



Nelson Primary School
 Developing Skills for Life
Provision Map

All pupils at Nelson Primary School receive 'quality first teaching'. Where needs arise we provide additional support in the following ways:

	Signals	Actions	Organisation of support	Aims
MLD (Moderate Learning Difficulty)	Inadequate progress with widening gap	<u>English</u> EYFS & KS1 Pinny Time/RWInc Reading Recovery	Targeted classroom support Targeted TA group support Targeted 1:1 TA support Teacher led small group Box Clever Memory Games Group	Gap between child and peers narrows.
		KS2 Pinny time/RWInc/Fresh Start Reading Recovery	Targeted classroom support Targeted TA group support Targeted 1:1 TA support Teacher led small group Talking Partners	
		<u>Maths</u>	Targeted classroom support Targeted TA group support Targeted 1:1 TA support Teacher led small group	
		Dyslexia Assessment Referral to Complex Needs and Dyslexia Service	Initial assessment followed by 6 months of 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.
		Referral to: Educational Psychologist Learning Support Service	<u>Agency</u> Make a range of assessments In collaboration with school devise a support programme	Gap between child and peers narrows.

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			Regularly review progress and update programme <u>School</u> Deliver programme Create resources Monitor progress	
SLCN – Speech, Language and Communication Needs	Difficulty understanding instructions that are not part of everyday routine Difficulty with spoken and/or written language including limited vocabulary, word order, clarity of speech Poor progress, and sometimes frustration, in language based activities but better progress and strengths in other areas. Has been in English speaking school for more than 18 months	EYFS/KS1 Box Clever Parent Workshop	Early morning TA led group learning language through play. SaLT led Workshop advising parents on developing language through play	Difficulties reduce, child’s expressive and receptive language improves, able to communicate at age-appropriate level, child able to access the curriculum. Gap between child and peers narrows.
		KS2 Talking Partners	10 lessons with TA. Group of 3 children. Speaking and listening activities including barrier games. Visual support in the classroom. Short instructions. Differentiated learning tasks. Scaffolded learning	
	Limited progress after school based intervention	SaLT referral leading to speech and language assessment	Take advice from Speech and Language therapist	Difficulties reduce, child’s expressive and receptive language improves, able to communicate at age-appropriate level, child able to access the curriculum. Gap between child and peers narrows.
		Diagnosis- mild to moderate language delay: programmes in: Language Enrichment Narrative Skill Group Social Skills Colourful Semantics Speech Sounds	Delivery of suggested programme by specialist TA either in a small group, pair or 1:1 Progress regularly assessed by SLT and programme updated If required additional TA support for core curriculum Pupil Passport	

	Signals	Actions	Organisation of support	Aims
		<p>LCIS (Language , Communication and Interaction Service) referral Diagnosis- severe (specific) language disorder: Language Enrichment Narrative Skills Group Social Skills Colourful Semantics Speech Sounds CDC (Child development Centre) referral Oro-motor Programme</p>	<p>Request for High Needs Funding (HNF) 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 Progress regularly assessed by SLT and programme updated Annual review of provision for children with HNF (High Needs Funding) Coffee mornings for parents Individual Education Plan (IEP) Pupil Passport</p>	<p>Difficulties reduce, child's expressive and receptive language improves, able to communicate at age-appropriate level, child able to access the curriculum.</p> <p>Gap between child and peers narrows.</p>
	<p>2 places in each year group are reserved for pupils with Severe and Specific Speech and Language Disorder. These pupils are identified pre-reception year and places are offered according to need at a Special Needs Advisory Panel to be offered Resourced Provision</p>	<p>Intensive Speech and Language Therapy by Resource SLT often 1:1 but sometimes in groups eg Narrative Groups or in class eg whole class signing</p>	<p>Each resource pupil has a keyworker If necessary 1:1 support is given Some children need a visual timetable or other personal visual supports Annual reviews of provision Coffee mornings for parents Photographic/Picture Keyring Visual Timetable Transition Book Pupil Passport</p>	<p>Difficulties reduce, child's expressive and receptive improves, able to communicate at age-appropriate level, child able to access the curriculum.</p> <p>Gap between child and peers narrows.</p>
Behaviour, Emotional or Social Difficulties (BESD)	<p>Pupil: struggling with peer and/or adult interactions showing anxiety, poor self-esteem, bullying or being bullied, reluctance to attend school learning adversely affected by inappropriate behaviour acute or ongoing situation such as a bereavement, separation, transition</p>	<p>Learning mentor support: Drop ins Reward Charts Mentoring Nurture Group Therapeutic Story Group Lunch Club Girls/Boys Group Circle Time Circle of Friends</p>	<p>A Learning Mentor may: give additional support at key times during the day eg 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</p>	<p>Child emotionally regulated Demonstrating appropriate social behaviour Able to access the curriculum</p>

