

Practical Approaches to Support Inclusion – Pupils with a Visual Impairment

Description of Needs	Strategies to support teaching	Hints and Tips	Examples of outcomes to work towards
<p>The child or young person (CYP) has identified needs and may not be making expected progress in some areas because of their vision impairment. They may require additional specific interventions or specialist advice due to impact of vision impairment. They may also have social and emotional difficulties because of their deafness which have an impact on their social and emotional wellbeing.</p> <p>Moderate vision impairment</p> <ul style="list-style-type: none"> Distance vision: approximately 6/19 - 6/36. This means that the pupil needs to be about 1 metre away to see what normally sighted pupils can see from 6 metres. 6/19 - May not be able to see details on a white board from the front of the classroom as well as others can see from the back. 6/36 - May not be able to see details on a white board without 	<p>SEN Support Plan with more regular advice and involvement/intervention from Sensory Team including areas because of their vision impairment.</p> <p>The above plus:</p> <ul style="list-style-type: none"> Sharing of advice with relevant staff, in partnership with parents on successful strategies. There is a commitment to developing independence with steps planned and agreed Individual targets agreed and monitored, following discussion with CYP and parents e.g. developing independence, use of low vision aids, developing organisational skills. Additional interventions to target catch up for areas and gaps in learning. Targeted support for access for specific tasks/settings and is not necessarily needed for learning. CYP may need more time to complete tasks and that equality of access may mean that they need to do some things differently. 	<p>Environment:</p> <ul style="list-style-type: none"> Does someone keep an eye on a pupil at breaks and lunch time -balance need and independence? Have you look at the environment and considered if there are any concerns, especially steps? Has the pupil had the opportunity to explore the environment whilst quiet? Has the pupil learnt routes around school? Have you completed/or need support to complete risk assessments such as educational visits, school visit/swimming etc? Do you have a Personal Emergency Evacuation Plan in place? <p>Teaching tips:</p> <ul style="list-style-type: none"> Does the pupil have what they need to access their learning? Do you adapt the child's work in advance of the lesson? What are the outcomes of the teaching? – modify what is needed – not everything!! Have you removed unnecessary information, so work is clearly presented? Does the child have access to reading books in the right print size? 	<ul style="list-style-type: none"> X will be able to access information on the IWB independently (though MLP resources or through technology) X will fully participate in IT sessions using built in accessibility options. X will be able to safely access practical subjects. X will be able to find friends at break and lunchtime who understand their needs. X can read books in the right print size for pleasure. X will continue to develop technology skills for accessing work independently via an iPad X will be able to adapt accessibility setting independently for own needs.

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<p>approaching to within 1 metre from it.</p> <ul style="list-style-type: none"> Near vision: likely to have difficulty with print sizes smaller than 18 point or equivalent sized details in pictures. May prefer 24-point text. <p>● This is 18 to 24 points</p> <ul style="list-style-type: none"> Pupils move closer when looking at books or notice boards Pupils make frequent “copying” mistakes Pupils may be unable to access Exam papers (concessions and access arrangements may be required) Agreed need for regular monitoring from specialist advisory teacher Pupil will have poor hand - eye coordination Pupil will have a slow work rate Pupils may have Cerebral Visual Impairment (CVI) – normal or near normal visual measurements but will display 	<ul style="list-style-type: none"> May need print size larger than standard print. The quality of printed material should be appropriate for all CYP as regards clarity, layout, font size and colour contrast. Interactive whiteboards to be set to pupil preference Regular/daily small group teaching of social skills. Short term small group and/or individual intervention, to develop specific areas of curriculum access as identified, following a programme designed or recommended by that professional. Careful reviewing of needs before transition at key stages e.g. starting pre-school, primary, secondary, post 16, adult life. Exam concessions and access arrangements required may need time to extend and develop their technology access and organisation skills. Pupil may need to practice and reinforce new skills – short and often. 	<ul style="list-style-type: none"> Does the child have a low vision aid (Magnifier)? Does the child use the magnifier? Does the child need/use a sloping board for writing? How can you ensure that resources are modified in advance of their lesson? Is the child able to practice their independence skills– under guidance of QTVI or the QHS, trained school staff to support development of skills? Are lessons adapted for the child’s needs? Such as PE activities, Science, DT etc. <p>Equipment and resources</p> <ul style="list-style-type: none"> Low Vision Aids – dome and bar magnifiers Use of sloping boards, Reading window, large print rulers etc Access reading books in right size you can use e.g. http://www.clearvisionproject.org/ or eBooks Ensure use of accessibility features where required and assistance with use of equipment initially. Advice on how to modify work for specific subjects e.g. Science, Technology, Maths, and ICT as speak to QTVI. <p>Access to the school network.</p> <ul style="list-style-type: none"> Specialised ICT access. e.g. laptops, iPad, cameras, built in magnification and speech 	<ul style="list-style-type: none"> X will continue to access modified and enlarged resources X will develop mobility, orientation and independent life skills. X will be able to use the iPad for alternative ways of working – camera, emails, word documents.

