



# Early Years Good Practice Guidance for SEND

Early Years Advisory Teacher/SENCOs



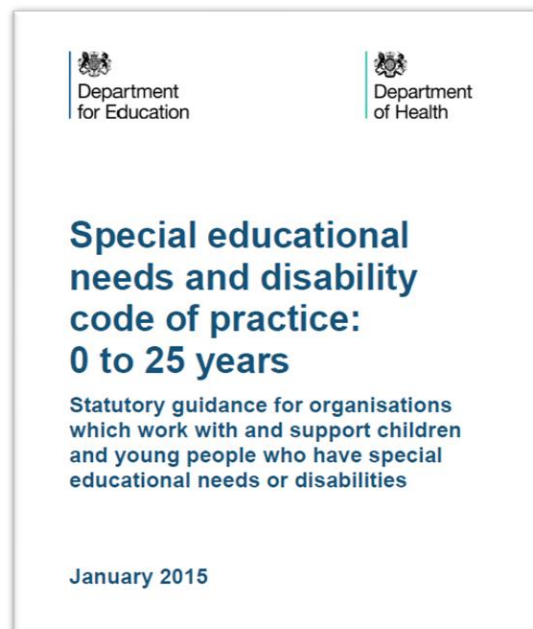
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# The code of Practice outlines a graduated response to meeting children's needs

*The graduated approach should be led and co-ordinated by the setting SENCo working with and supporting individual practitioners in the setting and informed by EYFS materials, the Early Years Outcomes guidance and Early Support resources.*

**(Code of Practice 2015 5:45)**



# Early Years Good Practice Guidance for SEND

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## **Definition of Special Educational Needs (SEN)**

A child or young person has SEN if they have a learning difficulty or disability which calls for special educational provision to be made for them.

A child of compulsory school age or a young person has a learning difficulty or disability if they:

Have a significantly greater difficulty in learning than the majority of others of the same age; or

For children aged two or more; special educational provision is educational or training provision this is additional to or different from that made generally for other children or young people of the same age by mainstream schools, maintained nursery schools, mainstream post 16 institutions or by relevant early years providers. For a child under two years of age, special educational provision means education provision of any kind.

A child or young person has SEN if they have a learning difficulty or disability which calls for special educational provision to be made for them.

A child under compulsory school age has SEN if he or she is likely to fall within the definition above when they reach compulsory school age or would do if special educational provision were not made for them.

**Definitions of special educational needs (SEN) taken from section 20 of the Children and Families Act 2014. The term Special Educational Need is used across the 0-25 age range and includes Learning Difficulty and Disability (LDD).**

## **Definition of Disability**

Have a disability which prevents or hinders them from making use of educational facilities of a kind generally provided for others of the same age in mainstream schools or mainstream post-16 institutions.

A physical or mental impairment with an adverse effect on the person's ability to carry out normal day-to-day activities.

Effect must be:

- Substantial – more than minor or trivial
- Long term – a year or more

Introduction to the Early Years Graduated Response.

## EHCP

Specialist (Wider Support from External Agencies)

Completion of EHCNA

Specialist (Wider Support from External Agencies)

Referral to EY SEND IF

Continue with cycles of Assess, Plan, Do, Review. Follow strategies recommended by external agencies.

Targeted (Wider Support from External Agencies)

Child will have an **Early Years SEND Support Provision Plan** - will have more than one cycle of Assess, Plan, Do, Review.

Liaise with external professionals; HV, SALT, Strengthening Families Service.

Complete **Request for Involvement Form** – EYAT/SENCo

Continue with cycles of Assess, Plan, Do, Review. Follow strategies recommended by external agencies.

Possible referral to **EY SEND IF**

Access T&W LOCAL OFFER

Targeted (Early Years Setting Support)

Follow the graduated approach (Assess, Plan, Do, Review)

Discuss child's needs with the parents and complete **Initial Record of Concern (IROC)** and **Early Years Individual SEND Support Record**. Add child's name to **SEND Monitoring Details**

Plan individual outcomes for child with SEND through differentiation

At this stage some children may need an **Early Years SEND Support Provision Plan**.

Review progress every 6 weeks.

Universal (Early Years Setting Support)

Follow the graduated approach (Assess, Plan, Do, Review) – see Good Practice Triangles – **Quality First Teaching**.

Key person to liaise with setting SENCO and raise any concerns.

# Early Years Graduated Response for children with SEND

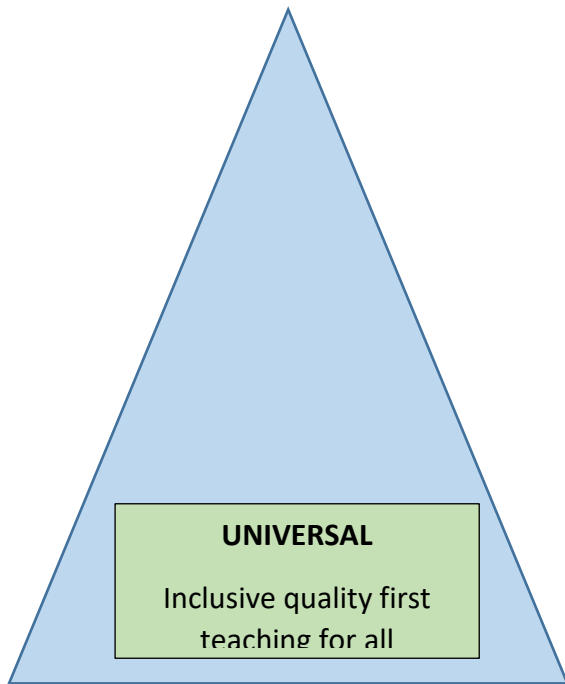


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EY Setting Support <i>Nursery budget and resources</i>		Wider Support and/or funding from External Agencies <i>Local Authority involvement via Top-up funding mechanism</i>		
Monitoring/ IROC	SEND Support	SEND Support	EYSENDIF	EHCNA/EHCP
<p><i>Despite providing daily opportunities through the <b>Universal Offer</b> available for all children the progress of the child causes concern</i></p> <ul style="list-style-type: none"> <li>Meet/ discuss concerns with parents. Complete <b>Monitoring/ Initial Record of Concern (IROC)</b> section of <b>EY SEND Paperwork</b> share with parents</li> <li>Monitor child over time limited period collecting evidence: observations, tracking, Liaise with <b>Setting SENCo</b></li> <li><b>Differentiated activities sheet</b> to be completed and activities implemented with child.</li> <li>If after completing cycle of <b>Assess, Plan, Do, Review</b> concerns remain through setting's <b>Graduated Response then ...</b></li> </ul> <p style="text-align: right;"></p>	<ul style="list-style-type: none"> <li>Complete Individual <b>SEND Provision Plan</b> for child with <b>SMART</b> targets and detailing strategies, interventions to be implemented</li> <li>6 Weekly/ Half-Termly Review of Child's SEND Provision Plan using Cycles of <b>Assess, Plan, Do, Review</b> completed leading to next targets/ priorities through evaluation of progress/ support offered to child</li> <li>If after completing cycles of <b>Assess, Plan, Do, Review</b> lack of progress/ no progress CAN be evidenced through setting's <b>Graduated Response then ...</b></li> </ul> <p style="text-align: right;"></p>	<ul style="list-style-type: none"> <li><b>Request for Involvement form</b> to be completed obtaining support / observation from EYAT/SENCo</li> <li>Implementation of recommendations, strategies and interventions detailed by EYAT/SENCo included on child's SEND Provision Plan and worked towards regularly</li> <li>6 Weekly/ Half-Termly Review of Child's SEND Provision Plan using Cycles of <b>Assess, Plan, Do, Review</b> completed leading to next targets/ priorities through evaluation of progress/ support offered to child</li> <li>If after completing cycles of <b>Assess, Plan, Do, Review</b> lack of progress/ no progress CAN be evidenced through setting's <b>Graduated Response then ...</b></li> </ul> <p style="text-align: right;"></p>	<ul style="list-style-type: none"> <li>After sufficient time to allow for EYAT/SENCo recommendations to be implemented and if sufficient <b>Graduated Response CAN</b> be demonstrated by setting then a referral can be made for additional funding from LA if required</li> <li>6 Weekly/ Half-Termly Review of Child's SEND Provision Plan using Cycle of <b>Assess, Plan, Do, Review</b> completed leading to next targets/ priorities</li> <li>Evaluation must show how additional top-up funding has been used and the impact (<b>EYSENDIF Review form</b>) and <b>Review observation and visit from EYAT/SENCo</b> for monitoring purposes</li> </ul> <p style="text-align: right;"></p>	<ul style="list-style-type: none"> <li>After following <b>Graduated Response</b>, applying Cycles of <b>Assess, Plan, Do, Review</b> with support from EYAT/SENCo and additional funding via <b>EYSENDIF</b> if more extensive support and funding is required then an <b>Education, Health &amp; Care Needs Assessment (EHCNA)</b> can be completed as long as setting CAN evidence involvement and impact from advice sought from wider agencies through their comprehensive Graduated response/ paperwork</li> </ul>

