

**Jericho Primary School**

**Recommended QFT strategies to support children with barriers to learning**

**2019-2020**

Adapting our quality first teaching strategies is the recommended first response when barriers are identified with children across the 4 broad areas of need. If a child is making less than expected progress ‘high quality teaching, targeting areas of weakness’ is the expected first wave of support. It is expected that schools can provide evidence that QFT strategies have been implemented as a first response to identified barriers.

The purpose of this booklet is to provide a range of strategies which promote ‘quality first teaching’ for children with a range of different needs. It is a useful guide to consider how your practice may be adapted to support those who need to break down barriers and require a different approach in the classroom. Generally, these strategies will be applied to allow children to access learning with an additional layer of support than the ‘majority’

The main principle when trialling strategies is to evaluate effectiveness and benefits to the child. There is no one size fits all and these strategies have been provided as a guide and range of ‘methods’ that children with associated needs can benefit from. However, each child is different and knowing the child is always the best starting point when considering which strategies to implement. Consistency in approach, repetition and built in retrieval practice is crucial when promoting independence in the classroom.

Always promoting a ‘can do’ attitude and praising the effort our children put in to a task helps them develop a sense of pride and achievement. This in turn will help them build confidence and resilience to be ok with making mistakes.

If we don’t make any mistakes, then how can we learn anything new?!

Prompts and use of vocabulary are crucial in developing a growth mind set.

Examples of how we can flip a child’s thinking and promote positivity when children are in the learning ‘pit’

|  |  |
| --- | --- |
| Instead of….. | Try thinking/saying….. |
| I give up/ I can’t do it | I will try a different strategy/ I can think of another way |
| It’s good enough/ I can’t do any better | I can always improve/ What would improve this? |
| This is too hard | I can and will learn how to do this. What steps can I take to break this task down? |
| I’m stupid/ everyone can do this except me | I will do this and I know there are people/ things I can use to help. Practice will improve this. |
| My plan A didn’t go to plan! I’m not trying again | I can always start again- what can I learn from my first attempt? |

Promoting independence in the classroom

‘They can’t do anything for themselves! As soon as I walk away they don’t do anything!’

Says every teacher on earth at some point in their career!

Often lack of independence in the classroom can be a huge barrier to application of new learning. Children need to be taught the skills of responsibility and devise a range of strategies that they can apply when they are expected to complete a task independently. Our job in school is to ‘teach’ the strategies!

* Introduce the 3b4 me strategy- is there anything in your book you’ve already done that will help? Can you ask the person beside you for help? Is there someone else on your table that can help?
* Encourage child led modelling- use this method as part of your lesson design. Encourage children to not only explain but show their peers how they have worked it out.
* Have a range of resources that are clearly accessible and easily organised. They are a permanent fixture and part of practice when teaching.
* Have a WAGOLL to show the end product-this is what is expected. Some children need to physically see what they are aiming for.
* Ensure however share success criteria/ expectations are clear
* Minimise language when explaining and use small methodical steps
* Start by allowing them to feel a degree of success- retrieval exercises promote this.
* Give children opportunity to identify success in the work others produce- opportunity to share their work and actively provide feedback to each other
* Encourage engaging dialogue about a subject matter- rich in vocabulary and use probing questioning to dig deeper and deeper
* Allow children thinking time about how they will begin and which way they will approach a task.
* Scaffolds and prompts should be everywhere- working walls, speed sounds charts, chunked steps 1,2,3 for children to follow.

Autistic Spectrum Disorder

QFT Strategies

Description:

Autism is characterised as a disorder of development, characterised by impairment of language. Communication and social interaction, rigidity of thought and behaviours, it can also mean that children could have poor motor co-ordination and sensory perceptual differences. Children with Autism may think very differently as the processing of information can be very different to that of a person with neurotypical development’. It is a spectrum condition therefore the severity of impairments can be vastly different at different points throughout life.

