

Inclusion for All

Meeting the Needs of Children in Early Years Settings

Good Practice Guide 2021





Inclusion for All - Good Practice Guide

Meeting the Needs of Children in Early Years Settings

Introduction

This Good Practice Guide has been developed in partnership with Education, Health and Social Care including parents, childminders and practitioners. The aim of the guide is to provide early years settings and practitioners with practical help and information to enable 'Inclusion for All' for all children including those with emerging or identified needs and disabilities.

The purpose of this guide is to ensure all children are successfully included and supported in Cardiff and the Vale of Glamorgan to access their entitlements and have their individual needs met through a person centred approach.



The Good Practice has been written by the Early Years Inclusion Team in collaboration with representation from Education, Health, Social Care, and the Third Sector across Cardiff and the Vale of Glamorgan. Representation from the following services/professionals contributed to the document:

- ✓ A range of practitioners from settings including day nurseries, playgroups and maintained nurseries
- ✓ Childminders
- ✓ Parents
- ✓ Specialist Teachers and Transition Workers from Early Years Inclusion, Hearing and Visual Impairment
- ✓ Health Teams, including Health Visitors, Specialist Health Visitors, Portage and Resilience Team
- ✓ Educational Psychology Service
- Therapy Services including Speech and Language, Physiotherapy and Occupational Therapy
- Disability Index and Family Information Service
- ✓ Flying Start
- ✓ Third Sector including SNAP Cymru and Action for Children

Thank you to all who have contributed.

Inclusion for All - Good Practice Guide Meeting the Needs of Children in Early Years Settings

Our task is to help children to climb their own mountains, as high as possible. No one can do more. Loris Malaguzzi



Throughout this guide the term 'settings' refers to any childcare setting, early years provision or childminder service. The term 'parents' refers to any adult, carer or service with parental responsibility for a child.

Contents

1.	Legislation	1
	The United Nations Convention of the Rights of the Child (UNCRC)	1
	The Equality Act 2010	3
	Additional Learning Needs and Educational Tribunal Act 2018 (ALNET)	4
	The Additional Learning Needs (ALN) Code	5
2.	A Person Centred Approach	7
	The Voice of the Child	7
	One Page Profiles	8
3.	Inclusion for All	9
	Inclusive Practice	11
	Workforce	12
	Creating an Accessible, Inclusive Environment	13
	Inclusive Approaches	14
	Supporting Language Development	15
	Sensory Processing	17
	Using a Multi-Sensory Approach	25
	Benefits of Messy Play	27
	Visual, Hearing and Multi-Sensory Impairments	29
	Targeted Provision	31
	Meeting the Healthcare and Physical Needs of Children	33
4.	Transition	37
	Children with Additional Needs	39
	Children with English as an Additional Language	40
	Dealing with Parental Anxiety	41
	Ideas to supporting transitions into setting	42
5.	Working in partnership	43
	Working effectively with parents	43
	Raising concerns with parents	45
	Building on positive relationships with parents	46
	Avoiding disagreements	46
	Working with other professionals	49
	The Disability Index	51
	The Family Information Service	52
6.	Meeting the Needs of Children through Early Identification	53
	Model of Inclusive Provision	53
	Observation	55
	Monitoring and Review Cycle	57
	Identifying a child who may have an Additional Learning Need	58
	Informing the Local Authority that a child may have ALN	59
7.	Parent Group	61
8.	Information Advice Sheets	62

Legislation

The United Nations Convention of the Rights of the Child

The United Nations Convention on the Rights of the Child (UNCRC) is an important treaty passed by the United Nations (UN) in 1989 and subsequently ratified in the UK in 1991. The UNCRC is made up of 42 articles, which outline the civil, political, social, economic and cultural rights of children.

The UNCRC recognises all children everywhere as:

- Unique individuals and active members of families, communities and the wider society
- ✓ Capable of understanding, navigating and influencing their environments
- Equipped with agency and able to identify, claim and exercise rights.

The UNCRC makes children the holders of over 40 fundamental rights while respecting individual traditions and cultures in childcare.

Principles of Child Rights-Based Approach

A child rights-based approach is a framework used by practitioners when designing, delivering, monitoring and evaluating local services, such as childcare and strategies for children.

This approach brings together the vision of childhood set out by the UN Convention on the Rights of the Child and the core tenets of a human rights-based approach.



1. Dignity

Every child has inner dignity and worth that should be valued, respected and nurtured. Respecting children's dignity means that all children should be treated with care and respect in all circumstances.

2. Best Interests

The best interests of the child must be top priority in all decisions and actions that affect children. Children should be involved in deciding what is best for them.

3. Participation

All children have the right to have a say in matters that affect them and to have their views taken seriously. In order to participate meaningfully in the lives of their family, community and wider society, children need support and opportunities for involvement.

4. Non-Discrimination

Every child should be treated fairly and protected from discrimination, whatever their age, gender, ethnicity, religion, language or family background. Having access to equal opportunities doesn't mean being treated identically; some children need more support than others to overcome barriers and difficulties.

5. Transparency and Accountability

Everyone needs to be supported to learn about and understand rights. Knowledge of rights also allows children to hold to account the people responsible for ensuring their rights are protected and realised.

6. Life, Survival and Development

Every child has the right to life and each child should enjoy the same opportunities to flourish so to be safe, healthy, grow and develop. Children develop in many different ways – physically, emotionally, socially, spiritually and educationally – and different professionals should work together to help make this happen.

7. Interdependence and Indivisibility

All children should enjoy all of their rights all of the time because all rights are equally important. Children's rights to a good standard of living or to be protected from abuse, neglect and violence are as important as the right to get together with their peers or the right to freedom of expression.

The Equality Act 2010

The Equality Act 2010 states that we must promote equality of opportunity and must not discriminate against, harass or victimise children with a disability. Settings have a duty to make reasonable adjustments to ensure that children with a disability are not at a substantial disadvantage compared with their peers. This duty is anticipatory: settings must look ahead and anticipate what disabled children might need and what adjustments might need to be made to prevent any disadvantage.

Definition of Disability

The Act defines that a person has a disability if they have a physical or mental impairment that has a substantial and long-term adverse effect on their ability to carry out normal day-to-day activities.

Discrimination

3

The law prohibits 'direct discrimination', for example if a setting refused to offer a child a place because the child has a disability; and 'indirect discrimination' where policies or practices within a setting may particularly disadvantage children who share a particular 'protected characteristic' including, race/ethnicity, gender, disability, religion and belief.

This means that all children and adults should be treated with equal concern and respect and that the setting complies with relevant anti-discriminatory legislation and good practice in all areas, including employment, training, admission to settings and access to the resources, activities and facilities available.

The setting is responsible for ensuring that there is an equal opportunities policy, which is consistent with current legislation and guidance and is regularly reviewed. All practitioners and volunteers understand and implement this policy and it is available to parents.



Additional Learning Needs and Educational Tribunal (Wales) Act (ALNET) 2018

The Welsh Government's vision for Wales is a fully inclusive education system where all learners have equity of access to education that meets their needs and enables them to participate, benefit from and enjoy learning.

This legislation creates a legal framework to ensure learners' needs are identified early, addressed quickly, and their views, wishes and feelings are at the heart of the planning processes to support them to overcome barriers to learning and achieving their full potential.

Core Principles:



The Introduction of the term Additional Learning Needs (ALN) - Replacing the term 'Special Educational Needs' with 'Additional Learning Needs' (ALN) and 'Special Educational Provision' with 'Additional Learning Provision' (ALP)



A 0–25 age range - Improved transition between early years education providers and schools



A unified plan - Individual Development Plans (IDP) will replace Statements of Special Educational Needs and other non statutory SEN plans for learners



Increased participation of children and young people - The Act requires that learners' views should always be considered as part of the planning process, along with those of their parents



High aspirations and improved outcomes - The emphasis of IDPs will be on identifying ALP that delivers appropriate positive outcomes for all



Clear and consistent rights of appeal - Children and their parents will have the right to appeal to the Education Tribunal against decisions made by a Local Authority (LA) in relation to their ALP



Increased collaboration - Improved collaboration and information sharing between agencies including education, health and social services, which will be essential to ensuring that needs are identified early and the right support is put in place to enable children and young people to achieve positive outcomes



Avoiding disagreements and earlier disagreement resolution - Where disagreements occur about an IDP or the provision it contains, the matter is considered and resolved at the most local level possible



Clear and consistent rights of appeal - When disagreements about an IDP cannot be resolved at a local level, parents and young people will have the right to appeal to Tribunal



ALN Code - The ALN code will impose mandatory requirements in respect of decisions about ALN; preparation, content, form, review and revision of IDPs and ceasing IDPs



A bilingual system - The Act requires that services must consider whether a child or young person needs ALP in Welsh. If they do, this must be documented in the IDP and 'all reasonable steps' must be taken to secure the provision in Welsh.

 $oldsymbol{a}$

The Additional Learning Needs (ALN) Code

The ALN code provides specific guidance in respect of the identification of ALN for those who are under compulsory school age and not attending a maintained school, this will include those in pre-school. Chapter 11 of the Code sets out the duties on Local Authorities for this age group and specifies the duties in relation to decisions about ALN, the preparation and maintaining s of IDPs, and the securing of the ALP described in an IDP.

A child who may have ALN can be brought to the attention of a Local Authority in a number of ways:

- ✓ A provider of childcare or non-maintained nursery education
- ✓ A health board (under section 64 of the Act)
- ✓ A parent expressing concerns raised through a non-maintained setting (if the child attends one) or directly with the LA



Identifying ALN in respect of children under compulsory school age – health bodies' role and duty to inform

Chapter 21 (Multi Agency Working) of the code describes how health bodies can support early identification of young children who may have ALN through a range of services. Health professionals, such as paediatricians and health visitors, often come into contact with the child before education professionals. They are therefore often in a position to identify potential ALN before anyone else. Standard health assessments such as new-born screening can enable very early identification of a range of medical and physical needs.

Where a health body, in the course of exercising its functions in relation to a child who is under compulsory school age and for whom a Local Authority is responsible, forms the opinion that the child has, or probably has ALN. It must inform the child's parent of its opinion and its duty to bring this to the attention of a Local Authority. It must give the parent an opportunity to discuss the issue with one of its officers.

The LA duties for Early Years include:

- Deciding whether a child has an ALN and the designation of an officer to be to be responsible for coordinating the actions required to make that decision and if an IDP is required, to be responsible for preparing it
- Preparation of a LA IDP in line with a statutory 12 week timeline
- Maintaining a LA IDP and securing the ALP described in it
- Reviewing and revising an IDP
- ✓ Reviewing the ALP arrangements
- Making arrangements to provide advice and information and taking reasonable steps to make the arrangements known to parents and case friends of children in its area
- Making arrangements for the avoidance and resolution of disagreements and promoting the use of them to parents
- Making arrangements for the provision of independent advocacy services
- Outline any action the Local Authority will undertake in light of its consideration to ensure the child's needs are met if ALN is not agreed at this time.



The Early Years Additional Learning Needs Lead Officer (EYALNLO)

It is the duty on Local Authorities to designate an **Early Years ALN Lead Officer**. This statutory role has responsibility for coordinating the Local Authority's functions under the Act (as above) in relation to children under compulsory school age who are not attending maintained schools.

The EYALNLO will:

- ✓ have a role in the strategic planning for and allocation of any budget and/or the funding the authority has for children under compulsory school age who are not yet in a maintained school
- ✓ be directly involved with the development of the authority's policy on ALN provision for children under compulsory school age who are not yet in a maintained school
- develop and deliver training to settings on matters related to ALN, engaging other professionals where appropriate for specialist input
- maintain their own continuing professional development in the field of ALN to remain an authoritative and expert source of knowledge.

A Person Centred Approach

A person-centred approach puts the child and the child's parents (particularly when the child is very young) at the centre of decisions and ensures their views, wishes and feelings are the focus.

A person-centred approach looks at the support necessary for a child to be fully incorporated and actively involved in whatever they do. The approach is based on a set of shared values that can be used to plan with a person and not for them, which includes,

- ✓ working in partnership with everyone involved with and known to the child
- ✓ focussing on the whole child and not simply what they can't do
- ✓ considering what is important to the child and what is important for the child
- on-going listening, observing and learning.

Partnership working is crucial to effectively supporting children with additional needs. This approach brings together education, childcare, health and other services to ensure the child and their family get the appropriate help and support through a person-centred approach. This provides a holistic approach with effective communication between different professionals involved and leads to an agreed and coordinated action plan that puts the child at the centre of the process.

The Welsh Government document, 'Person-centred practice in education: a guide for early years, schools and colleges in Wales', describes a range of person-centred thinking tools that can help practitioners to work individually with the children. The tools are practical and easy to use, and provide information that can be used directly in a setting. Above all, they focus on what is important to an individual, what matters to them and the best ways to support them by overcoming potential barriers.

The Voice of the Child

All children in Cardiff and the Vale of Glamorgan should have their voice heard and, more importantly their needs taken into account. Children and their families play a key role in their own development and lifelong learning. This is more than just seeking their views but putting them at the heart of the process. By giving children a voice through choices, opinions, feelings and emotions they can develop and learn that they are important and valued, promoting their self-esteem and self-worth.

Different ways of achieving this could be through:

Following the children's interests - through observations and playing alongside the children, interests and intrigues will become apparent. Practitioners can then plan purposeful activities around these interests

Asking the children open ended questions - gathering their views on resources, areas of the setting, snacks, visits and topics. This can be through both a formal circle time and more informal everyday chats. Children should feel confident and comfortable to express both their likes and dislikes

Ensuring well set up and enhanced areas of play - enabling the children to express their interests and vocalise their choices

Including the children in the whole process and listening to their opinions throughout - encourage children to be actively involved e.g. browsing through catalogues, recipe books, telephone calls, emails, visits to shops and businesses. Try to involve them with the deliveries, unpacking and storing of new resources and equipment. This will give them a sense of ownership- from them suggesting the idea to completing the task

Ensuring active communication with home - invite parents to share the children's home interests with practitioners. Is this something that could be enhanced at setting? Allow children to share their interests/hobbies with their peers and adults.

