

Wren's Nest Primary School Whole School Provision Map



Area of Need Key

Cognition and learning

Communication and Interaction

Social, Emotional and Mental
Health difficulties

Sensory and/or physical needs



| EARLY YEARS | <p style="text-align: center;"><i>Listed below are the strategies which are employed in our Early Years to support children within the areas of need as categorised in the SEND Code of Practice:</i></p> |
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| <p>Universal Approaches- Quality First Teaching</p> | <p>Cognition and Learning:</p> <ul style="list-style-type: none"> • The Early Years curriculum and environment is language-rich to support low levels of language children have when beginning their journey with us. • High expectations of children and appropriate challenge for all. • Behaviour for learning at the heart of lessons/school ethos. • Learning walls to support key learning points. • Learning environments provide holistic supportive educational environments for all children • Time to talk with a 'talking partner'. • Variety of teaching styles and approaches using both open and closed tasks matched to the needs of individuals. • Multisensory learning approach (visual, auditory and kinaesthetic learning) making use of music, actions, graphics etc • Planning emphasises what children will learn based on an assessment of what the child already knows, understands and can do, 'Assessment for Learning' principles in place. • Personalised and differentiated teaching, including questioning. • Learning presented in small chunks. Mini plenaries throughout session to ensure pupils are making good progress. Intervention given to overcome misconceptions. • Adaptive teaching to ensure all children can achieve the same goals. • Ability grouping for Literacy and Numeracy. • Visual timetables and now/next boards are consistently used. • Use of symbols - 'Widgit' software. • Use of 'Makaton' across the phase. • Structured school and class routines. • A mastery approach to teaching is taken. • All lessons are started with a success criteria. • Verbal feedback is given to children within lessons. • Consistent marking policy across school. • Timetable is organised to cater for the learning needs of all children. • Key vocabulary and questioning are highlighted on staff planning. • Hands-on practical learning with a range of resources to support learning in all lessons. • Evidence in the form of photographs and observations including the Childs Voice, is gathered and compiled into individual Learning Journeys. |



Communication and Interaction

- Differentiated curriculum planning, activities, delivery and outcome – language used is simplified to cater for the needs of all.
- Clear learning objectives and differentiated outcomes, ensuring clear instructions are given.
- Learning walls to support key learning points, including key vocabulary.
- Time to talk things through with a ‘talking partner’ before feeding back to class.
- Multisensory learning approach (visual, auditory and kinesthetic learning) making use of music, actions, graphics etc
- Increased visual aids.
- Ensuring all task/activities are modelled by the teacher/teaching assistant
- Visual timetables and Now and Next boards are consistently used.
- Use of ‘Makaton’ across the phase.
- Use of symbols -‘Widgit’ software used throughout school.
- Structured school and class routines

Social, Emotional and Mental Health difficulties

- Whole school positive behaviour policy.
- Behaviour for learning at the heart of lessons/school ethos.
- High expectations of children.
- Small key worker groups for developing social skills.
- We use a variety of positive reinforcement strategies including rewards for pupils during lessons to celebrate their success, such as stickers, verbal praise and a prize box.
- At the start of each lesson, adults model the expectations of the pupils, using visual cues and cards to support this, such as ‘good looking/listening/sitting’
- VIP rewards system.
- Assemblies: VIPs celebrated in assembly.
- Regular CPD for staff to maintain a consistent approach to positive behaviour management strategies across school.
- De-escalation and positive praise - whole school approach is taken.
- Consistent behaviour pathway is used across school.
- Learning Mentor Team support vulnerable children in breaking down barriers to learning.
- Structured school and class routines.
- Visual timetables
- Use of symbols - ‘Widgit’ software used throughout school



Sensory and/or Physical Needs

- Flexible teaching arrangements.
- Staff aware of implications of physical impairment.
- Access/use of lift if necessary.
- Access to ICT to help reduce barriers to learning.
- Alternatives to written recording when writing is not the primary objective.
- Multisensory learning approach (visual, auditory and kinesthetic learning) making use of music, actions, graphics etc
- Use of symbols- 'Widgit' software used throughout school



| RECEPTION INTERVENTIONS | | | | |
|---|-------------------|-------------------------------------|---|---|
| INTERVENTION | STAFF/CHILD RATIO | FREQUENCY | ASSESSMENT TOOL USED TO IDENTIFY CHILDREN/ ENTRY/EXIT CRITERIA | EXPECTED OUTCOME |
| Phonics 1:1s Daily intervention delivered by trained Level 3 TA | 1:1 | 30 mins Daily (5 mins per child) | Half termly phonics assessments identify children who need this intervention and also identify when they have made good progress so the intervention is no longer needed. | To learn and retain new sounds from set 1 & 2 and successfully and independently blend. |
| Boys social skills group Delivered by Level 3 TAs | 1:8 | Once a week 20 mins per session | Boys who struggle to socialise appropriately with peers without support. Teachers/TAs identify these children and assign them to this specific intervention. | To develop social skills and gain confidence in sharing. Also a focus on developing listening and attention skills. |
| Fine Motor skills group Delivered by Level 3 TAs | 1:1 | Once a week 20 mins per session | Children who have poor fine motor skills and need support using mark-making tools and beginning to forming recognisable letters such as their name. Teachers/T's identify these children and assign them to this specific intervention. | To have increased muscle strength in the hands to improve pencil control and hand strength in turn developing writing skills. |
| Get Moving Delivered by trained Level 3 TAs | 1:6 | Twice a week 20 mins per session | Children who appear to be clumsy and have lack of control over their gross motor movements. Teachers/TAs identify these children and assign them to this specific intervention. | To demonstrate further control and confidence in gross motor movements. |



