

INTERVENTIONS at Eureka Primary School

Wellbeing and mental Health	Physical
<ul style="list-style-type: none"> • Anger gremlins • Forest School • Lego • Nurture • SENDCO drop ins • Social stories • Sports coach/SEND cricket • Superflex • Transition group • Wellbeing ambassadors • WISP 	<ul style="list-style-type: none"> • Active hands/Fine motor skills • EYFS fine motor skills toolkit (NHS) • OT tasks • Proprioception • Physical Literacy • Touch typing
Cognition/Learning	Communication
<ul style="list-style-type: none"> • Dyslexia support pack • Hornet • Mathletics • Meemo • Nessy • Phonics instruction • Priority readers/school volunteer readers • Small steps • SNIP • S.O.S spellings • Toe by toe • Word wasp 	<ul style="list-style-type: none"> • DLD group • Lego • Neli • SALT intervention • Superflex

WELLBEING AND MENTAL HEALTH

Intervention name	Outline of intervention and who it is for	Intended impact
Anger Gremlins	FOCUS: developing strategies for children who are angry and struggle with managing feelings. REFERRAL/QUALIFICATION FOR INTERVENTION: children who experience regular angry outbursts	To develop strategies for anger management and self regulation
Forest school	FOCUS: Develops social skills, peer interactions, problem solving, supports emotional wellbeing REFERRAL/QUALIFICATION FOR INTERVENTION: safeguarding, Autism/ADHD, EAL, Bereavement, Family Crisis, sibling rivalry, drug/alcohol abuse at home, mental health crisis, bullying, transition, social isolation	To improve social interactions, listening skills, communication, problem solving
lego	FOCUS: a structured, play-based intervention that uses Lego bricks to help children, particularly those with autism or social communication difficulties, develop social skills like sharing, turn-taking, and communication REFERRAL/QUALIFICATION FOR INTERVENTION: Autism/ADHD, EAL, bullying, transition, social isolation. Developing friendships, pupils new to school	To develop social interactions, communication and language, turn taking, sharing, cooperation and listening skills
nurture	FOCUS: a small group intervention to target a small group of pupils who require some additional adult time. These may be working on similar experiences/strategies to support situations outside of school, friendship issues, social interactions REFERRAL/QUALIFICATION FOR INTERVENTION: safeguarding, Autism/ADHD, EAL, Bereavement, Family Crisis, sibling rivalry, drug/alcohol abuse at home, mental health crisis, bullying, transition, social isolation	To support wellbeing and mental health. To address specific areas in small group situations and improve peer to peer interactions
SENDCO drop in	FOCUS: to support children and provide positive and sustained relationship in school. May be short term or longer term depending on needs of pupil. REFERRAL/QUALIFICATION FOR INTERVENTION: safeguarding, Autism/ADHD, EAL, Bereavement, Family Crisis, sibling rivalry, drug/alcohol abuse at home, mental health crisis, bullying, transition, social isolation, LAC	To improve mental health and wellbeing by building relationships with a trusted adult in school
SEND CRICKET	FOCUS: service provided by Derbyshire Cricket Club to support SEND REFERRAL/QUALIFICATION FOR INTERVENTION: pupils on the SEND register who struggle with physical activity and emotional interactions, social interactions, coping with winning/losing, turn taking etc	To improve coordination and social interactions as well as physical development
Social Stories	FOCUS: to develop understanding of how to respond in social situations and to prepare children for events or help them make sense of situations. Often bespoke to individual children and situations they have experienced. REFERRAL/QUALIFICATION FOR INTERVENTION: Autism/ADHD, Bereavement, Family Crisis, sibling rivalry, drug/alcohol abuse at home, bullying, transition, social isolation, social interactions, transition, difficulties in understanding the world around them and how to respond	To develop awareness and understanding of social situations and develop strategies and appropriate responses to situations. To develop awareness of how to respond appropriately in social situations through rehearsal and discussion

