9. Early Years Practice

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9.1 Admissions

Policy statement

It is our intention to make our setting accessible to children and families from all sections of the local community. We aim to ensure that all sections of our community have access to the setting through open, fair and clearly communicated procedures.

Procedures

- We ensure that the existence of our setting is widely advertised in places accessible to all sections of the community.
- We ensure that information about our setting is accessible. Where necessary, we can provide translated written materials where language needs of families suggest this is required as well as access to an interpreter.
- We arrange our waiting list on a "first come first serve" basis. In addition our policy may take into account the following:
  - the vicinity of the home to the setting; and
  - siblings already attending the setting.
- Where financially viable, we keep a place vacant, in order to accommodate an emergency admission.

- Our setting and its practices operate in a way that encourages positive regard for and understanding of difference and ability - whether gender, family structure, class, background, religion, ethnicity or competence in spoken English.
- We support children and/or parents with disabilities to take as much part as is reasonably possible in activities within our setting.
- We monitor the needs and background of children joining our setting on the Registration Form, to ensure that no accidental or unintentional discrimination is taking place.
- We make our Promoting Inclusion, Equality and Valuing Diversity Policy widely known.
- We are flexible about attendance patterns to accommodate the needs of individual children and families, providing these do not disrupt the pattern of continuity in the setting that provides stability for all the children.

9.2 Fees and other payments

Policy statement

Payment for sessions

- Parents will be provided with a fee letter at the beginning of each term.
- Fees can be paid in full by cash, cheque or BACS during the first week of attendance of that term or on a monthly basis (a month in advance) as agreed with the manager. Should parents have any difficulties in paying their child's fees these should be discussed with the manager at the earliest opportunity and alternative methods should be explored.
- Late fees will incur an additional charge, unless alternative arrangements have been made with the manager.
- If a parent fails to meet the cost of their child's care after several requests to do so the matter will be referred to the chair of committee.
- If a child is eligible for government funding there will be no further fees to be paid except for those outlined below under 'Other Fees'.
- Fees are reviewed on an annual basis and parents will receive written notice of any change at the end of the previous term.
- The minimum required notice of termination of a child's attendance, on either side, is four weeks. If the full notice is not given, parents will be charged for the full four week period.
- We accept childcare vouchers from some accredited providers. Parents should see the administrator if they wish to pay in this way.
- Fees will not be refunded in case of absence due to illness or holidays, unless at the discretion of the committee.
- In the event of school closure due to circumstances beyond our control, e.g. snow, multiple staff illness, heating failure, fees will not be refunded. Should the closure last for more than five days, the committee will make a decision about refunds.

Local authority funding

- We do accept local authority funded hours, these are as follows:
    - Early Learning for 2 Year Olds - this is for families who receive additional support from the government and meet the criteria. (15hrs)
    - Two Year Working Parents funding (30hrs)
    - Universal funding for all 3 & 4 year olds (15hrs)
    - Extended hours for 3 & 4 year olds (Working parents only, an additional 15 hrs)

- Please note due to our opening times we can only offer up to 27 hours funding. All funding streams are subject to eligibility, which parents can check on https://www.beststartinlife.gov.uk/
- All other hours outside of government funding will be charged at our usual hourly rate.
- Any increase to sessions part way through a term, after 'headcount day', will incur charges for the additional session until the end of term.
- Should a child leave the setting prior to 'headcount day', parents will be required to pay for any sessions already attended and for the four week notice period as set out above under 'Payment for Sessions'.
- Should an eligible child join the preschool after 'headcount day', the parent will be charged for the cost of the sessions unless the criteria is met for a late headcount claim.

Other fees

- *Late Collection of a Child* – Unless previously agreed, parents will be charged a late collection fee of £5.00 for children collected more than 15 minutes after the end of a session.
- *Snack* – we charge a small fee for the provision of snack for the children. This fee will be payable termly, and will be added to the usual invoice which is given to parents before the start of each term.
- *Outings* - Some outings will, due to the venue or the nature of the trip, incur a cost. Throughout the year, fundraising activities provide the setting with additional funds to supplement such costs, and therefore enable the preschool to keep such charges to a minimum. Should parents experience any difficulties meeting this cost, the manager would be willing to discuss alternative arrangements.

