

Unlocking the Potential of Every Child

Inclusive Levels of Provision

A Graduated Approach

2021-2022

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SOD Terms & Descriptions

Graduated Approach

The (graduated) approach recognises that there is a continuum of special educational needs and that, where necessary, increasing specialist expertise should be brought to bear on the difficulties that a child or young person may be experiencing." (The SEN Code of Practice 2014)

- I. **Level 1:** high quality teaching where teachers accommodate individual differences in ability, learning style and behaviour, through effectively differentiated classroom practice.
- II. Level 2: personal support and/or curriculum modification to enable a student to engage with, and participate in, appropriately challenging learning experiences and achieve within age-related expectations. Support teachers and or in-school specialists are likely to support this process by observing lessons and making recommendations as well as providing support through professional coaching and monitoring.
- III. **Level 3:** individualised programmes to accelerate progress or enable students to achieve their potential. This provision is 'additional to' or 'different from' the provision required to meet the needs of most of students within the school, and is likely to include the use of specialist approaches, intervention or support services.

(Implementing Inclusive Education: A Guide for Schools - Creating the capacity for change, 2019)

Social, Emotional, Behavioural

 Behaviour that presents a barrier to learning. Emotional problems such as depression, eating disorders, attention deficit disorder or attention deficit hyperactivity disorder (ADD/ADHD. Oppositional Defiant Disorder (ODD), Conduct Disorder (CD), childhood psychoses and syndromes such as Tourette.

Sensory Needs

- Visual impairment: Visual impairment is when a person has sight loss that cannot be fully corrected using glasses or contact lenses
- Hearing impairment: Hearing impairment, deafness, or hearing loss refers to the inability to hear things, either totally or partially.

Speech and Language disorders

- Expressive language disorder: problems using oral language or other expressive language. Students' understanding of language is likely to exceed their ability to communicate orally.
- Receptive language disorder: problems understanding oral language or in listening.
- Global language disorder: difficulties with both receptive and expressive language. Global language disorders affect both the understanding and use of language.

Communication and Interaction

- Autistic Spectrum Disorders (ASD's) are neurological disorders are characterized by difficulties with social communication, social interaction, social imagination and flexible thinking.
- Asperger's Syndrome (Autism level 1) is characterised by subtle impairments in three areas of development or in language acquisition. However, students with Asperger's syndrome often have communication difficulties.

Dyslexia

 Dyslexia is a specific difficulty with learning to read fluently and with accurate comprehension despite normal or above average intelligence. This includes difficulty with phonologic awareness, phonological decoding, processing speed, orthographic coding, auditory short-term memory and language skills/verbal comprehension.

Dysgraphia

 Dysgraphia is a specific learning difficulty that affects written expression. Dysgraphia can appear as difficulties with spelling, poor handwriting and trouble putting thoughts on paper. Dysgraphia can be a language based and/or non-language based disorder.

Dyscalculia

 Dyscalculia is a specific learning difficulty that affects the ability to acquire arithmetical skills. Learners with dyscalculia may have difficulty understanding simple number concepts, lack an intuitive grasp of numbers and have problems learning number facts and procedures.

Dyspraxia

 Dyspraxia goes by many names: developmental coordination disorder, motor learning disability, motor planning difficulty and apraxia of speech. It can affect the development of gross motor skills like walking or jumping. It can also affect fine motor skills or speech.
 Dyspraxia is not a sign of muscle weakness. It is a brain based condition that makes it hard to plan and co-ordinate physical movement.

Cognition and Learning

- Learning difficulties 1 Below average general intellectual functioning often reflected in a slow rate of maturation, reduced learning capacity and inadequate social adjustment
- Learning difficulties 2 Significant learning difficulties which have a major effect on participation in the mainstream curriculum, without support.
- Profound and Multiple Learning Difficulty (PMLD) Complex learning needs resulting in severely impaired functioning in respect of a basic awareness of themselves, the people and the world around them. They may include physical disabilities or a sensory impairment. A high level of support likely to be required.

2. Vision and Mission

At Safa British school we strive to unlock the potential of **all** students regardless of individual differences. We uphold the mission of the Dubai Disabilities Strategy; to create a fully inclusive society by 2020. We are committed to H.H. Sheikh Mohammed bin Rashid Al Maktoum's 2021 vision, enabling the UAE to become an inclusive, barrier free and rights-based society. Hence, we endeavour to protect and ensures the success of all groups of students at SBS.