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<p>moderate to significant visual processing difficulties</p> <ul style="list-style-type: none">• Agreed need for regular appropriate input from specialist advisory teacher.	<ul style="list-style-type: none">• The pupil may need interventions to develop touch typing and short cut key skills.	<p>software or screen readers e.g. supernova, iZOOM.</p>	

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<p>The learner has significant primary needs relating to their vision loss which impacts on progress requiring long-term high-level involvement of Sensory Team.</p> <p>Severe vision impairment.</p> <ul style="list-style-type: none"> • Pupils <i>may</i> be registered sight impaired or severely sight impaired but still learning by sighted means. • Distance vision: 6/36 or 6/60 or worse. This means that the pupil can see at 6m, what typical vision could see from 60m. • It represents a difficulty identifying any distance information, people or objects. • This pupil would be unable to work from a white board in the classroom without person/technical support. • Near vision: may have difficulty with any print smaller than 24 point. Print sizes may be a in a <p>range from 24 - 36point,</p>	<p>The above plus:</p> <ul style="list-style-type: none"> • Identified individual support across the curriculum in an inclusive mainstream setting to provide a personalised learning experience, considering the advice within the EHCP, annual review and advice from agencies. • Facilitate production of differentiated materials in accordance with the advice from the specialist teacher. • Advice from specialist staff on curriculum differentiation, equipment to access the curriculum, positioning in the classroom. • Manage access arrangements for internal and external examinations and assessments through seeking advice from specialist VI teachers. • Established communication strategies to facilitate communication and to assess learning. • Specialist assessments e.g. by QTVI, Educational Psychologist, SALT, OT, CAMHS etc. as part of assessment and plan. 	<p>Environment/Mobility:</p> <ul style="list-style-type: none"> • Do you have a Personal Emergency Evacuation plan (PEEP) in place? • Are there Individual risk assessments for practical subjects with support from the Sensory Team? • Have you any School trips which are planned well in advance and take into consideration the needs of CYP with reduced vision? • If in place, are you reinforcing independent travel to develop independence skills for the future following advice from the Habilitation Specialist? • Have you identified through a risk assessment any dangers and needs that require additional support? • Are you making modifications to, and adapted PE lessons as required? • Does the pupil need to leave 5 mins early for changeover as finds busy areas difficult? <p>Teaching Tips:</p> <ul style="list-style-type: none"> • When planning work what preparation and modification of resources are required? • Does the child need additional sessions to reinforce or complete work set within classroom? • Are you aware of some of the impact of vision impairment on the child's social and emotional needs? 	<p>Technology</p> <ul style="list-style-type: none"> • X will be able to identify which settings they prefer to be used to customise the appearance of the iPad to suit their needs. • X will continue to develop touch typing skills • X will be able to use magnification independently when required. • X will be able to organise information to be able to locate things when needed. <p>Social and Emotional</p> <ul style="list-style-type: none"> • X will develop awareness of own vision impairment • X will be able to prepare a class awareness session and deliver with QTVI to class. • X will be able to advocate their own needs.

