



## St Mary's C of E School

"DON'T LET ANYONE LOOK DOWN ON YOU BECAUSE YOU ARE YOUNG. BE AN EXAMPLE TO ALL BELIEVERS IN WHAT YOU SAY, IN THE WAY YOU LIVE, IN YOUR LOVE, YOUR FAITH AND YOUR PURITY."  
1 TIMOTHY 4:12

## THE SUNRISE CURRICULUM

*Strategies for supporting pupils with  
Special Educational Needs and Disabilities in  
PSHE and RSE lessons.*

	<i>Here's how we will help.</i>
<i>Attention Deficit Hyperactivity Disorder</i>	<ul style="list-style-type: none"><li>• <i>Trusted and attuned adults</i></li><li>• <i>Emotional Coaching</i></li><li>• <i>Consider seating arrangements to minimise distractions (eg at the end of a row, or the back of the classroom).</i></li><li>• <i>Paired working, or support from a positive role model may help the child to focus. They may also struggle to work in a group, so paired seating may be preferable;</i></li><li>• <input type="checkbox"/> <i>Allow a calming-down period before the lesson starts, especially if it follows a breaktime/lunchtime,</i></li></ul>

	<p>as transition points may be difficult for the child to manage.</p> <ul style="list-style-type: none"> <li>• Use of a timer will provide a focus for the child's attention, enabling them to complete a task;</li> <li>• Calm down space available</li> <li>• Consider which rewards you might use to reinforce positive behaviour (in discussion with the child) and ensure these are given immediately upon task completion;</li> <li>• A 'stress ball', or other fiddle object (agreed by the SENCO) may help with concentration.</li> <li>• Ensure instructions are delivered clearly, concisely and step by step. Ask the child to repeat them back, or have them written on a prompt sheet;</li> <li>• Encourage the use of pictures, or diagrams to represent thoughts and ideas;</li> <li>• <input type="checkbox"/> Provide a mix of activities to suit a range of learning styles, especially including kinaesthetic activities. With this in mind, plan in time-limited learning/ sensory breaks to allow for the release of excess energy. (an active 'job' might be useful strategy to break up the lesson).</li> </ul>
<p>Anxiety</p>	<ul style="list-style-type: none"> <li>• Ensure that you are familiar with the cause of anxiety for the particular child and how this manifests, bearing in mind that sometimes there may be no outward signs at all. Knowing the child really well will help with this. This is especially important in a subject such as PSHE, which often involves discussing feelings, thoughts, memories, families and, sometimes, sensitive issues.</li> <li>• Trusted and attuned emotionally available adult</li> <li>• Seating plans are very important for the child with anxiety. Let them know before the lesson if the usual seating plan is due to change during the activity. Carefully plan groupings/pairings and be aware of who the child feels most comfortable with sitting next to and having them support them with their work.</li> <li>• Ensure the child is prepared and knows what to expect prior to the lesson. This may include a list of vocabulary that will be covered, the activities involved etc.</li> <li>• If a supply teacher (or another member of staff) is</li> </ul>

	<p>covering a lesson, ensure that the child is made aware of this, so that it is not a surprise to them.</p> <ul style="list-style-type: none"> <li>• Consider the use of a 'help' card, which the child can use if they feel anxious/overwhelmed, so that they can go somewhere they feel safe to calm down.</li> </ul>
<p><b>Autism Spectrum Disorder</b></p>	<ul style="list-style-type: none"> <li>• A child with ASD may find PSHE a particularly challenging curriculum area, however, using some of these strategies may help provide the environment for them to feel safe and secure in order to access the activities:</li> <li>• Take time to build a good, trusting relationship with the child. This will also help adults understand the most appropriate way to respond to any behaviour, at a given time;</li> <li>• When planning group work, ask the child who they would prefer to work with, or offer the chance to work by themselves (or with their TA).</li> <li>• Ensure that groups/pairs are carefully planned to provide supportive/positive role models;</li> <li>• Ensure that both the child and their TA are prepared for what is coming up next and what the lesson is about, so that they know the expectations.</li> <li>• Ensure you pre-warn the child (and TA) of any changes, to avoid anxiety and allow them both time to prepare for the change;</li> <li>• Be mindful of sensory processing difficulties and ensure the learning environment is neither over, or under, stimulating for the child;</li> <li>• Provide a safe, familiar calm down space for the child, so that they can have sensory breaks when needed;</li> <li>• If the child's behaviour becomes challenging, it is important to remember that this is often communicating a need, or difficulty. Look beyond the behaviour and ask for support from the SENCO if necessary.</li> <li>• Sometimes, the child may just need time out from the class in their calm down space and may then feel ready to return again to the class;</li> <li>• Display in class what is coming up next (as another way of preparing the child).</li> <li>• Role model and encourage positive and supportive</li> </ul>