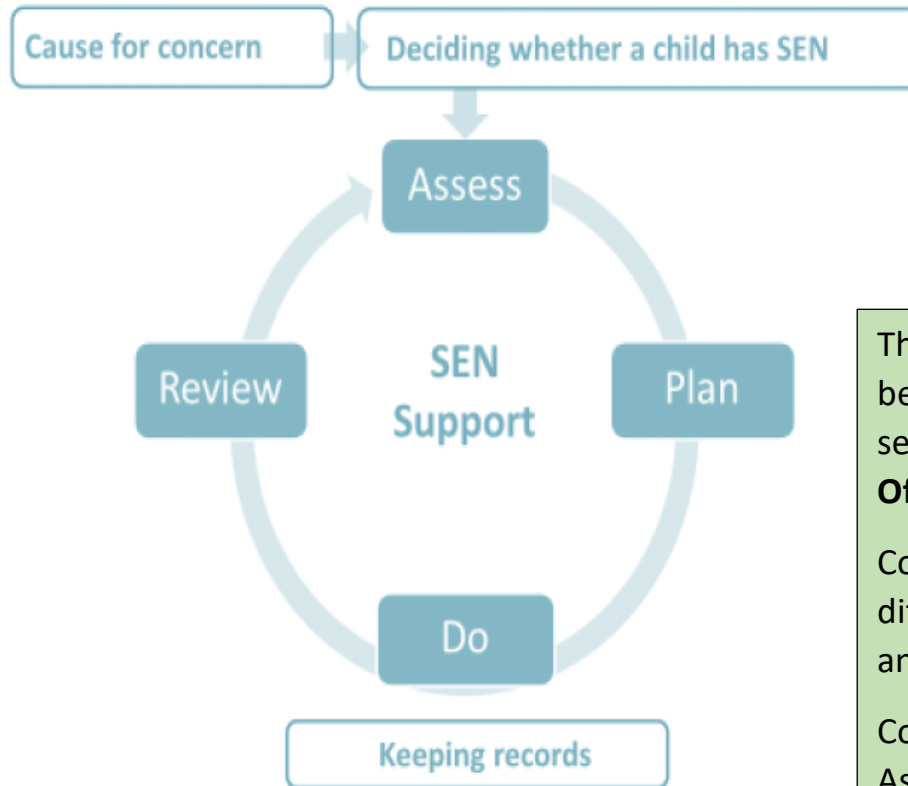
# SEND Support: A Graduated Response in the Early Years



It may look like this:-

A child who you may have concerns about and who is receiving Quality First Teaching and differentiated activities. This is the first time they are part of the Assess, Plan Do Review cycle.

No Early Years SEND Support Provision Plan at this stage.



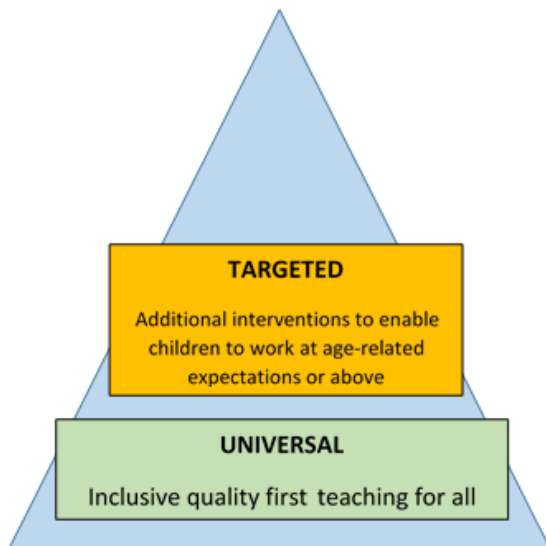
The child's needs are being met within the settings **Universal Offer**.

Continue to differentiate activities and monitor progress.

Continue using the Assess, Plan, Do and Review cycle.

No Early Years SEND Support Provision

# SEND Support: A Graduated Response in the Early Years



Or it may look like this:

This is a child who has been through the Assess, Plan, Do, Review cycle a number of times, still requiring differentiated activities.

This child is not making expected progress.

Key person will be liaising with setting SENCo to raise concerns.



## Targeted (Early Years Setting Support)

Follow the graduated approach (Assess, Plan, Do, Review)  
 Discuss child's needs with the parents and complete **Initial Record of Concern (IROC)** and **Early Years Individual SEND Support Record**. Add child's name to **SEND Monitoring Details**

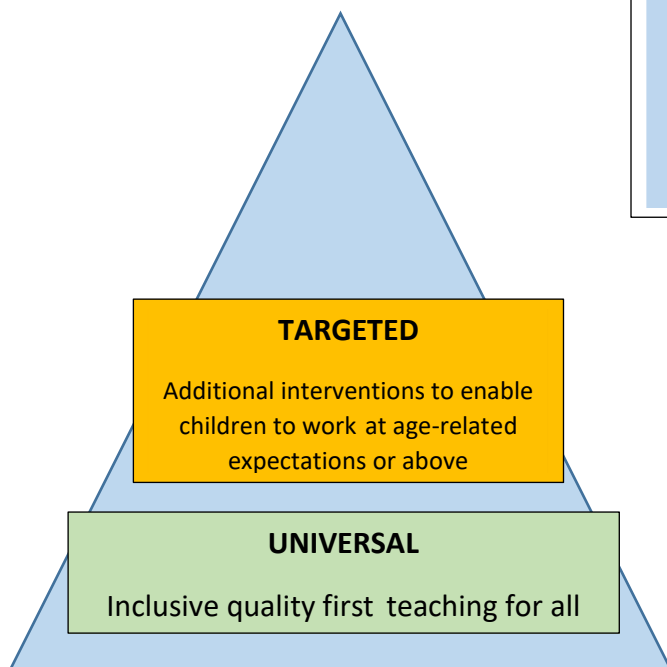
Plan individual outcomes for child with SEND through **differentiated activities** sheet.

At this stage some children may need an **Early Years SEND Support Provision Plan**.

Review progress every 6 weeks.



# SEND Support: A Graduated Response in the Early Years



**Targeted (Early Years Setting Support)**

Follow the graduated approach (Assess, Plan, Do, Review)

Discuss child's needs with the parents and complete **Initial Record of Concern (IROC)** and **Early Years Individual SEND Support Record**. Add child's name to **SEND Monitoring Details**

Plan individual outcomes for child with SEND through **differentiated activities sheet**.

At this stage some children may need an **Early Years SEND Support Provision Plan**.

Review progress every 6 weeks.

**Targeted (Wider Support from External Agencies)**

Child will have an **Early Years SEND Support Provision Plan** - will have more than one cycle of Assess, Plan, Do, Review.

Liaise with external professionals; HV, SaLT, Strengthening Families Service.

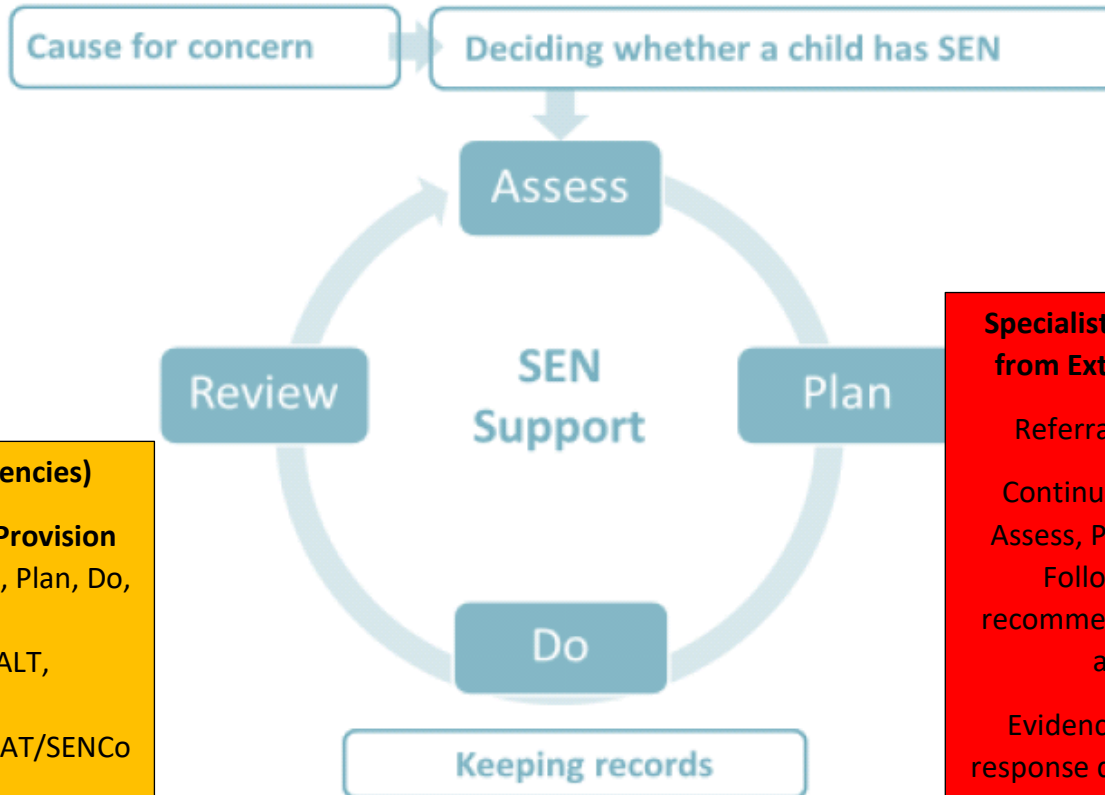
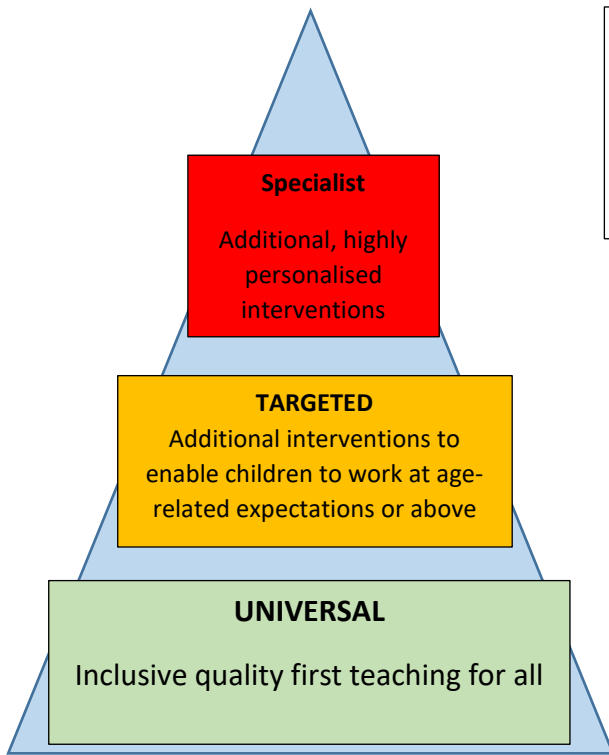
Complete **Request for Involvement Form** – EYAT/SENCo

