

Early Years Learner Support Handbook



Safeguarding

Newcomer Children

Looked After Children (LAC)

Vision

Hearing

Speech, Language and Communication

Sensory and Motor Development

Social, Emotional and Behavioural Wellbeing

Transitions in the Early Years

This **Copycat** DVD is for parents and professionals to use independently to facilitate early speech and language acquisition in a non-directive, non-pressurised and fun way. It will be a valuable support for children with speech and language difficulties.

Copycat differs from other nursery rhyme DVD's and CD's that are available in that it uses songs and rhymes geared towards developing imitation from its most basic level, (copying gross motor actions), to the more complex stage of copying real words.

The DVD has been divided into two chapters – the first being a sing-a-long for children to watch and join in with – and the second chapter providing information for parents/professionals, discussing how early language develops and also talking about how each song or activity helps.

There is also advice on what parents can do to help develop their child's speech and language development, as well as advice from a nursery school teacher and a parent talking about their own experiences of having a child with speech and language delay.

Throughout, the DVD is based on recent evidence on how to best help early language acquisition

The Copycat DVD that was included in the launch copies of this handbook is not available in this electronic downloadable version. It may be purchased from
The Speech and Language Therapy Dept
The Arches Health Centre
Belfast
Tel: 028 90 563258

Letter from the Chief Executive, Belfast Education and Library Board

The importance of positive educational experiences in the early years cannot be overstated as they form the foundation for life long learning. As you are well aware, children arrive at school with a wide range of skills and abilities reflecting their life experiences to date. These influence how a child responds to the learning environment and may ultimately impact on their long term academic achievement and life chances.

Thanks to the commitment and dedication of our early year's providers, careful differentiation ensures that the transition from the home into preschool settings is mostly straightforward for the majority of children. They adapt quickly, engage with the learning environment and make adequate progress commensurate with their ability. For a significant number however, matters are not quite so easy. They may fail to make progress, withdraw or demonstrate behavioural difficulties that inhibit their social and emotional development. Unless this is addressed with early intervention, children can experience failure and may develop negative perceptions of themselves as learners. Perceptions formed in the early years are notoriously difficult to change as a child matures. It is therefore imperative to address need at the earliest opportunity.

Where there are concerns, early intervention is of course extremely important for all children. It is however particularly important for those who are already disadvantaged by growing up in challenging circumstances. Belfast has many children residing in areas with high levels of unemployment, poverty and social deprivation, all of which are indicators for poor educational outcomes. Barriers to learning are likely to have a greater impact on those young children who are already disadvantaged due to their life circumstances.

Identifying and addressing the underlying difficulties that impede a child's progress requires intervention from skilled and empathetic practitioners with a variety of strategies and resources at their disposal. In preschool settings you are also well placed to offer initial advice and support to parents and, if needed, to assist parents accessing advice from within their community, voluntary and/or statutory services.

I am delighted that the advice in this handbook has been drawn from such a wide range of disciplines from within and beyond the educational sector. This allows good practice to be shared within the Belfast Education and Library Board area. While this handbook does not profess to have all the answers, I believe we have for the first time harnessed an agreed approach as to how best to respond to areas that you, the practitioners, have identified as those that most commonly cause concern in early years settings.

I would like to thank all the preschool practitioners, schools, allied health professionals, statutory, voluntary and community organisations who have supported this initiative. I would particularly like to thank the officers in Children and Young Peoples Services within the Board for initiating this project and the Peripatetic Support Service, which was tasked with gathering and collating all the information provided into such a user friendly format.

I wish you all continued success in the vital work that you carry out day and daily and I trust you will find the following information a useful resource to complement your work with children in the early years.

Yours sincerely,



Chief Executive

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Introduction

Who is this handbook for?

This handbook is suitable for any practitioner within the Belfast Education and Library Board working with children in their early years but it is particularly targeted at staff in pre-school settings. It is intended to complement the existing advice currently available:

<http://www.deni.gov.uk/index/pre-school-education-pg/16-pre-school-education-curriculum-guidance-pg.htm>

Together Towards Improvement documents for primary and pre-school on the ETI website

<http://www.eti.gov.uk/index/together-towards-improvement.htm>

SEN materials: <http://www.nicurriculum.org.uk/inclusion>

SEN/Preschool curricular guidance on the DE website

Foundation Stage guidance materials: www.nicurriculum.org.uk

How should this resource be used?

- This resource is designed to offer information and advice in areas that qualified professionals have identified as those that most commonly cause concern for children in preschool settings.
- Signposting is shown on pages 8 and 9, as a guide to which section you may wish to consult initially. However, it is recommended that all sections are read.
- For ease of reference the handbook is colour coded into 9 sections. However, it is recognised that there is significant overlap within and across some of the areas. A child may also experience delay/difficulties in more than one area.
- Each section provides a definition, gives descriptors of typical indicators and provides strategies, interventions and resources that may be helpful. Where appropriate, advice for parents is included as are tables describing typical developmental stages. It should be noted that these tables only offer broad indicators and should not be regarded as definitive. Each section also includes useful websites, resources and suggested further reading. Contact details for organisations that can offer further assistance can be found on the BELB website www.belb.co.uk. Please note that all information included was accurate at time of going to print.
- The final section offers important advice on transitioning children into their next setting. The appendices include a child protection checklist, BELB Pathway for early years providers seeking staff training and /or additional advice/support.
- In addition to informing planning and interventions, it is hoped that the handbook will also prove to be a useful tool for staff training and professional development.

Can this handbook be used as a diagnostic tool?

- This is **not** a diagnostic tool.
- Where there are serious concerns, normal referral routes leading to professional assessment should be followed.
- The handbook promotes a “skills development” rather than a “labelling” approach.

For which children is this resource intended?

- It can be difficult to accurately assess young children, particularly those who are immature or who have had limited or negative experiences prior to entering early years settings. Time in a structured setting with exposure to targeted experiences and appropriate activities is often required in order to enable skill development.
- Many children may need a little more practice and experience to develop the necessary skills and abilities to help them become successful learners. Others may need their programme to be differentiated on a long term basis if they are to make progress and experience success. All learners need to be protected from unrealistic expectations or situations that may cause distress.
- Young children often display inappropriate behaviour as a normal response to unrealistic demands being placed upon them. It is important that practitioners consider what skill deficits and/or learning difficulties may be driving this behaviour, rather than simply labelling children as having “behaviour problems.”

Can I use the strategies for children with statements of SEN?

- It is most important that in the first instance the advice outlined in the child’s statement is followed. However, there may be some suggestions and activities in the handbook that complement this advice.
- If practitioners consider that the advice in the statement is no longer appropriate this should be raised at annual review.

Should I raise concerns with the parent?

- The parents and those with parental responsibility should always be consulted in cases where there are developmental concerns; there may be simple explanations eg illness or family trauma impacting on the child.
- Pre-school practitioners should ask parents for details of any interventions being carried out eg by a speech and language therapist or an occupational therapist, in order to complement and reinforce objectives and targets.
- Parents should also be involved in reinforcing any interventions being carried out in the preschool setting at home. The handbook has plenty of fun activities that a parent can integrate into normal family routines.
- Further support and advice for practitioners and parents is available from a range of statutory, voluntary and community agencies. Contact details can be found on the BELB website: www.belb.co.uk

Where can I get more copies of this handbook?

- A free copy of this handbook can be downloaded from the BELB website: www.belb.co.uk
- A bound coloured copy can be purchased from **BELB Reprographics** Tel: 028 90564141
- Copies of the Copycat DVD can be purchased from The Speech and Language Therapy Department, The Arches Health Centre, Belfast Tel: 028 90 563258

What should I do if the strategies don't work?

In some cases it will be obvious that a child should be referred immediately to specialist services for assessment. However in most cases a planned intervention should precede a referral. See Appendix 2, page 156 for the BELB pathway for additional advice, support and training.

Who should I contact if I need information/advice that is not mentioned in the handbook?

The SEN Advice and Information Officer, Children and Young People's Services, Belfast Education and Library Board, 40 Academy Street, BELFAST BT1 2NN, Tel: 028 90564273, Fax: 02890564186 will be pleased to assist with your query.

How to use this handbook

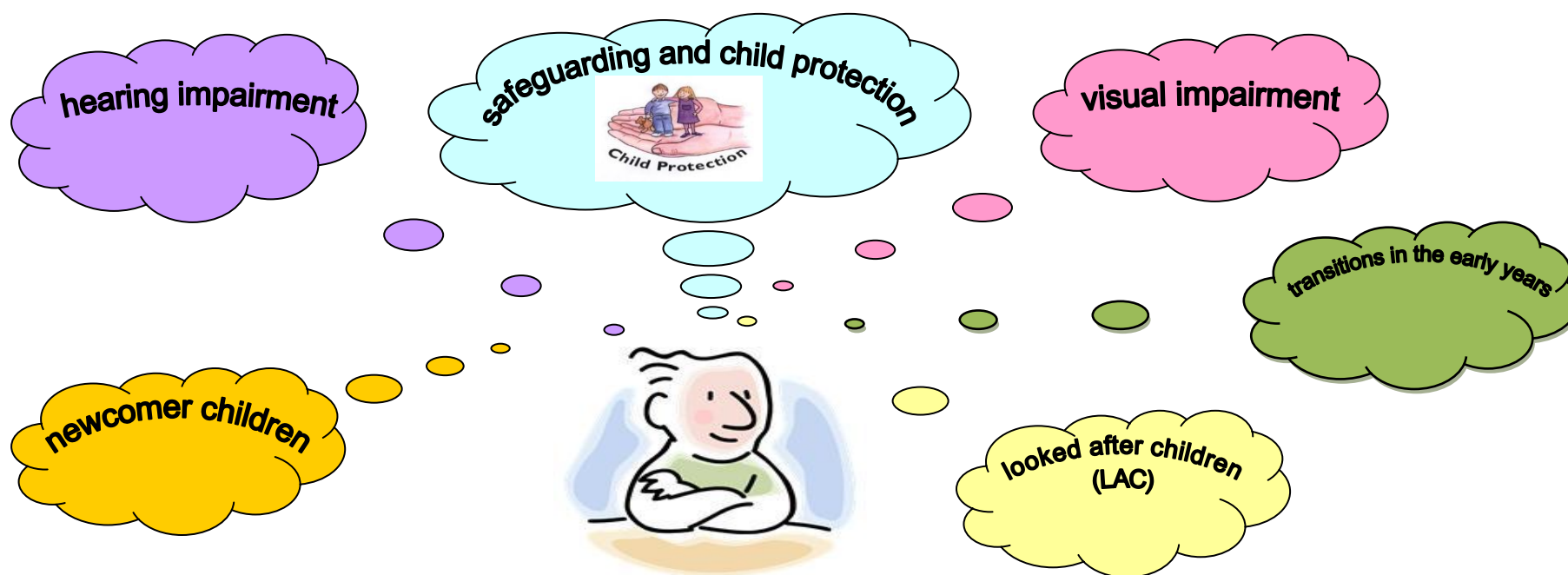
First considerations

Where there are concerns about a young child's progress it is important in the first instance to consider potential safeguarding, (p.10 and Appendix 1, p.154), hearing (p.34) and/or visual problems (p.20). This is particularly important when a child is exhibiting inappropriate behaviour.

Practitioners should also be mindful of expected behaviours that may be displayed if the child is a newcomer (p.12) or a looked after child (p.17). Transitions in the early years can also be difficult for some children (p.148). Practitioners should not be complacent in regard to such children. Children are resilient and after a few months will normally show signs of settling into their new environment. If difficulties persist you should start to question whether there may be other underlying concerns from those listed on the next page.

Training needs

It may be that your setting identifies the need for professional development for staff in order to better meet the needs of the child. Each section refers to where further advice can be sought or you can contact the **BELB Special Needs Advice and Information Officer Tel: 028 90564273** who will be happy to assist you. (See also Appendix 3 on page 157).



What to consider next

For ease of reference Speech, Language and Communication (p.42), Sensory and Motor Development (p.90) and Social, Emotional and Behavioural Wellbeing (p.128) and their component parts are all considered separately, in colour coded sections as shown. However, it is acknowledged that there is often considerable overlap as young children may present with difficulties in more than one of these areas.

Your observations and/or the child's response to your planned interventions will assist in informing the need for more formal assessment. Turn to p.156 for the referral routes in Belfast for children who fail to make progress following your interventions.

Speech, language and communication

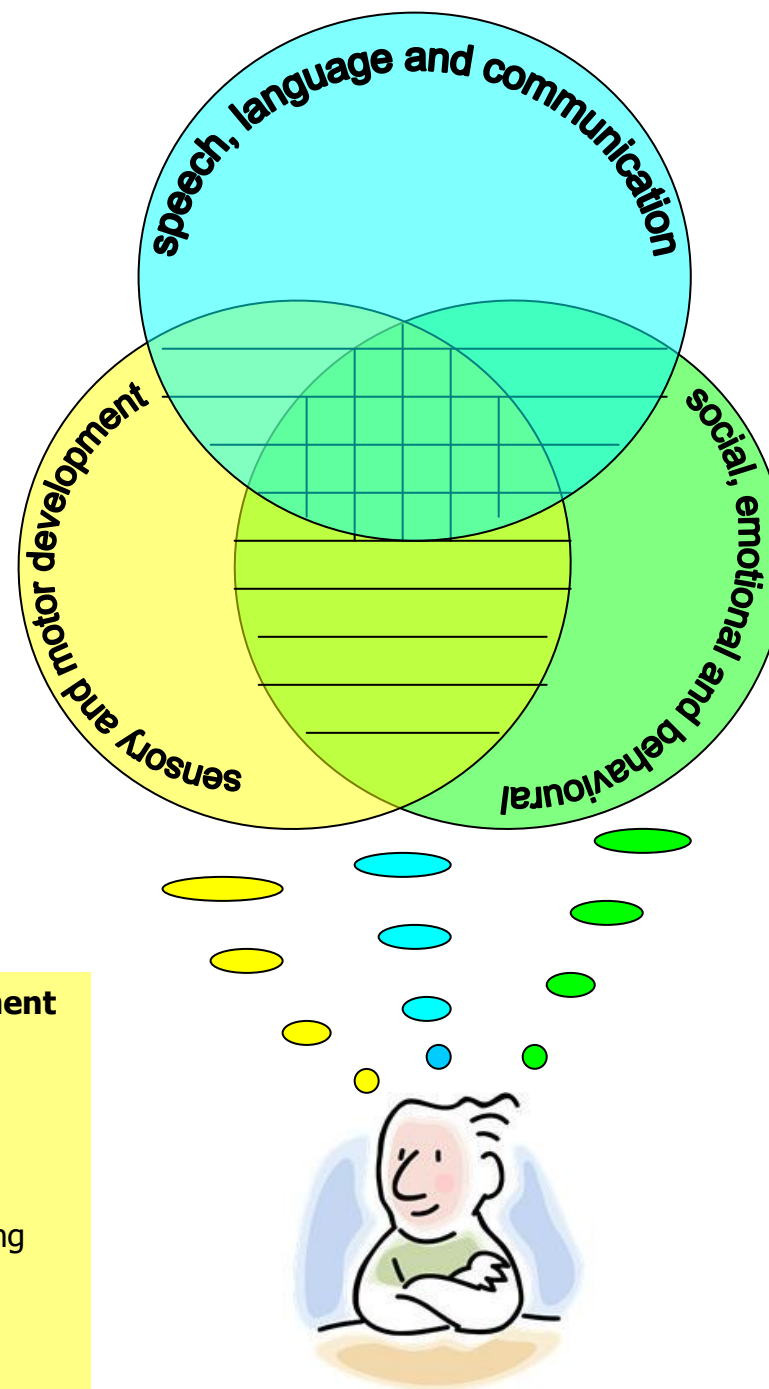
- Attention and listening
- Understanding language (receptive language)
- Use of language (expressive language)
- Social use of language (pragmatics)
- Using clear language
- Phonological awareness

Social emotional and behavioural well being

- Attention and listening deficit behaviours
- Difficulties with following an adult's request
- Aggressive behaviour

Sensory and motor development

- Sensory sensitive
- Sensory seeking
- Postural control
- Body awareness
- Balance and coordination
- Motor planning and sequencing
- Organisational skills
- Visual motor skills
- Visual perception
- Gross Motor Skills
- Fine motor skills



Safeguarding Children

Safeguarding Children- Child protection is everybody's responsibility

'The paramountcy of the welfare of the child' is the key principle of our childcare legislation, **Children (NI) Order 1995**. The role of all adults working in early year's settings in safeguarding children cannot be underestimated. Practitioners working in this area should be trained to interpret and respond to behaviours, physical indicators, emotional factors and verbal indicators that may suggest abuse has occurred or is occurring.



Early years settings will have a nominated person to manage child protection concerns and there will be a child protection policy and procedure that clearly sets out the expectations for all adults who work with children. Everyone should be made familiar with this policy and procedure during their induction into their job. It is everyone's responsibility to familiarise themselves with their own agency's policy and procedures as well as ensuring training and awareness about child protection is accessed.

For all adults working in early years settings, where there are concerns about a child, the possibility of child protection issues should always be considered. When children are young, or have a special educational need or a disability, practitioners may find it difficult to attribute behavioural indicators to potential abuse or neglect, or even be reluctant to act on their concerns. The worst thing is to do nothing at all. If you are observing or hearing anything that is concerning you about a child, **TALK TO THE DESIGNATED PERSON** in your setting and share your worries.

Appendix 1 in this handbook (P154), provides a helpful list of signs and behaviours that are drawn from the **Area Child Protection Committee's Regional Child Protection and Procedures. April 2005**. The full text is found in Appendix 2 of that document.

Safeguarding Children

Personal notes and contacts

Provision for Newcomer Children

Contents of this section



What is it?



The importance of recognising the needs of a newcomer child



Strategies and activities to support newcomer children



Resources and support



What is it?

Speaking English as an additional language **should not** be regarded as a category of special needs. However, newcomer children may require additional support from adults to help them settle into their preschool setting.

While some newcomer children may not speak and appear to present as having speech, language and communication difficulties. These difficulties are usually temporary and they will not require the same strategies that may be needed for those with long term needs.

It is important therefore to distinguish between the child who is **not ready** to speak and those who have **specific** speech language and communication difficulties in both languages.

For newly arrived children communication problems can be caused by

- Lack of understanding about cultural behaviour
- Trauma that the child may have experienced
- Transition problems of moving from country to country

More information and advice on how to contact the Inclusion and Diversity Service may be found at the website below:

www.education-support.org.uk/ids



Provision for Newcomer Children



It is important to recognise that the newcomer child may

- Experience a silent period.
- Find it difficult to concentrate (eg during story time).
- Appear to ignore you when spoken to.
- Be reluctant to make eye contact.
- Use a lot of non-verbal gestures.

Be aware that in some instances due to culture shock the pupil may initially appear

- Passive
- Aggressive
- Uncooperative
- Disruptive

Encourage the use of non verbal communication.





Strategies and activities to support newcomer children

Environmental Adjustments -

- Make a chart with the word 'Welcome' in different languages, and as new children arrive ensure their language is added to the chart (Fig 1).
- Display pictures with children from other cultures.
- Have clear and consistent routines.
- Identify key phrases and use consistently when relaying instructions (eg 'Tidy up time').
- Use small group activities to promote social interaction.
- Use equipment in play areas that reflect aspects of the child's culture (Fig 2).
- Ensure that dolls and puppets have realistic features/skin tone to reflect different cultures (Fig 3).

Group/Individual Activities -

- If possible try to learn greetings in the child's language (available on the Pre-school Toolkit for Diversity CD).
- Give the child tasks requiring little or no English (eg helping to share out drinks at snack time).
- Praise and accept all efforts by the child to join in or communicate.
- Help the child to move from using single words to short phrases and sentences through modelling.
- Enable the child to develop a core vocabulary using picture cards, picture dictionaries and visual timetables.
- Encourage the child to participate in nursery rhymes and action songs.
- Allow the child 'time out' to relax.



Provision for Newcomer Children



Resources and support



Fig 1 Display a chart with the word 'Welcome' in different languages.

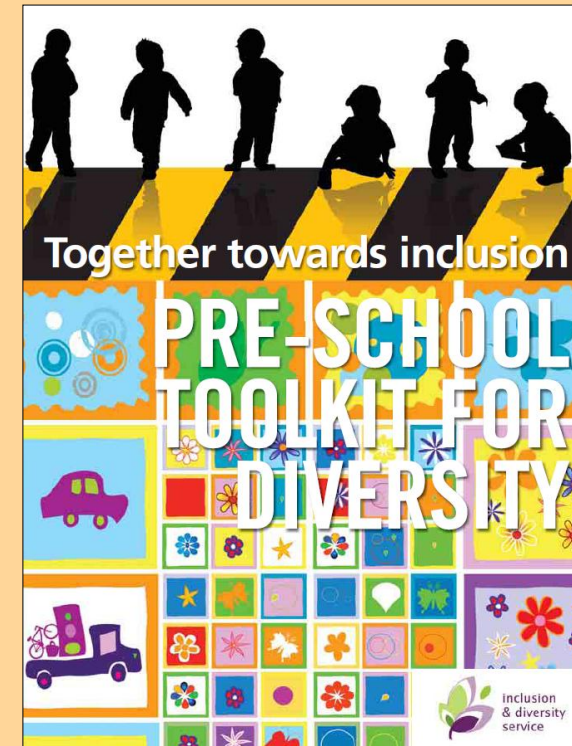
Fig 2 Use equipment and food in the play area that reflects the child's culture.



Fig 3 Provide dressing - up clothes dolls, puppets and food that reflect a range of cultures.

www.kidslikeme.co.uk

The following document contains useful information on provision for newcomer children in the preschool setting and is available to download.



Together towards inclusion

**PRE-SCHOOL
TOOLKIT FOR
DIVERSITY**

Together towards inclusion
Pre-School Toolkit for Diversity'
Inclusion and Diversity Service
www.education-support.org.uk/ids

An accompanying CD is available from IDS.

Looked After Children



Looked After Children (LAC)

The Children (NI) Order 1995 states that a “looked after” child is one “who is in the care of the Trust or who is provided with accommodation by a Trust.”

Looked after children can live -

- In a residential home
- In a foster placement
- In a family placement
- In a family placement with a relative or occasionally at home



Why do young children become looked after?

There are many reasons why children become looked after

- Some have experienced neglect.
- Some have experienced mental, physical or emotional abuse.
- Some parents are unable to look after their children because of poor mental health (particularly mothers), substance misuse or domestic violence.
- Some young children need a bit of time away from their birth family or community while a package of support is put in place to try to rebuild family relationships or their ability to function.
- Lengthy court processes for adoption necessitating child remaining in foster care.
- Non accidental injuries under investigation following attendance at hospital accident and emergency.

Looked after children

Factors that may impact on children who are looked after

In Belfast there are over 600 LAC children and young people. Most children in the 0-6 age group are cared for in family placements either by foster parents or by relatives (kinship placements). 'Looked after children' are not a homogenous group with the same backgrounds or needs. They are individual children and young people with their own personalities, needs and experiences. However the one thing that they do have in common is that life has not been easy for them. For most, an aspect of their life circumstances has led to a court hearing or social services case conference deciding that a compulsory or voluntary intervention is required.

These circumstances may have a negative impact on the health and well being of the child eg

- Attachment difficulties with consequent problems for future relationships.
- Pre birth damage to the baby resulting from mother's poor health behaviours.
- Separation of child from mother, lack of bonding and breast feeding.
- Birth traumas and anxious babies as a result of domestic violence.
- Low birth weights and early poor thriving, resulting in poor health development.
- Trauma of contact visits with birth parents resulting in troubled behaviours.
- Poor sense of identity and low self esteem.



Possible actions to improve outcomes for children looked after in early years

It is of concern that the educational attainments of LAC children are in the main poor when compared to their peers in school. When children and young people become looked after it is essential that there is robust and flexible planning for their future from the outset. Stability is crucial to children's development and happiness, and the system should support stability through minimising moves and seeking permanent solutions wherever possible.



It is important that your setting

- Listens to young children using a variety of communication media – including the use of creative arts and play.
- Provides “active listening training” to key professionals.
- If requested ensures active participation in LAC education plans/child protection case conferences.
- Shares evidence to inform monitoring of academic progress and future planning.
- If needed prioritises LAC children for referrals to specialist services.
- Is aware that a looked after child may be preoccupied and/or unsettled around contact visits and plan activities/support accordingly.
- Is aware that there may be sensitivities around “my family” topics and mothers day activities etc.

Looked After Children in Education Support Service in the BELB

The Looked After Children in Education Support Service was established in April 2007 as a joint BELB/SEELB provision. The Service provides support to children/young people who are looked after, their parent, carers and teachers, across Belfast Health & Social Care Trust and South Eastern Health & Social Care Trust. The service comprises education welfare staff, a BHSCT social worker, a youth worker and a tutor who strive to improve the educational outcomes for identified children. The team is based in Blythfield Primary School and managed by a Senior Education Welfare Officer, who can be contacted for advice on 028 90 247654.

NB. Be mindful that not all foster carers or kinship carers will have parental responsibility. It is therefore important that you refer to the intake information held on a child in your organisation prior to discussing any concerns about the child or when seeking parental consent for referrals to specialist services. If in doubt please contact the named social worker.

Further reading

Care Matters in Northern Ireland – A Bridge to a Better Future DHSSPS March 2007

Contents of this section



What is it?



Indicators of a visual impairment

Guidelines for vision support



- Guidelines: Environmental adjustments



- Guidelines: Teaching and learning strategies



- Guidelines: Examples of resources



Support for a child with a visual impairment



Support for parents with a visually impaired child



Websites, resources and publications



What is it?

Visual impairment is the acceptable generic term that refers to loss in visual acuity or visual field. Visual impairment does not equal blindness but abilities and individual needs vary widely. Visual impairment may be mild, moderate, significant or even severe. It may or may not be corrected by the wearing of glasses.

A child with a visual impairment may develop much the same as any child, however there may be differences in the rate and the sequence of this development. Visual impairment may restrict range and variety of experiences. For some children their visual impairment may have a profound effect upon their development eg cognitive, language and physical, social and emotional.