One Page Profiles

A valuable tool of a person-centred approach is the One Page Profile. This contains key information about a child's personality; their strengths; what is important to them; and the best way to support them at setting and at home.

The One Page Profile can:

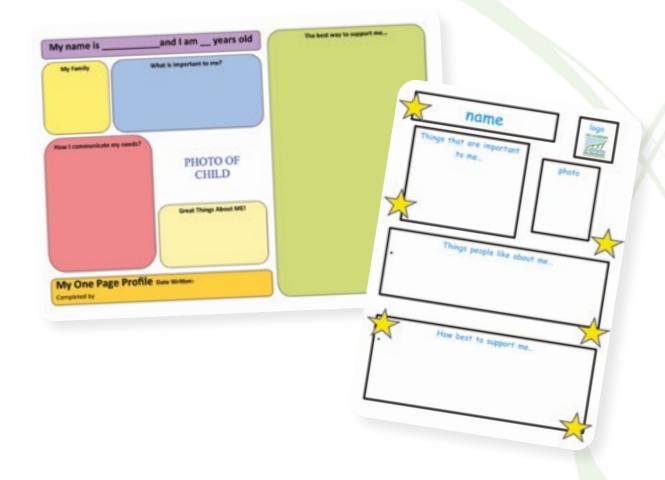
- ✓ support a child's development and understanding of needs
- reflect the voice of the child and the family
- ✓ support transition from home to setting to school
- provide key information for all practitioners and professionals involved with the child.

Writing a One Page Profile

The One Page Profile should be written in partnership with the child and parents with contributions from all involved with the child. Where possible the child is encouraged to contribute, this may be, talking or showing what's important to them e.g. colours, pictures, family members and their favourite things.

Examples of One Page Profiles

Finding out what is important to and for a child is at the heart of creating a One Page Profile. Getting a balance of what is important to and for a child underpins Person Centred Practice and keeps the focus on the child.



Inclusion For All

The vision for Wales is to have strong and inclusive settings committed to excellence, equity and wellbeing. All children should have their needs met enabling them to participate, benefit from, and enjoy learning and play in a diverse growing and changing world.

Inclusion is about:

- ✓ Believing that all children are individuals and have equal rights
- ✓ Believing that every child has the right to have their needs met
- ✓ Seeing difficulties as 'challenges' to be overcome
- ✓ Making the learning environment fully accessible.
- ✓ Planning and adapting activities to make them accessible for all
- Encouraging every child to build positive relationships.

Inclusion is not about:

- Seeing the child as a problem
- The child simply being part of the group where the provision and practice does not reflect the individual needs of the child
- Using the same systems and approaches for every child
- The child being removed from the rest of the setting frequently to have one to one sessions
- Providing a support worker to shadow the child constantly
- Focusing solely on what the child can't do.





Inclusive Practice

All children should be welcomed and included in all settings across Cardiff and the Vale of Glamorgan. Where children require additional or particular support to meet their needs, care should be taken by practitioners to identify and implement this both inclusively and sensitively.

Considerations for settings:

- ✓ Focus on the child's stage of development and their next steps rather than the expectation for a child of that age 'stage not age'
- ✓ A warm welcome into the setting for the child and their parents getting to know each other ideally before the child starts
- ✓ Information gathering through a child centred approach to ensure that child's needs are planned for to ensure a smooth transition
- Reasonable adjustments to the environment and play opportunities to include all children so they can access and engage in learning and play
- ✓ A flexible approach to meeting the needs of an individual child where all children are valued as individuals
- Early, regular communication with parents to celebrate strengths and progress.



"It is not about changing the shape of the square peg (the child) so that it will fit into the round hole of the pegboard (the setting) but about changing the setting so that it supports the child"

Information taken from 'A square Peg in a Round Hole; inclusion for every child by Linda Tallent and Jean Thompson. Published 2011 by Featherstone Education

Workforce

Teaching and Learning for All

Successful inclusive education is a combination of leaders providing the conditions for an inclusive and innovative environment to allow children to flourish with practitioners having the right skills and knowledge to create inclusive environments. A sensible place to start would be to ensure that professional learning opportunities exist in setting to up-skill and build capacity for practitioners in inclusive practices.

Professional Learning Opportunities

It is important that practitioners within the setting are offered and partake in Continued Professional Learning and Development focusing on inclusive practice and approaches. This will positively affect their skill development as well as their attitudes and beliefs by emphasising that it is within their professional role and capability to include all children in their setting, rather than the responsibility of specialist staff or provision.

Evaluating Inclusive Practices

Practitioners play a critical role in the implementation of inclusive practice, understanding and evaluating approaches is of the utmost importance. Practitioners should have knowledge and awareness of inclusive pedagogy, practices and approaches as their role is ensure all children's needs are met.

Successful inclusive practice happens primarily when practitioners accept, understand and attend to children's physical, social, cognitive, emotional and academic differences and diversity. In its simplest form, inclusive practice means that every child, no matter what is their barrier to learning/play, has equal access to learning and opportunities to succeed.



Creating an Accessible, Inclusive Environment

Some children may require different adjustments or adaptations to the environment to be fully included. Often, many of these changes will be simple, quick and but sometimes this may involve working with other professionals to plan a way forward.

Things to consider

Is the setting light, tidy and easy to navigate?	
Is space and furniture arranged appropriately to meet the needs of children with physical, or vision difficulties?	
Are there clearly defined areas within the setting?	
Are the areas clearly labelled with photos, pictures, symbols and words?	
Can all the children reach and access resources and materials?	
Are there clearly defined areas to display and celebrate children's work and play?	
Are the displays meaningful? Are they over-stimulating or cluttered? Are they multisensory/interactive/purposeful?	
Are visual aids displayed at a level that a child can see them?	
Are there areas where children can relax and have quiet time?	
Are there opportunities for children to work at different levels – i.e. sand tray on floor / 'step into' sand pit outside? Wall mounted sensory activities?	
Are there ways to reduce noise levels using cloths or carpets on tables / displays, curtains at windows, blackout blinds?	
Are toilets and changing spaces welcoming, clean and accessible for all? Are you able to respect the privacy and dignity of all children? Are visuals for toileting and hand washing routines provided?	

Small changes can make a big difference

Inclusive Approaches

Inclusive strategies are effective in promoting a good quality learning environment for all children and should be naturally embedded into everyday practice. Strategies may include:

- ✓ Non-verbal visual cues; this is the way we listen, look, move and react e.g. pointing, gestures, facial expressions and body language
- ✓ Verbal communication; it is important that we think about the child's level of language and understanding and alter our language and tone of voice accordingly. Use simple key words and modify your language according to the child's stage of development
- ✓ Visual strategies; these are things we can see, they can be visual tools or supports.

 This refers to using a picture or other visual items to communicate with a child who has difficulty understanding or using language.

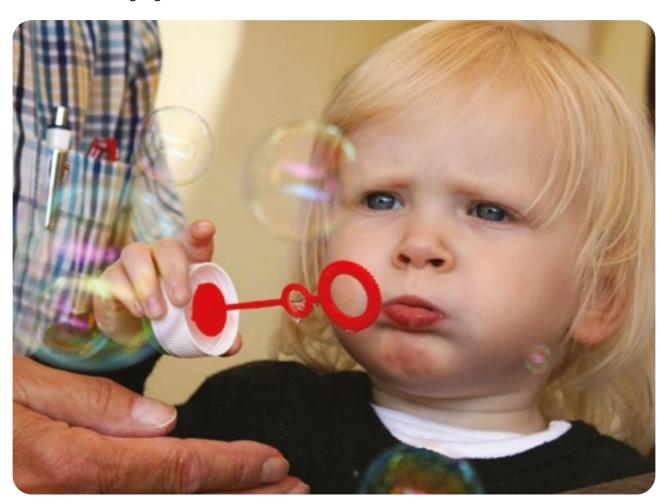
 Visual supports can be Traffic Lights, Makaton, First and Then/Now and Next boards, visual timetables, objects of reference, sand timers, play sequence cards and choice boards and pictures/symbols
- Processing time; is the time it takes for children to take in the information, make sense of it and begin to respond. For some children it may take a little longer to process information and instructions. For example, this could be due to slow auditory processing (how they process spoken instructions) or physically planning their movements (i.e. thinking about where they are in the room and how they are going to get to where they are going)
- ✓ **Backward chaining;** a process that can be used for all children when learning new skills. A child learning a new concept/action would complete the final part of the process so they have finished the activity i.e. the child would pull their sock up their leg after the adult has put it on their foot and over the ankle or finishing pulling their own zip up on their coat after an adult has put it on the child. This approach gives the child a sense of success as they complete the task
- ✓ Sensory experiences; using multi-sensory approaches to learning. These include approaches that involve not only the visual but also tactile, auditory, olfactory (sense of smell) proprioceptive and kinaesthetic
- ✓ **Errorless learning;** ensuring the child learns by getting things right. Positive reinforcement and praise is how children learn best
- Continuity and repetition; providing consistent messages to children will help their learning. Providing opportunities for children to re-visit newly learnt skills in a variety of situations.



Supporting Language Development

Speech and language development is the ability to listen, understand and communicate verbally and non-verbally. The early years is an important stage in language development and there are a number of different strategies that can be used to encourage and promote this. The adult plays an important part in this, which does not always have to be planned for; often spotting a 'teachable' moment when it arises can enhance language development.

- ✓ Ensure that you have the child's attention and make eye contact (get down to the child's level)
- ✓ Speak clearly and calmly using stage appropriate, simple language
- ✓ Use tone and intonation to gain a child's attention and emphasise the emotion of the message e.g. using a sing-song voice
- ✓ Repeat back what the child has said to ensure they have understood correctly and so they know their effort was worthwhile. For example, the child says "horse drinks" and the adult responds "Yes, the horse is drinking"
- ✓ **Scaffold, model and extend** by adding extra words to the phrase by modelling the correct sentence structure. For example, the child says "car" the adult would respond with "Yes, it's a big car"
- ✓ **Don't insist the child repeat** back what you have said. This may put undue pressure on the child and may make them less likely to talk in the future. They will talk when they feel comfortable and ready
- ✓ Avoid asking too many questions as they can be stressful for some children and we want to avoid this. Instead we can ponder, this way the adult invites but does not insist on further communication e.g. "I wonder if it's going to rain..."



- ✓ **Use less demanding questions** such as "Where's the...." rather than "What's this"; If you need to ask questions asking a child where something is encourages them to listen to what you've said, show their understanding of the word by finding it and a child will be much more likely to copy a word they have just heard than say a word on demand
- ✓ **Comment** as the child plays, tailoring comments to the play of the particular child. The child will hear the language and develop their understanding. They might use it later when the adult is not there
- ✓ Listen carefully when the child is talking to you, be patient and give them plenty of time to find their words
- Singing songs can help children learn to differentiate sounds and recognise rhymes, as well as extend their vocabulary and develop their memory
- ✓ Makaton signing can be used for children who are at an early stage of language development, with the adult accompanying the verbal response with the use of a visual Makaton sign. Signing should be used as a whole setting approach rather than using it in isolation with one child. It is also a useful resource which can benefit children with English as an Additional Language and children who are shy or reluctant communicators
- ✓ Visual supports and strategies are a form of adaptions that rely on visual cues to allow children to participate in activities and routines. Visual supports are graphic cues that can enhance concentration and ensure the child is able to focus on something visual while listening to instructions. Visual supports also develop understanding and allow children to process what they are being asked to do. Visual supports can be in the form of objects, photographs, pictures, symbols or the written word. Visual supports should not replace language but should instead be used alongside it to aid communication.



Sensory Processing

Every minute of every day we receive sensory information from the environment and from within our own bodies. How effectively we process this information affects how we concentrate, behave and respond.

Good sensory processing forms the basis of all learning experiences. It enables us to develop skills and behave appropriately in any given situation.

Sensory processing is something to consider when observing and understanding children's behaviour in the setting.



Senses

There are seven senses. The first five are commonly known:

- ✓ Auditory (hearing)
- ✓ Visual (sight)
- ✓ Olfactory (smell)
- ✓ Gustatory (taste)
- ✓ Tactile (touch).

There are two more internal senses that are really important:

- ✓ The Vestibular Sense (movement and balance)
- The Proprioceptive Sense (body awareness).

Auditory Processing

If the brain does not process noise sensation accurately then we may be described as over responsive or underresponsive to noise sensation and this will affect our behaviour.

We may need more or less noise in our environment in order to help us focus on a task.

Over-responsive auditory system

What you may see

✓ Child over-reacts to loud noise- thunder, hand dryer, fire drills or sudden noises



- ✓ Child often places their hands over their ears
- ✓ Child appears less able to concentrate or focus in a noisy environment
- ✓ Child makes own noises more persistently than peer group
- ✓ Shows frequent startle reactions to noise
- ✓ Notice even small sounds.

Soft, calm music played into ear phones may aid concentration and regulate a child. Try using classical music. Make sure the music is not played too loudly through the earphones Allow the child to carry out activities in a quiet environment at intervals throughout the day

White noise can be downloaded from the internet and this can also be useful when played quietly through ear phones

Allow the child something to fidget with

Earphones (without additional noise) or a tighter fitting hat can provide relief from noise Liaise with parents to arrange a hearing assessment.