9.3 The Role of the Key Person and Settling In

Policy statement

We believe that children settle best when they have a key person to relate to, who knows them and their parents well, and who can meet their individual needs. Research shows that a key person approach benefits the child, the parents, the staff and the setting by providing secure relationships in which children thrive, parents have confidence, staff are committed and the setting is a happy and dedicated place to attend or work in.

We want children to feel safe, stimulated and happy in the setting and to feel secure and comfortable with staff. We also want parents to have confidence in both their children's well-being and their role as active partners with the setting.

We aim to make the setting a welcoming place where children settle quickly and easily because consideration has been given to the individual needs and circumstances of children and their families.

The key person role is set out in the Safeguarding and Welfare Requirements of the Early Years Foundation Stage. Each child must have a key person. These procedures set out a model for developing a key person approach that promotes effective and positive relationships for children.

Procedures

- We allocate a key person before the child starts.
- The key person is responsible for:
- Offering unconditional regard for the child and being non-judgemental.
- Working with the parents to plan and deliver a personalised plan for the child's well-being, care and learning.
- Acting as the key contact for the parents.
- Developmental records and for sharing information on a regular basis with the child's parents to keep those records up-to-date, reflecting the full picture of the child in our setting and at home.
- Having links with other carers involved with the child and co-ordinating the sharing of appropriate information about the child's development with those carers.
- Encouraging positive relationships between children in their key group, spending time with them as a group each day.
- We promote the role of the key person as the child's primary carer in our setting, and as the basis for establishing relationships with other adults and children.

Settling-in

- Before a child starts to attend our setting, we use a variety of ways to provide his/her parents with information such as our prospectus and policies and meetings with individuals and groups.
- During the half-term before a child is enrolled, we provide opportunities for the child and his/her parents to visit the setting.
- We allocate a key person to each child and his/her family before she/he starts to attend; the key person welcomes and looks after the child and his/her parents at the child's first session and during the settling-in process.
- We use pre-start visits and the first session at which a child attends to explain and complete, with his/her parents, the child's registration records.
- When a child starts to attend, we explain the process of settling-in with his/her parents and jointly decide on the best way to help the child to settle into the setting.
- Younger children may take longer to settle in, as will children who have not previously spent time away from home.
- We judge a child to be settled when they have formed a relationship with their key person or another suitable adult; for example, the child looks for them when he/she arrives, goes to them for comfort and seems pleased to be with them. The child is also familiar with where things are and is pleased to see other children and participate in activities.
- When parents leave, we ask them to say goodbye to their child and explain that they will be coming back, and when.
- There will always be an adult be on hand to help settle any child that may be distressed. We will seek to settle the child and engage them in some of the activities within the setting. We will not leave a child to cry for a long period of time without discussion with the parents.
- We welcome parents to contact the setting as often as they like if they have any concern over the settling-in of their child.
- We reserve the right not to accept a child into the setting without a parent or carer if the child finds it distressing to be left. This is especially the case with very young children.
- Within the first four to six weeks of starting, we discuss and work with the child's parents to begin to create their child's record of achievement.

The progress check at age two

- The key person carries out the progress check at age two in accordance with any local procedures that are in place and referring to the supporting guidance to the EYFS *A Know How Guide: The EYFS progress check at age two.*
- The progress check aims to review the child's development and ensures that parents have a clear picture of their child's development.
- Within the progress check, the key person will note areas where the child is progressing well and identify areas where progress is less than expected.

- The progress check will describe the actions that will be taken by the setting to address any developmental concerns (including working with other professionals where appropriate) as agreed with the parent(s).
- The key person will plan activities to meet the child's needs within the setting and will support parents to understand the child's needs in order to enhance their development at home.

9.4 Arrivals and Departure

Routine parts of the day make the very best of routine opportunities to promote 'tuning-in' to the child emotionally and to create opportunities for learning. Arrivals and departures are key times in the day when children need support from their carer to make the transition smooth and happy; these times of day also pose a certain level of risk as parents and carers come and go. All staff at the Fledgelings Preschool are aware of the potential risks and take measures to minimise them.

