

Early Years Ordinarily Available Provision Guidance: Expectations of all schools and settings



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Foreword by Northumberland's Director of Education

Early Years provision in Northumberland is of the highest quality. All providers aspire to be the best they can be and to ensure all children develop to their maximum.



These high aspirations are held for all children including those who may be from disadvantaged backgrounds and those who may have a special educational need or disability.

This document reflects much of the excellent practice which is in place and also provides additional guidance in ensuring all young children achieve their potential.

I would commend this best practice guidance for your consideration and application to ensure both quality and equity across the Early Years in Northumberland.

David Street, Director of Education



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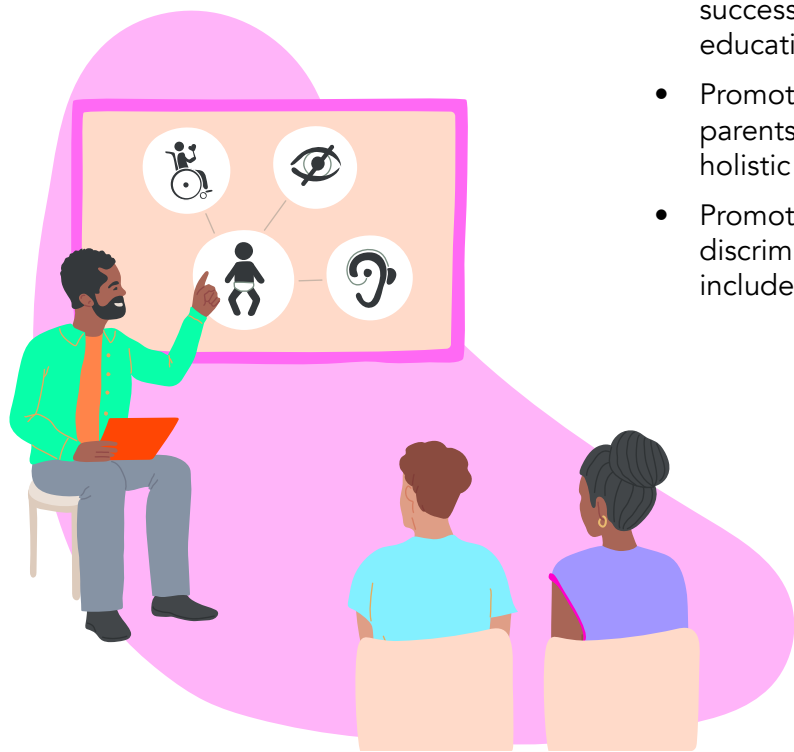


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Foreword by Northumberland's Early Years Adviser

All providers offering early years provision are expected to operate within the guidance set out in the EYFS Statutory Framework.



This sets the standards that all providers must meet to ensure that all children are able to access an early years experience which:

- Is high quality;
- Provides the foundations which they need to successfully access the next stage of their education;
- Promotes partnership working between parents and professionals to support the holistic needs of the child and;
- Promotes equality of opportunity and anti-discriminatory practice, ensuring every child is included and supported.

In early years, settings can meet the additional needs of children well through the reasonable adjustments which are made within high quality teaching and learning approaches. One of the overarching principles set out in the EYFS is that every child is unique and, as such, we would not expect that all strategies suggested within this document would be appropriate and implemented for all children. The Ordinarily Available Provision for Early Years should act as a guide for practitioners to support them in making decisions about the approaches and strategies which they feel will be most appropriate and effective in meeting the needs of each unique child as part of the graduated approach.

Northumberland Early Years team continues in its endeavour to ensure that all children are able to access their full early years entitlement. As such, we look forward to continuing to work in partnership with providers to support in delivering an inclusive early years experience for children and their families.

Kay Summers, Early Years Adviser



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Overview

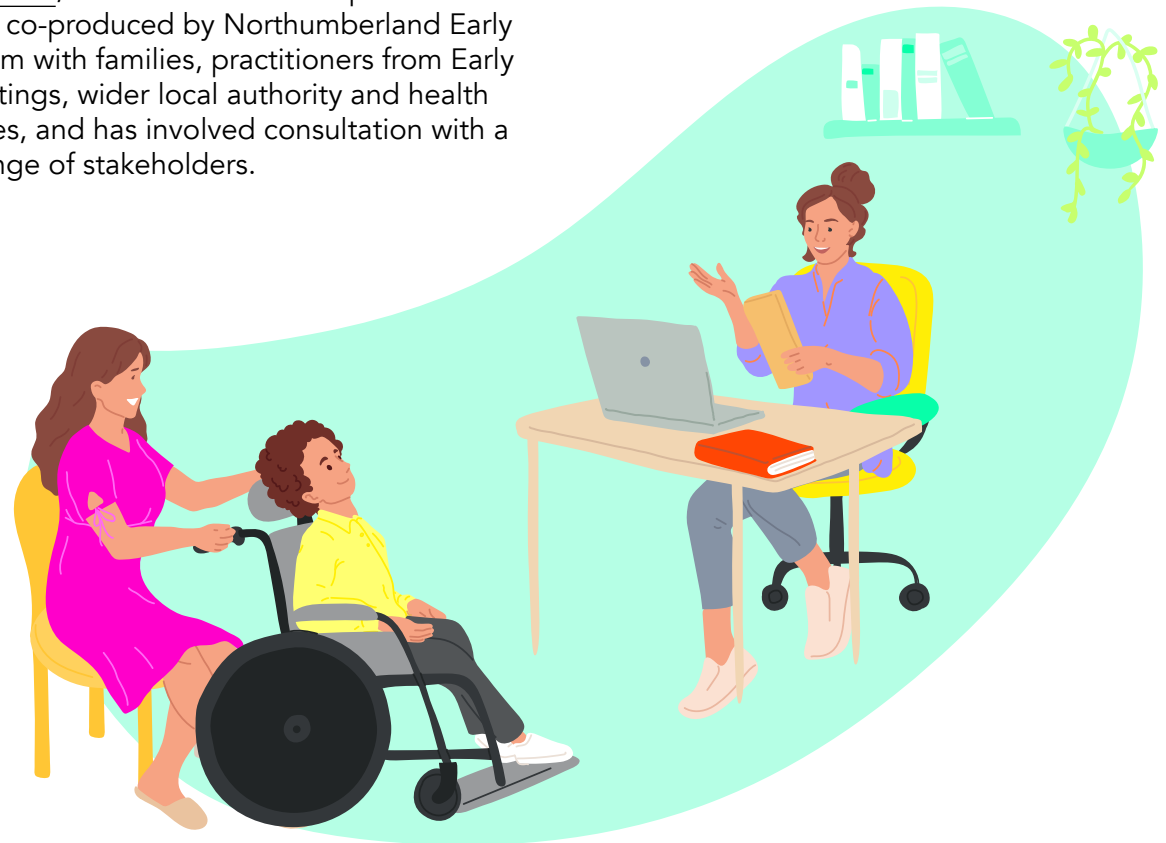
The Early Years Ordinarily Available Provision Guidance document explains to settings, families, and other practitioners, what should be in place in Early Years Settings (schools, PVI settings and childminders) for all young children.

Settings should use this guidance to help them to make sure that they have in place all that is expected of them in law and within national guidance.

'Ordinarily Available Provision' refers to the range of activities, experiences and strategies offered as part of high-quality teaching for all children. It includes what providers can do as part of the requirement to identify and support children with emerging additional needs and/or SEND through early identification and the four stages of action referred to as 'The Graduated Approach'.