Continue with cycles of Assess, Plan, Do, Review. Follow strategies recommended by external agencies.

Possible referral to **EY SEND IF**

Access T&W LOCAL OFFER

# SEND Support: A Graduated Response in the Early Years



**Targeted (Wider Support from External Agencies)**

Child will have an **Early Years SEND Support Provision Plan** - will have more than one cycle of Assess, Plan, Do, Review.

Liaise with external professionals; HV, SALT, Strengthening Families Service.

Complete **Request for Involvement Form** – EYAT/SENCo

Continue with cycles of Assess, Plan, Do, Review. Follow strategies recommended by external agencies.

If expected progress is not made, consider referral to **EY SEND IF**

Access T&W LOCAL OFFER

**Specialist (Wider Support from External Agencies)**

Referral to EY SEND IF

Continue with cycles of Assess, Plan, Do, Review. Follow strategies recommended by external agencies.

Evidence of graduated response demonstrates lack of/limited progress over time

Consider completion of **EHCNA Request paperwork**, possibly leading to an **EHCP** being issued

SEN Support in the Early Years – A Graduated approach

## Initial Record of Concern (IROC)

- Complete this form if you have any concerns about a child's development
- The form must be shared with parents/carers and their comments recorded and signed
- You can use this form for any child within the setting, regardless of whether they are eligible for their Nursery Education Grant (NEG) Funding
- Record the child's strengths and interests and reasons for concern
- Record the child's name on your **SEND Monitoring Details** format (overview sheet)
- Identify differentiated activities to address areas of concern and complete a **Differentiated Activities Sheet**
- Review progress in 6 weeks
- If you are still concerned then either continue to observe or begin **Early Years Individual SEND Support Record**
- If you are no longer concerned then there is no need for any further paperwork. However, keep the child's name on the SEND monitoring list, continuing to review progress periodically
- Some children may start at your setting with professional reports from external agencies e.g. Speech and Language Therapy, Occupational Therapy, Physiotherapy, Telford Child Developmental Centre.  
These children will be recorded at EY SEND Support on your monitoring sheet



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## Initial Record of Concern

<b><u>Setting:</u></b>		<b><u>Date:</u></b>	
Name of child			
Date of birth		Age	
Number of sessions attending this setting			
Does the child attend another setting – Yes or No		If yes, name of setting and number of days/hours	

Strengths and interests
-------------------------

Reasons for concern (give details): <i>Communication &amp; Interaction, Cognition &amp; Learning, Social, Emotional and Mental Health, Sensory and/or Physical Needs.</i>
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Background information and discussion with parents/carers
---

Parents/carers signature:	Date:
SENCo signature:	Date:

Intended Review Date:
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## **SEND Monitoring Details**

- This is an overview list showing the children in the setting who have been identified with SEND
- Add on a child's details to the list when you begin to keep records of your concerns or have reports from outside agencies. You will need to have parental consent to do this
- This overview provides evidence that you are monitoring children's progress and development
- Review the list regularly (at least every 6 weeks) and make sure that all details are up to date. A child's name can be removed from the list if there are no longer concerns about their learning and development. This is designed to be a working document which will reflect the fluid nature of children's developmental needs



## Differentiated Activities



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EYFS area/s of learning to address:

Differentiated activities:

Outcome of review:

Actions/Next Steps: (tick appropriate box)

No further concerns

Move to SEND Support

Continue differentiated activities

Manager/SENCO signature:

Date:

Parent/Carer signature:

Date:

## **Early Years Individual SEND Support Record**

- This record should be completed alongside the **Initial Record of Concern (IROC)**.
- This provides a continuous record of the individual child/ the stage of SEND support and professional involvement.
- This record should always be kept up to date. For example, each time the child is seen by a professional the details are logged on the form. Similarly, any paperwork completed/received should be logged on the record.
- This record will provide 'at a glance' chronological evidence of a graduated response to the child's needs.
- You will need to gain parental permission to start this record. Parents **MUST** be involved to agree this information is kept and opportunities to contribute. They will need to sign the record.
- Start a file for each individual child, containing the child's SEND Support documents, which can then be added to over time.
- At this stage some children may need an **Early Years SEND Support Provision Plan** to show the setting is making provision that is additional to or different from that made for the other children.



## Early Years Individual SEND Support Record



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<b>Child's Name:</b>		<b>D.o.B:</b>	<b>Setting:</b>	<b>Date of admission:</b>
<b>Key Person/Supported By:</b>			<b>Area/s of Concern:</b> (tick appropriate box)	
<b>Stage of Support:</b>	<b>Tick</b>	<b>Date:</b>	<i>Communication &amp; Interaction:</i>	<input type="checkbox"/>
IROC/Monitoring			<i>Cognition &amp; Learning:</i>	<input type="checkbox"/>
SEND Support			<i>Social, Emotional and Mental Health:</i>	<input type="checkbox"/>
SEND Support with EYSENDIF			<i>Sensory and/or Physical Needs:</i>	<input type="checkbox"/>
EHCNA				
EHCP				
<b>Attendance pattern:</b>			<b>Medical Information:</b>	
<b>Parent/Carer Signature:</b>			<b>SENCo Signature:</b>	
<b>Date:</b>			<b>Date:</b>	

<b>Date:</b>	<b>Contact/Involvement</b> (Professional name and role):	<b>Documentation/Evidence</b> (e.g. Report, target Plan, Letter, parental comment ):	<b>Actions/ Notes:</b>

## Early Year SEND Support Provision Plan

Complete an **Early Years SEND Support Provision Plan** as follows:

- **Assess** – Through observation of the child, tracking of progress and discussion with colleagues and parents, identify what is working well for the child, what they can currently do e.g. describe communication style/level, levels and type of attention or developmental skills. Identify up to three areas of development which require intervention and support to enable the individual child to progress through their next steps, as identified in the Assess column.
- **Plan** – Consider and agree desired **long-term outcomes**. What does the child need to achieve or be able to do over the next 6-12 months? Use guidance/recommendations and suggested outcomes from external agencies (if available). Ensure parents have the opportunity to discuss, contribute to and agree outcomes, and sign the forms. Outcomes can be shared between home and setting.
- From these long-term outcomes, determine smaller, more achievable steps to work towards, as **short-term outcomes**. What does the child need to achieve or be able to do over the next 6 weeks? Use guidance/recommendations and suggested outcomes from external agencies (if available).
- The outcomes must be:
  - S** Small (Specific)
  - M** Measurable
  - A** Achievable
  - R** Realistic
  - T** Time related
  - A** Agreed
- **Do** – Consider actions and interventions required for the child to achieve the set outcomes. What resources, strategies and adult support will be needed? Ensure that these are consistently delivered as stated in the plan. All practitioners should be aware of the plan and their role in supporting the child. Observe, and collate evidence of the child's achievements over the agreed time period.

- **Review** - Set a date with parents for reviewing the outcomes and the child's progress towards achieving these (6 weeks)
- Parents/Carers must be involved with every review. Invite them to a meeting to discuss progress. If they are unable to attend, documents must be shared with them and their signatures obtained.
- Review progress towards the outcomes set:

**Achieved** - If the child has achieved the targets then set new ones.

**Partially achieved** – Outcomes showing a small measure of progress could be repeated, but with a change of focus.

**Not achieved** – This may be due to unrealistic outcomes. Consider whether further simplification is required, or different provision.

- Agree outcomes and complete a new **SEND Support Provision Plan**. Set another review date (usually 6 weeks)
- You can complete as many cycles of assess-plan-do-review at SEND Support as required, in order to meet the learning and developmental needs of the child.
- If the child has made expected progress and you are no longer concerned about the child's development, then you may decide to close the SEND Support Record. The Record needs to be confidentially stored and passed on to the next setting when the child leaves (with parental consent). Continue to monitor the child's learning and development.
- If you are more concerned about the child's development then you **may** consider completing a **EHA** (Early Help Assessment) to identify appropriate external agencies for support (e.g. Strengthening Families Service, Early Years Advisory Teacher/SENCo, SaLT, Health Visitor/GP).
- For advice and observation from your designated Early Years Advisory Teacher/SENCo, please complete a **Request for Involvement** form.