	<p>behaviour to the child's peers.</p> <ul style="list-style-type: none"> <li>• Provide vocabulary, structure, or starting ideas for the lesson.</li> <li>• Use visuals and structured tasks, incorporating the child's own interests wherever possible.</li> <li>• Allow the use of fiddle toys in class. The child may also prefer to sit on a gym ball/wobble cushion/special seat to provide sensory feedback and help them self-regulate and focus;</li> <li>• <input type="checkbox"/> Some of the lesson plans for PSHE may be suitable to be adapted to social stories, as a familiar way for the child to access the learning intensions for the lesson.</li> <li>• Avoid open-ended questions;</li> <li>• Provide time to process information;</li> <li>• Encourage the child to demonstrate/present their learning in alternative ways which suit them;</li> <li>• Provide clear timelines for when things need to be achieved and make expectations really clear (ie how many sentences, how many pieces of work etc to be completed in a time frame, or before a reward is achieved).</li> </ul>
<p><i>Dyscalculia</i></p>	<ul style="list-style-type: none"> <li>• Provide print outs of diagrams and visual support in lessons.</li> <li>• The child may work slower than peers. Be sensitive to this and supportive of any additional time/repetition they may need;</li> <li>• The child may become easily overwhelmed and anxious; they may shut down and employ avoidance strategies. You can interrupt this cycle by scaffolding the child's work and supporting them.</li> </ul>
<p><i>Dyslexia</i></p>	<ul style="list-style-type: none"> <li>• Keep sentences and written instructions short and simple to read;</li> <li>• Check reading ages and ensure any work is differentiated appropriately;</li> <li>• Use pastel shades of paper (cream is a good alternative to white).</li> <li>• Avoid black text on a white background and light text on a dark background;</li> <li>• On worksheets, leave plenty of space to write a response.</li> <li>• Familiarise yourself with any resources/equipment the</li> </ul>

	<p>child needs to support them and ensure that these are readily available during their lesson. For example: It may help to use a ruler, or finger to track the words as they read; A personalised, coloured overlay, or ruler may help cut down on visual contrast and help 'stabilise' any written materials. It may be worth trying a variety of colours to work out the best to use;</p> <ul style="list-style-type: none"> <li>• Help the child to learn and understand any specific vocabulary. This maybe done visually, practically and/or during a pre-teach session to build the child's confidence before the lesson;</li> <li>• The child may prefer it if an adult (or supportive peer) reads through questions with them;</li> <li>• Be supportive of the child if they don't want to read aloud in front of the class (either offering to read it for them, asking a friend to read it, or checking with them beforehand if they would like it shared).</li> </ul>
<h2>Dyspraxia</h2>	<ul style="list-style-type: none"> <li>• Provide a large space for the child to work in. This will allow the child room to move and remain active when completing a task. They may also prefer to stand when handling any equipment/physical resources.</li> <li>• Provide part-prepared handouts to reduce unnecessary writing and lists of key concepts; or vocabulary;</li> <li>• Provide templates with headings to help the child structure their work;</li> <li>• Clarify rules and expectations, using unambiguous language;</li> <li>• Allow extra time to complete work, with movement breaks when needed;</li> <li>• Allow time to settle, especially if the lesson is after a breaktime/ lunchtime, as transitions are challenging;</li> <li>• Give the child plenty of warning that the lesson is due to end.</li> </ul>
<h2>Hearing Impairment</h2>	<ul style="list-style-type: none"> <li>• Discreetly check that the child is wearing a hearing aid (if applicable) and frequently check-in with the child that they are hearing and understanding;</li> <li>• Be aware of seating arrangements to suit the child's specific needs, for example if they are reliant on lip reading etc (ie seated towards the front of the classroom with an unobstructed view, or with their good ear facing outwards into the classroom);</li> </ul>

