



Creswell C of E
Infant and Nursery School

Music SEND Adaptations

Strategies for supporting pupils with Special Educational Needs and Disabilities in Music



"Treat others just as you want to be treated" Luke 6:31

	Here's how we will help.
<p>Attention Deficit Hyperactivity Disorder</p>	<ul style="list-style-type: none"> • Ensure all adults in the lesson know the child well and can recognise when to enforce rules and when not to; • Ensure a non-confrontational approach will help the child to self-regulate and reduce any anxiety and arousal; • Ensure any rules are consistently implemented and reinforced • Consider seating arrangements to minimise distractions (e.g. at the end of a row, or the front of the classroom); • Paired working, or support from a positive role model may help the child to focus; • They may also struggle to work in a group so chose groups carefully or provide opportunity to work alongside a partner or adult as an alternative; • Allow a calming-down period before the lesson starts, especially if it follows a breaktime/lunchtime, as transition points may be difficult for the child to manage; • Meet the child's need for physical activity and plan music lessons with a range of moving and hands-on (kinaesthetic) learning activities. Help children to manage their arousal levels, but allow children 'time out' when they show they are in need of a break from the lesson. Allow children time to let out their impulsiveness when handling new instruments, these may be introduced prior to the lesson so that they become familiar. • A 'stress ball' or other fiddle object agreed by the SENCO may help children concentrate and stop them using musical instruments inappropriately during a lesson. • Reward children for joining in and completing tasks, both individually and as part of a group.

<p>Anxiety</p>	<ul style="list-style-type: none"> • There are many types of anxiety and these will often accompany many areas of SEND. Ensure that you are familiar with the cause of anxiety for the particular child and how this manifests, bearing in mind that sometimes there may be no outward signs at all. Knowing the child really well will help with this. Sit the child where they feel most comfortable during the lesson. • Let the child know who is there to support them. This may be a particular friend, group of friends or an adult. • Be aware that anxious children may not have the confidence to perform in front of others or be responsible for one part within a group practise. • Learn to spot a child's triggers, and what the child looks like in a heightened state of anxiety.
<p>Autism Spectrum Disorder</p>	<ul style="list-style-type: none"> • Keep daily routines (e.g., seating plans) as normal as possible and consult the child beforehand if there is going to be a change - give the child options to choose from in this case. • Consider the use of a 'help' card, which the child can use if they feel anxious/overwhelmed, so that they can go somewhere they feel safe to calm down e.g. classroom calm area or THRIVE room • Allow time to process information, and don't put the child on the spot by asking questions publicly, unless you know they are comfortable with this. • Be aware that a child with autism is likely to experience sensory processing difficulties where they may be either over-responsive or under-responsive to sensory stimuli e.g., singing or noises and sounds from instruments. • Provide noise-cancelling headphones if helpful. • Allow children to have planned and unplanned sensory breaks or use fiddle toys that won't disrupt other children when necessary. • Pupils may struggle to work in a group and prefer to work on their own due to communication difficulties. • Prepare the child for what is coming- picture cues and discussing what the lesson will be like is helpful.
<p>Dyscalculia</p>	<ul style="list-style-type: none"> • Replace passive teaching methods with experiential learning for children- 'doing' will bring more interaction and success than just 'watching'. • Allow children to demonstrate and teach what they can do to others.

<h2>Dyslexia</h2>	<ul style="list-style-type: none"> • Pastel shades of paper and backgrounds will reduce 'glare' when reading music or following musical notations. • Use large font sizes and double line spacing where appropriate. • Avoid 'cluttered' backgrounds with lots of unnecessary images. • Avoid black typing on a white background. • Colour coding notes and music may help. • Be aware that children may experience difficulty when remembering sequences of notes to play, rhythms or song words • Children may need help organizing themselves and equipment/ instruments needed.
<h2>Dyspraxia</h2>	<ul style="list-style-type: none"> • Ensure that you are familiar with how dyspraxia manifests with the children you teach e.g. children may experience difficulties with gross or fine motor skills, scanning and focusing, fatigue from extra concentration needed to control movements, low self-esteem and sensory sensitivity. • Ensure children have a large enough space to work in. • Allow children extra time to practise, with movement breaks where needed. • Don't choose these children to go first – they may need to pick up on cues from other children in order to process how to do something correctly. • Pair children with a sensitive partner who knows what they're doing. • Clearly demonstrate how to handle equipment, and don't draw attention to the awkwardness of their movements. • Offer choices of instruments to the child to allow child to succeed in music lessons and reduce stress of potentially weak hand-eye co-ordination

Hearing Impairment

- Prior to the lesson, ask the child where they would prefer to sit.
- If they have hearing loss in only one ear, make sure they have their 'good ear' facing the teacher where applicable.
- Discreetly check if the child is wearing their hearing aid.
- Ensure classroom is silent (no instruments in the background) when giving instructions or modelling how to play)
- Clearly demonstrate or play sounds that are loud enough to hear.
- Be aware that instrumental sounds from metal instruments e.g. triangle, metallophone, metal guiros, cymbals etc. may be particularly loud and overwhelming for a child with hearing aids. Do not sit them immediately next to these instruments unless the child is happy to do so.
- Repeat any questions asked by other students in the class before giving a response, as a hearing-impaired child may not have heard them.
- Remove all barriers to lip-reading. Make sure the child can clearly see the teacher.
- Share the lesson using a laptop with headphones or other assistive technology if helpful.
- Advise teaching to wear an assistive devices e.g. microphone and be aware of any noises this may create if teacher is wearing a necklace, ID lanyard etc.
- Provide lists of subject-specific vocabulary or song lyrics which children will need to know, as early as possible.

