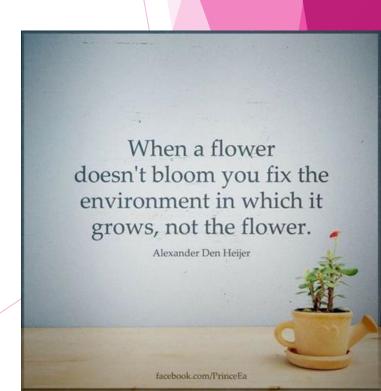


Amie Takacs
St Thomas Mores Catholic Primary

The Inclusive Classroom KS2



What areas we explored

Neurodiversity

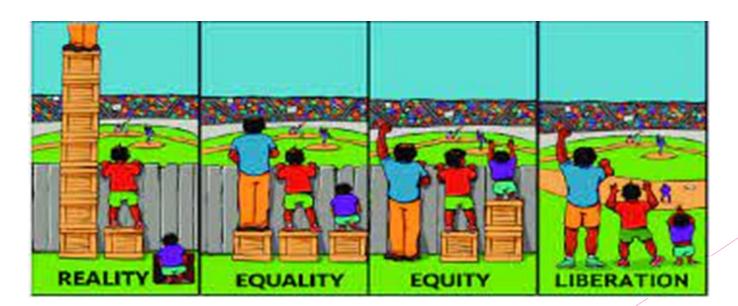
Dyslexia

Speech and language

Trauma

SEMH

ADHD



Neurodiversity

Identify working memory demands

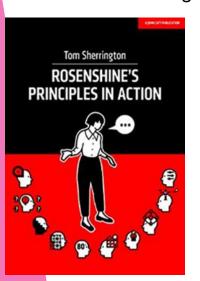
- be able to assess the demands that different tasks place on pupils' working memory and recognise when a child is experiencing memory overloads.

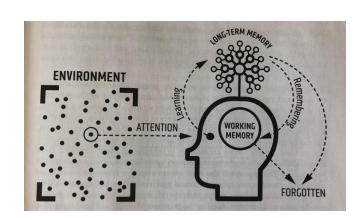
Adapt teaching to reduce demands

-be able to modify lesson structure and content accordingly

Provide memory aids & encourage meta-cognition

- provide memory aids and help children to evaluate which aids work best for them and encourage them to get into the habit of using these independently









- 1-2% of the population is autistic
- 10% of the population are dyslexic
- 5% of the population are dyspraxic
- 1-2% of the population have Tourette Syndrome
- 7 % of the population have mental health needs
- 5% of the population have an acquired brain injury



Dyslexia

General signs

- Speed of processing: slow spoken and/or written language
- Poor concentration
- Difficulty following instructions
- Forgetting words



- Poor standard of written work compared with oral ability
- Produces messy work
- Confused by letters which look similar, particularly b/d, p/g, p/q, n/u, m/w
- Poor handwriting
- · Spells a word several different ways in one piece of writing
- Makes anagrams of words, e.g. tired for tried, bread for beard
- Produces badly set-out written work, doesn't stay close to the margin
- Poor pencil grip
- Produces phonetic and bizarre spelling: not age/ability appropriate
- · Uses unusual sequencing of letters or words



- Slow reading progress
- · Finds it difficult to blend letters together
- Has difficulty in establishing syllable division or knowing the beginnings and endings of words
- Unusual pronunciation of words
- No expression in reading, and poor comprehension
- · Hesitant and laboured reading, especially when reading aloud
- Misses out words when reading, or adds extra words
- Fails to recognise familiar words
- · Loses the point of a story being read or written
- Has difficulty in picking out the most important points from a passage



- Confusion with place value e.g. units, tens, hundreds
- Confused by symbols such as + and x signs
- Difficulty remembering anything in a sequential order, e.g. tables, days of the week, the alphabet