# Early Years SEND Support Provision Plan



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<b>Child's Name:</b>	<b>DoB:</b>	<b>Setting:</b>	<b>Plan Number:</b>
<b>Key Person/Supported By:</b>			<b>Plan Start Date:</b>
			<b>Plan Review Date:</b>
<b>Child's strengths and interests:</b>		<b>Area of Need/s (please indicate):</b> <i>Communication &amp; Interaction, Cognition &amp; Learning, Social, Emotional and Mental Health, Sensory and/or Physical Needs.</i>	

ASSESS	PLAN	DO			REVIEW
<b>What can the child do now?</b>  What is the desired long term outcome ( <b>next steps</b> )?	<b>Objective/ What is the desired short term outcome? SMARTA Targets</b>	<b>What actions/ Interventions are required?</b> <b>What resources/strategies are required?</b> <b>What is the type of provision? (e.g. 1:1/ small group)</b>			<b>Has the desired short term outcome been achieved?</b>  Achieved (A) Partially achieved (PA) Not achieved (NA)
		<b>Actions/interventions/ Provision and strategies</b>	<b>Delivered by</b>	<b>Frequency &amp; Duration of support</b>	A <input type="checkbox"/> PA <input type="checkbox"/> NA <input type="checkbox"/>  <b>Comments:</b>
<b>1.</b>					A <input type="checkbox"/> PA <input type="checkbox"/> NA <input type="checkbox"/>  <b>Comments:</b>
<b>2.</b>					A <input type="checkbox"/> PA <input type="checkbox"/> NA <input type="checkbox"/>  <b>Comments:</b>

3.					A <input type="checkbox"/> PA <input type="checkbox"/> NA <input type="checkbox"/> Comments:
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**Parental Contribution/views:**

**ACTIONS/ NEXT STEPS:**

Cease EY SEND Support/monitor child's learning and development

Maintain at EY SEND Support/ New plan required

Referral to outside agency (Please specify): \_\_\_\_\_

EHCNA Request

**Manager/SENCO signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Parent/Carer signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

## SEND One Page Profile (Passport)

- It is good practice to complete this in conjunction with the early Years SEND Support Provision Plan.
- This provides an 'at a glance' profile of the individual child.
- This is useful to share with other professionals who may come into contact with this child.

For example, if there is a new practitioner coming into the room who has not worked with this child; this Profile/Passport would provide the necessary information to work effectively in supporting the child.

- It is good practice to update this Profile/Passport at key transition points or when significant changes occur. It is **not** necessary to update this Profile/Passport each time an Early Years SEND Support Provision Plan is reviewed/agreed.
- This Profile/Passport is useful evidence which will be needed if completing an Early Years SEND Inclusion Fund (EY SEND IF) referral or an Education Health Care Needs Assessment (EHCNA), as appropriate

Child's Name:		SEND One-Page Profile (Passport)	Settings LOGO.
D.O.B:	PHOTOGRAPH		Date of Update:
Setting:		Key Person: SENDCo:	
Access Arrangements:		I would like you to know that:	I find it difficult to:
It would help me if you could:		I will help myself by:	
Additional support:			



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## **Early Years SEND Support Provision Record**

- This can be completed with the Early Years SEND provision Plan and the One Page profile.
- It is a document to record when the activities take place showing the evidence and impact which can be used to complete the Provision Plan Review.
- This form can be available in the room to Practitioners working with the child. Just the initials of the child can be used. This will enable the form to be a working document showing what the child can do with support from an adult or independently.



# Early Years SEND Support Provision Record



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Child's name: DOB:		Setting:		
Date	Outcome/ Focus	Activity	Comments	Next Steps

## **Request For Involvement (EY SEND Support)**

- This form is for use with children identified as experiencing SEND within the setting. It is expected that at least 1 completed cycle of ASSESS, PLAN, DO, REVIEW (APDR) as part of the setting's Graduated Response should have been completed before requesting involvement/submitting this form.
- Please complete all sections of this referral form in full giving as much relevant information as possible and attach additional information where requested.
- **Attendance** – add the days and times the child attends the setting. This helps with arranging visits.
- **Date of Admission** – add the date when the child first started within your setting.
- **Professional Agency involvement** - add in any known information which may require gathering from parents.
- **Child's strengths/Interests** – inform us of what the child likes to do and any toys/objects which are of interest. This also links to the Early Years SEND Support Provision Plan and One Page Profile.
- **Areas of Identified Need** – write a description of the child in the relevant areas of need as in the SEND Code of Practice (2015). There may be times when not all areas need completing, this will be dependent on the child's individual needs.
- **EYFS Current Attainment Levels** – it is important to identify which curriculum documentation/guidance you are using. Please add the date of when the assessment took place.

- **Strategies and Support provided to date** - It is important to show what has already been put in place and the impact this has had for the child.  
IF there is a reason why this information cannot be given then the 'Exceptional Circumstances' box should be completed.
- **Exceptional circumstances** – this should be used when a child has started/transferred to your setting or moved to the area with complex needs or is known to a number of agencies/professionals.
- **Parent/Carer (s) comments** – encourage and allow times for parents to complete this section of the form. A separate page can always be added to the document.
- **Parent/Carer (s)** – forms must have handwritten signatures. If signatures are not provided the form cannot be processed and will delay a visit to support the child.

Please return completed form and accompanying documents to:

[EarlyYearsSENDSupport@telford.gov.uk](mailto:EarlyYearsSENDSupport@telford.gov.uk)



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## REQUEST FOR INVOLVEMENT ( EY SEND SUPPORT)

Ensure you have discussed intended 'Request for Involvement' with Parents/ Carers

**PLEASE NOTE:** This form is for use with children identified as experiencing SEND within the setting - **At least 1 completed cycle of ASSESS, PLAN, DO, REVIEW (APDR) as part of the setting's Graduated Response should have been completed before requesting involvement/submitting this form**

Please complete all sections of this referral form in full giving as much relevant information as possible and attach additional information where requested

Requests are triaged/ prioritised by identified concerns/level of need, completeness of referral. If referral is incomplete or insufficient information is provided your referral will be deferred/ declined and you will be asked to resubmit with the additional information which will delay the allocation process/ support received

Name of Setting/ School:		Date of referral:			
Name of Class Teacher / Nursery Key Worker: (DELETE AS APPROPRIATE)					
Contact person (at the setting)/ Name & Designation:		Telephone:			
Email:					
Name of Child: (BLOCK CAPITALS)		Date of Birth: (DD/MM/YY)			
		Age at referral:			
Name of Parent/Carer(s):		Telephone:			
Email(s):					
Home Address: (INCLUDING POSTCODE)					
<b>Attendance: (Please indicate days and times by completing grid)</b>					
	Monday	Tuesday	Wednesday	Thursday	Friday
Morning					
Afternoon					

Term time only attendance? YES/NO (DELETE AS APPROPRIATE)  
 Date of Admission:  
 Is the child accessing the Talking Twos entitlement? YES/NO (DELETE AS APPROPRIATE)  
 Is the child accessing the 30 hours Childcare entitlement? YES/NO (DELETE AS APPROPRIATE)  
 Does the child attend any other setting? YES/NO If YES - Name of setting:

Gender:	English as an Additional Language (EAL): YES/NO (DELETE AS APPROPRIATE)	
Ethnicity:	First/ Home Language:	
Medical information ( <i>Including any diagnosis</i> ):	Sight:	
	Hearing:	
Child in Care/ Currently Looked After (CIC/CLA): YES/NO (DELETE AS APPROPRIATE)	Child Protection Plan (CP): YES/NO (DELETE AS APPROPRIATE)	Child in Need (CIN): YES/NO (DELETE AS APPROPRIATE)

**Professional Agency Involvement: Is the child known to the following services?**

TCDC: YES/NO Telford Child Development Centre/ Community Paediatrician  (IF YES PLEASE GIVE FURTHER DETAILS)	Initial Appointment: YES/NO	Date:
	Short Assessment: YES/NO	Date:
	Multi-disciplinary Assessment (MDA): YES/NO	Date:
Speech & Language Therapy Service (SaLT): YES/NO  (IF YES PLEASE GIVE NAME OF SPEECH & LANGUAGE THERAPIST)		
Early Help Support/ Strengthening Families service: YES/NO (IF YES, GIVE NAME OF PRACTITIONER/WORKER)	Is an Early Help Assessment (EHA) in place: YES/NO (IF YES PLEASE SUBMIT COMPLETED PAPERWORK)	
Health Visitor/Community Nursery Nurse:  Contact details: ( NAME OF HEALTH VISITOR/ GP PRACTICE )	Has the child had a 2 Yr Development check completed? YES/NO Date:  Has the child had Ages & Stages Questionnaires completed? YES/NO Date:	
Other: (PLEASE SPECIFY)		

Home context/Background information: (PLEASE GIVE DETAILS OF CURRENT FAMILY SITUATION INCLUDING SIBLINGS)

**Child's strengths/ Interests:** (Outline what the child 'can do' e.g. social interaction, play skills, vocabulary and language)

--

**Areas of Identified Need - SEND Code of Practice, 2015:**

Does the child have delays or needs in these areas? If so please give additional information in the boxes provided (You only need to comment in relevant boxes)

