



## **BROCKHURST & MARLSTON HOUSE SCHOOLS**

Including all of the Pre-Prep Department and Early Years Foundation Stage

# **LEARNING DEVELOPMENT CENTRE**

## **HANDBOOK & SEN POLICY**

Brockhurst & Marlston House Schools (the School) is committed to providing the best possible care and education to its pupils, and to safeguarding and promoting the welfare of children and young people. This policy is written with that commitment in mind, and in accordance with KCSIE September 2024.

Reviewed - September 2024

Next review - September 2026

**CReSTeD**

**Registration until March 2025**

**Learning Support Centre School**

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## BROCKHURST & MARLSTON HOUSE SCHOOLS

Including all of the Pre-Prep Department and Early Years Foundation Stage

### LEARNING DEVELOPMENT POLICY

Last review: Sept 2024

Next review: Sept 2026

#### SAFEGUARDING

The Learning Development Centre (LDC) adhere to the Safeguarding Policy of Brockhurst and Marlston House Schools: [Safeguarding Policy](#)

Children with special educational needs or disabilities (SEND) can face additional safeguarding challenges both online and offline. Children with SEND are three times more likely to be abused than their peers. The school recognize the additional risks that children with SEND face from bullying (including sexual violence or sexual harassment), grooming and radicalisation.

Children are taught how to keep themselves and others safe, including on-line. This is tailored to the specific needs of children. The school will have a clear set of values and standards, upheld and demonstrated throughout all aspects of school life. These will be underpinned by the school's behaviour policy and pastoral support system, as well as by a planned programme of evidence-based PSHEE and RSHE delivered in regularly timetabled lessons and reinforced throughout the whole curriculum. Such a programme should be fully inclusive and developed to be age and stage of development appropriate (especially when considering the needs of children with SEND and other vulnerabilities).

#### AIMS

It is the aim of the school to identify the children experiencing learning difficulties, to assess their specific needs and give them encouragement and support to learn, progress and receive an education that meets their special needs.

#### POLICY STATEMENT

Every child is unique with his or her own individual needs. We believe all children have a right to a broad and balanced curriculum, relevant and differentiated, which demonstrates progression and allows a child to enjoy the learning experience, develop confidence and achieve their potential.

#### IDENTIFICATION

Identification of Special Educational Needs is the recognition of the difficulties which a child is

experiencing in accessing the curriculum and/or physical environment and/or managing socially acceptable behaviour.

Children are assessed informally and formally, including using screening tests in Reception and the information gained from these assessments is included within any identification of special educational needs. Throughout the school the children take annual CAT tests, reading tests and maths tests. Regular meetings are arranged with Form tutors as well as maths and English staff to discuss any children who are of concern.

It is ultimately the role of the class teacher to identify any child they believe may have special educational needs.

The process for identifying and supporting children with special educational needs follows the three step model set out in this document.

## **PROVISION**

The legal definition of special educational needs is that if a child has:

A learning difficulty (i.e. a significantly greater difficulty in learning than the majority of children of the same age) or a disability which makes it difficult to use the educational facilities; and if that learning difficulty calls for:

Special educational provision i.e. provision additional to, or different from, that made generally available for children of the same age.

As defined in the Special Educational Needs and Disability Code of Practice 0 – 25 years 2014.

The school endeavors to meet the principles laid out in the Special Educational Needs and Disability Code of Practice, 0 – 14 years 2014:

- a child with special educational needs should have their needs met
  
- the views of the child should be sought and taken into account
  
- parents have a vital role in supporting their child's education
  
- children with special educational needs should be offered full access to a broad, balanced and relevant education

In accordance with the school's accessibility plan, the LDC aims to make reasonable adjustments to allow children with physical disabilities to attend accessible parts of the school.

The named SENDCO in the school is Mrs Yvette Khoshab and with the Heads, it is their joint responsibility to supervise the provision of Special Educational Needs and to monitor and evaluate special educational needs provision throughout the school

## **IDENTIFICATION in the EYFS**

Mrs Caroline Simm (Nursery Teacher) takes responsibility with the SENDCO for children in the EYFS.