Under-responsive auditory system

What you may see

✓ Child doesn't seem to notice when their name is called



- ✓ Child enjoys and seeks out loud or unusual noises
- ✓ Has a disregard of sudden or loud noises
- ✓ Does pay attention in a noisy environment/or to people
- ✓ Show, delayed responses to noise
- ✓ Makes noise by tapping, humming, whistling etc
- ✓ Need noise to increase their levels of alertness.

Try to gain eye contact with the child when you need their attention by coming down to child's eye level

Understand that a child's lack of response may not necessarily be under their control Allow the child the opportunity to be noisy in a controlled environment Liaise with parents to arrange a hearing assessment.

Visual Processing

If the brain does not process visual sensation accurately then we may be described as over-responsive or under-responsive to visual stimuli and this will affect our behaviour. We may need more or less visuals in our environment in order to help us focus on a task.

Over-responsive visual system

What you may see

Behaviour of child becomes more erratic in a more visually stimulating environment



- ✓ Is visually distracted by others
- ✓ Notices everything that's happening in the room
- ✓ Startle at visual input
- ✓ Child keeps head and eyes facing downwards most of the time
- ✓ Show a sensitivity to light
- ✓ Be irritated by bright lights
- ✓ Prefer sunglasses/peak cap.

Allow the child to carry out activities in a less visually stimulating environment at intervals throughout the day. This may mean creating a suitable environment in the setting such as a blank corner separated by dividers or a table covered in a sheet that the child can crawl under

Child may like to wear sunglasses

19

Liaise with parents to arrange an eye test at an Opticians Be aware of this sensitivity in brightly lit areas.





Under-responsive visual system

What you may see

✓ Child may not notice details in pictures.



- ✓ Child may have difficulty distinguishing the foreground from the background e.g. find an object when it is hidden amongst others in a drawer.
- ✓ Shows a lack of attention to environment/people
- ✓ Often misses visual cues

Practise games such as; 'I spy.' Books like the 'Where's Wally' series and similar themed books, Kim's game, finding/sorting, colours/shapes, puzzle books
Practise ball skills using large balls, beanbags or balloons to start with. Practise rolling

the ball before throwing
Liaise with parents to arrange an eye test with an optician.

Sense of Touch (The Tactile system)

If the brain does not process the touch sensation accurately then we may be described as over responsive or under-responsive to touch sensation and this will affect our behaviour.

Over-responsive tactile system

What you may see

- ✓ Avoidance of touch
- ✓ Dislike of hugs
- ✓ Child becomes very disorganised, over emotional and/or out of control if they experience games that involve a lot of touch e.g. rough and tumble
- ✓ Child avoids messy play
- ✓ Child prefers to wear long sleeves even though it is a very hot day
- ✓ Child dislikes the textures of certain clothes or material on the skin e.g. labels, seams
- ✓ Child dislikes walking barefoot on certain surfaces (grass, sand).

Provide different tactile experiences and activities but be aware that the child might not want to take part

Do not force the child to join in. Offer any new tactile experiences in small amounts at first e.g. place their hand over yours rather than putting their hand in yours until they gain confidence, move towards holding their index finger and wiping afterwards Avoid 'light touch' activities e.g. patting on the head or tickling particularly unexpectedly

Avoid touch from behind

Use firm rather than light touch, deep pressure - massage rather than tickling Combine tactile activities with opportunities to experience proprioception

Allow space around the child

Identify and encourage the use of fidget toys. These are toys or objects easily played with in the hand. They are quite often squeezy objects. They are often particularly effective in circle time

Avoid crowded places

Whilst trying these activities always use a calm quiet and encouraging monotone voice Empathise — what is tolerable for one person is unpleasant for another.







Under-responsive tactile system

What you may see

- ✓ Appears to have a dulled sense of touch
- ✓ Doesn't register pain or react to cuts or bruises
- ✓ Poor fine motor skills
- ✓ Weak grip
- ✓ Seeks touching all objects
- ✓ Likes messy play more than most children
- ✓ Likes rough and tumble activities more than most children
- ✓ Poor body awareness
- ✓ Child likes a lot of hugs.

Give more opportunities to experience activities that involve increased feeling through the skin

Play 'Tap, Tap the Box'. Introduce a number of objects previously seen by the child into a box or bag where they cannot see. They have to find the object you ask for Sand play and messy play are useful. Find hidden objects without vision Creative activities using glue, clay, different textures are also useful Identify and encourage the use of fidget toys. These are toys or objects easily played with in the hand. They are quite often squeezy objects. They are often particularly effective in circle time.



Sense of Movement (The Vestibular system)

The vestibular sense provides us with a good posture, balance and movement sensation. Our movement receptors are located in our inner ear and send information about our position and how we are moving to the brain. If the brain does not process the movement sensation accurately then we may be described as over responsive or under-responsive to sensation and this will affect our behaviour. If the brain is over responsive, it can become easily overwhelmed by a movement experience causing fear, anxiety and avoidance or if under-responsive it may seek out more movement experiences to satisfy the need.

Over-responsive movement system

What you may see

- ✓ Child is always 'on the go' more than their peers.
- Child appears to take excessive risks e.g. shows no fear when jumping from a big height.



Provide the child with ample opportunities to experience movement in a variety of ways Create a safe environment in which the child can experience movement Provide opportunities to develop and practice movement related skills such as jumping, swinging and animal walks

Ensure you provide frequent movement breaks
Action rhymes and songs such as; 'Row your Boat', 'Hokey Cokey' etc.

Under-responsive movement system

What you may see

- ✓ Child is fearful of movement. Child dislikes escalators or lifts
- ✓ Child does not like playing on outdoor equipment. Child may be travel sick
- ✓ Dislike head tilted back e.g. hair washing, rough and tumble play.



When travelling encourage the child to look out of the window and hold a toylobject that is easy to fidget with without looking e.g. a squeezy toy Encourage participation in the type of movement the child does enjoy and tolerates Do not insist that a child participates in an activity. If they are not keen to jump they may jump holding your hand Combine movement activities with opportunities to experience proprioception.

Sense of Body Position (Proprioception)

Closely related to the vestibular sense is the sense of proprioception which gives us an awareness of body position. It lets us know where our body is in relation to the immediate space around us. It also lets us know how to move our body and how much force we need to use to carry out a task.

When proprioception is processed well, an individual's body position is automatically adjusted and this helps with every aspect of our day e.g. negotiating our way around objects in a room or preventing us from falling out of a chair. Proprioception also allows objects such as pencils, buttons, spoons and combs to be skilfully manipulated by the hand; to pick up a drink of water without spilling it.

The proprioceptive system also has another role – it helps us to modulate and calm our arousal level so that we can attend and focus.

Our proprioceptive system has receptors located within our muscles and joints. These receptors or sensors are triggered when they are squashed or pulled apart during movement. Many of the activities suggested stimulate this sensation as it is so useful to the body and brain.

Under-responsive proprioceptive system

What you may see

- ✓ Appears over forceful perhaps damaging toys unintentionally
- ✓ Walking into others whilst looking ahead
- ✓ Tripping over
- ✓ Falling from chairs
- ✓ Poor fine motor skills compared to peers difficulties with precision movements
- ✓ Poor body awareness.

Think of lots of activities that involve effort, pushing and pulling. If we are moving and using effort, we are compressing or triggering these receptors. Examples of activities include: helping with jobs, carrying objects, pushing heavy doors, gardening, pushing wheelie toys, pushing tyres, manipulating clay, playdough etc

Create a 'fidget-box'. This is a box of objects such squeezy toys, and allow the child to choose an object when they are finding it hard to concentrate or regulate. Make sure the child is able to use the object safely and appropriately

Cardboard boxes - hiding, squeezing into, ripping apart, jumping on, pushing with toy.







Using a Multi-Sensory Approach

Multi-Sensory play includes any activity that stimulates young children's senses such as touch, smell, taste, movement, balance, sight and hearing. Sensory activities facilitate exploration and naturally encourages children to play, create, investigate and explore.

Sensory play areas can be indoors and outdoors. It doesn't need to be costly with lots of expensive equipment and can be a small room or area, even a pop up tent or a sheet of material can be to turned into a quiet/safe space.

- ✓ soft flooring
- ✓ a rug or a fleece blanket
- cushions or beanbags
- torches and light up toys or fairy lights,
- a small box with some fiddle toys or textured items.

When setting up indoor sensory activities consider the space. Is it calm relaxing and quiet? If so, make sensory feely bags using materials from around the setting, thinking about the different textures/smells, play calming music, talk about how things may smell/feel? Remember to space each activity out, think about the space you have with in your setting, set each activity according to the space and remember to consider the noise level.



Sensory play enhances cognitive, social, emotional and behaviour development. The outdoors naturally supports a child's development as children explore their environment with all of their senses.

When setting up outdoor sensory play areas and activities you can utilise equipment you have inside. You can adapt resources to your outdoor learning areas such as water/sand pit and sensory tuff trays. Whilst setting up outdoor sensory areas think about the space, spread each activity out so that no one activity is too close to another.

For some of the children this might be overwhelming and become a sensory overload. Make use of your outdoor surroundings, decorate a wall in your outdoor area, make it sensory friendly by adding ribbons, pots tied to string attached to the wall to make different sounds, mirrors and remember to make it colourful. Use tuff tray with leaves/sticks/herbs this will enhance the sensory experience. Think about keeping activities to a minimum.

Ideas

Garden Play - Play in the garden making mud pies, planting bulbs or collecting leaves and twigs, take a small basket or bag around the garden or park and see what you can find.



Arts and Crafts - Get children involved in arts and crafts activities using paint, glitter, glue, paper, card, tinfoil, felt, ribbon, foam etc.



Feely Bag/Box - Place different objects in a bag such as plastic animals, building bricks, textured balls, cotton wool balls, sponge etc. Encourage your child to choose an object from the bag and explore it.



Water Play - Fill a large plastic tub with water and unbreakable bottles, cups, beakers, sponges and toys and set it outside on the grass. Pouring and measuring are excellent for developing the tactile system.



Sand/ Soil Play – Fill a large tray with a layer of sand or soil and draw with your finger making swirly shapes in the sand. Alternatively fill the tray with sand/soil and bury your child's favourite toy using sticks, spades, spoons to dig and find.



Benefits of Messy Play

27





Vision, Hearing and Multi-sensory Impairments

Children with vision, hearing and multi-sensory impairments will require modifications to play and their environment to ensure that their access to childcare and settings is inclusive and positive.

Vision Impairments (VI)

The degree to which the child's learning and development is affected depends on the type and extent of vision impairment. The sense of belonging and a feeling of being included both depend on the adaptations and adjustments made.

Children may need specific support strategies to ensure the play opportunities are accessible and meaningful. Children with vision impairments may experience difficulties in moving safely and independently both within familiar grounds of their usual settings, and when out and about on trips and visits.

They may need specific adjustments to lighting and equipment. Adjustments can be made and are often simple solutions that are inexpensive and easily implemented – and they usually benefit other children as well. What may appear to be a small change can also have a significant impact on the child's independence and self-esteem.

Here are some examples of adjustments to enable children with vision impairments to access settings as independently and safely as possible. However, for the individual in your setting with a visual impairment, it is important that an assessment of their particular needs is undertaken, and specific, bespoke advice is sought.

- ✓ Regularly check and replace lights bulbs
- ✓ Put signage on doors in braille/large print
- ✓ Fit blinds to windows and repair broken ones to ensure flexibility of lighting
- ✓ Highlight stair edges, handrails, door handles and doorways with tape of contrasting colour (seek advice from habilitation specialists before undertaking this process)
- ✓ Consider major hazards and obstacles around the environment
- ✓ Position contrasting matting at doorways
- ✓ Maintain consistent setting layouts

Adjustments to create a visually friendly learning environment:

- Make sure settings have clean white boards and black pens available to increase contrast
- ✓ Make sure images, words and information pointed to or written are accompanied by a verbal description
- ✓ Avoid asking "Can you see this?" but instead ask the child discreetly to tell you a little bit about what they can see e.g. 'what shape am I pointing to?'
- Pass around objects being shown to the children for closer first hand observation

Specific advice on the adjustments appropriate for the individual child with VI in your setting can be sought from the VI team.

Adjustments to ensure a child with a vision impairment has a sense of belonging:

- ✓ Address all children and young people by name during discussion and activities
- Proactively support social interaction skills advice on this can be delivered and supported by VI specialists
- Planning the provision for children and young people with Vision Impairments should include liaison, consultation and advice from a qualified Children's Habilitation Specialist, who will give advice and training on safe independent access to settings. Advice can be used to support appropriate adaptations to sites, and to support the development of a risk assessment

✓ Training can provide practitioners working with children with vision impairments with the skills to support safe, independent and dignified movement around the setting.

Habilitation and Mobility specialists can be contacted through the Local Authority Vision Impairment Team.

Hearing Impairments (HI)

When you are working with children with hearing impairment bear in mind some common considerations, ways of communicating and possible teaching and learning strategies.