Strategies:

* Get to know the child! Remember that each child is an individual therefore knowing their needs specifically will support the adaptations required in QFT.
* Always say the child’s name when directing them or expecting them to cue in.
* Space and working at an individual work station often leads to less difficulties.
* Use clear and concise language, do not flip back and forth.
* Always break down instructions- one at a time.
* Ask children to repeat or rephrase what you have asked. Always check understanding- older children may be taught to do this with their partner.
* Be careful of using ‘choice’ questions- ‘Do you want to…’ ‘should we…’ As they may see this as an option to refuse to participate.
* Use visual cues as well as verbal language with all new teaching and then ensure it remains in the environment to refer to.
* Provide parallel models that the child can see. This helps them understand what their end product should look like. The need to see it!
* Use mini goals and clear instructions for children to work through. Teach them how to use this independently over time.
* Do not expect or demand eye contact.
* Allow thinking time and processing time as part of every lesson.
* Have clear rigid and predictable routines. If there is to be a change then provide as much notice as possible.
* Do not use idioisms- i.e pull your socks up, it’s raining cats and dogs- These are very very confusing!
* Pre-teach new topic vocabulary
* Think carefully about a child’s positioning in the classroom- often children need to sit at the edge of a carpet as do not like people being behind them
* Have classroom rules that are rigidly enforced to ensure that they understand what is expected of their behaviour
* Consider social interventions- time to talk, socially speaking games, peer to peer support systems

Attention Deficit Hyperactivity Disorder

ADHD

Description:

Often children with a diagnosis of ADHD or potentially have ADHD are those who have difficulty in maintaining attention- most of the time. Their behaviour can be impulsive and they may present as lacking in control. Generally, they will be overactive and you may describe them as restless when sitting in the classroom environment. ADHD is diagnosed medically and some children with the diagnosis make take prescribed medication.

Strategies:

* Always sit the child at the front in direct sight of the teacher, surround the child with other children who are good role models and can prompt them.
* Maintain a calm atmosphere that is not overly loud or rowdy.
* Maintain a rigid routine and ensure that rules and sanctions are applied consistently.
* Give children one task at a time and ‘touch base’ with the child throughout the lesson.
* Enforce the school’s behaviour policy rigidly and display rules and refer to them regularly.
* Use timers and methods to demonstrate how long a task will last. Ensure the child knows how long the task will take and what completion looks like.
* Provide fiddle toys, blue tac and items that allow the child to move their hands whilst listening.
* Use a prompt card on the desk that shows the child- good listening skills.
* Use drip stop approach- you have another 5 mins, you have another 2 mins etc.
* Utilise break times as an opportunity to allow children to release tension and hyperactivity.
* Use pupil’s name and give eye contact before giving instructions.
* Chunk tasks and use clear concise language.
* Do not talk for extensive periods of time.
* Use positive praise and reward regularly- praise effort as much as possible.
* Provide organisational tools- weekly planner or a laminated reminder card of the things that they need each week. Allow them to have responsibility and independence.
* Have regular communication with home in order to monitor changes in behaviour and apply the strategies consistently.
* Monitor impact of medication- if medication is being prescribed.
* Use SNAP V questionnaire to evaluate/ monitor progress.

Dyslexia

Description:

Dyslexia is a specific learning difficulty that can cause problems with reading, writing and spelling. It's a specific learning difficulty, which means it causes problems with certain abilities used for learning, such as reading and writing. Unlike a learning disability, intelligence isn't affected by dyslexia.

Strategies:

* Avoid approaches that have not worked in the past and recognise that processing difficulties will not be overcome by practice
* Allow extra time to complete tasks and tests
* Teach basic skills in context, using learners’ own written work
* Encourage students to identify their own strategies, e.g. mnemonics, learning by doing, so that they become independent learners
* Encourage learners to make visual representations of information, such as mind maps
* Use alternative tasks to writing, e.g. charts, labelled diagrams, matching activities.
* Use pair/group work.
* Limit written responses to key points only.
* Provide writing frames to aid organisation and recall of content as well as reduce written requirements.
* Provide visual reminders of writing needs and routines, e.g. check/add punctuation, underlining.
* Provide text for reading as an alternative to copying tasks.
* Use word banks on wall – in alphabetical order.
* Have alphabet strip/cue cards stuck to desk
* Provide visual cued key word lists for task, topic and subject.
* Use word banks, personal wordbooks, spellcheckers.
* Respond to pupil’s work in a positive way. Do not penalise for errors
* Use technology to support the development of basic skills and as an alternative means of curriculum access.
* Give information in small chunks. Repeat key points. Provide visual reinforcement.
* Present instructions in small steps. Use flow charts, task boards.
* Reduce homework to essential and manageable tasks. Write instructions for pupil.
* Praise, praise, praise for effort as well as achievement
* Avoid black text on white background – buff or coloured paper is easier to read

Dyscalculia

Definition:

Dyscalculia is a specific learning disability literally “ difficulty with mathematics “.

