

## A Parent Guide to SEND Support in School

As your child moves through their school years, you might find at some point that they are assessed as having some form of special educational need or disability. The school will want to work closely with you to discuss and plan the type of provision that will best suit your child.

Support can take many forms - it might simply be a tweak to a lesson or a little extra adult support as part of a group. It might be more individualised, such as one-to-one support, the use of specialist equipment to enhance your child's experience or the provision of a safe space.

Remember that every school is different and every individual is too, so support for one child might not work for another. Your input will be very valuable, as you know your child best and the school will want to capitalise on your knowledge. Working with the school will mean that your child is well-supported and their needs are more likely to be met successfully.

#### What is SEND?

SEND stands for Special Educational Needs and Disabilities and describes learning difficulties or disabilities that mean your child will need more support than other children of their age. When your child is at school, they might be placed onto the school's SEND register. This means the school has recognised that your child might have some barriers to their learning and these need to be addressed as soon as possible in order to give your child every chance to make progress. Children and young people can go on and off the SEND register based on their current needs and progress.







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SEND can be split into four different areas, depending on the type of need:



### 1. Communication and Interaction

This includes difficulties related to having Autistic Spectrum Condition (ASC), such as difficulty understanding and using verbal or non-verbal communication and understanding social interaction. It also includes speech, language and communication needs (SLCN), which covers areas such as the production of speech, understanding what is being said to them or difficulties saying what they want to say.



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## 2. Cognition and Learning

This includes difficulties with literacy and numeracy, meaning they will need support accessing the rest of the curriculum. Their levels of attainment might be well below those of other children their age. Cognition and learning can be split into a variety of areas, according to the severity of need:

## **Specific Learning Difficulties (SpLD)**

Specific Learning Difficulties (SpLD), such as dyslexia, dyscalculia or ADHD (Attention Deficit Hyperactivity Disorder).



### **Moderate Learning Difficulties (MLD)**

Moderate Learning Difficulties (MLD), which means a child's levels of attainment are far below where a child of their age should be and they might also need support with self-esteem, concentration and social interactions. Some children might be assessed as having severe learning difficulties (SLD), meaning they're likely to require support across the curriculum and they're likely to have other needs too.

### **Profound and Multiple Learning Difficulties (PMLD)**

Profound and Multiple Learning Difficulties (PMLD), which are severe and complex learning needs. Children with PMLD are also likely to have additional difficulties in communication, sensory impairment or physical difficulties. They are likely to require extensive support.





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## 3. Social, Emotional and Mental Health Difficulties

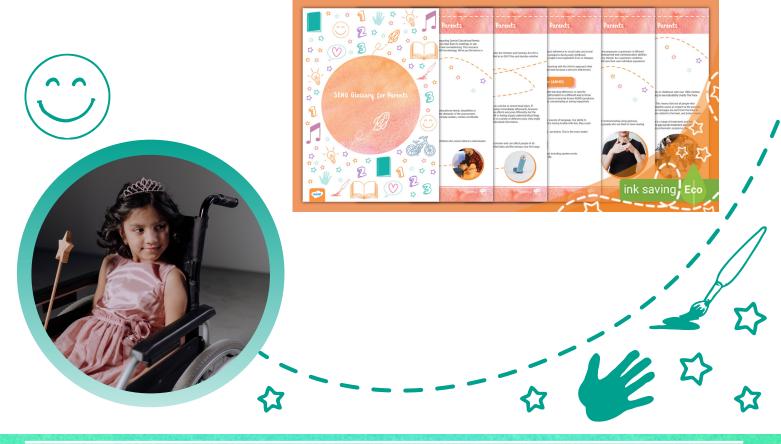


This includes any children with social and emotional difficulties, such as being withdrawn or isolated or children who might display disruptive or challenging behaviour. This category also includes mental health difficulties, such as anxiety, depression or eating disorders, along with disorders such as ADHD or attachment disorder.