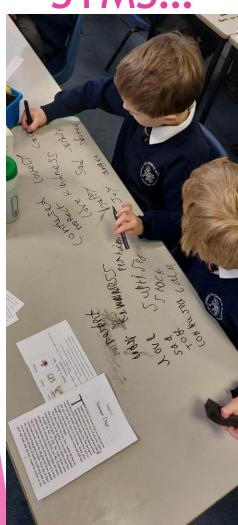
- Poor motor skills, leading to weaknesses in speed, control and accuracy of the pencil
- Memory difficulties e.g. for daily routines, self-organisation, rote learning
- Confused by the difference between left and right, up and down, east and west
- Indeterminate hand preference
- Performs unevenly from day to day



- · Has difficulty learning to tell the time
- Poor time keeping
- Poor personal organisation
- Difficulty remembering what day of the week it is, their birth date, seasons of the year, months of the year
- Difficulty with concepts yesterday, today, tomorrow



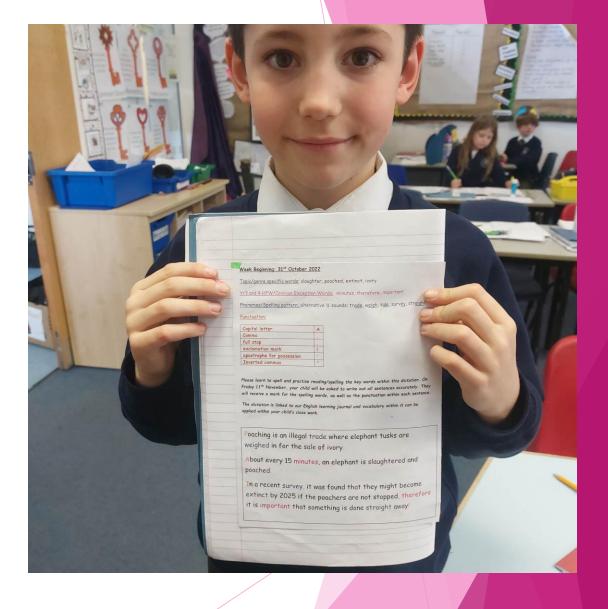
- Uses work avoidance tactics, such as sharpening pencils and looking for books
- Seems 'dreamy', does not seem to listen
- Easily distracted
- Is the class clown or is disruptive or withdrawn
- Is excessively tired due to amount of concentration and effort required

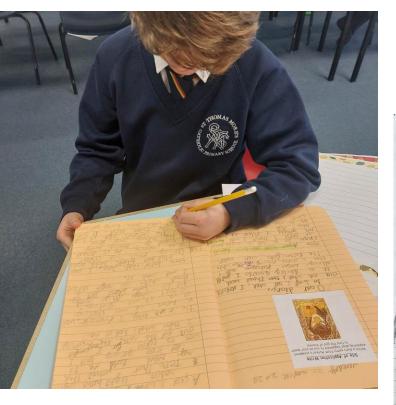


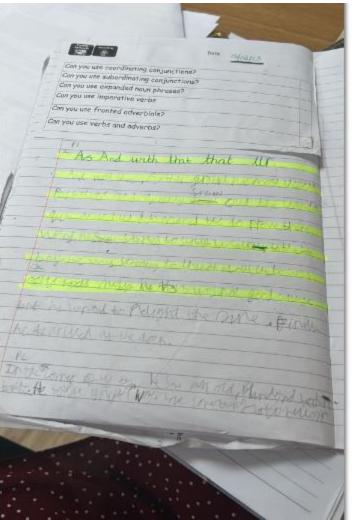
- Yellow/blue books
- Colour coded spelling
- Pre-teach reading
- Levelled vocabulary
 - Phonics mats
- Openness with parents and children
 - Tools and mindset
 - Yellow lines
 - Letter spies
 - Open dyslexia font
 - ACE dictionaries
 - Personal spellings

