

Inspiring **Excellence,**
Inspiring **Partnerships,**
Inspiring **Individuality,**
Inspiring **Futures.**



INSPIRE Trust Provision Map

Cognition and Learning
Communication and language
Speech (expressive)
Understanding (receptive)
SEMH
Sensory Needs
Physical Need

Created by Inclusion Team

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Cognition and Learning

| Need | Wave 1 Quality First Teaching | Wave 2 | Wave 3 |
|--|--|---|---|
| <ul style="list-style-type: none"> * Low levels of attainment * Phonological and short-term memory difficulties * Difficulty acquiring new skills (particularly in literacy and numeracy) * Difficulty in dealing with abstract ideas * Difficulties involving specific skills such as sequencing, ordering, word finding * Difficulty forming concepts particularly when information is more abstract * Limited skills in verbal exchanges * Avoidance strategies * Low self-confidence/esteem * Episodes of dis-engagement | <ul style="list-style-type: none"> * Differentiated curriculum tasks * Clear and simple instructions, breaking down longer instructions and giving one at a time * Clarify, display and refer back to new/difficult vocabulary using visual cues and pictures * Use of chrome books to scaffold learning, for example through the use of differentiated word banks. * Use of chrome books to allow children to revisit key teaching points. * Check for understanding using differentiated questioning and visual systems, for example thumbs up/down * Consistent use of positive language to reinforce effective learning behaviours * Time given for processing before response is needed. * Provide children with verbal and visual scaffolds for their response. * Visual cues and prompts, Visual timetable and Now and Next * Repetition and reinforcement of skills including worked examples * Practical resources available to reinforce key concepts around number - e.g Numicon * Pace and pitch altered to support learning needs * Visually supportive learning environments e.g. working walls, word mats * Involve the pupil in discussions about how they learn and approach tasks * Flexible grouping * Regular opportunities to move – planned in movement breaks | <ul style="list-style-type: none"> * Highly differentiated teaching of phonics – for example Phonic Superstars * Targeted/structured literacy and numeracy catch up programmes, for example Maths Wizards or Reading Recovery * Precision Teaching for specific skills, particularly reading and spelling. * Daily one to one reading with an adult (Priority Readers) – with a focus on comprehension questions, who, where what and why * Alternative methods of recording work e.g. Mind mapping, role play, use of ICT, video/audio recording. The use of Chrome Books should be utilised. * Small intervention group to teaching memory strategies - for example games such as barrier games pairs/lotto. Or the Memory Magic intervention * Coloured resources e.g. paper, overlays for reading | <ul style="list-style-type: none"> * Specialised intervention as advised by an outside agency - for example WISENDSS or EP – for example Dyslexia Gold, Alphabet Arc, Rainbow Words * One to one teaching of differentiated phonics – for example Read Write Inc Tutoring |

