

SEND PROVISION MAP	Universal	Setting specific	SEN specialist provision
<p>Communication and interaction</p>	<p>We promote a language rich environment</p> <p>Daily singing sessions</p> <p>Varied story times with puppets, felt stories, story bags</p> <p>Practitioners model language and rephrase children’s speech to extend the language use and/or model speech sound production</p> <p>Open ended questions are used to stimulate conversations.</p> <p>Practitioners use prompts such as “I wonder..” rather than direct questions</p> <p>Opportunities are developed to enable children to make and communicate their choices e.g. snack time</p> <p>Practitioners use a wide range of communication strategies in</p>	<p>Practitioners modify their language to support children experiencing some delay in expressive and/or receptive language.</p> <p>Practitioners plan activities to support specific areas of focus in language with small groups of children e.g. vocabulary building / negotiating & social communication.</p> <p>Practitioners offer choices with reduced options to support children having difficulty making or expressing choices or preferences.</p> <p>Signs and symbols are used by practitioners, and within the environment, to support specific groups of children to develop their expressive and/or receptive language</p> <p>Practitioners are supported by</p>	<p>Practitioners focus on developing areas or aspects of language advised by therapists and adopt specific strategies identified e.g. working with LEAP</p> <p>Practitioners are involved in the delivery of specific programmes for identified children, though these are generally offered within the context of 'normal' nursery provision e.g. LEAP</p> <p>Targeted outcomes are devised for SSPs with advice and guidance from other professionals such as SALT or occupational therapists.</p> <p>Where possible children requiring support will be supported through an enhanced adult ratio.</p> <p>Staff access training and/ advice to meet specific needs of individual children. For example, Picture Exchange Communication System (PECS), Colourful</p>

	<p>everyday practice including gestures, signs, pictures or symbols</p> <p>We have introduced basic Makaton Signs at key times e.g. snack time allowing children to answer 'yes', 'no' or ask for 'more'.</p> <p>Practitioners use these general communication strategies and we share these with parents to use at home:</p> <ul style="list-style-type: none"> • Adults get down to child's level and use their name to gain their attention • Talk about the child's interests and follow their lead • Use simple language to comment on what the child is doing <p>Repeat what the child says</p> <ul style="list-style-type: none"> • Expand and model new language • Simplify Instructions e.g.: Keep it short and simple (KISS) • Give children time to respond • Reduce the number of questions children are asked and 	<p>colleagues to use and implement strategies and activities from programmes such as Elklan or Makaton</p> <p>Use of bucket time individually and at group times</p> <p>Surrey support plan can be implemented and reviewed every 6-8 weeks by the SENCOs. The Surrey Support Plan (SSP) is used as a working document to record the child's progress, outcomes and targets. Practitioners update the child's One Page Profile and complete the Setting Support section of the SSP.</p> <p>Use the Early Years Speech and Language Therapies Resource Pack to identify activities and strategies that will support the child.</p> <p>We consider referrals to appropriate outside agencies. We can refer via the 'One Stop' 'Children and Family Health</p>	<p>Semantics or Makaton.</p>
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	<p>use comments instead Listening games</p> <p>We provide language rich experiences through real world shared experiences e.g. woodland walks, visits on the Hoppa bus, empty classroom sessions</p> <p>Parents are encouraged to be an active part of nursery – reading stories to all children or playing instruments at singing time</p> <p>Weekly library session run by a parent volunteer</p>	<p>Surrey’ (CFHS) to:</p> <ul style="list-style-type: none"> • Occupational Therapy • Physiotherapy • Speech and Language Therapy (early years and acute intervention, including dysphagia) • Enuresis and Continence (integrated enuresis and continence assessment and treatment service) • Tongue Tie (Ankyloglossia) • PIMHS (Parent-Infant Mental Health Service) • Nutrition and Dietetics (Please note: Nutrition & Dietetics) 	
<p>Cognition and Learning</p>	<p>Child led individualised weekly planning</p> <p>Visual timetables throughout the nursery setting</p> <p>Visuals on continuous provision</p> <p>High adult ratios prioritised throughout the setting</p> <p>Provide stimulating resources that</p>	<p>Use of differentiated resources e.g. more simple games / puzzles</p> <p>Practitioners modify their language to meet children’s level of understanding.</p> <p>Practitioners plan activities to support specific areas of focus with small groups of children e.g. number names, turn-taking, colour recognition.</p>	<p>Practitioners focus on developing areas or aspects of learning & development as advised by specialists</p> <p>Where possible children requiring support will have an enhanced adult ratio.</p> <p>Advanced planning and approach to school – discussions re. transition to school.</p>