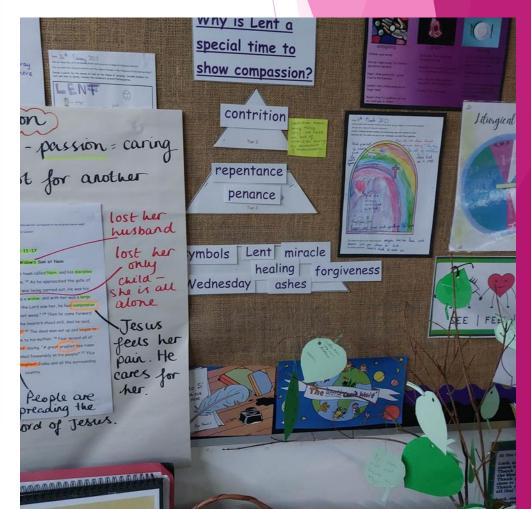












Speech and Language

Speech refers to:

- Speaking with a clear voice, in a way that makes speech interesting and meaningful
- Speaking without hesitating too much or without repeating words or sounds
- Being able to make sounds like 'k' and 't' clearly so people can understand what you say

Language

refers to:

 Knowing and choosing the right words to explain what you mean
 Leiping words together into

 Joining words together into sentences, stories and conversations

Making sense of what people say

Questioning **Working Memory** Modelling USING **Building Blocks of** Blooms ACCURATE SPEECH SOUNDS Feedback Communication TALKING (USING WORDS, PHRASES & SENTENCES) UNDERSTANDING OF SPOKEN LANGUAGE (WORDS, PHRASES, SENTENCES) TURN-TAKING **EYE CONTACT** SHARED ATTENTION LISTENING OPPORTUNITY / REASON / MOTIVATION TO COMMUNICATE

Communication refers to:

- Using language or gestures in different ways, for example to have a conversation or to give someone directions
- Being able to consider other people's point of view
- Using and understanding body language and facial expressions, such as:
- Knowing when someone is bored
- Being able to listen to and look at people when having a conversation
- Knowing how to take turns and to listen as well as talk
- Knowing how close to stand next to someone



- ✓ Vocabulary books- word of the day
 - ✓ Cued articulation
 - ✓ Social stories
 - ✓ Instruction broken down
 - ✓ Numbers and routines
 - Pictorials
 - ✓ Modelling
 - ✓ Talk partners
- ✓ Fluency programme and text marking
 - ✓ My turn your turn -reading
 - Questioning
 - ✓ Feedback





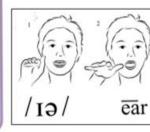












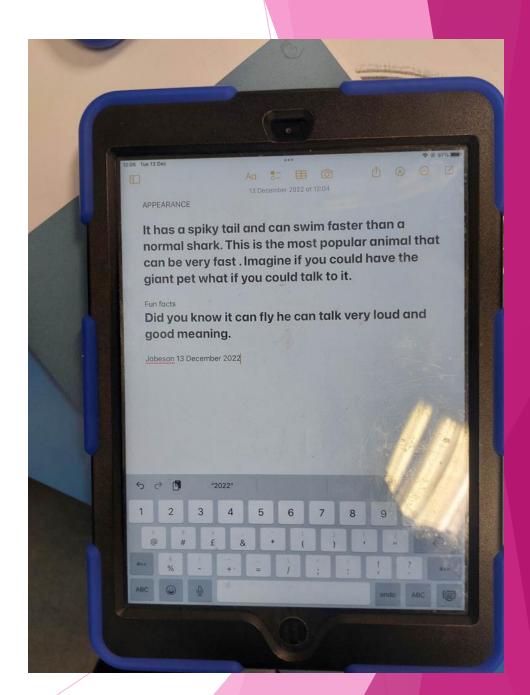






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Trauma

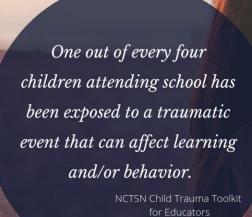
Acute, Chronic, or Complex

- 1. Acute trauma results from a single incident.
- 2. Chronic trauma is repeated and prolonged such as domestic violence or abuse.
- 3. Complex trauma is exposure to varied and multiple traumatic events, often of an invasive, interpersonal nature.

