

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

Attention Deficit Hyperactivity Disorder (ADHD)	 Classroom environment/set up: Ensure all adults in the lesson know the child well and can recognise when to enforce rules and when not to. A non-confrontational approach will help the child to self-regulate and reduce any anxiety; Ensure any rules are consistently implemented and reinforced – e.g. those during group discussions. School rules may need to be differentiated. Consider seating arrangements to minimise distractions (e.g. at the end of a row, or the back of the classroom). Paired working, or support from a positive role model may help the child to focus. Allow a calming-down period before the lesson starts, especially if it follows a break time/lunchtime, as transition points may be difficult for the child to manage. Resources and equipment you might consider before the lesson: A time rwill provide a focus for the child's attention, enabling them to complete a task; A 'time-out' card. This may support the child with moderating their own behaviour and to take responsibility for their actions; Listening to music on headphones whilst engaging with sedentary tasks, tests, or extended writing may help focus attention; Consider which rewards you might use to reinforce positive behaviour (in discussion with the child) and ensure these are given immediately upon task completion; The child may wish to use a word processor A 'stress ball', or other fiddle object from a 'calm me' box (agreed by the SENCO) may help with concentration.
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Anxiety	Classroom environment/set up: There are many types of anxiety and these will often accompany many areas of SEND. 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. Prior to the start of the lesson, discuss with the child where they would prefer to sit. They may also prefer to enter the classroom first and get themselves settled, or after the rest of the class is settled. This may change depending on circumstances at the time; 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 to support them with their work; 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.; If a supply teacher (or another member of staff) is covering a lesson, ensure that the child is made aware of this, so that it is not a surprise to them. Resources and equipment you might consider before the lesson: 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.
Autism Spectrum Disorder	 Classroom environment/set up: A child with ASD may find PSHE a particularly challenging curriculum area. However, using some of these strategies may help facilitate an environment in which they feel safe and secure in order to access some of the activities: 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; Ask the child where they would prefer to sit in the classroom. Avoid changing this seating plan without plenty of warning, as this could cause anxiety. Think carefully about who is sat near to the child, as they may feel uncomfortable around certain children who may be a 'trigger' for them; 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). Ensure that groups/pairs are carefully planned to provide supportive/positive role models; Ensure that 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. Ensure you pre-warn the child (and TA) of any changes, to avoid anxiety and allow them both time to prepare for the change: Be mindful of sensory processing difficulties and ensure the learning environment is neither over-, or under-stimulating for the child; Provide a safe, familiar breakout space for the child, so that they can have sensory breaks when needed; 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. Sometimes, the child may need time out from the class in their break out space and may then feel ready to return again to the class; Display what is coming up next (as another way of preparing the child). Even if the child doesn't look like they are taking any notice of this, they may still be taking it in;

	• Model and encourage positive and supportive behaviour to the child's peers. At times, the child may call out or try to make the class laugh etc. Explain to the class how important it is that they don't react and that this will help the child to remain focused and calm.
	 Resources and equipment you might consider before the lesson: Give instructions using tick lists, breaking down the task into manageable chunks; Provide vocabulary, structure, or starting ideas for the lesson. Use visuals and structured tasks, incorporating the child's own interests wherever possible. Find out which ones work and use them all of the time, even if it doesn't seem that the child needs them; Consider the use of 'speech to text' technology, so there is less writing; 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; The child may choose to do the work in different orders, or at a different time of the day to suit them (in discussion/negotiation with their TA). Provide additional resources, such as printouts of PowerPoint slides, word banks etc. so that the child has access to the same supporting resources as the rest of the class would have had during the lesson. You might also consider providing a simple lesson plan breakdown for the TA to follow, in case the child was out of the room during the input part of the lesson; 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 intentions for
	 the lesson. Teaching methods to consider: Avoid open-ended questions; Provide time to process information; Encourage the child to demonstrate/present their learning in alternative ways which suit them; Provide clear timelines for when things need to be achieved and make expectations really clear (i.e. how many sentences, how many pieces of work etc. to be completed in a time frame, or before a reward is achieved)
Dyslexia	 achieved). Resources and equipment you might consider before the lesson: When preparing resources: keep sentences and written instructions short and simple to read; check reading ages and ensure any work is differentiated appropriately; use pastel shades of paper (cream is a good alternative to white) and matt paper which reduces 'glare'; avoid black text on a white background and light text on a dark background; use text font size 12, or above; clear, rounded fonts that have a space between (Century Gothic, Comic Sans, Arial or Verdana) will be used on all handouts, reading materials and on the interactive whiteboard; use 1.5 or double line spacing and wide margins and lower case rather than capital letters; numbered points, or bullet points are easier to follow, rather than continuous prose. Keep paragraphs short and pages uncluttered. E.g. avoid using background graphics with text over the top. consider using visual representations (flow charts, illustrations, diagrams) to break up large sections of text, or to explain a particular point in a visual, rather than a written, way; consider colour-coding text e.g. information in one colour, questions in another (bearing in mind the contrast in the colours/background)