| RECEPTION INTERVENTIONS | | | | |
|--|-------------------|------------------------------------|---|---|
| INTERVENTION | STAFF/CHILD RATIO | FREQUENCY | ASSESSMENT TOOL USED TO IDENTIFY CHILDREN/ ENTRY/EXIT CRITERIA | EXPECTED OUTCOME |
| 1:1 time Delivered by Level 3 TAs | 1:1 | Once a week 20 mins per session | 1:1 Sessions can be beneficial for a range of purposes. To work on a specific skill such as numeracy or to develop the ability to regulate emotions. This may be completed with a child 1:1 if they are not ready to join the group sessions. Teachers/TAs identify these children and assign them to this specific intervention. | To develop skills in the focus area for the particular child. |
| Girls Group – PSED Delivered by Level 3 TAs | 1:8 | Once a week 20 mins per session | Girls who struggle to socialise appropriately with adults and peers. Teachers/TAs identify these children and assign them to this specific intervention. | To develop confidence and self-esteem - being more independent in making friendships and engaging with adults and peers. |
| Number intervention group Delivered by Level 3 TAs | 1:8 | Once a week 20 mins per session | Children who need additional numeracy intervention to support them to achieve the ELG. Teachers/TAs identify these children and assign them to this specific intervention. | Achieving the Number ELG by applying key number skills independently. |
| Gingers Delivered by specialist HLTA | 1:5 | Twice a week 30mins per session | Children with an inability to understand own feelings and the feelings of others. Children's inability to adjust behaviour in different situations. Ginger's Group focuses on exploring and understanding a range of different emotions in different situations. | Increase in specific PSED attainment related to emotions and managing behaviour. Observations of children's increasing awareness and understanding of different emotions in child- initiated play. |



| RECEPTION INTERVENTIONS | | | | |
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| INTERVENTION | STAFF/CHILD RATIO | FREQUENCY | ASSESMENT TOOL USED TO IDENTIFY CHILDREN/ ENTRY/EXIT CRITERIA | EXPECTED OUTCOME |
| Write Dance Delivered by by specialist HLTA | 1:7 | Twice a week 30mins per session | Children are identified by teachers and TAs prior to transitioning to Reception or when they begin Reception. Many of these children are reluctant to write, have a poor pencil grip or display poor fine motor skills. | Increased confidence to explore writing resources and a developed level of control when using mark making tools is evident. |
| Language intervention Delivered by specialist HLTA | 1:1 | Dependent on individual SALT targets | Children are identified by SENCO and SALT TA. MJ (specialist HLTA) then works with children on specific language targets from SALT reports. | Children to make progress with their language development and skills. |
| Nuffield Early Language Intervention (NELI) Delivered by specialist HLTA | 1:8 | Three times a week 30 mins per session | Children are identified by Specialist HLTA when completing NELI screening. | Children to make progress with their language development and skills. |
| Ladybirds room EYFS/KS1 SEND Provision | 3:6 | Children access this room when necessary. | Children who are struggling to cope in the mainstream classroom. The Ladybirds room is used a break out space to complete tasks or engage in play based activities when children are finding the busy, vibrant Reception classroom too overwhelming. | Allows children to regulate their emotions and continue to complete tasks or play based activities relevant to their learning. |
| SALT Delivered by specialist Speech and Language TA | 1:1 or small groups | Dependent on individual SALT targets | Children are identified by class teachers/TAs as possibly requiring SALT. They are then referred to SALT by AMA (Speech and Language TA). Children are then provided individual targets which AMA works on with children in school. | Children to make progress with their speech and language development and skills. |



| RECEPTION INTERVENTIONS | | | | |
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| INTERVENTION | STAFF/CHILD RATIO | FREQUENCY | ASSESMENT TOOL USED TO IDENTIFY CHILDREN/ ENTRY/EXIT CRITERIA | EXPECTED OUTCOME |
| <p>Play Therapy</p> <p>Delivered by external play therapist as required</p> | 1:1 | Once a week | Children are referred to the EP with concerns regarding SEMH needs. The EP service and school collaboratively work together to identify children who would benefit from Play Therapy. | Play therapy is a psychotherapeutic approach which will allow children involved to freely express repressed thoughts and emotions through play. |



**Universal Approaches -
Quality First Teaching**

Cognition and Learning:

- High expectations of children and appropriate challenge for all.
- Clear learning objectives and differentiated outcomes, clear instructions.
- Clear feedback and next steps in their learning – children involved in the process and given time to respond.
- Behaviour for learning at the heart of lessons/school ethos.
- Learning walls to support key learning points, including key vocabulary.
- Time to talk things through with a ‘talking partner’ before feeding back to class.
- Access to ICT to help reduce barriers to learning.
- Alternatives to written recording when writing is not the primary objective.
- Variety of teaching styles and approaches using both open and closed tasks matched to the needs of individuals.
- Multisensory learning approach (visual, auditory and kinesthetic learning) making use of music, actions, graphics etc
- Planning emphasises what children will learn based on an assessment of what the child already knows, understands and can do, ‘Assessment for Learning’ principles in place.
- Personalised and differentiated teaching, including questioning.
- Learning presented in small chunks. Mini plenaries throughout session to ensure pupils are making good progress. Intervention given to overcome misconceptions.
- Adaptive teaching to ensure all children can achieve the same goals.
- Ability grouping for Literacy and Numeracy across year group and within individual classrooms.
- Visual timetables
- Use of symbols - ‘Widgit’ software used throughout school
- Where TA support is available, this is used to facilitate smaller teaching groups to ensure that children ‘keep up not catch up’.
- Structured school and class routines.
- A mastery approach to teaching is taken.
- All lessons are started with some success criteria.
- Verbal feedback is given to children within lessons.
- Peer and self-assessments are completed where appropriate.
- Consistent marking policy across school.
- Timetable is organised to cater for the learning needs of all children.
- Hands on practical learning with a range of resources to support learning in all lessons.



Communication and Interaction

- Differentiated curriculum planning, activities, delivery and outcome – language used is simplified to cater for the needs of all.
- Clear learning objectives and differentiated outcomes, ensuring clear instructions are given.
- Learning walls to support key learning points, including key vocabulary.
- Time to talk things through with a ‘talking partner’ before feeding back to class.
- Multisensory learning approach (visual, auditory and kinesthetic learning) making use of music, actions, graphics etc
- Increased visual aids.
- Ensuring all tasks/activities are modelled by the teacher/teaching assistant
- Visual timetables
- Use of symbols -‘Widgit’ software used throughout school.
- Use of Makaton where necessary
- Structured school and class routines

Social, Emotional and Mental Health difficulties

- Whole school positive behaviour policy.
- Behaviour for learning at the heart of lessons/school ethos.
- High expectations of children.
- Circle Time.
- Merit Reward System.
- VIPs rewards system.
- Team points are awarded to children.
- Assemblies: VIPs celebrated in assembly.
- Regular CPD for staff to maintain a consistent approach to positive behaviour management strategies across school.
- De-escalation and positive praise - whole school approach is taken.
- Consistent behaviour pathway is used across school.
- Learning Mentor Team support vulnerable children in breaking down barriers to learning.
- Structured school and class routines.
- Visual timetables
- Use of symbols - ‘Widgit’ software used throughout school