"TRAUMA-INFORMED EDUCATION ISN'T A SET OF STRATEGIES. [IT] IS ULTIMATELY AN EXERCISE IN EMPATHY, PATIENCE, AND FLEXIBILITY."

—Educator Alex Shevrin

#T2T



- Empower children to self-regulate
- Create a safe learning environment
- Establish routines
- Provide flexibility and choice
- Foster stable relationships
- Practice self-care
- Inform adults (to a degree)

Help children understand the impact of stress and promote selfmanagement

- Promote a common language
- Fidgets
- Moving and breathing exercises
- Quiet spaces
- Creativity breaks

Move children form survival mode through creation of safe and predictable classrooms

- Clear expectations
- Create a sense of belonging
- Build predictable routines

Help
children
learn by
providing
choice and
flexibility

- Consider seating
- Task adaptation and variation
- Focus on objectives not tasks
- · Less is more

Take care of yourself before you can take care of others

- Self care
- Strength and health
- Self compassion and gratitude
- Don't take the behaviour personally!

Encourage emotional bonds and social skills through positive interactions and building friendships

- Share personal interests
- Celebrate success
- Model and role-play social skills and scenarios
- Focus on strengths



KNOW OUR CHILDREN Be that person they see first in the morning

- **Gratitude** journals
 - **Mindfulness**
 - **Affirmations**
- Culture and Language
 - Talk books
 - ✓ TIME
 - Sensory breaks
- **MAGICTRIANGLE**
 - Distraction
 - Positivity
 - **Buddies**
- Flexible seating
- Timetable and adults
 - Colour packs
 - Sensory toys



STUDENTS WHO ARE LOVED AT HOME COME TO SCHOOL TO LEARN, AND STUDENTS WHO AREN'T, COME TO SCHOOL TO BE LOVED.

- Nicholas A. Ferroni





SEMH





What is the behaviour?

Attention Seeking



Strategies

- Positive attention at appropriate times
- Acknowledge behaviour (touch)
- · Calm and consistent distraction
- Planned waiting with a focus



Revenge Seeking

Child starts hitting out and seeking revenge for not having their needs met



SEMH

Escape by Withdrawal

Child feels unable to cope and withdraws from contact





 Child does not feel safe / in control and needs to take back control









Six Stages of a Crisis ocial, Emotional and Mental Health

TIME

Crisis

Need for dynamic risk assessment to ensure safety. Help may be required. Adult should remain calm & continued to use de-escalation.

esistance

r Stage Five

support and

and repair.

monitoring. Recovery

Reassurance & repair Developmental Need for observation Debrief

Need for positive listening & debrief

Stage Six

Anxiety/Trigger

Need for support and resistance

Stage One



Defensive / Escalation

Need for diversion, resistance, clear limits boundaries and choices

Stage Three

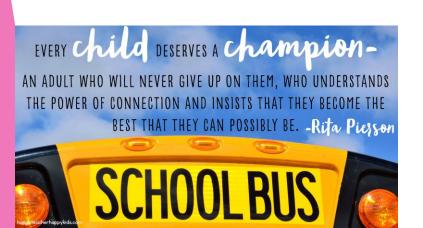
Recovery

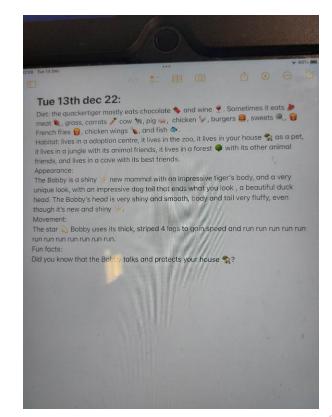
Need for continued letting go. Support and resistance