Arrivals

- Whenever possible the Preschool Manager and the key person always greets young children. This ensures that young children are received into the setting by a familiar and trusted adult.
- The Preschool staff will mark the child's presence and time of arrival in the register.
- If a child who is expected fails to arrive, this is recorded on the child's personal file and the setting manager or administrator will contact the child's parents/carers to find out why the child is absent.
- The Preschool manager ensures that the child has been signed in by the parent/carer and there is a clear indication of who will be collecting the child, and at what time.
- The Preschool manager greets the parents/carers and takes time to hear information the parents/carers need to share.
- The key person receives the child physically and tunes in to how he or she is feeling and prepares to meet his/her needs.
- Always ensure that the parents/carers say goodbye to their child and say when they are coming back, such as 'at lunchtime, rather than just 'later'.
- If the member of staff receiving the child is not the key person, the member of staff will hand over the information shared by the parents/carers to the key person when they arrive.

Injuries noted on arrival

- If a child is noted to have visible injuries when they arrive at the setting procedure 6.1 is followed.

Changing shifts and handing over information

- When the key person leaves or goes on a break, they handover the care of the child to a 'back-up' key person.
- If someone other than the key person receives the child, he/she will share any information from the parent/carer and write a note for the key person. Confidential information should be shared with the setting manager to pass on.
- The key person shares information with the back-up key person; in this way they ensure that all information is passed on to the parent/carer in the key person's absence.

Departures

- Children are prepared for home, with clean faces, hands and clothes if required.

- The key person always aims to greet parents/carers when they arrive, ensuring that the person who has arrived to collect the child is named on the signing in/out form. They hand over the child personally and enter the time of departure in the register.
- Only authorised named persons aged over 18 years should normally collect children. Named authorised adults should be shared and recorded at registration. If a parent has no alternative, then this is agreed with the setting manager and a risk assessment completed and signed by the parent/carer. In all cases the setting manager will ask the parents/carers to ensure that in future alternative arrangements are made. If the parent/carer is under 18 years of age a risk assessment will be completed. The risk assessment should take account of factors such as age/vulnerability of child, journey travelled, arrangements upon leaving the setting to go home/elsewhere.
- If a child is being collected by an adult who is not the child's parents or legal guardian, a password will be required. If the password is not known, or incorrect, the Preschool Manager will keep the child within the setting until the child's parents are contacted and confirmation is received.
- Educators verbally exchange information with parents/carers.
- If someone other than the key person is with the child at the end of the day, the key person should pass general information to the other staff or write a note for the parents/carers. Confidential information should be shared with the setting manager to pass on.

Maintaining children's safety and security

Arrivals and departures pose a particular threat to the safety and security of the children, particularly when parents arrive at the same time or when in shared premises. To minimise the risk of a child leaving the building unnoticed, the setting manager conducts a risk assessment that identifies potential risks, and the measures put in place to minimise them, such as staff busy talking to individual parents/carers or doors left ajar.

9.5 Personal Care, Nappy changing and Sleep

Personal Care & Nappy changing - Policy statement

No child is excluded from participating in our provision who may, for any reason, not yet be toilet trained and who may still be wearing nappies or equivalent. We work with parents towards toilet training, unless there are medical or other developmental reasons why this may not be appropriate at the time.

We provide nappy changing facilities and exercise good hygiene practices in order to accommodate children who are not yet toilet trained. Children's privacy is maintained during nappy changing and toileting, whilst balanced with safeguarding considerations.

We see toilet training as a self-care skill that children have the opportunity to learn with the full support and non-judgemental concern of adults.

Procedures

- Changing areas are warm with a safe area to lay children and no bright lights shining down in their eyes.
- Gloves and aprons are put on before changing starts and the areas are prepared.
- All staff are familiar with the hygiene procedures and carry these out when changing nappies.
- Young children are changed within hearing or sight of other staff whilst maintaining their dignity and privacy at all times.
- Staff never turn their back on a child or leave them unattended whilst they are on the changing mat.
- In addition, key persons ensure that nappy changing is relaxed and a time to promote independence in young children.
- Young children are encouraged to take an interest in using the toilet; they may just want to sit on it and talk to a friend who is also using the toilet.
- They are encouraged to wash their hands and have soap and towels to hand.
- Wipes are used to clean the child.
- Key persons are gentle when changing; they avoid pulling faces and making negative comments about 'nappy contents'.
- We do not make inappropriate comments about children's genitals when changing their nappies.
- Sometimes a child may have a sore bottom. The staff will apply Sudocrem and this will be recorded in our nappy changing log. The parents will be phoned and notified. Prior consent to the use of Sudocrem is obtained during the registration process. This is relevant for children still in nappies, as well as for children who are toilet-trained.
- Older children access the toilet when they have the need to and are encouraged to be independent.