Communication and Interaction

| Need | Wave 1 Quality First Teaching | Wave 2 | Wave 3 |
|---|---|--|--|
| <ul style="list-style-type: none"> * Difficulty knowing how to talk and listen to others in a conversation * Difficulty making and maintaining friendships. * Anxiety in busy unpredictable environments * Difficulty coping in new or unfamiliar situations * Inability to cope with unstructured social situations, including transitions * Inability to use knowledge and skills functionally to generalise to various situations * Inability to read the facial expressions of others * Rigid thinking, including strong routines and rituals * Difficulty understanding the rules of social interaction * Difficulties in understanding rules of politeness and manners e.g. may speak to Head teacher like a friend * Attention and conversation focused on own needs and interests * Extreme reactions, rather than a measured response * Problems with unwritten rules e.g. you don't talk in assembly e * Unable to cope with close proximity to others * Physical outbursts if stressed, * Echolalia, rather than meaningful language * Lack of response inhibitions, e.g. can't wait, shouts out, runs off * Literal understanding of language - struggles to understand sarcasm/humour/idiom/metaphor * Physically challenging behaviour * Unusual reactions to sensory stimuli * Difficulties with independence skills, such as dressing, toileting, eating | <ul style="list-style-type: none"> * Visual Timetables clearly displayed in all classrooms and referred to throughout the day. Updated when necessary - for example to indicate a change of plan. * Clear and specific learning objectives that are represented visually or through a task sheet. * Clear, demonstrated differentiated examples of what is expected within task. * Adults using very clear language (explain double meanings, avoid sarcasm etc.) * Preparation for change of activity or lesson - with the use of visuals, clear warnings and timers. * Systematic organisation of independent learning tasks and activities * Clear rewards systems - including personalised motivators * Overt expectations made explicit * Calm learning environment * Prompt cards for group roles and conversation skills * Structured play opportunities at lunchtimes that are facilitated by adults | <ul style="list-style-type: none"> * Individual visual timetable and personalised task sheets or Now and Next Boards * Personalised Communication Booklet to support children that are not using language. * Objects of Reference used to communicate transitions. * Verbal communications to be supported by the consistent use of Makaton * Comic Strip Conversations and/or Social Stories * Individual work stations for children to work at when they need to focus. * Social Communication Intervention Groups – Time to Talk or Socially Speaking. * Social Use of Language Group (SULP) * Interventions to support memory and organisation - for example sorting activities and sequencing * Musical Interaction Group * Staff have personalised visual cue cards available on Lanyards. * Alternative/ Smaller spaces available at breaktimes and lunchtimes. | <ul style="list-style-type: none"> * Specific programme of work designed by a Speech and Language Therapist. * Alternative Teaching Space * Intensive Interaction approaches * A referral for a neurodiversity assessment |

Speech (Expressive Language)

| Need | Wave 1 Quality First Teaching | Wave 2 | Wave 3 |
|--|--|---|--|
| <ul style="list-style-type: none"> * Speech that is sometimes difficult to understand * Speech may be incomprehensible to an unknown adult or peer * Speech difficulties have a significant impact on literacy * Difficulty in formulating a spoken sentence <p>Speech and Language Therapy assessment should be considered to gain a full and accurate profile of needs</p> | <ul style="list-style-type: none"> * Phonics programme with strong phonological awareness component * Oral blending and segmentation linked to reading and spelling * Consistent support from teacher and TA to reinforce speech sounds throughout the day * A high level of accurate modelling of speech sounds. * Support to develop peer relationships and participate in group work when intelligibility is a problem | <ul style="list-style-type: none"> * Specific phonemic awareness programme linked to letters * Segmentation activities linked to topic and functional vocabulary * Talk buttons or talking postcards * Phonological awareness activities linked to speech production * Communicate in Print * Language for Thinking | <ul style="list-style-type: none"> * Specific speech interventions as prescribed by Speech and Language Therapist * Total communication approach including Makaton signs, symbols and gestures to communicate needs |

Understanding (Receptive Language)

| Need | Wave 1 Quality First Teaching | Wave 2 | Wave 3 |
|--|--|---|--|
| <ul style="list-style-type: none"> * Difficulty understanding words or sentences * Difficulty following/processing instructions * Considerable difficulty understanding words, sentences and instructions <p>Speech and Language Therapy assessment should be considered to gain a full and accurate profile of needs</p> | <ul style="list-style-type: none"> * Ensure you have the pupil's attention before giving an instruction use their individual name * Provide clear and simple explanations, supported with visual cues for key vocabulary * Chunking instructions so that the pupil only has to process one key point at a time – provide a visual task sheet. * Provide extra time to process what has been said * Check understanding of classwork and homework tasks - ask children to repeat back key pieces of information. * Visual support across the curriculum * Differentiated talking partner opportunities | <ul style="list-style-type: none"> * Small group pre-teaching of key vocabulary using a high level of visual and practical resources. * Targeted comprehension group that focuses on processing. Language for Thinking * Mind maps for vocabulary to link concepts. * Individual vocabulary wordbook | <ul style="list-style-type: none"> * Specific speech interventions as prescribed by Speech and Language Therapist * Total communication approach including Makaton signs, symbols and gestures to communicate needs |

