clear and concise and be consistent with daily instructions
 - make sure she understands instructions and what is expected before beginning a task
 - give one task at a time, monitoring frequently and modifying assignments as necessary
 - break assignments down into manageable chunks
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APD (Auditory Processing Disorder)

This condition is rarely diagnosed. In BH, at time of writing, we have one child who is diagnosed with APD. However, the likelihood is that there are a lot more students suffering from this condition. Hearing starts with a complex set of actions incorporating the outer, middle and inner ear. It enables us to identify sounds and their meaning; for example, it tells us when we hear barking that it is a dog we hear. This is listening, the medical term being auditory processing. When hearing is tested and proved to be in normal limits but understanding of the sounds is not present, this is called an auditory processing disorder (APD).

There is no firm evidence of how many children have APD but it is possible it could be between five and nine per cent. Correctly diagnosing APD is problematic as there is no universal consensus as to what constitutes APD. There is a need to clarify the roles that cognition, attention, memory, processing speech and the processing of speech sounds play in the diagnosis. There is little doubt that further research is needed to obtain widely established criteria in diagnosing APD, otherwise it can be confused with a range of other special needs.

One must ask whether APD is wrongly diagnosed on many occasions because it is a more acceptable term than “specific or generalised language impairment”. However, there is no argument that it does co-exist with other education needs. Pupils with attention deficit hyperactivity disorder (ADHD), autistic spectrum disorder (ASD) or sensory processing disorder (SPD) can be poor listeners and have difficulty in listening and comprehending language. However, this is usually due to their main presenting need (for example their ASD) and although APD can co-exist, careful diagnosis needs to be made to ensure correct therapies are introduced.

Tips for the classroom

- Know the student and her needs. Use the LSP. Check progress and communicate throughout the lesson.
- remember that extra processing time is needed
- maintain structure and routine so directions are predictable

- frequently summarise and emphasise key information, vocabulary and topics
 - chunk information into manageable units
 - present directions in short segments, using visual cues if possible
 - provide written homework instruction
 - make sure the pupil is seated in an advantageous position in the class, for example, away from a noisy corridor
 - write key words on the whiteboard
 - If possible, allow the student to become familiar with classroom material before it is taught
 - provide a quiet area for independent learning.
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Autism:

The national Autistic Society defines autism as:

“A lifelong developmental disability that affects how a person communicates with, and relates to, other people. It also affects how they make sense of the world around them”.

The condition was described as far back as 1943 by Leo Kanner. He believed that autism resulted from problems occurring in the developing brain. Initially many parents do not notice that their child is not developing in the same way as other children. But at around the age of two to three, when there is generally a great improvement in social skills and communication, a child with autism’s developmental differences becomes more obvious.

All pupils are different and the way autism affects individuals is very variable, so the term autism spectrum disorder or ASD is often used. Some people do not consider autism to be a disorder and think of it in terms of having a different style of thinking. They prefer to call it an ‘autism spectrum condition’ or ASC.

The main features of autism are “difficulty with social communication”, “difficulty with social interaction” and “difficulty with social imagination” (struggle to understand that other people have different views or thoughts from themselves).

Some people with autism say they think in pictures and many have good visual memories. Using a visual approach in the classroom can enable pupils to get the most from a lesson. Further, children with autism may show a desire for familiarity for instance, a young child will probably go towards and explore a new toy, but a child with autism will probably avoid the new one in favour of a familiar one. New experiences or changes to routine can be threatening for pupils with autism as this creates uncertainty and leads to great anxiety. This is particularly the case at BH, where a child may have a number of transition points (different tasks / movements within the lesson and this is obviously multiplied in terms of a five lesson day) in the school day.

Children with ASD often have sensory difficulties which can lead to sensory overload. Students may ‘shut down’ and try to block out the stimulus, try to escape the situation or become physically or verbally abusive. As a classroom teacher, it is important to be sensitive to this and avoid the triggers as much as possible. This can be extremely difficult for teachers; that is why at BH we attempt to train students to recognise the build-up of stress and utilise their ‘exit cards’ before the situation erupts and becomes unmanageable for the child and the classroom teacher.