Sensory and/or Physical Needs

- Flexible teaching arrangements.
- Staff aware of implications of physical impairment.
- Access/use of lift if necessary.
- Access to ICT to help reduce barriers to learning.
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| YEAR 1 INTERVENTIONS | | | | |
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| YEAR 1 INTERVENTIONS | STAFF/CHILD RATIO | FREQUENCY | ASSESSMENT TOOL USED TO IDENTIFY CHILDREN/ ENTRY/EXIT CRITERIA | EXPECTED OUTCOME |
| Phonics 1:1 Delivered by trained Level 2 TAs | 1:1 | Daily 10 mins per child | Half termly phonics assessments identify children who need this intervention and also identify when they have made good progress so that the intervention is not needed any further. Phonics tutors also complete daily assessments on individual children which are fed back to Reading Leader half termly. | To learn and retain new sounds from set 1, 2 and 3 and successfully and independently blend. |
| Precision teaching – reading focus Delivered by Level 2 TAs | 1:1 | Daily 10 mins per child | LSS Literacy assessments identify children who require reading PT intervention. Daily tracking is completed by member of staff delivering intervention and half termly assessments are to track progress children are making. | To increase the amount of High Frequency words a child can read with increasing accuracy and fluency in reading leading to increased levels of comprehension. |
| Learning Mentor 1:1's Delivered by a Learning Mentor. | 1:1 | Once a week 15 mins per child | Children who are struggling to regulate their emotions. This may be linked to a specific event that has occurred such as bereavement/loss. An SDQ is completed by class teacher to identify specific area of need. | For children to be able manage emotions with greater independence and develop an awareness of how they are feeling. Children will also have developed a bank of strategies they can use to deal with related emotions and have a positive relationship with a special adult who they can talk to about their feelings. |



| YEAR 1 INTERVENTIONS | | | | |
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| YEAR 1 INTERVENTIONS | STAFF/CHILD RATIO | FREQUENCY | ASSESMENT TOOL USED TO IDENTIFY CHILDREN/ ENTRY/EXIT CRITERIA | EXPECTED OUTCOME |
| LM friendship group Delivered by a Learning Mentor. | 1:6 | Once a week 30 mins per session | Children identified who have poor social skills. The group is often mixed ability which allows peer role models to provide positive social examples. | To encourage the development of social skills and introduce all children in Year 1 to the Safari Room and the Learning Mentors who work in there. |
| SALT Delivered by specialist Speech and Language TA | 1:1 or small groups | Dependent on individual SALT targets | Children are identified by class teachers/TAs as possibly requiring SALT. They are then referred to SALT by AMA (Speech and Language TA). Children are then provided individual targets which AMA works on with children in school. | Children to make progress with their speech and language skills. |
| Specialist ASD TA 1:1 time | 1:1 | As and when needed/ identified | Children who are diagnosed with ASD and are working directly with AoS. AoS recommendations are used as a basis of this intervention time. | To support communication and social interaction with peers. To develop understanding of the school day and daily routines. To identify and support sensory needs. |
| Play Therapy Delivered by external Play Therapist as required | 1:1 | Once a week | Children are referred to the EP with concerns regarding SEMH needs. The EP service and school collaboratively work together to identify children who would benefit from Play therapy. | Play therapy is a psychotherapeutic approach which will allow children involved to freely express repressed thoughts and emotions through play. |



| YEAR 1 INTERVENTIONS | | | | |
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| YEAR 1 INTERVENTIONS | STAFF/CHILD RATIO | FREQUENCY | ASSESMENT TOOL USED TO IDENTIFY CHILDREN/ ENTRY/EXIT CRITERIA | EXPECTED OUTCOME |
| Steve Brown Behaviour Support Delivered by external consultant as required | 1:1 | Half Termly Reviews | Children are referred to Steve Brown for support, advice and strategies to deal with challenging behaviours. Children are identified through professional discussions and behaviour tracking. | Ideas/strategies for school to implement to support behaviour in school. For children to access 1:1 sessions with Steve and become aware of strategies that they can use to independently self-regulate. |
| Get Moving Delivered by trained Level 3 TAs | 1:6 | Twice a week 20 mins per session | Children who appear to be clumsy and have lack of control over their gross motor movements. Teachers/TAs identify these children and assign them to this specific intervention. Occupational Therapy also recommend children to complete this intervention. | To demonstrate further control and confidence in gross motor movements. |



| YEAR 2 INTERVENTIONS | | | | |
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| INTERVENTION | STAFF/CHILD RATIO | FREQUENCY | ASSESMENT TOOL USED TO IDENTIFY CHILDREN/ ENTRY/EXIT CRITERIA | EXPECTED OUTCOME |
| <p>Phonics 1:1s Delivered by trained by Level 2 TAs</p> | 1:1 | Daily 10 mins per child | Half termly phonics assessments identify children who need this intervention and also identify when they have made good progress so that the intervention is no longer needed. Phonics tutors also complete daily assessments on individual children which are fed back to Reading Leader half termly. | To learn and retain new sounds from set 1 ,2 and 3 and successfully and independently blend. |
| <p>LM 1:1s (including Sand Play, Drawing and Talking) Delivered by a Learning Mentor.</p> | 1:1/ small group (depending on needs) | Once a week (can be more regular depending on severity of need) 15 mins per session | Children who are struggling to regulate their emotions. This may be linked to a specific event that has occurred such as bereavement/loss etc. An SDQ is completed by class teacher to identify a specific area of need. Recommendations for specific therapies can also occur through the EP service. | For children to have developed an awareness of how they are feeling and be able manage emotions with greater independence. Children will also have developed a bank of strategies they can use to deal with related emotions and have a positive relationship with a special key adult who they can talk to about their feelings. |



