



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

Individual Need	Here's how we can help everyone learn...
<b>Attention Deficit Hyperactivity Disorder</b>	<ul style="list-style-type: none"> <li>• Using a non-confrontational approach and listening to the individual child will help reduce their heightened arousal.</li> <li>• Ensure the child is positioned so that the teacher has easy access for support.</li> </ul>
<b>Anxiety</b>	<ul style="list-style-type: none"> <li>• Where possible the child is taught by a well known adult whom they have already established a trusted relationship with.</li> <li>• Allow the child to be involved when choosing a partner within the taught reading session to aid with discussion about the text.</li> <li>• Use a consistent approach to answering questions so children become familiar with this. Use the TTPY (Talk To Your Partner) and ABC (Agree, Build, Challenge) approach to answering questions.</li> <li>• The child is in the same seat everyday and is pre-warned if the seating plan needs to change for any reason.</li> <li>• Avoid asking direct questions and cold calling. Instead offer to feedback as part of the child's pairing or grouping.</li> <li>• Where possible, children are prepared in advance when there is a change in a member of staff.</li> <li>• Specific children with issues around toileting have the opportunity to use a toilet they are familiar with.</li> </ul>
<b>Autistic Spectrum Disorder</b>	<ul style="list-style-type: none"> <li>• Children are encouraged to sit where they feel the most comfortable in the classroom. Where possible, this seating plan is not altered unless the child is happy and involved in the process.</li> <li>• Sensory spaces and resources are readily available to all children.</li> </ul>

	<ul style="list-style-type: none"> <li>• Extra processing time is given and on the spot questioning is avoided.</li> <li>• Children are allowed to read on their own if it is too challenging for them to read with a partner.</li> <li>• Planned and unplanned sensory breaks are permitted throughout the lesson.</li> <li>• There is always an available adult for a 'change of face' if needed.</li> </ul>
<b>Dyscalculia</b>	<ul style="list-style-type: none"> <li>• Children have access to their own resources in the session.</li> <li>• Questions are discussed verbally in pairings or small groups. This allows the child to choose the level they feel comfortable with.</li> </ul>
<b>Dyslexia</b>	<ul style="list-style-type: none"> <li>• There is no pressure put on individual children to read aloud in front of the class. Reading is conducted through echo, choral or paired reading of the text.</li> <li>• Personalised colour overlays can be used; these are readily available.</li> <li>• Widgit labels are used to support discussions and vocabulary.</li> <li>• Dyslexia friendly fonts and slides on PowerPoints are available.</li> <li>• There is a huge focus on learning new vocabulary for all.</li> <li>• Questions are read aloud to the child. These are then either discussed in groups or written in books.</li> <li>• Question slides are adapted to suit individual needs.</li> </ul>
<b>Dyspraxia</b>	<ul style="list-style-type: none"> <li>• Rules and systems are clarified, using ambiguous language.</li> <li>• Opportunity is given to move around at points during the lesson if needed.</li> <li>• Ensure that when reading in pairs, the partner reader is sensitive to the needs of the child and knows confidently what they are doing.</li> <li>• The reading lesson is broken down into a key lesson sequence and the teacher prompts these. This lesson sequence is the same for every reading session.</li> <li>• There is plenty of space between readers to enable the child to concentrate on their own reading.</li> <li>• Noise is kept to a minimum.</li> <li>• The parts of the reading lesson are clearly defined.</li> </ul>

<b>Hearing Impairment</b>	<ul style="list-style-type: none"> <li>• Careful consideration is given to seating, with individual considerations made discretely and not publicly. Only one person is encouraged to speak at a time.</li> <li>• There is space provided by the child at the front of the classroom and is not obstructed.</li> <li>• The teacher leading the lesson discretely checks in regularly with the child to check they are hearing and understanding.</li> </ul>
<b>Toileting Issues</b>	<ul style="list-style-type: none"> <li>• Children will be able to leave and return to the classroom whenever necessary.</li> <li>• A seating arrangement will be made so that the child can enter and leave the classroom discretely.</li> <li>• All adults and children within the classroom environment will respect the child's privacy.</li> </ul>
<b>Cognition and Learning Challenges</b>	<ul style="list-style-type: none"> <li>• Time is given to answer questions, process and formulate answers through partner or table discussion.</li> <li>• The opportunity is given for reading to be physically demonstrated by the class teacher by reading the text aloud before either echo, choral or paired reading.</li> <li>• Specific, targeted praise is given so the child knows what they are doing well.</li> <li>• Support is given when managing peer relationships effectively, the child is involved in the process of choosing a partner reader.</li> <li>• Instructions are simple and mistakes are considered as learning opportunities.</li> </ul>
<b>Speech, Language and Communication Needs</b>	<ul style="list-style-type: none"> <li>• Language is purposefully kept simple and consistent throughout the sessions</li> <li>• Closed questions are used when exploring comprehension, which only require a yes or no answer.</li> <li>• Clear language is used to communicate ideas whether it be in pairs or table talk groupings.</li> <li>• Any attempt to communicate is responded to positively.</li> </ul>
<b>Tourette Syndrome</b>	<ul style="list-style-type: none"> <li>• Emotional reactions are filtered and we listen and respond with support and understanding</li> <li>• Children are never asked to stop their tics</li> <li>• Where vocal tics are prominent, children are not asked to read aloud as we are understanding that they may be reluctant to do this.</li> </ul>

	<ul style="list-style-type: none"> <li>• There is a clear structure to the lesson with the structure being the same for every reading lesson.</li> <li>• Although children are encouraged to listen, teachers are aware that at times tics inhibit auditory processing. It is never assumed that the children is intentionally not listening.</li> </ul>
<b>Experienced Trauma</b>	<ul style="list-style-type: none"> <li>• Positive self-talk is modelled when the class teacher is reading aloud.</li> <li>• Mistakes are seen as a positive part of learning.</li> <li>• A predictable environment with clear expectations for behaviour is provided.</li> <li>• Adults will calm and support if a child becomes overwhelmed.</li> <li>• Breakout spaces are available to all children.</li> <li>• Lessons are completed in a sequence that is the same for every lesson.</li> </ul>
<b>Visual Impairment</b>	<ul style="list-style-type: none"> <li>• Careful consideration is given to seating, with individual considerations made discreetly, not publicly.</li> <li>• Large font materials are provided in addition to teacher talk.</li> <li>• There is space provided for the child at the front of the classroom with no obstructions.</li> <li>• The teacher leading the lesson discreetly checks in regularly with the child to check their understanding.</li> </ul>