Early identification should start from the time a child enters early education and consequently special educational needs identification, assessment and provision commences in the EYFS, where deemed appropriate.

During their first year in the Nursery, children are assessed using the Early Years Foundation Stage Profile, which is ongoing throughout the year. This in itself will not establish whether individual pupils have special educational needs but will be crucial in helping to show where a child has problems which require attention. It should show those pupils who need a targeted teaching strategy or further classroom-based assessment. Children are monitored closely by their class teachers/key workers and appropriate action will be implemented.

EYFS staff help to identify a child with special educational needs by continuously assessing the children through observations. Where EYFS staff are made aware of potential concern prior to a child joining Ridge House liaison will take place between parents, Health Services, the EYFS SENDCO and the child's key worker.

If a difficulty in any area is detected while in the EYFS the following steps would be taken.

- Staff meeting to discuss the child's needs
- Discussion between key worker/teachers and parents.
- Information gathered from previous settings
- Key person completes baseline assessments
- Continuous observations encompassing a wide range of different situations.
- The SENDCO and child's key worker will draw up an appropriate Target Plan
- Depending on the outcome of said plans advice would be sought and put into practice within the setting. Parents would be kept up to date with all developments. Notes on all discussions will be kept in the SEN file
- Outside professionals will be contacted to meet child specific needs, if felt appropriate.

## **LEARNING DEVELOPMENT POLICY IN PRACTICE**

The school believes in early identification, assessment and provision for any child who may have learning development needs. Initial concerns or identification of a child's needs may be via the class teacher, parents, dyslexia screening tests or the annual reading and spelling tests carried out by the school. Teachers can refer concerns at any time to the SENDCO and also welcome observations or advice. A teacher's concern sheet is initially completed for the SENDCO to consider. The school has adopted a graduated response to initial concerns about a child's progress. This takes the form of three possible interventions.

Children within these Steps are entered onto the SEND Register which is made available to all staff and which contains a summarised description of an individual's difficulties and strategies for support. At all stages self-esteem building is considered to be of the utmost importance.

### Step 1

Step 1 is the provision of differentiated support in the classroom. The teacher will provide differentiation by the use of resources, outcome, a differentiated curriculum or adult support. Where appropriate, teachers take into account the needs of individual children in their weekly and termly plans. The child is monitored closely during this stage and if progress is insufficient the child moves onto Step 2.

### Step 2

The child is referred to one of the school's specialist teachers or other professional who carries out relevant assessments. After discussion between the Director, the specialist teacher, the parents and the mainstream teachers concerned, it will be decided whether individual tuition from the specialist teacher is required. A child starting individual tuition will have a Target Plan written by the specialist teacher.

Tuition typically takes the form of two thirty minute sessions a week following an individualised work programme. The child's class teachers liaise with the specialist teacher and adapt their teaching to the needs of the child. The Director reviews progress in discussion with the specialist teacher and a twice- yearly report is sent to the child's parents. The specialist teacher makes an assessment and verbal report to the child's parents at parents' evenings. During the term, appointments may also be made to discuss concerns or review progress with the specialist teacher. Contact via email is available at all times. The LDC operates an open door policy where staff and parents are welcome at any time.

### Step 3

After an assessment has been made by a specialist teacher and differentiated teaching has taken place in the classroom, it may be decided that the child is making insufficient progress. At this stage a range of outside professionals may be contacted for advice and assessment. A child at this stage may need significant differentiation in the classroom.

Step 3		Outside professional advice, assessment, teaching.	Significant differentiation
Step 2		Assessment, specialist teaching	Moderate differentiation
Step 1	Differentiated in-class support		Some differentiation

## KEY RESPONSIBILITIES

### It is the responsibility of the class teacher to:

- recognise the special needs of any child as early as possible. These may be of a physical, psychological, sensory or cognitive nature such as sight, hearing, speech or attention difficulties, weak literacy/numeracy skills, emotional or behavioural problems or gifted children.
- assess, record and monitor classroom performance and discuss educational needs with the Headmaster, Headmistress and Director of the LDC.
- adapt the curriculum to individual needs by the use of differentiation in planning.
- consider the need for an initial assessment in conjunction with the Director.
- carry out recommended strategies.