	<ul style="list-style-type: none"> <li>• Ensure that any background noise is minimised and control class/group discussions, so that only one person is speaking at once;</li> <li>• Ensure any videos/films used are captioned, or a suitable alternative way is provided;</li> <li>• Provide (in a written format) any lists of subject-specific vocabulary and technical terms;</li> <li>• Repeat clearly any questions asked by other students in class before giving a response;</li> <li>• Assist with lip reading by doing the following: <ul style="list-style-type: none"> <li>- ensure your face is clearly visible at all times when speaking and sitting directly opposite the child whenever possible;</li> </ul> </li> <li>• Seating the child so that they can see others in the class (where possible);</li> <li>• Ensuring the lighting is adjusted so that it is not too dark;</li> <li>• Be aware of the specific circumstances for the child and adapt accordingly.</li> </ul>
<h3>Toileting Issues</h3>	<ul style="list-style-type: none"> <li>• Let the child leave and return to the classroom discreetly and without having to get permission whenever they need the toilet (use a 'toilet pass' if appropriate);</li> <li>• Sit the child close to the door so that they can leave the classroom, discreetly;</li> </ul>
<h3>Cognition and Learning Challenges</h3>	<ul style="list-style-type: none"> <li>• Ensure all classroom adults give specific, targeted praise so the child knows exactly what they are doing well;</li> <li>• The child will have visual and auditory memory for information, processes and instructions. Ensure all classroom adults are aware of this and they regularly check the child's understanding of questions and tasks. This will support the child with staying on track;</li> <li>• Carefully consider working pairings/small groups. Support the child with managing peer relationships effectively by providing a positive work 'buddy';</li> <li>• Support the child to overcome problems with understanding instructions and task requirements by using visual timetables and prompt cards with pictures as reminders of the steps needed to complete the task;</li> </ul>

	<ul style="list-style-type: none"> <li>• Provide a word bank, with key vocabulary for the topic/area being studied;</li> <li>• Provide key words with pictures/symbols to help with the child's memory;</li> <li>• Provide a writing frame to help structure work;</li> <li>• Carefully plan and differentiate work, breaking it down into small manageable tasks;</li> <li>• Provide time to consider questions, process and formulate an answer. Slow down and/or reduce the number of words that you use;</li> <li>• Go over key vocabulary and ideas with to check understanding;</li> <li>• Physically demonstrate tasks, rather than relying on verbal instructions;</li> <li>• Repeat information in different ways, varying the vocabulary you use.</li> <li>• Also, keep instructions simple;</li> <li>• Use structured questioning to support and help the child to answer by scaffolding their response;</li> <li>• Encourage the child to make a mind map, or other visual representation of what they already know and use that as a starting point to teach next steps.</li> </ul>
<p style="text-align: center;">Speech, Language + Communication Needs</p>	<ul style="list-style-type: none"> <li>• Create a relaxed, safe and friendly environment with lots of opportunities to talk.</li> <li>• Provide plenty of opportunities for the child to communicate</li> <li>• Carefully consider any pairings or groupings and include good communication role models for the child to copy;</li> <li>• Ensure all adults respond positively to any attempt the child makes at communication, not just speech. Role model this positive response for the child's peers to copy;</li> <li>• Listen carefully to what the child says, so that they don't need to repeat themselves;</li> <li>• Provide a low distraction/quiet area for the child's group/pair to work so they can focus on their communication;</li> <li>• Regularly check understanding and encourage the child to identify what they can/cannot understand.</li> <li>• Use signs, symbols and visual timetables to support communication;</li> </ul>

	<ul style="list-style-type: none"> <li>• Use visual displays (objects and pictures) that can be used to support understanding;</li> <li>• Be aware of the specific communication difficulties the child may have -it may be a processing disorder;</li> <li>• Be aware of the level of language the child is using and use a similar level to ensure they understand;</li> <li>• Do not rush, or interrupt the child as this means they have to begin processing all over again from the beginning, causing frustration!</li> <li>• Slow down your rate of speech by using pausing and give the child lots of time to process and reply</li> <li>• Allow time for the child to finish what they are saying, don't finish it for them;</li> <li>• Keep language simple by breaking long sentences into short separate ideas;</li> <li>• Provide plenty of repetition (activities and vocabulary);</li> <li>• Use non-verbal clues to back up what you are saying eg: gesture;</li> <li>• Ensure adults are providing a clear language model and expand what the child says, by repeating their words back to them correctly, without pointing out their errors;</li> <li>• Reduce the number of questions you ask and make sure you give time to answer;</li> <li>• If you do need to ask questions in front of the class, try to use closed questions, as these require only a 'yes'/'no' answer, which will reduce anxiety.</li> </ul>
<p style="text-align: center;"><i>Tourette Syndrome</i></p>	<ul style="list-style-type: none"> <li>• Be mindful when planning activities, that the child may experience sensory processing difficulties, where they may be either overresponsive, or under responsive to sensory stimuli, eg: noise, clothing, textures.</li> </ul>
<p style="text-align: center;"><i>Experienced Trauma</i></p>	<ul style="list-style-type: none"> <li>• Ensure you are very familiar with the child's past experiences and context, as this will help you understand their behaviour;</li> <li>• Ensure all classroom adults take a non-confrontational, trauma-informed approach. A</li> </ul>