Loss of Visual Acuity means a reduction in visual sharpness, to see fine details.

Visual field refers to a loss of an area of vision.

There is a wide range of visual impairments. Many of these, but not all, should have been identified prior to the child beginning play group or school.

While the practical effects of a visual impairment are extremely important, as teachers and carers we must also remember the impact it may have on the development of a child's communication skills, self-esteem and attitudes to learning.

The presence of a severe visual impairment is usually diagnosed at birth or soon after. However, some eye problems may not be apparent until the child is within nursery provision or at school.



Indicators of a visual impairment

- Eye appearance eg cloudiness, inflammation, weeping
- Eye habits eg excessive blinking, rubbing or screwing up of the eyes
- Eye health eg eyelid droop or swelling, frequent sties, pain
- Eye performance eg squinting, involuntary wobble etc.

Also

- Behavioural problems eg a short attention span, avoidance tactics, disruptive behaviour
- Body posture which is unusual/poor eg persistent head tilting
- Clumsiness
- Discomfort in bright light
- Poor mobility in dim light
- Tiredness
- Unusual characteristics when reading, viewing and writing eg holding books very close to the eyes, head tilting, holding reading book to one side, large hand writing, problems with letter spacing, attainment below ability

Whilst some of these indicators may be present in children with no eye problem, it is important to realise that they may be an indication of impaired or fluctuating vision and it is advisable that they are brought to the attention of the parent.

The Belfast Education and Library Board's (BELB) Peripatetic Support Service for Visual Impairment (VI)) operates an open referral policy. With parental permission, referral may come from nursery, school, social worker, health visitor, community eye clinic, Educational Psychology, RNIB Eye Clinic Liaison Officer (ECLO).

Guidelines for Vision Support

A **child specific** recommendation is not possible without an assessment of **individual** visual needs. This is carried out by the Belfast Education and Library Board (BELB) Peripatetic Support Service (PSS) Vision Support teacher and is based upon:

- *Clinical assessment* - to provide a clinical diagnosis of *eye condition*, near and distance *visual acuities* (measurements of acuteness of vision), plus information regarding other aspects of vision (for example, colour function, contrast sensitivity, field of vision).
- *Functional assessment* - this reports on the *use of vision* in *everyday situations* eg within the classroom or playground and resulting from observation, pupil/teacher feedback, alongside both standardised and non-standardised assessment (over a period of time).
- *History taking* – with the further input of parents and relevant others sought as regards visual function (indeed this will probably *preface* any more formal assessment).

Where concerns have been raised regarding a possible visual impairment (VI)

- Speak to the parents, to inquire if there has been a recent clinical assessment of vision. It may be that a child already attends community or hospital level Ophthalmology for a known eye condition.
- Where there are strong clinical and/or functional grounds for concern, seek parental permission for referral to the BELB PSS (VI) Vision Support (VS) teacher.

However, the following vision related **general guidelines** might serve to assist

- **Environmental Adjustments**
- **Teaching and Learning Strategies**
- **Resources**



Environmental Adjustments

- Aim for consistent layout and avoid too much clutter in your setting.
- Demarcate obstacles using a contrasting colour or hazard tape eg a glass door/window, a pillar, step, or uneven surface.
- Demarcate zones of classroom activity eg by colour, sound or texture.
- Encourage a multisensory exploration of any new room or route, with tactile signage and trails particularly helpful.
- Ensure that all signage is of maximum size and colour contrast, also glare free and preferably at eye level. This is to facilitate incidental learning.
- Outdoor play environments should have both seated and shaded areas, to cater for those children who appreciate the security of both, or who find it difficult to seek out friends at distance, even to play in bright conditions.
- Play area markings eg related to games and line-up locations, should be of high contrast, recently painted and clearly visible.
- Use blinds and curtains to minimise board and screen glare.
- Vision may need time to accommodate between lighting levels eg when moving from an outdoor to an indoor environment or vice versa. Do not presume that all children are immediately visually ready for the next activity.
- Watch out for a child who does not wish to participate at the whiteboard but who is otherwise keen to contribute. There may be a visual issue approaching or at the board.
- Where applicable, do not leave whiteboards switched on all day, experiment with toning down background glare when in use eg a pastel background is more visually comfortable than pure white.
- Try to avoid standing in front of either the whiteboard or the window light, when talking.

Guidelines for Vision Support



Teaching and Learning Strategies

- To maximise teaching/learning through vision, make sure that any child who wears spectacles is wearing them as prescribed. Keep spare pairs in case they have been forgotten.
- Where possible adopt a multi-sensory approach, use real objects rather than a visual representation of something. Where applicable things can be listened to, smelled, tasted, touched, as well as seen.
- Specific materials such as **Numicon** help to encourage teaching and learning that it is concrete, hands on, three dimensional and very visual. Number recognition, sequencing, one-to-one correspondence and basic calculations can be developed with touch, as well as sight. Use of touchy-feely letters that are moulded, tactile, and magnetic or shaped from sandpaper may also be useful, (Fig 11).
- When using any object or picture allow for sufficient exploration and/or visual processing time. Some children may require a guided exploration/viewing or preview/review of materials.
- During story time include objects of reference that are related to the story and are held, rather than merely seen by the children. They help to reinforce the illustrations and text. For some children it helps to communicate the content that may not easily be seen at a distance, (Fig 10).
- Find the best position to demonstrate a task, either one-to-one at a tabletop or with a whole group from the front. Provide for the best vision for individuals and the good seeing of all. Sit or stand beside a child's non-squinting rather than squinting eye. In group situations check that all children have an unobstructed view before commencing.
- Use descriptive language to comment upon actions, describe an appearance, and interpret an expression or gesture, even emotion.
- Use direct but discrete questions to assess what can be seen and what is understood.
- Verbalise instructions. Information that is conveyed by facial expression or gesture alone may be missed by some children.
- Modulate the tone of your voice and its volume to further convey mood and meaning.
- When giving instruction to/seeking attention from a particular child, be sure to mention that child's name.
- Encourage even very young children to express their own visual needs and preferences regarding board marker or paper, colour, lighting, seating and support.



Resources

- Resources eg alphabet and number lines or visual timetables should be of maximum colour contrast eg a bright yellow against a blue/black background, size and spacing. Any lamination used should be matte to reduce surface glare.
- When holding any resource for demonstration purposes, content will be more clearly visible at eye level, held steady, against a contrasting or solid background, rather than waved aloft against a multi-coloured or patterned background.
- *Story Corner* book resources should be *big-book* size (Fig 18) with content commercially produced or enlarged for the purpose eg *big-booked* by Belfast Education and Library Board Reprographic Department or at the Regional Vision Resource Base RVRB at the Fortwilliam Centre by arrangement with the Qualified Teacher for the Visually Impaired QTVI.
- A big-book is best viewed from a centrally located and eye level (again early years) book stand or reading easel.
- When giving out tabletop resources, these too will be more visually accessible when explored and viewed against a contrasting and non-patterned background eg yellow bricks on a solid red or blue background. Avoid flowery or stripy table covers.
- Where applicable, aim for maximum pencil and paper contrast by using 2/3/4B (4B being the darkest) pencils against a pastel background, pastel shades may be less visually abrasive than pure white, (Fig 3).
- Where using paper worksheets for colouring, cutting and sticking or join-the-dots, avoid crowding and low contrast. Make sure that outlines are bold and overall print quality is good, (Fig 1).
- Use a *sloping board* for reading and writing activities to facilitate visual accessibility, by bringing content closer to vision and reducing surface glare and improving posture in the process, (Fig 2).
- Even incidental resources may be VI-friendly eg easy-to-see and tactile dice, glue-sticks that leave a trail of colour, scented markers, textured paint, scratch and sniff or unusually shaped reward stickers. Use high-visibility, audible, or even slow moving balls like the Slomo for throwing and catching activities,(J.A.G. Enterprises, RNIB or Sense Toys) (Fig 3 & 4).
- Visual accessibility at a computer may be enhanced through using Big Keys or Jumbo keyboard with colour coded or high contrast keys in lower case, plus large monitor 21/22, with matte surround and Kid TRAC or BIG track mouse ball. Accessibility Wizard screen modification tools and deployment of C2K networked speech and magnification software are further options that could be considered, (Fig 7).

Guidelines for Vision Support



Resources

- When a child is wearing an eye patch to occlude better vision and to strengthen weaker vision, make sure that all resources are presented to eye, rather than patch side.
- Look out for and be aware of any defensiveness or selectiveness regarding resources eg an aversion to glue or paint. Children who have a visual impairment are often *tactile defensive* or *tactile selective*.
- Look out for and be aware of any age or stage inappropriate colour confusion. This too may indicate the presence of a visual impairment, be this slight or severe.



Fig 1 Coloured stationery with lined and coloured paper, note books and exercise workbooks.



Fig 2 Sloping wedge for the desk top.



Fig 3 Tactile and coloured crayons, pens, pencils, rulers, protractors and adapted VI scissors.



Fig 4 Reward stickers that are scented.



Resources

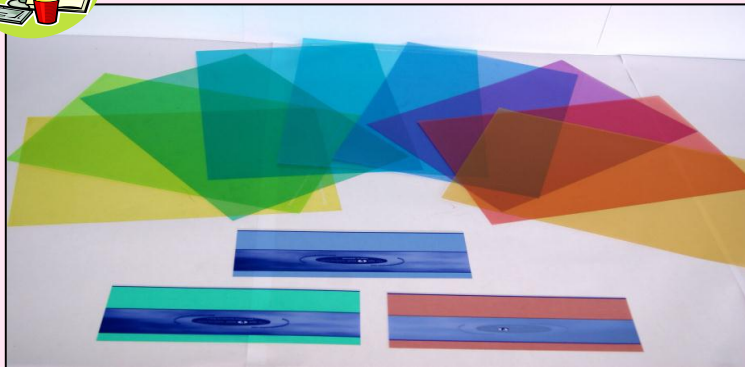


Fig 5 Coloured overlays to reduce glare.

Fig 6 Sentence and word isolators.



Fig 7 An adapted mouse for the computer which has been enlarged and coloured. Coloured 'Bumpy Lumps' and locator-dots to stick on to key boards. Coloured and enlarged letter labels for computer keys.



Fig 8 Scented play clay and brightly coloured craft materials.

Guidelines for Vision Support



Resources



Fig 9 Tactile and coloured balls, skittles and slinky toy.



Fig 10 Large tactile, coloured toys for reference.



Fig 11 Large coloured foam numbers and letters.

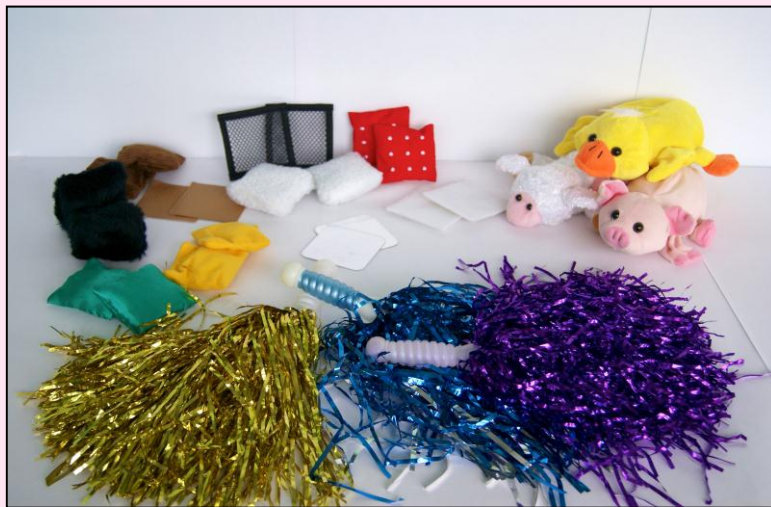


Fig 12 Matching tactile squares, hand puppets, and sparkly pom-poms.



Fig 13 Coloured and tactile spools for threading activities.



Guidelines for Vision Support



Resources

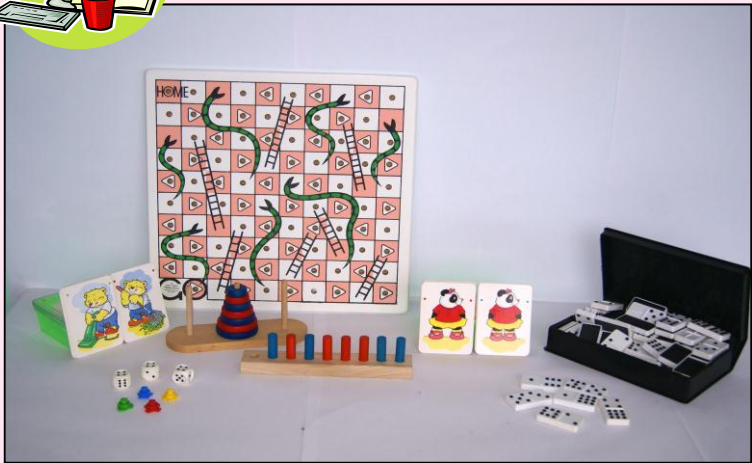


Fig 15 Tactile and coloured games. Peg holes in the snakes and ladders board, tactile dominoes. A shadow matching card game.



Fig 16 Light sources: torches, mirrors, fairy and optical lighting.

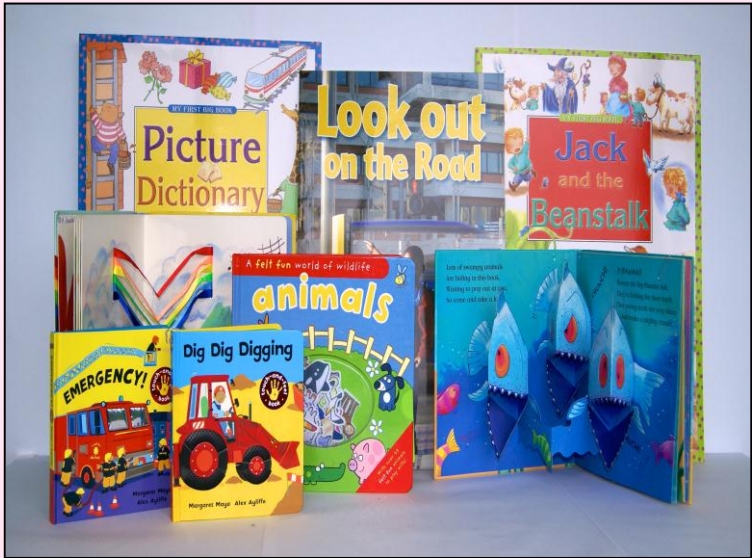


Fig 18 Large books, with bright colours and enlarged print. Tactile books. Auditory and pop up books. Books with toys and ribbons inset into the pages.



Fig 19 Tactile coloured clock, number display cards with number copying. A selection of coloured, number and shape books with large print. A beaded abacus for counting activities.



Fig 17 Tactile dice, coloured and tactile markers.

Guidelines for Vision Support



Resources



Fig 20 Noisy toys.



Fig 21 Brightly coloured shape sorter.



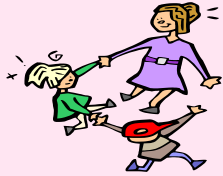
Fig 22 Sound jig-saw.



Fig 23 Brightly coloured talking tins to record short messages or instructions.



Fig 24 Soft animal toys with tactile touch and matching small animal with recorded animal noises.



The Belfast Education and Library Board's (BELB) Peripatetic Support Service (PSS) Vision Support operates a referral policy. With parental permission, referral may come from nursery, school, social worker, health visitor, community eye clinic, Educational Psychology or RNIB Eye Clinic Liaison Officer (ECLO) preferably with clinical information.

The **BELB Peripatetic Support Service Vision Support**

- Provides advice and support parents about the implications of their child's eye condition.
- Promotes the inclusion of children with a visual impairment within mainstream pre-school and school placement.
- Facilitate access to the national curriculum.
- Collaborates with parents, school staff and others in the development of Individual Educational Plans (IEPs).
- Where necessary, contribute to a special or additional curriculum for those children with a visual impairment.
- Above all, enables children with a visual impairment to realise their potential.

Further information may be obtained from

BELB Peripatetic Support Service Vision Support

Ulidia Resource Centre
Somerset Street
Ormeau Road
Belfast BT7 2GS

Fax: (028) 90491972
Tel: (028) 9069 0373 (direct line)

Regional Vision Resource Base (RVRB)

Fortwilliam Centre
Fortwilliam Park
Belfast
BT15 4AR

Support for Parents with a Visually Impaired Child



Many of the suggestions provided in this section are equally supportive and useful for parents to use at home with a visually impaired child. Effective communication and the sharing of ideas and information with parents is essential if the needs of a child with a visual impairment are to be met.

Parents may also wish to contact the teacher for the visually impaired at

BELB Peripatetic Support Service Visual Support

Ulidia Resource Centre
Somerset Street
Ormeau Road
Belfast BT7 2GS

Fax: (028) 90491972

Tel: (028) 9069 0373 (direct line)

Further support and advice are available from a range of statutory and voluntary agencies. A list of those who have registered is available from the Belfast Education and Library Board's Website.

RNIB Children's Services

40 Linenhall Street
Belfast
BT2 8BA
Tel: 028 90 329 373
Email: rnibni@rnib.org.uk
Website: www.rnib.org.uk

Angel Eyes NI

PO Box 1219
Belfast BT4 9DB
Tel: 028 90 760 163
Email: info@angeleyesni.org
Website: www.angeleyesni.org



Websites for Information

<http://www.rnib.org.uk/learning>
<http://www.lowvisiononline.unimelb.edu.au/index.htm>
<http://www.stlukeseye.com/default.asp>
<http://www.scc.education.ed.ac.uk>
<http://www.tsbvi.edu>
<http://www.look-uk.org>
<http://www.nicurriculum.org.uk> (SEN/inclusion/visually impaired)



Resources and Equipment

www.specialdirect.com	www.spacekraft.co.uk
www.shopwiki.co.uk	www.sensetoy.com
www.sensorytoywarehouse.com	www.rompa.com
www.discoveryeducation.com	www.edhelper.com
www.specialneedstoys.com	



Publications for Further Reading

Educational provision for blind and partially sighted children and young people in England 2007,
Morris, M and Smith, P (2008) London: NFER/RNIB

Including children with visual difficulties in the foundation stage.
Jennings, Julie RNIB. Featherstone Education. ISBN 978-1-4081-1449-0

Vision friendly Schools

National Blind Children's Society available from [http:// www.nbcs.org.uk](http://www.nbcs.org.uk)

Hearing Impairment

Contents of this section



What is it?

- Permanent childhood hearing loss
- Temporary childhood hearing loss



Possible indicators of a hearing impairment



Guidelines for the management of a hearing impaired child



Support for a child with a hearing impairment



Support for parents with a hearing impaired child

Websites, resources and publications





What is it?

Hearing impairment is invisible. It may be present at birth, but it may also be acquired during childhood or later in life. Sometimes this is due to illness or trauma and the hearing loss may be sudden or progressive. Hearing impairment can also occur for other reasons. Sometimes one ear may be affected and sometimes both ears.

Hearing loss may be permanent or temporary. A permanent hearing loss is usually due to nerve damage in the inner ear, which means that sounds cannot then be properly transmitted to the brain to be processed. A temporary hearing loss usually occurs when there is a problem with the middle ear, preventing sound passing to the inner ear and on to the brain.

Children who have a permanent hearing loss may also have an additional, temporary loss. In this case their hearing impairment is made worse until the condition has been resolved.

Permanent Childhood Hearing Impairment

Since the advent of newborn hearing screening, nearly all babies have their hearing checked very soon after birth. A child who does not pass the newborn screen undergoes further assessment. If the child is found to have a hearing loss he/she may eventually be issued with a hearing aid. When this happens the Peripatetic Service for the Hearing Impaired receives a referral from the hospital. Most children with a hearing loss are educated in mainstream provision.

The Peripatetic Support Service for the Hearing Impaired (PSSHI) is involved with hearing impaired children and their families in the BELB area from diagnosis until the end of the child's school career. The kind of support provided varies according to individual need and is kept under review, but includes support with the management of hearing aids.

Hearing aids and cochlear implants do not 'fix' a hearing loss. They do not 'correct' hearing in the way that spectacles might correct vision, therefore what the child hears is incomplete compared with what a person with normal hearing hears. This has implications for speech and language development, which in turn has implications for access to the learning environment and for the child's social development.

Hearing aids are most effective when the wearer is no more than about a metre from the speaker and in good acoustic conditions, where there is no background noise. Classrooms are clearly a difficult environment for hearing aid users, but there are strategies which may be used to make life easier.

Temporary Childhood Hearing Loss

In young children the most common kind of hearing loss is caused by a build-up of fluid in the middle ear. This is called '**glue ear**'. It is a very common condition in young children.

The middle ear needs to be kept full of air in order to work properly. The Eustachian tube connects the middle ear to the back of the throat and keeps it aired and healthy. In small children, the Eustachian tube is not as wide or as vertical as it will be when they get older and tends to get blocked more easily. This can happen as a consequence of infection, but may also occur when there is no sign of infection. When the Eustachian tube gets blocked, the oxygen in the middle ear is used up and mucus is secreted. This fluid can become very thick, hence the term 'glue ear'.

Children who are prone to colds, runny noses, sore throats or chest infections are more likely to get glue ear. It is also more common among children who have **cystic fibrosis** or **Down's syndrome**.

Glue ear usually clears up by itself, but some children need to be treated surgically. This procedure involves the insertion of **ventilators** (vents) or **grommets** into the ear drum after the fluid has been removed. Hearing aids may be issued to help a child hear better until the condition is resolved. If a child already has hearing aids they may need to be adjusted to allow for the additional difficulty.

The presence of fluid in the middle ear prevents some sound getting through. It is rather like trying to listen with fingers or ear plugs in the ears. Some sound gets through, but it is quieter and muffled. A child with glue ear will not therefore hear clearly, may mishear and therefore misunderstand what is said to him/her. This may have an effect on a child's speech and language development. The sounds of speech may not be clear and they are not, therefore, reproduced clearly. This has implications for the child's learning of phonics.

A child whose hearing is affected by glue ear may have difficulty concentrating. The child may 'tune out' and appear to be daydreaming. There may be behaviour issues due to mishearing instructions and frustration at not being able to hear clearly.

Glue ear may cause hearing to fluctuate. Some days may be better than others. This can be very confusing for a child, because what he/she actually hears over a period of time may vary.



Possible indicators of hearing impairment

Some indicators of hearing impairment are similar to those for other conditions. People make comments such as:

- 'He's just ignoring me.'
- 'She's not following instructions.'
- 'He's always saying 'what?' or 'pardon?'
- 'He says he can't hear.'
- 'I keep having to repeat what I say to her.'
- 'He hears when he wants to.'
- 'She daydreams a lot.'
- 'He wants the TV turned up.'
- 'She watches my face very intently.'
- 'He watches what the others do before doing it himself.'
- 'She often asks a friend for help.'
- 'He continues with an activity after I have told the class to stop.'
- 'His behaviour has taken a turn for the worse.'
- 'She is reluctant to speak up in class.'
- 'He can be a bit withdrawn.'
- 'He speaks very quietly.'
- 'She is better in a one-to-one situation.'
- 'He has selective hearing.'
- 'She shouts a lot.'



Hearing Impairment



Guidelines The following guidelines reflect what '**good practice**' is for any child, but are particularly important for a child with a hearing impairment. Learning environments are challenging for children with a hearing impairment, but they listen and learn better when

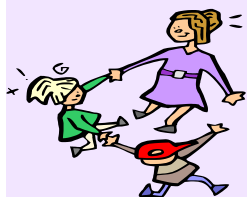
Environmental Adjustments -

- Background noise is kept to a minimum. If background noise is unavoidable, the child with a hearing impairment should not be seated too close to the source of the noise, eg traffic, fans or machinery.
- A speaker's face is in good light and not in shadow.
- The speaker uses clear, natural speech and language.
- Speakers do not cover their mouths when talking.
- Speakers do not turn their face away when talking.
- Any additional amplification eg FM system or Soundfield system is used as recommended.
- Visual clues are used.

Group/Individual Activities -

- Their better ear is farthest from the source of any background noise and nearer the speaker, if they have a unilateral (one-sided) hearing loss.
- They sit within a few feet of the speaker.
- A speaker has their attention before starting to speak.
- They know the context of what is being said.
- Hearing aids are working optimally.
- In a group situation, the hearing impaired child can see the other speakers and only one person talks at a time.
..... and finally, it is always helpful to check sensitively whether a child has understood. This may seem like a lot, but it is mostly common sense and general good practice.

Support for a Child with a Hearing Impairment



A child who has a diagnosed hearing loss and is wearing a hearing aid should be known to the Peripatetic Support Service for the Hearing Impaired, who will also be in contact with the child's parents. A member of the team may already have contacted you. If this has not yet happened, please contact the **Peripatetic Support Service for the Hearing Impaired** for further advice.

If you have any concerns about the hearing of a child in your care, please contact the Peripatetic Support Service for the Hearing Impaired. A hearing assessment can be arranged with the consent of the child's parent/carer. Any necessary action will then be taken and appropriate advice given.

The Peripatetic Support Service (HI) provides the following services, as appropriate

- Teaching support
- Support and advice to parents
- Support and advice to school staff
- Liaison with parents and relevant professionals eg ENT and Audiology, Educational Psychology, SALT, OT., Social Services
- INSET training upon request to school staff
- Classroom assistant training
- Monitor hearing aid use & check optimal functioning
- Provide additional auditory equipment as appropriate eg FM., Soundfield

Contact Address

Peripatetic Support Service for the Hearing Impaired

Ulidia Resource Centre
Somerset Street
Ormeau Road
Belfast BT7 2GS
Tel: 028 90 690 351

Support for Parents with a Hearing Impaired Child



If a child has a diagnosed hearing difficulty he/she will be known to a hospital ENT/Audiology Department. If the Peripatetic Support Service is not already involved with the child, parents may contact them directly or through their child's school or nursery.