**Communication and Interaction:**

*(Includes Speech, Language & Communication Needs (SLCN) & Social Communication & Interaction difficulties including sensory related behaviours, differences, preferences)*

Please indicate which Speech & Language screening/ Assessment tool you have used and attach related paperwork with your referral. **If not undertaken indicate reason(s)**

Stoke Speaks Out	Every Child A Talker (ECAT)	Wellcom	Time to Talk (2 - 3 yr olds)	EY Talk Boost
YES/NO	YES/NO	YES/NO	YES/NO	YES/NO

**Cognition and Learning:**

*(Includes Attention/ concentration difficulties, concerns related to a child's rate and/ or level of progress, learning and development within EYFS curriculum)*

**Social, Emotional and Mental Health (SEMH):**

*(Includes behaviour, emotional regulation difficulties which are at a level which is impacting on child's rate and/ or level of progress, learning, development and engagement within the curriculum)*

**Sensory and/ or Physical Needs:**

*(Includes Hearing impairment, Visual impairment, Multi-sensory impairment, Physical conditions/ disabilities, difficulties and /or Medical conditions)*

--

<b>EYFS - Current Attainment levels:</b> <i>(Include specific ranges/ bandings in the below grid).</i>				
Date of Assessment:				
Communication & Language	Personal, Social & Emotional Development	Physical Development	Literacy	Mathematics
Birth to Five Matters non- statutory Guidance				
Development Matters non- statutory Guidance				
Other (Please specify)				

<b>SEND Status:</b> (PLEASE INDICATE WHICH STAGE THE CHILD IS AT)		
<u>EY SEND Support</u> (Individual SEND Support Provision Plan with setting - based support/intervention) <input type="checkbox"/>	<u>EY SEND SUPPORT with Additional funding</u> (As previous plus In receipt of Early Years Inclusion Funding, EYIF) <input type="checkbox"/>	Education, Health & Care Needs Assessment (EHCNA) <input type="checkbox"/> Education, Health & Care Plan (EHCP) <input type="checkbox"/>

<b>Strategies and Support provided to date:</b> (Please indicate what you have already tried/ provided that is <b><i>'different to'</i></b> and <b><i>'additional from'</i></b> the provision for other children attending e.g. differentiated support, one to one time, environmental adaptations, interventions) <b><u>(THIS SECTION MUST BE COMPLETED)</u></b>	
<b>If not completed/Graduated Response paperwork unavailable please indicate reason/s</b> (e.g. exceptional circumstances, child moved into to Local Authority/Area)	
Strategy/Intervention:	Evaluation/Impact: <i>(Be Specific, if no impact - why?)</i>
Strategy/Intervention:	Evaluation/Impact: <i>(Be Specific, if no impact - why?)</i>
Strategy/Intervention:	Evaluation/Impact: <i>(Be Specific, if no impact - why?)</i>

**Reason for requesting involvement/support:**

- ❖ Observation, advice and report contributing towards graduated response (e.g. EY SEND Inclusion funding request, EHCNA / Educational Advice, EHCP Annual Review)
- ❖ SMARTA Target setting support/ advice regarding outcomes for Provision Plan (e.g. Monitoring of progress, planning next steps)
- ❖ Information and Modelling of strategies/ interventions (e.g. Visuals, Listen with Lucy, Intensive Interaction)
- ❖ Other (Please specify):

Exceptional circumstances:

Please indicate if this referral is based on exceptional circumstances (e.g. child has started/ transferred to your setting/moved to the area with complex needs, is known to a number of agencies/ professionals already etc)

Parent/ Carer (s) comments:

Early Years Advisory Teachers/SENCoS or Early Years Consultants/ SENCoS are always pleased to meet with parents following initial assessments and you can indicate below if you would like the setting/ school to arrange this.

YES

NO

I give my consent for my son/ daughter to be observed/ assessed by the Early Years Advisory Teacher/SENCo or Early Years Consultant.

I understand that:



- Telford and Wrekin Council (T&WC) collect personal information on me/my family to enable T&WC to provide support services which will benefit me as an individual and/or my family
- That my/my family's personal information will only be shared internally between Council services to enable these services to be provided to me/my family
- T&WC may also share my/my family's personal information with government departments or other public bodies as required by relevant legislation

For further information please visit [www.telford.gov.uk/terms](http://www.telford.gov.uk/terms)

SENCo Signature:	Date:
Parent/Carer(s) signature:	Date:
<b>This must be completed-</b> (Handwritten signature) <b>Forms without a parental signature will not be considered</b>	

*Personal Data: Telford & Wrekin Council collects your personal data to enable you to be able to complete eLearning and face to face training to support your role under Article 6(1)(a) of the General Data Protection Regulations 2018 or equivalent United Kingdom legislation. Telford & Wrekin Council will not share any of your personal data with external organisations, unless required to do so by law. However, for further details on the council's privacy arrangements please view the privacy page on the council's [website page](#)*

**IMPORTANT: PLEASE NOW COMPLETE SUBMISSION CHECKLIST**

If referral is incomplete or insufficient information is provided your referral will be deferred/ declined and you will be asked to resubmit with the additional information which will delay the allocation process/ support received

<b>SUBMISSION CHECKLIST:</b> <i>Have you completed the form fully and enclosed the requested information?</i>	(Tick)	<b>Office Use Only.</b> <b>(EYAT/EYCC)</b>
Copy of child's <b>Individual SEND Support Provision Plan/s</b> showing setting's Graduated Response (Assess, Plan, DO, Review cycle)		
<b>PLEASE NOTE:</b> <b>At least 1 completed cycle of Assess, Plan, Do, Review should have been undertaken before completing this referral and should be attached with this referral (If not completed valid reason has been provided/ recorded)</b>		
<b>Copy of child's Individual One Page Profile/SEND Passport</b>		
<b>Copy/evidence of Speech &amp; Language Screening/Assessment undertaken</b> E.G. <i>Stoke Speaks Out, EY Talk Boost</i>		

Section completed detailing <b>strategies/ interventions and impact</b> <b>(If not completed valid reason has been provided/ recorded)</b>		
Parental signature/s recorded on form (handwritten)		

Please return to: [EarlyYearsSENDsupport@telford.gov.uk](mailto:EarlyYearsSENDsupport@telford.gov.uk)

## **Request For Review (EY SEND Support)**

- This form is to be used to request a review where a child has previously been observed by a member of the Early Years and Childcare Team (EYAT/EYCC).
- Ensure you have discussed the intended Request for Review with parents/carers.
- **Attendance** – add the days and times the child attends the setting. This helps with arranging visits.
- Please indicate if there have been any changes / updates in the following areas:  
**Medical information:** new appointments, diagnosis etc.  
**Sight/Hearing:** updated information / appointments.
- **Date of Admission** – add the date when the child first started within your setting.
- **EYFS Current Attainment Levels** – it is important to identify which curriculum documentation/guidance you are using. Please add the date of when the assessment took place.
- **Parent/Carer (s) comments** – encourage and allow times for parents to complete this section of the form. A separate page can always be added to the document.
- **Parent/Carer (s)** – forms must have handwritten signatures. If signatures are not provided the form cannot be processed and will delay a visit to support the child.

Please return completed form and accompanying documents to:

[EarlyYearsSENDSupport@telford.gov.uk](mailto:EarlyYearsSENDSupport@telford.gov.uk)



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to create a better borough



## REQUEST FOR REVIEW ( EY SEND SUPPORT)

Ensure you have discussed the intended Request for Review with Parents/  
Carers

To be used only to request a review where a child has previously been observed  
by a member of the EY SEND Support team

Setting/ School:	Date of referral:				
Contact person (at the setting)/ Name & Designation:	Telephone:				
Email:					
Name of Child: (BLOCK CAPITALS)	Date of Birth: (DD/MM/YY) Age at this referral:				
Name of Parent/Carer(s):	Telephone:				
Email(s):					
<b>Attendance: (Please indicate days and times by completing grid)</b>					
	Monday	Tuesday	Wednesday	Thursday	Friday
Morning					
Afternoon					
Term time only attendance? YES/NO (DELETE AS APPROPRIATE)					
Date of Admission:					
Is the child accessing the Talking Twos entitlement? YES/NO (DELETE AS APPROPRIATE)					
Is the child accessing the 30 hours Childcare entitlement? YES/NO (DELETE AS APPROPRIATE)					
Does the child attend any other setting? YES/NO If YES - Name of setting:					

Please indicate if there have been changes/ updates in the following areas:		
Medical information:	Sight:	Hearing:

<b>EYFS - Current Attainment levels:</b> (Include specific ranges/ bandings in the below grid).				
Date of Assessment:				
Communication & Language	Personal, Social & Emotional Development	Physical Development	Literacy	Mathematics
Birth to Five Matters non- statutory Guidance				

Development Matters non- statutory Guidance				
Other (Please specify)				

Reason for requesting review/support:

- ❖ Observation, advice and report contributing towards graduated response   
(e.g. EY SEND Inclusion funding request, EHCNA / Educational Advice, EHCP Annual Review)
- ❖ SMARTA Target setting support/ advice regarding outcomes for Provision Plan   
(e.g. Monitoring of progress, planning next steps)
- ❖ Modelling of strategies/ interventions (e.g. Visuals, Listen with Lucy)
- ❖ Other (Please specify):

Parent/ Carer (s) comments:

Early Years Advisory Teachers/SENCOs or Early Years Consultants are always pleased to meet with parents following review observations/ assessments and you can indicate below if you would like the setting/ school to arrange this.