Generalised tips for the classroom

- Know the student and her needs. Use the LSP. Check progress and communicate throughout the lesson.
- Establish clear class routines to minimise stress
- Adequate verbal warning and explanations should be given for transition periods as these can be stressful times.

- At times, students may have to leave lessons early
 - Recognise that unstructured times cause the most stress and ensure that the student has access to a 'safe' room or knows they have someone they can talk to directly if they feel extremely stressed.
 - Problem solving can be particularly difficult. It may be necessary to introduce writing frames or similar visual framework to reduce the demands of language.
 - Chunk lessons to minimise concentration difficulties
 - Write clear lesson instructions on the board as a reference point.
 - Group work can be stressful but this can be minimised by giving the child with ASD a specific task or role within the group
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Dyscalculia

Dyscalculia is a lifelong condition that makes it hard for kids to perform maths-related tasks. It's not as well known or understood as dyslexia. But some experts believe it's just as common. Children with this learning difficulty have trouble with many aspects of maths. They often don't understand quantities or concepts like biggest vs. smallest. They may not understand that the numeral 5 is the same as the word five (these skills are sometimes called number sense).

Children with dyscalculia also have trouble with the mechanics of doing maths, such as being able to recall mathematical facts. They may understand the logic behind maths, but not how or when to apply what they know to solve math problems. They also often struggle with working memory. For example, they may have a hard time holding numbers in mind while doing maths problems with multiple steps.

Tips for the Classroom

- Know the student and her needs. Use the LSP. Check progress and communicate throughout the lesson.
- Teach more than one way to solve mathematical operations.
- Build on student's existing knowledge.

- Try to understand the student's errors, do not just settle for wrong.
- Concentrate on one concept at a time.
- Language should be kept to a minimum and specific cues given for various mathematical operations in word problems.
- Encourage students to visualise mathematical problems. Allow students to draw a picture to help them understand the problem and ensure they take time to look at any visual information such as charts and graphs.
- If the student does not have co-existing reading difficulties, encourage him/her to read problems aloud.
- Ask to explain verbally how he/she arrived at particular solutions.
- Encourage students to teach a concept back, in order to check understanding.
- Ensure worksheets are uncluttered and clearly laid out and provide ample room for uncluttered computation. Ensure that the page does not look intimidating.
- Limit copying from the board.
- Allow students to use computers and calculators, especially to self-correct.
- Provide students with extra time to complete tasks and encourage the use of rough work for calculations.
- Directly teach the language of Mathematics.
- Always bear in mind the language of Mathematics differs significantly from spoken English.
- Use consistent mathematical language both in your classroom and throughout the school.
- Make use of mnemonics and visual prompting cards to assist students in memorising rules, formulae and tables. Repetition is also very important.

Dyspraxia

The Dyspraxia Foundation defines dyspraxia as:

'Dyspraxia, a form of developmental coordination disorder (DCD) is a common disorder affecting fine and/or gross motor coordination, in children and adults.'

While DCD is often regarded as an umbrella term to cover motor coordination difficulties, dyspraxia refers to those people who have additional problems planning, organising and carrying out movements in the right order in everyday situations. Dyspraxia can also affect articulation and speech, perception and thought.'

(Dyspraxia Foundation 2013)

Tips for the Classroom

- Provide more routine activities – the familiarity of tasks will help to build confidence and provide opportunities for over-learning
 - Use a clock in the classroom and refer to the time regularly
 - Provide 'timed tasks' using a sand timer, buzzer or alarm clock
 - Be clear and explicit about the detail of tasks you expect within a set time
 - Provide short, simple instructions with visual support for key points
 - Deliver instructions slowly and clearly
 - Encourage pupils to repeat instructions back to you in their own words
 - Gain a learner's attention by attaching his name to an instruction or by making eye contact
 - Provide a task planner – a visual reminder of the sequence of tasks, breaking the instruction down into manageable, and memorable, chunks
 - Provide extra time for learners to plan, organise and complete their work
 - Provide a 'buddy' system to support learners to organise tasks/equipment/homework, and navigate around the school
 - Provide checklists of equipment needed
 - Liaise regularly with parents about homework/coursework, submission dates etc.
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Dyslexia

As teachers, we get so excited seeing students understand new concepts and develop into skilful learners. But there is always that group of students in every teacher's career that they just weren't able to help the way they wanted to. They knew the kids were bright. They knew they were motivated to learn. They knew they were supported at home. They knew they had all the opportunities to learn. However, for some reason, these kids just struggled with reading and spelling—despite the help of teachers and parents. Dyslexia is much more common than most people—even teachers—think. Below are a number of things every teacher, in every classroom, on every school campus, should know.

