

## SEND &amp; INCLUSION · ALL GRADES

# SEND Quick Reference

One page for mainstream teachers

## How to use

Print, fold, keep on your desk. When you need a quick reminder of what generally works for the most common SEND profiles in mainstream classes, glance here. None of these replace specialist advice — they're the broadly-useful adjustments most class teachers can make tomorrow.

## Autism — what often helps

<p><b>Predictability</b></p> <p>Visual timetable. Warning before transitions. Same seat. Don't change routines without notice.</p>	<p><b>Clear language</b></p> <p>Say what you mean literally. Avoid sarcasm, idioms, vague instructions. 'Pencils down' not 'we're going to pause.'</p>
<p><b>Sensory awareness</b></p> <p>Reduce noise spikes. Soft lighting if possible. Allow ear defenders. Quiet space for breaks.</p>	<p><b>Time to process</b></p> <p>After asking a question, wait at least 10 seconds. Don't fill the silence. Their answer is coming.</p>

## ADHD — what often helps

<p><b>Movement built in</b></p> <p>Standing breaks every 15 minutes. Errands. Fidget tools that don't disrupt others.</p>	<p><b>Short instructions</b></p> <p>ONE thing at a time. Write it down. Check back in 30 seconds. They genuinely heard, then forgot.</p>
<p><b>Front-and-centre seating</b></p> <p>Near you, away from the window/door. NOT at the back where you can't keep gentle eye contact.</p>	<p><b>Low-stakes recovery</b></p> <p>When they've lost focus, don't shame publicly. A quiet hand on the desk and a smile gets them back faster.</p>



## Dyslexia — what often helps

<p><b>Decodable workload</b></p> <p>Read math word problems aloud. Don't penalise spelling on a science answer.</p>	<p><b>Cream paper or coloured overlays</b></p> <p>Some dyslexic readers find tinted backgrounds reduce visual stress. Ask if they have a preference.</p>
<p><b>Larger text, more spacing</b></p> <p>Print worksheets in 12pt+. Generous line spacing. Sans-serif fonts (Arial) reduce visual crowding.</p>	<p><b>Audio access</b></p> <p>Audiobooks aren't cheating. Text-to-speech for longer passages. The goal is comprehension.</p>

## Anxiety — what often helps

<p><b>Predictability beats reassurance</b></p> <p>'Everything will be fine' lands as 'you can't trust me.' 'Here's exactly what's going to happen' is what works.</p>	<p><b>An exit plan</b></p> <p>An agreed signal or place they can go to if overwhelmed. The fact it exists usually means they don't need it.</p>
<p><b>No public attention</b></p> <p>Don't single out, even with praise. Quiet private praise instead.</p>	<p><b>Low-stakes participation</b></p> <p>Don't force speaking aloud. Whiteboards, written answers, partner-sharing all work.</p>

## What works for ALL of them

1. KNOW THE CHILD. Ask them what helps. They often know. 2. ROUTINE. Same lesson structure every day reduces cognitive load for everyone. 3. RELATIONSHIP. A child who trusts you will tell you what they need. 4. TALK TO PARENTS. They've often been managing this for years. 5. ASK FOR HELP. The SENDCo exists. Use them. You don't have to figure this out alone.



## SEND &amp; INCLUSION · ALL GRADES

# Autism-Friendly Classroom

A practical checklist

## How to use

Walk around your classroom with this list in hand. Tick what's already done. Pick three NOs to address this term. The aim isn't to overhaul everything — it's to make small, concrete, durable changes.

## Sensory environment

Item	Status
Lighting is not flickering or harshly fluorescent	_____
Window areas can be dimmed if needed	_____
Background noise is minimised (rugs, soft chairs)	_____
Children can use ear defenders if available	_____
Strong smells are avoided (perfume, cleaning)	_____
A low-stim 'quiet area' exists in or near the room	_____
Wall display is not overwhelming	_____
The child has space to move to if overstimulated	_____

## Communication

Item	Status
Instructions are given one at a time	_____



Item	Status
Visuals support all spoken instructions	_____
Idioms and figurative language are explained	_____
The child has time to process before responding	_____
I avoid sarcasm and vague language	_____
The child has a clear way to indicate confusion	_____
I check the child has understood, not just heard	_____

## Predictability

Item	Status
A visual timetable is displayed and updated daily	_____
Transitions are warned in advance	_____
Routines are kept the same as far as possible	_____
Changes to routine are flagged ahead of time	_____
The child knows what's happening in each lesson	_____
Supply teachers know the routines	_____

