

Social, emotional and mental health difficulties

What you will see (The difficulty/barrier, how this presents and the impact on the learner)	What can help (Provision – strategies, interventions and resources)	What have you tried?
<p>All of the descriptions provided represent how behaviours or presentation can be perceived by others. It is important to see these behaviours in the context of anxiety and possible language and or learning needs</p> <p>‘Fight responses’:</p> <ul style="list-style-type: none"> • Verbal and physical aggression. • Violence towards property and/or people. • Inappropriate language. • Blaming others. • Pushing friends away. • Inflexibility and/or unable to follow rules or instructions. • Disrespectful. • Self-harming/self-sabotaging behaviours. • Refusal to follow instructions or comply with behavioural norms. • Stealing. • May appear to be being dishonest. <p>‘Flight’ responses:</p> <ul style="list-style-type: none"> • Moving to another area without notice or permission (absconding). • Hiding. • Inability to manage unstructured/free time. • Avoiding tasks and activities. • Hyperactive. • Hypervigilant. • Agitated. • Fidgety. • Immature behaviours, tone of voice. 	<ul style="list-style-type: none"> • Provide a secure base (safe and predictable environment). 	
	<ul style="list-style-type: none"> • Consider the reason/purpose of behaviour – what is the context/history? 	
	<ul style="list-style-type: none"> • Routines and changes are communicated in advance. 	
	<ul style="list-style-type: none"> • Careful consideration of seating position. 	
	<ul style="list-style-type: none"> • Where possible, make tasks relevant and interesting, linked to the learner’s strengths and development needs. 	
	<ul style="list-style-type: none"> • Think carefully about lesson content in relation to learner’s known previous life experiences. 	
	<ul style="list-style-type: none"> • Use of strategies and approaches to develop understanding of presenting behaviours, e.g. ABC charts and the Iceberg approach. 	
	<ul style="list-style-type: none"> • Use of Electronic Boxall Profiling. 	
	<ul style="list-style-type: none"> • Consider movement breaks. 	
	<ul style="list-style-type: none"> • Support co-regulation. 	
	<ul style="list-style-type: none"> • Consider learning breaks. 	
	<ul style="list-style-type: none"> • Adopt a Key Person approach. 	
	<ul style="list-style-type: none"> • Provide support and/or organised activities during unstructured times. 	
	<ul style="list-style-type: none"> • Exit cards. 	
	<ul style="list-style-type: none"> • Backward chaining. 	
	<ul style="list-style-type: none"> • Develop risk assessments with parents and the pupil. 	
	<ul style="list-style-type: none"> • Ensure consistent rules, boundaries and schedules whilst remaining willing to offer some flexibility. 	
	<ul style="list-style-type: none"> • Offer a safe place within the classroom and offer to co-regulate when necessary. 	
<ul style="list-style-type: none"> • Offer a ‘safe’ and familiar task when emotions are heightened. 		
<ul style="list-style-type: none"> • Support verbal input with visuals (demonstration, images, objects, key words). 		

<p>'Freeze' behaviours:</p> <ul style="list-style-type: none"> • Forgetful. • Distracted; difficulties with concentration and engagement. • Not listening or interacting. • Appears confused. • Clumsy. <p>'Fold' behaviours:</p> <ul style="list-style-type: none"> • Withdrawal from social engagements. • Passive with neutral expression. • Compliant – which can lead to vulnerability. • Providing only 'yes' and 'no' answers. • Self-harm. • Unable to accept praise. • Unable to show enjoyment of seemingly positive experiences. 	<ul style="list-style-type: none"> • Assessment through teaching, e.g. are there parts of the curriculum that they find easier to manage than others? Use these to develop confidence. 	
	<ul style="list-style-type: none"> • Small group work, e.g. friendship or social skills, nurture groups. 	
	<ul style="list-style-type: none"> • Backward chaining – bringing learner in at the end of assembly or school day. 	
	<ul style="list-style-type: none"> • Play-based activities. 	
	<ul style="list-style-type: none"> • Establish interests. 	
	<ul style="list-style-type: none"> • Buddying/Peer Mentoring. 	
	<ul style="list-style-type: none"> • Giving responsibility for looking after someone else. 	
	<ul style="list-style-type: none"> • Unpicking the behaviours – negative and positive behaviours – what lies behind them? 	
	<ul style="list-style-type: none"> • Seek advice around self-harming or risktaking behaviours – a multi-professional approach. 	
	<ul style="list-style-type: none"> • Identifying what is not right through engagement with the learner. 	
	<ul style="list-style-type: none"> • Looking back, when did the behaviour start to change? 	
	<ul style="list-style-type: none"> • Liaison and collaboration with home is essential to understand the wider picture. 	
	<ul style="list-style-type: none"> • Provide substitutes for self-harming behaviours, e.g. elastic bands. 	
<p>Physical symptoms that are medically unexplained, e.g. soiling, stomach pains.</p>	<ul style="list-style-type: none"> • Provide activities that are stress reducing, e.g. games, dance, colouring, gardening, animals, forest school. 	
	<ul style="list-style-type: none"> • Keep a log and analyse pattern or trends to identify trigger. 	
	<ul style="list-style-type: none"> • Liaison with School Health (Kent). 	
<p>Attention difficulties including ADHD and ADD. Inattentiveness</p> <ul style="list-style-type: none"> • Having a short attention span and being easily distracted. • Appearing forgetful or losing things. • Being unable to stick to tasks that they perceive as tedious or time-consuming. • Appearing to be unable to listen to or carry out instructions. • Constantly changing activity or task. • Having difficulty organising tasks. 	<ul style="list-style-type: none"> • Understanding the reasons - is there a pattern? 	
	<ul style="list-style-type: none"> • Allowing plenty of time for movement or frequent small concentration periods. 	
	<ul style="list-style-type: none"> • Have a clear structure to the day. 	
	<ul style="list-style-type: none"> • Provide clocks and timers on desk. 	
	<ul style="list-style-type: none"> • Have clear expectations regarding behaviours and a clear and consistent response to behaviours. 	