YES

NO

I give my consent for my son/ daughter to be observed/ reviewed by the Early Years Advisory Teacher/SENCO or Early Years Consultant. I understand that:

- Telford and Wrekin Council (T&WC) collect personal information on me/my family to enable T&WC to provide support services which will benefit me as an individual and/or my family
- That my/my family's personal information will only be shared internally between Council services to enable these services to be provided to me/my family

- T&WC may also share my/my family's personal information with government departments or other public bodies as required by relevant legislation

For further information please visit [www.telford.gov.uk/terms](http://www.telford.gov.uk/terms)

SENCo Signature:	Date:
Parent/Carer(s) signature:  <b>This must be completed-</b> (Handwritten signature) <b>Forms without a parental signature will not be considered</b>	Date:

*Personal Data: Telford & Wrekin Council collects your personal data to enable you to be able to complete eLearning and face to face training to support your role under Article 6(1)(a) of the General Data Protection Regulations 2018 or equivalent United Kingdom legislation. Telford & Wrekin Council will not share any of your personal data with external organisations, unless required to do so by law. However, for further details on the council's privacy arrangements please view the privacy page on the council's [website page](#)*

### IMPORTANT: PLEASE NOW COMPLETE SUBMISSION CHECKLIST

If referral is incomplete or insufficient information is provided your referral will be deferred/ declined and you will be asked to resubmit with the additional information which will delay the allocation process/ support received

<b>SUBMISSION CHECKLIST:</b> <i>Have you completed the form fully and enclosed the requested information?</i>	(Tick)	<b>Office Use Only.</b> <b>(EYAT/EYCC)</b>
Copy of child's most recent/ current <b>Individual SEND Support Provision Plan/s</b> showing setting's Graduated Response (Assess, Plan, DO, Review cycle)		
<b>Copy of child's Individual One Page Profile/SEND Passport</b>		
<b>Parental signature/s recorded on form (handwritten)</b>		

Please return to: [EarlyYearsSENDSupport@telford.gov.uk](mailto:EarlyYearsSENDSupport@telford.gov.uk)

## **Request For Whole Setting – Based SEND Support**

- This form is to be used only to request whole setting-based SEND support/advice.
- PLEASE NOTE: We will not be able to discuss/ observe individual children.
- Please be specific about the support you are requesting:

SEND Paperwork/ processes support visit

Advice /support on creating an inclusive environment (SEND-Based learning walk, Sensory environment Audits/ checklists)

Support and advice on the setting's Universal SEND Offer (e.g. SEND Audit, resources)

Behaviour management strategies/ advice

Modelling of strategies/ interventions (e.g. Visuals, Listen with Lucy, Speech & Language screens, Attention Bucket, Intensive Interaction)

SMARTA Target setting support/ advice regarding outcomes for Provision Plan (e.g. Monitoring of progress, planning next steps)

Other (Please specify):

- This form requires the SENCo's signature
- Please send form to [EarlyyearsSENDSupport@telford.gov.uk](mailto:EarlyyearsSENDSupport@telford.gov.uk)



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## REQUEST FOR Whole Setting–Based SEND SUPPORT

Setting/ School:	Date of referral/Request:
Contact person (at the setting)/ Name & Designation:	Telephone:
Email:	

Reason for requesting support:

- ❖ SEND Paperwork/ processes support visit
- ❖ Advice /support on creating an inclusive environment (SEND-Based learning walk, Sensory environment Audits/ checklists)
- ❖ Support and advice on the setting’s Universal SEND Offer (e.g. SEND Audit, resources)
- ❖ Behaviour management strategies/ advice
- ❖ Modelling of strategies/ interventions (e.g. Visuals, Listen with Lucy, Speech & Language screens, Attention Bucket, Intensive Interaction)
- ❖ SMARTA Target setting support/ advice regarding outcomes for Provision Plan (e.g. Monitoring of progress, planning next steps)
- ❖ Other (Please specify):

SENCo Signature:	Date:
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Please return to: [EarlyYearsSENDSupport@telford.gov.uk](mailto:EarlyYearsSENDSupport@telford.gov.uk)



# Early Years

## SEND Inclusion Fund

### Information and Documents

[www.telfordsend.org.uk](http://www.telfordsend.org.uk)



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**NHS**  
Shropshire, Telford  
and Wrekin

 **Integrated  
Care System**  
Shropshire, Telford and Wrekin

## Early Years SEND Inclusion Fund (EY SEND IF)

- Before considering a referral to EYIP the setting must contact the designated Early Years Advisory Teacher/SENCo/Consultant for advice and to arrange an observation of the child.
- Following the observation by the designated EYAT/Consultant and subsequent discussion complete the Early Years Inclusion Panel referral form to request additional support.
- The Early Years Inclusion Panel meets once every half term so that decisions can be made and funding, or mentor support, may be allocated for the next half term.
- **Referrals need to be submitted at least 5 working days before the panel meets.**
- **Any referrals that arrive late will be deferred until the next meeting of the Panel.**
- You will need to show evidence of a graduated response and submit copies of recently reviewed provision plans (last 2) alongside the referral form and any other relevant information e.g. Professional reports that you feel will help the Panel to make their decision.
- Consider whether completing a EHA (Early Help Assessment) with parent(s)/carer(s) would be beneficial.

## **Why does Telford and Wrekin have an Early Years Inclusion Fund?**

Early Education and Childcare Statutory Guidance for Local Authorities places a requirement on local authorities to establish an Early Years SEN Inclusion Fund to support 3 and 4 year olds with emerging SEND. The purpose of the fund is to further assist providers to implement strategies to support children's learning and development.

By law, all providers must have arrangements in place to support children with SEN and/or disabilities (SEND). These arrangements should include a clear approach to identifying and responding to SEND. Where a setting identifies a child with SEND they must work in partnership with parents and carers to implement any support that the child needs. Most children with additional or special educational needs and/or disabilities will not require special resources or enhanced staffing to be successfully integrated into settings; indeed most settings meet the additional needs of their children very well. However, some children with more complex needs may benefit from enhanced provision or additional resources for a period of time.

## **What is the Early Years Inclusion Fund Panel?**

The Early Years Inclusion Funding Panel is a meeting of Local Authority and Health Professionals including Advisory Teachers, Speech and Language Therapist and Portage Home Visitor who have expertise in special educational needs within the Early Years. It has been developed for all Early Years Settings in Telford and Wrekin in order for them to access additional funding to support children who attend their settings with special educational needs.

Settings must work with parent/carers, children and young people in a person centred way, including parents in the application and review process.

## **Which children can be discussed at the Early Years Inclusion Fund Panel?**

- Children of preschool age attending private, voluntary & maintained early years settings including childminders.
- Children in the toddler phase of nursery who access the Talking Twos Childcare offer.
- Where funding is being requested for a child they must attend a setting in Telford and Wrekin.
- The child will have significant barriers to learning that require support above what is already allocated through the setting's universal offer.
- Funding is allocated to the individual child, if the pupil moves setting the funding is transferred if appropriate.
- If a child has an Education, Health and Care plan in place then they cannot be discussed at the panel.

## **What happens at the Panel?**

Once an application has been accepted the request will be taken to the next available panel. Panels are run 6 times a year, usually two weeks before a school holiday. The information received is considered and a decision is made as to whether funding is agreed. The members of forum understand that all information shared about your child is to be kept confidential. Where members feel there is a conflict of interest, for example they are aware of the child outside of work, then they will leave the panel while the child is being discussed.

Where funding is not agreed the setting will be given some next steps to consider. It may be that the setting are asked to continue to follow recommendations from an advisory teacher or the portage home visitor. When the setting are making an application for the EY Inclusion Fund they must talk to you so you know what they are asking for.

## **What support can funding be used for?**

- Requests need a clear rationale and based on specific outcomes.
- This may include, but not limited to, support services, therapy, positive play and or EY practitioners to provide specific learning programmes.
- Support must be appropriate for the child to meet the individual child's identified needs.

- Settings must record the provision they put in place using an EY Inclusion Fund Provision Plan (EYIFPP).

### **How are parents/carers, children and young people involved?**

Parents and carers should be involved in the whole process. Settings should talk to you about the support already in place and what they are proposing when requesting support from the Inclusion Funding Panel.

Settings will consult with parents and carers on the proposed support requested. You should contribute to and have a copy of the EY Inclusion Fund Provision Plan that is put in place.

The form for parents/carers, children and young people should be filled out in a person centred way.

### **How is support from the EY Inclusion Fund requested?**

Settings can apply using the templates and forms they have been provided with.

Settings are expected to involve parents/carers and children before, during and after the application. Your views are recorded and returned with the application.

Settings will feedback the outcome of the panel with you. Where funding is agreed this will be available to settings within 14 working days.

Settings must review the EY Inclusion Fund Provision Plan (EYIFPP) with parents/carers before the date funding is due to cease.

Allocation of funding is early support; therefore support should start immediately after it has been provided to settings.

### **Who to contact?**

If you think your child would benefit from the support contact your setting's Special Educational Needs Coordinator (SENCo) or Manager who will be able to provide further information.

If your child is accessing the funding and you feel support is not appropriate you can talk to the SEND team within the Local Authority who are able to advise you on 01952 567407 or alternatively you can talk to IASS (Independent Advice Support Service) on 01952 457176



## Early Years Inclusion Funding (EYIF) REQUEST FORM

### PART A

#### SETTING DETAILS

Setting submitting request:

Date of admission into setting:

Sessions attending and Timings:

Does the child attend any other setting? Yes  No , if so, where?