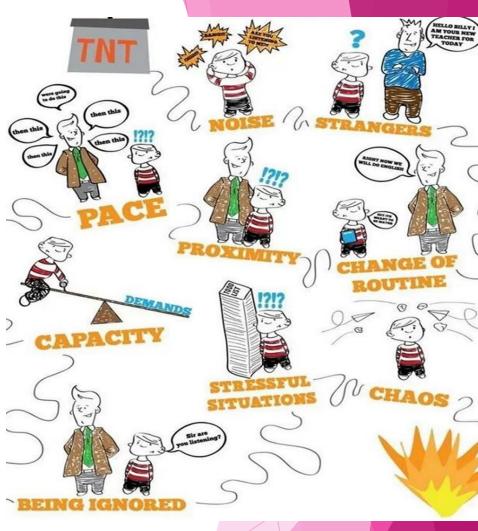
Stage Four

Triggers...

- Know your children
- Look for the first stages and changes to avoid or anticipate the flight, fight or freeze
- Look at your classroom
- Day to day
- Social stories







✓ KNOW OUR CHILDREN

Be that person they see first in the morning

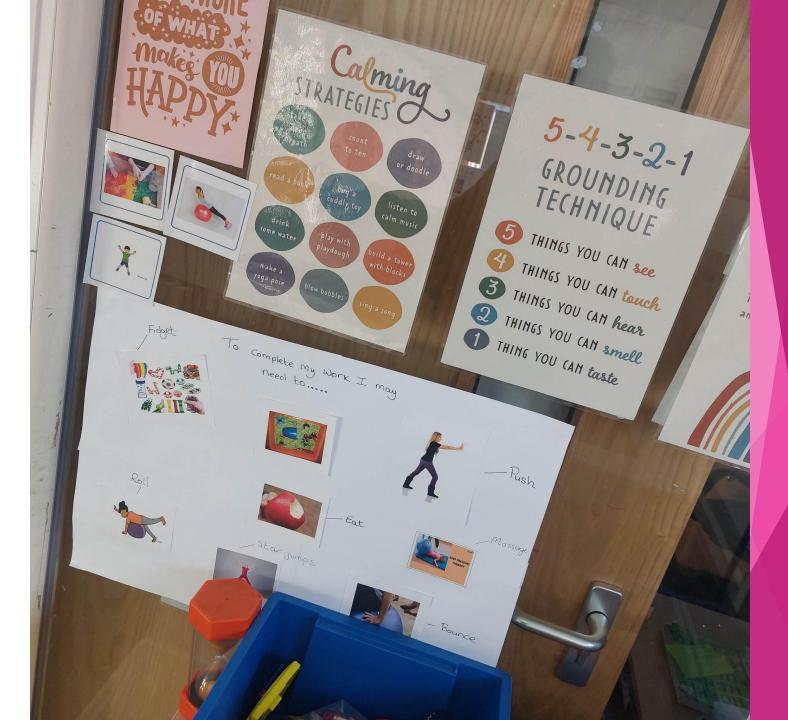


- Now and next
 - Sensory
- ✓ Emotion cards
- Reward charts
 - Safe spaces
 - ✓ Fresh face
 - ✓ Timers

- Movement breaks
 - ✓ Meditation
 - ✓ Distraction
 - Positivity
- Simple instructions
- Flexible groupings
- ✓ Guardian friends/peers
 - ✓ Magic carpet