| YEAR 2 INTERVENTIONS | | | | |
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| INTERVENTION | STAFF/CHILD RATIO | FREQUENCY | ASSESMENT TOOL USED TO IDENTIFY CHILDREN/ ENTRY/EXIT CRITERIA | EXPECTED OUTCOME |
| <p>LM 1:1 (Lego Play) Delivered by a Learning Mentor.</p> | 1:1 | <p>Once a week (can be more regular depending on severity of need) 15 mins per session</p> | <p>Children who are struggling to regulate their emotions. This may be linked to a specific event that has occurred such as bereavement/loss etc. An SDQ is completed by class teacher to identify a specific area of need. Recommendations for specific therapies can also occur through the EP service.</p> <p>Lego Play can also support children who are struggling to follow instructions by providing a play-based activity to encourage and support the ability to follow instructions.</p> | <p>For children to have developed an awareness of how they are feeling and be able manage emotions with greater independence. Children will also have developed a bank of strategies they can use to deal with related emotions and have a positive relationship with a special key adult who they can talk to about their feelings.</p> <p>To support and develop the ability to follow instructions.</p> |
| <p>LM Transition Support Delivered by a Learning Mentor.</p> | 1:6 | <p>Once a week (Summer Term)</p> | <p>Children are identified who are vulnerable/have attachment needs or require addition transitional support due to anxieties about moving into Key Stage 2.</p> | <p>For children to be more prepared about the transition to Key Stage 2. Children will identify a special person that they can build a relationship with and share their feelings with and go to for additional support.</p> |
| <p>SALT Delivered by specialist Speech and Language TA</p> | 1:1 or small groups | <p>Dependent on individual SALT targets</p> | <p>Children are identified by class teachers/TAs as possibly requiring SALT. They are then referred to SALT by AMA (Speech and Language TA). Children are then provided individual targets which AMA works on with children in school.</p> | <p>Children to make progress with their speech and language skills.</p> |



| YEAR 2 INTERVENTIONS | | | | |
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| INTERVENTION | STAFF/CHILD RATIO | FREQUENCY | ASSESMENT TOOL USED TO IDENTIFY CHILDREN/ ENTRY/EXIT CRITERIA | EXPECTED OUTCOME |
| Precision teaching – reading focus Delivered by Level 2 TAs | 1:1 | Daily 10 mins per child | LSS Literacy assessments identify children who require reading PT intervention. Daily tracking is completed by member of staff delivering intervention and half-termly assessments are to track progress children are making. | To increase the amount of High Frequency words a child can read, increasing accuracy and fluency in reading, leading to increased levels of comprehension. |
| Specialist ASD TA 1:1 time | 1:1 | As and when needed/ identified | Children who are diagnosed with ASD and are working directly with AoS, or children undergoing ASD diagnosis. AoS recommendations are used as a basis of this intervention time. | To support communication and social interaction with peers. To develop understanding of the school day and daily routines. To identify and support sensory needs. |
| Play Therapy Delivered by external play therapist as required | 1:1 | Once a week | Children are referred to the EP with concerns regarding SEMH needs. The EP service and school collaboratively work together to identify children who would benefit from Play Therapy. | Play therapy is a psychotherapeutic approach which will allow children involved to freely express repressed thoughts and emotions through play. |
| Steve Brown Behaviour Support Delivered by external consultant as required | 1:1 | Half Termly Reviews | Children are referred to Steve Brown for support, advice and strategies to deal with challenging behaviours. Children are identified through professional discussions and behaviour tracking. | Ideas/strategies for school to implement to support behaviour in school. For children to access 1:1 sessions with Steve and become aware of strategies that they can use to independently self-regulate. |



| YEAR 2 INTERVENTIONS | | | | |
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| INTERVENTION | STAFF/CHILD RATIO | FREQUENCY | ASSESSMENT TOOL USED TO IDENTIFY CHILDREN/ ENTRY/EXIT CRITERIA | EXPECTED OUTCOME |
| <p>Get Moving Delivered by trained Level 3 TAs</p> | 1:6 | Twice a week 20 mins per session | Children who appear to be clumsy and have lack of control over their gross motor movements. Teachers/TAs identify these children and assign them to this specific intervention. Occupational Therapy also recommend children to complete this intervention. | To demonstrate further control and confidence in gross motor movements. |



| KEY STAGE 1 PROVISIONS | | | | |
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| INTERVENTION | STAFF/CHILD RATIO | FREQUENCY | ASSESSMENT TOOL USED TO IDENTIFY CHILDREN/ ENTRY/EXIT CRITERIA | EXPECTED OUTCOME |
| Rainbow Room - Nurture Group | 2:12 With access to mainstream classroom for Child's strength lessons | Daily- 8.40am- 2.00pm | Children identified for the Nurture Group have a range of Social, Emotional Mental Health needs. Many of these children are identified before the transition into Year 1. Boxall profile assessments are completed to provide an insight into the specific areas of need for each individual child. | The Nurture Group provides some of our most vulnerable children with a provision that supports the development of their Social, Emotional and Mental Health needs. This includes the children being taught skills to help them self-regulate and ultimately, manage their own behaviour. |
| Sunflowers | 2:12 With access to mainstream classroom for Child's strength lessons | Every Day With access to mainstream classroom for strength lessons | The provision was created to meet the needs of a group of KS2 children with slow progress and low attainment in Literacy and Numeracy. All children have a primary need of cognition and learning which may be exacerbated by speech and language difficulties, social and emotional and mental health needs and/or physical disabilities. | The children within the provision should make good personal progress with their literacy and numeracy skills as well as their development and progress in the wider curriculum areas. |



| KEY STAGE 1 PROVISIONS | | | | |
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| INTERVENTION | STAFF/CHILD RATIO | FREQUENCY | ASSESMENT TOOL USED TO IDENTIFY CHILDREN/ ENTRY/EXIT CRITERIA | EXPECTED OUTCOME |
| Ladybirds room EYFS/KS1 SEND Provision | 3:6 With access to mainstream classroom for Child's strength lessons | Children access this room when necessary. | Children who are struggling to cope in the mainstream classroom or continue to need access to an Early Years curriculum. The Ladybirds room is used a break out space to complete tasks or engage in play based activities. | Allows children to regulate their emotions and continue to complete tasks or play based activities relevant to their learning. |