Toileting Issues

- Sit children close to the door so they may leave the room discreetly to go to the toilet and not draw attention to themselves. Use toilet passes or prior permission as applicable.
- Be aware that anxiety associated with public music performances may trigger pain or a need to go to the toilet.
- When a school trip or concert is coming up, talk to the child and parents about specific needs and how they can be met.
- If the child has a diagnosed medical condition, they will have an Individual Healthcare Plan. Please make sure that you are familiar with this document. The SENCO can give you access to this.
- If the child has ongoing toileting issues, they will have an Intimate Care Plan. Please make sure that you are familiar with this document. The SENCO can give you access to this.

<p>Cognition and Learning Challenges</p>	<ul style="list-style-type: none"> • Work will be carefully planned and differentiated, and broken down into small, manageable tasks. • Carefully consider working pairings/small groups. Support the child with managing peer relationships effectively by providing a positive work 'buddy'; • The child may appear needy with an over-reliance on adult help and support. Encourage and support the child's independence and confidence by making the curriculum/tasks accessible to them. • Use picture cards and visual prompts to remind them what to do and keep children on track. • Physically demonstrate what to do rather than just rely on verbal instructions. • Avoid children becoming confused by giving too many instructions at once. Keep instructions simple and give specific, targeted praise so children know exactly what they are doing well.
<p>Speech, Language & Communication Needs</p>	<ul style="list-style-type: none"> • Be aware of the level of language that children are using, and use a similar level when teaching to ensure understanding. • Provide plenty of opportunities for the child to communicate in a small group (they will be less confident working in a big group and will be less involved); • Carefully consider any pairings or groupings and include good communication role models for the child to copy; • Ensure all adults respond positively to any attempt the child makes at communication – not just speech. Role model this positive response for the child's peers to copy; • Listen carefully to what the child says, so that they don't need to repeat themselves; • Use signs, symbols and visual representations to help children's understanding and ability to follow a piece of music with different notes or instruments. • Use non-verbal clues to back-up what is being said e.g., gestures. • Provide plenty of repetition (activities and vocabulary); • Reduce the number of questions you ask and make sure you give time to answer; • If you do need to ask questions in front of the class, try to use closed questions, as these require only a 'yes'/'no' answer, which will reduce anxiety.

Tourette's Syndrome

- Be aware that tics can be triggered by increased stress, excitement or relaxation – all of which may be brought on by music.
- Conversely, verbal tics may be significantly reduced during singing activities for some children
- Ignore tics and filter out any emotional reaction to them. Instead, listen and respond with support and understanding.
- Manage other children in the room to avoid sarcasm, bullying or negative attention being drawn to a pupil's tic.
- Be aware that a child may need more frequent rest / brain breaks as tics can make a child fatigued. Allow opportunities for a child to have a sensory break in a different place to the music lesson.
- Avoid asking a child not to do something, otherwise it may quickly become their compulsion. Instead, re-demonstrate how to do something correctly.
- Be sensitive to how noises & music affects a pupil's sensory processing capabilities. Find out what does and does not lead to a positive response and work with these in mind.

Experienced Trauma

- Understand behaviour in the context of the individual's past experiences.
- Always use a non-confrontational approach that shows understanding and reassurance, using playfulness, acceptance, curiosity and empathy.
- Actively ignore negative behaviour. Praise good behaviour and reward learning.
- Incorporate opportunities for humour and laughter in music lessons (laughter reduces the traumatic response in the brain).
- Ensure the lesson has clear expectations for behaviour and structure, as this will help provide a predictable environment, necessary for the child to feel secure enough to participate and access the learning;
- Classroom adults need to be emotionally available and able to support and coach the child in ways to calm themselves and manage emotions, as well as opportunities to practise de-escalating when they feel overwhelmed;
- Allow children the use of a pre-agreed breakout space when something in the classroom triggers an emotional outburst.
- During activities, teach and model positive self-talk to encourage self belief.
- Help the child to see that making a mistake is considered a necessary part of learning and that minor mistakes will not incur adult anger, or punishment;

Visual Impairment

- Sit children where they have the best view of the teacher and the board/resources.
- To help children who are sensitive to light and glare, use window blinds and screen-brightness controls to regulate the light in the room.
- They may need to wear a hat/visors, or sunglasses even when staying indoors. Be sensitive to this and mindful of other pupils comments/ reactions surrounding this;
- Add more light to an area if necessary.
- Children may benefit from high-contrast objects and pictures.
- Ensure children wear their prescribed glasses.
- Be aware of any 'blind spots' in the child's vision and accommodate accordingly
- Avoid relying of whole class demonstrations from a distance. Include verbal descriptions of what to do and where resources are. Provide demonstrations of how to play instruments from a comfortable distance for the child
- Allow opportunities for visual breaks to reduce eye-strain