Sports coach	<p>FOCUS: developing and building positive relationships. Supporting children with wellbeing and mental health, emotions and engagement.</p> <p>REFERRAL/QUALIFICATION FOR INTERVENTION: safeguarding, Autism/ADHD, EAL, Bereavement, Family Crisis, sibling rivalry, drug/alcohol abuse at home, mental health crisis, bullying, transition, social isolation</p>	To develop relationships with a trusted adult and discuss strategies for supporting wellbeing and mental health
Superflex	<p>FOCUS: developing understanding of different behaviour types and how to interact with people with differing personalities. Examining and discussion of strategies to overcome/support each personality type</p> <p>REFERRAL/QUALIFICATION FOR INTERVENTION: ASD, social isolation, friendship issues. Children who struggle with social situations and have difficulty understanding intention and interactions with others</p>	To develop understanding of social interactions and understanding of how to interact with different personality types
Transition group	<p>FOCUS: supporting pupils with transition to secondary school (or a new school) to reduce anxiety and provide a safe space to ask questions</p> <p>REFERRAL/QUALIFICATION FOR INTERVENTION: usually year 6 pupils transitioning to secondary school (although could be used to support pupils transitioning to a new school -especially SEND pupils)</p>	To reduce anxiety about moving schools and provide a safe space to ask questions
Wellbeing ambassadors	<p>FOCUS: developing interactions between peers out on the playground. To provide trained peer to peer support to resolve minor conflict and look for solutions. Pupils are selected in years 5 and 6 to become an ambassador and then are available at break and lunchtime to support peers</p> <p>REFERRAL/QUALIFICATION FOR INTERVENTION: conflict needs to be minor and larger issues should be referred to class teacher or senior leadership team to resolve. Mrs Eaton is wellbeing ambassador teaching assistant and can support in any training/discussions</p>	To develop independence in resolving minor conflict between children. To develop mature conversations and find solutions/resolutions to situations independently. Create respect across school
WISP	<p>FOCUS: developing and supporting social skills, impact of home environment, social interactions, friendships and mental health.</p> <p>REFERRAL/QUALIFICATION FOR INTERVENTION: safeguarding, Autism/ADHD, EAL, Bereavement, Family Crisis, sibling rivalry, drug/alcohol abuse at home, mental health crisis, bullying, transition, social isolation</p>	To develop relationships and provide emotional support for pupils experiencing significant trauma/hardship outside of school and provide safe space to talk about feelings and emotions

PHYSICAL

Intervention name	Outline of intervention and who it is for	Intended impact
Active Hands	<p>FOCUS: developing fine motor skills, treading, cutting, muscle control</p> <p>REFERRAL/QUALIFICATION FOR INTERVENTION: Children who struggle with letter formation, holding pens/pencils, difficulties cutting, threading, fastening zips</p>	To improve fine motor skills and letter formation
EYFS fine motor skills toolkit (NHS)	<p>FOCUS: developing fine motor skills, treading, cutting, muscle control through play-based activities</p> <p>REFERRAL/QUALIFICATION FOR INTERVENTION: Children who struggle with letter formation, holding pens/pencils, difficulties cutting, threading, fastening zips and are in EYFS</p>	To improve core stability and fine motor skills
OT	<p>FOCUS: a personalized plan developed with a client to address physical, cognitive, sensory, or social challenges, enabling them to participate in daily activities that are meaningful to their health and well-being.</p> <p>REFERRAL/QUALIFICATION FOR INTERVENTION: children will have a specific plan from an occupational therapist that school staff will implement</p>	To develop physical strength/dexterity in areas identified by the Occupational Therapy team
Proprioception	<p>FOCUS: uses exercises and activities to improve the body's awareness of its position, movement, and orientation in space without relying on vision, aiming to enhance motor function, balance, coordination, and overall sensorimotor health.</p> <p>REFERRAL/QUALIFICATION FOR INTERVENTION: children who struggle to sit in class and have difficulties focussing. Children who struggle with transition into school.</p>	To develop focus and core strength. To support transition into school as well as provide movement breaks as part of the school day
Physical literacy	<p>FOCUS: a structured approach to developing an individual's physical literacy, which includes their motivation, confidence, physical competence, and knowledge and understanding to be active for life.</p> <p>REFERRAL/QUALIFICATION FOR INTERVENTION: develops movement and gross motor skills as well as developing core strength to support focus, concentration and fine motor skills.</p>	To improve focus and concentration as well as core strength to support class based learning
Touch Typing	<p>FOCUS: developing speed and accuracy when using ICT to type and record ideas</p> <p>REFERRAL/QUALIFICATION FOR INTERVENTION: children who have completed active hands but whose writing is still difficult to read and whose progress is impacted by struggling to get ideas down on a page or being hard to decipher meaning they are not getting recognition for their ideas/effort</p>	To develop accuracy and speed when using ICT so that ideas can be recorded and understanding assessed