Common Considerations:

- ✓ If working with a group of mixed ability of hearing children try to provide support with sensitivity, try to avoid drawing too much attention to the differences
- ✓ Use a variety of activities to enable working between children with different abilities as well as times for more focused specialist work
- ✓ Make sure you have the whole group's attention before talking
- ✓ Consider where hearing impaired children are placed when talking to them as for lip-reading it is important that they are within 6 feet of the person talking
- ✓ Remember to face the child with a hearing impairment and speak clearly

Ways of communicating:

- ✓ When communicating with the child directly, keep sentences short and reword if necessary.
- Use hand gestures and facial expressions if possible to make children feel more included
- ✓ Signing can also be useful and often essential for children with hearing impairments. It will be important to establish which form of sign the child will need to use e.g. British Sign Language or Makaton

Adjustments in environment

- ✓ Be aware of the effect of environmental noise on a hearing impaired child
- Minimise environmental noise by using curtains or pictures on windows, carpets, felt or rubber tips on the legs of chairs, hanging mobiles of children and young people work
- Consider seating arrangements that allows all children to see each other a circle (e.g. in a group)
 or semi-circle is best
- ✓ Try to reduce background noise
- ✓ Ensure that there is plenty of light in the room so the child can clearly see both the signing and facial expressions. Make sure that the light is on your face rather than on your back to avoid appearing as a silhouette
- ✓ When turning off the lights (e.g. when using an interactive whiteboard), ensure that the interpreter's face is still illuminated

Further information about working with children and young people with hearing impairments can be sought from the Local Authority Hearing Impaired Team.

Multi-sensory Impairment (MSI)

There are a small number of children in settings who have a multi-sensory impairment that means they are both hearing and visually impaired. Support for these children is provided by a MSI specialist teacher based within the Local Authority Vision impairment Team.

Inclusion for All - Good Practice Guide

Meeting the Needs of Children in Early Years Settings

Targeted Provision

Most children attending childcare will benefit from a mixture of individualised input, engagement within small groups of other children and being part of the whole cohort. However, in order to get the most out of their attendance at childcare, a very small minority will require intensive support to ensure their safety and engagement; this could be provided by the LA in the form of additional funding. This decision will be made by the Local Authority and may require bespoke packages of support with intensive and or specific input which may require training for practitioners.

It is a hugely enjoyable and rewarding role being an additional support worker. This worker would need to be a good communicator who is confident in liaising with parents and external professionals who may be involved with the child. They will need to be well motivated, involved in planning appropriate activities and work well as part of a team in the setting. Most of all, a support worker will need patience, drive, enthusiasm and a good sense of fun to work with children with additional needs and the drive and enthusiasm to ensure their individual developmental needs are met.

Support for the child:

- ✓ To assist in the smooth transition from home to setting and support the child in becoming familiar with and confident in the new setting when they start
- ✓ Look after the child's care and welfare needs e.g. dressing, toilet training, eating, being comforted
- ✓ Ensure the setting is a comfortable, safe, stimulating and engaging environment which takes into consideration the child's additional needs
- ✓ Supervise and support the child, ensuring their safety and access to play and learning experiences
- Establish good relationships with other children, acting as a role model, being aware of, and responding appropriately to individual needs
- Encourage the child to become independent
- ✓ Support development of new skills
- Promote inclusion and acceptance of all children within the setting
- Assist in the smooth transition between setting and nursery when the child's time in the setting ends.

Support to the setting:

- ✓ Prepare and adapt appropriate and relevant activities and clear away afterwards
- ✓ Assist in observation, monitoring and reviewing the child's progress and the next steps
- ✓ Work in partnership with parents and other professional who may be involved
- ✓ Keep up to date with current thinking by attending relevant training opportunities and following recommendations and advice given by professionals.

DONT FORGET

care must be taken to avoid the creation of dependency of support

Developing relationships with:

- ✓ **Child:** Getting to know their likes and dislikes, their interests, what they can do and what they need whilst keeping your relationship child led and focused. You will get to know in time what motivates the child and if there is anything that upsets them (the One Page Profile is a good starting point)
- ✓ **Family:** Ask questions about their child to engage with them on a day-to-day basis. A home link book may help with this. Provide regular opportunities to update them on their child's progress
- ✓ Professionals: You will have other professionals coming in to support the child. You will be able to ask questions about activities you might want to try and they can offer support, suggestions and activities to do with the child
- ✓ **Colleagues:** Your colleagues are there to support you and developing positive relationships with them is good for all practitioners and children in the setting.



DONT FORGET
Social inclusion must be promoted by all and modelled to children, families and others

Meeting the Healthcare and Physical Needs of Children

Settings need to ensure that all children with healthcare and physical needs are supported appropriately to remain safe, access and enjoy opportunities as other children, in line with the Welsh Government guidance, 'Supporting Learners with Healthcare Needs' (March 2017) and in conjunction with The Equality Act (2010).

Managing Healthcare Procedures in Settings

At times, settings may be asked to carry out healthcare procedures in order to meet children's healthcare needs. Training, support and advice will be provided by relevant health professionals for practitioners who are willing and identified as being involved in carrying out these healthcare procedures. It is the responsibility of the setting

to ensure that there is practitioners available and trained to carry out the healthcare procedure.

When accessing and attending a setting, any child who requires a healthcare procedure will require a detailed Individual Healthcare Plan. This should be written in partnership with the most appropriate medical professional and signed and agreed by the setting, health teams and parents.

The family of the child will often be key in providing relevant information to setting practitioners about how their child's needs can be met. Parents should be key in contributing to the Individual Healthcare Plan.

What is an Individual Healthcare Plan?

An Individual Healthcare Plan is a document written by Health involving parents, the setting and all other professionals who may be involved with the child's healthcare, who might be required to contribute to a child's care whilst at the setting. This could include the setting leader, keyworker and other practitioners members who might need to provide medical or emergency care. Other people from outside the setting might also be involved, depending on the level of the child's needs, such as the Health Visitor, Specialist Health Teams or Health Service.

The plan should set out what sort of support a child needs to participate in setting life just like other children. It is a written document that specifies what sort of help the setting can provide for the child – for example, what medicines they can support with, and what to do in a medical emergency.

Healthcare plans should be kept confidential, but the setting will need to share the information with anyone who might need to deal with an emergency involving the child. The setting leader/ manager should discuss this with the parent.

33

School/Setting Name

Coouglidate

Chouglidate

Date of Buth

Charles Address

Date

Contact staff member

Family's contact details

Name

Telephone (Work)

Home

Individual Healthcare Plans are not the same as IDPs, which set out the support needed by children with ALN, although some children may have both types of plan.

The Healthcare Plan should be reviewed at least once a year, but it may need to happen more frequently if the child's condition is unstable or their medication changes.

Who needs a Healthcare Plan?

There's no specific guidance on what sort of medical condition warrants an Individual Healthcare Plan. If a child has a severe or complex medical problem or needs specialist care, a Healthcare Plan is likely to be essential, but for less complicated conditions, it may not be necessary. Common conditions that might require an individual Healthcare Plan may include epilepsy, diabetes, allergies, although this is not an exhaustive list and there are many other circumstances in which a child may need a Healthcare Plan



What does a Healthcare Plan include?

Individual Healthcare Plans should be as simple and clear as possible. Health professionals alongside settings and parents should develop the plan, and the level of detail included will depend on each child's needs.

A good Healthcare Plan should include:

- ✓ The child's personal details: name, date of birth, class, and ideally a photo to help practitioners identify them
- ✓ The name of their condition or diagnosis
- ✓ Contact details for both parents or other family members, the GP and their clinic or consultant
- A description of their condition and the symptoms that affect them during their time in setting
- ✓ Information about the child's daily care requirements: for instance medication (including dose, storage requirements and side effects), dietary requirements, special facilities needed in the setting (such as access to an accessible toilet), and social and environmental needs
- ✓ The support the child needs with their daily care, and who at the setting will deliver this
- ✓ What constitutes a medical emergency relating to the child's condition, and what action they should take if it occurs for example, administering an epi pen in the event of an anaphylactic reaction
- ✓ The date of preparation of the plan, and the date when it should be reviewed
- ✓ If the child requires prescribed medication at the setting, an 'Administration of Medication' form should be completed by the parent, giving details of their treatment and their permission for practitioners members to administer it.

Parents should actively be involved in supporting the setting to:

- ✓ Provide the setting with up-to-date information about their child's medical needs
- ✓ Be involved in the development and review of their child's Individual Healthcare Plan
- ✓ Carry out any action agreed to as part of the Healthcare Plan, e.g. provide medicines and equipment
- Ensure that they/or a nominated adult are contactable at all times.





Administering Medicines in Settings

Children may require medication at their setting for many reasons and this should only be administered with prior agreement and consent given by the parent. Medicines should only be given if prescribed by the GP. If the setting allows the administration of over the counter medication this should be clearly documented and detailed in the setting's Healthcare Policy. Consent from the parent must always be obtained prior to administration.

Settings should have clear procedures and documentation in place for the storage, administration and recording of medications on site.

Manual Handling Plans

Moving and handling activities are a key part of everyday routine for a child with a complex and significant physical need. Activities can range from using moving equipment or assisting in moving by hoisting or lifting. If moving and handling tasks aren't carried out correctly, there is a danger of serious injury to the child or the member of practitioners. As a practitioner working or caring for a child with a physical need, it is important that any equipment provided is used safely and correctly, following an agreed plan.



What is a Manual Handling Plan?

Manual Handling Plans should be in place to reduce the risk of injury to the child and the member of practitioners when handling persons and equipment. This plan gives detailed information on the steps practitioners will need to carry out in order to safely move and handle the child in the setting environment. The plan gives information about the child's needs, the situations where it may be necessary to physically move the child into different positions and the equipment needed to do so.

The Manual Handling Plan is written by a Manual Handling specialist in conjunction with the delivery of appropriate training for practitioners for children with more complex handling needs. The plan should be reviewed and updated annually or more frequently if required.

Manual Handling Training

Manual Handling training is provided for practitioners who move and handle children with a significant physical need to allow them to access the provision. Manual handling techniques support children who are physically unable to move themselves. Training is delivered by a Manual Handling Specialist and follows the All-Wales Passport Scheme. The training teaches practitioners the principles of keeping themselves safe and avoiding injury when handling children, their responsibilities under the legislation and practical skills to enable practitioners to safely carry out their role.

Transition

Let us ensure that all our children pass each milestone with exhilaration, joy and a sense of achievement.

David T 1990 Under five – Under Educated.

Starting setting can be exciting and anxious time for parents and children. Transition can provide an excellent opportunity to promote the engagement of families in the setting's life and learning. Research shows that some children can find transition and change stressful.

Therefore, it is important to approach transition right. Transitions should be planned for as a process and not as an event. Taking effective steps to promote positive experiences of transition into setting can help practitioners fulfil their responsibilities with regard to the United Nations Convention on the Rights of the Child (UNCRU).

What can we do?

As a starting point, practitioners and settings may like to reflect on the common worries that some parents may have and undertake an audit of their current transition arrangements. It is recommended that settings adopt a person centred approach in planning for transition for individual children. This helps ensure that planning is personal, comprehensive sensitive and thoughtful.

Home visits

It is established practice in many settings to visit families at home before children start at a setting. This helps to begin forming the relationships between parents, practitioners and children and starts the process of sharing information. It can be particularly useful in reaching families who, for a variety of reasons, find it hard to take up opportunities offered within the setting.

Offer a warm welcome

Practitioners can make a huge difference by offering a warm welcome to children and their parents when they first enter a setting. Endeavour to ensure that all parents feel that they and their children are valued and that they have a positive role to play in the setting.

Settings can also play a key role in facilitating relationships between families by creating opportunities for parents to meet. Settings can help to create social networks and facilitate the opportunities for families to meet and get to know each other.

Make time to get to know families

It is important for settings to have not only a child centred approach, but to also have a family centred approach in which settings get to know their families. This will then enable families to build trust in you as a professional and find out what they want to get out of the sessions you are providing.

Let parents know that they can always make their feelings, views and opinions known, and that these will be taken seriously and dealt with respectfully.

Be mindful that for some children with complex needs the family may have been on a difficult medical and developmental journey and this may affect how the family relates to professionals. You may be just the latest in a long line of people who have had input into the child's life.

Be flexible and accommodating

Show parents that you understand their needs by ensuring that the opportunities provided by your setting are flexible. If possible, coordinate with other services involved with the child, particularly if the child has complex medical needs and may have increased absences and medical appointments.

Provide clear information

Within your setting, you can provide useful information and signposting for families using leaflets, posters, details of websites and so on. Share information about Early Years and Childcare provision with parents; show them what happens in your setting.

Get the right training and skills

It is important that practitioners working in settings have the confidence, training and expertise to include children with additional needs particularly those with severe and complex needs. This may include training in responding to medical needs, communicating with children with specialist communication requirements (i.e. radio aid for a child with a hearing impairment) and personal care requirements. If you feel you require training in any of these areas, please refer any queries to the Local Authority Inclusion Service.

Promote inclusion and change attitudes

Settings should plan carefully prior to the child starting. The One Page Profile will be invaluable in ensuring that settings can plan to meet the individual child's needs and that families are welcomed and understood.

Settings can create a culture of inclusion by positively challenging attitudes, discrimination and ensuring that the settings policy stress the importance of including every child.

Support parents to access relevant information particularly for those who may have English as an additional language or have poor literacy skills. Show that the early years or childcare setting is part of the community it serves and so understands the concerns, aspirations and difficulties the members of that community might face.



Meeting the Needs of Children in Early Years Settings



Transition for children with Additional Needs

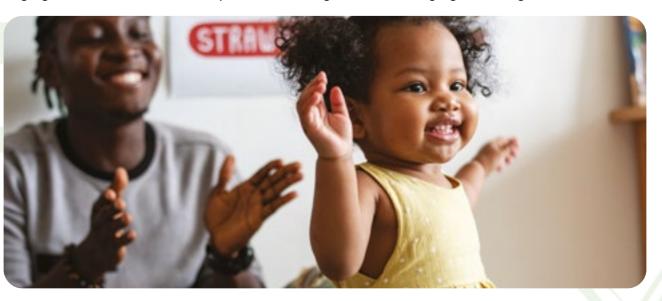
For children with additional needs, planning is of utmost importance. Settings should obtain further information about the needs of the chid. Early notification of children who require additional planning for transition into settings is important.