- Nappies and 'pull ups' are disposed of hygienically. Any soiled nappies are bagged and put in the bin. Any clothing that has been wet or soiled is bagged for the parent to take home.
- If young children are left in wet or soiled nappies/pull ups in the setting this may constitute neglect and will be a disciplinary matter. Settings have a 'duty of care' towards children's personal needs.

Sleep – policy statement

At the Fledgelings Preschool we recognise that sleep and rest times are key times in the day for being close and promoting security and are an important part of a child's unique and individual care. Whereas younger children might still need to sleep, older children do not usually need to. No child is made to sleep. Our sleep and rest procedures at the Fledgelings Preschool comply with the EYFS and the latest available safety guidance.

Partnership with families

As part of a child's settling in we will ask about their usual sleep and rest preferences and routines. It is explained to parents that as a setting, we do not have designated sleep areas and most children who attend the setting do not need a regular sleep during the day. However, if a child falls asleep during the day, the staff will follow a set procedure to ensure that the child is safe:

- The child will be picked up and laid on a firm mat with no soft furnishings, such as cushions
- A sleeping or resting child is always within sight and hearing of staff.
- Staff will regularly check on sleeping children and carry out an active check on their well-being.

Staff training

All staff at the Fledgelings Preschool complete a comprehensive induction which includes safer sleep training. All staff are required to read Lullaby Trust Guidance on Safer Sleep and the NHS advice on sudden infant death syndrome.

Further guidance

Safer sleep – help for early years providers
Sudden infant death syndrome (SIDS) NHS guidance
https://www.nhs.uk/baby/caring-for-a-newborn/sudden-infant-death-syndrome-sids/
Ofsted staff deployment guidance
Safer Sleep Awareness: A guide for Childminders, Foster Carers, Nannies and Nursery Settings (The Lullaby Trust)

9.5 Supporting children's behaviour

Policy statement

Positive behaviour is located within the context of the development of children's personal, social and emotional skills and well-being. A key person who understands children's needs, their levels of development, personal characteristics, and specific circumstances, supports this development. This ensures children's individual needs are understood and supported. Settling into a new environment is an emotional transition for young children especially as they learn to develop and master complex skills needed to communicate, negotiate and socialise with their peers. Skills such as turn taking and sharing often instigate minor conflicts between children as they struggle to deal with powerful emotions and feelings. During minor disputes, key persons help children to reflect and regulate their actions and, in most instances, children learn how to resolve minor disputes themselves. However, some incidents are influenced by factors, requiring a strategic approach, especially if the behaviour causes harm or distress to the child or others. These situations are managed by the SENCO/key person using a stepped approach which aims to resolve the issue and/or avoid the behaviour escalating and causing further harm.

This is an unsettling time for young children. Practitioners are alert to the emotional wellbeing of children who may be affected by the disruption to their normal routine. Where a child's behaviour gives cause for concern, practitioners take into consideration the many factors that may be affecting them. This is done in partnership with the child's parents/carers and the principles of this procedure are adhered to.

The preschool manager/SENCO will:

- ensure that all staff promote the values of compassion and kindness, hope and connection and belonging as embodied in the preschool's Christian ethos and motto - 'Be good and kind and love one another'.
- help staff to implement procedure *9.5 Supporting Children's Behaviour* in their every day practice.
- advise staff on how to address behaviour issues and how to access expert advice if needed.
- Identify and promote training on behaviour management for staff members, as and when required.

Rewards and sanctions

Children need consistent messages, clear boundaries and guidance to intrinsically manage their behaviour through self-reflection and control.

Rewards such as excessive praise and stickers may provide immediate results for the adult but do not teach a child how to act when a 'prize' is not being given or provide the skills to manage situations and emotions themselves. Instead, a child is taught to be 'compliant' and respond to meet adult expectations

to obtain a reward (or for fear of a sanction). If used the type of rewards and their functions must be carefully considered.

