

# Saint Margaret Mary's Catholic Infant School

## Strategies for supporting pupils with SEND in Music lessons.

Individual Need	Here's how we support everyone...
Speech, Language & Communication Needs	<ul style="list-style-type: none"> <li>• Pre-teach instrument names and sounds.</li> <li>• Introduce key vocabulary at the start of the lesson. Use pictorials to support this. A master of these pictorials is available so they are standardised across school.</li> <li>• Allow pupils to rehearse answers with talking partners.</li> <li>• Be patient and give time for children to give their answers. Encourage them and give lots of praise.</li> <li>• For EAL children, pre-teach vocabulary. This could be done through pictorials or tactile resources or through the use of Google translate.</li> </ul>
Autism Spectrum Condition	<ul style="list-style-type: none"> <li>• Provide 'now and then' timetables.</li> <li>• Follow the structure of our music lessons at SMMI: listening and appraising, musicianship and performing.</li> <li>• Be aware of sensory needs e.g. children may prefer to work in a small group in a quieter area using quieter instruments.</li> <li>• Try to incorporate interests into the lesson e.g. when reading notation in Reception, use an object or character that the child has a strong preference for as the symbol.</li> <li>• Model how to play the instruments.</li> <li>• Encourage and praise throughout e.g. 'I like how ____.' '____ is showing a wonderful example of ____.'</li> <li>• Provide clear step-by-step instructions with visual cues as reminders.</li> <li>• When working in small groups, ensure everybody is given a role to encourage equal participation.</li> </ul>
Attention Deficit Hyperactivity Disorder	<ul style="list-style-type: none"> <li>• Ensure a clear carpet or standing space is established. You could use a mat or rubber floor spot.</li> <li>• Provide movement breaks. Movement could be added into your lessons via playing instruments or actions.</li> <li>• Focus children with a role e.g. to count 1, 2, 3, 4 for a small group or the class.</li> <li>• Provide a fidget tool for use during inputs.</li> <li>• Encourage and praise throughout e.g. 'I like how ____.' '____ is showing a wonderful example of ____.'</li> <li>• Provide clear step-by-step instructions with visual cues as reminders.</li> <li>• When working in small groups, ensure everybody is given a role to encourage equal participation.</li> </ul>
Experienced Trauma	<ul style="list-style-type: none"> <li>• Before the lesson, come up with strategies for if difficulties occur during the lesson, and ways these can be overcome, reminding children that learning is about trial and error.</li> <li>• 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 strongly in place should this arise.</li> <li>• Provide a safe and familiar calm down 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/ sensory breaks.</li> </ul>

Anxiety	<ul style="list-style-type: none"> <li>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.</li> <li>Carefully plan groupings/pairings and be aware of who the child feels most comfortable with sitting next to and having them support them with their work. Arrange for another child to be a 'buddy' for computing lessons so that they know that they can have a consistent friend to help if needed.</li> </ul>
Cognition and Learning Challenges	<ul style="list-style-type: none"> <li>Pre-teach instrument names and sounds.</li> <li>Introduce key vocabulary at the start of the lesson. Use pictorials to support this. A master of these pictorials is available so they are standardised across school.</li> <li>Be concise with supporting PowerPoints / Notebooks. Limit text and images per slide so that it is not overwhelming.</li> <li>Recap previous learning and key concepts each lesson so that this knowledge is committed to their long-term memory.</li> </ul>
Toileting Issues	<ul style="list-style-type: none"> <li>Discuss with the children or parents a discreet way for the child to signal that they need the toilet. This could be done with an action e.g. BSL or by pointing to a toilet symbol.</li> <li>Look for clues that the child may need to go to the toilet. Discreet ask them if they would like to go. They may be too distracted or engrossed in the lesson to ask you.</li> </ul>
Dyslexia Traits	<ul style="list-style-type: none"> <li>Provide a coloured background on PowerPoints/ Notebooks.</li> <li>When displaying text, ensure alternative phrases / sentences are different colours.</li> <li>Allow thinking time or time to rehearse answers with talking partners.</li> <li>Provide stem sentences for written tasks e.g. The tempo is _____. Pictorial word banks can be used as additional support.</li> </ul>
Hearing Impairment	<ul style="list-style-type: none"> <li>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.</li> <li>Seating the child so that they can see others in the class (where possible).</li> <li>Ensuring the lighting is adjusted so that it is not too dark.</li> <li>Be aware of the specific circumstances for the child and adapt accordingly.</li> </ul>
Visual Impairment	<ul style="list-style-type: none"> <li>Coloured overlays/coloured exercise books.</li> <li>Flexible seating arrangements for better view of the board. Familiarise yourself with any specific resources the child needs to support them; for example: they may be better able to read their own writing if they use a thicker black pencil/pen/marker; they may need a typo scope when reading. This is a reading shield made of a black material with a rectangular cut out. It reduces extra light reflected from the surface of the paper and helps assist with staying on the correct line while reading;</li> <li>Ensure the child is wearing any prescribed glasses to reduce visual fatigue.</li> <li>Provide enlarged/magnified pictures, images, maps and print. The VI team will have assessed the child's vision and recommended a font size and typeface to use. The SENCO will advise on this. Be wary that simply enlarging worksheets on a photocopier makes the letters, or edges of diagrams lose their sharpness and reduces the contrast. Please ensure resources are produced in the correct font size and type-face for the child to access.</li> </ul>
Dyscalculia Traits	<ul style="list-style-type: none"> <li>Provide written instructions, printed diagrams and personalised worksheets with a worked example (where appropriate/relevant) for the child to follow.</li> <li>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).</li> <li>Provide print outs of diagrams and visual support in lessons.</li> <li>The child may work slower than peers. Be sensitive to this and supportive of any additional time/repetition they may need.</li> <li>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.</li> </ul>
Dyspraxia Traits	<ul style="list-style-type: none"> <li>Provide support and model how to play instruments.</li> <li>Provide space to allow children to balance whilst playing an instrument. Where possible, create space.</li> </ul>
Tourette Syndrome	<ul style="list-style-type: none"> <li>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.</li> </ul>