COGNITION AND LEARNING

Intervention name	Outline of intervention and who it is for	Intended impact
Dyslexia support pack	<p>FOCUS: Helps identify specific areas in literacy that child finds difficult through screening so that targeted interventions can be put in place before any diagnosis is sought</p> <p>REFERRAL/QUALIFICATION FOR INTERVENTION: Children who struggle with literacy (but are making progress in other areas) and are not making expected progress. Children who have already accessed SNIP and SOS spellings but are still finding it difficult to improve writing attainment</p>	To target specific areas of literacy to see whether progress can be made or whether there is a requirement to advise parents to seek a private dyslexia diagnosis
Hornet	<p>FOCUS: 1:1 Spelling intervention for KS1</p> <p>REFERRAL/QUALIFICATION FOR INTERVENTION: Pupils who are struggling to remember spellings and whose written work is impacted by poor spelling despite accessing phonics and class based strategies</p>	To improve spelling accuracy in KS1 pupils
mathletics	<p>FOCUS: a digital, curriculum-aligned program that provides individualized support for primary school students struggling with mathematics by delivering targeted, engaging activities, games, and challenges that adapt to a student's progress</p> <p>REFERRAL/QUALIFICATION FOR INTERVENTION: children who are working just below expected age related expectations in maths and require additional targeted support.</p>	To develop fluency in maths and target specific gaps in mathematical knowledge
meemo	<p>FOCUS: a 1:1 daily intervention to support children with working memory , who struggle to retain information, organise resources and with executive function skills.</p> <p>REFERRAL/QUALIFICATION FOR INTERVENTION: working below Age related expectations in all areas. Children who can discuss verbally ideas but who struggle to put these ideas into a written format.</p>	To improve working memory and recall
Nessy	<p>FOCUS: a structured reading and spelling programme for pupils aged 6-11 although it is mainly used in KS2 at Eureka. The program begins with systematic synthetic phonics which has been proven to be the best way to instruct early readers. As literacy skills develop, students advance to instruction in spelling, morphology, vocabulary and comprehension. A 20-30 min daily online programme that can also be used at home.</p> <p>REFERRAL/QUALIFICATION FOR INTERVENTION: working below Age related expectations in reading and spelling.</p>	To improve reading and spelling. Useful to support pupils with dyslexic style traits