## Social and emotional

Item	Status
The child has at least one positive peer connection	_____
Group work has clear roles and expectations	_____
Unstructured time (break, lunch) has support	_____
Special interests are valued, not dismissed	_____
The child has an exit plan / safe person	_____
Meltdowns are not punished — they're supported	_____
The child has a passport / one-page profile	_____



## What 'autism-friendly' really means

It is not about banning fluorescent lights or never raising your voice. It is about making the classroom PREDICTABLE, COMMUNICATIVE, SENSORILY MANAGEABLE, and KIND. A child who knows what is going to happen, who has clear ways to ask for help, who isn't being bombarded with sensory input, and who feels respected — that child can usually learn well in a mainstream class. This benefits autistic children most. It also helps almost every other child.



## SEND &amp; INCLUSION · GRADES 1–6

# ADHD Strategies

For the mainstream classroom

## What ADHD actually is

ADHD is not a 'lack of attention.' It's a difference in how the brain regulates attention. ADHD brains can hyperfocus for hours on something interesting — and find it genuinely impossible to focus on something boring. The core differences are: • Trouble starting tasks (especially boring ones) • Trouble sustaining effort over time • Working memory differences • Difficulty regulating emotion (often forgotten — but huge) • Time blindness (15 minutes feels the same as 2 hours) It's roughly 5-7% of children. Mostly genetic. Often runs in families. Often missed in girls.

## What ADHD looks like in class

<p><b>Inattentive (often missed in girls)</b></p> <p>Daydreaming. Slow to start tasks. Loses things. Doesn't seem to listen even when spoken to directly. Misses instructions. Easily distracted.</p>	<p><b>Hyperactive/impulsive</b></p> <p>Can't stay seated. Fidgets, taps, hums. Talks excessively. Blurts out answers. Interrupts. Acts before thinking.</p>
<p><b>Combined (most common)</b></p> <p>Both inattentive AND hyperactive features. The classic 'ADHD' picture, but actual children rarely fit textbook descriptions cleanly.</p>	<p><b>Emotional regulation</b></p> <p>Often missed. ADHD brains feel emotions intensely and recover slowly. A small upset becomes a big one. Often labelled as 'attention-seeking' when it's actually neurology.</p>

## What helps — environment

Strategy	Why
Front-and-centre seating, near you	Easier to redirect; you can see early signs of drift
Away from windows, doors, busy displays	Reduces external distractions



Strategy	Why
A 'workstation' with sides if needed	Visual focus channel
Movement allowed (standing, wobble cushion)	Stillness IS the problem, not the solution
Clear, decluttered desk	External order helps internal order

## What helps — instructions

Strategy	Why
One instruction at a time	Working memory limits
Use the child's name first, then instruct	Get attention before content
Repeat key instructions in writing	Auditory memory failed; visual catches it
'Show me you understood' — quick check	They may have nodded but not heard
Break long tasks into 3-question chunks	Attention span fits the task, not the lesson

## What helps — behaviour

Strategy	Why
Discreet redirects (a hand on the desk)	Public corrections shame, don't help
Praise the effort, not the outcome	Outcomes are unreliable; effort is controllable
Movement breaks every 15-20 min	Fuel; not distraction
Errands ('take this to the office')	Movement disguised as helpfulness
Don't punish forgetting — scaffold it	Forgetting IS the disability

## What doesn't help

- 'Just try harder' — ADHD is not effort-based.
- Long lectures about behaviour — by minute 3 they've drifted.
- Naming-and-shaming charts — public, repeated humiliation often makes things worse.
- Removing recess as punishment — this child needs MORE movement, not less. Removing the most-needed regulator backfires.
- 'Calm down' — the brain genuinely cannot, in the moment.
- Comparisons with siblings or peers — corrosive.

## Working with parents



Parents of children with ADHD have usually been told their child is naughty, rude, or that they themselves are bad parents. Many are exhausted, defensive, or both. • Lead with the child's strengths • Be specific about behaviours, not labels • Offer concrete things you're doing (don't just describe problems) • Ask what works at home — they often have brilliant strategies • Acknowledge how hard it is — don't fix Parents who feel judged stop engaging. Parents who feel partnered show up.