If a parent has concerns about their child's hearing, it is important that they contact their Doctor (GP), Health Visitor or their child's teacher. The GP or Health Visitor can make a medical referral. The Health Visitor may also contact the Peripatetic Support Service for the Hearing Impaired. The child's teacher, with permission from a parent, can make a referral to the service. If there are any concerns after assessment, these can be followed up by talking to the teacher of the Hearing Impaired.

Further information:

National Deaf Children's Society

Wilton House
5 College Square North
Belfast
BT1 6AR

Tel: 028 9031 3170

Minicom: 028 9027 8177

Fax: 028 9027 8205

Email: nioffice@ndcs.org.uk

Royal National Institute for the Deaf

Wilton House
5 College Square North
Belfast
BT1 6AR

Information Line (free phone)

Telephone :0808 808 0123

Textphone: 0808 808 9000

infomationline@rnib.org.uk



Websites for Information

www.batod.org.uk: British Association of Teachers of the Deaf
www.ndcs.org.uk: National Deaf children's Society
www.earfoundation.com



Resources and equipment

ndcs: Playtime and deaf children www.ndcs.org.uk



Publications for Further Reading

ndcs publications:

Their catalogue is available from online at www.ndcs.org.uk

Their publications include:

- Glue ear (2008)
- Deaf friendly nurseries and pre-schools (2009)
- Deaf friendly schools (2008)
- Deaf friendly teaching (2009)

Contents of this section

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What is it?



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5. Social Use of Language (pragmatics)

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Key



What is it?



What to look for



Strategies and activities



Resources



Support for parents



Tables/charts



Websites



Resources/equipment



Publications

1. Areas of Speech, Language and Communication



What is speech language and communication?

- **Speech** - the sound system of a language and how sounds are made in the mouth to form spoken words
- **Language** - the structure in which words are used i.e. grammar, pragmatics, vocabulary and semantics.
- **Communication** - the ways in which we receive and pass on messages to other people. Difficulties with communication can reduce access to education, employment and social integration

A child's language development may be **delayed** ie it is similar to that of a younger child or it may be **disordered** ie it does not follow a typical developmental pattern.

1. Areas of Speech, Language and Communication

Areas of Speech, language and communication

- **Attention and listening**
- **Understanding language (receptive language)**
- **Use of language (expressive language)**
- **Social use of language (pragmatics)**
- **Using clear speech**
- **Phonological awareness**



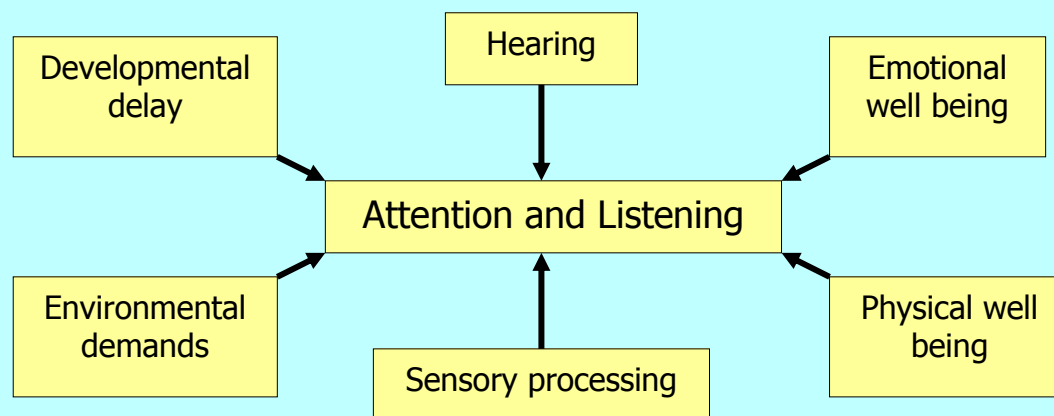
2. Attention and Listening



What is it?

Attention and listening is the ability to focus and maintain attention on what is seen and heard, or on a chosen task or activity. This is vital for children to access the curriculum.

Children with attention and listening difficulties may be very fidgety, distract other children or display inappropriate behaviour. Various factors may affect a child's attention and listening skills



Hearing Children with a hearing loss or with fluctuating problems such as recurrent glue ear will find it very difficult to pay attention and may tune out. A child who is prone to colds, a runny nose, sore throats and chest infections is more likely to get glue ear.(For more information contact BELB Support Service for the Hearing Impaired)

Emotional and physical well being A child will be unable to focus and maintain their attention if they are unwell or if they are worried or anxious.

Environmental demands There may be too many stimuli competing for the child's attention, or possibly the language being used is too complex so the child switches off.

Sensory processing (See section on Sensory and Motor Development)

2. Attention and Listening



Developmental Levels:

Children's attention and listening skills move through recognised developmental stages.

Level 1 (0 -1 year)	Fleeting Attention: The child is easily distracted and flits from one thing to another.
Level 2 (1- 2 years)	Rigid Attention The child can concentrate on a concrete task of his own choosing but cannot tolerate interruption by an adult. As a result he may appear bold or obstinate.
Level 3 (2 - 3 years)	Single channelled Attention The child cannot look at something while listening to an adult at the same time. He has to do either one thing or the other. He can shift his whole attention to a speaker to listen to instructions and then back to the game but will still need encouragement to do this.
Level 4 (3 - 4 years)	Focusing Attention The child must still alternate full attention between a speaker and a task as he still cannot do both at the same time. However, he can now do so without the adult having to focus his attention.
Level 5 (4 - 5 years)	Two channelled Attention The child can now follow instructions without interrupting the task. His span of concentration may still be short - but he can be taught in a group.
Level 6 (5 - 6 years)	Integrated Attention Auditory, visual and manipulatory channels are fully integrated. Attention is well established and can be maintained.

(Adapted from Reynell 1977)

2. Attention and Listening



Possible indicators of attention and listening difficulties

The child may-

- Be easily distracted or fidgety.
- Appear to ignore you.
- Be quiet and withdrawn.
- Stare blankly into space and appear to be in their own world.
- Fidget and yawn and appear to be tired.
- Look around at peers and other objects close by.
- Be unable to answer simple questions and can only point to things in the picture.
- Have to be prompted to attend even when their name is called first.
- Lose focus easily and may get up and start to wander around the room.
- Need the help of an adult to keep them on task.
- Be unable to follow instructions without first watching to see what others are doing.
- Constantly ask for instructions to be repeated.



The ability to focus and maintain attention is a vital skill.



Strategies to support the development of attention and listening

Environmental Adjustments-

- Keep equipment in consistent places.
- Ensure tables/rooms are uncluttered (negotiating obstacles interferes with short term memory) .
- Remove distractions or eye catching toys.
- Use a cue, such as chime bar or red dot to signal time to listen (green dot signifies listening is over).
- Use photographs of your children modelling the behaviours where possible (Fig1).
- Have well rehearsed routines – use visual timetables.
- Reduce background noise – have a quiet area for story time with limited sound and visual distractions.

Group/Class Activities-

- Start with short work sessions and gradually increase the time span.
- Plan regular movement breaks for the children.
- Use a range of positions for working – at desk, on floor, in play corner etc.
- Use simple language but vary your tone of voice – make it interesting.
- Play 'Simon says' to promote good listening.
- Use circle time to promote active listening.
- Give attention to the pupils who are listening - praise all good listening behaviours *after* you have finished speaking or giving the instructions.



Play musical chairs or statues.

2. Attention and Listening



Strategies to support the development of attention and listening

Group/Class Activities continued -

- Go on listening walks and ask children to identify and locate sounds to develop sound location skills.
- Teach active listening - encourage the children to ask if they don't understand.
- Allow the use of fiddle toys.
- Speak at a natural pace - not too fast.
- Use a range of visual resources – photographs, pictures, puppets, etc (Fig 3).
- Teach 'good listening' skills – display as visual prompts on the classroom walls (Fig 1).
- Play musical chairs or statues.

Individual Child Activities -

- Tell the child it is time to listen - prompt the length of listening time eg 'I need you to listen for a short time'.
- Keep instructions short and be prepared to repeat if needed.
- When asking questions - monitor the complexity of your language and be prepared to simplify it.
- In a one to one situation sit face to face with the child as you play or talk with them.
- Get down to the child's eye level when possible (Fig 2).
- Ensure you have the child's attention before you start speaking - use their name.
- Use the child's special interests to catch their attention.
- Before the child becomes unsettled direct him to another adult led activity.
- Frequently recue the pupil by saying their name or touching them.



In a one to one situation sit face to face with the child.

2. Attention and Listening



Parent Support

It is important to keep regular medical checks to rule out hearing problems

Strategies to support the development of attention and listening

- Find a place away from distractions such as the television or other children.
- Sit facing the child and if possible at their level.
- Encourage them to look at you when you are speaking – use their name.
- Specifically, praise good listening behaviour.
- Keep instructions short and simple.
- Sing songs putting in the wrong word – the child has to listen for your mistakes and correct them.
- Go on walks and encourage your child to listen for and locate the different sound they can hear around them.

(For more ideas see www.ican.org.uk for information for

Activities to support the development of attention and listening

- Play 'Simon says' where the child has to carry out only the instructions that begin with 'Simon says'.
- Play 'Ready steady go' where the child has to wait before carrying out an activity such as going down the slide.
- Initiate role - play games such as 'shopping' where you are the customer.
- Blow bubbles – ask the child to watch the bubble and then catch it when you let it go.
- Keep the game or activity short to maintain attention.



Play 'Simon says' to promote good listening skills.

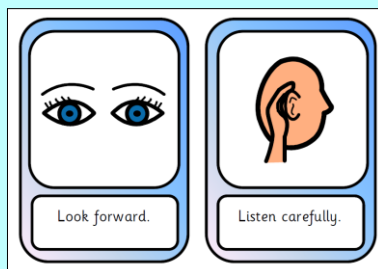
2. Attention and Listening



Resources and strategies to support the development of attention and listening skills.



Fig 2 Talk to the child at eye level when ever possible.



Hold up good listening cue cards to prompt pupils during group work.

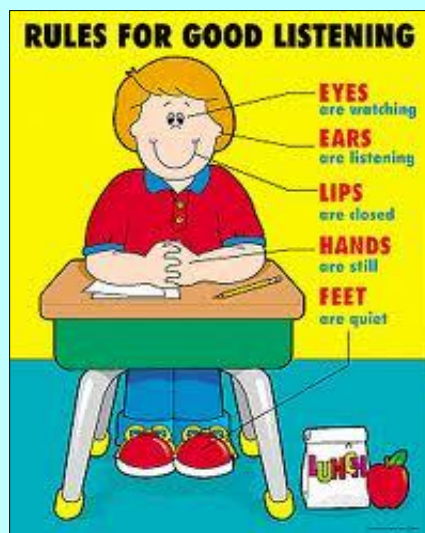


Fig 1 When possible use photographs of the children modelling good behaviour.



Fig 3 Use puppets to hold the children's attention.



3. Understanding Language (receptive language)



What is it?

The understanding of language and comprehension is a complex process which is closely linked to attention, listening and behaviour. It is the ability to listen, concentrate, remember and understand spoken language including -

- **Individual words (vocabulary and concepts)**
- **The structure of the sentence (grammar)**
- **The underlying meaning of a sentence**



3. Understanding Language (receptive language)



The developmental stages of understanding

(Adapted from Stages of Speech and Language Development www.ican.org.uk)

Age	Stages of Understanding
0 - 3 months	Recognises parent's voice. Often calmed by familiar friendly voice, eg parent's
3 -6 months	Shows excitement at sound of approaching voices
6 -12 months	Understands frequently used words such as 'all gone', 'no' and 'bye-bye.' Stops and looks when hears own name Understands simple instructions when supported by gestures and context
12-15 months	Understands single words in context, eg cup, milk, daddy. Understands more words than they can say Understands simple instructions, eg 'kiss mummy', 'give to daddy', 'stop'
15-18 months	Understands a wide range of single words and some two-word phrases, eg 'give me', 'shoe on' Recognises and points to objects and pictures in books if asked. Gives named familiar objects to adult, eg coat, car, apple, book
18 months-2 years	Understanding of single words develops rapidly during this stage: anything between 200 and 500 words are known Understands more simple instructions, eg 'Get mummy's shoes', 'Get your bricks', 'Tell daddy tea's ready'
2 - 3 years	Developing understanding of simple concepts including in/on/under, big/little Understands phrases like 'put teddy in the box', 'get your book, coat and bag', 'draw a big brown dog' Understands simple 'who' and 'what' and 'where' questions but not 'why' Understands a simple story when supported with pictures
3 - 4 years	Understands questions or instructions with two parts: 'get your jumper' and 'stand by the door.' Aware of time in relation to past, present and future, eg Today is sunny, yesterday was rainy. I wonder what the weather will be like tomorrow. (towards four years)
4 – 5 years	Able to follow simple story without pictures. Understands instructions containing sequencing words; 'first... after... last' Understands adjectives: soft, hard, smooth, etc. Is aware of more complex humour, laughs at jokes that are told.

3. Understanding Language (receptive language)



Asking questions - When asking a child questions it is important to choose the right kind of questions for each child, ie questions that match the child's developmental level of understanding.

Age	Developmental stage of understanding
2 years	Questions about the here and now or yes and no - What's this? What's the doing? Is that a ...?
3 years	Questions that require descriptive vocabulary and some thinking - What's happening in this picture? Where's the ...? What are ... for? What colour/shape is this?
4 - 5 years	Questions that require them to evaluate ideas, rethink the situation and take into account things that are not directly visible - What do you think will happen next? How do you think she feels? What is not food in the picture? What is a ...?
5+ years	Questions that require thinking beyond the immediate situation that need understanding of the future/past and that need the child to interpret events and provide explanations - What will happen if she does not ...? Why do you think she did that? How can she do that? When do we ...?

(Adapted from Bank, Rose & Berlin 1978)

3. Understanding Language (receptive language)



Possible indicators of receptive language difficulties

In the classroom children with receptive language difficulties may –

- Quickly forget new words.
- Have difficulty with question words especially when / why / how?
- Become confused when given instructions.
- Rely on non-verbal cues to aid their understanding eg they will watch/copy others in the class.
- Be slow to learn the classroom routine.
- Often carry out instructions incorrectly or do not respond at all.
- Need instructions repeated or simplified.
- Be withdrawn or disruptive, depending on which coping strategy they have adopted.
- Have difficulty learning new vocabulary and concepts, particularly with abstract language eg before/after.
- Often repeat what has been said to them.
- Give irrelevant/inappropriate answers to questions.
- Talk constantly to mask their difficulty.
- Find it difficult to concentrate as they are not understanding all that is going on around them eg poor attention at story time.
- Have poorly developed interactive and imaginative play.
- Have difficulty understanding non verbal language.
- Take things too literally.



Make sure you have the children's full attention before giving instructions.

3. Understanding Language (receptive language)



Strategies to support the development of receptive language

Group/Individual Activities -

- Ensure you have the child's attention – say their name and look directly at them as you speak (see sensory and / or motor difficulties).
- Keep your language simple and use gestures to support the child.
- Use open ended questions - rephrase if necessary (Fig 4).
- Allow the pupil thinking time to process information and put together a response.
- Use non verbal communication including hand gestures and facial expressions and pay attention to the pupil's use of it.
- Check that the pupil is listening (praise good listening).
- Keep sentences short - repeat and rephrase if the pupil appears confused.
- Check for understanding at regular intervals, encourage the child to tell you if they don't understand.
- Simplify instructions, make them shorter eg 'Coats on' (pause) 'Line up' (pause) then 'Out to play'.
- Make the order of mention in instructions the same as the order of action eg 'Finish your juice then go out to play.' **not** 'go out to play when you have finished your juice.'
- Repeat and reinforce new ideas and information.
- Demonstrate new activities.
- Encourage the children to talk about a story they have heard.
- Avoid using idiomatic or figurative speech, eg say 'Wait' rather than 'hang on'.
- Directly teach idiomatic language and explain what it means (Fig 3).
- Teach concepts such as big and small (Fig 2).
- Use topic bags /boxes to introduce new topic vocabulary (Fig 1).



Praise good listening.

3. Understanding Language (receptive language)



Parent Support

Strategies to support the development of receptive language

- Ensure you have your child's attention before speaking to them.
- Turn off the television but warn first that you are going to be turning it off to avoid upset.
- Try to sit on the same level as your child to speak to them.
- Introduce new words in natural settings, eg in the kitchen 'Can you get me the wooden spoon?' (point) 'Yes - that's what I use to stir the soup' (demonstrate).
- Sing to your child, say nursery rhymes and tell them stories.
- Read picture books to your child and discuss the pictures.
- Talk to them about the stories at intervals as you read them.
- Watch television with your child and discuss what is happening.

Activities to support the development of receptive language

Play -

- 'Simon says'
- 'Treasure hunt'— a toy is hidden and the child is given instructions he must follow to find it.
- Lotto games - played like bingo but with pictures.

(See www.enchantedlearning.com for free printable lotto games)



Sit on the same level as the child to speak to them.

3. Understanding language (receptive language)



Resources and strategies to support the development of understanding language (receptive language).



Fig 1 Use surprise bags and topic sacks to introduce new vocabulary.

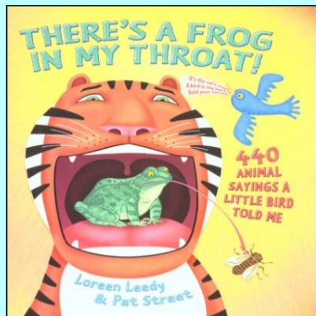


Fig 3 Have fun with idioms, let the children illustrate them.

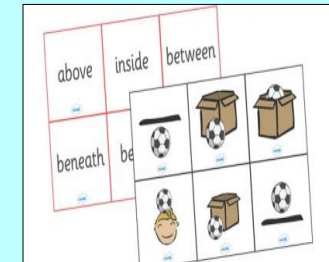
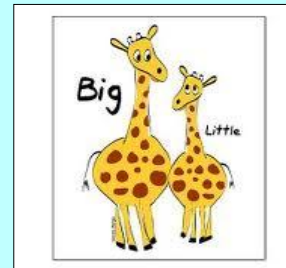


Fig 2 Teach concepts eg first, next, last.

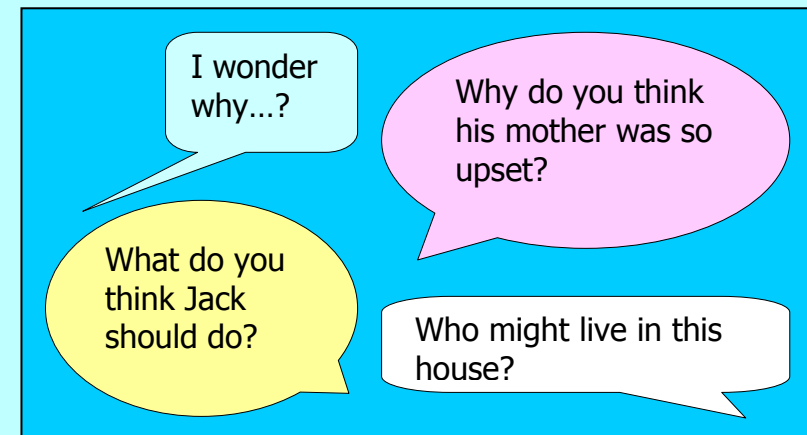


Fig 4 Ask open ended questions.

4. Use of Language (expressive language)



What is it?

Expressive language refers to everything we do with spoken words, **what we say and how we say it**. Good vocabulary development is essential to a child's communication and learning. Children should have opportunities to use language in a variety of ways and for a range of audiences through play and social interactions.

Expressive language includes

- Vocabulary
- Grammar
- Narrative
- Social use of language
- Speech sounds



4. Use of Language (expressive language)



Developmental stages

Age	Key Skills
3 ½ years	Can control own attention and sustain this for play or listening. Can understand questions that do not relate to here and now, eg 'what did you eat at play school?' Can respond to commands that include established concepts such as size, colour and position eg 'Give me the big teddy.' Understands sequence of events eg 'what happened next in the story?' Can name a few colours. Make believe play with toys is quite elaborate and accompanied by verbal commentary. Grammar is becoming more adult, eg use of plurals and tenses, but grammatical immaturities are still evident. Speech is understood by strangers but many speech immaturities remain.
4 years	Speech is creative and is now an effective means of communication. Can carry out three step instructions. Understands more colour position and size words. Is beginning to enjoy elaborate make believe play, eg dressing up, role play. Enjoys playing with friends and understands sharing and taking turns. Can tell long stories, relate events and describe pictures quite accurately. Some grammatical immaturities are noticeable. Some sound immaturities still present but speech should be largely intelligible.
4 -5 years	Is able to understand spoken instructions related to an activity without stopping what he is doing to look at the speaker. Can choose own friends and playmates. Take turns in longer conversations. Understands more complicated language, first, last, might, maybe, above, in between. Uses sentences that are well formed though he still may have some problems with plurals and tenses eg 'sheeps' and 'goed'. Thinks more about the meaning of words - asks what new words mean. Uses most sounds effectively - may have some difficulty with words with a lot of syllables or consonant sounds together eg scribble or elephant

For full chart see document '**Healthy child, healthy future. Speech and language therapy for children**'
Public Health Agency www.publichealth.hscni.net

4. Use of Language (expressive language)



Possible indicators of expressive language difficulties

In the classroom children with expressive language difficulties may -

- Not speak at all or only in certain situations.
- Have limited vocabulary.
- Use very short sentences eg 'Go to toilet'.
- Keep repeating the start of a sentence.
- Provide very vague descriptions or inappropriate answers to questions.
- Have difficulty sequencing information and retelling news in the right order.
- Use non-specific words such as 'thingy' used.
- Pause often and use fillers such as "er /um" (word finding difficulty).
- Use a lot of pointing or mime like gestures.
- Physically take you to what they need or want.
- Rely on other children to speak for them.
- Become confused and frustrated trying to communicate.



Some children enjoy communicating through puppets.

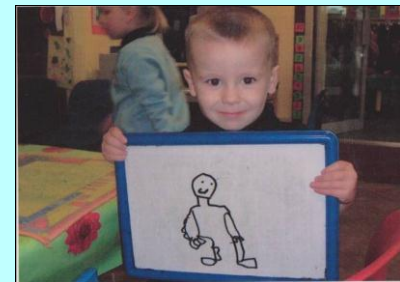
4. Use of Language (expressive language)



Strategies to support the development of expressive language

Group/Individual Activities -

- Stop Observe Respond (See page 64).
- Give the child your full attention when they are speaking.
- Be patient sit back and do not try to rush the child when they are speaking.
- Choose areas of vocabulary or concepts you think will be used by the child and teach some of these.
- Try to link to previous topics or words the child already knows.
- Use a range of stories, rhymes and songs with children to help build up a varied collection of words they can use and understand.
- Use 'who' 'what' 'where' 'when' 'why' questions during story telling.
- Use open ended questions.
- Prompt in a logical manner.
- Ask a question, but give a choice of possible answers.
- Encourage all attempts to speak and expand on what the child is trying to say.
- Use 'think, pair, share' strategy when asking questions, allowing the children to share their thoughts with their partner before speaking out to the teacher (Fig 4).
- If the child cannot find a word when speaking – ask, 'What do we do with it?' 'Can you think of a word like it?' 'Show me with your hands.'
- Model correct use of language and extend it by adding one or two words.
If the child says, 'I runned fast', say, 'Yes you *ran* very fast'.
- Ask the children to retell a familiar story or events using picture cues (Fig 2).
- Use drama to help children retell a story (Fig 1).



Encourage children to talk about pictures they have drawn.

4. Use of Language (expressive language)



Parent Support

Strategies to support the development of expressive language

- Allow the child time to speak - do not be tempted to finish their sentences.
- Teach new words in a natural environment such as the supermarket, park, and zoo (Fig 3).
- Discuss picture books; prompt the child's language with questions, 'Why do you think he is wearing a scarf?'
- Sing songs and say rhymes – it allows children to practise grammar and vocabulary.
- Have fun with sound words - eg how many water words can we say? - plop, drip, splash.
- Correct grammatical errors by repeating it back correctly, eg 'I eated my dinner' - 'Yes you *ate* your dinner'.
- Use comments instead of questions to avoid putting the child under pressure to answer.

Activities to support the development of expressive language

Play –

- 'Odd man out' i.e. which of one of these things is different from the other two? - car, bus, apple.
- Word matching games eg salt and ----- / bread and - -----.
- 'How many can we name?' – encourage the child to name as many items in a given category as possible eg animals.
- Talking on the telephone.



Play with telephones to make talking fun.

4. Use of language (expressive language)



Resources and strategies to support the development of use of language (expressive language).



Fig 1 Use drama to help children narrate a story or series of events.



Fig 3 Use everyday situations as opportunities to develop language.



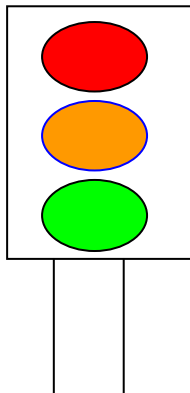
Fig 2 After reading, get the children to sequence the events of the story.



Fig 4 'Think pair share' strategy gives children time to formulate answers.

4. Use of Language (expressive language)

TIPS FOR DEVELOPING EARLY LANGUAGE



STOP

OBSERVE

RESPOND

- Explain
- Repeat
- Expand



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The best way to help your child develop language is by playing with him.

Make sure you are at the same level as your child eg both sitting on the floor.

STOP

Let the child lead the play and choose what he would like to do. He is more likely to talk about it if it is something he has chosen.

OBSERVE

Watch what your child does – this will help you to respond better.

RESPOND

Model language for your child by

Explaining. Use short sentences (2-3 words) to talk about what he is doing

Repeating. Repeat what he says in a correct sentence form

Expanding. Add 1 or 2 words to what the child says eg child says "car" adult says "a big car"

Avoid asking too many questions or saying "What is this?" Your question may not relate to his thoughts.

Talking about what he is doing is more effective than asking questions.

5. Social Use of Language (pragmatics)



What is it?