| YEAR 3 INTERVENTIONS | | | | |
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| YEAR 3 INTERVENTIONS | STAFF/CHILD RATIO | FREQUENCY | ASSESSMENT TOOL USED TO IDENTIFY CHILDREN/ ENTRY/EXIT CRITERIA | EXPECTED OUTCOME |
| Phonics 1:1s - Delivered by trained Level 2 TAs | 1:1 | Daily 10 mins per child | Half termly phonics assessments identify children who need this intervention and also identify when they have made good progress s that the intervention is no longer needed. Phonics tutors also complete daily assessments on individual children which are fed back to Reading Leader half termly. | To learn and retain new sounds from set 1 ,2 and 3 and successfully and independently blend. |
| Precision teaching – reading focus Delivered by Level 2 TAs | 1:1 | Daily 10 mins per child | LSS Literacy assessments identify children who require reading PT intervention. Daily tracking is completed by member of staff delivering intervention and half termly assessments are to track progress children are making. | To increase the amount of High Frequency words a child can read increasing accuracy and fluency in reading leading to increased levels of comprehension. |
| LM 1:1s (including sand play, drawing and talking) Delivered by a Learning Mentor. | 1:1/ small group (depending on needs) | Once a week (can be more regular depending on severity of need) 15 mins per session | Children who are struggling to regulate their emotions. This may be linked to a specific event that has occurred such as bereavement/loss etc. An SDQ is completed by class teacher to identify a specific area of need. Recommendations for specific therapies can also occur through the EP service. | For children to have developed an awareness of how they are feeling and be able to manage emotions with greater independence. Children will also have developed a bank of strategies they can use to deal with related emotions and have a positive relationship with a special key adult who they can talk to about their feelings. |



| YEAR 3 INTERVENTIONS | | | | |
|--|-------------------|--|--|--|
| YEAR 3 INTERVENTIONS | STAFF/CHILD RATIO | FREQUENCY | ASSESSMENT TOOL USED TO IDENTIFY CHILDREN/ ENTRY/EXIT CRITERIA | EXPECTED OUTCOME |
| <p>LM 1:1s (Lego play) Delivered by a Learning Mentor.</p> | 1:1 | <p>Once a week (can be more regular depending on severity of need) 15 mins per session</p> | <p>Children who are struggling to regulate their emotions. This may be linked to a specific event that has occurred such as bereavement/loss etc. An SDQ is completed by class teacher to identify a specific area of need. Recommendations for specific therapies can also occur through the EP service.</p> <p>Lego Play can also support children who are struggling to follow instructions by providing a play-based activity to encourage and support the ability to follow instructions.</p> | <p>For children to have developed an awareness of how they are feeling and be able manage emotions with greater independence. Children will also have developed a bank of strategies they can use to deal with related emotions and have a positive relationship with a special key adult who they can talk to about their feelings.</p> <p>To support and develop the ability to follow instructions.</p> |
| <p>LM friendship group Delivered by a Learning Mentor.</p> | 1:6 | <p>Once a week 30 mins per session</p> | <p>Children identified who have poor social skills. The group is often mixed ability so this allows peer role models to provide positive social examples.</p> | <p>To encourage the development of social skills and how to appropriately socialise with peers. Children to have developed relationships with peers.</p> |
| <p>Additional Group Early Start session (Little Gems) Delivered by Teacher and a Level 2 TA</p> | 2:10 | Daily | <p>Most children who access the 'Little Gems' group are children who were part of the KS1 nurture provision. Many of these children still require a more nurture based approach to prepare them for the school day.</p> | <p>A morning session to welcome, settle and prepare the children for the school day ahead.</p> |



| YEAR 3 INTERVENTIONS | | | | |
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| YEAR 3 INTERVENTIONS | STAFF/CHILD RATIO | FREQUENCY | ASSESSMENT TOOL USED TO IDENTIFY CHILDREN/ ENTRY/EXIT CRITERIA | EXPECTED OUTCOME |
| Social Skills Intervention Delivered by a Level 3 specialist TA | 1:4 | 1x weekly 30 mins | Children with/undergoing a diagnosis of ASD or those needing help with social understanding and appropriate behaviours. | To talk about different social scenarios through play, and demonstrate appropriate reactions. Talk about and discuss how people may feel in relation to their actions towards others and the impact this may have on themselves. Developing the ability to socialise with peers during play, increased ability to take turns and to listen/be aware of others and their differing opinions or behaviours |
| SALT Delivered by specialist Speech and Language TA | 1:1 or small groups | Dependent on individual SALT targets | Children are identified by class teachers/TAs as possibly requiring SALT. They are then referred to SALT by AMA (Speech and Language TA). Children are then provided individual targets which AMA works on with children in school. | Children to make progress with their speech and language skills. |
| Specialist ASD TA 1:1 time Delivered by Level 3 specialist TA | 1:1 | As needed | Children who are diagnosed with ASD and are working directly with AoS or children undergoing ASD diagnosis. AoS recommendations are used as a basis of this intervention time. | To support communication and social interaction with peers. To develop understanding of the school day and daily routines. To identify and support sensory needs. |
| CHIMP Delivered by the Learning Mentor Team | 1:1 | Once a week Or dependent on individual need. | Children are identified through behaviour tracking and also teacher referrals into the Learning Mentor Team. | Supporting children to recognise their emotional needs and strategies to overcome barriers they may face. |



| YEAR 3 INTERVENTIONS | | | | |
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| YEAR 3 INTERVENTIONS | STAFF/CHILD RATIO | FREQUENCY | ASSESSMENT TOOL USED TO IDENTIFY CHILDREN/ ENTRY/EXIT CRITERIA | EXPECTED OUTCOME |
| <p>Play Therapy Delivered by external play therapist as required</p> | 1:1 | Once a week | Children are referred to the EP with concerns regarding SEMH needs. The EP service and school collaboratively work together to identify children who would benefit from Play Therapy. | Play therapy is a psychotherapeutic approach which will allow children involved to freely express repressed thoughts and emotions through play. |
| <p>Steve Brown Behaviour Support Delivered by external consultant as required</p> | 1:1 | Half Termly Reviews | Children are referred to Steve Brown for support, advice and strategies to deal with challenging behaviours. Children are identified through professional discussions and behaviour tracking. | Ideas/strategies for school to implement to support behaviour in school. For children to access 1:1 sessions with Steve and become aware of strategies that they can use to independently self-regulate. |
| <p>Get Moving Delivered by trained Level 3 TAs</p> | 1:6 | Twice a week 20 mins per session | Children who appear to be clumsy and have lack of control over their gross motor movements. Teachers/TAs identify these children and assign them to this specific intervention. Occupational Therapy also recommend children to complete this intervention. | To demonstrate further control and confidence in gross motor movements. |