Phonics instruction	<p>FOCUS: developing phonological development through targeted instruction 3x weekly</p> <p>REFERRAL/QUALIFICATION FOR INTERVENTION: Children who struggle letter sounds and have difficulty in application of phonics when writing.</p>	To improve phonics understanding and application to independent writing/reading
Priority Readers/School volunteer readers	<p>FOCUS: targeted support for children identified as a priority for reading (bottom 10%)</p> <p>REFERRAL/QUALIFICATION FOR INTERVENTION: Children who struggle with reading and would benefit from additional support outside of the classroom reading to a range of audiences. Children who do not read regularly at home and require additional support</p>	To improve reading skills and fluency.
Small steps	<p>FOCUS: to support pupils who are working at least 2 years below age related expectations. To identify gaps in learning so targeted interventions can be put in place to target and close gaps. Monitored termly to ensure progress of pupils working below age related expectations and maintain high expectations for all pupils</p> <p>REFERRAL/QUALIFICATION FOR INTERVENTION: All children working 2 years below peers or who have failed to meet ELG at end of FS2.</p>	To close gaps in learning and ensure all pupils make progress (even if attainment is below that of peers)
Snip	<p>FOCUS: dyslexia-focused literacy program for improving spelling and reading skills, particularly for older students .</p> <p>REFERRAL/QUALIFICATION FOR INTERVENTION: to be used before implementation of dyslexia strategy support for pupils who struggle with spelling despite prior phonic exposure.</p>	To improve spelling and strategies for recall of spelling patterns.
SOS spellings	<p>FOCUS: The Simultaneous Oral Spelling (SOS) intervention is a multi-sensory strategy for teaching spelling by combining visual, auditory, and kinesthetic (VAK) elements. It involves saying the letter names while writing, tracing words, using multi-coloured "rainbow writing" for reinforcement, and then recalling the word from memory, often with eyes closed, to build muscle memory and aid recall for difficult words.</p> <p>REFERRAL/QUALIFICATION FOR INTERVENTION: to be used before implementation of dyslexia strategy support for pupils who struggle with spelling despite prior phonic exposure</p>	To improve spelling and strategies for recall of spelling patterns.
Toe by Toe	<p>FOCUS: 1:1 Spelling support for KS1 or KS2</p> <p>REFERRAL/QUALIFICATION FOR INTERVENTION: Cognition and learning, poor literacy and spelling awareness. Pupils who are struggling to remember spellings and whose written work is impacted by poor spelling despite accessing phonics and class based strategies:</p>	To improve spelling and strategies for recall of spelling patterns.
Word wasp	<p>FOCUS: 1:1 Spelling intervention for KS2</p> <p>REFERRAL/QUALIFICATION FOR INTERVENTION: Pupils who are struggling to remember spellings and whose written work is impacted by poor spelling despite accessing phonics and class based strategies:</p>	To improve spelling and strategies for recall of spelling patterns.

COMMUNICATION

Intervention name	Outline of intervention and who it is for	Intended impact
DLD Group	<p>FOCUS: a structured, intervention that supports pupils with a DLD diagnosis understand their diagnosis and develop strategies to support them in processing instructions and communicating clearly and effectively with others.</p> <p>REFERRAL/QUALIFICATION FOR INTERVENTION: SALT diagnosis of DLD</p>	To develop understanding of diagnosis and strategies to deal with difficulties. To support pupils becoming more independent
lego	<p>FOCUS: a structured, play-based intervention that uses Lego bricks to help children, particularly those with autism or social communication difficulties, develop social skills like sharing, turn-taking, and communication</p> <p>REFERRAL/QUALIFICATION FOR INTERVENTION: Autism/ADHD, EAL, bullying, transition, social isolation. Developing friendships, pupils new to school</p>	To develop social interactions, communication and language, turn taking, sharing, cooperation and listening skills
Neli	<p>FOCUS: The NELI programme provides schools with a way of identifying early language difficulties and is proven to improve children's language skills and behaviour in school. It is a 20-week intervention to build children's vocabulary, listening and storytelling skills through targeted small group and individual sessions.</p> <p>REFERRAL/QUALIFICATION FOR INTERVENTION: "NELI" (Nuffield Early Language Intervention) is for young children (ages 4-5 in Reception year) in the UK with poor spoken language skills,</p>	To develop early language and communication skills helping them with vocabulary, listening, and early literacy through small group/individual sessions with trained teaching assistants, aiming to boost their language and reading abilities,
Salt intervention	<p>FOCUS: to support sound and speech clarity</p> <p>REFERRAL/QUALIFICATION FOR INTERVENTION: pupils with a SALT plan issued by Speech and language therapists</p>	To improve speech clarity and work on targeted areas identified by speech and language specialists
Superflex	<p>FOCUS: developing understanding of different behaviour types and how to interact with people with differing personalities. Examining and discussion of strategies to overcome/support each personality type</p> <p>REFERRAL/QUALIFICATION FOR INTERVENTION: ASD, social isolation, friendship issues. Children who struggle with social situations and have difficulty understanding intention and interactions with others</p>	To develop understanding of social interactions and understanding of how to interact with different personality types

REFERRAL PROCESS FOR INTERVENTIONS

Concerns are to be handed in on a concerns form to SENDCO to review and allocate appropriate intervention. The SENDCo will track pupils in interventions to ensure pupils are not receiving several in the same half term, therefore missing lesson time and in particular to minimise missing the same lesson repeatedly. The SENDCo will also monitor to ensure pupils are not receiving an intervention for significant periods of time with little impact. If this happens the SENDCO will discuss with class teachers and the headteacher to see if alternative interventions may be more suitable or whether a referral to outside agencies, inclusion panel or the ISAT are required.