### It is the responsibility of the LDC staff to:

- organise and carry out dyslexia screening tests in Reception.
- evaluate the screening and assessment results and inform senior management, class teachers and parents of results, where appropriate.
- carry out specialist teacher assessments of children, with parental consent, and advise accordingly.
- write and review Target Plans and provide lessons (usually 2 per week), with parental consent. These should be arranged to minimise disruption of the children's timetables.
- maintain close liaison with parents and staff, so that all aspects of the child are considered.
- use recommendations from Educational Psychologist's and other specialist's reports.
- keep accurate, relevant and up to date records.
- review progress and monitor children who are no longer receiving extra support lessons.
- teach pupils according to their individual needs using structured, cumulative, multi-sensory methods.

### It is the responsibility of the Director to:

- consider, at the point of enquiry, whether the special needs of a particular child can be met at this school.
- liaise with parents, teachers and LDC staff.
- maintain a register of all LDC children and closely monitor progress.
- oversee the organisation of the LDC and co-ordinate provision for individual children, including allocation of any teaching support assistants.
- ensure assessments and information on individual children are circulated to all relevant staff.
- organise contacts with outside specialists such as Educational Psychologists and Speech Therapists in co-operation with parents, LDC staff and class teachers.
- liaise with other schools when admitting or transferring LDC children.
- organise appropriate exam arrangements.
- provide INSET to main school staff and unit staff.

- provide direction on matters of curriculum, staff development and policy.

#### **REVIEWS AND RECORD KEEPING**

The Target Plans are reviewed at the end of each term and a copy placed on the school database Group results from the dyslexia screening tests are kept in separate files.

Individual testing by specialist teachers as well as reports from outside agencies are kept in a filing cabinet in the LDC.



## APPENDIX ONE: IDENTIFICATION OF LEARNING DEVELOPMENT NEEDS

The following guidelines may be helpful in the identification of Learning Development Needs:

- A learning difficulty greater than that of his/her peer group e.g. different nursery play pattern.
- Behaviour patterns different from those of his/her peer group. (This can sometimes have an obvious link with bereavement, family break-up etc. or may be long standing with no such obvious cause).
- A significant change in behaviour and/or learning skills.
- A history of under achievement and poor self esteem.
- Physical and sensory disability reported by the parents, school or family doctor.
- Worries reported by the parents about the children's attitudes, behaviour or confidence at home.
- A child who seems generally below par and/or unmotivated and, for some reason – not always identifiable – worries her/his teacher.
- A child who is significantly more able than his/her peers.
- An uneven development – giftedness in one area, and low ability in other.

### New Definition of Dyslexia 2024

*Dyslexia is primarily a set of processing difficulties that affect the acquisition of reading and spelling.*

*In dyslexia, some or all aspects of literacy attainment are weak in relation to age, standard teaching and instruction, and level of other attainments.*

*Across languages and age groups, difficulties in reading and spelling fluency are a key marker of dyslexia.*

*The nature and developmental trajectory of dyslexia depends on multiple genetic and environmental influences.*

*Dyslexic difficulties exist on a continuum and can be experienced to various degrees of severity.*

*Dyslexia can affect the acquisition of other skills, such as mathematics, reading comprehension or learning another language.*

*The most commonly observed cognitive impairment in dyslexia is a difficulty in phonological processing (i.e. in phonological awareness, phonological processing speed or phonological memory). However, phonological difficulties do not fully explain the variability that is observed.*

*Working memory, orthographic skills and processing speed problems can contribute to the impact of dyslexia and therefore should be assessed.*

*Dyslexia frequently co-occurs with one or more other developmental difficulty, including developmental language disorder, dyscalculia, ADHD, and developmental coordination disorder.*

An updated definition of dyslexia from a Delphi study of dyslexia experts. Prof Julia Carroll et al  
SASC presentation 15th May 2024

## SpLD – Dyslexia (The British Dyslexia Association)

### Persisting factors

There are many persisting factors in dyslexia, which can appear from an early age. They will still be noticeable when the dyslexic child leaves school.