It sets out clear expectations that will ensure inclusive provision across the early years sector, which is of a consistently high standard. The

document is based on government legal requirements as detailed in the Special Educational Needs and Disability Code of Practice 2014, and on national best practice. It has been co-produced by Northumberland Early Years Team with families, practitioners from Early Years Settings, wider local authority and health colleagues, and has involved consultation with a broad range of stakeholders.



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Introduction and Context

Our vision for young children with emerging additional needs and/or Special Educational Needs and Disabilities (SEND) in Northumberland is that they will have the best start in life and are supported by highly effective, inclusive Early Years Practitioners, to:

- Achieve their best, thrive and realise their full potential.
- Become confident, independent individuals, living fulfilling lives.
- Make successful transitions throughout their educational life, and into adulthood.



Key Principles

The key principles of this document are linked to the [Northumberland Local Area SEND Strategy](#), with a particular focus on the following principles:

1. Placing the views of families and children at the heart of our services.
2. Identifying needs as early as possible.
3. Developing high quality inclusive provision with every child having access to at least good (Ofsted) early years provision as close to home as possible.

All Early Years settings have clear duties around the support of children with emerging additional needs and/or SEND under the following:

- [Children and Families Act 2014](#)
- [Special Educational Needs and Disability Code of Practice: 0 to 25 years 2014 \(SENDCoP\)](#)
- [Statutory Framework for the Early Years Foundation Stage](#)
- [The Equality Act 2010](#)
- [Northumberland Local Code of Practice 2021](#)

Early Years settings *must* have regard to the SENDCoP. This means that they should do what it says or be able to explain why they have not done so. In this case, they should be able to explain what they have done instead.

For children with an Education, Health and Care Plan (EHCP), Early Years settings must abide by the Best Endeavours Duty outlined in the Children and Families Act 2014, part 3 section 66.



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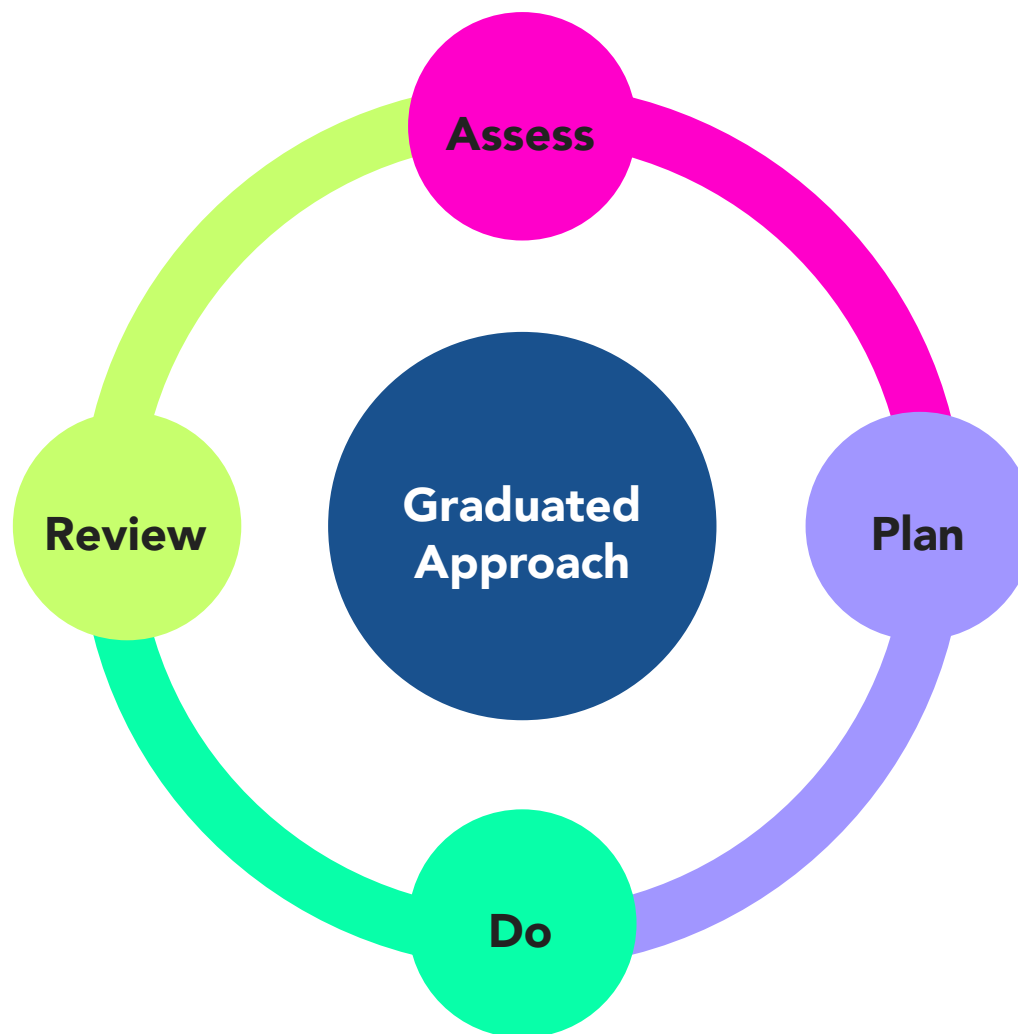
The Graduated Approach

Most children in Early Years Settings will be taught through Quality First Teaching (QFT) at a universal level. However, some children will require a more targeted offer to support their emerging additional needs and a few may need specialist support to ensure their Special Education Needs and/or Disabilities (SEND) are met.

The Graduated Approach refers to the ongoing process of Assess, Plan, Do and Review (APDR) used in all settings. All Early Years Settings have a responsibility to implement the graduated approach when working with young children with emerging additional needs and SEND.

The Northumberland Early Years Team offer free training to all practitioners on implementing the Graduated Approach.

Expectations of Northumberland settings in relation to inclusive practice are based on the Graduated Approach model.



Working in partnership with families

All Early Years settings put the voice of the child and their family at the centre of the Graduated Approach by:

Respect and develop an understanding of parents/carers perspectives

- Believing what parents/carers say and showing empathy builds trust and respect between practitioners and families.
- Finding time for private conversations gives the opportunity to actively listen to and explore how a parent feels. This gives an insight into their thoughts, concerns and priorities.
- Allowing the 'pace' to be set by the family helps them to feel comfortable and more confident when sharing information. However, be persistent if they are reluctant or are not yet ready to talk about the needs of their child.

Value parents/carers knowledge of their child

- Remembering that parent/carers know their child most intimately helps practitioners to value the in depth knowledge they can bring.
- Actively seeking out information about how children behave differently at home and in the setting provides insight into how the child responds to a variety of environments.
- Encouraging families to share information from other professionals helps to build a bigger picture of the holistic child's need than any one person can have on their own.

Treat parents/carers as equal partners when deciding on how best to meet their child's needs

- Sharing approaches to which the child responds well, can be helpful in developing mutual support and effective strategies.
- Consistency between home and setting promotes and consolidates learning which will increase the rate of the child's progress.
- Sharing resources and techniques helps the child learn what to expect.
- Partnership working with the child at the centre provides a solution focused approach and helps to recognise and celebrate every achievement the child makes.



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Early Years Inclusive Practice Conception to 5

Early Years Inclusive Practice is everyone's responsibility and is underpinned by a highly skilled and knowledgeable workforce



Universal

Guaranteed provision for every child through an integrated approach to providing high-quality adult interactions and enabling environments wherever the child is.