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|--|---|--|--|
| | <ul style="list-style-type: none"> * Pre-teaching of subject vocabulary * Key vocabulary displayed, clear definitions of words given and taught in a multi-sensory way * Guided reading for decoding and comprehension, especially inference | | |
|--|---|--|--|

| Social, Emotional and Mental Health | | | |
|--|---|---|---|
| Need | Wave 1 Quality First Teaching | Wave 2 | Wave 3 |
| <ul style="list-style-type: none"> * Experiencing difficulty in remaining on task, inattentive * Inability to follow instructions and routines * Presenting as significantly unhappy anxious or stressed * Seeking frequent adult support/attention * Frequent low-level disruptions * Failure to make the progress anticipated across many areas of the curriculum * Showing signs of frustration and early indications of disaffection * Difficulty in making and maintaining healthy relationships with peers * Presenting as withdrawn or tearful * Significant fluctuations in mood and increasing unpredictability | <ul style="list-style-type: none"> * Implementation of a whole school framework to support the social emotional and mental health of everyone. * Cyclic PSHE Curriculum focused on Statutory Relationships Curriculum * Clear whole school behaviour for learning policy, which is differentiated according to need and context (reasonable adjustments) * Staff use an Emotion Coaching approach to support children to recognise and regulated their emotions. * Assessments and monitoring of learning and social emotional wellbeing and associated behaviour, for example through the Boxall Profile or Thrive Assessment * Restorative Practice used to support conversations with pupils following an incident * Clear systems for children to share concerns or worries, for example “I wish my Teacher knew” * Emotional Check In available in every class room and monitored by key adults. * Zones of Regulation visuals available in every classroom * Experienced staff are able to support newly qualified colleagues. * Trauma-informed approaches utilised in the classroom. | <ul style="list-style-type: none"> * Nurture Group intervention that is informed by an individual child’s Boxall Profile * Small Group intervention using the Milo and Hamish resources, following an assessment of the child’s profile * Personalised Thrive intervention following an assessment. * Social Skills Intervention, for example, Lego Therapy * Personalised Zones of Regulation Scale available at all times. * Personalised Emotion Coaching script that is consistently used by all adults * Daily communication between school staff and parents regarding the child’s emotional well-being. * Circle of Friends to support social interaction. | <ul style="list-style-type: none"> * Interventions such as art/play therapeutic approaches, for example Theraplay * Support from the Educational Psychologist to design a personalised intervention * A referral to Child and Adolescent Mental Health Services (CAMHS) * Personalised risk assessments in place around challenging behaviour. |

Sensory Needs

| Need | Wave 1 Quality First Teaching | Wave 2 | Wave 3 |
|--|---|--|---|
| <ul style="list-style-type: none"> * Presenting as very sensitive to particular sensory experiences. * Difficulties tolerating noise. * Restricted eating - aversion to the texture of some foods, rigid rules about how food is presented. | <ul style="list-style-type: none"> * Carefully considered classroom environments that seek to minimise sensory overload. * Visual Symbols available for children to indicate they are struggling with a sensory experience. | <ul style="list-style-type: none"> * Access to sensory resources in the classroom – for example fidget toys * Access to sensory resources outside the classroom – in a sensory provision * Daily Sensory Circuits * Fit to Learn * Personalised Sensory Audit * Ear defenders * Chew toys/ jewellery. * Weighted blanket or jacket * Adaptions to school uniform. | <ul style="list-style-type: none"> * Personalised interventions recommended by Health Professionals and Specialist Services. |

Physical Needs

| Need | Wave 1 Quality First Teaching | Wave 2 | Wave 3 |
|---|--|---|---|
| <ul style="list-style-type: none"> * Visual Impairment * Hearing Impairment * Auditory processing difficulty * Gross Motor difficulties * Difficulties with coordination * Fine Motor difficulties * Poor handwriting * Physical disability | <ul style="list-style-type: none"> * Resources adapted to support the visual needs of all learners * Classroom environment carefully monitored for acoustics * Careful consideration given to classroom lighting * Dough Disco | <ul style="list-style-type: none"> * Multi-sensory motor programmes- Fit to Learn * Structured Handwriting programme - for example Speed Up, or Write Dance * Adapted pencils and writing slopes. * Access to Information Technology to support recording | <ul style="list-style-type: none"> * Personalised programme designed by a Occupational Therapist or Physiotherapist. * Adapted equipment provided by Health Services. |