These include:

- Obvious 'good' and 'bad' days, for no apparent reason.
- Confusion between directional words, e.g. up/down, in/out.
- Difficulty with sequence e.g. coloured bead sequence, later with days of the week or numbers.
- A family history of dyslexia/reading difficulties.

### Pre-school

- Has persistent jumbled phrases, e.g. 'cobbler's club' for 'toddler's club'.
- Use of substitute words e.g. 'lampshade' for 'lamppost'.
- Inability to remember the label for known objects, e.g. 'table, chair'.
- Difficulty learning nursery rhymes and rhyming words, e.g. 'cat, mat, sat'.
- Later than expected speech development.

## Pre-school non-language indicators

- May have walked early but did not crawl - was a 'bottom shuffler' or 'tummy wriggler'.
- Persistent difficulties in getting dressed efficiently and putting shoes on the correct feet.
- Enjoys being read to but shows no interest in letters or words.
- Is often accused of not listening or paying attention.
- Excessive tripping, bumping into things and falling over.
- Difficulty with catching, kicking or throwing a ball; with hopping and/or skipping.
- Difficulty with clapping a simple rhythm.

## 5 - 11 years

- Has particular difficulty with reading and spelling.
- Puts letters and figures the wrong way round.
- Has difficulty remembering tables, alphabet, formulae etc.
- Leaves letters out of words or puts them in the wrong order.
- Still occasionally confuses 'b' and 'd' and words such as 'no/on'.
- Still needs to use fingers or marks on paper to make simple calculations.
- Poor concentration.
- Has problems understanding what he/she has read.
- Takes longer than average to do written work.
- Problems processing language at speed.

## **5 – 11 year - non-language indicators:**

- Has difficulty with tying shoelaces, tie, and dressing.
- Has difficulty ordering the days of the week, months of the year etc.
- Surprises you because in other ways he/she is bright and alert.
- Has a poor sense of direction and still confuses left and right.
- Lacks confidence and has a poor self-image.

## **Aged 12 or over**

As before, plus:

- Still reads inaccurately.
- Still has difficulties in spelling.
- Needs to have instructions and telephone numbers repeated.
- Gets 'tied up' using long words, e.g. 'preliminary', 'philosophical'.
- Confuses places, times, dates.
- Has difficulty with planning and writing essays.
- Has difficulty processing complex language or long series of instructions at speed.

## **Aged 12 or over non-language indicators:**

- Has poor confidence and self-esteem.
- Has areas of strength as well as weakness.

## SpLD – Dysgraphia (Swindon Dyslexia Centre)

The signs below may indicate someone has dysgraphia – they do not need to have all of these problems. However, if these problems continue beyond the time that the average child/student has grown out of them, they may indicate dysgraphia and advice should be sought.

- Written text very poor considering language development.
- Poor motor control.
- Writing that is almost impossible to read.
- Mixture of printing and cursive writing on the same line.
- Writes in all directions, i.e. right slant then left slant.
- Big and small spaces between words.
- Different sized letters on the same line.
- Mixes up capital letters and lower case letters on the same line.
- Abnormal and irregular formation of letters.
- Very slow writing.
- Very slow copying from board.
- Does not follow margins.
- Grips the pen too tight and with a 'fist grip'.
- Holds pen very low down so fingers almost touches the paper.
- Watches hand intently whilst actually writing.
- Poor spelling.
- Bizarre spelling.
- Problems with spelling wrong words i.e., 'brot' for brought and 'stayshun' for station.
- Problems with spelling words such as i.e. drink as 'brink'.

## SpLD – Dyscalculia

When children start school, they may make several of the mistakes listed below. It is only if these symptoms continue beyond the time that the average child/student has grown out of them, they may indicate dyscalculia and advice should be sought.

- Confuses numbers i.e., 51 for 15
- Transposes and reverses numbers, when reading or writing
- Confuses: Minus, Subtract, Take away

- Confuses: Add, Plus, Add on
- Has difficulties learning the times tables
- Has difficulties working out simple money and change
- Has difficulties estimating numbers
- Has difficulties with understanding  $2 + 5 = 7$  (but not understand  $5 + 2 = 7$ )
- Has difficulties telling the time or learning the date
- Can he answer a question correctly but cannot tell you how he got the answer?