Children are never labelled, criticised, humiliated, punished, shouted at or isolated by removing them from the group to be left in 'time out' or on a 'naughty chair'. If a child is distressed or causing harm to others, it may help to remove them from the immediate environment where the incident occurred. They should be taken to a quiet area by their key person for up to 5 minutes to help them calm down. If appropriate, the key person can use this time to help the child reflect on what has happened. Physical punishment of any kind is never used or threatened which could adversely affect a child's well-being. If staff become aware that another person has given corporal punishment to a child, they follow *1.2.A Safeguarding Children, Young People and Vulnerable Adults* procedures. Physical intervention to safeguard a child/children must be carried out as per the guidance in this procedure.

Step 1

- The setting manager, SENCo and other relevant staff members are knowledgeable with, and apply the procedure *9.5 Supporting Children's Behaviour*.
- Unwanted behaviours are addressed using an agreed and consistently applied approach to deescalate situations
- Staff are knowledgeable and understand that behaviour is a form of communication to either avoid or seek out something.
- Behaviours that result in concern for the child and/or others must be discussed by the key person, SENCo/setting manager. During the meeting the key person must use their all-round knowledge of the child and family to share any known influencing factors such as a new baby in the family, child and/or parental illness, underlying additional needs to help place the child's behaviour into context.
- Appropriate adjustments to practice must be agreed within the setting. If relevant, a risk assessment should be carried out.
- If the adjustments are successful and the unwanted behaviour does not reoccur or cause concern then normal monitoring can resume.

Step 2

- If the behaviour remains a concern, then the key person and SENCo must liaise with the parents to try to discover possible reasons for the behaviour and to agree next steps. If relevant and appropriate the views of the child must be sought and considered to help identify a cause.
- If a cause for the behaviour is not known or only occurs whilst in the setting, then the setting manager/SENCo must suggest using a focused intervention approach to identifying a trigger for the behaviour such as the STAR Analysis approach, i.e. Setting, Triggers, Action & Results.
- If a trigger is identified, then the SENCo and key person must meet with the parents to plan support for the child through a graduated approach via SEN support**.**

- Aggressive behaviour by children towards other children will result in a staff member intervening immediately to stop the behaviour and prevent escalation using the agreed initial intervention approach. If the behaviour has been significant or may have a detrimental effect on the child, the parents of the victim of the behaviour and the parents of the perpetrator must be informed. If the setting has applied a physical intervention, they must follow the guidance as set out below. The designated person records it on the incident form and contact Ofsted if appropriate. A record of discussions is recorded and parents are asked to sign.
- Parents must also be asked to sign risk assessments where the risk assessment relates to managing the behaviour of a specific child.
- If relevant, actions for dealing with the behaviour at home are agreed with parents and incorporated into the action plan. Other staff are informed of the agreed interventions and help implement the actions. The plan must be monitored and reviewed regularly by the key person/SENCo until improvement is noticed.
- Incidents and intervention relating to unwanted/challenging behaviour by children must be clearly and appropriately logged on an incident form, and on a SEN Support - Action plan if needed.

Step 3

If despite applying initial intervention to deescalate situations and focused interventions to identify triggers the child's behaviour continues to occur and/or is of significant concern, the SENCo and key person invite the parents to a meeting to discuss external referral and next steps for supporting the child. It may be agreed that the setting request support from the Early Help team and/or other specialist services such as the Inclusion Partner. This will help address most developmental or welfare concerns. If the behaviour is part of other welfare concerns that include a concern that the child may be suffering or likely to suffer significant harm, safeguarding procedures outlined in *6.1 Safeguarding Children, Young People and Vulnerable Adults* must be followed immediately. Parental consent should only be sought if it poses no additional risk to the child.

- Advice provided by external agencies is incorporated in the SEN Support: Action Plan and regular multi-disciplinary meetings held to review the child's progress.
- If a review determines a statutory assessment may be needed then all relevant documentation must be collected in preparation for an Education Health and Care Assessment which may lead onto an Education, Health and Care Plan.

Use of physical intervention

Staff will already use different elements of physical contact with a child as part of their interaction in the setting especially when they are comforting a child or giving first aid. However, physical intervention to keep a child or other children safe is different and should only be applied in exceptional circumstances.

The EYFS states that it physical intervention from a staff member towards a child may be used for the purposes of "averting immediate danger of personal injury to any person (including the child) or to manage a child's behaviour if it is absolutely necessary".

Staff must do all they can to avoid using a physical intervention because this is not the preferred way of addressing children's behaviour.