In line with the Dubai Framework for Inclusive Education (2017), we believe in:

- The equal right to education in a 'common learning environment'
- Proactively removing barriers
- The value of diversity
- Recognising each child's unique capability
- Modifying teaching and curricular approaches to ensure all children have an equal opportunity to progress
- The rejection of ability labelling and discrimination

In correspondence with Law No. (2) of 2014 Concerning Protection of the Rights of Persons with Disabilities in the Emirate of Dubai; it is the objective of Safa British School to:

- Ensure students of determination enjoy their rights equitable;
- Foster a school ethos which upholds the dignity and respect of all students regardless of difference or disability;
- Protect students identified as SOD from discrimination;
- Enable students of determination to enjoy the right to education at all levels, which will contribute towards their integration into society as an effective member;
- Prevent any form of discrimination against a student with Disability, including an act or omission intended to deny enjoyment of a student's rights to equal provision. Such as: Educational exclusion; direct discrimination and indirect discrimination; as defined in the Dubai Framework for Inclusive Education (2017).

3. Social, Emotional, Behavioural (SEB)

Description: Behaviour that presents a barrier to learning. Emotional problems such as depression, eating disorders, attention deficit disorder or attention deficit hyperactivity disorder (ADD/ADHD. Oppositional Defiant Disorder (ODD), Conduct Disorder (CD), childhood psychoses and syndromes such as Tourette's.

3a. SEB Level 1 concern

Quality First Teaching Strategies for Social, Emotional or Behavioural difficulties may include:

Physical activity

- Brain gym
- Mindfulness or Yoga, such as: 'Go-noodle' or 'Peace out'
- Vigorous activity breaks, such as: 5 minutes on the trampoline
- Alternative seating, such as wobble cushion, fit ball, standing desk
- Fiddle toy
- Regular exercise

Outdoor learning opportunities

Daily organisational aids

- Clear and consistent classroom structure
- Individual timers
- Whole class visual timetables
- Individual 'Now, Next, Then' cards
- Seating plan or work station

Class work organisational support

- Planning templates
- Chunked, simplified instructions
- Visual checklists
- WAGOLL (exemplars of expected work before commencement of task)

Emotional & Self regulators

- Break or time-out card
- Coping strategies, such as: breathing techniques, water breaks
- Whole class PSHE and circle time
- Reflective, restorative practice
- Small social play groups

Oppositional behaviour support

- Likelihood instruction sequencing
- Giving choices
- Empowerment and self-esteem building

Reinforcement

- Consistent praise to acknowledge effort (be specific by describing the action you are praising)
- House points
- Timely rewards system, such as: Token system, sticker chart

Assistive technology

- Verbal planning applications, such as: Keezy
- Laptop to support organisation of writing

3b. SEB Level 2

Targeted level 2 inclusion support for Social, Emotional or Behavioural difficulties.

Entry criteria:

- → Parent/ teacher/ agency referral or concern form
- → LINK team observation
- → An or GL MCMHPW score indicative of low mental health/ wellbeing

Assessment tool:

Measures of Children's Mental Health & Psychological Wellbeing (MCMHPW) / Emotional Literacy

Areas assessed:

- Belonging
- Distress
- Enjoyment
- Resilience
- Responsiveness
- Enjoyment
- Social Behaviour

Age range:

FS, KS1 & KS2:

Administered by:

LINK Team. HLTA +

Interventions:

1. The Zones of Regulation programme

Description

Emotional & Behavioural intervention geared toward helping students gain skills in consciously regulating their actions, which in turn leads to increased control and problem-solving abilities.

Age range

KS1 & KS2

Method

1:1

■ Time, Frequency & Duration

20 minutes 2 x per week for 6 weeks

■ Exit criterion

Must have made expected progress on the MCMHPW (Baseline comparative)

Must no longer exhibit mental health/ wellbeing concerns (Parent/ teacher judgement questionnaire)

2. Socially Speaking

Description

Social & Emotional intervention aimed at building self-esteem and improve listening skills and expressive language abilities.