### SpLD – Dyspraxia (Dyspraxia Foundation)

#### **The pre-school child**

- Is late in reaching milestones e.g. rolling over, sitting, standing, walking, and speaking.
- May not be able to run, hop, jump, or catch or kick a ball although their peers can do so.
- Has difficulty in keeping friends; or judging how to behave in company.
- Has little understanding of concepts such as 'in', 'on', 'in front of' etc.
- Has difficulty in walking up and down stairs.
- Poor at dressing.
- Slow and hesitant in most actions.
- Appears not to be able to learn anything instinctively but must be taught skills.
- Falls over frequently.
- Poor pencil grip.
- Cannot do jigsaws or shape sorting games.
- Artwork is very immature.
- Often anxious and easily distracted.

## The school age child

Probably has all the difficulties experienced by the pre-school child with dyspraxia, with little or no improvement

- Avoids PE and games.
- Does badly in class but significantly better on a one-to-one basis.
- Reacts to all stimuli without discrimination and attention span is poor.
- May have trouble with maths and writing structured stories.
- Experiences great difficulty in copying from the blackboard.
- Writes laboriously and immaturely.
- Unable to remember and /or follow instructions.
- Is generally poorly organised.

## ADHD

Six (or more) of the following symptoms of inattention will have persisted for at least six months to a degree that is maladaptive and inconsistent with developmental level:

- Often fails to give close attention to details or makes mistakes in school work, work or other activities.
- Often has difficulty sustaining attention in tasks or play activities.
- Often does not seem to listen when spoken to directly.
- Often has difficulty organizing tasks and activities.
- Often avoids, dislikes or is reluctant to engage in tasks that require sustained mental effort (i.e. school/homework).
- Often loses things necessary for tasks or activities (e.g. toys, school assignments, pencils books or tools).
- Is often easily distracted by extraneous stimuli.
- Is often easily distracted in daily activities.

## Autistic Spectrum Disorders (including Aspergers)

- Extreme difficulty in learning language.
- Inappropriate response to people. A child with autism may avoid eye contact, resist being picked up or cuddled, and seem to tune out the world.
- Inability or reduced ability to play cooperatively with other children or to make friends.

- Inability to understand other people's feelings.
- Need for a rigid, highly structured routine -- and being very distressed by changes in routines.
- Extreme hyperactivity or unusual passivity, and extreme resistance to change.
- Repetitive body movements including pacing, hand flicking, twisting, spinning, rocking or hitting oneself.
- Insensitivity to pain or lack of response to cold or heat.
- Impulsive behaviour and no real fear of dangers.
- An unusual attachment to inanimate objects such as toys, strings or spinning objects.
- Frequent crying and tantrums for no apparent reason.
- Peculiar speech patterns. An autistic child may use words without understanding their meanings.
- Abnormal responses to sensations such as light, sound and touch. At times an autistic child may appear deaf. At other times the child may be extremely distressed by everyday noises.

#### Visual Difficulties (British Association of Behavioural Optometrists)

- Blurring of words when reading.
- Working distance close when writing or reading.
- Blinks or rubs eyes a lot.
- Gets rapidly tired at school and often exhausted at end of school day.
- Headaches and/or aching eyes.
- Difficulties with copying from the blackboard or book.
- Poor or variable handwriting, often slow.
- Poor co-ordination or history of co-ordination problems.
- Loss of concentration, poor attention span.
- Reading accuracy and speed below chronological age.
- Loses place or line when reading.
- Misses out words or letters when reading.
- Often has to use finger as a marker to keep place.
- Poor at maths.
- Comprehension exercises difficult.



- Reverses/transposes letters and numbers.
- Mirror writing.
- Confuses right and left past age 7 (and sometimes up and down).
- Makes phonetic spelling errors.
- Can learn spellings for tests but cannot remember in creative writing.
- Poor visual memory.
- Creative writing difficult.
- Poor posture when working.
- Covers one eye when reading.
- Moves head when reading.
- Homework takes longer than it should.
- Poor at ball skills and team games.
- Does not understand what has been read.