## SEND &amp; INCLUSION · GRADES 1–6

# Dyslexia-Friendly Classroom

A practical guide

## What dyslexia is

Dyslexia is a specific learning difference affecting reading, writing and spelling — particularly in HOW the brain processes the sounds of language (phonological processing). It is unrelated to intelligence. The key features:

- Difficulty with phonological awareness (hearing and manipulating sounds)
- Slow or laboured reading (decoding takes all the cognitive effort)
- Poor spelling that doesn't improve with practice the way it does for others
- Often strong oral language and ideas — a gap between what they CAN say and what they CAN write
- Family history common (it's heritable)

Dyslexia affects roughly 10% of children to some degree, with around 4% having severe dyslexia.

## What dyslexia ISN'T

<p><b>Not low intelligence</b></p> <p>Dyslexic children often score AVERAGE or ABOVE on cognitive tests. The gap between reading and thinking is the diagnostic feature.</p>	<p><b>Not 'seeing words backwards'</b></p> <p>Common myth. Most dyslexic children don't see letters reversed. The difficulty is at the level of SOUNDS.</p>
<p><b>Not laziness</b></p> <p>Dyslexic children often work HARDER than peers and produce LESS. The disparity is the source of frustration, not the cause.</p>	<p><b>Not something they grow out of</b></p> <p>Dyslexia is lifelong. With good support, dyslexic adults read fine and lead successful lives.</p>

## Adjustments that genuinely help

Adjustment	Reason
Cream/buff paper or coloured overlays	Reduces visual stress for many



Adjustment	Reason
Sans-serif font, 12pt+, 1.5 spacing	Reduces visual crowding
Read questions aloud (math, science)	Reading load ≠ subject load
Audiobooks for class novels	Comprehension grows even when decoding can't keep up
Word banks for writing tasks	Reduces working memory load
Don't penalise spelling outside English	Spelling errors in science don't reflect understanding
Allow scribed answers occasionally	Captures thought when writing is the bottleneck
Voice-to-text for longer pieces	Get the ideas out, edit later
Pre-teach vocabulary	Reduces decoding load in lessons
Avoid round-robin reading	Public failure deepens shame

## What dyslexic children DON'T need

Some well-intentioned strategies don't help and can harm: • **MORE READING PRACTICE OF THE SAME KIND.** If decoding is the difficulty, more decoding without strategy doesn't help. Specialist phonics intervention does. • **PUNISHMENT FOR SPELLING ERRORS.** • **'JUST LOOK MORE CAREFULLY.'** The problem isn't visual attention; it's phonological processing. • **GETTING THE 'GIFTED' LABEL TAKEN AWAY.** Dyslexia and giftedness coexist often. • **PUBLIC READING ALOUD WITHOUT WARNING.**

## The long view

Dyslexic children who get good support in primary often have minimal academic difficulties later. Many become passionate readers as adults — the cognitive demands of fluent reading do reduce, even if processing remains different. What predicts good outcomes: • Early identification (don't wait for them to 'fall behind') • Specialist phonics intervention (any DfE-validated systematic synthetic phonics programme, plus targeted approaches like Toe by Toe for older children) • Continued access to age-appropriate content via audio/scribing • Self-image preserved — they didn't 'decide they were stupid' The single most damaging thing a school can do is let a dyslexic child conclude they're not clever. The learning will catch up. The self-image won't — at least not without years of work.



## SEND &amp; INCLUSION · GRADES 1–6

# Emotional Regulation

A toolkit for primary classrooms

## What emotional regulation actually is

Emotional regulation is the ability to:

- Recognise what you're feeling
- Tolerate the feeling without being overwhelmed
- Choose a response that fits the situation
- Recover after a strong emotion

It's a developmental skill. Children at age 5 are not expected to regulate well. By age 11, most can regulate most of the time. Some children — anxious, autistic, ADHD, traumatised, with attachment difficulties — develop regulation more slowly. They need EXPLICIT teaching, not just expectation.

## Why 'use your words' often fails

<p><b>When emotion is high, words go offline</b></p> <p>The brain's language centres are partially shut down by high stress. The child literally cannot find words in the moment. Demanding them adds shame.</p>	<p><b>They may not have the words yet</b></p> <p>A 6-year-old may know 'angry' and 'sad' but not 'frustrated', 'overwhelmed', 'embarrassed', 'jealous'. Without precise vocabulary, they can't articulate.</p>
<p><b>They may not know what they feel</b></p> <p>Identifying emotions is itself a learned skill. Many children FEEL but can't yet NAME.</p>	<p><b>Co-regulation comes before self-regulation</b></p> <p>Children regulate by borrowing the calm of an adult. Asking them to use words asks them to self-regulate. They're not there yet.</p>