ASSESSMENT PROCESSES AND MEASURING IMPACT

All interventions should have baseline assessments completed at the start of the intervention and again at the end (this may be half termly but interventions may also run for longer if needed). Some interventions such as Active hands, Meemo, word wasp, word hornet, Toe by Toe and Touch typing have assessments built in as part of the programme and should be completed according to the guidelines. Other interventions do not have a prescribed assessment and so the following assessment scales should be used at the start as a baseline and again at the end to measure impact. This should be done for **all** children who take part and should where possible be carried out by the same person i.e the person leading the intervention. Time within the intervention allocated time can be used for these assessments. Assessment scores and comments re progress should be shared with the class teacher and the SENDCO at the end of the intervention period. These will then be stored electronically in the pupils records and can be shared with staff and parents.

Cognition and Learning assessment documents

To assess pupils who have been identified with a cognition and learning need, Formative Footprints are used in Key stage 1 and Small Steps documents are used in Key stage 2. These identify specific gaps in learning and enable bespoke interventions to be designed and implemented to address the specific gaps in learning. These documents are updated termly and pupils are tracked to ensure they are making progress. At Eureka we expect pupils to make at least 10 small steps per term or 30 steps over the year. This may mean that overall they remain within the same overarching assessment banding for the whole year (usually working below) but ensures that there is still an expectation for progress and the gaps in learning are closing. Progress for these pupils is discussed at Pupil Progress meetings and the tracking data shared with the class teacher, the assessment manager and the headteacher. These documents can be used at parents evenings to show the progress pupils are making.

ASSESSMENT for Interventions that address wellbeing

The Autism Progression document has also been adapted to show progress over time and assesses broader elements of cognition and learning such as the impact of the environment and the engagement in the class room. See documents below.

Environmental Audits from the Derbyshire Local Offer are also carried out for specific children.

These assessments below can be used assess general learning ability at the start of an intervention and again at the end to show impact. They should be carried out by the person leading the intervention and may be done through observations in class.

Learning and Engagement -ASD Progression Framework			
	ENTRY SCALE 1-5	EXIT SCALE 1-5	ADDITIONAL COMMENTS
Learning through play			
1.1 Explores toys / objects / materials			
1.2 Shows understanding of the purpose of toys / play items			
1.3 Engages in cause and effect play			
1.4 Engages in pretend / symbolic play			
1.5 Enacts story routine / play scenario			
Motivation and engagement			
2.1 Responds to sensory features of items / activities			
2.2 Responds to environment			
2.3 Responds to interaction from supporting adult or peer			
2.4 Anticipates / predicts what will happen			
2.5 Shows interest in items / activity / topic			
2.6 Explores / investigates items / activities			
2.7 Discovers new knowledge and understanding			
2.8 Attends to task / activity			
2.9 Persists with activity			
2.10 Shifts attention to another task / activity / request			
2.11 Initiates / makes request for activity			
2.12 Engages in negotiated tasks			

Organisation and independent learning

3.1 Organises own belongings / resources			
3.2 Makes effective use of timetables / planners			
3.3 Shows awareness of time management			
3.4 Works independently			
3.5 Participates in planning own learning			
3.6 Plans work			
3.7 Carries out research into a topic			
3.8 Asks for help			

Understanding and following rules, routines, and expectations

4.1 Finds way around learning environment			
4.2 Copes with queueing / lining up			
4.3 Attracts attention in an appropriate manner			
4.4 Follows agreed strategies for movement within learning area			
4.5 Follows playtime / break time routines			
4.6 Shows increased tolerance in relation to expectations			

Evaluating own learning

5.1 Evaluates own learning			
5.2 Applies understanding of own learning			
5.3 Knows and applies own strengths			
5.4 Recognises own difficulties			
5.5 Sets own learning goals			
5.6 Understands the consequences of own choices and actions			
5.7 Recognises own achievements			