Pragmatics refers to the rules governing our use of language for social interaction. It involves knowing what, when and how to say something in a social situation. To do this successfully a range of skills are needed such as –

- Looking at a person and making appropriate eye contact
- Responding appropriately to what is being said
- Initiating a conversation with peers and adults
- Expressing feelings and opinions
- Taking turns at speaking
- Listening and showing interest in what others are saying by using head nods and interjections
- Responding appropriately to questions



Indicators

Children with pragmatic difficulties have specific problems with the effective use of language as a tool to communicate. They have problems understanding the meaning of what other people say, and they do not understand how to use language appropriately themselves. They find it difficult to express themselves, take turn in conversations and resolve arguments. The normal non verbal interaction that takes place in conversations such as eye contact and or facial expressions is often not understood.



5. Social Use of Language (pragmatics)



Developmental stages of pragmatic skills

Age	Developmental stage
0 to 9 months	Child acts without intention but adults interpret the interaction and treat it as having meaning.
1 years to 18 months	Child starts using actions and early vocalisation with the intention of communicating. Brings objects to show an adult. Requests action or assistance using gestures (many may give back wind-up toy for activation). Uses a few other conventional ritual words such as 'bye / hi / thank you and please' or a close approximation. Protests by saying 'no', shaking head, moving away, frowning, or pushing object away. Acknowledges the speech of another person by giving eye contact, vocally responding or repeating words said.
18 months to 3 years	Uses single words or short phrases to express their needs or intentions. Names objects in front of others. Says, 'what's that?' to get attention. Begins using single words and two word phrases to command ('go' / 'go home'), indicate possession ('mine' / 'it's mine'), express problems ('sore' / 'hand sore'). Is now aware of verbal turn-taking.
3 to 5 years	Speech is used with increasing complexity. Engages in longer dialogue. Uses fillers to acknowledge partners message, 'uh -huh / ok'. Varies language according to situation. Uses language to fantasise, joke and tease. Rephrases when the listener does not understand.

5. Social Use of Language (pragmatics)

Pragmatics involves three major communication skills

1. Using language for different purposes ie

- Greeting: (hello / goodbye)
- Informing: (I'm going to put this in the library)
- Demanding: (Give me that book)
- Promising: (I am going to read my book)
- Requesting: (I would like to get a book please)

2. Changing language according to the situation ie

- Talking differently to a baby than to an adult
- Giving background information to an unfamiliar listener
- Speaking differently in a classroom from in the playground

3. Following rules for conversations and storytelling ie

- Introducing topics of conversation
- Taking turns in conversation
- Staying on topic
- Switching topic when appropriate
- Rephrasing when misunderstood
- Using / understanding verbal and nonverbal signals
- How to use facial expressions and appropriate eye contact
- Body awareness - keeping an appropriate distance from the other speaker



5. Social Use of Language (pragmatics)



Possible indicators of pragmatic difficulties

- At times appears not to hear.
- Inappropriate or no eye contact.
- Invades other people's body space when speaking to them.
- May walk away in the middle of a conversation.
- Repeats memorised phrases inappropriately.
- Is unable to open or close a conversation.
- Is unaware of turn taking in a conversation.
- May not respond to non verbal cues which indicate the other person wishes to speak.
- Cannot rephrase when the listener does not understand.
- Has difficulty inferring information from facial expression or gestures.
- Has difficulty altering the volume or form of language to fit the situation or listener.
- Has difficulty staying on the topic of discussion.
- Unable to provide the correct level of information for the listener, too little and confuses them or too much and bores them.
- Tells stories in a rambling disorganised way.
- Finds it difficult to link previous knowledge with new.
- Has difficulty appreciating the needs and feelings of others.
- Says inappropriate or unrelated things during conversation.
- Has difficulty with abstract language and may take things literally 'it's raining cats and dogs'.
- May be unpopular with other pupils.



5. Social Use of language (pragmatics)



Strategies to support the development of the social use of language

Group/Individual Activities -

- Understand that the child may not be intentionally bold or rude if they say something inappropriate.
- Encourage communication – make the child feel that their contribution is valued.
- Encourage turn taking in communication – giving and receiving information.
- Encourage children to look at you or in your direction when they are telling you something and when you are speaking to them (remember a child with autism may feel uncomfortable doing this).
- Develop the children's attention and listening skills. (See 'Attention and Listening' section).
- Provide opportunities for social play, eg house corner, hospital, café etc (Fig 3).
- Ask children to complete tasks *with a partner* to promote opportunities to converse, eg tidy the house corner.
- Play games that promote turn taking.
- Practise turn taking, initially one to one eg card games such as 'snap', barrier games and games such as 'Guess who?'
- Use circle time to promote turn taking.
- Use direct literal language, avoid idioms where possible eg do not say 'This pen is a dead loss' say 'this pen is not working'.
- Specifically teach idioms to help the child understand abstract language (Fig 3).
- Teach the child the vocabulary of feelings eg match the word to the facial expression (Fig 4).
- Use pictorial images and drama to illustrate body language, moods and emotions.
- Model appropriate conversational rules and correct social responses.
- Discuss / dramatise social situations to aid understanding.
- Try to reduce anxiety where possible.
- Tell children in advance, when there are going to be any changes in classroom routines.
- Role play difficult situations, such as how to join in a game in the playground.



Play Chinese Whispers.

5. Social Use of language (pragmatics)



Parent Support

Strategies to support the development of the social use of language

- Try to remember the child is not being *deliberately* bold or awkward.
- Play 'peek a boo' with younger children to get eye contact.
- When speaking to your child get down to their level when ever possible.
- Encourage your child to look at you when they are speaking to *you* and when you are speaking to *them*.
- Use direct 'literal' language when possible and check that they understand.
- Take advantage of day to day happenings to teach social skills ie reminding them to say hello, good bye thank you etc at appropriate times.
- Praise your child when you catch them using appropriate communication.
- Role play with your child to model how to react in social situations eg Lets ask the waiter to bring us some ice cream, lets sit nicely and say 'Excuse me, may I have some ice cream please? '
- Relate role play where possible to real life situations.
- Play with dolls houses farms shops etc to talk about home and life situations.

Use dolls' houses to talk about home and life situations.



5. Social Use of Language (pragmatics)



Resources and strategies to support the development of the social use of language (pragmatics).

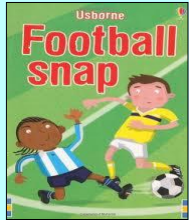


Fig 1 Play games that encourage turn taking.

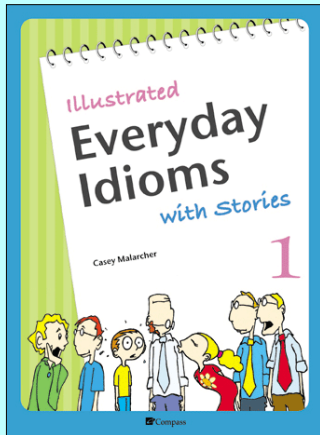


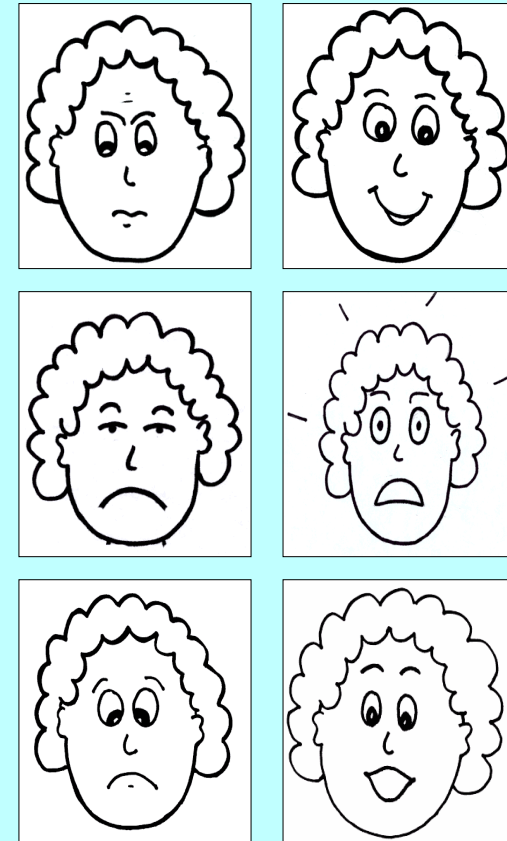
Fig 3 Have fun with idioms.



Fig 2 Social play in the hospital.



Fig 4 Teach facial expressions. It is very important that children can read these.



6. Using Clear Speech



What is it?

Speech refers to the processes involved in producing the sounds that make up language.

These processes include the ability to –

- **Produce voice (sound)**
- **Articulate sounds (physically move the lips and tongue accurately)**
- **Select and organise sounds to make meaningful words**
- **Co-ordinate the movements of all the organs involved (lungs , nose, lips, tongue)**



Many children in the early years have difficulty pronouncing speech sounds clearly. This can range from a child having problems with one or two sounds, to a very severe difficulty where the child cannot say many sounds and their speech cannot be understood.

The majority of children with speech difficulties do not have a problem with the physical movements required to make sounds. Speech errors occur because sounds are not stored accurately. This means that the vast majority of children with speech difficulties lack the ability to select sounds accurately and organise their sound system efficiently.

A hearing loss may have an effect on the child's acquisition of clear speech. The sounds of speech may not be heard clearly and are therefore reproduced incorrectly. This has implications for the child's learning of phonics.

6. Using Clear Speech



Stages of speech sound development:

(Adapted from - Healthy Child Healthy Future 2011)

Age	Sounds
6 -12 months	Babble (varied consonant and vowels)
1-2 years	p, b, t, d, m, n, w, - as in Mama, bye, tata
3 years	h - as in home; ng - as in sung
3 years 6 months	s, f - as in sun, four, phone
4 years	c, k - as in cat, bake; g - as in goose, pig; l - as in look, lady
4 years 6 months	Double consonants are being used. In English these are double consonants with l eg bl - as in blue; pl - as in plate; fl - as in fly; cl / kl - as in cloud; gl -as in glass Also double consonants with s eg sp - as in spoon; st - as in star; sk - as in skip; sl - as in slip; sm - as in smoke; sn - as in snap; sw -as in sweet Final clusters eg mp -as in stamp y - as in yes
5 years	sh - as in shop; push, ch - as in witch; chip, j - as in jug; m - as in measure; Many children outgrow a lisp in their fifth year
5 years 6 months	v -as in van; z -as in zip
7 years	r - as in rabbit, parrot; th - as in thumb, birthday

6. Using Clear Speech



Possible indicators of speech difficulties

The child may –

- Articulate speech sounds incorrectly after normal developmental stages.
- Be unintelligible to unfamiliar listeners.
- Use a lot of hand gestures to try and make themselves understood.
- Become easily frustrated when trying to speak.
- Have occasional emotional outbursts.
- Display challenging behaviour due to frustration.
- Be quiet and withdrawn and reluctant to speak.
- Lack confidence.
- Rely on peers to speak for him / her.



Chatting in the house corner.



Strategies to support the development of clear speech

- Have a policy on the use of dummies.
- Get the child's attention before speaking to them.
- Get down to their level so that they can see and hear you speak (Fig 1).
- Speak slowly and clearly but do not use exaggerated mouth movements.
- Give the child time to respond.
- Don't pretend to understand the child.
- Reassure the child by acknowledging that talking can be difficult.
- Be positive about their speech - encourage the child to contribute.
- Listen to what the child says not how they have said it.
- Model clear speech – repeat what the child has said with an emphasis on the key sound.

I think you are trying to say something hard and I'm not sure what it is. Maybe we can find out later.

Child: 'That's my tock'

Adult: 'Yes, that's your sock'

- Ensure the child has opportunities to speak to you during quieter times when you can give them your full attention.
- Get to know specific vocabulary the child is likely to use eg pets / siblings, so that you can chat to them about something you will have a good chance of understanding.
- Use a home school diary so that parents can tell you about events that the child is likely to talk about and you can let them know what is happening in school (Fig 2).
- Encourage the child to use gestures, point or show you things to get their message across (Fig 3).

Encourage the child to speak to you during quieter moments.



6. Using Clear Speech



Parent support

Strategies to support the development of clear speech

- Have your child's hearing checked.
- Avoid the use of dummies.
- Have some special 'talk time' set aside every day.
- Have fun with nursery rhymes especially those with actions.
- Make sure you have your child's attention and are looking at them when you are talking together.
- Try to sit at their level and communicate face to face.
- Give the child your full attention when they initiate a conversation.
- Encourage your child to use pointing and gestures to help them communicate while they are speaking.
- Listen carefully and give your child time to finish – do not interrupt to correct speech sounds.
- If your child says something incorrectly, repeat it the correct way eg 'Gog bit it.' - 'Yes the dog bit it.'
- Play sucking and blowing games to help build the muscles used for speech (Fig 4).
- Sing songs and say rhymes, leaving words out for the child to fill in.
- Join in imaginative play such as making tea, playing shop etc, and encourage lots of talk (Fig 5).

Fun activities will encourage a child to speak.



6. Using Clear Speech



Resources and strategies to support the development of clear speech



Fig 1 Try to sit on the same level as the child when you speak to them.



Fig 4 Blowing and sucking games can help develop the muscles used for speech.



Fig 2 Keep a home school diary to record events the child may talk about.



Fig 3 Encourage the child to use gestures to communicate.



Fig 5 Imaginative play can give a child the confidence to speak.



7. Phonological Awareness



What is it?

Phonological awareness is the ability to identify and manipulate individual units of sound (phonemes) in words without reference to meaning. Research suggests that regular systematic activities to promote phonological awareness, at a young age, will later enhance reading and spelling skills. Phonological awareness develops along a continuum and there is no single method of teaching these skills effectively. Much of the development of phonological awareness may be done through fun activities in groups, modeled and shared sessions, play activities etc. (See enclosed Copycat CD)

Phonological awareness is increased through oral activities. It includes –

- **Attention and listening**
- **Responding to a steady beat**
- **Developing auditory processing skills**
- **Developing visual processing skills**
- **Developing the elements of phonological awareness**
- **Hearing sounds in words**
- **Sound symbol correspondence and alphabet knowledge**

(NI Curriculum 'Language and Literacy in the Foundation Stage. Phonological Awareness)





Possible indicators of difficulties with phonological awareness

The child may -

- Have poor speech and production of sounds.
- Show little interest saying nursery rhymes or playing sound games.
- Be unable to hear the beginning or end sound of words.
- Be unable to hear rhyme or alliteration in groups of words.
- Be unable to pick the odd man out from a group of words such as cat, man, bat.
- Find it difficult clapping out the syllables in words.
- Be unable to segment the sounds in a word spoken.
- Be unable to blend two or three sounds heard to say the word.
- Be unable to tell what new word can be made if a sound is deleted or substituted.
- Find it difficult to repeat nonsense words correctly.
- Not know the difference between a sound, a word or a sentence.
- Be unable to link sounds to words.
- Find it difficult to say nursery rhymes.



7. Phonological Awareness



Strategies to support the development of phonological awareness

- Minimise visual and auditory distractions where possible.
- Play games where the children listen for and distinguish sounds they can hear around them.
- Teach traditional nursery rhymes.
- Get children to march and clap to the beat of rhymes and songs eg 'The grand old Duke of York'.
- Say rhymes and omit the rhyming word for the children to say, or change the word and the children must spot the mistake.
- Reinvent nursery rhymes with the children's help – Hickory dickory *dare* the mouse ran up the *chair*.
- Play rhyming riddles eg 'I know a word that sounds like *cat*, you wear it on your head and the word is?'
- Colour the picture that rhymes with *cat* or choose from a selection of pictures.
- Give me the picture that rhymes with *cat* from a selection of pictures (Fig 2).
- Tell me a word that rhymes with moon – *see* how far around the room you can get before someone is stuck for a word.
- Play games using alliteration eg 'I went shopping and bought a *ball*': – the child then gives a word with same initial sound.
- Have fun with tongue twisters – try to make up new ones.
- Ask the children – do *cat* and *cow* begin with the same sound?
- Circle the pictures that begin with *t* or ends with *t*.

Clapping out syllables in words.





Strategies to support the development of phonological awareness

- Tell me a word that begins with – (say the sound).
- Initial and final sounds - say a word and ask, 'What sound can you hear at start / end?'
- Segmenting sounds - stretch out short words and listen for the sounds – record the sounds as the children hear them.
- Blending sounds - 'I'm going to say some sounds – what word can you hear?' (do not say the sounds too slowly).
- Deleting sounds - delete sounds in words to generate new words, 'Say cat without the 'c'.
- Substituting sounds - change the 'c' in cat to 'h' what word do you get?
- Listen for syllables - clap the syllables in the children's names, pictures of objects / increasingly longer spoken words (Fig 1).
- Syllable boxes – the child has to choose a toy, say its name and then place the toy in the box with the correct number of syllables on the front.
- Develop phonological memory by asking the children to repeat words of increasing length.
- Ensure children can use language to talk about language, i.e. sound, word, sentence.
- Teach sound letter links using multisensory techniques (Fig 3).
- Encourage exploratory writing.
- Introduce letter formation using multisensory techniques.

Have a writing table with a range of writing tools and materials that the children can experiment with.



7. Phonological Awareness



Parent support

Strategies to support the development of phonological awareness

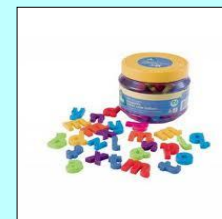
- Support the phonological awareness activities that your child is doing in school.
- Say nursery rhymes and sing songs with your child.
- Clap, march and dance to the rhythm of songs and rhymes.
- Read books together that use rhyme.
- Make up silly sentences using words that begin with the same sound 'Many mice make milkshakes.'
- Say the sounds in a short word (not too slow) and ask the child what the word is - take turns at doing this.
- Have fun clapping out the syllables in everyday words and people's names.
- Sort pictures into piles according to the number of syllables in them.
- Read books with letters and pictures to your child.
- Encourage your child to retell favourite stories to you.
- Put magnetic letters on the fridge and have fun making words.

Activities to support the development of phonological awareness

Play

- 'Change the Rhyme' When they know hickory dickory dock say hichory dickory *dare* and ask the child where the mice might have run (The words must rhyme with dare).
- 'Willoughby Wallaby' -
Willoughby wallaby woo, an elephant sat on -
(you, a shoe).
Willoughby wallaby wee, an elephant sat on -
(me, a tree) etc.
- 'Rhyming Tennis,' taking turns to say a word that rhymes (allow nonsense words initially).
- 'Odd Man Out', ask the child which word does not rhyme eg pot pan hot.
- 'I spy', using the initial *sound* of the word.
- 'I went shopping', where each item bought must start with the same sound.

Use magnetic letters to make words on the fridge.



7. Phonological Awareness



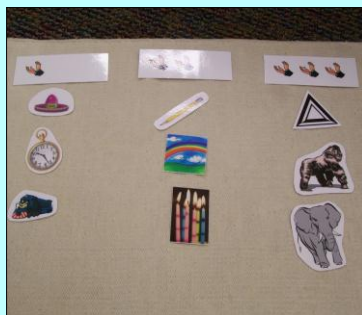
Resources and strategies to support the development of phonological awareness



Have fun clapping out the syllables in names and words.



Chin Bumps - Say the word and count the syllables by feeling the chin go down.



Sort words by the number of syllables you can clap.

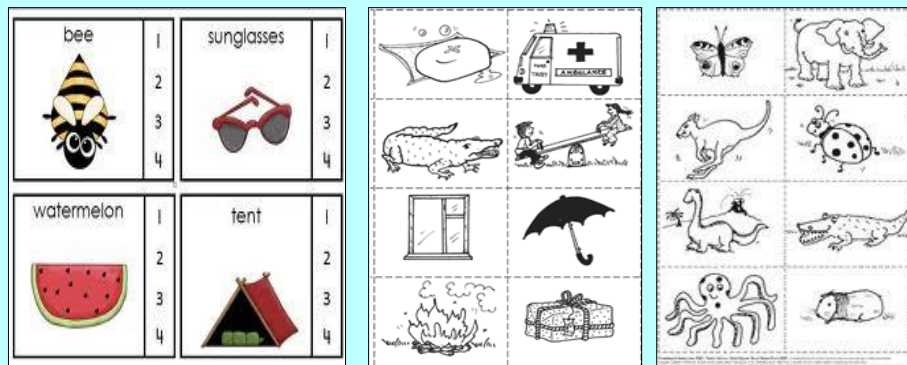


Fig 1 Count and write the number of syllables in words.

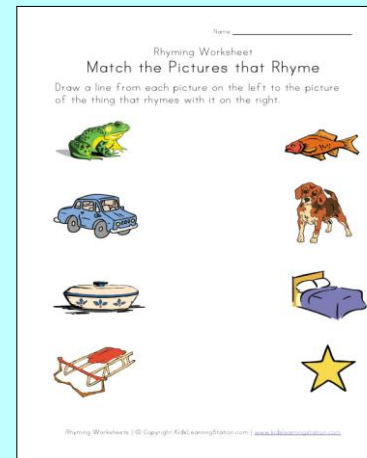


Fig 2 Match the words that rhyme.



Fig 3 Use wooden and magnetic letters to build simple words.

Websites, Resources and Publications



Websites for Information

www.nicurriculum.org.uk/inclusion 'Language and literacy in the foundation stage'
www.nationalstrategies.standards.dcsf.gov.uk Inclusion Development Programme 'Supporting children with speech language and communication needs'
www.wendyrinaldi.com Social use of language for infants (4 -7yrs)
www.publichealth.hscni.net 'Healthy child, healthy future. Speech and language therapy for children. Information and referral guidance.' This publication is available to download.
(HSC Public Health Agency 2011)
www.education-support.org.uk/ids Inclusion and diversity website
www.talkingpoint.org.uk 'Tips for talking' (Parent fact sheets)
www.ican.org.uk Provides information about children's speech and language difficulties
www.wiltshire.gov.uk/foundationstageindicatorsspeechandlanguage Indicators and strategies checklist
www.readingrockets.org A range of materials to support Literacy
www.education-support.org.uk/ids For information and advice on Inclusion and Diversity.



Publications for Further Reading

'Communication and Education Together' (COMET, BELB BHSCT)

'Helping young people to listen'

Ros Bayley and Lynn Broadbent, Lawrence educational publications.

'Including Children with Speech and Language Delay in the Foundation Stage'

Anderinola Hotonu, Antonia Aldous, Randel Schaffer, Dryer, A and C Black publishers.

'Spoken Language Difficulties: Practical Strategies and Activities for Teachers and Other Professionals'

Lynn Stuart, Felicity Wright Sue Grigor, Alison Howey: David Fulton Publishers.

'Talk about' A Social Communication Skills Package. Alex Kelly, Speech Mark Publishing Ltd.

'Eolas Fóineolaíoch' BELB Phonological Awareness for Irish Medium schools 2009

'Helping Young Children with Phonological Awareness' Ros Bayley and Lynn Broadbent, Lawrence Educational Publications.

'Sounds Around – Developing Phonological Awareness skills in the Foundation stage.'
Andrew Burnett and Jackie Wylie, David Fulton Publishers.



Resources and Equipment

www.kidslikeme.co.uk Provides nursery equipment to promote Culture and Diversity

www.blacksheepress.co.uk Provides excellent resources to promote all aspects of speech and language



Syllables



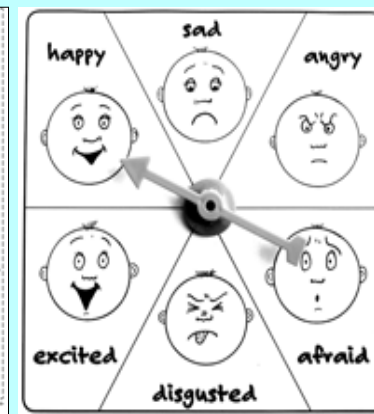
Narrative



Prepositions



Emotions

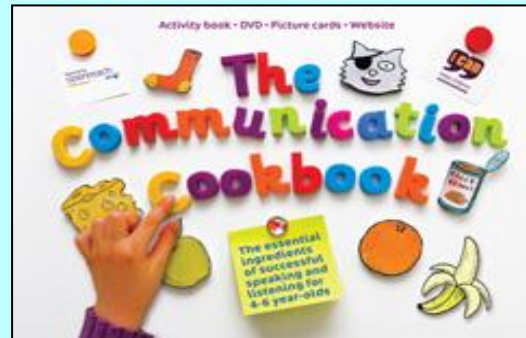
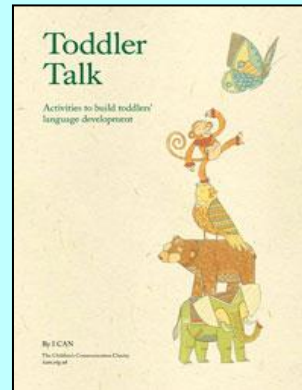
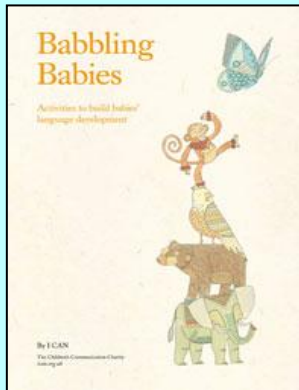


Websites, Resources and Publications



Publications

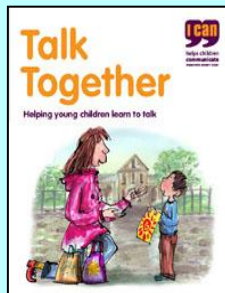
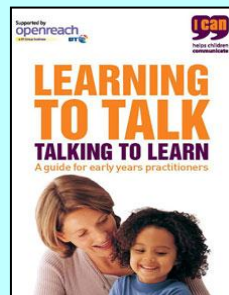
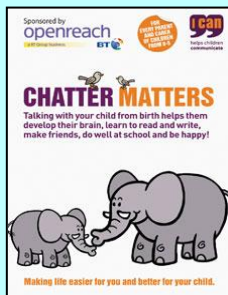
www.ican.org.uk Provides a range of books and charts on children's speech and language development and downloadable fact sheets on classroom strategies.



Provides lots of activities to support speech and language.



Games for 2/3 year olds that promote speech and language.