	<p>discreet, understanding and reassuring approach from all classroom adults is vital;</p> <ul style="list-style-type: none"> <li>• Provide a safe, consistent and warm classroom environment. Incorporate as many opportunities for humour and laughter in lessons as possible (as laughter reduces the traumatic response in the brain);</li> <li>• Classroom adults need to be emotionally available and able to support and coach the child in ways to calm themselves and manage emotions, as well as opportunities to practise de-escalating when they feel overwhelmed;</li> <li>• Ensure adults are vigilant to and mindful of any trigger points for the child, as this will help de-escalate emotional situations;</li> <li>• Very carefully check through the lesson content prior to the session and look at it through the eyes of the child's context and background. There may be obvious trigger points that can be planned for and managed prior to the lesson, with some elements needing to be avoided. Equally, there may be trigger points in the lesson, which may not be so clear from the</li> <li>• outside. Ensure that the classroom environment, available adults and overall support for the child is strongly in place should this arise.</li> <li>• Provide a safe and familiar calm down space for the child to use during times when they feel overwhelmed or emotionally dysregulated. The child may also need access to a space to exercise, so that they can have regular learning/ sensory breaks;</li> <li>• Consider the use of a 'help' card (or small item) for the child to use to signal that they are finding the situation tricky, without having to vocalise any details;</li> <li>• Have consistent expectations and behaviour plans in place that are based on reward systems, not punishment.</li> </ul>
<p><b>Visual Impairment</b></p>	<ul style="list-style-type: none"> <li>• Keep your classroom visually uncluttered and reduce the number of objects in the immediate working area;</li> <li>• Be mindful of seating arrangements and discuss any preferences with the child. For example, they may prefer to work at close distances, (such as sitting</li> </ul>

closer to the board), or move the object closer to them, (such as people getting closer when talking);

- Be aware of the specific circumstances of the child, for example:
  - If they are sensitive to light and glare, control the light in the classroom using blinds, sit the child with their back to windows and reduce the glare on surfaces;
  - The child may need to be seated near natural light, where possible;
  - The child may need to use a lamp, which should be placed behind their shoulder on the opposite side to their writing hand and/or on the same side of their stronger eye;
  - They may need to wear a hat/visors, or sunglasses even when staying indoors. Be sensitive to this and mindful of other pupils comments/ reactions surrounding this;
- - High contrast objects/pictures may be beneficial. As best practice on handouts/presentations, black and white give the highest contrast. Do not use dark colours together (like blue and green). Avoid using white and grey with other light colours. Avoid pastel colours next to each other. In addition, avoid the use of red or green pens on the whiteboard, as these can be difficult to see;
- Warn the child of changes in lighting, as this can cause extreme eye strain and headaches.
- Familiarise yourself with any specific resources the child needs to support them; for example:
  - they may be better able to read their own writing if they use a thicker black pencil/pen/marker;
  - they may need a typo scope when reading. This is a reading shield made of a black material with a rectangular cut out. It reduces extra light reflected from the surface of the paper and helps assist with staying on the correct line while reading;
  - ensure the child is wearing any prescribed glasses to reduce visual fatigue;
- Provide enlarged/magnified pictures, images, maps and print. The VI team will have assessed the child's vision and recommended a font size and typeface to

use. The SENCO will advise on this.

- Allow the child to take a break from their work, as this enables them to be visually focused for shorter periods of time and prevents fatigue;
- Allow more time when visually exploring a material and when completing a visually challenging tasks;
- If the child has central visual field loss, they may experience incomplete images, or a central "blind spot" when looking. This may mean they appear not to maintain direct eye contact. Be sensitive to this and manage any comments/reactions from their peers.