| YEAR 4 INTERVENTIONS | | | | |
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| YEAR 4 INTERVENTIONS | STAFF/CHILD RATIO | FREQUENCY | ASSESMENT TOOL USED TO IDENTIFY CHILDREN/ ENTRY/EXIT CRITERIA | EXPECTED OUTCOME |
| <p>LM Friendship Group (Conflict Resolution/Solution Focus)</p> <p>Delivered by a Learning Mentor.</p> | 1:6 | Once a week 30 mins per session | Children identified who have poor social skills. Behaviour tracking can highlight key children that would benefit from this intervention. Parents also liaise with school to identify these children. | To encourage the development of social skills and how to appropriately socialise with peers. Children to have developed relationships with peers. To support children to identify their own triggers and how they can resolve their social issues. |
| <p>LM 1:1s (including sand play, drawing and talking)</p> <p>Delivered by a Learning Mentor.</p> | 1:1 small group (depending on needs) | Once a week (can be more regular depending on severity of need) 15 mins per session | Children who are struggling to regulate their emotions. This may be linked to a specific event that has occurred such as bereavement/loss etc. An SDQ is completed by class teacher to identify a specific area of need. Recommendations for specific therapies can also occur through the EP service. | For children to have developed an awareness of how they are feeling and to be able to manage emotions with greater independence. Children will also have developed a bank of strategies they can use to deal with related emotions and have a positive relationship with a special key adult who they can talk to about their feelings. |



| YEAR 4 INTERVENTIONS | | | | |
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| YEAR 4 INTERVENTIONS | STAFF/CHILD RATIO | FREQUENCY | ASSESMENT TOOL USED TO IDENTIFY CHILDREN/ ENTRY/EXIT CRITERIA | EXPECTED OUTCOME |
| <p>LM 1:1's (Lego play) Delivered by a Learning Mentor.</p> | 1:1 | <p>Once a week</p> <p>(can be more regular depending on severity of need)</p> <p>15 mins per session</p> | <p>Children who are struggling to regulate their emotions. This may be linked to a specific event that has occurred such as bereavement/loss etc. An SDQ is completed by class teacher to identify a specific area of need. Recommendations for specific therapies can also occur through the EP service.</p> <p>Lego Play can also support children who are struggling to follow instructions by providing a play-based activity to encourage and support the ability to follow instructions.</p> | <p>For children to have developed an awareness of how they are feeling and be able to manage emotions with greater independence. Children will also have developed a bank of strategies they can use to deal with related emotions and have a positive relationship with a special key adult who they can talk to about their feelings.</p> <p>To support and develop the ability to follow instructions.</p> |
| <p>Precision teaching – reading focus Delivered by Level 2 TAs</p> | 1:1 | <p>Daily</p> <p>10 mins per child</p> | <p>LSS Literacy assessments identify children who require reading PT intervention. Daily tracking is completed by member of staff delivering intervention and half-termly assessments are to track progress children are making.</p> | <p>To increase the amount of High Frequency words a child can read increasing accuracy and fluency in reading leading to increased levels of comprehension.</p> |



| YEAR 4 INTERVENTIONS | | | | |
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| YEAR 4 INTERVENTIONS | STAFF/CHILD RATIO | FREQUENCY | ASSESMENT TOOL USED TO IDENTIFY CHILDREN/ ENTRY/EXIT CRITERIA | EXPECTED OUTCOME |
| <p>Social Skills</p> <p>Delivered by a Level 3 specialist TA.</p> | 1:4 | 1x weekly 30 mins | Children with/undergoing a diagnosis of ASD or those needing help with social understanding and appropriate behaviours. | To talk about different social scenarios through play, and demonstrate appropriate reactions. Talk about and discuss how people may feel in relation to their actions towards others and the impact this may have on themselves. Developing the ability to socialise with peers during play, increased ability to take turns and to listen/ be aware of others and their differing opinions or behaviours |
| <p>SALT</p> <p>Delivered by specialist Speech and Language TA</p> | 1:1 or small groups | Dependent on individual SALT targets | Children are identified by class teachers/TAs as possibly requiring SALT. They are then referred to SALT by AMA (Speech and Language TA). Children are then provided individual targets which AMA works on with children in school. | Children to make progress with their speech and language skills. |
| <p>CHIMP</p> <p>Delivered by a Learning Mentor</p> | 1:1 | Once a week Or dependent on individual need. | Children are identified through behaviour tracking and also teacher referrals into the Learning Mentor Team. | Supporting children to recognise their emotional needs and strategies to overcome barriers they may face. |
| <p>Play Therapy</p> <p>Delivered by external play therapist as required</p> | 1:1 | Once a week | Children are referred to the EP with concerns regarding SEMH needs. The EP service and school collaboratively work together to identify children who would benefit from Play Therapy. | Play therapy is a psychotherapeutic approach which will allow children involved to freely express repressed thoughts and emotions through play. |



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| YEAR 4 INTERVENTIONS | STAFF/CHILD RATIO | FREQUENCY | ASSESMENT TOOL USED TO IDENTIFY CHILDREN/ ENTRY/EXIT CRITERIA | EXPECTED OUTCOME |
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| YEAR 5 INTERVENTIONS | | | | |
| YEAR 5 INTERVENTION | STAFF/CHILD RATIO | FREQUENCY | ASSESMENT TOOL USED TO IDENTIFY CHILDREN/ ENTRY/EXIT CRITERIA | EXPECTED OUTCOME |
| LM Friendship Group Delivered by a Learning Mentor. | 1:6 | Once a week 30 mins per session | Children identified who have poor social skills. The group is often mixed ability and this allows peer role models to provide positive social examples. | To encourage the development of social skills and how to appropriately socialise with peers. Children to have developed relationships with peers. |