To offer protection to children a range of appropriate graded interventions may be needed before physical intervention is applied. Most single incidents such as a child throwing a book on the floor or kicking a chair usually only require a verbal intervention from a member of staff. In other situations, an intervention can be applied through mechanical and environmental means such as locking doors and stair gates. This usually stops a situation escalating. However, there will be some situations where a child places themselves or others in danger which requires an immediate need for the use of both verbal and physical intervention. If a single or persistent incident requires a physical intervention such as physical handling from a staff member towards a child, then this is used intentionally to restrict a child's movement against their will. In most cases this can be applied through the use of the adult's body gently and safely blocking the child from access to danger or to prevent danger.

To physically intervene, a practitioner may use "reasonable force" to protect a child from injuring themselves or others. Legally a practitioner may also use reasonable force to prevent a child from damaging property. However, we would expect that in instances of damaging physical property a child would only experience a physical intervention if the broken property presented a risk or is high value.

If a situation arises which requires urgent physical hands-on intervention this is best applied by the staff who knows the child well such as their key person who is more able to calm them or use other known methods for defusing situations without physical intervention.

Physical handling

We use the principle of applying reasonable minimal force and handling in proportion to the situation. Staff use as little force as necessary to maintain safety. This intervention should only be used for as short a period as possible to keep the child safe and maintain well-being by aiming for:

- keeping the child's safety and well-being paramount
- a calm, gentle but firm approach and application of the intervention
- never restricting the child's ability to breathe

- side-by-side contact with the child
- no gap between theirs or the child's body
- keeping the adults back as straight as possible
- avoiding close head-to-head positioning to avoid injury to the child and themselves (head butting)
- only holding the child by their 'long' bones to avoid grasping at the child's joints where pain and damage are most likely to occur
- avoiding lifting the child unless necessary
- reassuring the child and talking about what has happened
- only applying a physical intervention on a disabled child if training or preferred method is provided from a reputable external source e.g. British Institute of Learning Disabilities www.bild.org.uk/

Risks

There are risks associated with any physical intervention and handling of a child. The younger and more vulnerable a child may be, the greater risk to the child of using physical intervention towards them. However, there are also risks to children associated with not intervening physically; for instance, if a practitioner did not take hold of a child by the wrist, they may have run into the path of a fast-moving car.

Before intervening physically to protect a child from immediate harm a practitioner needs to decision-make in a split second, considering the following factors. This is described as *dynamic risk assessment*.

- What is the immediate risk to this child if I do not intervene now?
- What might the risks be if I do intervene? If this was my child, what would I want someone looking after them to do in this situation?
- What is the minimum level of intervention that will be effective here? How can I do this as gently as possible for as short a time as possible and how am I going to manage myself to stay calm?

Recording

Any instance of physical intervention is fully recorded immediately and reported to the designated person as soon as possible on a safeguarding incident reporting form, ensuring that it is clearly stated when and how parents were informed. Parents are asked to sign a copy of the form which is then kept on the child's file. The designated person decides who will notify the parent and when, ensuring that the parent signs to say they have been notified. An individual risk assessment should be completed after any physical intervention with a child which considers the risks and likelihood of such behaviour re-occurring and how this will be managed. The risk assessment should be agreed and signed by parents.

Temporary suspension (fixed term)

Any decision to temporarily suspend a child must be carefully considered lawful, reasonable and fair. If despite following the stepped approach for behaviour it is necessary to temporarily suspend a child, for no more than five days, on the grounds of health and safety, the following steps are followed.

- The preschool manager provides a written request to suspend a child to the Chair of the Management Committee; the request must detail the reason why the child must be suspended and the length of time of the proposed suspension.
- If the Chair of the Management Committee approves, the parents must be invited to a meeting to discuss next steps. Parents are invited to bring a representative along. Notes must be taken at the meeting and shared later with the parents. The meeting must aim for a positive outcome for the child and not to suspend.
- If no acceptable alternative to suspension is found then the preschool manager must give both verbal and written notice of time related suspension to the parent, meanwhile the preschool manager must ensure that continued resolution is sought and suitable adjustments are in place for the child's return.