Age range

FS2-KS2

Method

1:1 and small group

■ Time, Frequency & Duration

15 minutes 3 x per week for 6 weeks

Exit criterion

Must have made expected progress on the MCMHPW (Baseline comparative)

Must no longer exhibit mental health/ wellbeing concerns (Parent/ teacher judgement questionnaire)

3c. SEB Level 3

Level 3 support is highly individualised, this may include a number of divergent support structures, such as:

- An Individual Learning Support Assistant
- An alternative curriculum, such as ABLES, VB-MAPP, ASDAN
- An adapted curriculum, such as a flexible year group curricular goal
- External occupational or speech therapy
- Support from a BCBA certified behavioural therapist
- A functional behaviour plan
- An individualised timetable
- A modified classroom environment
- Weekly IEP target tracking
- Weekly 1:1 individualised intervention
- Collaboration with external professionals, such as Psychologists or consultants
- Internal 'Nurture' IEP and provision with therapeutic approaches to developmental curriculum programs with SEN teacher, BCBA and Speech overseeing

4. Sensory Needs

Description:

 Visual impairment: Visual impairment is when a person has sight loss that cannot be fully corrected using glasses or contact lenses

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- Hearing impairment: Hearing impairment, deafness, or hearing loss refers to the inability to hear things, either totally or partially.
- Sensory Processing disorder: a condition in which the brain has trouble receiving and responding to information that comes in through the senses.

4a. Sensory Needs Level 1 concern

Quality First Teaching Strategies for sensory needs may include:

Hearing

- Seat close to the front of the class with clear view of teacher to allow for lip reading
- Ensure that any background noise is minimised
- Clearly repeat any questions and comments
- Do not speak when facing the whiteboard
- Provide instructions in writing and with visuals
- Pre-teach subject specific vocab
- Use video and film where appropriate
- Seat near peer helper

Vision

- Alternative presentation of text: large size, alternate colour, brail
- Pre-teaching opportunities to hear texts prior to lesson
- Verbal teaching style strategies should be utilised
- Verbalise what is written on the whiteboard
- Provide an individual orientation to new spaces
- Inform the student if you plan to use videos, slides, or overheads, and discuss alternative ways of presenting the necessary information
- Consider reading volume expectations
- Feedback verbally
- Consider glare from fluorescent lights or sunlight when seating the student
- Use tactile graphics where necessary

Sensory processing

- Adjust desk and chair to ensure correct seating position (feet flat on floor, hips 90 degrees angle)
- Alternative seating, such as: wobble cushion, fit ball, standing desk
- Attach ankle elastic bands to chair
- Weighted pillows and vests
- Fidget toys
- Provide designated carpet square or outline a space

- Plan for alternate working positions such as lying on the carpet, using a clip board
- Ear plugs
- Sensory breaks
- Movement breaks
- Visual schedule

4b. Sensory Needs Level 2

Targeted level 2 inclusion support for the sensory processing needs:

Entry criteria

To meet the criteria for level 2 provision, students must have had the following:

- → Parent/ teacher/ agency referral
- → LINK team observation
- → Sensory Profile assessment

Assessment tool

Sensory Profile

Areas assessed:

- Auditory
- Visual
- Touch
- Oral
- Body positioning
- Conduct
- Social
- Behavioural

Age range:

FS - KS2

Administered by:

Support Teacher +

Interventions

- 1. Sensory Diet
- Purpose

Sensory diet is a carefully designed, personalized activity plan that provides the sensory input a person needs to stay focused and organized throughout the day.

Age range

FS - KS2

Method

individual

■ <u>Time, Frequency & Duration</u>

On going

Exit criterion

Review of sensory needs

4c. Sensory Needs Level 3

Level 3 support is highly individualised, this may include a number of divergent support structures, such as:

- An Individual Learning Support Assistant
- An adapted curriculum, such as a flexible year group curricular goal
- External occupational or speech therapy
- A modified classroom environment
- Modified apparatus & resources
- Weekly IEP target tracking
- Weekly 1:1 individualised interventions
- Collaboration with external professionals, such as physicians or consultants
- Internal 'Nurture' IEP and provision with therapeutic approaches to developmental curriculum programs with SEN teacher, BCBA and Speech overseeing

5. Speech and Language

Description:

- Expressive language disorder: problems using oral language or other expressive language.
 Students' understanding of language is likely to exceed their ability to communicate orally.
- Receptive language disorder: problems understanding oral language or in listening.
- Global language disorder: difficulties with both receptive and expressive language. Global language disorders affect both the understanding and use of language.