	 use bold text for titles and sub-headings, or to draw attention to important information, or key vocabulary; use text boxes, or borders for headings, or to highlight important text. on worksheets, leave plenty of space to write a response.
	 Familiarise yourself with any resources/equipment the child needs to support them and ensure that these are readily available during their lesson. E.g.: 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; 'Text to speech' technology. Please facilitate this in your classroom, for example providing a quiet space, seating near to a power point etc.
	 Teaching methods to consider: Help the child to learn and understand any specific vocabulary. This may be done visually, practically and/or during a pre-teach session to build the child's confidence before the lesson; The child may prefer it if an adult (or supportive peer) reads through questions with them; 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).
Dyspraxia	 Classroom environment/set up: 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.
	 Resources and equipment you might consider before the lesson: Provide part-prepared handouts to reduce unnecessary writing and lists of key concepts; or vocabulary; Consider writing alternatives – word processors, Dictaphones, scribe etc.; Special equipment e.g.:. looped scissors, rulers with handles etc. may help; Provide a lesson breakdown and tick list to help the child organise their time and take responsibility for their work; Write instructions for any activities, using different colours for each line; Provide templates with headings to help the child structure their work; Prepare diagrams to label, as copying and drawing neatly can be challenging; Provide an equipment list and encourage the child to only get out what they need.
	 Teaching methods to consider: Clarify rules and expectations, using unambiguous language; Allow extra time to complete work, with movement breaks when needed; Allow time to settle, especially if the lesson is after a break time/lunchtime, as transitions are challenging; Give the child plenty of warning that the lesson is due to end and allow them additional time to pack up to leave (or get ready for the next lesson); Provide any important information/instructions about the lesson in writing, as well as verbally. In addition, provide (in a written format) any lists of subject-specific vocabulary and technical terms; Consider sharing the lesson with the child's laptop (if they use one) and allow them to use headphones and the built-in assistive technology.

Dyscalculia	 Although maths is unlikely to be focused on during a PSHE lesson, some of these strategies may still be applicable and worth bearing in mind as things to try. Resources and equipment you might consider before the lesson: Provide written instructions, printed diagrams and personalised worksheets with a worked example (where appropriate/relevant) for the child to follow, to help them keep up in class; Tracking from the whiteboard to paper may be difficult. Share the lesson with the child, so they can follow it on a laptop (if used); Provide print outs of diagrams and visual support in lessons.
	 Teaching methods to consider: The child may work slower than peers. Be sensitive to this and supportive of any additional time/repetition they may need; 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.
Hearing Impairment	 Classroom environment/set up: Speak to the child privately before the lesson to find out where they would prefer to sit and if there is anything else that can be done to help them; 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; Be aware of seating arrangements to suit the child's specific needs, for example if they are reliant on lip reading etc. (i.e. seated towards the front of the classroom with an unobstructed view, or with their good ear facing outwards into the classroom); Ensure that any background noise is minimised and control class/group discussions, so that only one person is speaking at once;
	 Resources and equipment you might consider before the lesson: Ensure any videos/films used are captioned, or a suitable alternative way Teaching methods to consider: Repeat clearly any questions asked by other students in class before giving a response; Assist with lip reading by doing the following: ensure your face is clearly visible at all times when speaking and sitting directly opposite the child whenever possible; seating the child so that they can see others in the class (where possible); ensuring the lighting is adjusted so that it is not too dark; providing written materials for all lessons, so that the child is not having to lip read and take notes from the whiteboard; Be aware of the specific circumstances for the child and adapt accordingly. E.g. if they acquired their hearing loss early in life, they may have associated literacy issues and need additional support with reading and interpreting information. If they have associated speech issues, they may need support with reading out their work, or may prefer an adult to read it for them.
Toileting Issues	 Classroom environment/set up: 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); Sit the child close to the door so that they can leave the classroom, discreetly; Appreciate that they may arrive late for lessons because of an urgent need to use a toilet; Be aware that the child may need to take medication during school hours and/or need extra meal breaks and provide a discreet/comfortable place for them to do this;