**1 Number :**

 Difficulty linking words with numbers.

 Difficulty transferring from concrete to abstract ideas.

 Difficulty with place value, sequences, time, money, counting backwards

**2 Memory:**

 Difficulty holding ideas long enough to make sense of a task or question.

**3 Language:**

 Difficulty understanding maths terms and abbreviations.

 Difficulty with worded maths problems

**4 Work:**

 The pupils work is often messy. Numbers sometimes reversed. Columns don’t line up.

Strategies:

* Provide concrete objects to aid calculation. Age appropriate bricks, blocks, counters.
* Play maths games
* At the beginning of each topic, use word banks displayed on the wall in alphabetical order
* Provide a list of maths symbols ( as we do with punctuation )
* Provide photocopies of copying from the board
* Use calculator
* Praise and reward- reduce anxiety associated with maths.
* IDL Maths home and school access- daily

Deaf/ Hearing Impairment

Definition:

Hearing impairment (HI) ranges from mild hearing loss to total deafness. Now and again a teacher working for the local authority’s HI service tests students with HI to determine whether their hearing with or without a hearing aid falls within normal limits. The school subsequently receives a report with a hearing score and advice about seating the student in the classroom and supporting his/her access to the curriculum.

Strategies:

* Make sure that hearing aid users are wearing their hearing aids.
* Ask students where they would like to sit to optimise communication, making sure they are near the teacher and away from heavy traffic areas.
* Always face students and get their attention before speaking.
* Use facial expressions, gestures and other body language to communicate.
* Repeat new vocabulary in different contexts to reinforce your message.
* Use visual aids since vision is the primary means of receiving information.
* Provide information about assignments, deadlines, exam dates etc in writing.
* Write all homework assignments and class instructions on the whiteboard, making sure that anything you write can be easily read, and refrain from talking while you are writing.
* Reduce background noise: sounds normally ignored by hearing individuals are amplified by a hearing aid and interfere with communication.

Dyspraxia

Definition:

Developmental co-ordination disorder(DCD), also known as Dyspraxia, is a condition affecting physical co-ordination that causes a child to perform less well than expected for his or her age in daily activities and appear to move clumsily. Early developmental milestones of crawling, walking, self-feeding and dressing may be delayed in young children with DCD, and drawing, writing and performance in sports are usually behind what is expected for their age. The problem is not due to general delays in development or a learning disability, and is not caused by Cerebral Palsy or another neurological disorder (condition affecting the nervous-system)

Although signs of the condition are present from an early age, children vary widely in their rate of development and DCD is not usually diagnosed until a child with the condition is around five years old or more.

Strategies:

* Give the child as much encouragement as possible.
* Be aware that handwritten work may cause frustration.
* Ensure that the child’s pen and pencil grip is comfortable
* Offer alternative ways of recording work—laptop / word pad / use of mind maps / story boards etc / Dictaphones.
* Allow extra time to complete tasks, particularly where there is lengthy writing, technical drawing etc.
* Do not provide too many verbal or visual instructions at once.
* Give step by step instructions and check they are understood.
* If necessary, place simple written instructions on the child’s desk.
* Sit the child near the board.
* Use checklists and story planners.
* Allow access to computer technology.
* Use lined paper with margins to allow child to consider how to set out their writing.
* In Mathematics, use squared paper.
* In PE a new skill may have to be fully demonstrated before the child can perform the task.
* They may struggle with getting changed quickly before and after PE.