Interests, Routines and Processing-ASD Progression Framework

Interests, Routines and Processing-ASD Progression Framework			
	ENTRY SCALE 1-5	EXIT SCALE 1-5	ADDITIONAL COMMENTS
Coping with change			
1.1 Accepts change within familiar situations			
1.2 Takes action to cope with change			
Transitions			
2.1 Makes successful transition in 'everyday' situation			
2.2 Engages with preparation for transition to new setting			
Special interests			
3.1 Uses special interests to engage positively in activities / exchanges			
3.2 Engages with a range of activities unrelated to special interests			
Problem solving and thinking skills			
4.1 Makes a choice			
4.2 Uses information available to make an appropriate choice			
4.3 Sorts items into categories			
4.4 Uses information to plan and predict			
4.5 Makes deductions based on information available			
4.6 Recognises and takes action to solve problems			
4.7 Reflects on problems encountered and strategies used			

COMMUNICATION AND INTERACTION

Children with a speech and language programme are assessed by the speech and language team and a plan of support is then issued. Within school we have designated teaching support staff who are allocated time to implement the targets and actions. This is reviewed half termly and regular discussions are held with the SENDCO and the Speech and Language team.

The Autism Progression document has also been adapted and can be used to assess pupils as a baseline and to show progress over time

Communication and Interaction -ASD Progression Framework			
	ENTRY SCALE 1-5	EXIT SCALE 1-5	ADDITIONAL COMMENTS
Engaging in interaction			
1.1 Responds positively to familiar adult			
1.2 Seeks attention from familiar adult			
1.3 Shares attention focus with adult			
1.4 Engages in interactive exchange with adult			
Making requests			
2.1 Makes request for an item			
2.2 Refuses an item / activity			
2.3 Makes request for interaction to continue / stop			
2.4 Requests help			
2.5 Requests information / asks a question			
Communicating information / commenting on events			
3.1 Answers a question			
3.2 Communicates information about the past and future			
3.3 Expresses opinions / thoughts / feelings			
3.4 Gives instructions / explanations			
3.5 Gives accounts and explanations			
3.6 Comments / draws attention to item / event			

Listening and understanding			
4.1 Responds to sounds			
4.2 Understands single spoken word			
4.3 Understands simple statement			
4.4 Understands instructions			
4.5 Understands questions			
4.6 Extracts relevant meaning / information			
4.7 Understands humour and figurative speech			
4.8 Understands informal speech / slang			
Greetings			
5.1 Responds to greetings / being addressed			
5.2 Greets others			
Conversations			
6.1 Gains another's attention			
6.2 Takes lead in conversation			
6.3 Responds to conversation partner			
6.4 Maintains flow of conversation			
Non-verbal communication			
7.1 Adapts communication / behaviour to suit situation			
7.2 Shows evidence of 'active listening'			
7.3 Understands non-verbal communication			

Wellbeing and mental health.

To assess nurture, social stories, lego, anger gremlins the leuven scales below should be used as a baseline at the start and again at the end of the intervention. They are subjective and should therefore be carried out by the same person at the baseline and the exit point.

The Leuven Scale for Well-being

Level	Well-being	Signals
1	Extremely low	The child clearly shows signs of discomfort such as crying or screaming. They may look dejected, sad, frightened or angry. The child does not respond to the environment, avoids contact and is withdrawn. The child may behave aggressively, hurting him/ herself or others.
2	Low	The posture, facial expression and actions indicate that the child does not feel at ease. However, the signals are less explicit than under level 1 or the sense of discomfort is not expressed the whole time.
3	Moderate	The child has a neutral posture. Facial expression and posture show little or no emotion. There are no signs indicating sadness or pleasure, comfort or discomfort.
4	High	The child shows obvious signs of satisfaction (as listed under level 5). However, these signals are not constantly present with the same intensity.
5	Extremely high	The child looks happy and cheerful, smiles, cries out with pleasure. They may be lively and full of energy. Actions can be spontaneous and expressive. The child may talk to him/herself, play with sounds, hum, sing. The child appears relaxed and does not show any signs of stress or tension. He/she is open and accessible to the environment. The child expressed self-confidence and self-assurance.