A multi-agency person centred approach to transition is essential, particularly for children with complex needs. This provides opportunities for professionals and parents to share relevant information with the receiving setting to help prepare fully for the integration of the child into the setting.

Transition for Children with English as an Additional Language

Good practice for all children is good practice for children with English as an additional language. This includes providing a welcoming environment where cultural and linguistic diversity are clearly valued. Ensuring the setting provides experiences that reflect their home life and culture. Visual support (e.g. real objects and pictures) and strategies will be particularly important for these children.

Many children who enter a setting with little or no English may go through a 'silent period', which can last for several months. During this time, children are developing language skills. Children will benefit from a rich language environment. Parents should be encouraged to maintain their home language when communicating with their children as this helps them develop English language skills and strengthens their understanding of language use. Remember to reassure parents that having an additional language is a strength.



Some additional 'settling in' tips:

- Learn a few words in the child's language e.g. Hello, Goodbye
- Make a welcome book for the child to take home and share in their home language
- ✓ Use dual language books
- Use visual supports
- Be culturally aware, provide contextual support if needed
- Provide a visual timetable in the setting for parents to talk through with their child when they arrive
- ✓ Makaton signs can be helpful
- ✓ You could tape a reassuring message or song for the child to listen to if they miss their parent especially if no one else in the setting speaks their home language
- ✓ Encourage a supportive friend for the child
- ✓ Ensure other children are aware that the child can communicate in their home language
- ✓ Establish an arrival routine (check that parents understand about collecting their child on time and that they must let you know if someone else will be collecting them)
- Check the correct spelling and pronunciation of the child's name.

Dealing with Parental Anxiety

The following may be useful for discussion in a parent meeting or as a basis for a parental introductory handout. Parents may be asking themselves all sorts of questions and have all sorts of worries:



Most of these fears and worries can be addressed by having a good transition plan and preparing for transition well in advance of the child starting for the first time at a setting or moving onto pre-school nursery.

Advice for parents

Reassure parents that children sometimes cry when left; not because they are unhappy about being at setting. In the majority of cases, once the 'goodbye' part is over, a child will quickly settle into an activity or cuddle with a member of practitioners.

To ensure the handover is as smooth as possible the following suggestions may help:

- I. If the child is having trouble settling in, arrive earlier or later and factor in time to comfort and reassure them before you leave. Stay and play with them, help them to settle with their key worker
- 2. Children need the reassurance of a familiar, consistent, goodbye routine whether that is a kiss, waving through the window or taking them to play in the block area. This signal will help them to cope with the transition from being in parents' care to being in the care of the setting
- 3. The routine of saying goodbye and reassuring them that the parent will return is essential when supporting a child to settle into an unfamiliar environment
- 4. Parents should never just sneak out because the child is playing happily and is distracted. To the child, to suddenly look up and that find mummy or daddy is no longer there may feel like abandonment.

Ideas to support transitions into setting



Working in Partnership

Working Effectively with Parents

Settings play a key role in supporting all families with children including those with additional needs. Setting practitioners are in the best possible position to work alongside and support parents. Once a positive relationship has been established with parents it is important to continue building upon it. If new concerns or situations arise, the setting can work alongside and support parents.

Suggested strategies to help setting practitioners to work with parents:

Developing Empathy

Empathy involves showing compassion and understanding towards parents. The way they may be feeling will depend on what is happening in their life in relation to their child at any given moment in time. The simplest way to do this is to imagine yourself in their place and consider their feelings and concerns in any given situation. Empathy is not feeling sorry for a person and treating them with sympathy instead; it is a positive emotion that helps give insight.

Developing Respect for Families and a Non-Judgemental attitude

At the heart of any positive working relationship lies a genuine respect for the families of the children in your setting. It recognises that the family and parents in particular are the most important element in a child's life. Being non-judgemental involves thinking positively about parents, regardless of their personal characteristics, child rearing practices or situation. It requires a practitioner to believe that parents have a fundamental desire to do the best for their child. A non-judgemental and respectful practitioner communicates confidence that the parents are managing often-difficult situations well. The main beneficiary of this positive relationship is always the child.

Developing good, active listening skills

Good active listening involves listening to what is being said as well as how it is being said and helps avoid any misunderstanding of the message. It includes acknowledging parents' feelings, reflecting back, asking open questions and using appropriate body language.

Acknowledging a parent's feelings or emotions

Recognising and acknowledging how parents are feeling can immediately give comfort and reassurance and often deflects a difficult situation. Use phrases like "I can see you're upset" or "Yes I can see that you are angry about what has happened". Acknowledging a feeling does not mean you agree, but it does mean you are open to discussion and are aware of how a parent may be feeling.

Reflecting back what a parent has said

In order to ensure there are no misunderstandings between setting practitioners and parents, throughout conversations with a parent it is useful to get into the habit of summarising the points parents may make. You can do this by using phrases such as "I think you may be saying..." or "Can I just clarify that you mean..." or any other similar phrase. Using this strategy of reflective listening will ensure both parent and practitioner have a clear and shared understanding of what has been said.

Asking Open Questions

Open-ended questions encourage people to talk, invite further information and allow parents to express what are their most relevant and important concerns.



Body language

Much of the way we communicate is non-verbal. This includes tone of voice, volume, and body language such as facial expression, gesture and posture. It is important then to think about this aspect when communicating with parents.

Being open and honest

It is important to share positive information with parents in order to help build good relationships. This in turn will help smooth the way for future conversations that may centre upon concerns about their child's development. If a positive relationship has been established with parents, setting practitioners will find it easier to be open and honest in their conversations even those, which are potentially more difficult.

Inclusion for All - Good Practice Guide

Meeting the Needs of Children in Early Years Settings

Raising Concerns with Parents

Always remember that parents can be on different pathways in accepting or identifying difficulties that their child may be having; this is why we must adopt sensitive and sympathetic approaches in all cases.

Consider: Why, What, When, Where, Who

Why - have you arranged to meet with parents?

What are your main concerns - specifics, evidence
What outcomes do you hope to achieve
by raising your concerns?

When - is the best time?

A suitable time for you
A suitable time for the parent
Have you allowed enough time to
fully discuss the issues?

Rules for raising your concerns

Try to remain positive and clear in what you say

Do not use labels or diagnostic terms

Do not compare to other children

Expect an emotional reaction

Where - do you meet?

A private room or quiet area in your setting

Who - should attend?

The Key Worker? Leader?

Parents (do they want to bring anyone for support)?

Plan and prepare what you will say about the following:

How do you feel their child is getting on?

Is the child the same or different at home?

What have you seen that the child is good at?

What areas of concern you have

about the child?

Discuss what can happen next?

Intervention - What are you going to do to help the child?

Ideas into the home - What would you suggest the parents could do to help?

Referral - Is there someone else who might be able to help you and/or the parents?

Remember: you must take notes from the meeting and keep a record in the child's file.

Building on positive relationships with parents

Once a positive relationship has been established with parents, it is important to continue building upon it so that if new concerns or situations arise, setting practitioners are in the best possible position to work alongside and support parents.

It is important that all setting practitioners are aware of their own responsibilities for working with all parents especially those whose children have additional needs. All practitioners are responsible for working with and supporting all children even if they have a nominated key worker or practitioners member working with that child on a daily basis.

Find below some helpful strategies that are easy to implement. By putting in place some or all of the suggestions you can be assured that, you are doing your best to reach out to parents even those who are harder to reach.

- ✓ Help parents understand 'the system' and explain what you are doing and why
- ✓ Share information with parents about how things work e.g. admissions, procedures for early identification, referrals, transitions etc
- ✓ Parents need to know who they should go to when they need to discuss important issues regarding their child
- ✓ Make sure parent know and understand the roles within the setting and other professionals from Health, Education and Social care involved with the child
- ✓ Make sure parents have a copy of your relevant policies such as 'Settling in' and 'Inclusion' Policy
- ✓ Try not to use 'jargon' or acronyms as parents are sometimes embarrassed to say they don't understand.

Supporting Parents to participate

- Be open and prepared to learn from and with parents
- Avoid making assumptions about how each parent might want to get involved
- Remember the parent may be experiencing a range of emotions and feelings, don't give up offering opportunities for their involvement
- ✓ Always ask parents views and make sure that it is reflected in planning for the child
- Aim for a partnership approach with joint planning, evaluations, and contributions suggesting outcomes or targets.

Avoiding Disagreements

Being open, honest and realistic with parents is the foundation of a firm partnership. Parents are more supportive and willing to give settings the benefit of the doubt even in stress-filled and emotional encounters if there is a history of working together. It is important to share positive information with parent but just as important to inform parent of any concerns.

Parents may not have had positive experiences to date: they may be reluctant to share information about their child, they may feel they have been ignored. They may feel that by disclosing too much information about their child it may be used negatively. There are many factors that can influence parent's engagement with settings and understanding these barriers is essential in order to minimise them.

Factors could include:

- ✓ Parents feel the setting is not welcoming, feel they are being judged, feel guilty or out of control
- ✓ Parents have a negative view of education, schools and settings due to their own experiences growing up
- ✓ Parent may have health difficulties, disabilities or do not have an effective support network of extended family or friends
- Parents have had a negative experience of other agencies involved with themselves or their child.

Resolving Disagreements

Approaches to resolving disagreements can range from relatively informal conversations to more person centred meetings. Whatever approach is taken it is important for everyone to keep an open mind during discussions and be willing to consider creative solutions.

Do

- ✓ Look for a solution
- ✓ Focus on the child's interests
- ✓ Focus on the problem
- ✓ Use dialogue
- ✓ Have a 'can do' attitude and belief
- ✓ Focus on change
- Look forward.

Don't

- X Look for someone to blame
- Focus on the personalities involved
- Focus on control
- Take an adversarial approach and engage in debate
- Think that 'someone has to lose'
- Focus on a predetermined outcome
- Mell on the past.

Some ideas for resolving disagreement include:

- ✓ Acknowledging the feelings and concerns of parents
- ✓ 'Stepping in to the other person's shoes'. Try and imagine where the other person is coming from and what is motivating their perspective
- ✓ Clarifying the problem, checking assumptions and inviting discussion
- ✓ Letting go of any notion that you are 'right' and they are 'wrong' instead focusing on mutually helping the child
- ✓ Be willing to apologise if it is appropriate: 'I am sorry this has happened'.



Working with other professionals

Partnership working is crucial to effectively supporting children. This approach brings together education, childcare, health, children's services and other professional services through a person centred 'Team around the Child' approach. This collaborative approach will ensure the child and their family get the most appropriate help and support where required.

A number of different professional services may be involved with the children in your setting and will be able to offer to provide advice, guidance and training to settings in meeting their individual needs.

Some of the professionals who may come to your setting to support both practitioners and/or the child could be:

tearing Impairment Team (H1)

Qualified Teachers of the Deaf work with babies and children with diagnosed hearing impairments. Advising and supporting children and their families from diagnosis until they finish education, they work in partnership with homes, settings and professionals. Support includes; help and advice on hearing equipment, providing information on different communication modes le.g. British Sign Language, Auditoryl Oral approaches, English/Welsh with Sign) and providing strategies and training



Paediatric Physiotherapy

help children to achieve their optimal physical development. They have specialist knowledge in the movement, development and conditions that are likely to affect a baby and growing

Early Years Inclusion team (EYIT)

offer advice, guidance and training for settings to enable successful transition and inclusion of all children in order to make progress and have their needs met.

Multi-sensory Impairment Team

can provide families and settings with information and strategies for development functional use of vision and or hearing. Supporting development of communication, mobility, tactile skills and reasonable environmental adaptations

Speech and Language Therapy Paediatric services (SaLT)

Children's Speech and Language Therapy works with families and professionals to reduce the impact of speech, language, communication and swallowing difficulties on a child's life. Children's Speech and Language Therapy support those around a child to provide the best possible language environment

Occupational Therapy (OT)

a specialist service providing holistic assessments and intervention for children and young people aged up to 19 years who have either postural management, sensory processing and lor motor coordination difficulties affecting activities of daily living/participation



specialist Health Visitor (SHV)

provide guidance to the families of children/young people with complex additional needs. Supporting them through the process of diagnosis, development concerns, sleep, diet and continence



Visual Impairment Team (VI)

Qualified Teachers of Vision Impairment work with children who have vision impairment and their families. They can support children from the point of diagnosis until they finish their education, and provide advice and support on development, use of other senses, use of developing vision. They also provide training for settings, and support with transition into education. Once in school, advice, training and support is given with all aspects of visual access to learning.



The Disability Team

works alongside settings to successfully include children with significant healthcare and/or physical. The team work closely with health to provide advice, training and ongoing support.

Child Development Advisors

The Early Years Experience Team offers psychologically informed support for families of children 0-6 with Additional Learning Needs. The Child Development Advisors work with children 0-3 and offer regular home / video contact. They use developmental profiles, observation and parent's knowledge of their children to identify children's current strengths and opportunities for future learning. Activities are done through play using the Portage model.

The Children and Young People Neurodevelopment Service

provide multi-disciplinary assessment, diagnosis and treatment, information and advice for children and young people with a neurodevelopment disorder, and

H works closely with partner organisations such as schools, the education authority, social services, and third sector organisations and aim to meet the needs of children, young people and their families in an effective and holistic way. Neurodevelopmental disorders include: Autistic Spectrum Disorder, Attention Deficit and typeractivity Disorder and Tourette's Syndrome.



Education Psychology Service (EPS)

help schools, nurseries, childcare and LA to make decisions that are in the best interests of children who have difficulties which affect their learning and development.

The Disability Index

The index is a register of children and young people with disabilities and additional needs in Cardiff and the Vale of Glamorgan.