Is the child accessing the Talking Twos entitlement? Yes  No

Is the child accessing the 30hrs childcare entitlement? Yes  No

#### CHILD'S DETAILS

Surname:

First Name:

Date of Birth:

Sex: M  F

Address:

Postcode:

#### PARENTAL DETAILS

Name:  
(Parent/Carer)

Name:  
(Parent/Carer)

Address: (if different from pupil)

Address: (if different from pupil)

Postcode:

Postcode:

**Brief summary of why the request is being made.**

This should focus on a brief description of the needs of the child and information about what you have Done already to support the child or young person. Please include details of the support/advice provided by the Early Years Advisory Teacher EYAT.

**Description of need**

Please indicate the primary area of need using 1. Please then indicate any other areas of need in rank order of prevalence from 2 to 4, where appropriate. (i.e. 1 = primary need 2 = secondary need etc.) You do not need to rank an area of need that does not apply to the child/young person.

Cognition and Learning	Communication and Interaction	Social, Emotional and Mental Health	Physical/Sensory/Medical

Please provide more specificity by indicating areas of need that apply again using a ranging order with 1 Showing primary area of need.

Moderate learning Difficulties		Speech and language difficulties		Social difficulties		Physical difficulties	
Specific learning difficulties		Autistic Spectrum Disorder		Emotional difficulties		Visual impairment	
Severe learning difficulties		Social communication difficulties		Mental health difficulties		Hearing impairment	
Profound and multiple learning difficulties				ADD/ADHD		Medical difficulties	

**SOCIAL SERVICES INVOLVEMENT**

Is the pupil known to Social Services?      Yes       No

Is the pupil in care?      Yes       No

Name of Social Worker:      Area:

***If the pupil is a Child in Care, please attach evidence that the Social Worker has been consulted about this submission.***

**NB: FOR A CHILD IN CARE THE APPLICATION CANNOT BE PROCESSED WITHOUT THE CONSENT OF THE SOCIAL WORKER.**

\* Has the pupil had a CAF/Early Help (Single Assessment): Yes  No

If Yes, please involve the relevant worker/service in planning.

**PART B**

**Please specify the band being requested** (Please circle)

**Band A**

**Band B**

**Band C**

**Briefly describe what the setting will use the additional funding for.** (List what additional support is required over and above that already provided. This should be based on recommendations of the outside professionals you have been working with during the graduated approach).

**You are required to submit the following EVIDENCE when requesting EYIF:**

- Description of graduated approach to date including reference to support and written feedback from outside agencies.
- Progress over time and current level of attainment and how that compares to the expectation for children of the same age.
- Proposed Early Years Inclusion Fund Provision Plan (EYIFPP)
- Parent and child views and how they have been involved in the process.

***Submission Checklist - Please ensure that all of these are ticked and enclosed when making a request for EYIF funding:***

- Completed EYIF Request Form
- Completed EYIFPP
- Completed cycles of Assess, Plan, Do, Review (Description of graduated approach) Target Plans
- Completed Parent/Carer Views
- Copies of current assessments and any relevant written feedback (i.e. CAF/TAC, EYATs, EPs, OT, Physio, SIS, CAMHS, SALT)

## PART C

### Setting declaration

- The contents of this referral have been shared with parents/carers
- All parts of this form have been completed in full

This form has been completed by:

**Name:** \_\_\_\_\_ **Job Title** \_\_\_\_\_

**Signed**  
**(Owner / Manager):** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Signed**  
**(SENCo):** \_\_\_\_\_ **Date:** \_\_\_\_\_

### Parental/carer consent

Please tick:

I confirm that my child's educational setting has discussed this request with me and I have been fully informed in the decision to refer my child to the Early Years Inclusion Funding Panel.

I understand that:

Privacy Notice under the Data Protection Act (General Data Protection Regulations from 26<sup>th</sup> May 2018)

Telford & Wrekin Council are collecting Personal Identifiable Information to enable the best possible advice and support to be provided and to meet the statutory requirements under the Children and Families Act 2014. We need to collect this information in order to consider your request for Early Years Inclusion Panel support. This information is being processed under DPA – Schedule 2 (2a) (GDPR 2018 -Article 6 (1) b).

Telford & Wrekin Council will not share any Personal Identifiable Information collected with external organisations unless required to do so by law. However, this information will be shared within Telford & Wrekin Council and partners agencies (Department of Education, NHS, Schools/settings, and Early Years providers). For further details on the council's privacy arrangements please view the privacy page on the council's website page <http://www.telford.gov.uk/terms>

**Signed:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
**(Parent/Carer)**

**Signed:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
**(Parent/Carer)**

Please return this form electronically to [SENDandinclusion@telford.gov.uk](mailto:SENDandinclusion@telford.gov.uk)

Early Years Inclusion Panel  
SEND Team  
Education, Corporate Parenting and Inclusion  
Telford & Wrekin Council  
6B Darby House  
Telford TF3 4JA







Appendix 2  
**EARLY YEARS**  
**INCLUSION FUND PROVISION PLAN (IFPP)**

<b>Child's Name</b>		<b>Date of Birth</b>	
<b>School/Setting</b>			
<b>SENCo</b>			
<b>EY Inclusion Funding (EYIF) Request (Please circle)</b>			
<b>Band A</b>	<b>Band B</b>	<b>Band C</b>	
<i>Amount agreed</i>	<i>(Please complete after confirmation of funding from panel)</i>		
<b>Start Date</b>		<b>Review Date</b>	

<b>Summary of special educational needs</b>

<b>OUTCOMES</b>	
What are the expected outcomes that <u>xxx</u> will achieve over the next 12 months.	1.
	2.

<i>(Please add as many outcomes as required)</i>	3.		
Details of provision/Intervention to meet outcomes	Grouping (Ratio)	Session	
		Duration	Frequency

<b>Parent / Carer's view</b>
<b>Pupil's views</b>

<b>Staff member responsible for completing the plan</b>		
Name:	Designation:	Date:



## EY Inclusion Funding – PARENT/CARER VIEWS

You are being asked for your views because the setting are requesting support from the Early Years Inclusion Funding Panel for your child. The views recorded below will be submitted along with the settings request. You should receive a copy of all information that the setting submits.

<b>Child's name:</b>	<b>DOB:</b>
Has the setting informed you about why they are requesting support from the EY Inclusion Funding Panel  YES/NO	
Have you received a copy of the information guide for parent/carers about the EY Inclusion Funding Panel  YES/NO	
Please provide a description of your child now including their strengths and areas of difficulties.	
What do you think is working well at the moment?	
Do you have any services outside of the setting that are helping you at the moment?	
Is there anything else you would like to tell us about your family?	

<b>Signed:</b>  <b>PRINT NAME:</b> <b>(Parent/Carer)</b>	<b>Date:</b>
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## Review of Early Years Inclusion Panel Support

- In the Notification of Decision letter you will be informed of the start and end dates of funding or support (usually an academic term) if this has been allocated. This will include child's next EYIP review date and the date for the review form to be returned.
- When the child's inclusion funding review is due you may be contacted by your Early Years Advisory Teacher/SENCo to arrange a date to discuss the child's progress.
- If support is awarded through Early Years Inclusion Panel (EYIP) a 'Review of Inclusion Panel Support form' will need to be completed with a current Target Plan attached and returned **at least 5 working days** prior to the EYIP meeting. **Failure to submit the review form will result in the child not being discussed at the panel and a loss of funding or support.**
- The information on the form will contribute to the panel's decision as to whether funding/mentor support will continue or cease.
- Should funding/mentor support continue, you will need to complete this form again for each identified period/review.

Return forms to:

Early Years Inclusion Panel  
SEND Team  
Education, Corporate Parenting and Inclusion  
Telford & Wrekin Council  
6B Darby House  
Lawn Central  
Telford  
TF3 4JA

Email: [SendandInclusion@telford.gov.uk](mailto:SendandInclusion@telford.gov.uk)

Contact: [Jamie.Sault@telford.gov.uk](mailto:Jamie.Sault@telford.gov.uk)

Tel: 01952 567407

## Review of Inclusion Panel Support

<b>Child's Name</b> <b>D.O.B</b>	
<b>Setting</b> <b>Pattern of attendance:</b>	
<b>Number of hours allocated or mentor support</b>	
<b>Name of support worker and Key Person</b>	
<b>Distribution of support hours through the week</b>	
<b><u>Graduated approach</u></b> <b>How have support hours been used?</b>	
<b>What impact on the child's development has the support had?</b> (refer to reviewed targets, observations,)	
<b>Next steps/ further needs</b> Is there a specific programme to be followed?	

