**Adapted Provision- PSHCE**

|  |  |
| --- | --- |
| **Cognition and Learning** | **Communication and Interaction** |
| Subject Challenges | Provision  | Subject Challenges  | Provision |
| The ability to explain a concept/provide reasoning to explain a thought or opinion. Understanding of subject specific vocabulary.Putting abstract theory into practice. E.g. learning about the importance of personal space.Some pupils with SEND might not have PHSCE learning reinforced at home and may not have the opportunity to discuss key concepts e.g. puberty with trusted adults at home. | Use stem sentences to provide subject specific language in a particular format – this will enable children to accurately communicate their thoughts and opinions. Provide visuals to aide understanding of SEMH practices such as star breathing/mindfulness colouring.Pre-teach subject specific vocabulary. Draw particular attention to subject specific vocabulary which could be viewed as ambiguous. E.g. ‘sex’ or ‘period.’ Create word banks accompanied by visuals to demonstrate the meaning of a word.PHSCE is most effective when informal opportunities to embed learning in PHSCE lessons are identified by staff. For example, when pupils are queuing for lunch there is an opportunity to reinforce learning about personal boundaries and how it feels if somebody transgresses a personal boundary.Overlearn key concepts with SEND pupils by following up main class teaching with 1:1/small group sessions. For example, follow up a lesson on the menstrual cycle with a 1:1 session teaching pupils how to correctly place a sanitary towel in underwear. For example, follow up a lesson on personal hygiene with a 1:1 session modelling how to properly brush teeth using enlarged teeth/how to properly wash your body using a doll and baby bath.  | Expressing themselves and sharing their thoughts and opinions orally.EAL pupils may find it difficult to access resources/learning.Some children might not understand what is/isn’t appropriate to share with the rest of the class when discussing specific topics in PHSCE.  | Use stem sentences to provide subject specific language in a particular format – this will enable children to accurately communicate their thoughts and opinions.Use alternative recording devices e.g. whiteboards/iPads/talking tins to allow children the option of sharing their thoughts and opinions in an alternative way.Allow children processing time when asking them a direct question. Some children need upwards of 10 seconds to process a question before they can answer.Use a reduced number of simple instructions which are supported by visuals. Appropriate modelling to aid understanding. Differentiated written resources can be supported by visuals and could be translated using Word. (Teachers click Review – Translate – Translate Document). This will fully translate the document and open in a new window.Dependent on what is being discussed, ask pupils to write down on a post-it note/draw/record on an iPad what they want to say before they say it aloud to the rest of the class. T and TA to review appropriateness to ensure that SEND pupil do not ‘over-share’ personal details about themselves or their family during lessons. |
| **Sensory and Physical** | **Social Emotional and Mental Health** |
| Subject Challenges | Provision  | Subject Challenges | Provision  |
| Physical difficulties accessing specific environments during RSE trips/activities.Children with a visual impairment may find it difficult to view text/images/concrete resources.Uncomfortable feelings that arise due to context of PHSCE lessons could result in some children feeling overwhelmed. | Ensure that any environments visited during school trips are fully accessible for children with physical disabilities e.g. wheelchair accessible. Ensure that alternative transport arrangements are made for any children who have a physical disability which makes walking difficult. Above information should be identified on risk assessment prior to visit.Ensure that font size used in resources matches the specific font size specified in the child’s report provided by the Visual Impairment Team (saved in SEND files on T Share). Enlarge images to appropriate sizes to aid access. Use a visualiser to enlarge an artefact to ensure that children with visual impairments can observe the artefact/stimulus.Teachers to consider which children may be in need of a sensory break part way through an PHSCE lesson. Children may access the calm sensory room or may be taken on a directed sensory break by a TA to ensure that PSHCE lessons do not negatively impact SEMH of pupils. Be particularly considerate of ASD pupils with alexithymia (Inability to recognise own emotions). | The acceptance that others have different views and that they have a right to hold and express them. This can be particularly difficult for pupils with ASD.Difficulties with social skills may result in children finding group work challenging.Distress caused by the topic being discussed in PHSCE.  | Use a multi-sensory approach to teaching concepts e.g. through drama and role play. This will make concepts unfamiliar to themselves less abstract. Use Social Stories to explain how different people respond differently to specific scenarios. E.g. to explain to a pupil that ‘hitting back’ is not acceptable.Carefully consider seating arrangements during group work to ensure that children are placed next to patient, non-dominant children. Additional adult support can be deployed as necessary. Ensure children have access to usual aides such as ear defenders to reduce noise. Provide talking tins for children who struggle with impulsivity so that they can record their contributions as they think of them but can play them back to other children at the appropriate time. Teachers to consider the past experiences and ACEs of children in their class. Use a trauma informed approach to consider whether the lesson is appropriate for specific students and arrange alternative provision (e.g. 1:1/small group delivery) if not e.g. NPSCC PANTS campaign may not appropriate as a whole class lesson for pupils who have experienced sexual abuse.  |