

**Hallsville Primary School –
Whole School Provision
Mapping School Year 2023-
2024**

Hallsville
Primary School

	Signals	Actions	Organization of support	Aims
MLD (Moderate Learning Difficulty)	Inadequate progress with widening gap	<u>Reading</u> 1-1 RWI 1-1 reading	Targeted classroom support Targeted TA group support Targeted 1:1TA support Box Clever Reading boosters (KS2) Reading buddies (KS2 support KS1)	Gap between child and peers narrows.
		<u>Writing</u> Colourful Semantics Small group teaching SNIP Literacy Programme	Targeted classroom support Targeted TA group support Talk for Writing Hold a sentence/write a sentence Talking Partners Talking buttons	
		<u>Maths</u>	Targeted classroom support Targeted TA group support Teacher led small group Pre- skills teaching Maths boosters/Maths Interventions	
		<u>Dyslexia Assessment</u> Referral to Complex Needs and Dyslexia Service	Initial assessment followed by intensive literacy support	If pupil makes less than 6 months progress on chronological age diagnosis of dyslexia may be given and dyslexia programme will be followed. Gap between child and peers narrows.
		<u>Referral to:</u> Educational Psychologist Learning Support Service	<u>Agency</u> Make a range of assessments In collaboration with school devise a	Gap between child and peers narrows.

			Progress regularly assessed by SLT and programme updated If required additional TA support for core curriculum	Gap between child and peers narrows
		LCIS (Language, Communication Interaction Service) referral Diagnosis – severe (specific) language disorder: Language Enrichment Groups Social Skills Lego Therapy CDS referral	Request for High Needs Funding may be made in order to provide more intensive support which could include 1-1 support in core areas of the curriculum. Signing Delivery of SaLT programme by specialist TA with 1:1 follow up Annual review of provision for children with HNF Coffee mornings for parents Specialised planning for pupils 'The One Plan'	
Behaviour, Social, Emotional or Mental Health Difficulties	Pupil: Struggling with peer and /or adult interactions Showing anxiety, poor self-esteem, bullying or being bullied, reluctance to attend school	Learning mentor support: Reward Charts Behaviour Plan Nurture Group Lunch Club Circle of Friends Sports Coach	Allocated TA's may: Give additional support at key times during the day e.g. on arrival, playtime, in class to boost confidence etc Offer incentives such as reward charts Support children through difficult periods Support transition to secondary school Regular programme of individual or group sessions	Child emotionally regulated Demonstrating appropriate social behaviour Able to access the curriculum
	Learning adversely affected by inappropriate behaviour acute or	Referrals to one or more of the following services: Educational Psychologist (EP)	EP Parent/Pupil/school interviews Pupil Assessments including cognitive	Child emotionally regulated Demonstrating appropriate social behaviour. Able to access the curriculum.

	ongoing situation such as bereavement, separation, transition	Child & Family Consultation Service (CFCS) Child Development Service (CDS)	CFCS Pupil/parent meetings Counselling Assessment, occasionally leading to a diagnosis	
		Reintegration into Education (Phoneix) for assessment School requests specialist EBD provision through EBD SNAP	Psychotherapy School Assist in assessment Follow programmes/suggestions Individual Care/behaviour plan Professionals Meetings TA support for key transitions and school visits Dual placement with Eco Pathway School	Child emotionally regulated. Demonstrating appropriate social behaviour. Able to access the curriculum in mainstream education.
VI (Visual Impairment)	Difficulty with handwriting, copying, lack of progress in reading, difficulty reading from board or sometimes book.	Ask parent/carer to arrange eye test. If glasses prescribed ensure child wears them at suggested times		Gap between child and peers narrows.
	Difficulties persist when child wears glasses and has prescription that indicates adjustments to learning environment may be necessary.	Referral to or support arranged by Sensory Service.	Precise adjustments to be made by school, recommended by Sensory Service that may include: Advice on seating position in classroom Texts and test resources in modified print Minimum font size and background colour for IWB Modified homework and classroom resources, e.g. recommended font size, 2B or 4B pencil, exercise books	Able to access all areas of the curriculum.