### Hearing Problems

- Slow to react to instructions.
- Faulty or slurred speech and transposition of sounds.
- Day dreaming.
- Grabbing person – stares intensely at speaker's face.
- Hears sometimes, not others – conductive loss i.e. when room is quiet/when watching the teacher (1 in 6 worse when has a cold).
- Turning head – a guide to unilateral loss.
- Responds to instructions but carries them out wrongly.
- Omissions of final consonants in speech and in writing.
- Talks about other things when spoken to.
- Sudden unexplained outbreaks of aggression.
- Delayed language development.
- Immature sentence construction.
- Voice production – cannot moderate voice.
- Distractible.

- Tense and over anxious, strained in group situations constantly asking what to do after class has been told, often does the wrong thing, or makes inappropriate comments.

### Emotional Problems

- Sudden deterioration in work.
- Restless and lack of concentration.
- Unprovoked aggression.
- Irritability and sulkiness.
- Persistent stealing not curbed by punishment.
- Attention seeking.
- Speech defect.
- Excessive daydreaming.
- Fluctuating moods.
- Lack of co-ordination.
- Failure to make and keep friends.
- Hypersensitivity to criticism.

### Behavioural Problems

- Limited capacity for relationships.
- Poor grasp of reality.
- Marked intolerance or frustration, inability to cope with anxiety.
- Aggressive outbursts.
- Inability to delay gratification.
- Use of, or over use of denial, and withdrawal.
- Isolated as individuals, rejecting or being rejected by others.
- Distrust of authority figures.
- Child/parent relationships distorted.

- Parents themselves contributing to their problems because of their own satisfaction at their children's behaviour.
- Problems in developmental history – feeding, toilet training, socializing, and learning.

### Gifted Children

- Superior powers of reasoning - perceives depths of meaning beyond that understood by peers.
- Intellectual curiosity.
- Good at maths, problem solving.
- Learn easily and readily.
- Alert, quick responses to new ideas.
- Is able to anticipate meanings and ideas.
- Good memory.
- Good powers of observation.
- Good attention and perseverance.
- Is able to handle complex information easily and readily.
- Is quick to make use of new skills and knowledge in other contexts.
- May indicate an ability to pursue tasks purposefully without assistance to a high standard of completion.
- May have unusual imagination or originality.
- Indicates a high level of competence and maturity in one particular area.
- May be superior in quality of vocabulary and use of language as compared to children of his/her own age - Can express feeling and emotions. Shows good articulation, expressive speech, use images, metaphors and body language.
- Wide range of interests.
- Interested in the nature of man and the Universe.
- Enjoyment and ability in visual arts, movements, dance and music.
- Has hobbies, and follows these over a period of time.

## APPENDIX TWO: ASSESSMENT TESTS

We have a range of standardised tests which cover the following areas:

- Non-verbal underlying ability
- Verbal underlying ability
- Phonological skills
- Phonological processing speed
- Non-word reading
- Reading – accuracy, comprehension, speed
- Spelling
- Handwriting
- Processing speed (visual)
- Working memory
- Auditory memory
- Visual memory
- Auditory and Visual recall
- Visual-motor skills
- Dyslexia Screening
- Dyscalculia Screening

**APPENDIX THREE: RESOURCES**

Area covered	Name	Author/Publisher
<b>Reading Schemes</b>	Bangers and Mash	Longman
	Sound Start	Nelson Thornes
	Sparklers	Nelson Thornes
	The Extraordinary Files	Rising Star
	Barrington Stoke	Barrington Stoke
	Tim and the Hidden People	Sheila K McCullagh
	Dancing Bears Series	Oxford
	Download	
	Rapid	
	Fastlane	
	Range of audio books	
Free readers		
<b>Phonological Skills</b>	Sidney (Screening and Intervention for Dyslexia Notably in the Early Years)	Hampshire County Council
	Phonological Awareness Training (PAT)	Jo Wilson
	Sound Linkage	Peter Hatcher
	Homemade worksheets and games	
	SNIP 1, 2 and 3	
<b>Phonics for Reading &amp; Spelling</b>	Making the Alphabet Work Books 1 – 4	A J Hardwick