The Leuven Scale for Involvement

Level	Well-being	Signals
1	Extremely low	Activity is simple, repetitive and passive. The child seems absent and displays no energy. They may stare into space or look around to see what others are doing.
2	Low	Frequently interrupted activity. The child will be engaged in the activity for some of the time they are observed, but there will be moments of non-activity when they will stare into space, or be distracted by what is going on around.
3	Moderate	Mainly continuous activity. The child is busy with the activity but at a fairly routine level and there are few signs of real involvement. They make some progress with what they are doing but don't show much energy and concentration and can be easily distracted.
4	High	Continuous activity with intense moments. They child's activity has intense moments and at all times they seem involved. They are not easily distracted.
5	Extremely high	The child shows continuous and intense activity revealing the greatest involvement. They are concentrated, creative, energetic and persistent throughout nearly all the observed period.

Alternatively, The Autism Progression framework can be used as a baseline for specific areas that match the focus of the intervention. Assessment against these should be carried out as a baseline and again at the end of the intervention to assess impact. Please discuss with the SENDCO if you are unsure which assessment to use.

Social understanding and relationships			
Being with others			
	ENTRY SCALE 1-5	EXIT SCALE 1-5	ADDITIONAL COMMENTS
1.1 Accepts the presence of others in familiar environment			
1.2 Engages in shared activity			
1.3 Copes with proximity of others in public space			
Interactive play			
2.1 Accepts presence of adult in play environment 2.2			
2.2 Engages in interactive play with an adult			
2.3 Engages in object play with adult			
2.4 Engages in play with peers			
Positive relationships (supporting adults)			
3.1 Engages positively with supporting adult			
3.2 Accepts help from an adult			
3.3 Accesses activities / situations with adult support			
3.4 Seeks advice and support from adult			
Positive relationships and friendships (peers)			
4.1 Initiates interaction with peer/s			
4.2 Engages positively in interaction with peer/s			
4.3 Takes into account others' interests / needs / feelings within interactions			
4.4 Takes action to sustain positive relationship			
4.5 Recognises negative or bullying behaviour towards self or others			
Group activities			
5.1 Attends to focus of group			
5.2 Participates in group activity			
5.3 Is aware of self as part of group			
5.4 Understands and conforms to expectations of working in a group			
5.5 Participates in group discussion			

Emotional Understanding and Self awareness

Understanding and expressing own emotions

	ENTRY SCALE 1-5	EXIT SCALE 1-5	ADDITIONAL COMMENTS
1.1 Expresses a range of emotions			
1.2 Identifies own emotions			
1.3 Identifies cause of emotion			

Managing emotions and behaviour

2.1 Responds to calming strategies of others			
2.2 Uses own strategies to manage stress			
2.3 Takes part in planning and preparing strategies to manage own emotions and behaviour			
2.4 Uses taught strategies to manage emotions and behaviour			
2.5 Reflects on behaviour			

Understanding others' emotions / intentions

3.1 Recognises and responds to emotions in others			
3.2 Identifies cause of emotions in others			
3.3 Makes judgements relating to others' behaviour			
3.4 Identifies potential or actual risk within situations			
3.5 Is aware of difficulties with 'reading' others, emotions / intentions			

Self-awareness

4.1 Identifies own characteristics			
4.2 Identifies interests and strengths			
4.3 Understands own diagnosis			
4.4 Identifies difficulties			
4.5 Is aware of change in relation to self			
4.6 Participates in planning for own future			

Developing confidence and self-esteem

5.1 Expresses preferences			
5.2 Expresses opinions / ideas			
5.3 Shows confidence within activities			
5.4 Responds to negative behaviour			

WISP

Wisp has a bespoke assessment scale (see below) which again should be used as a baseline and again to measure impact at the end of the assessment. These scores should be shared with the class teacher and the SENDCO. The assessment should be used to plan support in specific areas of weakness and should link with the suggested activities outlined below.