## Co-regulation — the foundation

<p><b>Be calm yourself</b></p> <p>Children's nervous systems mirror adults'. If you're stressed, they will stay stressed.</p>	<p><b>Lower your voice</b></p> <p>Quiet voice = safe situation. Raised voice = danger. Even when calming a child, raising your voice makes things worse.</p>
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<p><b>Slow your movements</b></p> <p>Sudden movements signal danger to a stressed brain. Move slowly, predictably.</p>	<p><b>Name what you see</b></p> <p>'I can see you're upset.' 'It looks like that was hard.' Don't say 'you should calm down' or 'don't be silly.'</p>
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## Building self-regulation over time

Stage	What you teach	Example
1. Notice	Body signals of emotion	'My tummy feels tight when I'm worried'
2. Name	Vocabulary for feelings	'I'm frustrated' (not just 'angry')
3. Pause	Wait before reacting	Take 3 breaths
4. Choose	Pick a response from a known list	'I can ask for help / take a break / talk to my friend'
5. Recover	Reset after the emotion eases	Drink water, rejoin lesson

## Practical things you can do

1. EMOTION VOCABULARY ON THE WALL. A poster with 30+ feeling words and pictures. Refer to it constantly. 'Are you frustrated? Is it more disappointed?' 2. EMOTION CHECK-INS. At the start of the day, every child shows their feeling on a scale (1-5, or weather symbols, or zones). Takes 90 seconds. Tells you who needs watching. 3. CALM CORNER. A space for self-chosen breaks. Five minutes. Then back. 4. BREATHING TECHNIQUES TAUGHT IN CALM TIMES. 4-4-8 breathing, finger breathing, square breathing. 5. REPAIR AFTER UPSETS. When a child has been dysregulated, talk later — when calm. 'What was happening for you? What might help next time?' 6. MODEL YOUR OWN. 'I'm a bit frustrated today because the printer broke. I'm going to take a deep breath.' Children learn most from what they see.

## What this is NOT

Emotional regulation is NOT:

- Children always staying calm. (Unrealistic and unhealthy.)
- Children suppressing feelings. (Causes other problems.)
- Avoiding all triggers. (Children need to learn to ride waves, not be protected from waves.)
- A short-term project. (It takes years. Be patient.)

A classroom where regulation is happening WELL is one where children sometimes get upset, then come back to calm with adult help, and over time need that help less.



## SEND &amp; INCLUSION · GRADES 1–6

# Anxiety in the Classroom

What helps, what hurts

## What anxiety is

Anxiety is fear without an immediate threat. The body activates fight/flight/freeze in response to imagined or anticipated danger. For anxious children, the body's danger response is louder, more frequent, or harder to switch off. They're not 'making a fuss.' Their nervous system is genuinely telling them they're in danger. Anxiety is increasingly common in primary children. Estimates suggest 5-15% of primary-age children meet criteria for an anxiety disorder. Many more experience subclinical anxiety that affects learning.

## What anxiety might look like

<p><b>Avoidance</b></p> <p>Refusing to do tasks, missing school, hiding in the toilet. Often labelled 'lazy' or 'oppositional.' It's actually fear.</p>	<p><b>Physical symptoms</b></p> <p>Tummy aches, headaches, nausea. Often before tests, presentations, or specific lessons. Real symptoms — not faked.</p>
<p><b>Perfectionism / freezing</b></p> <p>Won't start work because they're scared of getting it wrong. Stares at the page. Erases everything.</p>	<p><b>Hyper-vigilance</b></p> <p>Watches the room constantly. Aware of every sound. Knows the schedule better than the teacher. Notices changes immediately.</p>
<p><b>Reassurance-seeking</b></p> <p>'Is this right?' 'Am I in trouble?' 'Did I do okay?' Asks 50 times a day. Reassurance helps for 30 seconds.</p>	<p><b>Anger</b></p> <p>Anxiety often surfaces as anger in younger children. The child who explodes when asked to read aloud isn't angry — they're terrified.</p>

## What helps



Strategy	Why
Predictability over reassurance	Reassurance treats symptom; predictability treats cause
Show the child what's coming	Rehearsal reduces fear of unknown
Quiet redirects, never public	Public attention amplifies anxiety
Choice when possible	Sense of control reduces anxiety
A 'safe person' they can go to	Knowing it exists is calming
Gradual challenge, not avoidance	Avoidance feeds anxiety; small wins shrink it
Naming feelings without judgement	'You're nervous. That's OK.'
Repair quickly after distress	Don't leave them alone with shame