1. Dyslexia is real.

Dyslexia, in some form, affects one in five people. Dyslexia is a neurobiological difference in the brain that makes reading and writing more difficult to learn. Reading and writing are man-made constructs, and not every brain has the ability to learn those constructs without explicit instruction. What this means for teachers is that every single year in every single class sits a student with dyslexia.

Dyslexia can look different in each student. Some may read a little slowly. Some may have extreme difficulty with decoding. Some may be poor spellers. Some may read accurately yet slowly, and then they cannot tell you what they just read. These are all symptoms of dyslexia. Dyslexia also occurs on a continuum. So it may be mild in one student and severe in another.

2. Dyslexia is not outgrown.

The fact of the matter is that a person is born with dyslexia, and once they are born with dyslexia, they will grow old with dyslexia. But with the correct intervention, they may learn to improve their reading and writing and hopefully be encouraged to embrace their dyslexia.

The important thing to realize here is that it is unproductive and a bit destructive to tell parents and children to “wait and see” what will happen. Dyslexia can be identified as early as three years old, and the earlier, the better. The “wait-and-see” approach will never work for a child with dyslexia.

3. Dyslexia is not an intellectual deficit.

When a child with dyslexia is struggling to read, spell, understand or remember what they read, it is not an intellectual deficit. In fact, in order to be diagnosed with dyslexia, a child has to have a at least a low average, or above IQ. It is common for children who are struggling to be inadvertently marginalized by the educational system because educators do not know how to teach them. The important point here is that a child with dyslexia has as much potential as every other student in the classroom.

4. One teacher can make all the difference in the life of a child with dyslexia.

It is common for a teacher to be reluctant to utter the word dyslexia. But if a teacher has done his or her research and has suspicions that dyslexia might be

the culprit of a child's difficulty, the resources you give to the parent and the red flags you raise may be the difference between that child having a successful academic career and that child failing to meet his or her potential.

Tips for in the classroom

- Know the student and her needs. Use the LSP. Check progress and communicate throughout the lesson.
- Of value to all children in the class is an outline of what is going to be taught in the lesson, ending the lesson with an effective plenary of what has been taught. In this way information is more likely to go from short term memory to long term memory.
- When homework is set, it is important to check that the child correctly writes down exactly what is required. Try to ensure that the appropriate worksheets and books are with the child to take home.
- Make sure that messages and day to day classroom activities are written down, and never sent verbally.
- Encourage good organizational skills by the use of folders and dividers to keep work easily accessible and in an orderly fashion.
- Break tasks down into small easily remembered pieces of information.
- If visual memory is poor, copying must be kept to a minimum. Notes or handouts are far more useful.

- Seat the child fairly near the class teacher so that the teacher is available to help if necessary, or he can be supported by a well-motivated and sympathetic classmate.
- Praise - A person with dyslexia needs a boost to their self-confidence before they can learn to overcome their difficulties. They have already experienced failure and deep down they often don't believe they are capable of learning. To re-establish self-confidence provide the opportunity to succeed and give praise for small achievements.
- Don't ask person with dyslexia to read aloud, words are likely to be misread or skipped, causing embarrassment.
- Don't give a punishment for forgetting books or sports kit. Instead, offer positive strategies such as having one place to put things away.
- Don't use the word 'lazy' as students with dyslexia have to work harder to produce a smaller amount. They will have difficulty staying focused when reading, writing or listening.
- Expect less written work as a student with dyslexia may be verbally bright but struggle to put ideas into writing. To overcome this you could allow more time for reading, listening and understanding.
- Prepare a printout of homework and stick it in their book and provide numbered steps, e.g. 1. Do this. 2. Do that etc.
- Do not ask them to copy text from a board or book and instead give a printout. Suggest they highlight key areas and draw thumbnail pictures in the margin to represent the most important points.
- Accept homework created on a computer as physical handwriting is torture for most people with dyslexia. Word processors make life much easier. Allow

them to use the Spell checker and help with grammar and punctuation so that you can see the quality of the content.