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<ul style="list-style-type: none"> • may require significant differentiation and modification in all aspects of the curriculum. • Exam concessions and access arrangements required • May need habilitation and may use aides such as a long cane and including a guide dog to access physical environment • Agreed need for regular appropriate input from specialist advisory teacher – including staff training <p>Cerebral Vision Impairment (CVI)</p> <ul style="list-style-type: none"> • The pupil will typically have good vision when tested in familiar situations. A key feature of CVI is that vision varies from hour to hour with the pupil's well-being. • All pupils with CVI will have a different set of difficulties which means thorough assessment is a key aspect. • seeing moving objects • reading • doing more than one thing at a time (e.g. looking and listening) • Inability to recognise familiar faces • route finding 	<ul style="list-style-type: none"> • Regular multi agency assessment and/or review of strategies and progress. • Review of EHCP/SEN Support Plan with updated assessment and information from all agencies, reflection, and joint planning in partnership with CYPs and their parents/carers. • May require Specialist ICT assessments (QTVI) and use of specialist or adapted equipment / software where appropriate to access the curriculum. • Pupil may need to develop compensatory skills such as use of technology and mobility throughout the day • Programmes to develop social interaction and emotional wellbeing. • Peer awareness to develop peers understanding of how to support their classmate or friend. 	<p>Equipment and resources:</p> <ul style="list-style-type: none"> • Advice and assessment of the use of specialist or adapted ICT to access the curriculum. • Production of differentiated materials in accordance with the advice from the QTVI. <p>Cerebral Visual Impairment (CVI)</p> <ul style="list-style-type: none"> • Reduce clutter and visual information • Try using items that are contrasting in colour with the background. • More time to assimilate information • Keep floor surfaces clear • Develop good storage systems and routines to avoid clutter and obstacles on the floor. • Develop coordination and balance skills through physical activities and games. i.e. obstacle courses in park, house, garden, riding, swimming, trampolining. 	

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- with visual clutter
- Lower visual field loss
- Regular involvement from specialist teachers.

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<p>The CYP will experience significant persistent and enduring difficulties because of their vision impairment.</p> <p>Profound Vision Impairment</p> <ul style="list-style-type: none"> Usually, child has been born with a profound vision loss which means that access to learning needs to be significantly modified, with print, tactile pictures and audio or where pupils have a late onset vision impairment or a deterioration. Generally they have limited access to their learning by sighted means and are Educationally Blind <p>Distance vision:</p> <ul style="list-style-type: none"> difficulty identifying any distance information These pupils will usually be registered as severely sight impaired. Near vision: will have difficulty responding to facial expressions at 50 cm Some pupils will need tactile representations from the start of their education. 	<p>Significantly high levels of support from Sensory Team including regular intervention time for the pupil as well as advice and training to school.</p> <p>The above plus:</p> <p>Adult Support</p> <ul style="list-style-type: none"> TA supported to access/ training/advice from service to develop specialist TA skills to understand the implications of vision impairment and a depth of knowledge of specialist equipment. Frequent ongoing adult support to deliver personalised curriculum including 1:1 or small group intervention time e.g. compensatory skills, tactile learning and braille, development of listening skills advised by sensory team. Organise time for the supporting adult and teacher to plan, in advance, for lessons. Time will need to be allocated for the child to develop specialist skills such as mobility, braille and touch typing, use of a screen reader and specialist equipment etc. as appropriate. Any supporting curriculum modifications and resources to be 	<p>Safety/Environmental/Mobility/ILS:</p> <ul style="list-style-type: none"> Are risk assessments reviewed regularly to consider risks to self and others? Are skills taught by QHS reinforced and embedded in school day? Does the child use their long cane to access the environment (If appropriate)? Are staff supporting the pupil when moving between lessons may be verbal landmarks or sight guiding? Does the pupil need to be met on arrival and handed over at end of day? Are staff in place and confident to supervise at break and lunch times? Do you have a back-up plan if support is absent? Does the child have friends in their peer group? Is planned support in place for practical experiments and work taking into consideration their learning and safety. Is the environment busy and noisy as this can be confusing and distracting? Is there a quiet place for 1:1 intervention to enable focus and concentration? <p>Teacher Tips:</p> <ul style="list-style-type: none"> Do the Teachers and TAs plan together in advance to ensure outcomes are understood, modifications can be made on time? Does the TA act as a reader or scribe when required? 	<ul style="list-style-type: none"> Outcomes will become more personalised to the specific interventions needed to support progress. Specialist staff to provide interventions which can then be implemented and supported by school staff. Assistive Technology X will learn how to use accessibility features on their preferred device to record and retrieve information. X will learn how to use touch typing and shortcut keys to produce written work. X will develop systems to store work and email completed work to teacher <p>Mobility</p> <ul style="list-style-type: none"> X will be able to feed themselves independently X will be able to care for themselves independently.