Age	Communication and interaction	Understanding	Speech sounds and words	Grammar
0 - 3 months	Responds to sounds and voices	Recognises sounds and voices	Produces sounds	
3 - 6 months	Responds to sounds and voices	Recognises sounds and voices	Produces sounds	
6 - 12 months	Responds to sounds and voices	Recognises sounds and voices	Produces sounds	
12 - 18 months	Responds to sounds and voices	Recognises sounds and voices	Produces sounds	
18 months - 2 years	Responds to sounds and voices	Recognises sounds and voices	Produces sounds	
2 - 3 years	Responds to sounds and voices	Recognises sounds and voices	Produces sounds	
3 - 4 years	Responds to sounds and voices	Recognises sounds and voices	Produces sounds	
4 - 5 years	Responds to sounds and voices	Recognises sounds and voices	Produces sounds	



Speech and Language development charts.

Speech, Language and Communication

Personal notes and contacts

Sensory and Motor Development

Contents of this section



What is it?

Areas of sensory and motor development



What is it?



Indicators



Strategies for each of the following

1. Sensory sensitive

2. Sensory seeking

3. Postural control

4. Body awareness

5. Balance and coordination

6. Motor planning and sequencing

7. Organisational skills

8. Visual motor skills

9. Visual perception

10. Gross motor skills

11. Fine motor skills



Gross and fine motor skills developmental stages



Resources



Websites, resources and publications



What is it?

Sensory development is the process by which we take in, organise and interpret sensory information.

Motor development refers to our motor response to this information eg touching something hot and taking your hand away quickly. Our sensory and motor systems are both **interrelated** and **interdependent** of each other.

Sensory processing is how we receive and perceive sensory input through sights, sounds, touch, tastes, smells and movement. At each moment of the day we take in sensory information from the environment and from our bodies. Our sensory system then filters this information and decisions are made regarding its importance and how we need to respond. Everything we do involves using one or more of our senses and it is through these senses that we discover the world around us.

Some children may be oversensitive to the sensory input (**sensory sensitive**) and others may be under sensitive and require more sensory input (**sensory seeking**). When the sensory system is not functioning as it should, it may manifest as poor behaviour and/or poor motor coordination. This can be a barrier to learning.

Movement is, therefore, a sensory motor experience. We feel it (sensory), we move (motor), and we learn to control it. Through movement, babies begin to explore their world and gain a sense of space and their own position in it. They begin by co-ordinating their eye and body movements and go on to develop an awareness of their own body eg seeing a small toy beside a chair and reaching out to grab it, without knocking into the chair.

The development of all our body skills is strongly linked. In this section we look at areas where there may be delays/difficulties with sensory and motor development. Strategies and activities to support such children are outlined.

These areas include:

Sensory sensitive
Body awareness
Organisational skills
Gross motor skills

Sensory seeking
Balance and co-ordination
Visual motor skill
Fine motor skills

Postural control
Motor planning and sequencing
Visual perception



1. Sensory Sensitive



What is it?

Sensory sensitive is when some children's sensory systems require very little stimulation. They may interpret otherwise harmless input as painful or very unpleasant. These children can react negatively to noise, touch, movement and visual input.



Indicators that children may be sensory sensitive

- Present with behaviour that can sometimes be difficult to explain and may fluctuate from day to day.
- May avoid movement experiences.
- May dislike playing in the sand or water or avoid touch/messy play.
- May hit out when touched unexpectedly.
- May cover their ears to noise.
- May have poor attention as they struggle to ignore the sensory input in order to concentrate on something else.
- May find it very difficult to process instructions/information given, as they are so focused on other stimuli.
- May manage, mostly, to cope with the demands of the day by discovering calming activities of their own eg flapping hands, however, may suddenly snap and have outbursts or shut down and appear to be in a world of their own.
- May overreact to minor cuts and scrapes.
- May refuse to dress up in clothes that are stiff, new or have rough textures, tight collars and/or labels can be a problem.





Strategies and activities for children with sensory sensitivity

Environmental Adjustments -

- Be aware of the volume of noise and the amount of sunshine in a room.
- Be aware of the type and amount of stimulation in the room. Dim lighting and plain walls are calming.
- Have the child sit near an adult to facilitate their ability to attend to directions and tasks.
- Keep visual distractions such as art displays, bulletin boards or hanging projects and auditory distractions to a minimum to help facilitate the child's attention to instructions.
- Provide toys that give fun ways to experience necessary tactile input eg beans, rice. Put little toys in as well to encourage exploration.
- Provide play tents as a safe haven for resting and quiet activities, (Fig 5).
- When children are entering a room, possibly after play time outside, have them settled before you turn the lights on.
- Seat away from the window and facing into the room.

Group/Individual Activities -

- Prepare the child before unpleasant sensory experiences eg messy games, loud noises or touch. Try using a daily schedule to 'ready' them for the experience eg using ear muffs when listening to music, on the computer allow the use of headphones to reduce stimulation, (Fig 3), 'get away spaces' in the room, a city side (noisy) and country side (quiet) to the room. To avoid bright sunlight move the child away from a window.
- Create a '**sensory break time**'. This can be done in a group or on an individual basis. Try some calming exercises eg playing with Blue Tack, pushing hands together, stretching out arms and legs, chewy foods at break time. Calming foods tend to be chewy or warm, ice cream or cold drinks may cause difficulties.
- Have '**sensory boxes**', (Fig 2 and 3), in the room with a variety of toys that provide heavy types of sensory input eg balloons filled with flour, squeeze balls, blue tac, strong elastic bands.
- Let a child decide on the strategies to use and help them to make different choices if one doesn't appear to be working.
- Avoid a light touch as this can be alerting, (think of having the soles of your feet touched with a feather!) deep touch or a firm grip is calming. Chewing foods such as bagels is also calming.
- Never force a sensory sensitive child to try a sensory experience that they wish to avoid, as this will increase anxiety.

2. Sensory Seeking



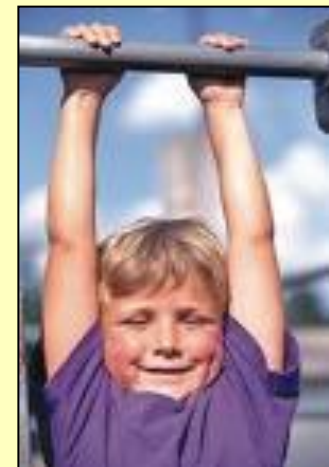
What is it?

Sensory seeking is the term used to describe the behaviour when some children have developed sensory systems that need **more** input than others. These children are often in a low state of 'arousal' and need more input to feel alert. Some children will actively seek out the input needed to increase their arousal levels eg rocking in their chair. Others may not seek out movement but are constantly under aroused and appear to be day dreaming. These children need to engage in some alerting activities.



Indicators that a child may be sensory seeking

- Move or fidget excessively.
- Smell / lick non-food objects.
- Make noise, apparently just for the sake of it.
- Prefer busy visual environments.
- Day dream or appear 'not bothered'.
- Present with behaviour that fluctuates from day to day and is sometimes difficult to explain.
- Engage in a lot of very rough play and be unaware of how rough they are.
- Difficulty in settling and sitting down to do table top activities.





Strategies and activities for sensory seeking children

Group/Individual Activities -

- Schedule activities requiring attention **after** periods of movement.
- Allow the child to fidget or move in their chair; try sitting on slightly inflated beach ball or with a camping pillow on the seat, (Fig 7). Allow the child to stand to complete some activities, provide the opportunity for lots of running or jumping in safe places.
- Use play dough that is scented and unscented, textured and non-textured and allow the child to choose, (Fig 12).
- Provide frequent breaks for movement to reduce the need to fidget.
- Allow time for hand fidgets such as stress balls, Blue Tac, putty, paper clips, and pencils, (Fig 1).
- Allow for periods of chewing or blowing eg chewing gum or bagels, blowing bubbles, blow football using a large straw.
- Alerting foods are crunchy, sweet, spicy, and sour or cold. Encourage parents to provide these for break time snacks.
- Bright lighting and lots of colours are alerting eg a busy room or desk.
- A light touch can be alerting eg cotton wool, paper clips, tin foil, brushes used to stroke skin.
- Provide toys that the child can ride on or swing on, rocking toys and see-saws can also be helpful, (Fig 4).
- Encourage children to help move equipment in heavy activities or push a filled container.
- In free play use tactile balls, mats and rolling games, (Fig 4).
- Deep pressure hugs can provide focus and improve concentration as can a heavy back pack.
- Advise parents that a shower may be better than a bath.



3. Postural Control



What is it?

Postural control is the ability to maintain a stable posture for movement. Postural control is required for performing co-ordinated gross and fine motor movements, as well as for maintaining an upright posture for table top activities.

Postural control requires

- *Vestibular* functioning - this is located in the inner ear and responds to changes in head position and body movement through space. It is the sense of balance. It helps co-ordinate movements of the eyes, head and body.
- *Proprioceptive* functioning - this is located in the muscles and provides information about body position and force of movements.
- Muscle tone - this is your muscles' state of readiness to move.



Indicators that a child may have postural control delay/difficulties

- May appear to be 'clumsy' or have an awkward, noisy gait (dragging or stamping feet).
- May lie across the table or use their hands to prop up their head.
- Appear fidgety in their seat and have difficulty sitting in the centre of a chair.
- Tend to avoid sport, be slow and awkward and usually not picked for teams.
- Tire very easily with all motor activities eg writing, sitting up straight, indoor and outdoor physical activities.

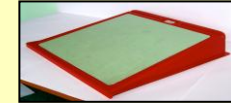




Strategies and activities to improve and support the development of postural control

Environmental Adjustments -

- Make sure desks are slightly higher than the elbow.
- Use a sloped board (or large ring binder folder) to lean on. This may prevent the child from leaning over the desk/table.
- Make sure that feet are resting comfortably on the floor, if not, use a footrest (eg an old phone book may be enough).
- Attach a non-slip surface (eg non-slip mat) to the chair to prevent the child from slipping off.



Group/Individual Activities -

- Allow for activities in different positions such as lying on the floor, kneeling at a lower desk/table or standing.
- Have frequent movement breaks to allow the postural muscles to rest eg have items which the child needs placed in different parts of the room, or ask the child to do a job such as hand out workbooks.
- Encourage children to stretch eg arms/hands in the air, rotating shoulders: action rhymes eg 'head, shoulders, knees and toes'.
- Ensure the child is positioned correctly at the desk. A desk or chair which is either too big or too small will make it difficult to maintain a stable posture.
- When seated make sure hips and knees are at 90 degrees.
- Create activities where the children:
 - Lie with their legs bent and feet touching, use feet to pass ball to each other, keeping the ball in the air
 - Lie down near each other, throw a balloon in and try and get them to use their heads or feet to keep the balloon in the air
 - Jump up and down (try jumping from a squat)
 - Jump on a trampoline / trampette
 - Do wall push-ups (standing a big step away from the wall, putting hands against wall and doing push ups)
 - Do a rocking dog (rocking slowly forwards and backwards while on all fours)

4. Body Awareness



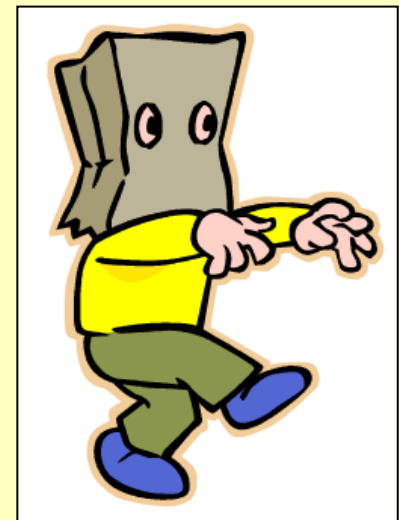
What is it?

Body awareness is an internal map of the body developed from appropriate sensorimotor experiences. It is the ability to find our direction in the environment eg to distinguish left from right, to accurately execute new motor tasks, to walk across the room without bumping into furniture and not getting lost coming back from the toilet.



Indicators that a child may have delayed development/difficulties with body awareness

- Clumsy movement during physical activities.
- Bumping into things or knocking objects off tables without being aware.
- Demonstrate poor letter formation and disorganised work on the page.
- Have difficulty in evaluating how much space is needed to reach certain items.
- Have difficulty judging how much space there is to crawl /walk through.
- Be unable to set things down without spilling or dropping.
- May trip over objects on the floor.





Strategies and activities to improve and support the development of body awareness

Environmental Adjustments -

- Provide visual cues where possible.
- Place the child at the end of a table where there is more space.
- Use the end peg for coat hanging.

Group/Individual Activities -

- Prepare the child for skilled motor tasks by first doing activities which put pressure through the joints and muscles such as pushing, pulling, running or jumping.
- Use more tactile and multisensory learning techniques eg drawing in the air and sand, tactile pencil grips, eyes open and then closed.
- Activities in PE with eyes both open and then closed, when possible, Simon says eyes closed, lying on the floor.
- Drawing games with eyes closed or pin the tail on the donkey.
- Regular breaks from motor activities that require concentration.
- Give short, clear instructions to help with direction.



5. Balance and Coordination



What is it?

Balance and coordination is the body's ability to successfully combine a sequence of movements using both sides of the body together. It is the fine tuning of sensory/motor systems.



Indicators that a child may have developmental delay/difficulties with balance and coordination

- Unable to cross the midline, a skill that is required for reading/writing eg cross arms and touch opposite knees.
- Poor balance, may appear clumsy around the room.
- Have no defined hand dominance, may use both the left and right hands.
- Poor two-hand co-ordination and poor concept of left-right orientation.
- Slow to use a knife and fork, tie shoelaces or draw with a crayon. May use reversals when writing.
- Speed used to disguise lack of ability.



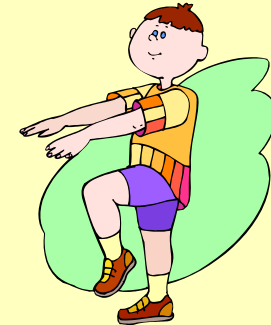
5. Balance and Coordination



Strategies and activities to improve and support the development of balance and coordination:

Group/Individual Activities -

- Encourage participation in physical activities.
- Keep activities at a level where the child can succeed.
- Allow the child to watch and copy other children doing physical activities.
- Praise all the child's attempts to do physical activities.
- Imitate crossing midline postures eg touching left ear and right elbow, right ear and left elbow, cross arms and touch opposite knees etc.
- Tap tummy with one hand, moving in a circular path above head with other hand.
- Cut using safe scissors, draw around stencils and colour on small pieces of paper ie activities that encourage the use of one hand while the other is required to stabilise.
- Glue and paste activities, making collages, constructional activities.
- Threading and lacing activities (Fig 11).



6. Motor Planning and Sequencing



What is it?

Motor planning and sequencing is the ability to plan, organise and sequence movements, especially those which are new or complex eg learning to ride a trike or bike. This can be affected by poor body awareness and poor sensory processing.



Indicators that a child may have motor planning and sequencing delay/difficulties

- Lack of new and creative ways to use toys or equipment.
- Difficulty with gross motor skills such as catching and kicking balls, climbing confidently on play equipment or doing activities which require balance.
- Difficulty anticipating how fast a ball is coming towards them and what path it will take.
- Difficulty throwing - either throw with too much or not enough force.
- May try to avoid tasks or be slow to hold crayons/pencils, use cutlery, do up fastenings on clothing, use construction toys or cut with scissors.
- Art activities and crayon/pencil activities appear messier than expected for their age.
- Poor organisational skills such as orienting clothing, knowing left from right, organising for tasks and keeping the work area/desktop tidy.
- Frequently bump into things or drop things.
- Poor attention and concentration, the child may be easily distracted by things going on around them or may continually fidget on their seat.
- With practice can learn to perform specific motor skills, but will have difficulty generalising these skills to other similar tasks eg ball skills transferring to racket skills.
- May have associated visual perceptual or visual motor difficulties.

6. Motor Planning and Sequencing



Strategies and activities to improve and support the development of motor planning and sequencing

Group/Individual Activities-

- Allow the child to **watch** other people perform new motor tasks **first** to help them plan their own actions.
- Demonstrate the movements and describe them using simple language, get the child to do the movement simultaneously with the adult and if still having difficulty verbalise or count the movements.
- Give practice at moving like different animals such as bears, crabs or rabbits.
- Do movements to rhythm such as a slow drum beat or to the beat of music, such as hopping, jumping, walking, squatting, shrugging shoulders, star jumps or stride jumps.
- Make and hold a statue when the drum beat stops.
- Give practice at doing a sequence of movements.
- Use rhythm sticks (one in each hand) to make sequences of movements.
- Use an obstacle course.
- Emphasise the different directions such as up/down, under/over, front/back and include different movements such as rolling, hopping, jumping, walking on knees and crawling.
- Allow for individual sports eg swimming or smaller team activities, where the child won't bump into or annoy their peers.
- To avoid the child being 'left out' implement structured play activities.



7. Organisational Skills



What is it?

Organisational skill is the ability to cognitively organise your belongings and even your activity or work on a page. Some children who have problems with organisation can also have difficulties with motor planning and/or body awareness difficulties. Not only is organising, planning and sequencing their own movements difficult, but organising and sequencing events or their belongings, within given time limits, is also difficult.



Indicators that a child may have organisational difficulties

- Untidy belongings/desk/work.
- Frequently forget their break, lunch or school bag.
- Need constant reminding regarding the structure of the day.
- Take over the whole of the table.
- Can be obsessed with order as it is difficult to achieve.





Strategies and activities to improve and support the development of organisational skills

Environmental Adjustments -

- Ensure there is a clear path between the child's table and places he/she commonly needs to walk to (teacher's desk, door, etc) The child may have problems planning the best route.
- Seat the child in an area where there is plenty of space to organise their belongings eg end of a table.
- Try to keep the room and workspaces orderly, talk through tidy-up time.
- Label the drawers and cupboards in the room with pictures and words.
- Have doors clearly signed, put down coloured masking tape on the ground to help direct the child to specific places if they get lost easily eg tape or foot prints to the toilet.
- Make coat pegs easily accessible at the end of the row.
- Provide time for the whole class to sort out table tops so that the individual child is not singled out.
- Use colour coded activity boxes so that it is easier for the child to identify what they might need and to help with tidying up.
- Use colour on timetables or a visual schedule to match the work boxes.
- Use visual reminders, whenever possible, to help the child remember what is needed, by having pictures eg lunch boxes above the coat hook, to remind the child what he/she needs to take home daily.



7. Organisational Skills

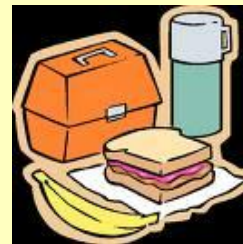


Strategies and activities to improve and support the development of organisational skills

Group/Individual Activities -

- Ensure all the child's belongings are clearly labelled.
- Allow extra time to complete some tasks, especially those that are difficult.
- Break tasks down into achievable steps.
- Provide children with appropriate adult assistance to help support their organisation.
- Use reward systems for good organisation.
- Encourage the child to ask for clarification or assistance if he/she is not sure of the requirements of a task.
- Ask the child to repeat back what needs to be done after a verbal instruction is given.
- Be a good example and talk through getting ready for activities.
- When asking a class to do a number of things, try numbering each task and getting the class to repeat back each task while counting on their fingers. (eg 1- put your toy away, 2- get your bag, 3- put your chair up)

Visual Prompts

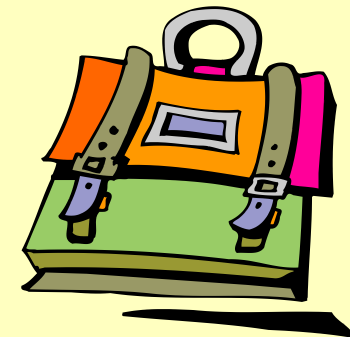


7. Organisational Skills



Strategies and activities to improve and support the development of organisational skills

- Allow children with difficulties to write on lines, as without them they have difficulty organising their work neatly. Choose paper with line spacing which is suitable for the child's size of writing.
- Have a piece of Blue Tac on the table for the child to put his/her crayon on if it keeps falling off the desk or getting lost.
- Rule a line down the edge of the page so that the child knows where to start or put a green star where the writing should start and a red star where they should finish.
- Keep a 'Take home' folder in which the child can place things during the day so that only the folder needs to be remembered and not all the individual items in it.
- Have a separate section in the school bag for putting notices or communication and homework books so that it is easy for parents to check. Keep in constant contact with parents to inform them of the strategies you are using in class to support their child's organisational difficulties



8. Visual Motor Skills



What is it?

Visual motor skill is the ability to integrate what is seen and to transfer it into a motor output. It is an important foundation for handwriting skills.



Indicators that a child may have visual motor integration delay/difficulties

- Difficulty with copying pictures, letters and numbers.
- Difficulty in achieving accuracy for motor tasks which require visual guidance such as colouring within lines.
- Slow to finish the task due to the extra effort required to deal with these difficulties.
- Frustration with or avoidance of written activities.





Strategies to help children with visual motor delay/difficulties

- Do some hand warm-ups to activate muscles in the hand and arm so that the child has better control when doing visual motor tasks eg make a fist, stretch five fingers, spider presses etc.
- Copy designs made out of blocks or pegboard patterns.
- Copy different shapes and basic designs.
- Complete dot to dots, mazes, and tracing activities.
- Cut between numbers on dot to dot sheets.
- Trace over drawings and basic shapes such as squares and triangles, use tracing paper to copy pictures from colouring in books.
- Use paper with raised lines to provide more sensory feedback.
- Make lines on colouring sheets thicker by going over the top with a marker.
- Allow the child to miss a line when writing so that it is easier to read back.



9. Visual Perception



What is it?

Visual perception refers to what is perceived through the eyes and interpreted by the brain. Both the eyes and the brain must work together to interpret the world. The eyes *look* and the brain *sees*.

While most children develop the ability to focus visually and to make discriminations in visual images as they grow, some children take longer to develop these skills and may need additional support and practice. Children must be able to integrate visual information while using other senses.

Good visual perception enables children to discriminate well, copy text accurately, and develop good visual memories and eye hand co-ordination.

Visual perception is a very complex process and there are several components:

- **Visual discrimination**

The ability to look at objects or pictures and recognise whether they are alike or different, to tell where one object ends and another begins.

- **Visual memory**

The ability to remember, even for a short period, something you have seen, letters, numbers, symbols, words and pictures.

- **Visual closure**

The ability to mentally visualise what something looks like, even if it is only partially visible.

- **Visual figure ground**

The ability to distinguish an object from its background eg finding your spot on the page, finding a particular toy in the toy box.

- **Form constancy**

The ability to recognise objects that are the same, regardless of colour or orientation.

- **Position in space (visual-spatial)**

The ability to recognise the special relationship between yourself and objects, as well as between objects eg can display poor spacing when handwriting and confuse b/d/p, 9/6, u/n.

- **Depth perception**

Ability to judge how far away something is from yourself or another object eg judging the depth of stairs when walking up or down

- **Visual discomfort**

Discomfort may arise from oversensitivity to the patterns of print on the page (Meares-Irlen Syndrome)

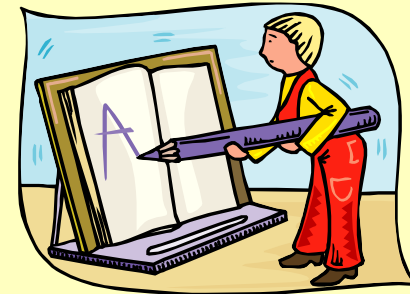
- **Visual tracking**

The ability to track moving objects while seated or standing and the ability to keep a stable visual image when the head and eyes are in motion.



Indicators that a child may have perception delay/difficulties

- May find focusing on a stationary object difficult.
- May have difficulty visually attending to their work.
- An inability to track moving objects with their eyes.
- May have difficulty discriminating characteristic differences in visual stimuli eg colour, shape, size / quantity, direction / distance.
- May experience tired eyes and rub them frequently.
- Difficulty judging distances and may bump into things around them and have difficulty throwing and catching a ball.
- Unable to look quickly and effectively from one object to another.
- May have difficulty recognising, and recalling letters or shapes.
- Difficulty completing tasks on time and appear tired due to using more concentration than their peers.
- Appear to struggle to retain information and require more assistance than their peers to recall.
- May have difficulty in spacing and sizing of letters.
- Unable to listen at the same time as concentrating on drawing.
- May have difficulty copying a sequence of letters.
- May have difficulty copying a shape.



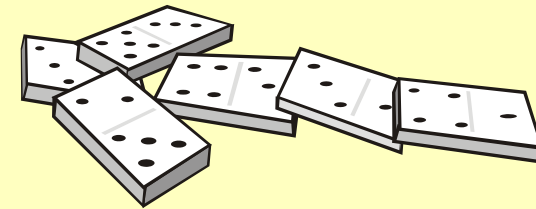
9. Visual Perception



Strategies to support and develop visual perception

Group/Individual Activities -

- Matching, sorting and labelling activities based on colour, shape, size, texture, function (Fig17).
 - Picture matching games like lotto, snap and dominoes (Fig 18).
 - Matching objects to outlines drawn.
 - Pattern making.
 - Visual closure cards: show dotted outline or half a picture (Fig 16).
 - Pictures requiring the child to find 'What's wrong?' (Fig 22).
 - Spot the difference between two pictures. Start with simple pictures (Fig 22).
 - Picture sequencing using simple sequences of everyday life.
 - Memory games using a small selection of picture cards for finding or matching pairs (Fig 21).
 - Memory games where beads, pegs, blocks, Lego or cards are placed in a colour pattern to copy then covered and copied. (start with four items)
 - In PE play 'Traffic lights' show the cards for the children to respond to.
- | COLOUR | | SHAPE |
|-------------------|----|------------|
| red card = sit | or | ■ = hop |
| green card = run | | ◆ = jump |
| blue card = stand | | ● = crouch |
- 'What's missing?' present 2, 3, 4 + 5 objects, cover and take one away.
 - 'What's been added?' as above but add.