Targeted

Extra help is offered to children where there is a concern around learning and development and/or where there is the potential for gaps to appear. This extra support is in addition to 'Every Child's Entitlement' and includes the reasonable adjustments settings make to ensure the child is able to access their full entitlement. It may involve referrals to other services, involvement from specialist teachers and the use of additional funding.



Specialist

Specialist services are provided for children with significant and/or specific needs. Specialist services may also be provided where needs remain despite targeted support being provided. This specialist support is in addition to 'Every Child's Entitlement' and may run alongside targeted support. In some circumstances, an application for an EHC needs assessment may also be appropriate.

Every Child's Entitlement

- [Growing Healthy Northumberland](#)
- [Funded Education](#)
- [Northumberland School Readiness Passport](#)
- [Reception place in school](#)
- [Family Hubs](#)



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Early Years Foundation Stage Statutory Framework

The Unique Child

- Every child has a key person who proactively, as part of an ongoing process, gets to know the children as unique individuals – this information is used to inform planning for that child.
- The key person is aware of information about the child's early development, relationships and who the child spends time with.
- Every child is given a daily warm welcome and time is made for personalised and meaningful interactions throughout the day.
- Each child's way of communicating (verbally or non-verbally) is responded to, encouraged, supported and developed.



Positive Relationships

- The key person is the main contact for families and encourages regular communication between home and the setting.
- The key person is responsible for identifying and meeting the needs of children including those with emerging additional needs and SEND, with support from the SENCo and other professionals linked to the setting.
- Families are actively encouraged to share their knowledge of their child's interests, likes, dislikes, and how and what they are developing and learning at home.
- Engagement with families is flexible and reflects any specific requirements to maximise how they are involved.
- All staff model good communication and interaction with each other and with families and others involved in the setting.
- Children are supported to develop ways of being alongside each other and respect individual differences.



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Early Years Foundation Stage Statutory Framework

Enabling Environments

- Equipment and resources provided include open ended resources and real-world objects and artefacts which are accessible and encourage children to get involved, make links with the outside world, explore and learn at their own pace.
- The indoor and outdoor spaces are given equal priority and are available and accessible for all children.
- Adaptations are made on a regular basis to promote ongoing interest and involvement according to the developmental needs of all children.
- A range of different areas are provided for children to self-select according to their individual interests and preferences - calm areas/busy open areas/communication-friendly areas.
- Furniture, equipment, displays, colours, textures, light and sounds are carefully considered to avoid sensory overload.
- Spaces allow for movement and encourage active learning.



Learning and Development

- Every key person has a sound understanding of child development and can use relevant child development knowledge to support their understanding of individual children's ways of learning.
- Planning for children's learning and development takes into account the 'whole child' rather than development happening in isolation.
- Every key person is familiar with the Characteristics of Effective Teaching and Learning and refers to these to describe how individual children are learning.
- All children are given increasing and wider experiences for learning and development to be practiced, repeated, consolidated, applied and then built upon in meaningful and real situations.
- Curriculum plans and daily routines/rhythms of the day are flexible and adapted to ensure they meet the needs of all children.



Identifying a child's primary area of need

Correctly identifying a child's primary area of need is vital in ensuring the correct support is put in place for them. When identifying this it is important to consider the following:

- Does the child have multiple needs? If so, which need has the biggest impact on their life?
- Identify what the child needs rather than what the adults find challenging. For example, a child may struggle to communicate their wants and needs and as a result present with behaviour which adults find difficult to manage. Their primary need here would be communication and interaction, as that is causing the behaviour.
- Does the child have a diagnosis? If so, that diagnosis will fall into one of the 4 broad areas.

Communication and Interaction

Cognition and Learning

Social, Emotional and Mental Health

Sensory and/or Physical

Behaviours resulting from unmet needs

Staff supporting young children must recognise that the way a child behaves can be a direct result of them having an unmet need. All professionals must look to understand what lies behind the behaviour, and address that need. Because unmet needs often lead to young children becoming dysregulated, it is the responsibility of adults to try and understand the need, put in place strategies to support the child, and review the impact of these strategies.



Remember

Not all of the suggestions will work for all children, and they may need to be personalised further for individual children.

These are all things you can do in your setting in order to support children's learning and development.

You should also allow time to put things into place and make sure there is consistency with all practitioners using the same approaches and making sure you are working closely with families to get the greatest impact.



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Universal practice: supporting communication and interaction

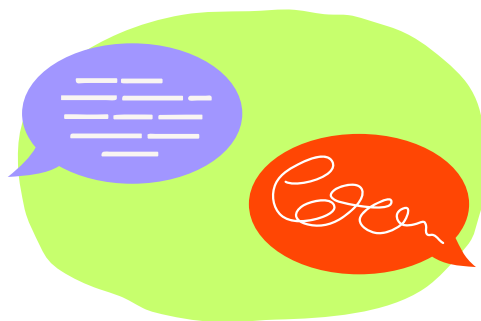
Role of the Adult

Follow the ShREC Approach (High Quality Interactions in the Early Years, EEF):

For examples of what this looks like in practice, watch this short video. This video focuses on interactions for the 3+ age range.

If you work with under 3s, you will find this short video useful to watch.

In addition, use more comments than questions (Aim for 5 comments to every question)



Sh



Share attention

Be at the child's level. Pay attention to what they are focused on.

R



Respond

Follow the child's lead. Respond to their non-verbal and verbal communications. You could make a brief comment on what they can see, hear or feel.

E



Expand

Repeat what the child says and build on it by adding more words to turn it into a sentence.

C



Conversation

Have extended back and forth interactions. Give children time to listen, process and reply.

The 'ShREC' approach to high quality interactions in the Early Years, Education Endowment Fund



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Universal practice: supporting communication and interaction

Role of the Adult

Top tips for teaching vocabulary

- **Make it functional** – children are most likely to retain words that are useful to them, especially in the early stages of vocabulary learning. This is true whether you are explicitly teaching vocabulary (Nursery/Reception), or whether you are facilitating vocabulary learning through play experiences (all EYs).
- **Repetition** - repetition is key to learning new words and this is true both for children who are developing language with no difficulties and those who are finding it more difficult (these children need *even more* exposures to new words). Repetition during teaching, in context (i.e. during the play) and across contexts (i.e. using target words across different situations in the setting).
- **Active learning and engaging all the senses** - this is relevant at all ages within the early years, whether you are supporting vocabulary learning through play, or via direct teaching. If the word is a noun, can they explore the physical thing; if it is a verb, can you be doing it with them; if it is an adjective, can there be multiple things that exemplify that quality that they can explore etc.
- **Building links (categories)** - talk about things that link together to help children build simple categories within their minds. This will look different at different ages, but can be as simple as talking about how a cow and a horse are both animals, sorting items as you are tidying them etc.



MIND THE GAP



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Universal practice: supporting communication and interaction

An enabling environment

The environment should create a wealth of opportunities for communication. Areas that inspire curiosity and invite interaction are a great way for children to develop and extend their play, use problem solving skills and work as a team to come to a solution. Children should also have the opportunity to direct their own play and create scenarios that they have experienced before. This type of play encourages good communication and language-building skills.