- Discuss an activity to make sure it is understood. Visualising the activity or linking it to a funny action may help someone with dyslexia remember.
- Give the opportunity to answer questions orally as often students with dyslexia can demonstrate their understanding with a spoken answer but are unable with to put those ideas in writing.

For a more thorough explanation, you can read this example:

<http://www.dyslexiatraininginstitute.org/blog/our-brains-were-not-built-for-reading-confusing-p-q-b/>.

The American Academy of Ophthalmologists released this statement about the misuse of vision interventions for students with dyslexia:

<http://one.aao.org/clinical-statement/joint-statement-learning-disabilities-dyslexia-vis>.

You can click here for a free resource about dyslexia:

<https://jmgllc.leadpages.net/dyslexiaqrg/> and here:

<http://www.interdys.org/ewebeditpro5/upload/DyslexiaInTheClassroom>.

Moderate learning difficulties (MLD)

This is the most common sort of special educational need at BH. Pupils with MLD will have attainments well below expected levels in all or most areas of the curriculum, despite appropriate interventions. They will have much greater difficulty than their peers in acquiring basic literacy and numeracy skills and in understanding concepts. They may also have associated speech and language delay, low self-esteem, low levels of concentration and underdeveloped social skills.

The school environment/curriculum can present a range of barriers to participation and learning for pupils with MLD. The SEN Code of Practice says that pupils who demonstrate features of MLD, require specific programmes to aid progress in cognition and learning. In particular, pupils with MLD may need support with: understanding instructions and the requirements of tasks; acquiring sequencing skills – for example, when following a recipe or science experiment. They tend also to struggle with personal organisation over the short, medium and long term. Further, students with MLD do not respond, at least dramatically, to traditional forms of differentiation. Nonetheless, like any other group of children students with MLD can improve and progress – often simply at a slower rate.

Classroom Tips

- Know the student and her needs. Use the LSP. Check progress and communicate throughout the lesson.
- Give pupils time to consider questions
- Target praise
- Word banks
- Writing frames
- Enlarge print
- Structured questioning with teacher support/scaffolding of response
- Make a mind map or other visual representation of what pupils already know

- Use buddying to support the pupil
 - Store resources where all pupils have access to them
 - Display key words on the wall, with pictures/symbols
 - Physically demonstrate tasks
 - Repeat information in different ways
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Hearing Impairment

Pupils with permanent hearing problems may be experiencing anything from profound loss to a mild one. The impairment may be deteriorating, fluctuating or stable. Most pupils with profound hearing loss will have been identified before school age is reached, and hopefully, will be benefitting from the provision of appropriate resources to aid hearing.

Tips for the classroom

- Know the student and her needs. Use the LSP. Check progress and communicate throughout the lesson.
 - Make sure the room is bright enough for the child to see clearly any visual cues, posters or boards.
 - Do not accentuate speech or speak more slowly – most children will lip read well as long as you maintain a normal pace and your speech is clear.
 - Make sure the child is looking at you before you give lesson instructions
 - Maintain a degree of order in your classroom so that only one person speaks at a time.
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Visual Impairment

Pupils with visual impairment may experience difficulties in different ways. A child is visually impaired if their vision cannot be corrected to normal by using some means of optical correction. The pupil may have a difficulty with scanning or visual fixation. They may have problems in maintaining and changing focus both long and short distances or what they see may be grossly distorted. Their visual field may be restricted, they may suffer from visual fatigue, or they may have a problem in recognising different colours.

Tips for the Classroom

- Know the student and her needs. Use the LSP. Check progress and communicate throughout the lesson.
 - A laptop computer is often used to enlarge print
 - Child should be seated at the front of the classroom.
 - Different coloured paper may be useful
 - Ensure the classroom is well lit
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