The index aims to:

- ✓ Give a clear picture of how many children and young people with disabilities and additional needs there are in Cardiff and the Vale of Glamorgan, which helps agencies to work together to plan better services. These agencies include: Social Services, Education, Health and voluntary organisations
- ✓ Identify and influence services based on current and future needs of children and young people with disabilities and additional needs
- ✓ Help inform families about the services and activities that are available to them
- Provide parents with the opportunity to discuss their needs and suggest ways to improve the planning and co-ordination services.

Who can sign up to the Disability Index?

In order to be signed up to the Index you must:

- ✓ Have a diagnosed disability, be in the process of diagnosis or have confirmed ongoing additional needs
- ✓ Be aged 0-18 years.

Why sign up to the Index?

Once signed up to the Index you will:

- Receive information to keep you up to date with new services and activities
- Receive the quarterly newsletter the 'Index' and specific mail-outs;
- ✓ Have the opportunity to contribute articles, news and events to share with others on the Index.
- ✓ Help and influence the type of services being offered and developed.

Cardiff - 03000 133133

www.cardifffamilies.co.uk contactFAS@cardiff.gov.uk

Vale of Glamorgan – 0800 5871014 theindex@valeofglamorgan.gov.uk

The Family Information Service (FIS)

Family Information Service provides free advice and information on a wide range of childcare options and activities for children aged 0-20, their families and their carers. This includes information on nurseries, childminders, out of school clubs, playgroups and parent and toddler groups. They also provide help and advice on paying for childcare and working in childcare.

Finding Childcare in Cardiff and the Vale of Glamorgan

Family Information Service can be used to find up to date and accurate information about childcare in Cardiff and the Vale of Glamorgan, working alongside childcare providers to maintain a Childcare directory.

Support Services

Family Information Service can be used to find up to date and accurate information about support services for parents and families by using Dewis Cymru. This is the place for parents to go if they want information or advice about well-being. They've got information that can help parents think about what matters to them, and about local people and services that can help.

Children's Activities

Family Information Service can be used to find out what's on for children and families in Cardiff and the Vale of Glamorgan through the Children's Activities Online Directory. They work alongside a wide range of activity providers to bring you this easy to use directory of what is going on in Cardiff and the Vale of Glamorgan.



Tel: 029 2035 1700

Family Information Service Cardiff

Tel: 01446 704704

Family Information Service, Vale of Glamorgan

Meeting the Needs of all children

Early Education for pre-school children in non-maintained settings in Cardiff and the Vale of Glamorgan should place the child at the centre of its provision. It is an expectation that all children be afforded the opportunity to access play and learning in a way in which enables them to have their needs met, make progress and achieve. It focuses on enabling the learner whilst also taking account of what is important to the child to keep them happy and fulfilled.

It is an approach that recognises the need for collaboration between parents and professionals: taking account of the child's interests, needs and what is important for the child to keep him or her safe, well and able to learn and develop.

Quality inclusive practices underpin the provision along with accessible environments, positive attitudes and a holistic approach taking account of factors that may influence progress and achievement.

The Model of Inclusive Provision



Many children experience challenges to learning or development at some point during their educational journey; most children can be helped to overcome these challenges through excellent quality teaching and modelling, careful next step planning and appropriate interventions to scaffold learning.

For a small of minority children barriers to learning may arise from a learning difficulty or disability which can impact greatly on their progress towards achieving the expected outcomes in line with those of their cohort of peers; this is often despite consistent targeted interventions, quality universal/targeted provision and careful tracking of progress.

Universal

Effective good whole setting practice should be in place for all children to enable them to make progress; this will include a fully inclusive environment that can be accessed with a focus on removing barriers to learning, improving outcomes, and high quality of provision with practitioners having a secure understanding of early child development. All practitioners should promote and use consistently a range of strategies and approaches with children to enable access to learning/play experiences. Opportunities to practise, reinforce and consolidate skills are planned for thorough continuous and enhanced provision. This will include:

- ✓ A variety of developmentally appropriate toys, resources and experiences providing a multi-sensory approach to learning and play
- ✓ Increased opportunities for overlearning through repetition, reinforcing and generalising skills through real life experiences and resources
- Extend current skills through small steps approach, taking account of the child's interests and preferred learning styles
- ✓ Resources made available to assist a child to undertake a task e.g. sprung scissors, large threading beads
- ✓ Understanding of the stages of play and planning accordingly e.g. solitary, observer, parallel, cooperative
- Consistent use of visual cues to support children's listening, attention and understanding e.g. objects of reference, photographs, traffic lights, now and next, signs and symbols throughout the session

Targeted

The setting should target universal provision using screening and observational information to inform areas of development and gaps in learning. All practitioners should promote and consistently use a range of strategies and approaches for children to enable access to learning/play opportunities based on the advice and expertise of relevant professionals. This may include developing and adapting areas of continuous provision to focus on needs of the cohort as identified and building on their baseline e.g. gross motor, language, attention and listening. The setting should provide increased opportunities for activities on an individual, pair or small group basis for overlearning through repetition, reinforcing and generalising skills. The setting may need to consider flexible staffing arrangements as part of this delivery. This may include:

- Redirection of staff for short periods of time to support individuals, pairs or small group targeted activities
 e.g. attention and listening, turn taking, waiting and responding, sharing
- ✓ Scaffolding children supported to learn new skills by the provision of a role model, which could be a child or practitioner and simplification of the universal task to achieve success through errorless learning
- Strategies such as backwards chaining (breaking down the steps of a task), choice board to support independence and expression of needs/wants and increased consistent use of Makaton signs relevant to a child's developmental stage

Intensive

A minority of children may require Additional Learning Provision to be able to access and engage in a setting. The Local Authority at this stage will consider whether the child has Additional Learning Needs as defined in the ALNET Act 2018, which may require ALP that is not ordinarily available, or can be reasonably provided within the resources of the setting. If the Local Authority agree that the child has ALN then the child will have an IDP; maintained and reviewed by the Local Authority. The LA IDP will clearly identify the Additional Learning Need of the child, and the Additional Learning Provision required to address the individual needs of the identified child.

Inclusion for All - Good Practice Guide

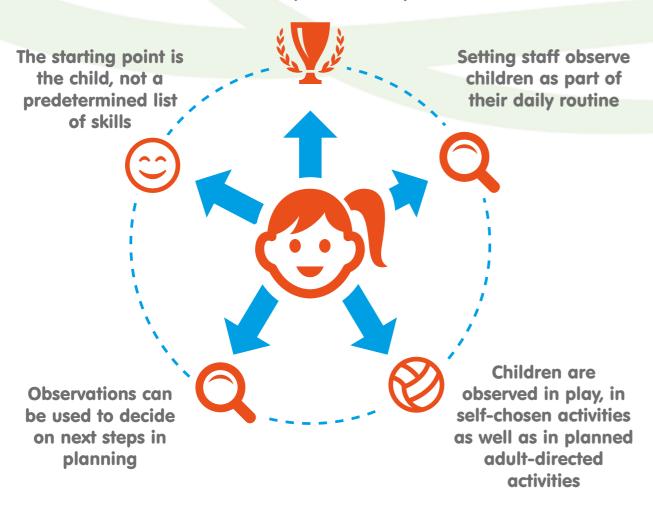
Meeting the Needs of Children in Early Years Settings

Observation

Observation is a method of finding out information about children in your setting. It is an effective tool in supporting and extending children's early learning. By observing, listening and talking to children we can note significant achievements that enable us to support the next steps in their learning.

Setting practitioners can observe in different ways – through participating, teaching and playing alongside children as well as taking the opportunity to stand back and watch from a distance. Observation is about watching children's actions, expressions, gestures and behaviours, their ways of communication and interactions. This gives you a clearer picture of children's developing interests, how they think and play, how they interact with each other and engage with the environment.

Observations show what a child CAN do - their significant achievements, not just what they can't do



Observation opportunities

Practitioners in the setting working with the children should be alert to the opportunities for observation, during the session. Some observations will be planned for, others will be incidental. It is crucial that setting practitioners are able to respond spontaneously to children's play and learning and to take opportunities for observation as they arise.

Making observations

Observations should document what the child has achieved - not what they have failed to do. Observations should highlight the child's individual strengths, interests and needs.

Recording observations

Not all observations will be written down and much useful information will be exchanged verbally through informal discussions. However, it is important that there is a record of observational information that can be shared more formally to plan for the next step in that child's development and to report back to parents and other professionals.

All observations, whether they are formal or informal should be filed in the child's personal folder adhering to General Data Protection Regulation (GDPR).



Stand aside for a while and leave room for learning, observe carefully what children do and then, if you have understood well perhaps teaching will be different from before.

Loris Malaguzzi

Monitoring and Review Cycle

If a parent, practitioner or other professional working with a child has a concern about their development the setting should ensure an effective inclusive provision and remove any potential barriers that may hinder development or learning for that child. This provision could take the form of a four-part cycle through which earlier decisions and actions are revisited, refined and revised with a growing understanding of the child's needs and what supports the child in making good progress and securing good outcomes. At every stage the child and the parents should be at the centre of the process and always be consulted and kept informed of the action taken to support their child.



Carry out observations of the child, hold discussions with key practitioners members to identify and analyse the child's needs. Note the child's strengths and areas for development. Complete whole group screening and have informal discussions with parents.

Suggested evidence: Well-Being & Involvement Screening; Wellcomm Screening; Child observations



If settings have growing concerns about a child's development and progress, then a person centred approach should be followed, including records of what is working and what is not working or, could be better.

Meetings should be held with parents, colleagues and any specialists who are involved to plan a way forward appropriate to the child's needs;

- ✓ What is working and needs to be continued
- ✓ What's not working or could be better
- ✓ What's important TO the child
- ✓ What's important FOR the child (best ways to support the child)
- ✓ An agreed action plan.

Suggested evidence: Minutes of the Person Centred Meeting and agreed outcomes by all.



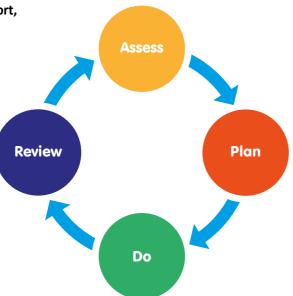
The setting to plan, implement and monitor daily provision to meet the child's needs and overcome any challenges identified at the meeting. This may include targeted intervention and strategies measured against the child's progress. A nominated practitioners member could be identified to oversee this; this could be the child's key worker.

Suggested evidence: Daily observations, targeted support, Wellcomm interventions, the use of visual strategies



After an agreed period of time, the outcomes from the person centred meeting will be reviewed with all those involved to discuss how effective the support has been and the impact on the child's progress. In light of the child's progress the setting along with parents will agree any changes to the outcomes; any changes to the support and discuss the ways forward or next steps. The process will be repeated to monitor the child's progress regularly.

Suggested evidence: Outcomes of meeting and planned ways forward



Identifying a child who may have an Additional Learning Need

Additional Learning Needs (ALN)

Setting practitioners have a role to meet the needs of all children on a day-to-day basis. They also have the role in bringing to the attention of the Local Authority children who may have an Additional Learning Need.

Definition of an Additional Learning Need

As defined in the ALNET Act, a person has additional learning needs if he or she has a learning difficulty or disability (whether the learning difficulty or disability arises from a medical condition or otherwise) which calls for ALP.

A child has a learning difficulty or disability if they:

- (i) have a significantly greater difficulty in learning than the majority of others of the same age, or
- (ii) have a disability* for the purposes of the Equality Act, 2010, which prevents or hinders them from making use of facilities for education or training of a kind generally for others of the same age in mainstream maintained schools
- * Disability Not all disabled children, as recognised under the Equality Act 2010 will have Additional Learning Need (ALN); many children with a disability will not have an ALN. However, if the disability prevents or hinders them from making use of the setting's facilities or strategies, which are of the kind generally provided for others of the same age in the setting and the individual requires ALP as a result, then they are regarded as having ALN.

Evidence which may be used when considering whether a child may or may not have ALN:

Identifying whether a child may have ALN needs to be based on evidence. This evidence can come from a range of professional services such as settings, health, children services and education. Examples of evidence based information that may be used could be:

- Schedule of Growing Skills (SOGS)
- ✓ Wellcomm scores
- Baseline information
- / Developmental checklist
- ✓ Cognitive assessment
- ✓ Observations/Field notes
- Health reports
- ✓ Speech and Language Therapist reports
- Child Psychology (Portage) assessment.

Informing the Local Authority that a child may have ALN

The majority of children with developmental delay and/or learning difficulties will be able to have their needs suitably met by the arrangements and inclusive provision within the setting through universal and targeted provision.



If practitioners believe a child needs ALP above and beyond their peers then they may have ALN and should be brought to the attention of the Local Authority (LA) when there is clear evidence of long term, significant ongoing needs:

- Significant impaired co-ordination
- Significant delays in language functioning
- ✓ Significantly impaired social interaction or communication or a significantly restricted repertoire of activities, interests and imaginative development
- ✓ Evidence of significant emotional or behavioural difficulties, as indicated by clear recorded examples of withdrawn or disruptive behaviour
- ✓ A significant physical and/or sensory impairment, such as hearing or visual impairment.
- ✓ Any other evidence of a significant delay in the development of life and social skills.

What happens next?

If you have any of these concerns, the setting should arrange a person centred meeting with parents and any other professionals involved. At the meeting any concerns, information and evidence can be shared and a way forward agreed. Following this a referral can be made to the Local Authority that the child may have ALN.

Once the information and referral has been received by the Local Authority the evidence will be considered at a multi-agency Early Years Forum. A decision will be made as to whether the child meets the criteria set out in the code as having ALN requiring ALP. This must be set out in a LA IDP.