Offer spaces for individual play and group play

Create quieter, zoned-off learning spaces where concentration and focus can be more easily achieved

Ensure provision areas are large enough to enable children to have their own personal space whilst also feeling safe and cosy

Arrange furniture to promote face to face communication

Provide open-ended resources which stimulate curiosity and promote 'talk', and real-world objects which support children at early stages of pretend play to act out activities that are familiar to them

Label storage of resources based on the developmental stage of the children e.g. using objects / pictures / symbols / words

Organise resources so that children have choices but are not overwhelmed

Use a neutral, natural colour palette to create a sense of calm and to help children listen and attend

Create a low-light corner or use muted light levels to create relaxing, cosy and safe spaces that help children to feel safe and confident to communicate

Ensure provision areas are clearly defined, even if just by adding a small rug



Targeted practice: supporting communication and interaction

Difficulties with Attention - What you might see:

During developmentally appropriate activities, and compared to expected development for their age.

- The child may not share attention easily with an adult or their peers
- They may appear to have a short attention span
- They may find it difficult to pay attention during adult-directed activities

Imitate alongside

- Play alongside the child, doing something similar
- Play with the resources in the way that they are (you might need your own rather than sharing theirs!)
- Move your body in the way that the child moves theirs
- Make simple, repetitive comments as you do this (e.g. 'spin, spin' if you are spinning wheels; 'boing, boing' if you are jumping etc.)

Visuals to outline expectations

Activities that have a visually obvious end point are helpful, e.g. a form-board jigsaw, a simple shape sorter, as the child can see that they are coming to the end of having to focus

Fascination traps

- Use what you know about the child's interests, play choices and sensory preferences to engineer shared attention opportunities
- Wrap an appealing resource in tissue, hide it in a box or under a scarf and tempt the child to explore it. Use your face, voice and body to show your enthusiasm
- Sensory toys, music makers, push & go or wind-up toys work well, especially those that require some adult help

Infiltrate

Join in with what they are doing. E.g. pass them another car to put in the line or add a block to the tower they are building or add some sand to the bucket they are filling

One more

When playing, tidying, or completing an activity, when you notice the child's attention waning, encourage them to take one more turn / put one more thing away. This will help to gradually increase the amount of time they focus



Targeted practice: supporting communication and interaction

Difficulties with Attention - What you might see:

During developmentally appropriate activities, and compared to expected development for their age

- The child may not share attention easily with an adult or their peers
- They may appear to have a short attention span compared to other children of the same age
- They may find it difficult to pay attention during adult-directed activities

Now & Next

Structure an introduction to adult directed activities and routines with visual support. Show the child an object or picture symbol for the task they are giving attention to now, and one to represent the next activity. Give them time to process the information (and a timer to count down to the end of the current activity if necessary) before asking the child to shift attention

Backward chaining

Support the child to participate in a small portion of adult directed activity (e.g. the last minute of carpet time or the last turn in a small group activity) and work backwards in small steps to build their involvement leading up to completion of the adult directed task or routine

Make expectations clear

What will happen, where, and what the child's role will be?

Consider assigning specific role and giving specific reinforcement for attention to that task e.g. "You held open the door and waited until everyone was inside" or "You gave out the milk when I said each child's name. Great listening!"

Consider sensory processing needs

Will the child benefit from some heavy work before being expected to focus either in play or adult-led activities?



Targeted practice: supporting communication and interaction

Difficulties with Understanding - What you might see:

During developmentally appropriate activities, and compared to expected development for their age.

- They find it difficult to follow simple, age-appropriate instructions
- They have difficulties understanding vocabulary
- They have difficulty answering simple questions and early verbal reasoning

Keep it simple

Break instructions down into parts and giving information a piece at a time

Repeat before acting

Ask the child to repeat back the instruction before acting

Use visuals

Use photos, pictures, symbols or objects of reference (matched to child's level of need) when giving instructions or when introducing vocabulary. You can also use visual support with stories and songs

Demonstrate

Describe the steps with simple language as you model the actions

Find more top tips here

[Building a Child's Vocabulary](#)

Daily routines

Practise by giving instructions with consistent language during familiar daily routines (these are easier than other types of instruction)

Increase pause lengths

as you talk and give extra time for children to respond

Use picture books

Help children remember familiar stories by guiding them to use the pictures

Provide different examples in simple contexts, for words that are new or difficult e.g. Jump: watch a frog jump into water, watch horses jump fences, practise jumping ourselves, off things, into things, on a trampoline ...)

Consider the complexity of new words

Spend more time exploring words that have abstract or difficult meanings (concept words, verbs, words about feelings)

Be aware of non-literal language Choose words carefully to make your message clear

Repeat whole-class or group instructions to the individual child

Help the child to **connect new vocabulary** with other information in their mind (how it relates to their own experiences, other words they know with similar meanings, what category the word fits into e.g. Foods/animals/toys)



Targeted practice: supporting communication and interaction

Difficulties with Expressive Language - What you might see:

During developmentally appropriate activities, and compared to expected development for their age.

- They are struggling to use single words
- They are struggling to put words together into phrases and sentences
- They are struggling to use age-appropriate grammar in their sentences (various aspects of grammar will still be developing as children leave the EYFS - this is typical, e.g. irregular past tense (broke, fell) and irregular plurals (people, children, mice)
- They are struggling to tell a simple story and/or recount something that has happened

Give choices

Give the child simple choices in play or during routines, e.g. "would you like an apple or a pear?" – show the object when you give the choice as a prompt

Use visuals

Use photos, pictures, symbols or objects of reference (matched to child's level of need) to support

Play word games

such as 'What's in the bag?' (How to play 'What's in the bag?' with your toddler - BBC Tiny Happy People)

Anticipation games

Prompt with anticipation games and carrier phrases e.g. "Here come's ...!" This may also include Ready Steady Go games

Use props or storyboards

Model with props or storyboards to prompt recall. Prompt joining in with repeated text or repetitive phrases

Focus on verbs

Focus on exploring verbs and modelling simple verb phrases (lots of varied examples of each)

Echo and expand

Echo back correctly and then add an appropriate new word or idea to the child's one word utterance

Engineer playful opportunities

to model age-appropriate next steps in grammatical development (regular past, plurals, using 'Wh' questions)

Model grammar

Engineer playful opportunities to model age-appropriate next steps in grammatical development (regular past, plurals, using 'wh' questions)

Two-word combinations

Focus on exploring and modelling easy two-word combinations in play e.g. (blank) gone (in a hiding game or peekaboo puppet play)



Targeted practice: supporting communication and interaction

Difficulties with Social Communication - What you might see:

During developmentally appropriate activities, and compared to expected development for their age

- They have difficulty understanding or using neurotypical social conventions to interact with other children and make friends
- Their play may be limited and repetitive and they may need adults to adapt their interaction strategies to support them to use play to extend their learning)



All play is valid

Remember that play that looks different isn't something to be 'improved' and all play is valid

Turn-taking games

Play simple games which encourage the child to take turns e.g. rolling a ball back and to from you to them

Share picture books to **raise awareness** of children who might communicate differently. Find some good examples [here](#)

Use visuals

Use photos, pictures, symbols or objects of reference (matched to child's level of need) to support understanding of 'my turn, your turn'

Commenting on a child's play in a non-judgemental way (or even joining in and copying it if the child allows) helps to build trust and connection



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Targeted practice: supporting communication and interaction

Difficulties with Speech - What you might see:

During developmentally appropriate activities, and compared to expected development for their age

- Their speech may be unclear and difficult to understand
- They may stammer
- They may lack confidence to speak / have selective mutism

Model and recast

- when chatting with children, repeat words back in a clear, correct way, during the flow of conversation. You **DO NOT** need to point the error out or ask them to repeat

Work closely with families

to understand how the child communicates at home and to check for concerns about speech & language development

Remove any pressure to talk and do NOT ask the child direct questions

Greet the child with a warm smile at the start of a session and then **remove the spotlight** from them

If the child IS able to speak to you, **respond naturally, without making reference to their talking**. Avoid remarks such as "It's great to hear your voice"

Phonological awareness

With children 3+, focus on early phonological awareness in conversation, play and small group activities

Use open comments

so the child can respond if they are able, but there is no expectation to (e.g. "you're making a very colourful picture, I wonder what it will turn into!")