Hyperactivity and impulsiveness <ul style="list-style-type: none"> • Being unable to sit still, often fidgeting. • Struggling to concentrate on tasks. • Poor working memory. • Excessive physical movement. • Excessive talking. • Being unable to wait their turn. • Appearing to act without thinking. • Interrupting conversations. • Appearing to have little or no sense of danger. 	<ul style="list-style-type: none"> • Being aware of times of the day that may be more difficult. 	
	<ul style="list-style-type: none"> • Consideration of discipline procedures/ behaviour policies and any reasonable adjustments that need to be made in line with Equalities legislation. 	
	<ul style="list-style-type: none"> • Use known interests or hobbies to engage in activities and discussion. 	
	<ul style="list-style-type: none"> • Provide regular opportunities for exercise. 	
Attachment Difficulties (including Attachment Disorder) <ul style="list-style-type: none"> • Appears anxious. • Appears withdrawn. • May experience intense and overwhelming emotions exhibited as anger or 'loss of control'. • May appear to lack inhibitions e.g. hugging people they don't know or appearing to be 'over friendly' towards children and adults. • Finding it difficult to join in with play or interactive games. • Appearing to 'sabotage' situations where things are going well. • May avoid eye contact. • Struggles with impulse control. • Struggle with 'cause and effect' thinking. • Lacks self-belief and confidence (has low self esteem). 	<ul style="list-style-type: none"> • Nurture group/nurture ethos. 	
	<ul style="list-style-type: none"> • Liaise with parents and carers for shared understanding. 	
	<ul style="list-style-type: none"> • Robust and careful transition when the child starts school, which includes consideration of life history. 	
	<ul style="list-style-type: none"> • All staff trained and aware of any child with attachment difficulties and how to respond to them (at a single child level). 	
	<ul style="list-style-type: none"> • Consideration of reasonable adjustments to and changes that could be made to the discipline procedures/behaviour policies. 	
	<ul style="list-style-type: none"> • Consideration of family context and the range of children that may have attachment difficulties, e.g. adopted, forces children, previously CIN, LAC. 	
	<ul style="list-style-type: none"> • Liaison with VSK for training and advice including working as part of the attachment aware project 	
Low level disruption or behaviours that appear to want to draw attention, e.g. talking out of turn, frequent interruptions to learning, fiddling with objects.	<ul style="list-style-type: none"> • Differentiated use of voice, gesture and body language. 	
	<ul style="list-style-type: none"> • Focus on reducing anxiety and thereby behaviours. 	
	<ul style="list-style-type: none"> • Flexible and creative use of rewards and consequences. e.g. 'catch them being good'. 	
	<ul style="list-style-type: none"> • Positive reinforcement of expectations through verbal scripts and visual prompts. 	
	<ul style="list-style-type: none"> • Time out/quiet area in the setting. 	
Difficulty in making and maintaining healthy relationships.	<ul style="list-style-type: none"> • Small group/nurture group activities to support Personal Social and Emotional development. 	
	<ul style="list-style-type: none"> • A range of differentiated opportunities for social and emotional development, e.g. buddy systems, friendship strategies, circle time. 	
	<ul style="list-style-type: none"> • Restorative approaches. 	