	<p>are accessible and open ended</p> <p>We have recognisable and predictable routines allowing children to predict and make connections in their experiences</p> <p>Play opportunities that allow children to think creatively and flexibly</p> <p>Learning is play based and follows children's interests through out enabling learning environment</p>	<p>Practitioners support children to be able to interact and take turns with peers and adults using a range of toys/activities e.g. use of a sand timer</p> <p>Practitioners offer choices with reduced options to support children having difficulty making or expressing choices or preferences.</p> <p>Signs and symbols are used by practitioners, and within the environment, to support specific groups of children and to reinforce messages.</p> <p>If required, complete a 'Request for Support' form with parent permission to seek support from an Early Years SEND Team. The Early Years SEND. Advisor can offer support which may include observations and discussions with parents, signposting (where appropriate) to other services, and general advice to the SENCO.</p>	<p>Use social stories to support understanding of social situations.</p>
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<p>Social, Emotional and Mental Health</p>	<p>Positive behaviour policy</p> <p>Celebrating successes and progress with families and carers</p> <p>Opportunities for children to develop independence and evaluate “risk”</p> <p>Positive expectations</p> <p>Each child has a named key person to ensure the children’s individual needs are met and to support their progress, working in partnership with parents.</p> <p>Practitioners support transitions into the setting using strategies such as home visits, family books/photos and displays that</p>	<p>Practitioners supported by SENCO to deliver activities and opportunities to support specific areas of focus with small groups of children e.g. friendship building / negotiating & social communication.</p> <p>Where appropriate to child practitioners use visual timelines, countdown timers, quiet warnings and transition tactics to support children’s well-being.</p> <p>Practitioners offer choices with reduced options to support children having difficulty making or expressing choices or preferences.</p> <p>Practitioners use individualised</p>	<p>Practitioners & SENCO focus on delivering support sessions advised by therapists/specialists and adopt specific strategies identified.</p> <p>In consultation with parents, practitioners may consider a Portage Positive Play referral as home-based intervention to support parents with understanding preschool children’s behaviour Practitioners, parents, and other support agencies to regularly share information, advice, and strategies, incorporate into a shared Positive Behaviour Support Plan for all parties to implement</p>

	<p>promote a sense of belonging.</p> <p>Practitioners recognise and respond appropriately to a child's feelings and role model appropriate emotional responses.</p> <p>Practitioners name the child's feeling as they are experiencing the emotion so that they can link the feeling with the language. In addition, some children may benefit from visual support to reinforce this.</p> <p>All practitioners are consistent in their approach to support the individual child</p> <p>Communicating with parents and carers – celebrating success and being honest about challenges is essential every day.</p> <p>Photos of adults are displayed and given to children before they start at nursery</p> <p>Transition booklets</p>	<p>approaches to support transitions for children e.g., on arrival, at mealtimes and when moving between rooms. These may include visual timetable, Now/Next board and use of visuals/symbols on a lanyard.</p> <p>Practitioners signpost parents to: Surrey Local Offer and their local Family Centre for outreach support to identify any possible support that may be available.</p> <p>Support could include emotion visuals, calming visuals and or pictures and books about emotions.</p> <p>Implement and follow a Positive Behaviour Support Plan.</p> <p>Practitioners record incidents of physical intervention and share records with parents. Use this information to look for patterns of behaviour to see if we can minimise the 'triggers'</p>	
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Physical and Sensory Needs	<p>Daily physical challenges within routines and continuous provision – pouring drinks from jugs, turning on taps, steps into red room,</p> <p>Practitioners aware of implications of sensory and physical impairments e.g. not covering mouth when talking to a pupil with hearing impairment</p> <p>Adaptation of the room to allow children to move freely and access all provision</p> <p>Tuff tray with malleable provision that changes daily and valued highly within the settings core curriculum values</p>	<p>Co-ordination & movement focused activities – physical activities done in small groups</p> <p>Risks assessment to ensure that child’s specific needs are well met by our provision & practice</p> <p>Research & training to ensure that child’s specific needs are well met by our provision & practice.</p> <p>Use the Occupational Therapy Early Years Resource Pack to identify activities and strategies that will support the child.</p> <p>Practitioners directs and supports the child to use the quiet areas of the room when they become</p>	<p>Individual support to facilitate access to curriculum.</p> <ul style="list-style-type: none"> • Adaptation of learning materials e.g. braille, enlargement of text, scented pens etc • Practitioner use of resources e.g. radio mike for hearing impaired • Offer facilities for physiotherapist or occupational therapists to visit • Provision of specialist equipment e.g. seating, • Additional planning and arrangements for transition

	<p>Use of the 'messy hierarchy'</p> <p>Sand and water available in the outside classroom each session</p> <p>Use of bikes and large climbing equipment outside</p> <p>Activities to encourage fine and gross motor skills embedding into our practice e.g. painting on a large scale, ribbon dancing</p> <p>Soft play equipment</p> <p>Tummy time sessions</p> <p>Music is used to encourage and enjoy movement</p> <p>Healthy snack</p> <p>Resources are accessible – at children's level</p> <p>Conscious decision taken by the nursery to reduce strong colours overall, use of neutral backing paper for display backdrop and</p>	<p>overwhelmed by the daily activity.</p> <p>We plan for more time outside, sensory breaks and alter the daily routine to meet the physical and sensory needs of the child.</p> <p>Practitioners aware that the child may needs some adult support and direction during unstructured times to engage in play and interaction with others and the environment.</p> <p>Any interventions include using a child's interest and are at their developmental level. E.g., objects of reference, choice boards use of now/next board.</p>	<p>We consider environmental adjustments recommended by health and/or education professionals which may include adaptations to lighting, noise, colour, or seating (e.g., weighted lap pad seats, ear defenders and sound clouds)</p> <p>We could make a referral to Physical and Sensory Support Service for children with VI, HI and PD if not already in place.</p> <p>We continue to work and liaise with external agencies (e.g., PSS, SEES, OT and/or Physiotherapy), so targets and strategies contribute to the intervention and support of the child.</p> <p>The use of adapted utensils/resources and a high level of intervention (e.g., hand over hand) which supports hand/eye coordination, postural control, and body awareness.</p>
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	<p>reduce brightly coloured trays/boxes to reduce sensory overstimulation.</p> <p>Introduction of calming reading corners in both classrooms with soft textures and neutral colours to create 'nooks' that act as sensory calming spaces.</p>		
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