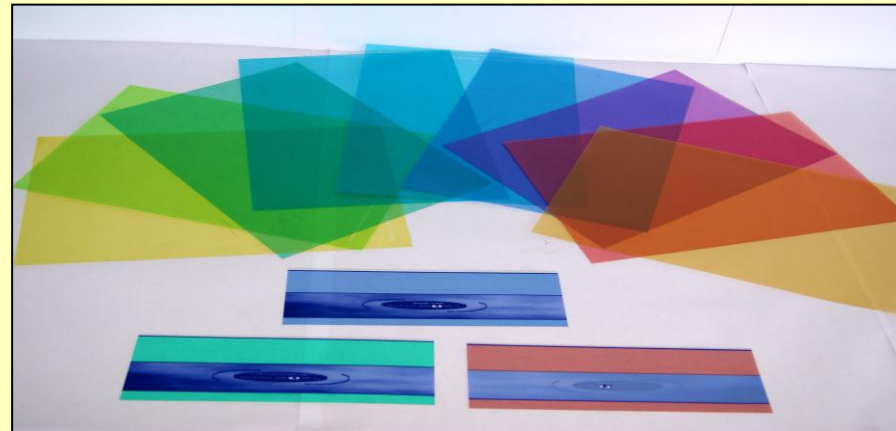
Strategies to support and develop visual perception

- 'Blanket game', using a small group of children, get them to close their eyes and cover one with a blanket, ask the children to guess who is missing.
- 'Which one is it?' show the children a picture card for several seconds. Uncover a group of objects and ask the children to match an object to the picture card.
- Practise activities that require visual scanning, teach a structured approach eg left to right, up and down.
- Keep visual distractions to a minimum, seat children away from wall displays, busy bulletin boards.
- Allow the child to use finger tracking.
- Count how many objects are on a page.
- Use enlarged print in reading material.

Environmental Adjustments -

- Try an angled / sloping writing board.
- Use green/blue coloured paper for worksheets.
- Provide overlays in a range of colours.

Coloured overlays



10. Gross Motor Skills



What are they?

Gross motor skills are developed using the large muscle groups and whole body movement ie arm leg feet and whole body. Gross motor skills can be learned and improved with practice.



Indicators that a child may have gross motor delay/difficulties

- Difficulty in physical activities when running, jumping and balancing.
- Lack of co-ordination of movement to catch, skip and throw.
- Both sides of the body may work independently rather than as one unit.
- Poor muscle tone, appear floppy.
- Difficulty clapping to a rhythm.
- Difficulty moving whole body to a rhythm.
- Become easily tired, resting heads on hands, sloppy sitting and standing positions.
- Problems riding a bicycle.
- Poor concept of position of own body in relation to objects, others and space. Clumsy movement around the classroom, falling off chairs, bumping into objects and other children, often leading to conflict with their peers.
- Poor spatial orientation and direction. Not knowing left from right.





Strategies and activities to improve and support the development of gross motor skills

1. At the beginning of an activity build in some warm up exercises that will help tone up shoulders and arm muscles -

- Holding weight in static positions
- Slow arm movements
- Wall press ups
- Crab walking
- Star jumps
- Body pushing

2. Provide lots of activities in a well structured PE programme -

- Skipping, around the hall / playground in different directions
- Hopping and balancing on one foot
- Climbing
- Rolling and bouncing a ball round the body or along a course and playing with skittles
- 'Simon Says' with positions across the body, shadowing and mimicking movements.
- Tug of war, standing sideways
- Throwing bean bags into boxes or hoops, picking up from hand and throwing with the other
- Passing a ball behind the body to a partner
- Ball games, throwing, catching and kicking. Kicking a variety of balls, using one foot then the other, at targets, along a line or in a certain direction.
- Bat and ball activities
- Actions with and without music, songs and dance
 - Hop like a rabbit
 - Bounce like a dog
 - Creep like a tiger
 - Waddle like a duck
 - Gallop like a horse



11. Fine Motor Skills



What are they?

Fine motor skills are the collective skills and activities that involve using the hands and fingers. None of the fine motor skills can develop smoothly without the concurrent development of gross motor skills, such as stable shoulders, upper arms, trunk and hips to allow a child to sit upright and comfortably in a chair. Some children take longer than others to develop enough muscle strength to gain this stability. These children may require strengthening of their shoulder, trunk and hip muscles. Fine motor skill development may also be influenced by poor visual perception and motor planning. Specific fine motor activities should be incorporated into daily activities. The more novel the activity the more motivating it can be. Fine motor skills form an important foundation for the acquisition of many other skills including literacy, numeracy, self-help and the ability to perform many everyday tasks.



Indicators that a child may have of fine motor skill delay/difficulties

- A delay in hand dominance and may have awkward and inefficient grips on writing implements.
- Tips of the fingers and the thumb not used together in a precise pinch or pincer grasp.
- Unable to follow an object smoothly with the eyes while the head remains still (tracking).
- Unable to draw/copy a circle, triangle, square and a recognisable picture of a person or house.
- Poor hand dexterity: fastening shoe laces, dressing/undressing, cutting/sticking, copying /tracing, assembling jig saws/construction toys, completing puzzles.
- Spidery writing, unable to keep between the lines, no finger spaces and letters incorrectly orientated and formed.
- Children can become frustrated and handwriting becomes a dreaded task, may complain of tired or sore hands.
- Cannot use one hand to stabilize an object and the other to do a separate activity eg doing up a button.
- Outright refusal to do certain fine motor activities, angry outbursts or tantrums.
- 'Defeatist behaviour' eg saying 'I'm no good at this, I can't do this'.



Strategies and activities to improve and support the development of fine motor skills

Initially consider the possibility of weak core strength and muscle tone prior to supporting fine motor skill development. Provide activities to improve the strength, increase endurance and the flexibility of their muscles.

Activities that help shoulders include -

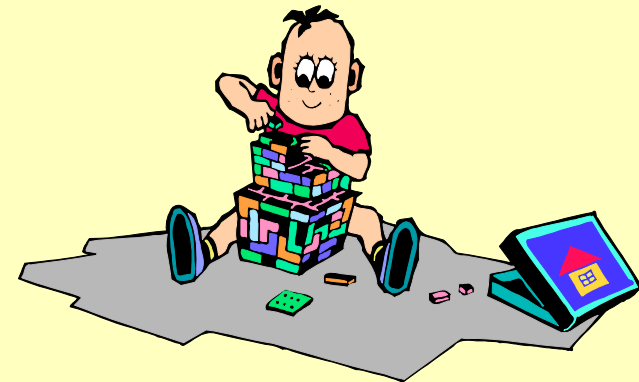
- Bunny hop
- Lying on tummy resting chin on hands
- Commando crawling or 4 point crawling, place bean bag on child's back
- Any ball activity: throwing, rolling, kicking, passing
- Writing on the blackboard
- Construction toys and tower building

Activities that help the trunk/hips include -

- Balancing in a half kneeling position and walking (duck walking)
- Wobble balance boards
- Throwing bean bags or balls at targets and then turning and reaching down to collect another to throw
- Unstable sitting: sitting on a number of cushions or space hopper, develop by throwing and catching a ball
- Bridging: child lies on their back with knees bent and lifts their bottom
- Stepping up and down steps build stamina and stability

Activities to strengthen hand muscles -

- Set out a row of counters or coins and turn them over as quickly as possible using thumb and index fingers
- Inch fingers up and down a pencil
- Rotate a pencil in the fingers
- Hook index finger and pull
- Squeeze a firm rubber ball
- Press hands together as hard as possible
- Spider press-ups with 5 fingers
- Touch each finger on right hand with right thumb and repeat with left
- Wiggle fingers
- Shake hands up in the air



11. Fine Motor Skills



Strategies and activities to improve and support the development of fine motor skills

Group/Individual Activities -

- If possible carry out fine motor activities after a period of gross motor skills.
- If this is not possible have the child do warm up exercises eg using their hands and arms to raise themselves off their chairs, pressing their hand together or by doing hand press-ups against a wall.
- Demonstrate and model the tasks for the children many times.
- Lacing, threading and stringing activities eg old shoes and lacing boards, beads and macaroni for threading.
- Painting and drawing using a wide range of materials, alternate between large stubby brushes and fine thinner ones. Try painting with cotton buds.
- Building blocks: Start with large then move your way towards the smaller variety.
- Puzzles: Begin with large pegs and move to mazes and dot to dots.
- Play dough / Theraputty (stretch the putty out and hide small toys and bells in the putty, then roll into a ball for the child to find).
- Tearing and cutting paper from newspapers, magazines and card.
- Tying knots in rope and string: tie one end of a rope to a table leg and get the child to knot. Very repetitive.
- Picking up objects with tongs, large tweezers and clothes pegs.
- Writing tables which offer a wide range of writing utensils with pencil grips, weighted pens and other adaptive equipment.
- Dressing up: buttoning, fastening studs, zipping and joining with Velcro.
- Tubs for washing and drying dolls and their clothes.
- Screwing and unscrewing lids, screws, nuts and bolts.





Strategies and activities to improve and support the development of fine motor skills

Group/Individual Activities -

- Using locks and keys.
- Holding and using utensils and cutlery, tongs, spoons, spatulas, cups, cookie cutters and baking trays.
- Opening and closing activities, advent calendars.
- Turning pages over in books.
- Magnets to explore how they attach to metal objects.
- Construction toys like Duplo, Lego, Mobilo.
- Do finger plays and rhymes.
- 'Simon says' game with fine motor activities.
- Provide table top easels, chalkboards and any upright surfaces for the children to work on.
- Making letter shapes in funny foam with fingers.
- Forming letters out of string, laces, wiki sticks and play dough.
- Sticker books.
- Use chalk to draw letters on rough ground outdoors.
- Painting shapes and letters on large pages taped to the floor, on blackboards and large wipe boards.
- Tracing letters in trays filled with sand, rice, beans and dried lentils.
- Tracing large letters in the air either using an index finger or ribbons on sticks.
- Provide 'models' of letter shapes for children to trace and copy.





Gross and Fine Motor Skills Developmental Stages

Information adapted from Beery VM 5th Edition by Keith E. Beery, Norman A. Buktenica and Natasha A. Beery. From birth to five, Mary D. Sheridan, revised and updated by Ajay Sharma and Heather Cockerill.

Age 3 Years	Gross Motor - Walks alone up stairs, alternating feet, one foot to each step, comes down stairs two feet to a step and can carry a large toy. - Walks backwards and sideways confidently. Can avoid obstacles and turns corners when running. - Stand and walks on tip toes. Can stand momentarily on one (preferred) foot when shown. - Climbs nursery apparatus with agility. - Rides a tricycle with agility. - Catches a ball on or between extended arms. Can throw a ball overhead. - Kicks a large ball while it is rolling, rolled from 4 feet away.	Fine Motor - Builds a tower of 9 or 10 cubes and can imitate a 3 block bridge with demonstration. - Treads large wooden beads onto a shoelace. - Makes continuous cuts with child safe/toy scissors. - Holds a pencil near to the point in preferred hand, between first two fingers and thumb and uses it with good control. - Copies circles and letters V, H, T. Imitates a cross. Draws a person with a head and usually one or two other features.	Self Help Skills - Puts shoes on completely on correct feet. - Eats with a fork and spoon.
Age 4 Years	Gross Motor - Walks or runs alone up and down stairs, one foot to a step in adult fashion. - Can stand, walk and run on tiptoe. - Stands on one (preferred) foot for 3-5 seconds and hops on preferred foot. - Climbs ladders and trees. - Confident when riding a tricycle and making u-turns. - Shows increasing skill in ball games, throwing, bouncing, kicking etc, including use of a bat. - Catches a big ball when bounced from 3 feet away.	Fine Motor - Draws a person with 3 different body parts. Can draw a recognisable house. - Cuts out a big circle with scissors. - Builds a tower of 10 or more bricks and bridges of 3 cubes with demonstration. - Initiates spreading of hand and bringing thumb into opposition with each finger in turn right and left. - Holds a pencil in a dynamic tripod grasp with good control, similar to an adult. - Copies a cross and also letters V, H, T and O. - Connects a series of dots on a single drawing, such as lines circles and squares.	Self Help Skills - Dresses and undresses when requested without much help. - Cuts easy food with a knife
Age 5 Years	Gross Motor - Walks easily on a narrow line. Active and skilful climbing, sliding swinging and digging - Can stand on one foot for 8-10 seconds, right or left foot with arms folded. - Can bend to touch toes without flexing knees. - Catches a tennis ball with hands and chest. - Throws and catches a ball well. (Catching with one hand does not develop until 9-10 years.) - Moves rhythmically to music.	Fine Motor - Grips strongly with both hands. - Picks up and replaces minute objects. - Builds elaborate models when shown. - Colours pictures neatly, staying within the outlines. - Draws a recognisable man, with a head, trunk, legs, arms and features. Draws a house with a door, windows, roof and chimney. - Copies the letters V, T, H, O, X, L, A, C, U and Y. - Copies a square and at 5½ years a triangle.	Self Help Skills - Ties shoes - Brushes and combs hair well - Cuts most food with a knife



Resources to support sensory development

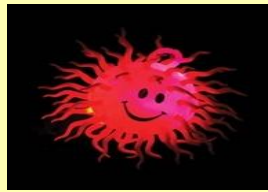


Fig 1 Sensory toys, to squeeze and feel.



Fig 3 Sensory feely boxes, sand trays, yellow sensory box.



Fig 4 Tactile mats and balls.

Fig 5 Rocking toy, trampette and play tent.



Fig 2 Head phones.



Sensory and Motor Development



Resources to develop balance coordination and gross motor skills



Fig 6 Wobble boards and marble run for balance.

Fig 7 Soft cushions and pillows for chairs.



Fig 8 Balance beam, soft mats and soft play equipment.



Fig 9 Tactile scooters, trike and scooter.

Fig 10 Parachute and numbered ladybirds for throwing and catching.



Resources to develop fine motor skills



Fig11 Lacing caterpillar and beads. Lacing apple and teddy.



Fig 12 Play dough and stacking toys.

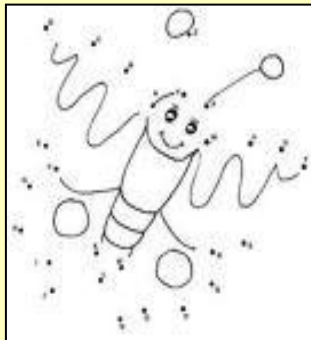


Fig 13 Colouring-in sheets and dot-to-dots.



Fig 14 Stencils.



Fig 15 Nuts and bolts.

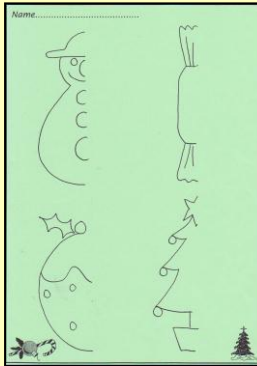
Sensory and Motor Development



Examples of resources to support visual perception

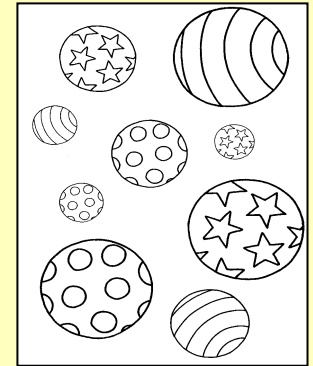
Visual closure Fig 16

In these tasks a child is encouraged to see the whole shape and fill in the missing outline. Support the activity at the beginning by holding the shape at a distance to see if the whole outline merges, have the child trace the outline with their finger to get a sense of whole or display the completed picture and then take it away.



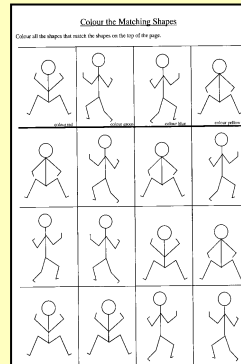
Visual sorting Fig 17 This activity requires a child to sort groups based on a particular visual criteria: size, pattern, colour and shape for example in should be completed with 'real' objects and using worksheets:

- Colour in all large balls red, the small balls blue and the medium balls orange.
- Colour in all the balls with stripes yellow stars red and dots blue.



Visual matching Fig 18

In these activities a child is required to match object pairs that can be based on shape, colour, pattern and position. Use real objects to match, or matching jigsaws before worksheets.



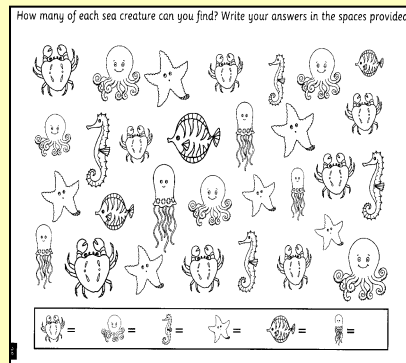
Visual sequential memory Fig 19

In these tasks a child is required to look at a sequence of symbols, objects, shapes, letters or numbers and is asked to reproduce them in the correct order. Use either 'real' objects that they can feel and touch to support kinaesthetic memory (lacing beads) or, on a worksheet, encourage them to self talk to support their recall.

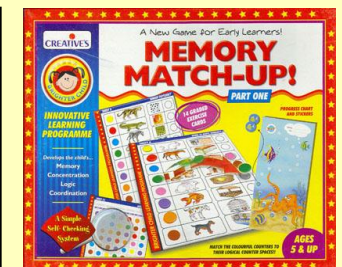
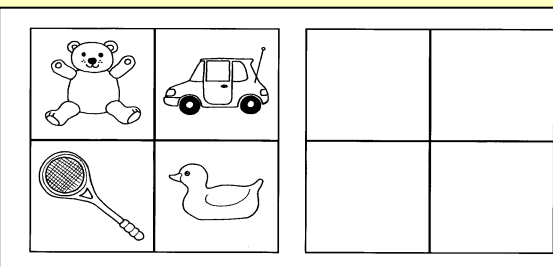


Visual confusion Fig 20

These tasks are to enable a child to develop strategies of visual organisation by grouping similar objects together while ignoring differences in size, position or rotation. Use 'real' objects then worksheets.



Visual recall Fig 21 A child looks at an object for a defined period of time and then tries to recall it or reproduce it by describing it or drawing it. Phonic, visual and thematic links can be used to support this strategy. Use 'real' objects, games and worksheet activities.



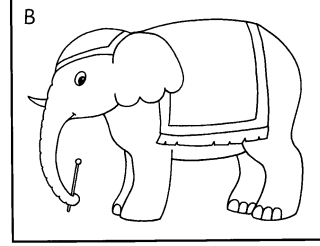
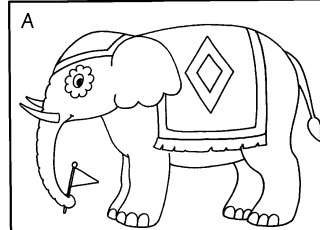
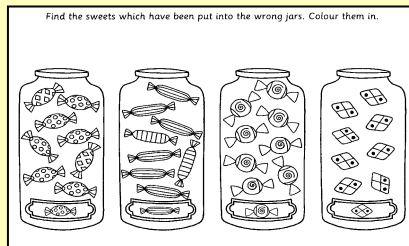
Visual discrimination

Fig 22 In these tasks a child is encouraged to look for:

- Omissions in size, shape, pattern, rotation or reversal.
- 'Odd-Ones' out.
- Identifying missing traits.
- Making the second picture match.

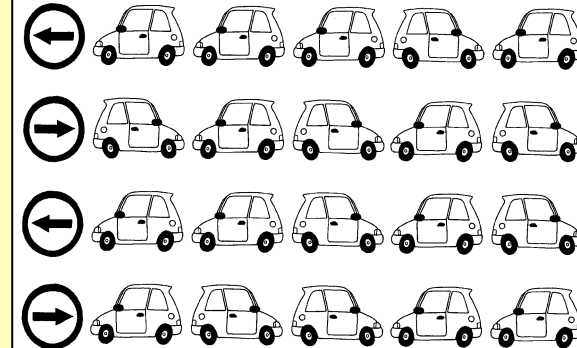


Spot the difference, find the missing



Make the picture the same

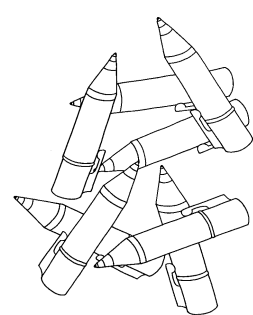
Find the cars going the wrong way on each road. Colour them in.



Which cars are going the wrong way?

Figure ground perception Fig 23 The language of 'top', 'bottom' and 'middle' need to be known by a child, in order to complete these initial tasks. This can be done by using 'real' objects like a small pile of toys and explaining what's on top, what's at the bottom and what's in the middle. More advanced activities are mazes and word searches.

Colour the pens at the top of the pile red.



Which animals are hiding in the farmyard? Find them and colour them in.

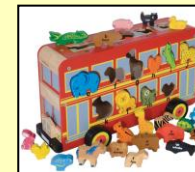
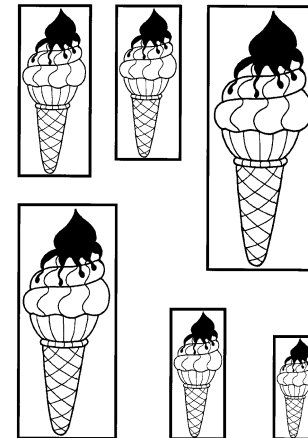


Visual size

grading Fig 24 These tasks are used to support a child who has difficulty perceiving different sizes. More able children can point and tell but some children may be required to experience putting out 'real' objects in order of size and then cutting out the objects and placing them in order of size. Sorting boxes provide the opportunity for a child to match a solid shape into a 2D slot.



Cut the ice creams out. Put them in order of size from the biggest to the smallest.



Websites, Resources and Publications



Websites for Information

www.nicurriculum.co.uk : CCEA website provides guides on 'Developing Fundamental Movement Skills'.
www.teachingideas.co.uk : Lists many games and activities for PE lessons and class activities.
www.skillsforaction.com : Further information on specific sensory difficulties.
http://dyscovery.newport.ac.uk : Further information on development co-ordination difficulties.
www.dyspraxiafoundation.org.uk : Further information on dyspraxia.
www.sensoryintergration.co.uk : Further information on sensory integration.
www.teachingexpertise.com Further information.
www.do2learn.com Free download of fine motor skill resources.
www.eyecanlearn.com Visual perception games.



Resources and Equipment

www.specialdirect.com
www.shopwiki.co.uk
www.sensorytoywarehouse.com
www.backinaction.co.uk : (specialist seating)
www.elc.co.uk
www.discoveryeducation.com
www.specialneedstoys.com
www.spacekraft.co.uk
www.sensetoy.com
www.rompa.com
www.peta-uk.com (specialist scissors)
www.bakerross.co.uk
www.edhelper.com



Publications for Further Reading

Movement and learning in the Early Years.
 Dr Christine McIntyre and Kim McVitty
 ISBN 978-1412902373

Learning outdoors in the early years.
 A Resource Book available to download from
www.nicurriculum.co.uk

Including children with Dyspraxia in the foundation stage.
 Sharon Drew ISBN 978-1408129524

My Book of Easy Mazes.
 (Kumon Workbooks) ISBN13: 9781933241241

Developing ocular motor and visual perceptual skills.
An activity book. Kenneth Lane ISBN13:9781556425950

Answers to Questions Teachers Ask About Sensory Integration.
 Forms, Checklists and Practical Tools for Teachers and Parents Koomar.J et all 2004 www.sensoryresources.com

Visual Perception Skills Mark Hill & Katy Hill (available from Amazon)

Sensory and Motor Development

Personal notes and contacts

Contents of this section



What is it?

Common areas of concern,



indicators,



strategies

- Attention and listening deficit behaviours
- Difficulties with following an adult's request
- Aggressive behaviour



Useful resources



Glossary of strategies for behaviour management



Self-esteem



Positive correction



Top tips



Websites, resources and publications



What is it?

The identification of strategies and support for children with social, emotional and behavioural developmental difficulties has expanded over the years and overlaps into many areas. The causes of social emotional and behavioural difficulties vary for each child. Problems may be due to developmental delays, attention and concentration deficits and communication and language difficulties.

Stable relationships are also extremely important in the early years between a child, parents, carers and teachers. These relationships provide a foundation for children to develop trust in adults that helps to develop good resilience and an ability to regulate their own emotions. Children who have experienced difficulties in relationships can feel anxious and untrusting, they have little ability to control their emotions and may view the world as hostile. They may also have low self esteem and have little capacity for empathy.

However, many problems in relation to behaviour are due to children not yet having learned the most appropriate ways to do something, for example some may come into your care without having the social skills to share. Young children can be very ego-centric, and lack the ability to control and regulate their emotions. They may not be aware that there are consequences following their behaviour. These skills need to be taught, modelled and practised frequently. As practitioners our aim is to provide the prerequisites for the development of positive social and emotional behaviours.

While children need to feel secure and have a sense of belonging and acceptance, they also need appropriate boundaries and structures in place that meet their needs.

If behaviour problems persist they affect not only their own learning opportunities but often those of the other children around them.

Many adults can feel that the 'sorting out' of behavioural problems that occur in the early stages demands a disproportionate amount of time. It is in everyone's interest that they are addressed early and appropriately through the implementation of strategies or referrals to more specialized services as early behavioural problems tend to escalate over time.

A positive approach which is focused on social and emotional well-being with logical consequences will help children to develop self management of their behaviour.

It is **not** the intention of this section to provide explicit support for **all** the behavioural and emotional difficulties that may be present in the early years setting.

The following areas have been identified as the most **common** areas of concern for most early years providers.

- 1. Attention, listening deficit behaviours**
- 2. Difficulties with following an adult's requests**
- 3. Aggressive behaviour**
- 4. Self-esteem**

A more detailed breakdown of suggested behavioural strategies is included on page 136.

Attention and Listening Deficit Behaviours



Attention and listening deficit behaviour.