| YEAR 4 INTERVENTIONS | | | | |
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| YEAR 4 INTERVENTIONS | STAFF/CHILD RATIO | FREQUENCY | ASSESMENT TOOL USED TO IDENTIFY CHILDREN/ ENTRY/EXIT CRITERIA | EXPECTED OUTCOME |
| <p>LM 1:1s (including sand play, drawing and talking) Delivered by a Learning Mentor.</p> | <p>1:1 small group (depending on needs)</p> | <p>Once a week (can be more regular depending on severity of need) 15 mins per session</p> | <p>Children who are struggling to regulate their emotions. This may be linked to a specific event that has occurred such as bereavement/loss etc. An SDQ is completed by class teacher to identify a specific area of need. Recommendations for specific therapies can also occur through the EP service.</p> | <p>For children to have developed an awareness of how they are feeling and be able manage emotions with greater independence. Children will also have developed a bank of strategies they can use to deal with related emotions and have a positive relationship with a special key adult who they can talk to about their feelings.</p> |
| <p>LM 1:1's (Lego play) Delivered by a Learning Mentor.</p> | <p>1:1</p> | <p>Once a week (can be more regular depending on severity of need) 15 mins per session</p> | <p>Children who are struggling to regulate their emotions. This may be linked to a specific event that has occurred such as bereavement/loss etc. An SDQ is completed by class teacher to identify a specific area of need. Recommendations for specific therapies can also occur through the EP service.</p> <p>Lego Play can also support children who are struggling to follow instructions by providing a play-based activity to encourage and support the ability to follow instructions.</p> | <p>For children to have developed an awareness of how they are feeling and to be able to manage emotions with greater independence. Children will also have developed a bank of strategies they can use to deal with related emotions and have a positive relationship with a special key adult who they can talk to about their feelings.</p> <p>To support and develop the ability to follow instructions.</p> |



| YEAR 5 INTERVENTIONS | | | | |
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| YEAR 5 INTERVENTION | STAFF/CHILD RATIO | FREQUENCY | ASSESMENT TOOL USED TO IDENTIFY CHILDREN/ ENTRY/EXIT CRITERIA | EXPECTED OUTCOME |
| Social Skills Delivered by a specialist Level 3 TA | 1:6 | 1x weekly 30 mins | Children with/undergoing a diagnosis of ASD or those needing help with social understanding and appropriate behaviours. | To talk about different social scenarios through play, and demonstrate appropriate reactions. Talk about and discuss how people may feel in relation to their actions towards others and the impact this may have on themselves. Developing the ability to socialise with peers during play, increased ability to take turns and to listen/ be aware of others and their differing opinions or behaviours |
| Precision teaching – reading focus Delivered by Level 2 TAs | 1:1 | Daily 10 mins per child | LSS Literacy assessments identify children who require reading PT intervention. Daily tracking is completed by member of staff delivering intervention and half-termly assessments are to track progress children are making. | To increase the amount of High Frequency words a child can read, increasing accuracy and fluency in reading, leading to increased levels of comprehension. |
| SALT Delivered by specialist Speech and Language TA | 1:1 or small groups | Dependent on individual SALT targets | Children are identified by class teachers/TAs as possibly requiring SALT. They are then referred to SALT by AMA (Speech and Language TA). Children are then provided individual targets which AMA works on with children in school. | Children to make progress with their speech and language skills. |



| YEAR 5 INTERVENTIONS | | | | |
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| YEAR 5 INTERVENTION | STAFF/CHILD RATIO | FREQUENCY | ASSESMENT TOOL USED TO IDENTIFY CHILDREN/ ENTRY/EXIT CRITERIA | EXPECTED OUTCOME |
| Specialist ASD TA 1:1 time Delivered by a specialist Level 3 TA | 1:1 | As needed | Children who are diagnosed with ASD and are working directly with AoS or children undergoing ASD diagnosis. AoS recommendations are used as a basis of this intervention time. | To support communication and social interaction with peers. To develop understanding of the school day and daily routines. To identify and support sensory needs. |
| CHIMP Delivered by a Learning Mentor | 1:1 | Once a week (Or dependent on individual need.) | Children are identified through behaviour tracking and also teacher referrals into the Learning Mentor Team. | Supporting children to recognise their emotional needs and strategies to overcome barriers they may face. |
| Play Therapy Delivered by external play therapist as required | 1:1 | Once a week | Children are referred to the EP with concerns regarding SEMH needs. The EP service and school collaboratively work together to identify children who would benefit from Play Therapy. | Play therapy is a psychotherapeutic approach which will allow children involved to freely express repressed thoughts and emotions through play. |
| Steve Brown Behaviour Support Delivered by external consultant as required | 1:1 | Half Termly Reviews | Children are referred to Steve Brown for support, advice and strategies to deal with challenging behaviours. Children are identified through professional discussions and behaviour tracking. | Ideas/strategies for school to implement to support behaviour in school. For children to access 1:1 sessions with Steve and become aware of strategies that they can use to independently self-regulate. |



| YEAR 6 INTERVENTIONS | | | | |
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| YEAR 6 INTERVENTIONS | STAFF/CHILD RATIO | FREQUENCY | ASSESSMENT TOOL USED TO IDENTIFY CHILDREN/ ENTRY/EXIT CRITERIA | EXPECTED OUTCOME |
| <p>LM 1:1s (including sand play, drawing and talking) Delivered by a Learning Mentor.</p> | <p>1:1 small group (depending on needs)</p> | <p>Once a week (can be more regular depending on severity of need) 15 mins per session</p> | <p>Children who are struggling to regulate their emotions. This may be linked to a specific event that has occurred such as bereavement/loss etc. An SDQ is completed by class teacher to identify a specific area of need. Recommendations for specific therapies can also occur through the EP service.</p> | <p>For children to have developed an awareness of how they are feeling and be able manage emotions with greater independence. Children will also have developed a bank of strategies they can use to deal with related emotions and have a positive relationship with a special key adult who they can talk to about their feelings.</p> |



| YEAR 6 INTERVENTIONS | | | | |
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| YEAR 6 INTERVENTIONS | STAFF/CHILD RATIO | FREQUENCY | ASSESSMENT TOOL USED TO IDENTIFY CHILDREN/ ENTRY/EXIT CRITERIA | EXPECTED OUTCOME |
| <p>LM 1:1's (Lego play) Delivered by a Learning Mentor.</p> | 1:1 | <p>Once a week (can be more regular depending on severity of need) 15 mins per session</p> | <p>Children who are struggling to regulate their emotions. This may be linked to a specific event that has occurred such as bereavement/loss etc. An SDQ is completed by class teacher to identify a specific area of need. Recommendations for specific therapies can also occur through the EP service.</p> <p>Lego Play can also support children who are struggling to follow instructions by providing a play-based activity to encourage and support the ability to follow instructions.</p> | <p>For children to have developed an awareness of how they are feeling and be able to manage emotions with greater independence. Children will also have developed a bank of strategies they can use to deal with related emotions and have a positive relationship with a special key adult who they can talk to about their feelings.</p> <p>To support and develop the ability to follow instructions.</p> |
| <p>LM Transition Support Delivered by a Learning Mentor.</p> | 1:6 | <p>Once a week (Summer Term)</p> | <p>Children are identified who are vulnerable/have attachment needs or require additional transitional support due to anxieties about to High School.</p> | <p>For children to be more prepared about the transition to High School. Children will identify a special key person that they can share their feelings with and feel confident to go to for additional support/preparation for the transition to High School.</p> |
| <p>Social Skills Delivered by a specialist Level 3 TA</p> | 1:6 | <p>1x weekly 30 mins per session</p> | <p>Children with/undergoing a diagnosis of ASD or those needing help with social understanding and appropriate behaviours.</p> | <p>To talk about different social scenarios through play, and demonstrate appropriate reactions. Talk about and discuss how people may feel in relation to their actions towards others and the impact this may have on themselves. Developing the ability to socialise with peers during play, increased ability to take turns and to listen/ be aware of others and their differing opinions or behaviours</p> |