### What hurts (even when well-intentioned)

What hurts	Why
'Don't worry, you'll be fine!'	Sounds dismissive; anxiety responds 'how do you know?'
'Just take a deep breath and stop'	Implies the feeling is wrong
Removing all challenge	Reinforces that the feared thing is dangerous
Public reassurance ('Look how brave!')	Spotlight worsens anxiety
Surprise tests, presentations, changes	No time to prepare; spike in fear
'Why are you crying about this?'	Anxiety doesn't need a logical reason
Compulsively answering reassurance-seeking	Trains the brain that reassurance is the fix

### What to do in the moment

When a child is acutely anxious: 1. **LOWER YOUR VOICE.** Whatever volume you were at — quieter. 2. **SLOW DOWN.** Slow movements. Slow speech. 3. **NAME WITHOUT FIXING.** 'I can see you're worried. That's OK.' 4. **REGULATE BEFORE REASONING.** The thinking brain is offline. Don't try to talk them out of it. 5. **OFFER, DON'T DEMAND.** 'Would you like to take 5 minutes? Or sit with me?' (Choice helps.) 6. **WAIT.** Anxiety eases. Often in 5-15 minutes. Don't rush them. 7. **RECONNECT, DON'T CONSEQUENCE.** 'You did really well to come back. Let's keep going.'



## When to refer

Most anxious children are supported well by good classroom strategies. Some need more.

**WORTH FLAGGING TO SENDCo / GP referral:**

- Anxiety preventing school attendance
- Frequent panic episodes
- Sleep severely affected
- Refusing to leave a parent
- Self-harm or talk of self-harm
- Anxiety persisting > 3 months despite good adjustments

Childhood anxiety responds well to evidence-based therapy (CBT in particular). The earlier the intervention, the better the outcome. Don't wait for it to 'pass.'



SEND & INCLUSION · ALL GRADES

# SEND Parent Meeting

A prep template

## Why preparation matters

Parents of children with SEND have often been told their child is the problem. They've been blamed for parenting. They've sat in meetings where nothing was decided and nothing changed. By the time they meet you, they may be exhausted, defensive, or both. A well-prepared 30-minute meeting can rebuild trust, agree concrete actions, and genuinely help the child. A poorly-prepared one becomes another in a long line of disappointing meetings.

### Before the meeting — what's the purpose?

Why is this meeting happening? Pick one main aim: ■ Sharing initial concerns ■ Reviewing existing support ■ Discussing next-step interventions ■ Handover before transition ■ Parent-initiated concern ■ Other: \_\_\_\_\_ One meeting = one main aim. If it's two, it'll be neither.

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**Three strengths to lead with**

Whatever the meeting is about, START with strengths. Three specific things this child does well — not 'is lovely' but specific, observed examples. 1. \_\_\_\_\_ 2.

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**Two specific concerns**

Don't list 12 problems. Pick the TWO most important to discuss this meeting. Be specific: • 'Sam isn't joining in' — not specific • 'Sam hasn't spoken voluntarily in lessons for 3 weeks; he's been answering when asked but withdrawing in groupwork' — specific. Concern 1: \_\_\_\_\_

Concern 2: \_\_\_\_\_

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### Three things you've already tried

Parents need to know you've thought about this BEFORE the meeting. Three things you've already adjusted, with what happened: 1. Tried: \_\_\_\_\_ Result:

\_\_\_\_\_ 2. Tried: \_\_\_\_\_ Result:

\_\_\_\_\_ 3. Tried: \_\_\_\_\_ Result:

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### What you want to ASK them

Parents are the world experts on their child. What do you want to learn from them? • What works at home? • What triggers the same difficulty there? • What does the child say about school? • What concerns them most? • What do they want from this meeting?

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### Three concrete next steps to leave with

End with 3 specific, time-bound actions. Vague promises ('we'll keep an eye on it') waste meetings. 1. Action: \_\_\_\_\_ By: \_\_\_\_\_ Who: \_\_\_\_\_ 2. Action: \_\_\_\_\_ By: \_\_\_\_\_ Who: \_\_\_\_\_ 3. Action: \_\_\_\_\_ By: \_\_\_\_\_ Who: \_\_\_\_\_

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### What NOT to do in the meeting

- Don't lead with the problem. Lead with strengths.
- Don't talk for 25 minutes. Half the meeting should be listening.
- Don't use jargon. ('SENDCo, EHCP, EP referral, IEP, PLP') — translate as you go.
- Don't make commitments you can't keep. Better to say 'I need to check' than to over-promise.
- Don't end without specific next steps. Vague meetings = no follow-through.
- Don't tell them their child is lovely if you don't mean it. They'll know.