	Signals	Actions	Organisation of support	Aims
		<p>Referrals to one or more of the following services: Educational Psychology (EP) Behaviour Support Service (BSS) Child & Family Consultation Service (CFCS) Child development Centre (CDC)</p> <p>Reintegration into Education (REIT) for assessment</p>	<p><u>EP</u> Parent/pupil/school interviews Resilience Project Pupil Assessments including cognitive</p> <p><u>BSS</u> Parent/pupil/school interviews Observations Programmes</p> <p><u>CFCS</u> Pupil/parent meetings Counselling Assessment, occasionally leading to a diagnosis Psychotherapy</p> <p><u>School</u> Assist in assessment Follow programmes/suggestions Individual Education Plan (IEP) Pupil Passport Professionals Meetings TA support for key transitions and school visits</p>	<p>Child emotionally regulated Demonstrating appropriate social behaviour Able to access the curriculum</p>
		School requests specialist EBD provision through EBD SNAP	Dual placement with Eleanor Smith School	<p>Child emotionally regulated Demonstrating appropriate social behaviour Able to access the curriculum in mainstream education</p>
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.	<p>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 eg recommended font size, 2B or 4B pencil, exercise books with bold lines or squares, tactile ruler, writing slope. Extra time for reading & writing tasks including</p>	Able to access all areas of the curriculum.

	Signals	Actions	Organisation of support	Aims
			tests Seat child near to and facing the front Support with medication such as eye drops in line with Care Plan Sensory Service will carry out regular sight checks in school Pupil Passport	
HI (Hearing Impairment)	Child: With poor attention, difficulty with speech including speech sounds, shouting or speaking too quietly, socially isolated, Looking closely at face of speaker or turning head to one side to listen, Visible wax in ears	Inclusion Manager ask school nurse to arrange a hearing test. If hearing impairment diagnosed child may have grommets fitted if cause is glue ear	Sit child near to and facing teacher If hearing impairment diagnosed follow advice from audiology including reducing background noise when possible Glue ear may come and go. If child has grommets in Year 4 s/he may not be allowed to swim or need ear plugs – Care Plan required.	Gap between child and peers narrows.
		Audiology may recommend single or bilateral hearing aids. Sensory Service will support child using these in school.	Hearing levels monitored Progress monitored SLT programme delivered by specialist TA Pupil Passport	Able to access all areas of the curriculum.
		Electronic transmitter may be recommended if child struggles with hearing aids in the classroom	Trained TA to take responsibility for care and maintenance of equipment Teachers or adult delivering lesson to wear device.	
ASD (Autistic Spectrum Disorder)	Child has: Difficulty in social interactions Obsessional behaviour Difficulties with change High sensory needs eg desiring or disliking certain noise, touch, smell, lights, movement Communication difficulties Challenging behaviour	Refer to CDC (if not already known to this service) who may do ADI and/or ADOS tests. The result of testing may lead to diagnosis of ASD. Refer to LCIS who will : observe child in range of situations, talk to Inclusion Manager, teacher, teaching assistant, parent suggest range of strategies Meet parents, refer to CFCS	Follow advice from LCIS that may include: SCERTS Programme Photo Keyring Visual Timetable Social Skills Programme Intensive Interaction Toilet training Increased levels of support at key times Individual Education Plan (IEP) Pupil Passport	Difficulties reduce, child's spoken language improves, able to communicate at age-appropriate level, child able to access the curriculum. Child emotionally regulated Demonstrating appropriate social behaviour Able to access the curriculum Gap between child and peers narrows.
		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	One to one support Sensory Room Individualised curriculum Objects of reference/Photo Keyring Emotion Keyring SCERTS Programme	Difficulties reduce, child's expressive and receptive language improves, able to communicate at age-appropriate level, child able to access the curriculum.

	Signals	Actions	Organisation of support	Aims
			PECs Oro-motor programme Signing Visual Timetable Intensive Interaction Toilet training Reading for Meaning Soft Play Horse Riding Parent meetings Annual Review Individual Education Plan (IEP) Pupil Passport	Child emotionally regulated Demonstrating appropriate social behaviour 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.	Make referral to CDC if not already known to this agency. Make referral to Complex Needs and Dyslexia Service (CNDS) Occupational therapy (OT) Liaison with medical professionals Range of observations and assessments will be made from which a programme will be suggested. 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 Individualised curriculum Identify times 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 Individual Education Plan (IEP) Pupil Passport Augmentative and Alternative Communication Device	Child's health care and physical needs met. Able to access the curriculum Gap between child and peers narrows.
PD (Physical Difficulty)	Child has congenital or acquired physical that may be long-term/permanent or short-term.	Meet parents Liaise with medical professionals OT Referral	Care Plan Special dietary arrangements Pupil Passport Make reasonable adjustments for access to learning environment and curriculum	Child's health care and physical needs met. Able to access the curriculum Gap between child and peers narrows.
Special Admission Arrangements	Information from previous school Managed moves Pre-admission parental interviews	Transition review with previous school Professionals meeting Staggered/Phased entry Pre-admission/transition visits	Pupil Passport Transition Book Keyworker Lunch Club Nurture group Peer mentor support	Successful transition into school Child settled Able to access curriculum