DEVELOPMENTAL ASSESSMENT

DATE: _____ PUPIL: _____

10												
9												
8												
7												
6												
5												
4												
3												
2												
1												
STATEMENTS SHOULD BE HIGH ON THE SCALE FOR GOOD	Interaction with peers	Interaction with adults	Follows rules and instructions	Can share and take turns	Able to ask for help when needed	Makes constructive and reciprocal friendships	Listens with interest when others are speaking	Takes pride in their work	Can work alongside other children and cooperate	Respects other <u>peoples</u> <u>property</u> and school belongings		

DIAGNOSTIC ASSESSMENT

DATE: _____ PUPIL: _____

10												
9												
8												
7												
6												
5												
4												
3												
2												
1												
STATEMENTS SHOULD BE LOW ON THE SCALE FOR GOOD DEVELOPMENT	Sullen, resentful or negative mood	Self-disparaging and self-demeaning	Disparaging and critical of peers and adults	Erupts into temper or rage	Remembers a real or imagined offense and <u>bears a grudge</u>	Dominates by intimidation and bullying	Attention seeking for recognition	Low confidence and self esteem	Takes criticism and comments about their work personally and gets struggles to take ownership of behaviour and accept consequences			

WISP Developmental profile – planning sheet/ideas for activities to meet areas of need identified in the baseline

Interaction with peers.	Put into social situations with peers where sharing and turn taking are modelled and enforced. (board games, team games, circle time, role play.)
Interaction with adults.	Build trusting relationship with adults in the class. Adults to offer praise, time and encouragement. 1:1 WISP
Follows rules and instructions.	Put into social situations where turn taking and sharing are modelled. Encourage praise to others through modelling.
Can share and take turns.	Put into social situations with peers where sharing and turn taking are modelled and enforced. (board games, team games, circle time, role play.)
Ask for help when needed.	Build trusting relationship with adults in the classroom. During 1:1, create projects where chd knows help will be forthcoming- regularly asking the child if they need help.
Make constructive and reciprocal friendships.	Put into social situations with peers where sharing and turn taking are modelled and enforced. (board games, team games, circle time, role play.)
Listens with interest when others are speaking.	Encourage friendships with peers and involve in adult conversations. (circle time, role play, scenario games)
Takes pride in their work.	Encourage in classroom. During WISP time, create art work or something similar that will go on display. Lots of praise and encouragement to build self-esteem and self -belief.
Can work alongside other children and cooperate.	Encourage group work and team games modelling appropriate behaviour. Put into social situations that include playing role play, board games, lego therapy.
Respects property of others and school.	Always model respect. During WISP, make something creative(art, lego etc) where all chd are made to feel proud of their achievements.

WISP Diagnostic profile – planning sheet/ideas for activities to meet areas of need identified in the baseline

Sullen, resentful and/or negative mood.	Use every opportunity to praise and reward for efforts. Build trusting relationship with adults in the room. During WISP, give opportunities to talk. Work on confidence and self-esteem.
Self-disparaging and self-demeaning.	Use every effort to praise and compliment chd on their effort and achievements. Try to avoid responding to negative behaviours (reward others for appropriate behaviours) WISP -focus on Self-esteem, confidence and emotions. Give opportunities to talk. Create something of interest to the child together, building self-esteem and confidence.
Disparaging and critical of others.	Offer support, affection and approval for effort and talk through issues that have arisen. Allow for time to calm down before attempting to talk through any problems or outbursts. Work on emotions, sympathy and empathy.
Erupts into anger or rage.	Give time to calm down, avoiding confrontation before discussing the problem. During WISP, work on emotions and triggers. Discuss strategies. Anger gremlin etc.
Remembers a real or imagined offence and bears a grudge.	Talk about why the person has behaved that way. Practice empathy.
Dominates by intimidation and bullying.	Explain inappropriate behaviour. Talk about feelings. Practice empathy 1:1 or small group work discussing scenario cards.
Attention seeking for recognition.	Lots of praise for effort and achievement and independence. Model praising other children. WISP – have quality 1:1 time where child can share feelings. Work on self-esteem and confidence. Put into social situations (board games, craft activity, circle time)
Low confidence and self-esteem.	Give ‘over the top’ praise for effort and achievements and reward accordingly. Build trusting relationship with an adult. WISP - build trusting relationship up. Work on emotions.
Takes criticism and comments about their work personally and gets angry/upset.	Constructive criticism. Always start with a positive before a negative (3 * and a wish) During WISP, building resilience activities. Put into situations where losing is possible (board games, team games etc.)
Unable to take ownership of behaviour and accept consequences.	Explain inappropriate behaviour and feelings of others. Work on scenario cards, social stories to ensure chd understands that actions have consequences.