Behaviours

- Not looking at the speaker
- Distracting others
- Showing disinterest
- Making noises
- Interrupting
- Not following instructions

Possible causes

Global delay

Language difficulties

Hearing deficit

Limited experience of listening and giving attention

Attachment disorder

Task not matched to ability



Strategies for management (some of these strategies will also apply to other areas of behaviour management)

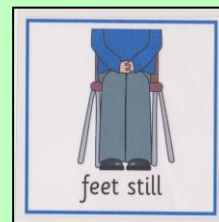
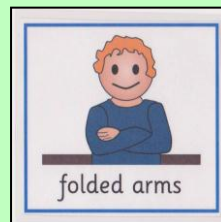
- **Teach and model 'good listening' routines daily.** The best way is to photograph the children carrying these out: looking, listening, sitting, and conversation skills.



- **Use visuals for listening.**



- **Use gestures with visual cues (Fig 3).**



- **Pace and pitch of language at child's level of understanding.**
- **Gain attention routines** by using 'back on task' jingles with motor activities included eg hands on heads, touch our shoulders, and touch our toes.



Strategies for management

- **Stop activities when giving instructions.**
- **Keep instructions short, clear and in order.**
- **Use child's name first** followed by an appropriate touch eg hand on back.
- **Repeat key words.**
- **Play games to improve listening and attention.**
- **Kinaesthetic activities at intervals:** class planning should provide the opportunity for motor activities to be followed by table based activities.
- **Positive correction.**
- **Positive feedback:** Notice good behaviour, describe it, tell the pupil why it is good, and encourage them to repeat it eg 'I noticed that you were listening very well. You put the blocks in the correct box. You're such a helpful girl'.
- **Tactical ignoring:** ignoring inappropriate behaviour providing it is not causing harm to the child or others.
- **Proximal praise:** praise the children who are doing what you want and the others will copy and then want praise too.
- **Red dot / green dot:** Red dot / circle is held up in front of class to mean everybody stop and listen, then after instructions are given, green circle is held up which means go.
- **Quiet hand rule** ie hand up but no noise.
- **'Turn-Taking' games,** with another person or in a group eg circle time with talk toy.
- **Redirection to a quiet area for thinking time.**
- **Have a city side (busy) and a countryside (quiet) in your setting.**

Difficulties with Following an Adult's Requests



Non compliance with an adult's requests

Behaviours

- Being off task
- Saying "no"
- Ignoring instructions
- Not doing as told
- Wanting their own way
- Defiance

Possible causes

Limited experience of following an adult's request

Thinking they have a choice or it does not apply to them

Lack of empathy/understanding of a situation

Task not matched to ability

Attachment disorder

Fear of failure



Strategies for management (some of these strategies will also apply to other areas of behaviour management)

- **Use very explicit short instructions.**
- **Positive expectation:** Strategies should be carried out with positive expectation, say it as if they are already doing it.
- **Proximal praise:** Praise the children who are doing what you want, and the others will want the praise too.
- **Positive correction:** Give an instruction the child can follow in place of a negative instruction eg "walk" instead of "don't run", "hands up" for "don't shout out", "speak quietly" for "stop shouting." Tell them what to do, not what not to do.
- **Positive feedback:** Notice good behaviour, describe it, tell the child why it is good, and encourage them to repeat it eg "Thank you for tidying up so quickly. Now we can have our break." Not too gushing, better to use positive descriptive phrases such as "You are working so hard today" or "You're really getting the hang of these now, aren't you?" or just "Well done, you got it finished. Now we can have our break."
- **Limited choice:** Some children find it difficult to make choices about activities such as play. A limited choice in the form of a choice board with two or three choices can be useful in getting a child to persevere with a task.
- **First / then:** First we do this (task) – then we do that (next.) The "then" should be a preferred task. Ask child if they want to go outside (preferred task) when they respond with a yes simply say that's great but first we must put the bricks away. This way the child knows the preferred activity is on offer they just have to co-operate with a request first. The participation in the activity is dependent on them and has not been taken away. Do not say "if you do this", just stick to "first / then" using a very matter of fact positive tone. Repeat without entering into discussion or bargaining.

Difficulties With Following an Adult's Requests



Strategies for management

- **Non-verbal cues:** Hands up, finger on lips, nod, and smile.
- **Task board:** Sequenced reminders of the task or tasks which have to be completed. See to the right the visual reminders on a task board for 'First and Then'.
- **Visual reminders:** For expected behaviours such as sharing taking turns and sitting quietly.
- **Where / what?** If a pupil is wandering around, only ask two questions (you may not need the second one.) First say in calm non-accusing tone, "Where should you be?" There is only one correct answer and that is where they were told to be. Do not accept any other answer and steer them back to their seat. Then say, "What should you be doing?" Answer – What I was asked to do. Do not get caught up in irrelevant facts and never ask why they are out of their seat.
- **Direction / redirection:** DIRECTION – tell the child what to do, say "thank-you" in advance, walk off.
RE-DIRECTION – repeat direction without being sidetracked. Use thanks and take-up time – don't stand over them in a confrontational way.
- **Timers:** Use a visual timer or an egg timer to give the responsibility back to the child to manage their time by promoting independence.



Aggressive Behaviour



Aggressive behaviour

Behaviours

- Verbal aggression
- Physical aggression to peers
- Physical aggression to adults
- Bad language
- Throwing objects
- Tantrums

Possible causes

Poor social skills eg turn taking, sharing

Language difficulties

Attachment disorders

Frustration

Development delay

Poor role models



Strategies for management (some of these strategies will also apply to other areas of behaviour management)

- **Emphasis on your 'class' being a safe place**, where hurtful behaviours and words should not happen.
- **Calm stance, quiet voice.**
- **Avoid excessive eye contact and using too much language** both can often inflame a situation.
- **Positive correction** eg "hands down, feet down." Give an instruction the pupil can follow in place of a negative instruction eg "walk" instead of "don't run", "hands up" for "don't shout out", "speak quietly" for "stop shouting." Tell them what to do, not what not to do.
- **Reflect feelings** eg "I can see you are upset" to both **aggressor** and **victim**.
- **Explain rules** eg "We have kind hands." "We speak nicely."
- **Teach scripts** eg "Please can I have that."
- **Teach assertiveness** eg "I don't like it when you do that."
- **Don't pace and chase** – try to stay still.
- **Tactical ignoring**: ignoring inappropriate behaviour providing that it is not causing harm to themselves or others.
- **Model** good manners and sharing.
- **Teach** turn taking very explicitly.
- **Teach and explain** 'sharing' words and sharing rules with lots of repetition.





Strategies for management

- **Rehearse scripts:** plan on what you will say in response to specific situations.
- **Use role play,** stories and puppets to support the development and reinforce appropriate social skills.



Paula puppet



Larry the rocker

- **Proximal praise:** praise the children who are doing what you want, and the others will want the praise too.
- **Positive feedback:** notice good behaviour, describe it, tell the pupil why it is good and encourage them to repeat it eg 'Thank-you for using kind words and gentle hands, you are a good friend'.
- **Redirect** to a quiet area for 'thinking' time.
- **Reparation** – chance to "fix it" – make amends.
- **Use a conflict resolution approach** i.e. compromise.
- **Use timers** to teach sharing and turn taking.
- **Use neutral phrases,** "Hitting is not OK", "Hitting must stop."
- **Use role play** to demonstrate effects of unkind / rough behaviour.
- **Use big books** and illustrations to direct the child/children to read facial cues in the pictures.
- **Provide praise** through having unexpected treats eg 'You have all been so good this morning we are going to play our favourite class game for five minutes.' (something that is easily accessible)



Social, Emotional and Behavioural Development Resources



Making sure children know what to do

- Symbol cards, (Fig 1)
- Visual timetables, (Fig 2)
- Cueing cards and posters, (Fig 3 and 5)
- Routine cards, (Fig 4)
- Count down to finish, (Fig 6)
- Task completion, (Fig 7)
- First and Then, (Fig 8)
- Language jigs, (Fig 9)

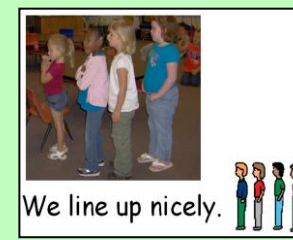


Fig 1 Symbol cards.

Fig 2 Visual Timetable.

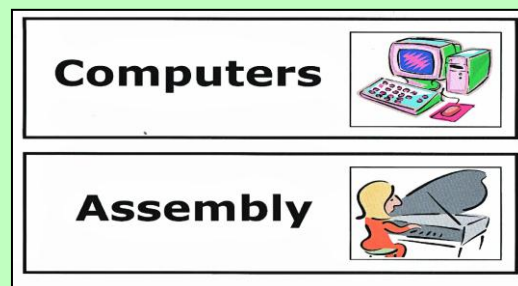


Fig 3 Cueing Cards.

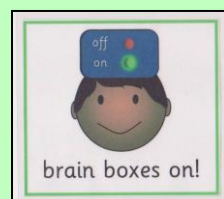
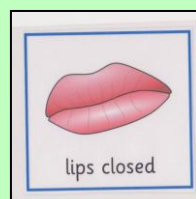


Fig 4 Routine cards.

Don't forget in the classroom
give me five!

1. Eyes looking at the teacher
2. Ears listening
3. Lips quiet
4. Hands still
5. Mind wide awake

Fig 5 Cueing Poster.

Social, Emotional and Behavioural Development Resources

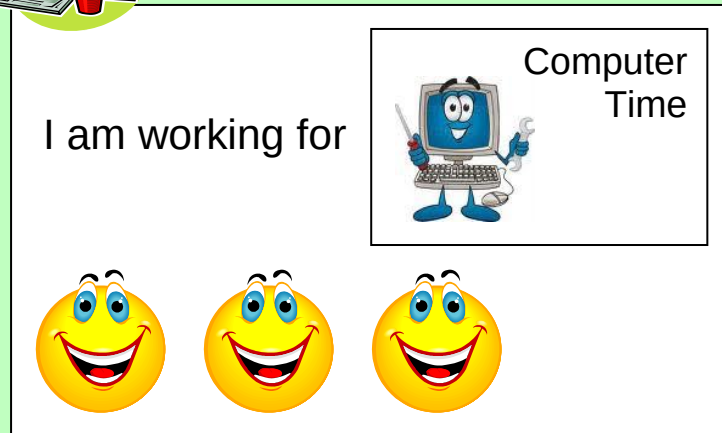


Fig 7 Tasks are completed, a smiley face is ticked and the reward is then available.

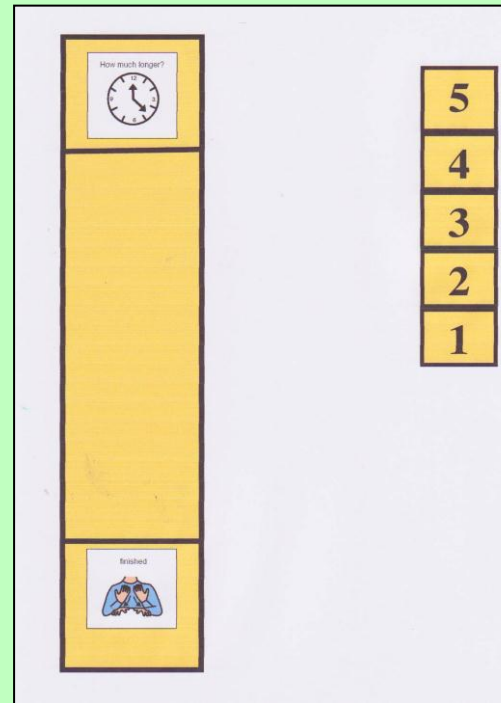
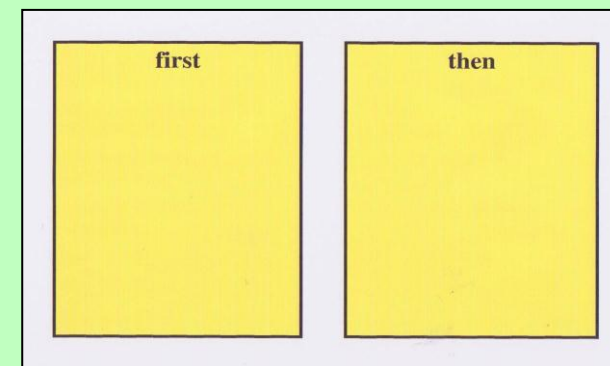


Fig 6 Count down to finish chart.

Fig 8 'First and Then' with visuals for activities.



Fig 9 Language jigs /comic strip conversations.



These materials are available to download from www.belb.co.uk

Glossary of Strategies for Behaviour Management



(Strategies should be carried out with positive **expectation** – say it as if they are already doing it.)

POSITIVE FEEDBACK – Notice good behaviour, describe it (**acknowledge**), tell the pupil why it is good (**approve**), and encourage them to repeat it (**affirm**) eg “Thank you for tidying up so quickly. Now we can have our break. You are a great helper”

POSITIVE CORRECTION – Give an instruction the pupil can follow in place of a negative instruction eg “walk” instead of “don’t run”, “hands up” for “don’t shout out”, “speak quietly” for “stop shouting.” Tell them what to do, not what not to do.

NON-VERBAL CUES – Hands up, finger on lips, nod, smile.

DIRECTION – Tell them what to do, say “thank-you” in advance, walk away.

RE-DIRECTION – Repeat direction without being sidetracked. Use thanks and take-up time – don’t stand over them in a confrontational way.

TACTICALLY IGNORE – Ignore secondary behaviour, minor interruptions, huffing.

PROXIMAL PRAISE – Praise the children who are doing what you want, and the others will want the praise too.

DISTRACTION / DIVERSION – Ask question, give task to disruptive pupil.

RULE REMINDER – Refer to rule, use “thank you” and take-up time.

CHOICES – In your bag or on my desk, do it now or later, put on your coat yourself or with help, remind of consequences. Then give them time to do it, without hovering around them.

BROKEN RECORD – Calmly repeat request or rule or consequence, to avoid confrontation or being drawn into argument. Stay neutral.

Glossary of Strategies for Behaviour Management



LIMITED CHOICE - Some children find it difficult to make choices about activities such as play. A limited choice in the form of a choice board with two or three choices can be useful in getting a child to persevere with a task.

FIRST THEN - First we do this (task) – then we do that (next.) The “then” should be a preferred task. Do not say “if you do this”, just stick to “first / then” using a very matter of fact positive tone. Repeat without entering into discussion or bargaining.

TIME AND TRANSITIONS - At the start of the task give the children some idea of how long they have got to do it, or how long it will take, and perhaps mention what is coming next, especially if it is a preferred activity or break. Always give warnings of transitions so children do not have to stop abruptly. A few warnings or a countdown such as 5, 4,3,2,1 (spread over a few minutes) is best. For some children the warning can be visual or audio (music for tidying up.)

REMINDER OF PAST SUCCESS - Link new tasks to previously taught work, and make links, reminding children how well they did it before. This reduces the fear of failure, the most common reason for refusing tasks.

MODELLING - Showing a child how to do something by doing it for them first – a demonstration (can be any task or the correct way to say something). It is much more effective if you talk aloud describing what you are doing – even very small things. Children with behaviour problems often have language deficits and talking out loud as they do something helps them to process information, think about the task as they do it and also helps them to remember how to do it. A great learning tool which also supports behaviour.

POSITIVE DESCRIPTIVE PHRASES- Not too gushing, better to use positive descriptive phrases such as, “You are working so hard today”, or “You’re really getting the hang of these now, aren’t you?” or just, “Well done, you got it finished. Now we can have our break.”

WHERE / WHAT? - If a child is wandering around, only ask two questions (you may not need the second one.) First say, “Where should you be?” There is only one correct answer and that is where they were told to be. Do not accept any other answer and steer them back to their seat. Then say, “What should you be doing?” Answer – What I was asked to do. Do not get caught up in irrelevant facts, and never ask why they are out of their seat.

Self-esteem



What is it?

Self-esteem is often confused with confidence. Self-esteem relates more to feelings of emotional security and can be best described as how we view ourselves in the context of our surroundings. This view of ourselves can be altered depending on the feedback we receive from others.

Educational self-esteem refers to the extent to which a pupil feels comfortable and secure in the school environment. The quality of adult attention is one of the most important factors in helping children become motivated, successful learners. Some children can slip into the cycle of failure in response to feedback they receive.

How would you recognise low self-esteem?

There are a number of factors that can contribute to low self-esteem but not all are a consequence of it.

- Reluctant to apply themselves to a task.
- Can act out in front of the class to get attention i.e. the class clown.
- May avoid people and isolate themselves from the group.
- Reluctant to display work.
- May take a deliberately long time to answer questions.
- Can appear defensive and argumentative.
- May be anxious when working.
- May appear to be over anxious to check work.
- May avoid eye contact.
- Can be isolated from their peers.
- May seek out friendships with younger children.

How do children acquire self-esteem?

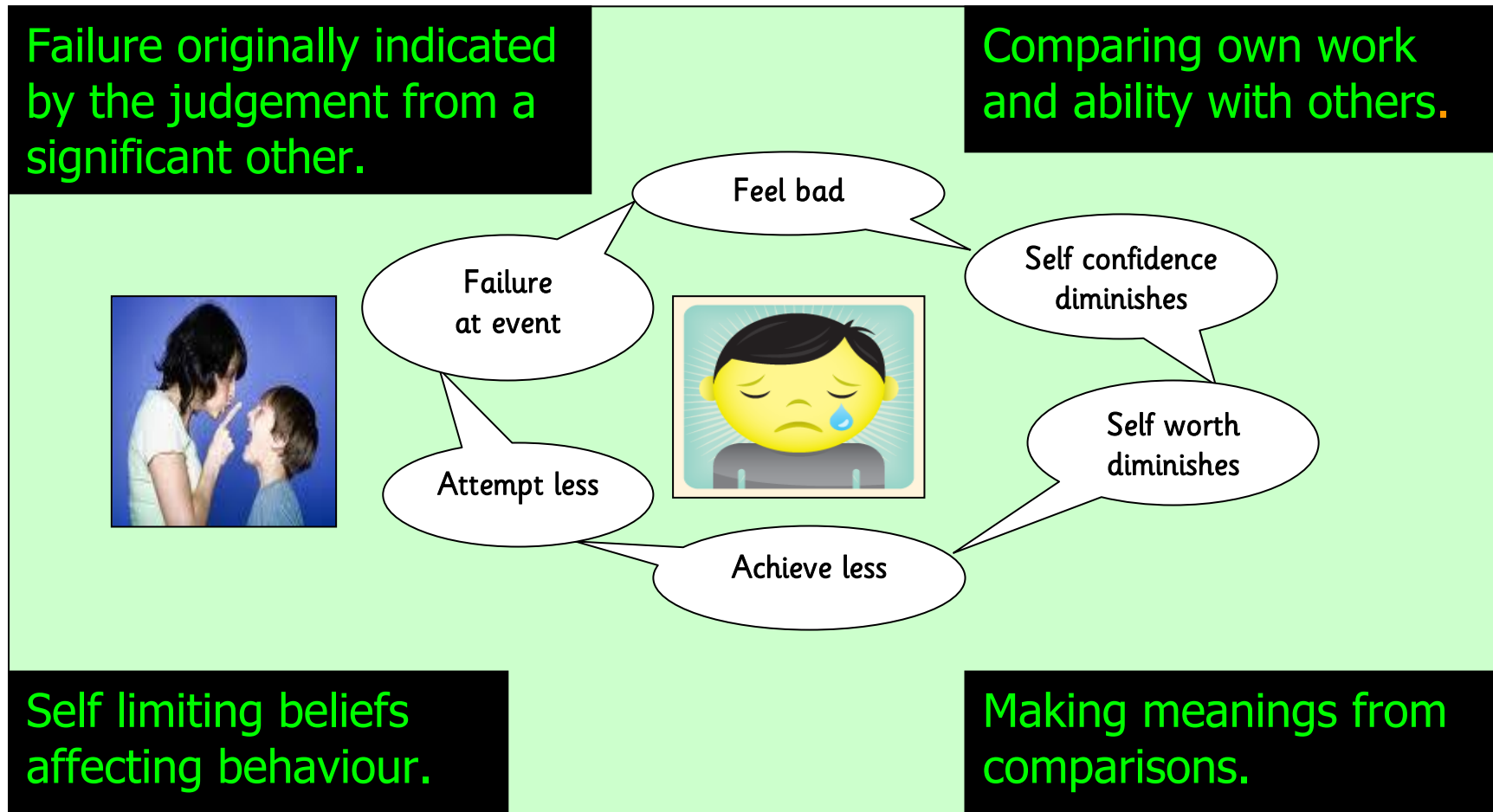


- **Through receiving** positive feedback from significant others, sincere praise, unconditional love, support and acceptance.
- **Through experiencing** success in mastering a skill, pride in their work and having the opportunities to pursue their interests.
- **Through feeling of being** capable, liked, valued, and aware that they have specific strengths, are optimistic about the future and positive about themselves.

Children with high self-esteem tend to be able to discount areas where they are less competent, but children with low self-esteem are less able to do this and tend to be more affected by difficulties.

Children with low self-esteem note negative comments that confirm their own view of themselves and do not believe that good comments relate to them. They tend to select out of the environment those things that confirm their beliefs about themselves.

Low self-esteem is very common in children displaying behaviour problems. Children need to believe that they are valued by those around them. Parents, teachers and classroom assistants all play a big part in helping children feel good about themselves.



Low self-esteem and the cycle of failure

Self-esteem



How we can help to raise self-esteem

- Help children to identify and recognise their strengths.
 - Build on these strengths step by step.
 - Help them to cultivate interests.
 - Be respectful.
 - Use non verbal techniques appropriately.
 - Encourage and support extra curricular activities.
 - Give appropriate responsibilities in class.
 - Help the children to set realistic goals.
 - Remind children of past successes.
 - Avoid using sarcasm, comparisons or criticism of their character or intelligence.
 - If they misbehave tell them it is the behaviour you don't like, not them.
 - Provide the help they need to acquire skills.
 - Display their work.
 - Display photographs of the children to celebrate social achievements eg good sharing, good friends.
- Encourage children to talk and then listen to them.
 - Teach strategies to deal with negative emotions eg self talk, 'I know I can do this', visualizing something positive.
 - Use the, 'I saw this and thought of you', the keeping in mind principle.
 - Be prepared to take risks, eg if a child does not understand something or is not coping very well, explain to them that it is your fault, 'I'm sorry I must not have explained that very well, let me try again'.
 - Provide a positive comment to every child in your care every day. Greet them in the morning and say good-bye to them every afternoon.
 - Create an ethos where it is acceptable for children to say, 'I'll try but I might need help'...support this with phrases, 'You can do it' and 'what helped you do it?'
 - Signal confidence to the children in their ability to succeed by using language of success, 'I know you can'.
 - Children can be negative and limit their efforts- 'I am no good at this'. Support the child with, 'Yes, you did get a bit mixed up, let's see what caused this,' or, 'maybe I haven't explained this well enough'.



Watch your language!

When a child consistently and regularly hears 'bad' messages about themselves they begin to believe what they hear. It is, therefore, very important that those working with children consider carefully the words they use. Try to avoid making statements which can support a negative assumption.

STATEMENT	NEGATIVE ASSUMPTION
What have you done this time?	The child assumes that you think it is them all the time.
I want the truth now.	They assume that you think they are a liar.
How many times have I to tell you?	The assumption is that you think the child is not very smart and has to be told things many times.
This one is easy, try it.	If the child then finds it hard they assume that they are very weak at the task.
I'm just wasting my breath.	They assume that you have given up on them.
Believe it or not I'm one of the few people who are on your side	The child may assume that rest must just hate them.
What else could you add to that picture?	The assumption is that what they have done so far isn't any good.
No, that's not it! (in response to a child answering a question)	The assumption taken is that I am silly so I don't think I will answer any more of your questions.
This morning was OK but.....	Child assumes that you thought that they might be alright but in reality they are always bad.
You again!	The child assumes that you think they will always fail to achieve.

Self-esteem



Changing negative messages to positive ones

If a child has received very little praise, excessive amounts of criticism and disapproval they soon learn to assume and expect it. It takes hard work to reverse this pattern, it won't just happen but it needs adults to change something first. As adults, we need to replace negative comments with positive ones. Negative messages control behaviour rather than change it. Here are examples of 'positive assumptions' which can give children positive feedback about how they see them.

How pleased are you with (the assumption is that you are pleased with it already, and what do they think)

What will help you to understand it better? (the assumption is that the reason for lack of understanding is that maybe I, as the teacher, have not explained it enough)

How quickly can we get into our groups? (the assumption is that it is always done quickly)

Do you want to do it now or after break? (the assumption is that they can do it)

Which bit of it are you finding difficult at the moment? (the assumption is that it is only at the moment you are having a difficulty, not always)

When you have calmed down I can listen to you. (the assumption is that I recognise you are upset but I will listen to you)

What do you want to do when you have finished? (the assumption is that you know they can finish it)

Next time you do this it will be easier. (the assumption is that you acknowledge that this was hard but you believed that they could do it, and that there will be a next time as they have progressed)



Making praise and encouragement more specific and effective

We can make praise and encouragement more effective by making them specific. Positive, specific praise is important, not only as a tool to teach new behaviours, but to help build a positive self image.

Labelled praise describes the particular behaviour that you like ie 'What a good job you have done picking up all those bricks.' By pinpointing exactly what you like about the child's behaviour, the praise statement conveys much more to the child and informs them what specifically was praiseworthy about their behaviour.

Research also indicates that praise is much more effective if it is accompanied by some physical response from the adult, such as a pat on the shoulder. Use extrinsic rewards sparingly.

Here are a few examples of effective praise

- You did a great job when you....
- Great waiting.....
- My, that was super team work
- You are being a good friend when you.....
- Pat yourself on the back for...
- Give me five for
- Thank you for waiting while I was busy with
- I like the way you remembered to
- It helps us when.....
- You have put a lot of thought into
- You are making a good choice when.....
- What a good friend you are by



Correction should be phrased so that you are telling the child what to do, rather than telling them what not to do. It is a worthwhile activity as a staff group to make out a list of positive responses and to keep them close by for handy reference.