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<ul style="list-style-type: none"> Some pupils may also be continuing to use print at point 48 for small pieces of work. <p>● This is</p> <h1>48</h1> <h1>point</h1> <ul style="list-style-type: none"> The CYP will experience significant, complex persistent and enduring difficulties and VI is dominant SEN The vision difficulties may co-exist with a medical condition, physical, sensory, language and or/communication needs, behaviour difficulties including self-esteem and attention issues. The CYP is extremely vulnerable and there may be safeguarding issues to consider due to potential acute levels of mental health concerns. 	<p>decided upon and sourced ready for up-coming lessons. Simplify to provide all necessary content.</p> <ul style="list-style-type: none"> Significant adult support and intervention to mediate the curriculum, through verbal descriptions and hands on concrete models. Support development of IT skills and ensure that equipment is working and being used in the classroom Support older students to advocate for themselves. Find out from the pupils what their preferred method of access and working is and check they have the right access to their learning to develop independence. Specialist assessments e.g. by Specialist Teacher for VI, Educational Psychologist, SALT, OT, CAMHS etc. Disapplication from certain subjects if appropriate. Examination arrangements to support CYP visual needs through variety of means such as Braille/tactile, modified and enlarged papers. 	<ul style="list-style-type: none"> Do you have opportunities for Pre/post tutoring? Is time allocated to ensure that the curriculum can be adapted e.g. preparation of raised diagrams and concrete examples and activities to understand new concepts? Is the TA able to observe specialist staff interventions and then embed this throughout the day? Does the TA set up equipment and establish working routines? Does the TA enable the pupil to develop independence through setting up own equipment? Is there an appropriate allocated space for visiting professionals to work with individual CYPs, considering safeguarding issues? Can development and learning related to the curriculum, life and social skills be embedded throughout the school day? <p>Equipment and Resources:</p> <ul style="list-style-type: none"> The use of specialist or adapted equipment / software in all lessons to access the curriculum. Requires significant differentiation and/ modified resources (including access arrangements) using specialist IT and equipment to be able to access curriculum Practical sessions - exploration of equipment (switched off) before lesson to explore functions, parts and use. Use of sound emitting equipment instead of light. 	<ul style="list-style-type: none"> X will be able to move from classroom to classroom independently X will know how to keep themselves safe as an individual with a vision impairment. X will be able to meet up with friends – in playground, outside school, socially? X will be able to get to school safely? X will be able to get a bus to school? X will be able to meet friends? etc