Suspension of a disabled child

We have a statutory duty not to discriminate against a child on the basis of a protected characteristic. This includes suspending a child based on a disability. Ignorance of the law or claiming it was unknown that a child was disabled is no defence. However, if the child's behaviour places themselves or others at risk then the setting must take actions to avoid further harm. Time limited suspension may be applied to keep the child and/or others safe whilst finding a solution. Suspension is only used if reasonable steps and planned adjustments are first used to help resolve the situation. Without this action, suspension of a child with SEND may constitute disability discrimination (Equality Act 2010). A decision to suspend a disabled child must be clearly evidenced, specific, measurable, achievable, realistic and targeted. Plans and intervention must be recorded on the child's file and SEN Support - Action plan. If little or no progress is made during the suspension period, the following steps are taken.

- The preschool manager sends a written/electronic invite to the parents, a local authority representative and any relevant external agencies to attend a review meeting. Each attendee must be made aware that the meeting is to avoid the situation escalating further and to find a positive solution.
- After the meeting the preschool manager continues to maintain weekly contact with the parents and local authority to seek a solution.
- Suitable arrangements offer the parent continued support and advice during the suspension. The preschool manager reviews the situation fortnightly and provides the Chair of the Management Committee with a monthly update.

Expulsion

In some exceptional circumstances a child may be expelled due to:

- a termination of their childcare and early education agreement as explained in *the Childcare and Early Education Terms and Conditions*
- if, despite applying a range of interventions (including reasonable adjustments), the setting has been unable to adequately meet the child's needs or cannot protect the health, safety and well-being of the child and/or others.

Challenging unwanted behaviour from adults in the setting

We do not tolerate behaviour demonstrating dislike, prejudice, discriminatory attitudes or action towards any individual/group. This includes those living outside the UK (xenophobia). This also applies to behaviour towards specific groups of people and individuals who are British Citizens residing in the UK.

Allegations of discriminatory remarks or behaviour made in the setting by any adult will be taken seriously. The perpetrator will be asked to stop the behaviour and failure to do so may result in the adult being asked to leave the premises. Where a parent makes discriminatory or prejudice remarks to staff at any time, or other persons while on the premises, this is recorded on the child's file and is reported to the setting manager. The procedure is explained and the parent is asked to comply while on the premises. An 'escalatory' approach will be taken with those who continue to exhibit this behaviour. The second stage comprises a letter to the parent requesting them to sign a written agreement not to make discriminatory remarks or behave in discriminatory or prejudice ways; the third stage may be considering withdrawing the child's place.

9.6 Identification, assessment and support for children with SEND

Policy statement

We have regard for the Special Educational Needs and Disability (SEND) (DfE and DoH 2015) which states that local authorities must ensure that all early years providers that they fund in the maintained, private, voluntary and independent sectors are aware of the requirement on them to meet the needs of children with SEN and disabilities. When securing funded early education for two, three- and four-year-olds local authorities should promote equality and inclusion for children with disabilities or SEN; this includes removing barriers that prevent access to early education and working with parents/carers to give each child support to fulfil their potential.

The term SEN support defines arrangements for identifying and supporting children with special educational needs and/or disabilities. We are required to offer appropriate support and intervention and to promote equality of opportunity for children that we care for. Children's SEND generally falls within the following four broad areas of need and support:

- communication and interaction
- cognition and learning
- social, emotional and mental health
- sensory and/or physical needs

Graduated approach

Initial identification and support (identifying special educational needs)

- Ongoing formative assessment forms part of a continuous process for observing, assessing, planning and reviewing children's progress.
- Children identified as having difficulty with one or more area of development should be given support by applying some simple strategies and resources.
- For most children application of some simple differentiation approaches will be enough to build confidence and help the child develop, SEN Support: Initial record of concern form can be used for this purpose.
- If despite applying differentiated strategies a child continues to struggle and is showing significantly more difficulty with learning than their peers or has a disability which requires specific adjustments, then the key person should raise a concern with the setting's SENCo/setting manager and the child's parents.

Observation and assessment of children's SEN

Where a child appears not to meet expected milestones, or their progress gives cause for concern, educators should consider all the information about the child's learning and development from within and beyond the setting.

- Information can be collated from formal checks such as the progress check at age two, observations from parents/carers and observation and assessment by the setting of the child's progress.
- When specialist advice has been sought externally, this is used to help determine whether a child has a special educational need (SEN).
- The child's key person and SENCo/Manager use this information to decide if the child has a special educational need.
- If the decision is that the child might have additional needs and the parents are not already aware of a concern, then the information is shared with them. Once parents/carers have been informed, they should be fully engaged in the process, contributing their insights to all future actions for their child.