NEGATIVE COMMENT	POSITIVE COMMENT
'Stop fidgeting.'	'Let me see good sitting.'
'Stop running.'	'Walk'. / 'Remember to walk.'
'Don't make a mess with the paint.'	'Keep the paint on the page.'
'Stop pushing.'	'Hands by your side, leave a space.'
'Stop shouting out.'	'Let me see a quiet hand.' / 'Quiet voices please.'
'Don't throw sand on the floor.' 'Don't spill the water.'	'Keep the sand in the tray.' 'Try and keep the water in the tray.'
'Stop hitting.'	'Hands down.' / 'Gentle hands.'
'Stop wasting time.'	'Time for work.' / 'How far have you got?'
'Don't do that!'	'Try it this way.'
'You haven't listened.'	'Listen to me.'



Top Tips

BE IN CHARGE As the adult you must be in charge. Be aware of your position in your room, so that you can watch things going on. Always consider if a child lacks the appropriate communication skills and understanding. Pick up on good things and establish yourself as the focal point of interest and authority.

MAKE REWARDS WORK FOR YOU Your goal is to establish good habits. Give rewards that are relevant to the behaviours you want: settling quickly, completing tasks, following rules etc. Be careful of competitive rewards. The best reward is descriptive praise. You may also choose: a note home to parents, name on a special chart, giving responsibilities, being allowed to go first, having extra choices.

USE CLEAR AND SPECIFIC INSTRUCTIONS Get your children's full attention. Use an auditory cue eg clap your hands, strike a chime bar, give me five, or a visual cue eg hold one arm up. Give an instruction once; too many repeats can unwittingly train a pupil not to bother listening as they know you will repeat. Don't be too wordy, don't imply choice when there isn't any, using words like, 'Ok, how about'. Have some children repeat back to you the instruction.

THE CONSEQUENCE OF NON-COMPLIANCE Help children to do what you have asked them to do. If they have thrown sand out of the tray, help them with the clearing up. If they disobey instructions wait, do not give up, keep waiting and rewarding moves in the right direction, and praise them for not doing the wrong thing again. A consequence should be uncomfortable but not build resentment.

ESTABLISH START OF ACTIVITY ROUTINES Don't start an activity until everyone is ready. It is not your role to force nor is it theirs to resist, delay, distract or wind up. Have a routine which becomes a habit for the children to respond to.

USE POSITIVE CLASSROOM RULES Children need to know what is expected of them. Establish no more than 4 or 5 rules. Display prominently in the room and refer to them frequently. They should tell the child what you want rather than what not to do eg 'Put your hands up and wait to speak', rather than 'Don't shout out!'

CATCH THEM BEING GOOD Praise is a very powerful motivator. Be willing to appreciate small effort and explain why it pleases you. Sometimes we overlook positive behaviours such as homework in on time, neat desks, using common sense. Children will not resent a firm decision if it is made calmly, with a smile, and without criticism. Do not be bullied into giving rewards that have not been earned. Use a reward system consistently and fairly.

DEAL WITH LOW LEVEL BEHAVIOURS QUICKLY Unchecked low level behaviours can escalate quickly. Often behaviours get reinforced when they get attention, but don't be tempted to ignore them. Keep calm and find a quiet way to let the child know that you see what they are doing and that there is a consequence, without getting cross, making a fuss or sounding annoyed. Always follow through so that children know there is no point in testing. Only give second chances after a period of good behaviour.

FIND 'BEST FOR BOTH OUTCOMES' Avoid the situations where either you or the child has to back down. Talk to the child in terms of choices and outcomes; give them time to make their choice, eg 'David, put the sweets in your bag or on my desk thank you'. Give two chances then follow through with putting them on your desk and tell him that he can have them back before he goes home.

MANAGE THE END OF AN ACTIVITY Do not run an activity up to the last minute. Allow time for questions, tidying and planning for the next activity. Manage a good exit, standing by a door or behind their chair. Address each child by name; praise their work or something that has been good that day. Send them out one by one.



Websites for Information

www.communication4all.co.uk : For symbols to make your own materials.
www.do2learn.com: Educational resources for special needs
www.enchantedlearning.com : educational resources site
www.boardmaker.co.uk: communication software
www.thegreycentre.org : Good for social stories and social understanding
www.oasis.co.uk; Provides a wide range of information sheets giving advice, assistance, support and information on special needs.
www.wiltshire.org.uk: Early Years **SENCO Toolbox**



Resources and Equipment

www.senteacher.com
www.specialneedstoys.com
www.specialdirect.com
www.sensetoys.com
www.rompa.com

A '5' could make me loose control: An activity-based method for evaluating and supporting highly anxious students by Kari Dunn Buron www.amazon.co.uk



Publications for Further Reading

The National Strategies Early Years: **Inclusion Development Programme. Supporting children with Behavioural, Emotional and Social Difficulties: Guidance for practitioners in the Early Years.** Can be ordered or down loaded at: www.standards.dcsf.gov.uk

Promoting Children's Mental Health Within Early Years and School Settings.

DFEE 0121/2001. Can be ordered or down loaded at: www.standards.dcef.gov.uk

Including children with Attention and Behaviour Difficulties in the Foundation Stage, Maureen Garner
www.acblack.com Featherstone Education

Removing Barriers to learning in the Early Years, Cousins Angela Glenn, Jacqui Cousins and Alicia Helps David
Fulton Publishers www.fultonpublishers.co.uk

Tools for teachers: Practical resources for classroom success By Victoria Erbes Autism Education Trust
www.autismeducationtrust.org.uk

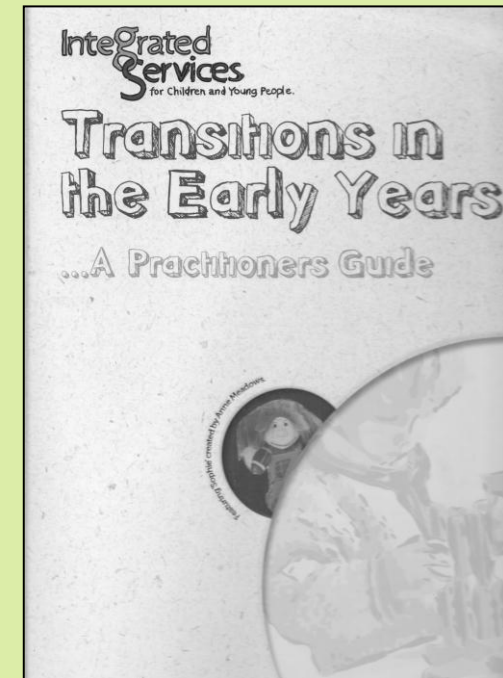
Transitions in the Early Years

Transitions in the Early Years – A Practitioners Guide

Greater Shankill ISCYP Transition Project in partnership with local stakeholders has compiled an excellent Transition Resource File for early years providers operating in the area.

A copy can be downloaded from the BELB website and includes research, practical advice and photocopiable resources for practitioners and parents to support transitions, as well as practical information for parents on toilet training, children's behaviour, use of dummies and starting school.

The following information is adapted from this resource; however it is recommended that you read the transition resource file in full.



Introduction

Transitioning from one setting to another has been found to be stressful and challenging for young children, parents and practitioners; resulting in this being identified in research as one of the major challenges of early childhood. Ghaye & Pascal (1998), Meggitt (2003).

Research and practice has further identified that it is essential that everyone in this process has an understanding of their key role and how this relates to the child's own experiences, capabilities and individual needs up to and beyond this point.

This will involve helping children to build resilience to cope with change, to develop positive self-esteem, to have appropriate expectations, understand new routines and build up their independence.



Research around transition highlighted

- The need for nurseries and schools to become child centred and fit around the needs of the child rather than expecting the child to 'fit in' to the school.
- The need for training and opportunities for staff to share information and meet children in familiar environments before starting school.
- Closer collaboration between nursery or pre-school experiences, home and school to aid better transitional experiences for the child.
- Parents need to be given further information and support themselves in order to adequately support and prepare children.
- Children arrived at school with their own expectations based on their siblings and parents experiences and attitudes, often these are not accurate or met, leaving the child confused and anxious.
- Common fears and anxieties for children included the size of the buildings, the greater number of children and adults around them, eating in the dining hall, the school bell, the toilets etc, confusion about routines, the playground.
- If a child is anxious or feeling emotionally insecure, he or she will struggle to learn new information, this may also manifest in a child's behaviour as; poor concentration, withdrawal, being upset, poor or negative behaviour, regression being quiet etc.
- Ideally the best time to work on transition in preschool/nurseries/schools is from January to June of the term before starting school.



Transitions in the Early Years



Some suggested strategies to assist the child in transition



Planning-

- Provide clear information to parents and carers on how they can support positive transition, on the new school/setting, the key people in the school/setting for the child, the routine of the day and settling in procedures, well in advance of the child starting so the process of planning for change can begin.
- Provide opportunities for the child to visit the school/setting with parents and carer's so they become familiar with the size, activity and noises in the school/setting.
- Carry out visits to the pre-school settings whose children move to your school, to meet the children in a familiar setting which they are already emotionally secure in.
- Carry out home visits to meet the child in their family environment to assist the child to begin to build positive connections.
- Provide an opportunity for the children to come for lunch or snack in the school/setting and eat with a parent, to assist with familiarisation and promote acceptance of this routine.

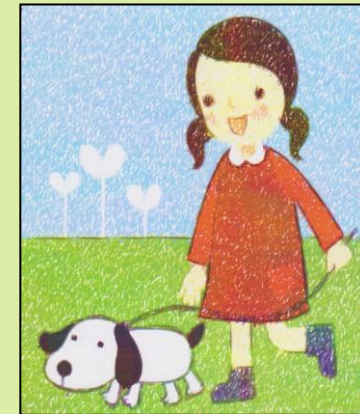
Following transitioning-

- Give children time to settle into the new routines, promote the most familiar activities to the child initially so they can experience continuity from previous experiences.
- Have lunch for the children initially at an earlier time to enable them to become familiar with the routine and settling in first before they have to cope with sharing this experience with the rest of the school and the increased noise level of the other children.
- Stagger the intake of children and set an earlier finishing time so the children become gradually accustomed to being part of a larger group.
- Hold a parent and child play morning once a week for the last hour of the day for the first few weeks to encourage the child to feel that they and their parents are welcome and part of the pre-school/school community.
- Encourage the older children to look after the younger children throughout the day, especially at lunch times and playtimes, perhaps with a buddy scheme.

- Provide an adult who can support and extend play with the children during playtimes to assist the children to form friendships, develop appropriate games and rules and encourage everyone to join in. This aspect of school day has been identified as difficult for children because of the unfamiliarity and the need to negotiate new relationships with peers.
- Invite parents to come in and discuss how their child is settling in and how this process can be further assisted. This will encourage parental involvement and partnership will be beneficial for supporting the child with any difficulties as early as possible in the school/setting.

Transitions and considerations for practitioners

Although much of the theory of transition and the benefits of positive transitions are similar, there may be different challenges faced and considerations to be made according to the setting, age group and experiences of the children prior to starting.



Playgroup

Often this is the child and parents first experience of a group setting where the child makes a break from the parent. This offers the child the opportunity to become more independent but presents challenges in terms of emotional separation from their main carer, differences in routine and being part of a group of peers.

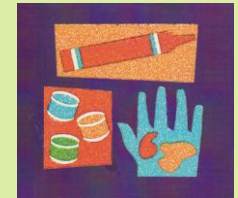
- Moyles (2001) states that hopeful beginnings must be nurtured if they are to come to fruition, this is the starting point for nurturing a positive attitude towards education and learning for many children and it is the responsibility of the practitioner to cultivate this.
- Ensure parents feel involved and included in this aspect of their child's life and development, by providing relevant parent friendly information and reassuring parents so they feel relaxed and confident about their child's wellbeing and progression through this phase.

Transitions in the Early Years

Nursery

Often nursery is the child and parents first experience of a structured play and learning environment. The child will transition from being a very young child requiring much practical support towards greater independence and learning. Therefore there is a great deal of pressure on all pre-school provision to ensure that it is a positive quality experience which meets the emotional needs of the child as it will impact on all future expectations and attitudes for the child and the parent.

- Children may have experienced different routines and types of care and play experiences by the time they arrive at Nursery, one of the challenges for the practitioner will be in assisting the children and parents to prepare for and adapt to the new routine.
- The teacher will also consider when each and every individual child is ready to progress with the settling in period and is emotionally secure and ready to cope with the expectations and routine of the nursery day. Roffey & Reirdan (2001) stated a lack of this emotional wellbeing stifles the child's ability to build positive relationships with others and become active learners.



Primary School

Research suggests that opportunities planned to promote socialisation or 'enculturalisation' are essential for facilitating young children's successful integration into school. The role of the adults in being sensitive to the needs of the child and to seeing the child's perspective during this phase is crucial too for successful transition.

- Some children may have come to primary school straight from home with no previous experience so those children may be coping with separation from their parent or primary carer for the first time as well as coping with the demands of the new routine and demands placed on them. Their parents too may be coping with this initial separation and feelings of displacement in their child's life. The challenge for teachers will be to offer parent friendly information and encourage as much participation and opportunity as possible to engage the child and parent in order to alleviate these anxieties for both.
- Although research shows it is mainly beneficial if children have previous experience in a group setting prior to school, some difficulties have been identified when the child has difficulty settling into the school routine that is very different from previous experience.



Some general strategies

- Develop a booklet on starting pre-school nursery or school using a puppet/doll with short phrases or words underneath to leave with the child, so the parent and child can develop an understanding of the setting and open up discussion on how the child may be feeling. .
- Around the same time that parents are making choices about where to send their child to their next setting, give parents information on assisting positive transition and share information on ways to plan ahead for this, including the benefits of starting school with a friend etc.
- Invite outgoing parents and children to share a session with incoming parents and children if space allows or split the children and parents and run over two days. This facilitates the older children to play with the younger children and provides opportunities for the children to learn from each other. At the same time allowing the parents to share experiences and discuss fears and worries with parents who have already experienced those some concerns and managed to cope.
- Display photographs of the child's new teacher in your setting.

Useful Websites listed in the Transition Folder include

www.nottinghamcity.gov.uk Speech and language Therapy Resources to download
www.ncac.gov.au Putting Children First-National Childcare Accreditation Council Inc
www.puppetsbypost.com Living puppet sales website
www.playschoolrainbow.org/transition-rhymes.htm Preschool songs and rhymes
www.edact.org Bouncing Back- Building Resilience in Young People
www.early-educayion.org.uk Learning Together Series
www.parentcentre.gov.uk Resources about nursery and school
www.lifestartfoundation.org Information & Support for Parents



Signs and Symptoms of abuse

Child abuse means ill treatment or neglect leading to physical, sexual or emotional injury or harm. The following illustrations outline common indicators of abuse and neglect. These signs are not a definitive checklist; indeed many of them could have other explanations.

Neglect – Physical Indicators

- Constant hunger
- Poor state of clothing and/or personal hygiene
- Untreated medical problems
- Emaciation / distended stomach
- Constant tiredness

Physical Abuse – Physical Indicators

- Unexplained bruises or burns particularly if they are recurrent
- Human bite marks, welts or bald spots
- Unexplained lacerations, fractures or abrasions
- Untreated injuries

Neglect – Behavioural Indicators

- Tiredness, listlessness
- Lack of social relationships
- Compulsive stealing, begging or scavenging
- Frequently absent or late
- Low self-esteem

Physical Abuse – Behavioural Indicators

- Self-destructive behaviours
- Improbable excuses given to explain injuries
- Aggressive or withdrawn
- Fear of returning home
- Reluctant to have physical contact
- Clothing inappropriate to weather – worn to hide part of the body

Emotional Abuse – Physical Indicators

- Sudden speech disorders
- Signs of mutilation
- Signs of solvent abuse (eg mouth sores, smell of glue, drowsiness)
- Wetting and/or soiling
- Attention-seeking behaviour
- Poor peer relationships

Sexual Abuse – Physical Indicators

- Soreness or bleeding in the genital or anal areas or in the throat
- Torn, stained or bloody underclothes
- Chronic ailments such as stomach pains or headaches
- Difficulty in walking or sitting
- Sexually Transmitted Diseases (STDs)

Emotional Abuse – Behavioural Indicators

- Neurotic behaviour (eg rocking, hair twisting, thumb sucking)
- Reluctance for parental liaison
- Fear of new situations
- Chronic runaway
- Inappropriate emotional responses to painful situations

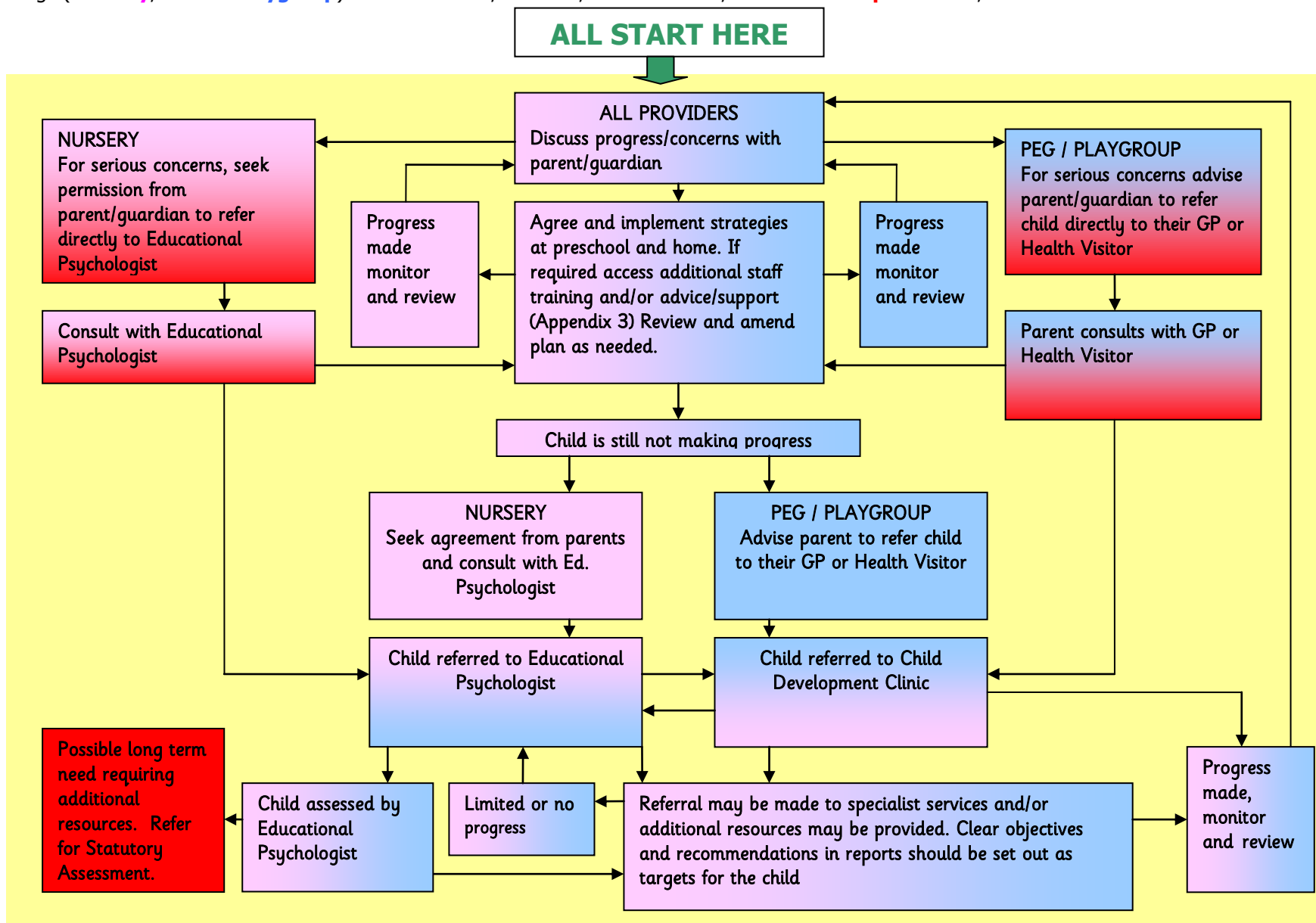
Sexual Abuse – Behavioural Indicators

- Be chronically depressed
- Inappropriately seductive or precocious
- Sexually explicit language
- Low self-esteem, self de-valuation, lack of confidence
- Recurring nightmares / fear of the dark
- Outbursts of anger / hysteria
- Overly protective to siblings

Appendix 2

BELB Pathway for early years providers seeking staff training and/or additional advice/support for children.

In cases where strategies and interventions have been implemented but no progress is evident further expertise may be required to inform planning, to provide staff training or to undertake an assessment of the child. The chart below demonstrates the referral route dictated by the different types of early years settings (**Nursery**, **PEG** or **Playgroup**) within the BELB, however, for most cases, and for all **complex cases**, the end result should be the same.



The BELB has a duty to fund the provision as set out in the statements of children with special educational needs, Stage 5 of the Code of Practice on the Identification and Assessment of Special Educational Needs (SEN). Children who require a statutory assessment and ultimately have a statement of special educational needs are in a very small minority. Within the BELB the majority of those with statements for SEN attend special school. The criteria for initiating statutory assessments have been agreed regionally and are set out in **The Provisional Criteria for Initiating a Statutory Assessment (2009)**. Meeting these criteria is often dependant on the scores achieved in standardised tests and on the school/setting demonstrating that it has made reasonable adjustments to address the child's needs. The provisional criteria document was accompanied by the **Good Practice Guidelines (2009)**. This document outlined the interventions and reasonable adjustments across a range of SEN expected to be undertaken by schools and settings prior to considering the need for a statutory assessment. It is most important that both the interventions and the criteria are adhered to if children are to be treated equitably. This targeted approach should ensure that children in the greatest need receive the support they require.

However it is acknowledged that within the BELB area there are many children, who while not meeting the criteria for statutory assessment clearly require some additional support if they are to make progress and fulfil their potential. Much of this can be addressed at Stages 1-3 of the Code of Practice (COP). Best practice is when settings and services join up to share skills build capacity and deliver integrated and cost effective services. This is exemplified for instance in the **COMET Project**, the **CIDS Team** and the innovative work going on with schools and family support workers in the Shankill and West Belfast through **Integrated Services for Children and Young People**.

It is particularly important in a child's early years that parents should be fully involved with any interventions being carried out with their children. Assisting parents to support their children will be of far greater benefit than isolated child focussed interventions in the preschool setting.

In addition to the contacts mentioned in this handbook the BELB maintains an External Agencies Database on their website www.belb.co.uk to facilitate the forging of partnerships and accessing external support. The database provides service descriptors and contact details for a range of statutory, voluntary and community services that preschool providers can access directly. All agencies included accept open referrals, some offer direct support for children and /or their families as well as professional development for staff.

Appendix 3

Accessing additional staff training and /or advice and support

All special schools within the board area have a great deal of expertise in supporting children with a wide range of SEN in mainstream settings. The special schools are happy to be contacted to; facilitate visits for observation of resources and teaching approaches, arrange work shadowing for professional development and/or provide advice for any staff working with children with SEN in early years settings. Some also offer accredited courses outside school hours.

Contact details for those schools with nurseries and KS1

School	Specialism	Telephone	School	Specialism	Telephone
Cedar Lodge	Medical Needs, Autism	90777292	Fleming Fulton School	Physical Disability	90613877
Greenwood House Assessment Centre	Speech & Language, Autism	90471000	Harberton School and Outreach Service	Moderate Learning Difficulties (MLD), Specific Learning Difficulties (SpLD) Autism, Social Emotional and Behavioural Difficulties (SEBD)	90381525
Mitchell House	Physical Disability	90768407	St Gerard's Resource Centre	Moderate learning Difficulties (MLD), Specific learning Difficulties(SpLD) Autism	90245593
Oakwood School and Assessment Centre	Profound and Multiply Learning Difficulties (PMLD), Severe Learning Difficulties (SLD), Moderate Learning Difficulties (MLD), Autism	90605116			

The SEN Advice and Information Officer, Children and Young People's Services, Belfast Education and Library Board, 40 Academy Street, BELFAST BT1 2NN, Tel: 028 90564273, Fax: 02890564186 will be pleased to assist with any queries.

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Avoca Playgroup	LAC in Education Team, BELB and BHSCT
Behaviour Support Team, BELB	Literacy Team, BELB
Child Protection Service, BELB	Malvern Primary School
CIDS Team BHSCT	Mitchell House School
COMET project, BELB	Oakwood Assessment Centre
DE Capacity Building Team	Oakwood ASD Service
Early Years AAO, BELB	Parent Support Programme, BELB
Early Years Day Care	Peripatetic Support Service SpLD, BELB
Edenbrooke Primary School	Peripatetic Support Service (Hearing Impairment) BELB
Edenderry Nursery School	Peripatetic Support Service (Visual Impairment) BELB
Education Welfare Service	Regional Inclusion and Diversity Service
Educational Psychology Service, BELB	Riddell Crèche
Edmund Rice Primary School	SEN AO BELB
Enniskillen Central Nursery	Shankill Integrated Services for Children & Young People
GlenCraig Nursery School	Special Education, BELB
Glenwood Primary School	Speech and Language Therapy, BHSCT
Greenwood House Assessment Centre	Springhill Primary School
Harberton School and Outreach Services	Star of the Sea Primary School
Harmony Nursery School	St Martin's Nursery School
Hillcrest Day Nursery	St Teresa's Primary School
Hobbyhorse Playgroup	Sure Start
Holy Child Primary School and Nursery Unit	Taughmonagh Primary School
Holy Trinity Primary School	West Belfast Integrated Services for Children & Young People
CIDS Team BHSCT SENCo Cluster: Botanic PS, Holy Cross Boys PS, Lisnasharragh PS, Loughview Integrated PS, Millennium Integrated PS, St Clare's PS, Taughmonagh PS, Victoria Park PS, St Joseph's (Slate Street) PS, St Teresa's PS, St Aiden's PS.	

If you have any queries in regard to this handbook please contact Jill Trotter, Assistant Senior Education Officer, Children and Young Peoples' Services, BELB. Email: jill.trotter@belb.co.uk

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Early Years Learner Support Handbook

Personal notes and contacts

Early Years Learner Support Handbook

Personal notes and contacts

Published May 2011.
Copies of this handbook can be downloaded from

www.belb.co.uk