When the Local Authority decide that a child has ALN

Once it has been agreed that a child has ALN, requiring ALP and IDP will be written. This plan is intended to be a flexible document that contains a description of the child's ALN and a description of the ALP.

The purpose is to provide a record of both the child's ALN that acts as barriers to the child accessing their learning and play opportunities and the ALP from the Local Authority and/or from health that is required to overcome or mitigate those needs. All IDPs will consist of the following key elements:

- ✓ Basic biographical information of the child
- ✓ A One Page Profile
- ✓ The views, wishes and feelings of the child or child's parents
- ✓ A description of the child's Additional Learning Needs
- ✓ A description of the ALP required to meet those needs and who will be responsible for providing it
- ✓ A record of information and evidence used to develop the IDP.

For children under the age of 3, it will be the Local Authority's statutory duty to prepare and maintain the IDP to ensure that there is accountability

for the delivery of ALN provision. The IDP should be reviewed at least annually to ensure that the IDP continues to accurately reflect the child's needs and details the provision required to meet those needs. IDPs can be reviewed sooner at the request of parents, NHS bodies or due to anticipated significant changes that are likely to impact on the child's ALN or ALP – for example, where the child is due to move on to a new stage of education.

Disagreement and Conflict Resolution

All services should work together collaboratively and flexibly in order to ensure that children and their families receive coherent, well co-ordinated support which helps them achieve positive outcomes.

Sometimes parents may disagree with professionals who support their child's needs or are unhappy about something they do or say. Despite all best efforts, it's not always possible to avoid disagreement.

Where disagreements occur about an IDP or the provision it contains, the matter should be considered and resolved at the most local level possible. Early resolution of disagreements significantly benefits the child and can avoid unnecessary stress for the individuals and their family.

SNAP Cymru provides independent disagreement resolution services. Their specialist services can be used by parents of children with an ALN. These services are free and independent of the Local Authority. The purpose of resolution disagreement services is to be a positive way of resolving disagreements quickly. They can help resolve the issues and provide the opportunity to restore or improve the relationship between the child's parent and the setting or Local Authority and help foster the understanding that the child is central, with everyone working together to support the child.

If the dispute is unable to be resolved at a local level, then parents can take the dispute to the Educational Tribunal of Wales. The Tribunal hears and decides appeals and applications in relation to children who have or may have ALN. The Tribunal provides on its website advice and guidance on the appeals process and the procedures to be followed.

If the disagreement or complaint relates to health, whether it relates to an assessment, treatment or service provided by the NHS, or any other concern, then the child's parent will need to use 'Putting Things Right' which deals with concerns and complaints relating to the NHS in Wales.

All services should work together collaboratively and flexibly in order to ensure that children and their families receive coherent, well co-ordinated support which helps them achieve positive outcomes.

61

The One Group

The One Group is a weekly bilingual parent group available across Cardiff and facilitated by a Transition Worker from the Early Years Inclusion Team. The groups are available to all parents of children who may have an additional learning need. All groups are free, and a referral or diagnosis is not required to attend.

A range of professionals from Health, Education, Social Care and Third Sector regularly attend the groups to provide parents with information, advice and guidance.

For more information contact 029 20872710

Facebook: **Grwp 1 Group**Twitter: **@grwp1group**



Information Advice Sheets

Attention and Listening
Chaining Method
Development of Play
Early Communication
Intensive Interaction
My Turn, Your Turn
Now and Next
Objects of Reference
Responding to Biting
Tap, Tap Box
Traffic Light Strategy



Attention and Listening

Children need to be able to attend and concentrate so that they can learn new skills, including how to communicate and understand. A child develops their attention and listening skills by listening to every day sounds and speech around them before they can learn to speak for themselves. Children develop attention and listening skills through frequent opportunities to interact and play with others.

Top tips to develop attention and listening

- ✓ Gain eye contact and get down to the child's level face to face
- ✓ Say the child's name to gain their attention and if needed give a gentle physical prompt touch on the shoulder or arm
- Slow your rate of speech and use pauses. Ensuring you allow time for children to process your request or instructions
- Follow the child's lead throughout the play. Play with what interests them, keeping activities short and stopping when the child loses interest
- ✓ Keep your play exciting by using your tone of voice and facial expression
- ✓ Using pauses during play can build in an element of anticipation. For example pausing before 'go' in 'ready, steady, go' games, and waiting for the child to indicate that they want the next step to happen
- ✓ Minimise noise and visual distractions
- ✓ Use gestures and objects to cue in the child's attention and help their understanding.
- ✓ Use simple phrases and sentences, breaking down instructions into smaller key word phrases. Checking the chid has understood and heard what you have said
- ✓ Use activity rules good looking, good listening, good waiting. These can be used to model what you want the child to do. Remind them often and praise when they follow
- Set manageable goals and ensure previous tasks are finished before giving a new one.
 For children who struggle to maintain their attention use start / finish boxes.

Activities to try

Follow the leader - Sit opposite the child and carry out different actions (e.g. clapping, waving your hands, patting your head) and your child has to copy them. When they are familiar with this game, give them turns at carrying out the action for you to follow, this can develop into simple games such as Peek-a-boo.

Feely boxes - Take something of interest and put it in a box. Open the box slowly, let them put their hand in and feel it! You could use a favourite toy, a glove puppet, a banana, or a musical instrument. Explore it, play with it, if it's a snack eat it.

Ready, Steady, Go - Play games that involve 'ready, steady, go' (e.g. bubbles, running, obstacle courses, rolling a car down a ramp, blowing up balloons and letting go etc.). Pause before 'go' and see if your child can wait and then respond with an action or vocalization for you to say 'go'.

Nursery rhymes and songs - Use favorite nursery rhymes to gain and maintain attention, use props if needed. Sing one line and see if the child can end the phrase/song i.e 'Twinkle, Twinkle, little.....' pause and wait for a response.

Chaining Method

What is chaining?

Chaining is a teaching method where in which sub-skills are reinforced in a sequence to enable the learner to perform more complex behaviours. For example, in teaching a child to tie shoes, each individual step, from tightening the laces to making the parts of the knot, would be taught and reinforced until the child can perform the complete task.

Why use chaining method

Some children may need chaining to learn tasks that others can learn by watching and imitating. It may also be the case that children with additional needs lack the innate desire to learn certain tasks.

In order to teach skills the adult will need to provide positive praise on the completion of each "link" in the "chain". So, for example, in the case of zipping a coat, the adult might plan to teach the skills over time—and reward each step along the way:

- 1. Find your coat
- 2. Put your coat on independently
- 3. Engage the zipper and pull it up
- 4. Complete the entire sequence on your own without support (final reward)

Backward chaining

Sometimes chaining may be too involved for a learner who can become frustrated or get lost going through a chain of steps. In a situation such as this, backward chaining may be a good option. In backward chaining, a parent or practitioner completes most of the tasks in a chain, allowing the child to finish the final task. This gives the child an experience of success and completion with every attempt. As this final task becomes easier, the adult can then slowly fade back and have the child complete more items in the chain.

Example of Backward Chaining

Getting a zipper started can be super-tricky, but zipping it up once it's on track is super-simple. Divide the job into these steps:

- 1. Thread the bottom piece into the zipper piece.
- 2. Slowly start the zipping to make sure the zipper is on track.
- 3. Pull the zipper the rest of the way up.

You can give your child the job of triumphantly whipping that zipper up to the top long before he or she has the ability to put the two parts of the zipper together.

Top Tips

- ✓ Firstly create a list of the task steps. This is commonly known as task analysis
- Provide hand over hand prompting if the child is unable to learn by having it modelled
- Provide positive reinforcement at every step.

Development of Play

Play is very important to a child's development. Young children can develop many skills through play. They develop their language skills, motor skills, emotions, creativity and social skills.

Types of play -

- ✓ Unoccupied play: This starts from birth, baby will sometimes have some unexplained movements which can seem to be random movements with no clear purpose. This is the beginning of their play
- Solitary Play: This is when a child plays alone. All children like solitary play at times. When engaged in solitary play, children don't seem to notice others playing nearby
- ✓ Imitative Play: This is when a child and another child copy each other. One child starts to jump and soon they are both jumping. Or you are building with blocks and a child tries to do the same
- ✓ Parallel Play: This is when a child plays alongside another child without interacting. A child may observe the other children and imitate what they do
- ✓ Associative play: At 3-4 years of age children may start to become more interested in other children rather than toys. They may start asking questions and talking about toys and their play
- Cooperative Play: As a child gets older, he or she will start to play with other children. They may work together to build a tower or create a mud cake. Many children are not ready for this kind of play until they are 36 months of age or older.

In a child centred environment, the child is the focus of all activities. Play is usually initiated by the child and can also be enhanced by the practitioner. Adults can facilitate child centred play by: taking children's play seriously, being excited about their discoveries, praising their achievements, being patient and encouraging, valuing the process of their play and not always expecting a predictable end product.

Playing is a natural and enjoyable way for children to keep active, stay well and be happy. Freely chosen play helps children's healthy development. To have good physical and mental health and to learn life skills, they need various unstructured play opportunities from birth until they're teenagers.

Free Play - Free play is when a child decides and controls their play following their own instincts, imagination and interests. They play without being led by adults. There's no right or wrong way to play. Free play improves children's health, well-being and development. Try not to make the free play to chaotic and offer too many activities at the same time as some children may find this overwhelming and it may prevent them from exploring activities

Why play is important - Play improves the cognitive, physical, social, and emotional well-being of children and young people. Through play, children learn about the world and themselves. They also learn skills they need for study, work and relationships such as: confidence, self-esteem, resilience, interaction, social skills, independence, curiosity and coping with challenging situations

Developing physical health through play - Physical play such as running, skipping and riding a bike/scooter helps children develop: good physical fitness, agility, stamina, co-ordination and balance. Activities to develop fine motor skills such as picking up smaller items, holding a paintbrush or crayons/pencils, playdough with cutters/scissors and rolling pins.

Developing social skills through play - Playing can help children develop their social skills with others. By listening, sharing attention and sharing play experiences. This helps a child to explore their feelings, develop self-discipline, learn how to express themselves and work out emotional aspects of life.

Early Communication

Communication is the ability to send and receive information. It can be verbal, nonverbal, artistic and technological, among others. In order to help a child build essential skills and feel confident, they must first be able to communicate and feel positive in that interaction. It's important that there are strategies in place to promote a good communication rich environment for all children within the setting, these should be naturally embedded into everyday practice.

Examples of communication strategies include:

Visual cues - pointing, gestures, facial expressions or objects of reference.

Visual strategies - now and next boards, visual time tables, sand timers and traffic lights.

Processing time - this could be auditory processing (how they process spoken instructions) or physically planning their movements (i.e. where they are in the room and how they are going to get to where they are going).

Verbal communication - Minimise questions, use simple key words and simplify your language. As adults we talk a lot and use complicated and very grown up language. Ensure you think about the child's level of language and understanding. Using key information carrying words when you communicate with the child will help them understand – rather than 'We're going to go outside, let's go and get your coat on as its very cold' replace with 'Outside? Coat on'

Communication support - Sign/Makaton, Baby Sign, gestures offer visual cues to support what you are saying. Don't cover your face when talking to children, they need to see your mouth and read you facial expressions and body language.

Continuity and Repetition - giving consistent messages to children help their communication. This includes using common language within the setting, choose phrases you will all use – story time/circle time/carpet time they all mean the same thing but can be confusing.

Top Tips:

- ✓ Modelling language Use slow, simple, repetitive speech when talking to children. Always use real words not babytalk. Remember that the child will need to hear the words many, many times before they'll start to use them. Label objects and actions in real life and in pictures
- ✓ Waiting Wait for the child to ask, gesture, or sign for a toy on a shelf, rather than just getting it for him/her. Do not anticipate the child's need or desires before s/he has a chance to make them known to you. If the child gets what he wants without communicating for it, s/he will be less motivated to point, gesture or ask
- ✓ Responding Delay your responses to the child's pointing, gestures or babbling when s/he wants things.
 Pretend you don't understand what s/he wants to see if the child will try to verbally communicate. Pausing allows the child another chance to verbally express himself/herself
- Use Makaton. Makaton is a speech support system. It can help encourage language development, it does not hinder it! It helps children develop communication skills even if they are still struggling to speak with words
- ✓ Singing and Rhymes Using songs and rhymes with repetitive verses to support communication encourage predictability for children giving them the confidence to join in. Provide plenty of opportunity for the children to join in by pausing on the last word of the song and see if they respond with a vocalisation or fill the gap i.e 'if you see a crocodile don't forget to'
- ✓ Enjoy making sounds use lots of vocalisations and sounds in play animal sounds, silly sounds (blowing raspberries, sneezing), babble sounds etc. There are no rules, this gives the child confidence to try to imitate what you are saying, when they do repeat it back to them. This validates their efforts and encourages them to try again which then encourages the early stages of turn taking in speech. Most importantly have fun with sounds!

Intensive Interaction

Introduction - Intensive interaction or joint attention offers a way to connect and communicate with children who struggle with sociability or communication. This can be by commenting on their actions, joining in with them, playfully imitating them. By responding instead of leading we don't make demands on the person that they cannot cope with. Instead we communicate that we value them and enjoy being with them. We allow them to chance to explore with making things happen and to take the lead. The 'topic of conversation' is within their realm of interest

How to get started

Spend some time observing the child. How do they talk to themselves? What noises do they make? What movements, or behaviours do they repeat frequently? Tune into them.

Take the child's lead - respond to things they do. This can be by commenting on their actions, joining in with them, playfully imitating them. By responding instead of leading we don't make demands on the person that they cannot cope with. Instead we communicate that we value them and enjoy being with them. We allow them to chance to explore with making things happen and to take the lead. The 'topic of conversation' is within their realm of interest.