| YEAR 6 INTERVENTIONS | | | | |
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| YEAR 6 INTERVENTIONS | STAFF/CHILD RATIO | FREQUENCY | ASSESSMENT TOOL USED TO IDENTIFY CHILDREN/ ENTRY/EXIT CRITERIA | EXPECTED OUTCOME |
| Transition Support Delivered by a specialist Level 3 TA | 1:6 | Once a week 30 mins (Summer Term) | Children with / undergoing diagnosis of ASD or those needing additional support due to anxieties related to moving on. | To support the anxieties and questions of children moving up to Yr7. To look at different schools and what might be expected from them. Look at the differences between primary and high schools. How to start being independent in getting to places on their own. How to ask questions but also who to ask these questions to. Role play on different scenarios of what could happen and how they can deal with them. |
| Precision teaching – reading focus Delivered by Level 2 TAs | 1:1 | Daily 10 mins per child | LSS Literacy assessments identify children who require reading PT intervention. Daily tracking is completed by member of staff delivering intervention and half-termly assessments are to track progress children are making. | To increase the amount of High Frequency words a child can read increasing accuracy and fluency in reading leading to increased levels of comprehension. |
| Specialist ASD TA 1:1 time Delivered by a specialist Level 3 TA | 1:1 | As needed | Children who are diagnosed with ASD and are working directly with AoS or children undergoing ASD diagnosis. AoS recommendations are used as a basis of this intervention time. | To support communication and social interaction with peers. To develop understanding of the school day and daily routines. To identify and support sensory needs. |



| YEAR 6 INTERVENTIONS | | | | |
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| YEAR 6 INTERVENTIONS | STAFF/CHILD RATIO | FREQUENCY | ASSESSMENT TOOL USED TO IDENTIFY CHILDREN/ ENTRY/EXIT CRITERIA | EXPECTED OUTCOME |
| SALT Delivered by specialist Speech and Language TA | 1:1 or small groups | Dependent on individual SALT targets | Children are identified by class teachers/TAs as possibly requiring SALT. They are then referred to SALT by AMA (Speech and Language TA). Children are then provided individual targets which AMA works on with children in school. | Children to make progress with their speech and language skills. |
| CHIMP Delivered by a Learning Mentor | 1:1 | Once a week Or dependent on individual need. | Children are identified through behaviour tracking and also teacher referrals into the Learning Mentor Team. | Supporting children to recognise their emotional needs and strategies to overcome barriers they may face. |
| Play Therapy Delivered by external play therapist as required | 1:1 | Once a week | Children are referred to the EP with concerns regarding SEMH needs. The EP service and school collaboratively work together to identify children who would benefit from Play Therapy. | Play therapy is a psychotherapeutic approach which will allow children involved to freely express repressed thoughts and emotions through play. |
| Steve Brown Behaviour Support Delivered by external consultant as required | 1:1 | Half Termly Reviews | Children are referred to Steve Brown for support, advice and strategies to deal with challenging behaviours. Children are identified through professional discussions and behaviour tracking. | Ideas/strategies for school to implement to support behaviour in school. For children to access 1:1 sessions with Steve and become aware of strategies that they can use to independently self-regulate. |



| KEY STAGE 2 PROVISIONS | | | | |
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| INTERVENTION | STAFF/CHILD RATIO | FREQUENCY | ASSESSMENT TOOL USED TO IDENTIFY CHILDREN/ ENTRY/EXIT CRITERIA | EXPECTED OUTCOME |
| The Pod SEMH Provision | 3:8 | Every Day With access to mainstream classroom for Child's strength lessons | The Pod provides support for children with SEMH needs who do not require a place in a special school or Pupil Referral Unit but are finding it difficult to regulate their emotions and are unable to access their learning in a mainstream classroom. Pupils will have an Education Healthcare Plan (EHCP), however in exceptional cases an assessment place may be considered whilst the EHCP is in the process of being drafted. | The children within the provision should make progress with social interaction, recognition and management of emotions and improvements in resiliency as well as academic progress. |



| KEY STAGE 2 PROVISIONS | | | | |
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| INTERVENTION | STAFF/CHILD RATIO | FREQUENCY | ASSESSMENT TOOL USED TO IDENTIFY CHILDREN/ ENTRY/EXIT CRITERIA | EXPECTED OUTCOME |
| Shooting Stars Complex Learning Difficulties (CLD) Provision | 3:16 | Every Day With access to mainstream classroom for Child's strength lessons | The provision was created to meet the needs of a group of KS2 children with EHCP's/undergoing statutory assessment for an EHCP. All children have a primary need of cognition and learning which is intensified by speech and language difficulties, social and emotional and mental health needs and/or physical disabilities. Some of the children within this group may have been placed in a special school, but parents have chosen for them to remain within a mainstream setting with appropriate levels of support. | The children within the provision should make good personal progress with their literacy and numeracy skills as well as with their ability to work collaboratively, socialise and communicate appropriately developing resilience, self-esteem and independence throughout their learning opportunities. |
| Pumas | 2:16 | Every Day With access to mainstream classroom for Child's strength lessons | The provision was created to meet the needs of a group of KS2 children with slow progress and low attainment in Literacy and Numeracy. All children have a primary need of cognition and learning which may be intensified by speech and language difficulties, social and emotional and mental health needs and/or physical disabilities. | The children within the provision should make good personal progress with their literacy and numeracy skills as well as their development and progress in the wider curriculum areas. |