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	• Respect the child's need for privacy. They should decide how much teachers and other pupils are told about their condition.
	 Resources and equipment you might consider before the lesson: If the child has a diagnosed medical condition, they will have an Individual Healthcare Plan. Please make sure that you are familiar with this document. The SENCO can give you access to this; If the child has ongoing toileting issues, they will have an Intimate Care Plan. Please make sure that you are familiar with this document. The SENCO can give you access to this. Teaching methods to consider: During more active sessions, try to be alert to the child's psychological needs and relationships with other children. Let them judge for themselves if they wish to join in on a day-to-day basis - don't stop them trying whatever they want to try. However, be aware that the child may also try to push themselves, so that they don't let others down. Be mindful of this and offer discreet support when/where needed; Bending and stretching may bring on pain, or make pain worse. Teambuilding type activities/games can be particularly problematic; Be mindful of other students teasing the child about lack of stamina, or their need for extra rests (e.g. during group activities/team building); If the child is unwell at school, consider giving them time to rest rather than sending them home – they may be able to return to lessons later in the day.
	 Resources and equipment you might consider before the lesson: Use signs, symbols and visual timetables to support communication; Use visual displays (objects and pictures) that can be used to support understanding; Provide a visual guide to the lesson, e.g. a check list, or pictures to aid understanding.
SLCN	 Teaching methods to consider: Be aware of the specific communication difficulties the child may have - it may be a processing disorder; Be aware of the level of language the child is using – use a similar level to ensure they understand; Do not rush, or interrupt the child as this means they have to begin processing all over again from the beginning, causing frustration! Slow down your rate of speech by using pauses and give the child lots of time to process and reply – be prepared to wait for an answer; Allow time for the child to finish what they are saying, don't finish it for them; Keep language simple by breaking long sentences into short separate ideas; Provide plenty of repetition (activities and vocabulary); Use non-verbal clues to back up what you are saying e.g.: gesture; Carefully consider any pairings or groupings and include good communication role models for the child to copy;
	 communication – not just speech, kole model mis positive response for the child's peers to copy; Listen carefully to what the child says, so that they don't need to repeat themselves; Provide a low distraction/quiet area for the child's group/pair to work so they can focus on their communication; Regularly check understanding and encourage the child to identify what they can/cannot understand. 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;

	Reduce the number of questions you ask and make sure you give time to
	 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.
Tourette Syndrome	 Resources and equipment you might consider before the lesson: Motor tics of the eyes, head or neck may interfere with reading and affect handwriting, or the ability to write for prolonged periods of time; Motor and vocal tics may make the child reluctant to read aloud, ask/answer questions, or ask for help. Be understanding of this and support the child to feel involved and able to participate; Thought tics inhibit auditory processing. Be mindful and do not assume the child is intentionally not listening. Tics can be triggered, or increased by stress, excitement or relaxation (all of these emotional states may be experiences during PSHE type activities and lessons, especially as some of the subjects covered may be of a sensitive nature). Ensure that all adults in the room are mindful to filter out their emotional reaction and instead listen and respond with support and understanding. It is not helpful ask the child to stop their tics, as they are involuntary. Being asked to suppress them is stressful and will cause an increase in the tic. Furthermore, it will mean the child is unable to engage with what is going on around them. Similarly, try not to ask the child not to do something, as it will instantly turn into a compulsion. Because TS can be suggestible, if classmates discover 'the trigger', they may use this to make the child tic. Please try and prevent from this happening; Ignoring tics avoids drawing any unnecessary attention towards them;
	• Be mindful when planning activities, that the child may experience sensory processing difficulties, where they may be either over-responsive, or under-responsive to sensory stimuli, e.g. noise, clothing, textures.
Experienced Trauma	 Classroom environment/set up: Ensure you are very familiar with the child's past experiences and context, as this will help you understand their behaviour; Ensure all classroom adults take a non-confrontational, trauma-informed approach. A discreet, understanding and reassuring approach from all classroom adults is vital; 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); Ensure the school day has clear expectations for behaviour and structure, as this will help provide a predictable environment, necessary for the child to feel secure enough to participate and access the learning; 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; Ensure adults are vigilant to and mindful of any trigger points for the child, as this will help de-escalate emotional situations; 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 outside. Ensure that the classroom environment, available adults and overall support for the child is in place. Resources and equipment you might consider before the lesson: Provide a safe and familiar breakout 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 breaks; 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; Have consistent expectations and behaviour plans in place that are based on reward systems, not punishment. Teaching methods to consider: The PACE approach should be used, using playfulness, acceptance, curiosity and empathy to understand emotions and behaviour. Lesson plans may need to be adapted/differentiated to include these elements; Be extremely mindful and vigilant throughout the lesson, as some of the content of PSHE lessons can be very personal, maybe covering memories, families, emotions etc., all of which are likely potential trigger points. Equally, something which doesn't seem connected on the surface, may be a trigger for the child in some way; Slow yourself down when talking, as this will appear non-threatening: talk slower, use a lower pitch for your voice, don't use complex sentences, minimise body movements; During activities, teach and model positive self-talk to encourage selfbelief. Help the child to see that making a mistake is considered a necessary part of learning and that minor mistakes will not incur adult anger, or punishment;
	with the child (while actively ignore any negative behaviour);Use collaborative problem-solving during activities, so that the child feels in
	control.
	Classroom environment/set up:
Visual	 Keep your classroom visually uncluttered and reduce the number of objects in the immediate working area;
Impairment	 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, e.g. 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.