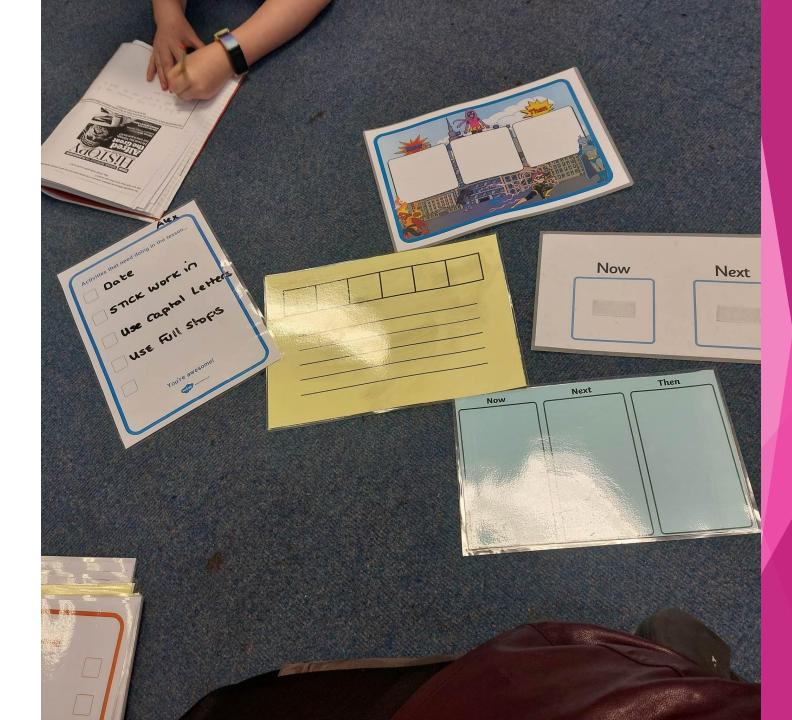














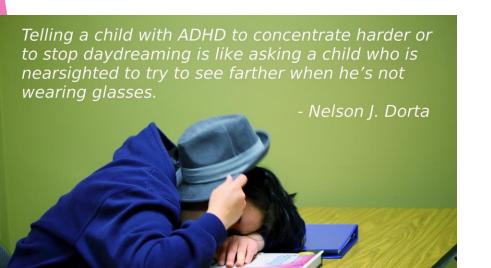






ADHD

- Inattention. Poor concentration and poor working memory.
- Hyperactivity occurs in some but not all of those affected.
- Impulsivity of thought, emotion, and action.
- Poor executive functioning skills, e.g. poor organisation/planning, time blindness, poor emotional regulation.





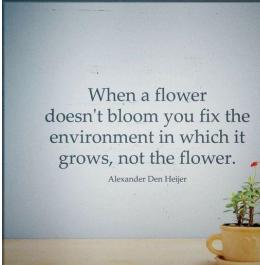
People with ADHD often have a special feel for life, a way of seeing right into the heart of matters, while others have to reason their way methodically.

- Edward M. Hallowell

- ✓ KNOW our children
 - ✓ Now and next
 - ✓ Timers
 - Sensory breaks
 - Repetition
 - ✓ Scaffolds
 - ✓ Sentence stems
 - ✓ SPOTLIGHT
 - Reward charts
 - ✓ Desk buddies
- ✓ Blurt out boxes/praise blocks