## 4. Sensory and/or Physical Needs

This includes children with hearing or vision loss or a combination of both. It also includes children with sensory processing difficulties or a physical disability.

There are many unfamiliar terms and acronyms used when talking about SEND. Download our **SEND Glossary for Parents** to help you navigate these.







## How will the school approach and support my child's needs?

Good quality teaching is key to a child with SEND making progress and will always be the first consideration for a school. Teachers should receive training which will support them to identify and support children with SEND.

Your child's school should follow a graduated response in their planning of more individualised support for your child. This means they will follow a cycle in order to best provide and monitor support for them. The teacher is responsible for this and the process is overseen by the SENDCo.

### The cycle follows these four stages:

Assess

Your child's difficulties
will be assessed. This will
include conversations between school
teachers and the SENDCo, you as the parent
and anyone else who works closely with your child.
This will be reviewed regularly so that any support
put in place continues to be relevant to your child's
difficulties. The school will also speak to your
child about the support they need and
how they feel about the support
they receive.

Support is implemented
and overseen by the class teacher
and its effectiveness is monitored. You
might have some strategies for support that
you can offer at home for your child to make
progress towards their targets. The support given
to your child might be physical equipment,
staffing support, practice in a targeted
area or any other method agreed by
yourself and the school.

Plan

A plan of support will be created and agreed between you as a parent and school staff. This will detail targets for progress to be made and a time frame for them to be completed. If possible, your child should also be involved in the development of targets.

## Review

The progress your child has made will be monitored and evaluated against the targets set. If they have not made the progress expected, reasons will be considered and changes may be made to increase or provide alternative provision. The review should involve you as the parent. The support your child receives should be reviewed at least three times a year.

This is a continuous cycle. When targets have been reviewed, new targets will be set and the process begins again. This information helps the teacher to put the best support in place for your child and can be used to support an EHCP application if one is needed.



Your child's teacher will be involved in all aspects of your child's SEND support, as they will be creating and overseeing the provision. The teacher will be working closely with the school **SENDCo** to ensure that provision is well-matched to your child. Depending on your child's level of need, they might also encounter other people who will be there to support them. This might be other staff in school or external agencies, such as an **educational psychologist**, a **speech and language therapist**, an **occupational therapist**, a **physiotherapist**, a **social worker** or a **paediatrician**. They might also be offered support through an **early intervention** or **CAMHS/ CYPMHS**.

### What support will my child get?

The support your child will receive depends upon their needs, the targets agreed and the individual circumstances of the school, including factors such as staffing, space available and time.

Your child will not always be working in the same way in every lesson. They might encounter a variety of support strategies which will enable them to engage fully in the lesson and make progress. Some of these might include:





### For communication and interaction difficulties:

Memory and listening games

sign language or gestures

that attention is on you before you speak

> children suitable alternatives when they can't find the right word: "Is it a field or a town?"

Having support in place for large group work in lessons. It might be possible to learn the required skills in a one-to-one situation or small group - e.g. the rules of conversation, creating a group story, discussing events in a story, practising using new vocabulary by talking to each other, playing games that involve turn taking or allowing the child to think of vocabulary related to a particular theme.

Slowing down the rate of talking to help them to understand

**Giving instructions** the middle of it

> Having clear visual support perhaps the use of picture clues

Introducing vocabulary by modelling

how it is used frequently - avoiding introducing too much at once

Individual work involving grouping words according to meanings, odd word out activities, playing around with language which describes feelings, inference - showing your child pictures and asking them what's happened by using inference



Specialist support such as speech therapy



Twinkl Tip: Many of these strategies can be used at home too.



instructions by the person giving them - and also getting your child to repeat instructions back

Using short, simple sentences







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## For cognition and learning difficulties:

Oneto-one interventions that target a specific area, e.g. blending sounds Work
that is heavily
differentiated to allow
your child to have access to
the learning