Use timing and rhythm in the interactions. This can make them like games - with anticipation and drama to hold the child's attention. Rhythm and repetition help the child to predict what will happen next and to get more involved. We can create the feeling of taking turns.

Intensive Interaction Techniques

- ✓ Sharing Personal Space: It can be pleasant merely to have someone near, experiencing mutual warmth and proximity e.g. lying/sitting/standing together quietly or otherwise.
- ✓ Vocal Echoing: Echoing vocalisations can develop conversation like sequences, with child and adult giving and receiving important feedback e.g. echoing of verbal or non-verbal vocalisations.
- ✓ Behavioural Mirroring: Mirroring a child's behaviour can develop into action sequences that involve both child and adult.
- Eye Contact: Eye contact is an important means for giving and receiving inclusive social signals e.g. making dramatic glances, looking in the mirror, staring at each other. If this is difficult for the child do not pursue.
- ✓ Joint Focus Activity: with adult and child focusing their attention on the same activity or object, structuring their engagement around that activity.
- Exchanging facial expressions: Using facial expressions with communicative intent and creating opportunities for these to be reciprocated in the same way, e.g. smiles, winks, pulling faces, tongue poking.

Have fun. Intensive Interaction sessions should be enjoyable and often playful.



My Turn, Your Turn

Learning to take turns is crucial for the development of our social skills, friendships, communication and play. Children who get lots of practice taking turns will have an easier time talking and playing with others.

Model how it's done

Show them, being a role model for the child provides an opportunity for the child to see the benefit of sharing and taking turns with you and with his friends and peers. Using a puppet or by including another child to act out the 'proper way' to take turns in a conversation will show your child what turn taking looks like.

Use the right language

Use simple key language to help your child understand. Using My turn, your turn draws attention to one person playing at any one time. Some children may need the verbal reminder to be paired along with a gentle physical reminder such as placing your hand on top of theirs to help them wait or a gentle tap to the shoulder while saying their name to emphasize their turn.

Practice Waiting

Waiting is often the most difficult part in taking turns for children, especially for little ones. Start with a short periods to wait as they begin to understand you can make the periods longer. A timer or singing a song can help children to predict when their turn ends or begins. Some children may need a toy to hold while they are waiting for their turn which helps to ease some of the tension while waiting.

Normalise sharing

Find opportunities to ask the child to give out items or something to others in the group. This can normalize sharing for the child and help them understand that sharing is a regular part of life.

Top Tips for turn taking

- ✓ Use Social Stories, these can teach the basic concepts of turn taking and waiting and what this will look like to small children.
- ✓ Play games using balls/balloons/cars, roll/push them back and forth gives a simple demonstration of turn taking will work.
- Stay close during initial periods of turn taking to help facilitate and model.
- Comment on when you see children turn taking using positive reinforcements. Use terms such as 'good sharing', 'good waiting for your turn'. Children may not be aware when they are using good social skills. Reinforce all positive attempts and the success.
- Expect and ignore typical grabbing and minor squabbles, if they escalate into hurting each other, remember to stay calm but firm and remind them of the rules e.g. say 'I can't let you hurt Carla' as you stop the interaction. Model what we are allowed to do e.g. No hurting Carla, pat her arm if you want her to play'. If the behaviour does escalate, separate for a while or introduce a completely different activity.

Now and Next

What is a now and next board?

A 'now and next' board, also sometimes known as a 'now and then' board, is a visual strategy. They can be used to help a child move from one activity to another, understand their day, prepare for change and express their needs more effectively.

They allow the child to focus on one task at a time without being overwhelmed. They can be used at home, setting or school.

Who would benefit from using a now and next board?

- ✓ Those with limited communication and language skills.
- ✓ Those with limited attention skills.
- ✓ Those who have difficulty finishing one activity and starting another.
- Those who are reluctant to participate in a particular activity, for example messy play (in this case the second item on the board would be something which you know the child really enjoys)

How does it work?

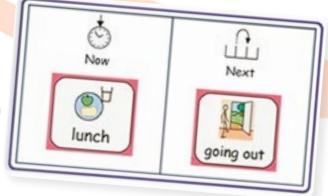
- 1. Place a picture or a symbol on each side of the board. Place an activity that really motivates the child on the 'Next' side of the board. This acts as a 'reward', something for the child to aim for.
- Show the child the board, point to each symbol individually and support the child by saying "Puzzle now...
 bubbles next". Use simple key words and always the same phrase.
- When the child has engaged with the first activity for some time the adult should inform the child by saying "gluing finished... now cars" whilst pointing to the next symbol.
- 4. Encourage the child to move on by supporting them to "post" the now symbol into a finished box or turning it over before moving onto the next activity.

You can use pictures, symbols or real life objects on the now and next board. With time, practice and consistency of use individuals will be able to move onto a longer visual timetable.

Now and next boards can also be used alongside a finished box. When the child has completed the activity from the now and next board they can post the picture into a finished box. Many children enjoy posting and may find posting the pictures gives a clear end to the activity.

Top Tips

- Now and next boards are portable.
- Make them durable as they will be used a lot!
- They can be personalised specific activities for specific children.
- ✓ Be consistent with your use same language each time.



Objects of Reference

Introduction - Objects of Reference are objects used to represent a person, activity or event. Over time the child learns that the object stands for that person, activity or event. Objects of Reference are used to help a child understand what is happening in their environment and also be used to help people make choices. Understanding real objects is the first stage of symbolic development. Therefore using objects is considered the most concrete way of representing a word.

How to make objects of reference

- 1 Select the child, activity or event that you want them to understand.
- 2. Choose an object. It should be easy to understand. Items are often chosen because of their multi-sensory properties. The object of reference must be relevant to the individual, so two children may have different objects of reference for the same toy or activity. Manipulating the object helps the child build up a mental picture of it. It could be something like:
 - ✓ The item you use during the activity (e.g. a fork = dinner, a paintbrush = painting)
 - ✓ A part of the actual object (e.g. rope = swing, a piece of pottery = gardening)
 - Something like the actual object (e.g. fabric of the same material as the object)
 - Something that is not directly related but can symbolise the activity (e.g. a twig could symbolise going outside for a walk).
- 3. It is best to start with around 3 Objects of Reference for activities/events that occur very frequently. You can add more Objects of Reference later.

How to use Objects of Reference

- 1. Just before the individual starts the activity give them the Object of Reference. Use a sign and/or speech e.g. "now we are going to the park".
- 2. After giving the Object of Reference it is important to immediately begin the activity to help them understand the connection between the object and activity.
- 3. It is very important that objects are used consistently every time you do that activity.
- 4. When an activity starts, take the Object of Reference from the person and put it away. It is a good idea to have a consistent place (e.g. a bag/box) to keep all the objects and put them away when the activity has started.
- 5. Once the individual has understood the connection between the objects and activities you can use these objects to offer choices relating to these activities.

The following example shows the development of symbolism. It is important that you always start with real objects, when you are unsure of a child's level of understanding, then photos, then pictures and finally, symbols.







Real object

Photo of object

Symbol of object

Responding to Biting

Introduction - Young children explore the world with their mouth and biting is a natural extension of that process. The urge to bite arises from this natural curiosity and it can be linked to feelings of stress, frustration and excitement.

Reasons for biting and possible solutions

In order to manage biting effectively in settings, practitioners must discover the reason as to why a child may bite and the function that biting serves.

Teething: provide a range of chewable toys / teething rings for the child to bite. Offer crunchy snacks as research has shown that crunchy snacks can actually reduce biting incidents.

Natural curiosity: offer variety of activities that involve the child's senses. Anything physical such as sand, water, playdough

Excitement: if the child is easily overwhelmed you can make reasonable adjustments. Create a quiet area with cushions, books and other quiet sensory toys as a safe place to take a break.

Frustration: where possible avoid situations that the child might find frustrating and intervene if you see them becoming frustrated. If the child is getting overwhelmed, limiting their choices to no more than two things may help.

Attention Seeking: it is important to not react too loudly or strongly in biting situations as the child will have got attention they are seeking. Instead provide praise and positive attention when the child isn't biting and is playing nicely.

Positively managing biting

- ✓ Encourage the use of words. Put into words what you guess the child might be thinking: "Do you want a turn on the tricycle?" You can ask Henry, "Can I have a turn now?"
- ✓ Observe the child within the setting and look at how to manage situations where the child might bite. Step in to make sure the situation is kept under control.
- Make sure the child who bites has enough personal space and help them to find a peaceful area to do something quiet if you spot any behaviour which might lead to biting.

When the child does bite

No matter how proactive you are there is still a good chance that the child will bite when in a group environment. When this does happen follow the course of action outlined below.

- ✓ Act calmly, maintain a quiet and controlled voice, remove the biting child from the situation and say calmly but in a firm voice say "No bite" and that "Biting hurts".
- ✓ Take care of the child who has been bitten first, calm the child and check the bite.
- ✓ Help the child who bites understand about cause-and-effect, "When you bite, it hurts your friends. Biting is never okay". Make sure the child understands that biting is not a game.

Top Tips

- ✓ Wear long sleeves. When being bitten- press into the bite. Do not be tempted to pull away as this may cause more harm.
- ✓ Read stories to reinforce: Teeth Are Not for Biting by Elizabeth Verdick, No Biting by Karen Katz, No Biting Louise by Margie Palatini

Tap, Tap Box

A tap tap box can be a 1:1 or small group activity to develop attention and listening skills. A tap, tap box activity will help develop early skills such as waiting, turn taking and anticipation as well as early language/communication skills and social skills.

What you will need

- ✓ A small box with a lid to pass round the group. The box should be easy to open, a shoe box is ideal. It sometimes helps if the box is colourful or covered in bright paper / materials this can make it more interesting and tactile.
- A selection of objects depending on the number of children partaking in the activity ensure there are enough objects in the box for each child to have 2 turns each, if using with one child start with 3-4 objects. When you first use the tap, tap box use objects that are highly motivating to the child. This will help peak the child's interest and help introduce the rules of the game before moving onto more complex objects/topics.
- ✓ A quiet space away from the main area would be ideal. Cushions or sitting mats for children to sit on may also be helpful.

Tap Tap Box Activity

The object of the activity is for a child/children to sit and take turns to open the box, then take something out to name and/or talk about, demonstrate use etc. They have to listen for their name in a song giving opportunity to build up anticipation/excitement about what's inside! You should plan to include the child/ children two or three times a week, for up to 5 minutes depending on the child's levels of attention and interest. Following the same format each time for consistency, this well help the child understand what is going to happen and what is expected of them. Gather the child/children around the box and ask them to put their hands on the box ready to tap as they sing/chant. Makaton can be used alongside the words to support speech.

Tap Tap Tap, One, Two, Three

What's inside the box for...... (name of child)

Make it exciting using the intonation in your voice. The more interested and excited you are the more they will be. The child opens the lid. Takes out an item and explores/names/talks about (depending on development) what they have taken from the box. Otherwise the adult can name the item and model what it can do.

Top Tips

- ✓ Remember you may have to introduce this activity individually before gradually having a small group.
- You could use topic based everyday items e.g. if you are doing a topic 'all about me' you could have items related to self-care e.g. brush, toothbrush flannel, soap etc. Other suggestions include:
- Sensory toys (light up toys, spinners, spiky ball, bubbles etc)
- ✓ Animals (horse, pig, cow, dog, cat etc) and noises miaow, moo, woof, neigh
- ✓ Musical Instruments (drum, rattle, bell etc) and actions such as bang shake rattle tap noisy
- ✓ Parts of the body (Mr Potato head)
- ✓ Nursery rhymes (star, boat, spider, teddy etc) and do the actions for Twinkle Twinkle Little Star, Row Row your Boat, Incy Wincy Spider. Round and Round the Garden



Traffic Light Strategy

What is it used for?

The traffic light cards is a visual strategy used to communicate to children when an activity is about to start, when it nearly finished and when that activity has finished. The strategy can help children to manage transition between different activities by visually telling them that something is about to start, is nearly finishing or has finished.

How to make a set of traffic light cards

Each traffic light symbol should be about the size of a CD and be on red, yellow and green card. Each colour symbol should have the appropriate widget symbol to remind practitioners of the purpose of each coloured card and the correct language to use.

- Red symbol should have the 'starting' widget.
- ✓ Yellow symbol should have the 'nearly finished' widget.
- ✓ Green symbol should have the 'finished' widget.



How to use the traffic light symbols



The green symbol should be used to indicate and activity is about to start. Try to establish eye contact with the child if possible and if necessary, prompt the child to touch the symbol to reinforce.

Hold up the card and say, "....is starting."



The yellow symbol is the most important of the three as it gives a warning of when an activity is nearly finished, or when access is about to be withdrawn. As above ensure eye contact with the symbol is gained, if necessary prompt the child to touch the yellow symbol to reinforce.

Hold up the card and say, "....is nearly finished."



The red symbol indicates that an activity has finished.

Hold up the card and say ".....is finished."

Once you have shown the red symbol it is not negotiable. You must follow this through.

Top Tips

- ✓ There must be consistency if the system is to work
- ✓ It should be used by all practitioners involved with the child
- Remember to keep your language simple and use the same words when using traffic lights, "starting"; "nearly finished"; "finished"
- ✓ The yellow symbol can also be used to mean "it is nearly time" and "wait" as well as "nearly finished"
- ✓ Try to incorporate the use traffic lights throughout the day, e.g. snack time, carpet session, play activity, outdoor play, snack time, nappy changing etc
- ✓ For something that is not available, use the red symbol and say e.g. "outdoor finished"