			<p>with bold lines or squares, tactile ruler, writing slope</p> <p>Extra time for reading and writing tasks including tests.</p> <p>Seat child near to and facing the front</p> <p>Support with medication such as eye drops in line with Care Plan.</p> <p>Sensory Service will carry out regular sight checks in school.</p>	
HI (Hearing Impairment)	Child: With poor attention, difficulty with speech including speech sounds, shouting or speaking too quietly, socially isolated.	Inclusion Manager ask school nurse to arrange a hearing test. If hearing impairment diagnosed child may have grommets fitted if cause is glue ear.	<p>Sit child near to and facing teacher.</p> <p>If hearing impairment diagnosed follow advice from audiology including reducing background noise when possible.</p> <p>Glue ear may come and go.</p>	Gap between child and peers narrows
	Looking closely at face of speaker or turning head to one side to listen, visible wax in ears			
		<p>Audiology may recommend single or bilateral hearing aids.</p> <p>Sensory Service will support child using these in school.</p> <p>Electronic transmitter may be recommended if child struggles with hearing aids in the classroom.</p>	<p>Hearing levels monitored Progress monitored SLT programme delivered by specialist TA</p> <p>Trained TA to take responsibility for care and maintenance of equipment</p> <p>Teachers or adult delivering lesson to wear device.</p>	Able to access all areas of the curriculum

ASD (Autistic Spectrum Disorder)	<p>Child has: Difficulty in social interactions Obsessional behaviour Difficulties with change High sensory needs e.g. desiring or disliking certain noise, touch, smell, lights, movement. Communication difficulties Challenging behaviour</p>	<p>Refer to CDS (if not already known to this service) who may do ADI and/or ADOS tests. The result of testing may lead to a diagnosis of ASD. Refer to LCIS who will: Observe child in a range of situations, talk to SENCO, teacher, teaching assistant, parent Suggest range of strategies Meet parents, refer to CFCS .</p> <p>If difficulties persist and interfere with the child's ability and/or their peer's ability to learn application for High Needs Funding (HNF) may be made in order to provide additional resources for learning</p>	<p>Follow advice from LCIS that may include: SCERTS Programme Photo Keyring Visual Timetable Social Skills Programme Intensive Interaction Adapted curriculum (gym, swimming, horseriding) Toilet training Increased levels of support at key times Pupil Passport Movement and Turn-taking group Lego Therapy</p> <p>One to one support Sensory curriculum Individualised curriculum Objects of reference/Core board Emotion keyring SCERTS programme Visual timetable Intensive Interaction Toilet training Reading for meaning</p> <p>Colourful Semantics Soft Play Horse riding Parent meetings Annual Review</p>	<p>Difficulties reduce, child's spoken language improves, able to communicate at age appropriate level, child able to access the curriculum.</p> <p>Child emotionally regulated. Demonstrating appropriate social behaviour. Able to access the curriculum Gap between child and peers narrows.</p> <p>Difficulties reduce; child's expressive and receptive language improves, able to communicate at age - appropriate level, child able to access the curriculum. Child emotionally regulated.</p>
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			Pupil Passport 'The One Plan' Sensory Circuits	
PD (Physical Difficulty)	Child has congenital or acquired physical that may be long term/permanent or short-term		Care Plan Special dietary arrangements Pupil Passport Make reasonable adjustments for access to learning environment and curriculum Specialist training for staff working with children with medical or physical needs	Demonstrating appropriate social behaviour. Able to access the curriculum. Gap between child and peers narrows Child's health care and physical needs met. Able to access the curriculum Gap between child and peers narrows.
Complex Needs	Child has a range of difficulties that indicate needs in several of the above categories. He/she may also have health needs.	Meet parents Liaise with medical professionals OT referral Make referral to CDS if not already known to this agency. Make referral to Complex Needs and Dyslexia Service (CNDS) Occupational therapy (OT) Liaison with medical professionals. If level of need requires considerable additional resources including high levels of adult support application for High Needs Funding (HNF) may be made.	Follow advice of CNDS that may include: Care Plan Individualized curriculum Identify time of particular difficulty and increase level of support and/or make reasonable adjustments to usual provision Following a Care Plan that may include support with toileting needs Special dietary arrangements The 'One Plan' Augmentative and Alternative Communication Device	Child's health care and physical needs met. Able to access the curriculum Gap between child and peers narrows.