5a. Speech & Language Level 1 concern

Quality First Teaching Strategies for Speech & Language difficulties may include:

Understanding support

- Pre teaching of vocabulary
- Visual and pictorial instructions
- WAGOLL (exemplars of expected work before commencement of task)
- Chunked, simplified instructions
- Non-verbal cues, such as: Makaton

Speech support

- Talking partners
- Modelled language
- Recast speech
- Allow thinking time
- Teach question and answer strategies, i.e. explicit teaching of wh questions and because answers
- Visual communication cards, such as: PECs

Written work support

- Alternative presentation of written work, i.e: filmed, voice recorded, roleplay, drawing, tech presentation
- Writing frames
- Whole class word banks
- Sentence starter
- Writing/ calculation rules checklist
- Planning documents, such as: story mountains, storyboards
- Vocabulary word mats with visuals
- Levelled phase sound mats
- A scribe

Assistive technology

- Test to speech software such as Dragon
- Verbal planning applications, such as: Keezy
- Laptop

5b. Speech & Language Level 2

Targeted level 2 inclusion support for Social, Emotional or Behavioural difficulties.

Entry criteria

To meet the criteria for level 2 Speech and language provision, students must have had the following:

→ Teacher/ parent/ external assessment

- → LINK Observation
- → Language link or GL assessment score indicative of moderate severe delay
- → Teacher engagement form

Assessment tool

Language Link Assessment / BPVS / Welcome

Areas assessed:

- Concepts
- Verb Tenses
- Instructions
- Pronouns
- Negatives
- Questions
- Verbal Reasoning

Age range:

■ Infant language link: Age 4 - 8 years, FS2 - Y2, Junior language link: Age 7 - 11 years, Y3 - Y6

Administered by:

LINK Team. HLTA +

Intervention

1. Language Link Intervention

Description

To support children with mild-moderate speech and language difficulties. Providing targeted language support to help children realise their potential for effective communication and interaction.

Age range

■ Infant language link: Age 4 - 8 years, FS2 - Y2, Junior language link: Age 7 - 11 years, Y3 - Y6

Method

Small group

Time, Frequency & Duration

15 minutes 2 x per week, 4 - 8 weeks (year and category dependent)

Exit criterion

Must have made expected progress on the teacher engagement scale

5c. Speech & Language Level 3

Level 3 support is highly individualised, this may include a number of divergent support structures, such as:

- An Individual Learning Support Assistant
- An alternative curriculum, such as ABLES, VB-MAPP, ASDAN

- An adapted curriculum, such as a flexible year group curricular goals
- External occupational or speech therapy
- Support from a BCBA certified behavioural therapist
- A functional behaviour plan
- An individualised timetable
- A modified classroom environment
- Weekly IEP target tracking
- Weekly 1:1 individualised interventions
- Collaboration with external professionals, such as Psychologists or consultants
- Internal 'Nurture' IEP and provision with therapeutic approaches to developmental curriculum programs with SEN teacher, BCBA and Speech overseeing

6. Communication and Interaction

Description: Autistic Spectrum Disorders (ASD's) are neurological disorders are characterized by difficulties with social communication, social interaction, social imagination and flexible thinking.

Asperger's Syndrome (Autism level 1) is characterised by subtle impairments in three areas of development or in language acquisition. However, students with Asperger's syndrome often have communication difficulties.

6a. Communication & Interaction Level 1 concern

Quality First Teaching Strategies for Communication & interaction difficulties may include:

Consistent and clear scheduling

- Visual timetable
- Structured classroom routines and environment
- Routine prompt picture cards
- Individual workstation

Communication support

- Picture communication system, such as: PECS
- Non-verbal communication prompts, such as Makaton
- Key phrase flashcards
- Clear instructions (without metaphors or inference)
- Explicit expectations, such as: Now (work) Next (break/reward)
- Clear, time bound expectations

Social support

- Buddy system
- Whole class PSHE, circle time
- Social stories
- Supported play opportunities
- Communication prompt card

Reinforcement

- Praise for target behaviour (see pivotal response strategies)
- Token system of reinforcement
- Now (work) and Next (chosen reward) cards



Targeted level 2 inclusion support for Communication & Language difficulties.