Group interventions which target a specific area, e.g. adding multiples of 10 or number bonds to 20



Use of strategies such as the Leitner system to learn specific information such as times tables or spellings



Multisensory teaching - the use of visual, auditory and kinaesthetic methods in teaching



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Overlearning of

important information

Pre-learning of information and vocabulary before a lesson to give a head start

Daily exercise including balance activities

Computer
programmes which are
aimed at your child's individual
level and aims to fill gaps
in knowledge



Recording work in a variety of ways such as diagrams, posters, photos - not just having an expectation of written work





The use of Kagan structures within the classroom to allow cooperative learning and engagement Specialist support such as an educational psychologist to give advice on appropriate strategies



## For social, emotional and mental health difficulties:



Small
nurture
groups targeting
self-belief, resilience
and social skills
interventions

Oneto-one work on anger management/regulation of emotions

Outside learning activities



Peer support systems within class

Adaptation of praise
within the classroom setting for
pupils who find accepting praise difficult



Adult
support to enable a smooth
transition going into school at the
start of the day

group
activities using
differentiated work to increase
success and self-esteem



Pairing children up with positive role models to work together

Regular opportunities for exercise, such as a daily mile Mindfulness
activities to allow children
to manage emotions and
become calm

of a 'safe space' or a

'calm space' to visit when feeling

overwhelmed or angry

Having a worry box in class

Adult support
during times of reduced
structures, such as break times and
lunchtimes

Counselling/ mentoring sessions with a member of school staff

Having a
designated person - maybe
not your child's teacher - that your
child can go and talk to about anything
that might be worrying them or
upsetting them

Extra
support in place
during times of transition extra visits to new classrooms,
more time spent with new
staff to gradually get used
to the change

Specialist support such as an early intervention or CAMHS/ CYPMHS



## For sensory and/or physical difficulties:





Use of a soundfield system if your child is

Carefully considered seating position within the classroom

Clear, concise instructions



**Adjusting** worksheets and written work

Adjustments to whiteboard background for the visually impaired

Access arrangements for tests considered and position considered during teaching



**Different** methods of recording work considered, including video/ photo/audio methods

**Consideration of** the physical environment in class/ around school and outside - possible one-to-one support at specific times

Specialist support

Use of writing slope

One-to-one support for teaching skills such as Braille, BSL or the use of specialist equipment

Use of pencil/pen grip

> One-to-one support for physical exercise such as physiotherapy

such as a teacher of the deaf, physiotherapist, occupational therapist or paediatrician

Use of coloured paper





## Why can't an adult work with my child all the time?

You might feel that your child will work best having an adult next to them all the time. The truth is, many children would work well with this support, but schools do not have the resources to supply every pupil with an adult. Teachers have the difficult job of juggling the needs of the children in their care with the staffing on offer, which means that it will be extremely unlikely that your child has adult support at all times when they are in school. It is also detrimental to a child's independence if they are always reliant on an adult to be there to support them. They can sometimes develop 'learned helplessness' where they would rather ask an adult what to do than work towards finding an answer or solution themselves.

You'll find that your child receives support in many different forms - and they might not even notice this support! Just because an adult is not sitting right next to them does not mean that thought hasn't gone into how to best support your child in that particular lesson. The more your child is able to do independently, the better it is for them. Their self-esteem will improve and they will develop more of a positive mindset, setting them up for future successes.

### What if my child is still not making progress?

If your child's needs are not able to be met with the support offered in their educational setting, they might need an **Education**, **Health and Care Plan (EHCP)**. An EHCP is a legally binding document which identifies a child or young person's educational, health and social needs and sets out the additional support which the local authority must put in place to meet those needs.



Disclaimer

We hope you find the information on our website and resources useful. As far as possible, the contents of this resource are reflective of current professional research. However, please be aware that every child is different and information can quickly become out of date. The information given here is intended for general guidance purposes only and may not apply to your specific situation.