	Five Minute Box	Five Minute Box
	TRUGS Teaching Reading using Games	Trugs
	Spingoes	Crossbow

	Various phonics & language board games	Smart Kids
	Launch the Lifeboat	Sula and Tony Ellis Jackie and Mick Davison
	Beat Dyslexia Books 1 – 6	Celia Stone, Elizabeth Franks, Myra Nicholson
	Box Dictations	Crossbow
	Phonics	Jill Gregory
	Rol'n'write letters and numbers	
	Exercise Your Spelling	Elizabeth Wood
	Solving Language Problems	Seer, Peck, Kahn
	Swap and Fix Cards	Bobbie Hill (Gamz)
	Stile	LDA
	Smart Chute	
	Edith Norrie Lettercase	
	Smart phonics - magnetic letters	Smart Kids
	Wooden alphabet (upper and lower case)	
	Wordshark 4	WhiteSpace
	Nessy Learning Programme	Net Educational Systems
	I Can Spell (plus)	Resource Education

	Star Spell 3	Fisher Marriott
	Catch up 1	Catch up
	SuperSpell2	Formation
	Multi-sensory equipment	
<b>Comprehension</b>	Developing Comprehension Skills	Clare Constant & David Kitchen
	Reading for Meaning	Mary Green

	New Cloze 1 - 5	Learning Materials
	Cloze in on Language	George Moore
	Comprehension Age 10 – 11	Scholastic
	11+ and 13+ Comprehension	RSL
<b>Written work</b>	Developing Writing	Mary Green
	Developing Literacy – Text Level Year 4	Ray Baker & Christine Moorcroft
	To Create a Super Story	2Simple
	Story Mountain boards	Pie Corbett
	Story Starters	
	Clicker 6	Cricksoft
<b>Grammar and Punctuation</b>	The Grammar and Punctuation Show	Sherston
	Developing Literacy sentence Level Year 4	Christine Moorcroft
	The Great Grammar Book	Jennie Maizels & Kate Petty

	The Perfect Punctuation Book	Jennie Maizels & Kate Petty
<b>Dictionary Skills</b>	Ace Spelling Dictionary	David Moseley
	Oxford School Dictionary	
	Chambers Dictionary	
	Dictionary Hunt	Ann M Davies
	Ace Spelling Activities	David Moseley & Gwyn Singleton
<b>Auditory/Visual Awareness and memory training</b>	Ann Arbor Tracking Books	
	Visual Discrimination	LDA
<b>Study Skills</b>	Study Skills	Christine Ostler
	Mind Maps for Kids	Tony Buzan
	Mind Maps for Kids Memory & Concentration	Tony Buzan
	Listening Skills	Beals and Edwards
	Brain Booster	Nessy
	Englishtype Junior	Englishtype Ltd
	Kidspiration	
	Study Skills	Elizabeth Holtom
<b>Thinking Skills</b>	Thinking Skills Ages 8 – 10	Ideas to Go
	Listening Skills Bk1 – Year 1/2	Graeme Beals & Jean Edwards
	Listening Skills Bk2– Year 3/4	Graeme Beals & Jean Edwards



	Listening Comprehension (Upper)	Graeme Beals
<b>Dyspraxia</b>	Brain Gym	Paul and Gail Dennison
	Graded Activities for children with motor difficulties	James P Russell
	Working with Clumsy Children	Sheffield Education Department.
	Hands on Dyspraxia	
	Sensational Kids	
<b>Maths resources</b>	Numicon	
	Cuisenaire	
	Unifix	
	Times Tables Squares	
	Timers	
	Balance scales	
	Fractions resources	
	Square number tower	
	Number Lines	
	Number Shark	
	Counters	
	Board games	

Emotional resources	SEAL Materials	
	There's a Volcano in My Tummy	
	Helping Children with Low Self-Esteem	
	Talk About for Children x 2	
	Social Communication Skills Package	
	White House and Puddsey	
Fine and gross motor skills	Books	
	Theraputty	
	Pencil grips	
	Handi-writers	
	Posture cushions	
	Writing slopes	