Entry criteria

To meet the criteria for level 2 communication and interaction provision, students must have had the following:

- → Parent/ teacher/ agency referral
- → LINK team observation
- → MCMHPW assessment

Assessment tool:

VB-MAPP / ABLES

Qualitative teacher and parent interview data

Measures of Children's Mental Health & Psychological Wellbeing (MCMHPW)

Areas assessed:

Responsiveness

Social Behaviour

Age range:

FS, KS1 & KS2:

Administered by:

LINK Team HLTA +

Intervention

1. We Thinkers! Social Explorers

Purpose

To develop complex social concepts and vocabulary: Thinking Thoughts and Feeling Feelings, The Group Plan, Thinking With Your Eyes, Body in the Group, and Whole Body Listening.

Age range

FS1 - Y3

Method

1:1 and small group

Time, Frequency and Duration

15 mins 2 x per week, Minimum 6 weeks. May be used as an ongoing intervention for children with communication and interaction difficulties.

Exit criterion

Must have made expected progress on the MCMHPW (Baseline comparative)

2. Reading between the lines

Purpose

This book is designed for teachers and speech & language therapists working in the fields of language and literacy, and concerned with developing inferencing skills in their students. The ability to draw inference is a crucial element in the comprehension of written language, and this resource will be a valuable aid in mainstream classes throughout Key Stage 2. It is especially appropriate for work with children with speech, language and communication needs and those on the autistic spectrum, who are likely to have particular difficulty understanding inference.

Age range

KS2

Method

1:1 and small group

■ Time, Frequency and Duration

15 mins 2 x per week, Minimum 6 weeks. May be used as an ongoing intervention for children with communication and interaction difficulties.

Exit criterion

Must have made expected progress on the MCMHPW (Baseline comparative)

6c. Communication & Interaction Level 3

Level 3 support is highly individualised, this may include a number of divergent support structures, such as:

- An Individual Learning Support Assistant
- An alternative curriculum, such as ABLES, VB-MAPP, ASDAN
- An adapted curriculum, such as a flexible year group curricular goal
- External occupational or speech therapy
- Support from a BCBA certified behavioural therapist
- A functional behaviour plan
- An individualised timetable
- A modified classroom environment
- Weekly IEP target tracking
- Weekly 1:1 individualised intervention
- Collaboration with external professionals, such as Psychologists or consultants
- Internal 'Nurture' IEP and provision with therapeutic approaches to developmental curriculum programs with SEN teacher, BCBA and Speech overseeing

7. Dyslexia

Description: Dyslexia is a specific difficulty with learning to read fluently and with accurate comprehension despite normal or above average intelligence. This includes difficulty with phonologic awareness, phonological decoding, processing speed, orthographic coding, auditory short-term memory and language skills/verbal comprehension.

7a. Dyslexia Level 1 concern

Quality First Teaching Strategies for indicators of Dyslexia may include:

Readability consideration

- Dyslexia friendly fonts, such as: Comic Sans, Sassoon or Arial. Avoid Times New Roman or other cursive scripts.
- Coloured background on PowerPoints
- Off white paper for handouts
- Bullet points and numbered information
- Visuals to link to text
- 1.5 line spacing (minimum)

Phonological awareness

- Model the correct usage of English
- Ability levelled guided reading books

Working memory

- Pre-teach vocabulary
- Explore different spelling techniques and try to make them memorable eg, there's a "pie" in "piece of pie"
- Visual checklist

Processing speed

- Thinking time
- Talking partners
- WAGOLL

Written work

- Alternative presentation of written work, i.e: filmed, voice recorded, roleplay, drawing, tech presentation
- Writing frames
- Pencil grips
- Whole class word banks
- Sentence starter
- Writing/ calculation rules checklist
- Planning documents, such as: story mountains, storyboards
- Vocabulary word mats with visuals
- Levelled phase sound mats
- Scribe

Assistive technology

- Verbal planning applications, such as: Keezy
- Laptop
- Speech to text software
- Text to speech software

7b. Dyslexia Level 2

Targeted level 2 inclusion support for the specific learning difficulty dyslexia:

Entry criteria

To meet the criteria for level 2 dyslexia provision, students must have had the following:

- → Parent/ teacher/ agency referral
- → LINK team observation
- → GL Dyslexia screener or assessment indicating need
- → CAT 4 discrepancy may indicate: higher nonverbal lower verbal

Assessment tool

GL Dyslexia Screener

YARC / PHAB

Areas assessed:

To identify individuals who are significantly below their peers in important phonological abilities

To determine strengths and weaknesses among developed phonological processes

To document an individual's progress in phonological processing as a consequence of special intervention programmes.