Accept ALL communication including non-verbal communication

Top tips for children with a stammer

- Slow your rate of speech, but don't tell the child to slow down, or take a deep breath
- Keep the language load low, ask one question at a time and give plenty of time to answer
- Try not to finish their sentences for them and respond to what they say, rather than how they say it
- Have one to one time with the child where they aren't competing for your attention (around 5 minutes each day)
- Make sure everyone gets a turn in conversation
- Acknowledge speech difficulties with reassurance and encouragement, as you would with any other difficulty a child experiences
- If the child is above 2 and half, implement the above recommendations and refer to Speech and Language Therapy

If there is a pattern of not talking at a setting for more than one month (excluding the first month of a new setting or the first 6 months where a child is from a language background other than English) consider discussing a referral to Speech & Language Therapy.



Targeted and specialist services: Supporting communication and interaction

Request Early Years Inclusion Support

Make a referral to Family Hubs

Use the Speech and Language Therapy referral guidelines (to support a decision to refer) or contact the child's Speech and Language Therapist (SLT) if they are already known to the service

Make a referral to the Northumberland High Incidence Needs Team (including speech and language, autism, emotional well-being and behaviour) - SCHOOLS ONLY (two cycles of support needed)

Make a referral to the Northumberland Low Incidence Needs Team (including portage, sensory support, English as an additional language)

Use the Integrated Speech, Language and Communication Framework



Some children with speech, language and communication needs are unable to express themselves, including their emotions. They may find things more challenging, and you might see changes in their behaviour, such as: withdrawing, signs of anxiety, they may physically communicate their frustration by hurting themselves and/or others or be destructive towards objects around them. If you see any of these things then take a look at the suggestions in the social, emotional and mental health part of the document.



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Universal practice: supporting cognition and learning

Role of the Adult

Playful and self-initiated activities are the foundation for young children's learning, development and well-being. All children benefit from opportunities to play and learn. Some children will need additional opportunities, support and adaptations made so that they can learn and develop, which are adapted and thought through carefully. The 'Characteristics of Effective Teaching and Learning' are a statutory element of The Early Years Foundation Stage and it is a key responsibility of early years providers to ensure that these are used to support the learning and development of every child. The 'Characteristics of Effective Teaching and Learning' are an essential starting point for all practitioners to understand the different elements of 'Cognition and Learning.'

The Three Characteristics of Effective Learning of the Early Years Foundation Stage

Playing and exploring



Children investigate and experience things. They are willing to 'have a go'.

Engagement

Active Learning



Children concentrate and keep on trying when they encounter difficulties. They enjoy their achievements.

Motivation

Creating and thinking critically



Children have and develop their own ideas. They make links between ideas and choose ways to do things.

Thinking



Universal practice: supporting cognition and learning

Role of the Adult

- Develop visual discrimination skills by providing lots of opportunities for sorting activities, matching activities, and games where children can describe an object by feeling it without looking, then describe it again when they can see it
- Provide activities to develop visual perception skills such as: guess the object when only part is visible; or set up an obstacle course and ask children to explain what they are doing
- Use simple language and support language with visual props where appropriate
- Provide developmentally appropriate activities and make sure the child is able to access them at their own pace enabling the child to achieve success
- Ask children to repeat what you have asked, and check if they understand what you have said
- Develop auditory memory skills by playing word games such as 'I went to the shop and I bought...'. Give children messages to take to another adult, and give two step instructions – 'go to the sandpit and find a ball'
- Model how to use resources and complete activities



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Universal practice: supporting cognition and learning

An Enabling Environment

Consider the environment and help the child to focus by keeping distractions to a minimum

Have clear routines that children can easily see and follow

Ensure that activities and experiences are of high interest to maintain attention

Set up your environment so that it is stimulating and encourages children to use all their senses

Provide areas with reduced distractions

Be aware of the amount of sensory stimulation

Present the same learning intention in many different ways within the environment

Carefully choose visual support which is appropriate for the child and the situation



Targeted practice: supporting cognition and learning

What you might see:

During developmentally appropriate activities, and compared to expected development for their age

- A child having difficulties with motivation and interest, and they may appear passive
- A child struggling to focusing their attention and flitting from one thing to another
- A child who is isolated and disconnected from others
- A child who is frustrated or uses avoidance tactics
- A child who struggles to access the EYFS curriculum in multiple areas of learning
- A child who does not respond to positive praise
- A child who has difficulties with problem solving activities or avoids new activities
- A child who has difficulties remembering, recalling, and using what they have learnt in different situations

Find out what the child is interested in – use these interests to plan motivating learning experiences

Model being 'stuck' and asking for help

Offer gentle words of encouragement particularly in relation to perseverance

Create opportunities for regular revisiting and reinforcement of learning to maximise potential for the child to embed and build on that learning to be able to transfer skills

Model play and expectations, and use visuals across all provision areas

Encourage connection with others by inviting a peer into a safe favourite play space

Ensure strong links with home to support a child to feel safe, including the use of transitional comfort objects from home

Use different ways of showing children you are noticing what they are doing and are interested, for example, give child positive messages through gesture, thumbs up, winking, a gentle touch, smile, and nod to find out what they are comfortable with

Use Now and Next Boards and timers to help the child to stick at adult-led activities before doing an activity of their own choosing

Model play and interaction with a trusted adult and/or peers

Use visuals in a developmentally appropriate way to support understanding of instructions and activities



Targeted practice: supporting cognition and learning

Keep activities short and use a visual timer to help the child understand how long they have left

Break down tasks and identify the sequence of actions and skills required to complete them. For example, putting on a coat

Use personalised photobooks to share with the child for example, playing with toys they like, what happens at playtime etc.

Provide memory aids, for example, visual cues and timetables, referring to these regularly throughout the day. Make sure that these are readily available to the child and moved frequently to enable accessibility

Find opportunities to **talk about friendships using stories and puppets**

Model and extend play using commentary to engage and to reinforce language. Develop a 'little and often' approach to play and learning through modelling

Create a 'calm down kit' to promote calming down – yoga poses, bubbles, dough, glitter towers, fidget toys, windmills (personalise for each child)

Use a signal to begin and end an activity, for example tidy up song, hand signal, bell, tambourine etc.