- Memory games
- ✓ Emotion cards
- ✓ Colour backs and
 - ✓ listening tools

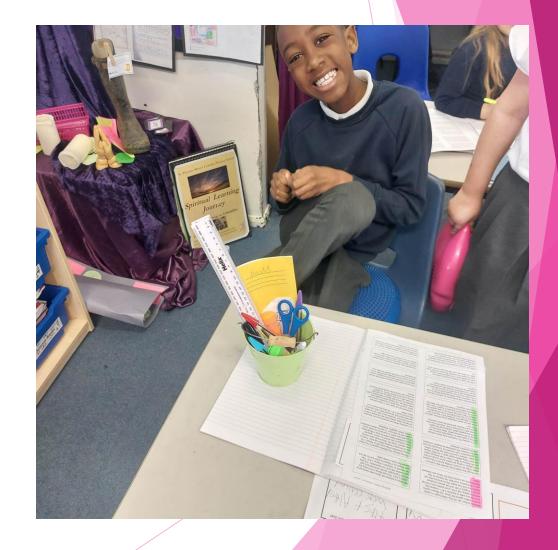




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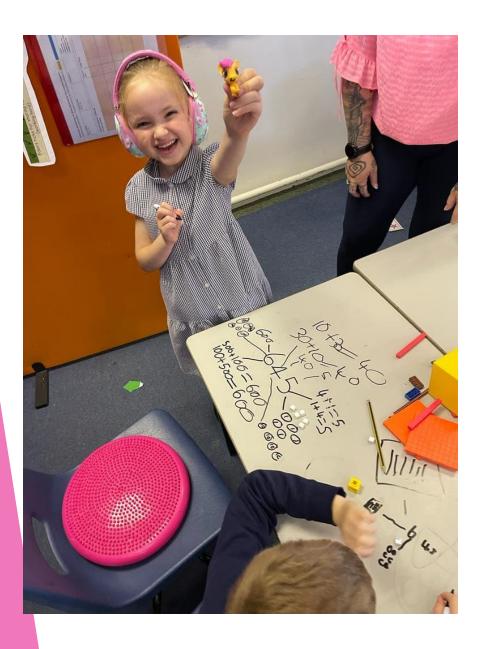


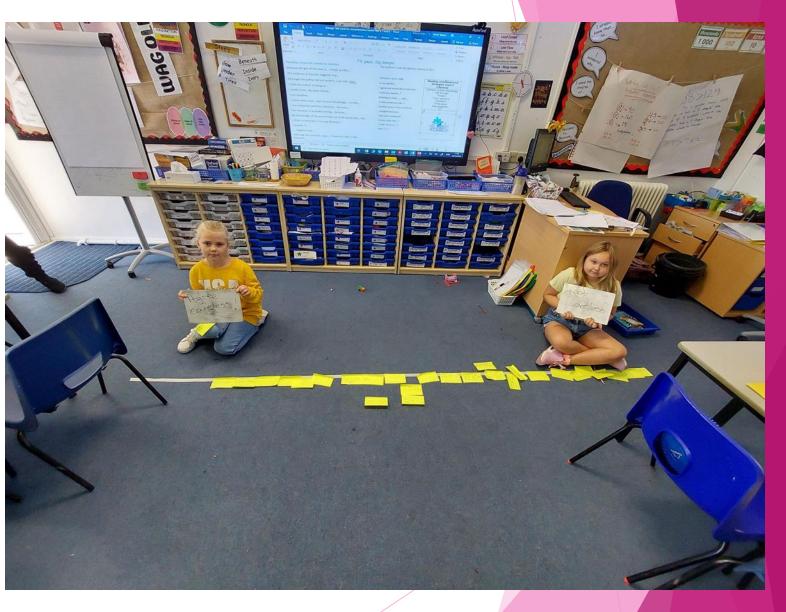


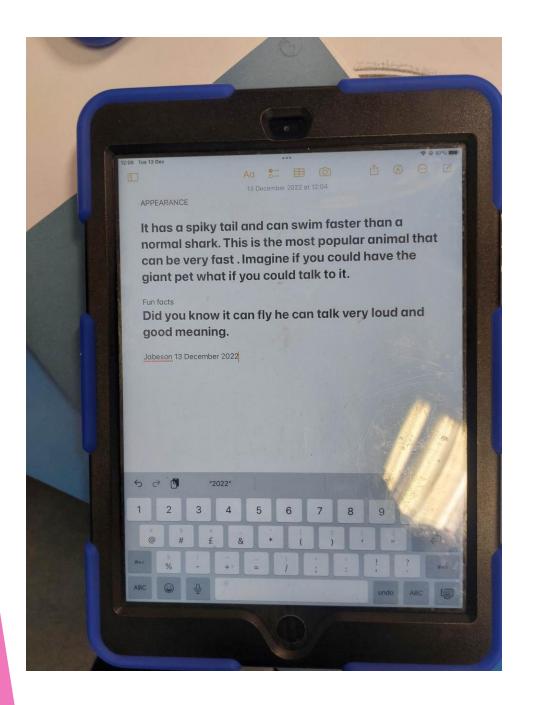














Thank You...