Age range:

KS1 & KS2

Administered by:

Learning Support Teacher/ Senior Leader

Interventions

1.Beat Dyslexia

Purpose

To develops literacy skills by combining successful phonological approaches with the very best of conventional, multi-sensory and structured teaching methods.

Age range

KS1 - KS2

Method

1:1

Time, Frequency & Duration

10 -15 minutes 4 x per week

Duration

4 weeks booster

Ongoing dyslexia support

Exit criterion

Expected progress

2. SNIP Dyslexia

Purpose

Aimed at increasing reading and spelling and uses the primary high frequency words (HFW).

Age range

Year 3-6

Method

Small group - Home practice

Time and Frequency

10 minutes 4 x per week

Duration

Half term booster
Ongoing dyslexia support

Exit criterion

80% accuracy on SNIP checklists

3. Toe by Toe

Purpose

Teaches dyslexic children to read polysyllabic words through syllable diversion. Deals with word-building alone, without emphasizing syllable stress.

Age range

Year 3-6

Method

Small group

Time and Frequency

5-10 minutes 4 x per week

Duration

Half term booster

Ongoing dyslexia support

Exit criterion

Toe by Toe programme completion

7c. Dyslexia Level 3

Level 3 support is highly individualised, this may include a number of divergent support structures, such as:

- An Individual Learning Support Assistant in core subjects
- An alternative curriculum, such as ABLES, VB-MAPP, ASDAN
- An adapted curriculum, such as a flexible year group curricular goal
- External speech therapy
- An individualised timetable
- A modified classroom environment
- Weekly IEP target tracking

- Weekly 1:1 individualised interventions
- Collaboration with external professionals, such as Psychologists or consultant.

8. Dysgraphia

Description: Dysgraphia is a specific learning difficulty that affects written expression. Dysgraphia can appear as difficulties with spelling, poor handwriting and trouble putting thoughts on paper. Dysgraphia can be a language based and/or non-language-based disorder.

8a. Dysgraphia Level 1 concern

Quality First Teaching Strategies for Dysgraphia may include:

Written work

- Adjusted expectation for volume of written work
- Allow more time for written tasks
- Reduce copying. Stick in dates, LOs , questions
- Alternative presentation of written work such as: film, voice recorded, roleplay, drawing, tech presentation
- Pre-teaching
- Writing frames
- Whole class word banks
- Sentence starter
- Writing or calculation rules checklist
- Planning documents, such as: story mountains, storyboards
- Vocabulary word mats with visuals
- Levelled phase sound mats
- Scribe
- Teach touch typing

Handwriting

- Fine motor skills activities
- Pencil grips
- Teach & model correct pencil grip
- Finger gym activities
- Letter formation mats on desk
- Re-teaching of Letter formation strategies and rhymes

Assistive technology

- Verbal planning applications, such as: Keezy
- Laptop
- Speech to text software

8b. Dysgraphia Level 2

Targeted level 2 inclusion support for the specific learning difficulty dysgraphia:

Entry criteria

To meet the criteria for level 2 dysgraphia provision, students must have had the following:

- → Parent/ teacher/ agency referral
- → LINK team observation
- → swft Motor Skills indicators checklist

Assessment tool

Swft Motor Skills Indicator

Areas assessed:

- Pre-writing skills
- Handwriting fluency

Age range:

KS1 & KS2

Administered by:

LSA +

Interventions

- 1. Swft Motor Skills Intervention
- Purpose

To cover typical fine motor difficulties experienced by primary school children. Covering complex fine motor and pre-writing skills, all the way up to handwriting fluency.