Observe closely for behaviour triggers and spot patterns in the moment

Reflect on possible reasons for the behaviour that may be beyond the setting for example, a banging of the door may represent a primary carer leaving home

Use 'Intensive Interaction'
Watch this [video](#) to see it in action

Create a safe low arousal space/place e.g. den, small table etc. to engage the child in a 1:1 activity

Gain the child's attention by using high interest toys

Make sure **resources are clearly labelled** with pictures and words and are at the child's level, allowing independence

Build the relationship as the key person for trust and attachment

Use distraction to de-escalate a situation



Targeted and specialist services: Support for Cognition and Learning

Request Early Years Inclusion Support

Make a referral to the Northumberland Low Incidence Needs Team (including portage, sensory support, English as an additional language)

Make a referral to Family Hubs

Make a referral to the Northumberland High Incidence Needs Team (Emotional Well-Being and Behaviour) - **SCHOOLS ONLY**



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Universal practice: supporting social, emotional and mental health

Role of the Adult

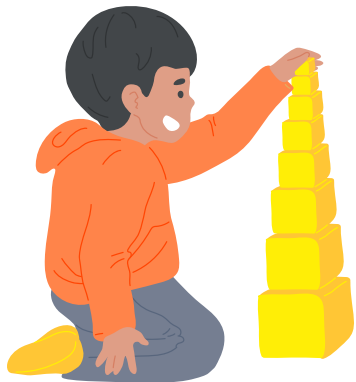
- Provide opportunities for children to verbalise their achievements together e.g. kind acts, effort/perseverance, interests/strengths which are shared with the class or placed on a board
- Give specific praise acknowledging a child's efforts as well as outcomes. Explain the behaviour that is being praised so that children know what to replicate
- Promote and regularly use vocabulary related to all feelings. Normalise references to own and others' feelings, even those which are difficult for adults to manage e.g. anger
- Read stories, play games, and use role play and artwork which explore feelings
- Support children through changes of routines with transitional objects (home to setting; during the day at the setting)
- Redirect children using their name and give instructions related to what you want them to do rather than what you don't want them to do e.g. 'Jimmy walk please' instead of 'Jimmy don't run'
- Separate the child from their behaviour. Embrace the child, challenge the behaviour
- Develop 'verbal scripts' or 'mantras' that all staff use to promote consistency and clarity for all children
- Ignore low level behaviours, where appropriate, to give space for children to recover and co-regulate with an adult.
- Offer distractions rather than confrontation wherever possible and acknowledge what the child is finding challenging
- Use visual prompts as well as limited and consistent verbal prompts



Universal practice: supporting social, emotional and mental health

Role of the Adult

- Monitor peer relationships and interactions and make adjustments where needed
- Model simple play scenarios and language that can be used by the child to help them successfully join in, and/or play alongside with their peers
- Ensure interaction takes account of children's developmental stage e.g. attention span during carpet sessions or during a 1:1 shared play session
- Find opportunities to promote sharing of feelings and joint problem solving
- Model and use techniques such as 'conflict resolution' involving children fully in understanding how their behaviour impacts others. This should include restorative conversations so that the language and process becomes a natural part of peer interactions. Explore: What has happened in a situation; What they are thinking or feeling; Who was impacted and how; What needs to happen to repair the relationship. "What happened?" This is more concrete and therefore more helpful than "Why?"
- Consider what could be done differently another time; if the child struggles to think what they would do differently consider what someone else might do instead. Practice solutions through role play and share individual photo books to explore different scenarios



Universal practice: supporting social, emotional and mental health

An Enabling Environment

Ensure displays promote and reinforce the emotionally healthy ethos, systems and policies for staff and children

Create a calm and nurturing learning environment with clear and consistent rhythms of the day

Ensure there are sufficient resources for the number of children and consider duplicates of favourite resources to avoid conflict

Give children daily opportunities to be outdoors, in nature, as much as possible

Prepare children for changes to routines by using tools such as objects of reference, visual timetables and sand timers



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Targeted practice: supporting social, emotional and mental health

What you might see:

During developmentally appropriate activities, and compared to expected development for their age

- A child having difficulties with eating or sleeping
- A child who has frequent minor physical pains and discomfort, which is unexplained
- A child who cannot accept positive praise and encouragement and actively avoids contact with and support from familiar adults
- A child who may switch from wanting close and immediate contact to pushing any indication of attention away
- A child who resists and avoids demands made of them to do adult directed tasks

Think '**sensory**'

– does the child struggle with certain textures?
Offer activities exploring different foods, and monitor any patterns

Offer praise in less direct ways.

This may include gestures (nod, thumbs up), visuals (flashcard), and brief verbal feedback before moving on

Acknowledge and validate physical sensations

- when the child shows enjoyment of an activity, ask how their body feels to draw out positives and develop interoceptive awareness

Focus praise on effort and processes rather than outcomes

Adapt language used when giving demands, for example: 'Wonder' out loud e.g., "I wonder who is going to do activity x with me first."; Give a choice of two activities using directive language e.g., "we can do activity x or y - which one?"

Consider why they cannot accept praise - do they have low self-esteem?
Attachment difficulties?

Make positive comments about the child to another adult, when the child is within ear shot

Praise others around the child for similar behaviours

Find indirect ways to maintain connection - say things such as "I got pears for snack today because I know they are your favourite"

Recognise that specific behaviours may be linked to the child's attachment style/pattern



Targeted practice: supporting social, emotional and mental health

What you might see:

During developmentally appropriate activities, and compared to expected development for their age

- A child who needs to be in control no matter at what cost
- Shows signs of anxiety, worry and being emotionally overwhelmed on a regular basis
- Withdraws or isolates themselves and does not join in with other children
- Any behaviours that are “out of character” and a change from the norm for that child
- Can react with extreme responses to minor changes

Strategies detailed here may be effective in the moment, but it will be necessary to unpick the behaviours / explore what may be the driving factors e.g. family dynamics, change in circumstances etc.

Support guided turn taking activities in pairs or very small groups

Use strategies to **allow the child a level of control** to reduce anxiety. Give directed choice e.g. When / Then

Use verbal scripts / ‘mantras’ that have been agreed and shared with all staff to provide consistency and clarity around language used

Provide additional support when a child is doing new, unknown or tricky activities

Watch this video to see an example of a child being supported through co-regulation

Acknowledge and validate feelings while addressing behaviours

Prepare the child in advance for any known challenges

Offer and encourage use of **comfort / transition objects**

As a key person, **build a strong relationship with the child and their family so you are familiar** with what the child is typically like and what is ‘out of character’ both at home and in the setting

Provide opportunities for others to play alongside the child

Create photobooks for individual children and use them to talk about people and things that provide comfort

Provide an emotional literacy intervention. Practice these strategies when the child is regulated

Encourage perseverance and boost self esteem by supporting children to develop a ‘growth mindset’. Key phrases can give the child a sense that, even though they might be finding a task difficult or beyond them at the moment, there is a chance that they will be able to do it at another point in time e.g. “That was good practice; we’ll get the hang of it the next time.”

Complete the EWB vulnerability toolkit to try to find the root of the cause

Join in play with the child and encourage others to play games / take part in activities led by the child who is finding it difficult to give some control / ownership



Targeted and specialist services: Support for Social, Emotional and Mental Health

[Request Early Years Inclusion Support](#)

[Anna Freud Centre – Common Difficulties in Under 5s](#)

[DfE – Mental Health for Early Years children](#)

[Make a referral to Family Hubs](#)

[Leuven Scales for Emotional Wellbeing and Involvement](#)

[NIES Emotional Wellbeing and Behaviour Support padlet](#)

Make a referral to the [Northumberland High Incidence Needs Team \(Emotional Well-Being and Behaviour\)](#) - SCHOOLS ONLY



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Universal practice: supporting sensory and/or physical needs

Role of the Adult

- Speak clearly at an appropriate volume. Do not shout - use normal pace and pitch
- Speak at children's level so that they can see your face
- Set clear communication rules for all children and adults
- Use signed stories and songs for all children to learn
- Before giving instructions or asking questions, use children's names, and/or a visual or physical prompt
- Offer support to help children achieve what they want without doing it for them
- Step in and stand back and offer encouragement at the right point to build each child's confidence and self-esteem
- Be a sensory detective and be aware of aspects within the environment which may be affecting children's reactions and responses
- Avoid making assumptions about a child's behaviour without considering underlying sensory differences for example, biting, screaming, nipping etc.
- Be prepared to make adjustments to routines, environments, tasks which may be difficult for some children
- Make observations of children over time and in different environments, notice and note down what the child may be finding difficult
- Speak to families about a referral to their GP if you have concerns about a child's hearing, or their GP or an optician if you have concerns about vision