**Please attach evidence of a continued graduated approach (current Target Plan), signed and dated by the parent(s)/carer(s).**

**Signed (SENCo):**

**Date:**

# Education, Health Care Needs Assessment Information

Guidance, Request Form and Criteria can be  
accessed at:

[www.telfordsend.org.uk](http://www.telfordsend.org.uk)



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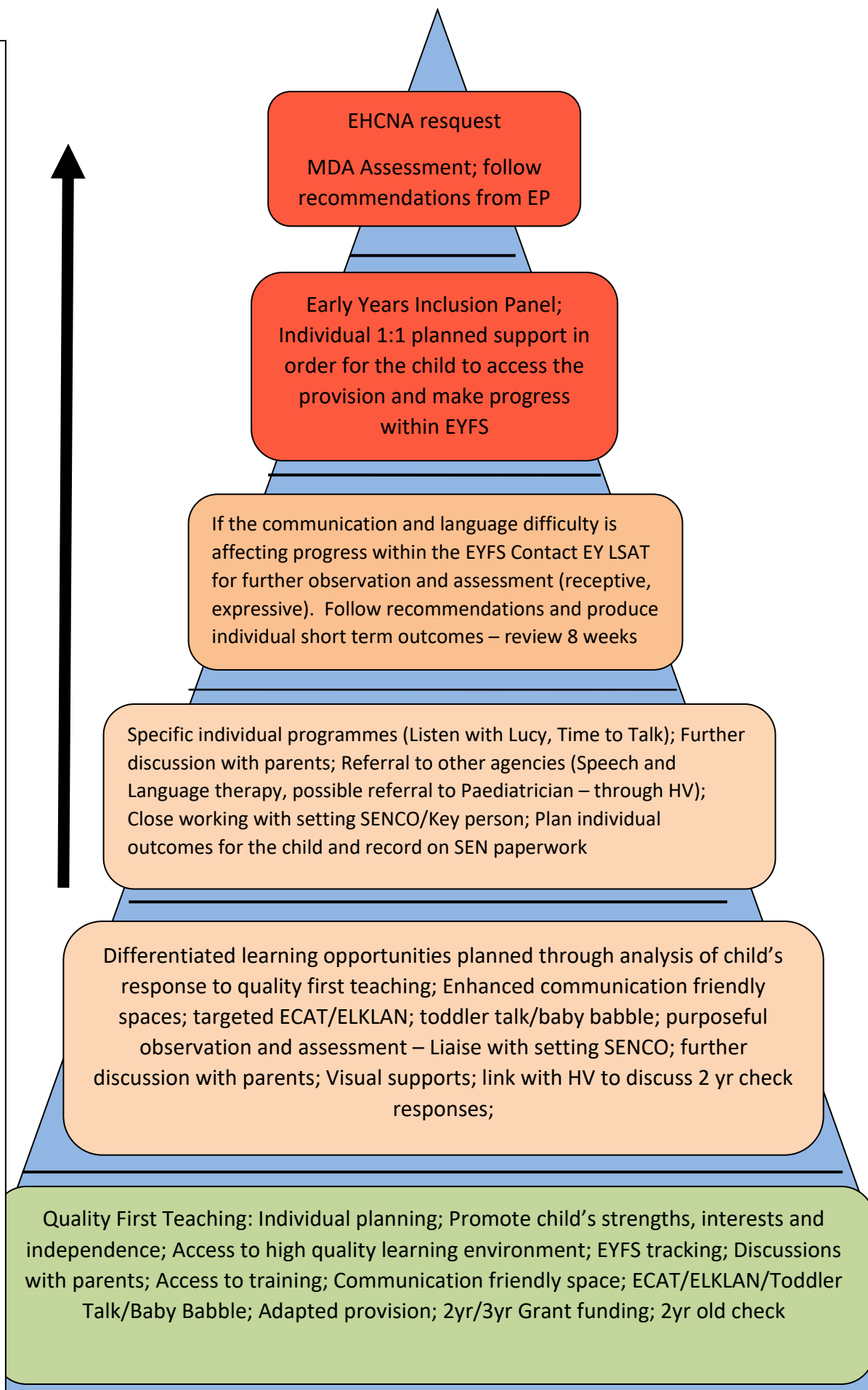
**NHS**  
Shropshire, Telford  
and Wrekin



# Appendices

- Good Practice Triangles
- Risk Assessment
- ABC Monitoring
- Template of Transition Letter
- Template for Transition Meeting
- Provision Plan and Review Examples (to follow)

Assess, Plan, Do, Review at each stage



No additional support

Some additional support

Lots of additional support

Exceptional support

Applicable to all children

Applicable to SOME children

Applicable to FEW children



**Assess, Plan, Do, Review at each stage**

VOICE OF THE CHILD –  
PERSON CENTRED PLANNING

PARTNERSHIP WITH FAMILIES



MDA Assessment;  
follow  
recommendations from  
EP and Health

Early Years Inclusion Panel;  
Personalised 1:1 planned  
support in order for the child to  
access the provision and make  
progress within EYFS; Possible  
Inclusion Mentor support

Plan individual outcomes for the child and record on SEN  
paperwork; Close liaison with parent/carers; consistent  
with strategies; possible CAF/TAC implementation;  
Referral to external agencies (EY LSAT, SALT,OT); follow  
recommendations

Differentiated learning opportunities planned through analysis of  
child’s response to quality first teaching; Liaise with setting SENCO;  
Link with CAFLS support worker to plan strategies. Positive  
behaviour strategies; Note ABC behaviour; staff access training on  
supporting children’s emotional development and positive  
behaviour management approaches; look at the nursery  
environment and make any adaptations – see sensory processing  
booklet (OT)

Quality first teaching including opportunities for promoting child’s emotional and  
social development; Access to high quality learning environment; EYFS tracking;  
Discussions with parents; Access to training; Communication friendly space;  
ECAT/ELKLAN/Toddler Talk/Baby Babble; Early years practitioner (key worker)  
identified as child’s setting-based attachment figure. Consistent boundaries and  
emotionally responsive approach at home and in the setting. Promote child’s  
strengths, interests and independence. Community and family support. Signpost to  
children’s centre services – Family Connect.

No additional support  
**Applicable to all children**

Some additional support  
**Applicable to SOME children**

Lots of additional support  
**Applicable to FEW children**

Exceptional support  
**Applicable to FEW children**

Assess, Plan, Do, Review at each stage

VOICE OF THE CHILD –  
PERSON CENTRED PLANNING

PARTNERSHIP WITH FAMILIES



Possible EHCNA request  
Specialist support and outcomes from Sensory inclusion service, OT,

Early Years Inclusion Panel; request for equipment as recommended by OT/Physio; Personalised 1:1 planned support in order for the child to access the provision and make

Plan individual outcomes for the child and record on SEN paperwork; Close liaison with parent/carers;; Referral to external agencies (EY LSAT, OT, Gait clinic); follow recommendations

Hearing/Vision: Diagnosis can trigger specialist support and advice. Physical: plan intervention groups for children not making progress with QFT; Cool kids; MAC pack; dough disco; funky fingers; pre writing advice (OT booklet)

Hearing: Newborn Hearing Screen; Paediatric Audiology (targeted follow up); Integrated 2 yr old review. Use visual aids, roleplay, pictures to support child  
Vision: Medical check (HV, GP); Glasses, if prescribed should be worn and kept clean; preferential seating towards front; uncluttered environment; use clear, unambiguous language  
Physical: 6 week check (HV); complete an environmental checklist; risk assess all areas; staff possibly attend moving and handling training.  
Quality first teaching – fine/gross motor activities; pre writing activities; balance of indoor/outdoor activities; whole group 'Dough Disco', funky fingers

No additional support  
Applicable to all children

Some additional support  
Applicable to SOME children

Lots of additional support  
Applicable to FEW children

Exceptional support  
Applicable to FEW children

Graduated Response – Prime Area: Physical Development



Telford & Wrekin  
COUNCIL

**Risk Assessment of:**  
**Name:**  
**D.O.B.**

**Business Unit/School:**

**Carried out by:**

**Date:**

**Review date:**

**Risk Assessment No:**

**What are the dangers/hazards?**

**Who might be harmed and how?**

**What are we already doing?**

**Risk rating  
L,M or  
H**

**What further action is necessary?**

**By whom?**

**By when?**

**Done**

**Revised Risk rating L, M or H**

**Signatures**

**Key Person:..... Date:.....**

**SENCo:..... Date:.....**

**Parents/Carers:.....Date:.....**

# **Behaviour Monitoring Sheet**

**Name:**

**Setting:**



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<b>Date</b>	<b>Time Began</b>	<b>Time Ended</b>	<b>Behaviour</b>	<b>Trigger [If any]</b>	<b>Action</b>	<b>Other comments</b>

*(Add setting letter head /LOGO as appropriate)*

Date:

Ref: *(child's name)*

D.O.B:

Address:

Invites to... *(amend to whoever is appropriate)*

Parents:

Health Visitor:

SALT:

T&W Learning Support Advisory Teacher:

Receiving School:

Dear

*(Name of setting)* would like to invite you to a transition meeting on *(Date and Time)*.

The meeting will be held at ..... address above.

*(Child's name)* has currently been receiving Early Years Inclusion Panel support. We would like to offer you the opportunity to discuss how this support has been used and how to best support the child as they move from one setting to another.

Yours sincerely,

## Transition Meeting Record

<b>Transition Meeting for:</b>	<b>D.O.B:</b>	<b>Date of meeting:</b>
<b>Current Setting:</b>	<b>Area/s of Need:</b>	
<b>Key Person:</b>	<b>Level of Need: [Highlight/ Circle as appropriate]</b> Record of Concern/SEND Support/ ECHNA/ EHCP	
	<b>Early Years Inclusion Support:</b>	
<b>Receiving School:</b> Class teacher: SENCo:	<b>Due to start next setting:</b>	

In attendance:

Apologies:

Notes:

Action Plan

<u>ACTIONS</u>	<u>By Who?</u>	<u>By When?</u>	<u>Done</u>