Age range

KS1 - KS2

Method

1:1 or small group

■ Time, Frequency & Duration

10 -15 minutes 3 x per week

Duration

4 weeks

Exit criterion

Expected progress - Swft Motor Skills Indicator

8c. Dysgraphia Level 3

Level 3 support is highly individualised, this may include a number of divergent support structures, such as:

- An Individual Learning Support Assistant in core subjects
- An alternative curriculum, such as ABLES, VB-MAPP, ASDAN
- An adapted curriculum, such as a flexible year group curricular goals
- External occupational therapy
- A modified classroom environment
- Weekly IEP target tracking
- Weekly 1:1 individualised interventions
- Collaboration with external professionals, such as SOD consultants

9. Dyspraxia

Description: Dyspraxia goes by many names: developmental coordination disorder, motor learning disability, motor planning difficulty and apraxia of speech. It can affect the development of gross motor skills like walking or jumping. It can also affect fine motor skills or speech. Dyspraxia is not a sign of muscle weakness. It is a brain based condition that makes it hard to plan and co-ordinate physical movement.

9a. Dyspraxia Level 1 concern

Quality First Teaching Strategies for Dyspraxia difficulties may include:

Written work

- Adjusted expectation for volume of written work
- Allow more time for written tasks
- Reduce copying. Stick in dates , LOs , questions
- Alternative presentation of written work, i.e: filmed, voice recorded, roleplay, drawing, tech presentation
- Scribe
- Teach touch typing

Fine motor skills

- Activities such as: Threading and lacing, Tongs or teabag squeezers, Manipulation games: such as 'Pick up Sticks' and 'Connect 4'.
- Play-doh: Using the fingers, not the hands as whole
- Construction: that requires pushing and pulling with fingers (e.g. 'Mobilo', 'K'nex' or 'Lego').
- Storing construction materials in jars with screw lids that need to be opened and closed as the materials are needed and when packed away.
- Craft: Make things using old boxes, egg cartons, wool, paper and sticky or masking tape.
- Opportunities for hand warm ups and finger gym before writing may also support this.
- To encourage a tripod grip: try placing a pompom or a coin in the palm as the student writes,
- Try a pencil gripper; Ensure the pencil sits on the webbing; use a short and stubby pencil to encourage a tripod grip.

Gross motor skills

- To write neatly, efficient postural control and well developed shoulder and wrist muscles are needed. To develop this, place pattern tracing on a vertical surface
- Hop Scotch for hopping, or other games that encourage direct task/skill practice.
- Wheelbarrow walking races for upper body strength and postural or trunk control.
- Unstable surfaces: Walking/climbing over unstable surfaces (e.g. large pillows) as it requires a lot of
 effort and increases overall body strength.
- Catching and balancing: Standing with one foot on a ball while catching another ball (encourages balance while practicing catching and throwing).
- Large balls: Begin catching with a large ball/balloon and only after the skill is mastered, move to a smaller sized ball. Obstacle courses: to combine lots of gross motor skills together into one practice.
- Playground climbing and swinging. Swimming

Motor planning

- Sequencing activities: To help the child understand that things need to be completed in the correct order for the desired outcome.
- Breaking activities into smaller steps: Ask the child to write down the steps of an activity so that they can plan how to complete the task.
- Simon Says: To improve body awareness and movement planning.

9b. Dyspraxia Level 2

Targeted level 2 inclusion support for the specific learning difficulty dyspraxia:

Entry criteria

To meet the criteria for level 2 dysgraphia provision, students must have had the following:

- → Parent/ teacher/ agency referral
- → LINK team observation
- → swft Motor Skills indicators checklist

Assessment tool

Swft Motor Skills Indicator

Areas assessed:

- Gross motor
- Complex fine motor
- Pre-writing skills
- Handwriting fluency

Age range:

KS1 & KS2

Administered by:

LSA +

Interventions

- 1. Swft Motor Skills Intervention
- Purpose

To cover typical gross and fine motor difficulties experienced by primary school children. Arranged in a developmental sequence, starting with foundation skills in movement and body awareness, moving on to more complex fine motor and pre-writing skills, all the way up to handwriting fluency.

Age range

KS1 - KS2

Method

1:1 or small group

■ Time, Frequency & Duration

10 -15 minutes 3 x per week

Duration

4 weeks

Exit criterion

Expected progress - Swft Motor Skills Indicator

9c. Dyspraxia Level 3

Level 3 support is highly individualised, this may include a number of divergent support structures, such as:

An Individual Learning Support Assistant in core subjects

- An alternative curriculum, such as ABLES, VB-MAPP, ASDAN
- An adapted curriculum, such as a flexible year group curricular goals
- External occupational therapy
- A modified classroom environment
- Weekly IEP target tracking
- Weekly 1:1 individualised interventions
- Collaboration with external professionals, such as SOD consultants

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