Universal practice: supporting sensory and/or physical needs

An Enabling Environment

Allow shoes and socks off within the environment so children gain sensory feedback from their bare feet

Plan a wide range of opportunities for the development of physical skills, which can be differentiated and adapted for all children

Provide play with real objects

Ensure spaces are well lit and use blinds or curtains to control light and glare from sunlight

Use soft furnishings and wall coverings to reduce reverberation

Reduce unnecessary background noise

Carry out regular audits of your indoor and outdoor spaces thinking about individual children's physical access to opportunities, equipment and resources

Provide an environment with a range of surfaces, heights, textures and challenges, which encourage children to take suitable risks in their exploration and play

Close doors and windows when possible

Provide plenty of opportunities for children to practice their physical skills throughout the day and make it fun



Universal practice: supporting sensory and/or physical needs

An Enabling Environment

For groups, use a horseshoe formation to give children a clear face to face view of the practitioner

Carry out regular sensory audits of the environments that children are in

Provide specific spaces with less stimulation and input for children

Create opportunities for children to get the level of sensory stimulation they need by offering sensory breaks for example, a child who needs more stimulation - pushing heavy equipment, jumping up and down, climbing, or a child who needs reduced stimulation – using equipment which supports calming such as glitter jars etc.

Keep the layout of the room consistent and clutter free

Provide activities and experiences which enable children to use all of their senses

Where possible, use contrasting tones of colour e.g. light and dark to define different areas

Use consistent daily routines

Provide quiet places for language and listening activities



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Targeted practice: supporting children with hearing impairments

What you might see, in a child who has a hearing impairment:

During developmentally appropriate activities

- A child who misses or mishears words or instructions and needs regular reinforcement
- A child who struggles more during winter months, or if they have a cold
- A child who has difficulty understanding speech where there is background noise, or in group situations
- A child who finds it difficult to locate and identify sounds
- A child who has a delay in their language development



If the child is using hearing technology, ensure it is working and being used appropriately. Identify a key adult who can carry out listening checks and simple repairs to technology

Introduce new vocabulary before an activity or session

Get down to the child's level and make sure you are facing them when you speak to them. Ensure they can see your face and lip patterns clearly

Improve your listening environment (reduce unnecessary background noise, fit curtains, blinds or carpets, reduce or cover hard surfaces)

Model good listening and attention skills

Communicate clearly, providing language alongside activities

Ensure you have the child's attention before giving instructions. Be prepared to repeat instructions, break instructions down into clear, short steps and give visual clues to support understanding (gesture, sign, pictures etc.)



Targeted practice: supporting children with hearing impairments

What you might see, in a child who has a hearing impairment:

During developmentally appropriate activities

- A child who has errors in speech production not expected at their chronological age
- A child who relies heavily on visual cues and following other children, or adult's direction
- A child who watches your face closely when you speak
- A child who becomes tired quicker than their hearing peers as listening and concentration is harder work for them
- A child who may be withdrawn and join in less than others, especially in noisy group situations

Consider the pace and timings of activities and plan in listening breaks. Be vigilant to signs of tiredness and fatigue so that you can intervene

Prepare the child for what is expected of them, scaffold and manage group activities

Ask for advice from the Sensory Support Team

Provide opportunities to learn in a quiet environment, especially when focused listening is required

Be vigilant to changes and speak to parents/ carers if you have concerns regarding a child's hearing*



**if a child's hearing needs to be checked then parents/ carers must ask a health professional for a referral to audiology*



Targeted practice: supporting children with vision impairments

What you might see, in a child who has a vision impairment:

During developmentally appropriate activities

- A child who has a constant moving of the eyes, watery eyes or encrusted lids, frequent sties, reddened and swollen eyes or lids, drooping eyelids, cloudy pupils or their eye/ eyes turn out or in, especially when tired
- A child who appears to not see some objects or people
- A child who squints or frowns when looking, or adopts an unusual head posture
- A child who uses an unusual distance for looking – very close or far away
- A child who has problems with distance tasks such as seeing people, street signs
- A child who is reluctant to go outside
- A child who bumps into things, trips or falls (more so than their peers)
- A child who is anxious when negotiating, or missing steps, kerbs or stairs
- A child who is hesitant in sunlight, bright light, or low light

Record your concerns and observations in detail e.g. which objects? What colour? How far away? What is environment like? Lighting levels?

Use high contrast colours in the environment and learning resources

Ensure good lighting levels without glare

Provide child with additional time to adjust when moving from a light to dark area or visa versa

Highlight edges of stairs with white or yellow paint

Provide clear routes by trying to minimise obstacles

Easily accessible indoor and outdoor communal areas

Clearly marked and safe pathways outdoors

Use of verbal reinforcement to explain what is happening in the environment e.g. what is in front of them, in the distance, facial expression of peer



Targeted practice: supporting children with vision impairments

What you might see, in a child who has a vision impairment:

During developmentally appropriate activities

- A child who complains of headaches
- A child who has difficulty locating food on their plate
- A child who shows poor hand/eye coordination or miss things when reaching for them
- A child who has difficulty tracking an object
- A child who does not smile/imitate expressions from 9-12 months
- A child who has difficulty recognising familiar people
- A child who has difficulties with peer relationships

Be vigilant to changes and speak to parents/ carers if you have concerns regarding a child's vision

If they do not have a diagnosis of vision impairment, observe and note concerns. Share with child's family and advise them to visit their local optician or GP

If they have a diagnosis of vision impairment but do not have involvement from Sensory Support, complete a referral form

Ask for advice from the Sensory Support Team

If they already have a Qualified Teacher of the Vision Impaired (QTVI) from Sensory Support, contact them for personalised recommendations. Following guidance from the QTVI, adapt learning tasks resources and environment so that they are accessible e.g. adapted games



Targeted practice: supporting multi-sensory impairments

What you might see, in a child who has multi-sensory impairments:

During developmentally appropriate activities

- A child who has difficulty generalising skills and knowledge from one situation to another - they don't see the similarities and differences between different situations
- A child who has reduced ability to anticipate events – to know what is likely to happen next
- A child who learns more gradually, because they get information that is of poorer quality
- A child who is unable to learn by watching what happens around them, as sighted hearing children do (this does not mean that they necessarily have learning difficulties/ impairments)
- A child who learns through touch (this is much slower than learning through sight)
- A child who takes longer to realise that their actions affect what happens to them - this means that they take longer to learn to communicate
- A child who has difficulty understanding speech
- A child who is less motivated to move - seeing their surroundings plays an important part in encouraging children to learn to move independently

Consistently use 'now' and 'finished' boxes with objects cues for main activities

Plan for frequent rest breaks between activities

Keep furniture and resources in the same place

Use of long pauses and waiting for responses to allow for processing time

Use consistent routines and lots of repetition of the same activities over time

Adapt the environment by using a quiet and visually uncluttered space

Use songs and signing e.g. Makaton

Use transition indicators such as real objects

Use visual timetables

Provide them with different tactile sensory experiences, such as sensory massage and use a consistent routine for this each time

Use hand under hand approach for any task you want them to engage with e.g. feeling different textures



Targeted practice: supporting gross motor difficulties

What you might see:

During developmentally appropriate activities

- A child who has difficulties moving around the setting or home
- A child who finds it difficult to move around without knocking into or bumping into objects, furniture and other children
- A child who finds it difficult to balance/climb use outdoor or indoor large equipment including wheeled toys

Ensure proprioceptive needs are met

throughout the day by providing a sensory diet of tasks eg: heavy work, compressions

Provide the child with opportunities to engage in balancing and climbing tasks

which have lower risk eg: on the ground – follow the line, climb the hopscotch ladder, obstacle courses, balance bikes



Targeted practice: supporting fine motor difficulties

You might see a child who struggles to:

During developmentally appropriate activities

- Grasp and manipulate objects
- Use a pincer grasp to pick up small things
- Press, turn, push simple toys
- Use both hands together and hand eye coordination Fasten clothing using zips, buttons etc.
- Use scissors to cut and steady paper with hand
- Throw and catch
- Use and control paint brushes, mark making equipment, scissors
- Use utensils
- Drink from an open cup
- They may drop things frequently



Visit Northumbria Healthcare NHS Trust Children's Occupational Therapy website for further suggestions

Can they use a straw? Can they use a beaker with a wider straw? Is the cup stable, use of handles?

When eating, use backward chaining – helping to get it to their mouth and let them put it in

Use shaped utensils

Use of tongs, picking up small items – paper clips, raisins etc. using a pincer motion

Use thick paint brushes for those using a palmer grasp

Use bigger equipment and downsize where appropriate

With cutlery, use one at a time – spoon, then fork, then knife and fork

Hand over hand support

Use guided scissors

Backward chaining of self care skills



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Targeted practice: supporting sensory differences

What you might see:

During developmentally appropriate activities

- Avoids or withdraws from activities which involve using their sense of touch (tactile) through hands or feet. For example, messy play, painting with feet, massage etc.
- Shows distress or discomfort if touched or withdraws from cuddles, being close to others, holding hands, dislike certain clothing and may take it off etc.
- Looks for places to squeeze into or lay under, or be wrapped up in or craves rough and tumble, may push others over, likes to wear tight clothing
- Seeks out opportunities for high impact sensory experiences e.g. spinning, rocking, pushing, swinging, rolling
- Covers their ears when there are loud noises or may hum or make vocalisations to block out particular sounds or too much auditory stimulation. They may become very distressed in certain places and spaces or find things such as hand dryers, fire alarms, and vacuum cleaners frightening and over whelming
- May appear not to respond when called. Holds toys and equipment close to their face or ears, has volume on high if listening to headphones or sounds made by a toy
- Will explore their surroundings and people using their sense of smell and their mouth. This might include smelling objects, clothing, people or furniture. This may also include biting other children and chewing objects and attempting to eat, toys and equipment
- Is distracted, overwhelmed, distressed and unable to focus in an environment with lots of visual stimulation. For example, busy displays, mobiles, bright daylight, posters, notices, patterned curtains, furniture or carpets

Ensure the child has access to quiet spaces

Provide and encourage child to use **ear defenders**

Respect the wishes of the child

Apply **deep pressure** to desensitise

Consider that if a child withdraws from a provision area, it may be due to for example having to wear a painting apron which is uncomfortable

Provide safe options for being in enclosed spaces/being wrapped up

Provide a range of sensory resources including:

- Wobble cushion
- Vibrating cushion
- Swing
- Spinning cone
- Roundabout
- Sensory circuits

Gradual Exposure
Start small with just touching with one finger and increase length of time

Offer adaptive uniform if they feel uncomfortable and/ or allow the child to wear diabetic socks and/ or seamless clothing and/ or tight clothing



Targeted practice: supporting sensory differences

Gain attention prior to speaking and **get down to their level. Use visuals. Minimise sounds**

Remove visual and auditory distractions

Consider patterns within the classroom and use **more plain backgrounds**

Add blinds or curtains at the window

Consider where the child sits at carpet time

Provide warnings of any planned noises / fire alarms and/or remove the child from an area where there may be a planned alarm. **Offer an alternative to hand driers.**



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Targeted and specialist services: Support for Sensory and/or Physical Difficulties

[Make a referral to Family Hubs](#)

[OT Screening Toolkit Document](#)

[Sight Advice](#)

[NIES Low Incidence Team \(LINT\) Sensory Support Padlet](#)

[Royal National Institute of Blind People](#)

[National Deaf Children's Society Website](#)

Northumberland Sensory Support: If you would like to talk to anyone in our team, please phone 01670 624854 and our admin team will deal with your enquiry. Alternatively email us at sensorysupport@northumberland.gov.uk

[The Children's Bowel and Bladder Charity \(ERIC\)](#)

[The Sleep Charity](#)

Northumbria Health Care Occupational Therapy Sensory Processing Service: If you require any advice or support, please phone 01670 564050 [To book a free consultation, see the flyer](#)

[Make a referral to Sensory Processing Occupational Therapy Service](#)

[Sensory Processing: A Guide for Parents](#)

[NHS Children's Occupational Therapy](#)



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Appendix 1: Definition of the Four SEND Broad Areas

Communication and Interaction

“Children and young people with speech, language and communication needs (SLCN) have difficulty in communicating with others. This may be because they have difficulty saying what they want to, understanding what is being said to them or they do not understand or use social rules of communication. The profile for every child with SLCN is different and their needs may change over time. They may have difficulty with one, some or all of the different aspects of speech, language or social communication at different times of their lives.”

Cognition and Learning

“Support for learning difficulties may be required when children and young people learn at a slower pace than their peers, even with appropriate differentiation. Learning difficulties cover a wide range of needs, including moderate learning difficulties (MLD), severe learning difficulties (SLD), where children are likely to need support in all areas of the curriculum and associated difficulties with mobility and communication, through to profound and multiple learning difficulties (PMLD), where children are likely to have severe and complex learning difficulties as well as a physical disability or sensory impairment.”

Social, Emotional and Mental Health Difficulties

“Children and young people may experience a wide range of social and emotional difficulties which manifest themselves in many ways. These may include becoming withdrawn or isolated, as well as displaying challenging, disruptive or disturbing behaviour. These behaviours may reflect underlying mental health difficulties such as anxiety or depression, self-harming, substance misuse, eating disorders or physical symptoms that are medically unexplained. Other children and young people may have disorders such as attention deficit disorder, attention deficit hyperactive disorder or attachment disorder.”

Sensory and/or Physical Needs

“Some children and young people require special educational provision because they have a disability which prevents or hinders them from making use of the educational facilities generally provided. These difficulties can be age related and may fluctuate over time. Many children and young people with vision impairment (VI), hearing impairment (HI) or a multi-sensory impairment (MSI) will require specialist support and/or equipment to access their learning, or habilitation support. Children and young people with an MSI have a combination of vision and hearing difficulties. Information on how to provide services for deaf blind children and young people is available through the Social Care for Deaf blind Children and Adults guidance published by the Department of Health.”

Taken from SENCoP, 2015



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Appendix 2: Further information and support

[Conception to 5 Integrated Plan](#)

[Family Hubs](#)

[Northumberland Portage Service](#)

[Growing Healthy Northumberland](#)

[Contact](#)

[National Association Special Educational Needs \(NASEN\)](#)

[Northumberland Information Advice and Support Service \(IASS\)](#)

[Northumberland Local Offer](#)

[Early Years Inclusion and SEND](#)

[Toby Henderson Trust: The Doorway to Early Action in Autism](#)

[Northumberland Parent Carer Forum](#)



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