Visual impairment

Definition:

Visual impairment may have a range of different factors. When a child has a visual impairment this will mean adjustments and equipment may be required in order to allow a child to access information in the classroom. The degree of impairment may range from vision loss on one or both sides to blindness. Understanding a child’s specific condition is crucial in order to make the necessary arrangements and adjustments.

Strategies:

* Always check the child is wearing their glasses if they have them.
* Some differentiation of activities and materials- may be produced in larger versions/ print or braille if required.
* Use of differentiated questioning that is not always about what you can see.
* A range of activities in the classroom that include kinaesthetic, visual and auditory.
* Additional time allowed for task to be completed.
* Resources displayed and accessible that promote independence.
* Routine ping pong verbal feed back
* Check understanding via questioning/ probing
* Have a range of ways to record what they know- video, audio recording, scribe etc.
* Considerations of the environment and the factors that may make it more difficult- i.e being too bright/ too much glare.
* Use of a dark pen
* Use books that are an appropriately measured grey scale- partsight.org
* Positioning of books/ texts- may use a slope that can be adjusted
* Ensure that visuals are at eye level- the child does not need to ‘hold’ things up or bend down to see.
* A well organised classroom with clear pathways around tables
* Routines maintained
* The use of a range of appropriate technology that is recommended dependent upon need of the child.
* Touch type programme- BBC dance mat.
* Use of texts that have been prepared at the right text size- custom eyes

Speech and Language difficulties

Definition:

Speech difficulties are a type of speech, language and communication need (SLCN). Many children take longer to develop a range of speech sounds and need some help with their unclear speech. Speech difficulties include:

* Difficulty with telling the difference between sounds
* Difficulty with the articulation (making) of sounds
* Difficulty with combining sounds in words
* Difficulty saying longer words
* Difficulty with the rhythm, flow or ‘tune’ of speaking

Strategies:

* Self-talk- Talk out loud about what you are doing.
* Parallel Talk- Talk aloud- commentate on what the child is doing.
* Repetition- Repeat words over and over.
* Increase opportunities; Target words- same words all day
* Simplify- Use short phrases and sentences.
* Add 1 word- Use 1 more word that the child- extend their sentence
* Model- Tell them what you want them to say
* Imitation- Teach them to copy you
* Visuals- Show them objects or pictures when talking
* Sign Language- Teach early signs
* 1 and at time- Give only 1 so they ask for more
* Give 2 choices- Do you want \_\_\_\_\_\_\_\_ or \_\_\_\_\_\_\_\_
* Staged events- A set up to stimulate talk and needing their help
* Out of reach- Let them ask for what they want
* Be forgetful- Ask them to help you find a word you can’t remember
* Be silly- Get attention with unexpected actions
* Follow their lead- Talk about their interests
* That’s new= explore something brand new
* Verbal routines- Use the same words in routine every day
* Sing- Teach language through song and repetition
* Wait- Allow lots of time for a child to respond- don’t talk for them
* Mirroring- copy play with early language

How to encourage thinking skills via questioning: Blooms Taxonomy

|  |  |
| --- | --- |
| Evaluation | Judge/ test/ critique/ defend/ criticise/ priorotise/ explain if you agree |
| Synthesis | Design/ build/ predict/ infer/ solutions/for/ produce/invent/plan |
| Analysis | Categorise/ examine/ compare & contrast/ classify/ evidence/ outline |
| Application | Use/ diagram/ make a chart/ draw/ apply/ solve/ calculate/ why is… |
| Comprehension | Re-tell/ interpret/ summarise/ explain/ discuss/ the main idea/ a brief outline |
| Knowledge | Who? What? Where? When? How? Describe/what is/ find/ name/ identify/ define |

**The magnificent 7 strategies:**

Outcome- Different results from the same given task

Support- Learning support/ TA in class

Input- Focussing teacher input to the specific aspect that are not secure for individual students- our feedback book- what’s next?

Accessibility- seating? Use of technology? Equipment that allows access to record, engage in the lesson at an appropriate level- what can I use to alleviate the barrier?

Pace- Extra time to complete- time to re-visit/ chunking of the lesson into smaller steps

Questioning- blooms taxonomy

Task- How you present the task will determine the outcome