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<ul style="list-style-type: none"> Some pupils may have begun or are transitioning to braille or technology 	<ul style="list-style-type: none"> Time for outside agencies to meet termly to assess progress and plan future targets. Multi-disciplinary planning for complex needs. Pupils with additional needs may need to use Engagement model to record small steps of progress and through close liaison with other professionals ensure a cohesive approach to learning and safe care Regular access/ training/advice from service to develop specialist TA skills to understand the implications of vision impairment and a depth of knowledge of specialist equipment. All school staff must be responsible for providing lesson and curriculum content ahead of the lesson, so it can be produced in an alternative format Comprehensive risk assessments for off site visits liaising with Sensory Specialists to assess accessibility and ensure safety. Adult to give significant levels of support during the visits and provide sight guide as appropriate and ensure safety. 	<ul style="list-style-type: none"> Adaptive equipment for kitchen skills as advised by QTVI/QHS 	

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	<ul style="list-style-type: none"> • Adult to give significant levels of support during school visits or activities to enable pupil to participate. • More frequent and intensive adult support in class to take notes based on spoken lesson content and class discussion so that pupil has access to all learning points. (This may be done electronically) • Ongoing in depth pre and post teaching support to ensure pupils have the necessary knowledge and are familiar with new language, subject specific vocabulary and concepts which will be used in mainstream lessons. • Additional support to safely access the environment, curriculum and off-site visits including swimming. • Adult facilitated personalised gross motor /mobility programme overseen by specialist (e.g., physiotherapist, Habilitation Specialist) to maximise movement, orientation and independence skills. • Encourage and support social interactions and positive peer 		

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interactions and develop emotional resilience.

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<p>The learner has significant primary needs relating to their vision impairment which impacts on progress in all areas requiring long-term high-level involvement of Sensory Team.</p> <p>Exceptional</p> <ul style="list-style-type: none"> Usually pupils who are born with profound vision impairment, who are identified early on as being tactile learners. This means that access to learning is through tactile and audio methods and needs to be significantly modified. They have very limited access or no access to learning by sighted means and are Educationally Blind <p>Distance vision:</p> <ul style="list-style-type: none"> Unable to visually identify any distance information These pupils will usually be registered as severely sight impaired. <p>Near vision:</p> <ul style="list-style-type: none"> will have difficulty responding to facial expressions 	<ul style="list-style-type: none"> Pupils with limited useful vision need to be taught skills that their sighted peers would learn through watching others. <p>The above plus:</p> <p>Adult Support</p> <ul style="list-style-type: none"> Development of literacy requires a unique approach with overlearning and repetition – regular liaison with teacher, TA and QTVI essential to develop appropriate resources and strategies and to monitor progress. Development of braille skills taught by QTVI and reinforced by TA within the classroom. Significant amount of adult support to ensure personalised curriculum resources are available for the child's lessons such as the provision of tactile and braille resources, reduction of visual information. An ongoing and increasingly personalised curriculum including 1:1 and small group teaching modified to meet individual needs and targets planned in partnership with class teachers and Sensory Team staff including social and emotional interventions linked to sensory needs 	<p>Safety/Environmental/Mobility/ILS:</p> <ul style="list-style-type: none"> Does the child use their long cane to access the environment? Does the child have friends who provide peer support? Can the child locate parents at end of day? Can the child be introduced to practical elements safely and in advance of the lesson? Have I completed a risk assessment for offsite activity? Can the pupil choose their lunch Independently? Can the child use a knife, for and spoon? Can the child independently get changed for PE? <p>Teacher Tips:</p> <ul style="list-style-type: none"> Do the teachers and TAs plan together to ensure curriculum access and monitoring progress? Is time allocated to ensure that the curriculum can be adapted e.g. preparation of Braille, raised diagrams and concrete examples and activities to understand new concepts? Is there time allocated for the TA to complete transcription e.g. overwrite/conversion from print to braille/ braille to print? Does the TA have the skills to use the specialist equipment required to support production of braille? 	<ul style="list-style-type: none"> will move towards and locate a toy. X will pick up some finger food and put to mouth and chew. X will cruise the furniture. X will take steps with support. X will be able to touch and play with..... X shows excitement and understanding of what happens next X can make simple choices X can find their way around the room to particular areas of choice. X can safely move from the front of the school to their classroom. X can get to the dinner hall independently. <p>Braille</p> <ul style="list-style-type: none"> X will be able to access pre - braille activities to develop flexibility and strength in fingers

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<ul style="list-style-type: none"> • Will be tactile learners from the start of their education. • Some pupils may also be Dual users meaning they can access a very small amount of very large print. • Print is not a viable method of access in most learning. • The CYP will experience significant, complex persistent and enduring difficulties and VI is dominant SEN • The vision difficulties may co-exist with a medical condition, physical, sensory, language and or/communication needs, behaviour difficulties including self-esteem and attention issues. • The CYP is extremely vulnerable and there may be safeguarding issues to consider due to potential acute levels of mental health concerns. • Some pupils will be making the transition from print to braille. • Pupils who are new to the country, with severe visual impairment and very limited or no learning by sighted means. 	<ul style="list-style-type: none"> • The need for resources and equipment increases as child develops their skills and independence. • Adult to support pupil by mediating the lesson ensuring access to lesson content through auditory, tactile, braille and/or concrete examples. • Adult support to facilitate participation in lessons; to encourage and develop pupils attending and listening skills as well as contributions to the class. • Support to develop language and understanding of what words mean through concrete examples. • Disapplication from certain subjects if appropriate. • Examination arrangements to support CYP visual needs through variety of means such as Braille/tactile, modified and enlarged papers – advice from sensory team • Use of specialist IT and equipment including embossers and braille machines to be able to access curriculum • Adult to facilitate social interactions. Adult support to 	<ul style="list-style-type: none"> • Does the TA enable the pupil to develop their braille skills and use of technology to develop their confidence and independence? • Is there an appropriate allocated space for interventions to take place? • Is the pupil confident moving around their environment? • Is the pupil part of the school community? • Is the pupil supported to promote independence? • Does the pupil have resources at the same time as their peers? <p>Equipment and Resources:</p> <ul style="list-style-type: none"> • Does the pupil and TA know how to use their equipment? • Can the pupil organise their equipment to ensure that it is fully charged? • Does the pupil have access to the use of specialist or adapted equipment / software in all lessons to access the curriculum, including braille machines? As advised. • Has the curriculum been differentiated, and modified resources provided to ensure access to their learning? • Does the pupil have access to specialist IT and equipment and the school TA use equipment such as embossers and zychem machines to be able to ensure access to the curriculum? 	<ul style="list-style-type: none"> • X will be able to identify different textures through touch • X will be able to track along a line with finger pads • X will continue to improve reading braille reading skills and fluency • X will learn new spellings in grade 1 and grade 2 • X will learn to read and write new short forms • X will be able to use lower braille signs

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	<p>model good communication strategies and mediate between peers in class and social situations.</p> <ul style="list-style-type: none"> • Support to encourage movement to explore the world beyond arms reach using sound and voice. • Structured interventions to develop tolerance to different textures as can be tactile selective. • Additional advice from Salt and OT as well as Specialist sensory team about the mechanics of eating and drinking. • Advice from Habilitation Specialist and Physiotherapist and interventions to develop early movement skills and develop sense of place in space. • Direct adult support at all times when moving around the environment to facilitate movement and promote development of mobility and orientation skills as well as ensure safety as advised by the Habilitation Specialist. • Will need habilitation teaching and may use aides such as a long cane to access physical environment, reinforced by TA 	<ul style="list-style-type: none"> • Does the TA pre-empt difficulties and intervene to minimise risk for pupil in practical subjects but not over support? 	

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	<ul style="list-style-type: none"> • Time for outside agencies to meet termly to assess progress and plan future targets. • Multi-disciplinary planning for complex needs • Develop routines within the day and may benefit from object cues to support what is now and what happens next. • Time out – sensory overload can be a big difficulty and so a quiet time to self-regulate and calm. • Long term involvement of educational and non- educational professionals as part of Annual review/EHC plan. 		