Planning intervention

- Everyone involved with the child should be given an opportunity to share their views. Parents/carers should be encouraged to share their thoughts on the child's difficulties and be involved in the decision as to what will happen next.
- A first intervention option may be to carry on with applying adapted support and to review the child's progress at an agreed date. If the child's needs are more complex, then the decision maybe to go straight ahead and prepare a One Plan with detailed evidence-based interventions being applied straight away and simultaneously external referrals made.
- If relevant, then the child should be appropriately included in development of the action plan but only at a level which reflects their stage of comprehension.
- The One Plan described below, ensures that children that are identified, or suspected of having a SEN will receive the right level of support and encouragement with their learning and development as early as possible.

Involving the child

- The SEND Code of Practice supports the rights of children to be involved in decisions about their education.
- Inclusion of children with SEND helps build self-confidence and trust in others.
- Ascertaining children's views may not be easy, a range of strategies will be needed.

- Accurate assessment helps identify children's strengths and possible barriers to learning.
- The key person and setting manager/SENCo work in partnership with parents/carers and other agencies to involve the child wherever appropriate.
- Children are involved at appropriate stages of the assessment and to their level of ability.
- Establishing effective communication is essential for the child's involvement.
- The children's views are recorded on the One Plan, as appropriate.

SEN One Plan

- The One Plan should show what support is required to help achieve outcomes for the child and detail the frequency of these interventions and who will apply them and with what resources.
- A review date (at least termly) should be agreed with the parents/carers so that the child's progress can be reviewed against expected outcomes and next steps agreed.
- A copy of the plan is stored in the child's file so that any other member of staff or an inspector looking at the file will see how the child is progressing and what interventions have been or are being applied.
- If a child requires specific medical interventions during their time in the setting, 04.2a Health care plan form should also be completed and integrated into the general plans to ensure the child's medical needs are known and safely met.
- The action plan should provide an accessible summary of the child's needs, which can be used if further assessment is required including a statutory Education Health and Care (EHC) Assessment, and development of an EHC plan.

Drawing up a SEN One Plan

- If external agencies are already involved at this stage, then they should also be invited to help decide on what appropriate interventions are needed to help meet outcomes for the child. The SENCo/setting manager should take the lead in coordinating further actions including preparation of the action plan and setting short-term targets.
- Where there are significant emerging concerns (or an identified special educational need or disability) targeted action plans are formulated that relate to a clear set of expected outcomes and stretching targets.
- The One Plan highlights areas in which a child is progressing well; areas in which some additional support might be needed and any areas where there is a concern that a child may have a

developmental delay (which may indicate a special educational need or disability). It describes the activities and strategies the provider intends to adopt to address any issues or concerns.

- Planned intervention should be based on the best possible evidence and have the required impact on progress with longer-term goals covering all aspects of learning and development and shorter-term targets meeting goals.
- The plan should focus on the needs of the child, the true characteristics, preferences, and aspirations of the child and involvement of the parents with a clear set of targets and expected outcomes for the child. Effective planning at this stage should help parents and children express their needs, wishes, and goals:
  - focus on the child as an individual and not their SEN label
  - be easy for children to understand and use clear ordinary language and images, rather than professional jargon
  - highlight the child strengths and capacities
  - enable the child, and those who know them best, to say what they have done, what they are interested in and what outcomes they are seeking in the future
  - tailor support to the needs of the individual
  - organise assessments to minimise demands on families
  - bring together relevant professionals to discuss and agree together the overall approach
- If the child fails to make the expected progress and multi-agency support is sought, then it is at this point that Early Help/TAF assessment should be considered.

Record keeping

If a child has or is suspected of having a SEN, we will record on the One Plan the following:

- the initial cause for concern and the source of this information, (the progress check at age two and/or outcomes of previous interventions). SEN support: Initial record of concern form can also be used for this purpose drawing information from other sources
- the initial discussion with parents/carers raising the possibility of the child's SEN
- the views of the parents/carers and other relevant persons including, wherever possible, the child's voice
- the procedures followed regarding the Code of Practice to meet the child's SEND e.g. SEN One Plan, referrals to external agencies and for statutory assessment
- evidence of the child's progress and any identified barriers to learning

- advice from other relevant professionals; and all subsequent meetings with parents and other persons and any subsequent referrals

Records may include

- observation and monitoring sheets
- expressions of concern
- risk assessments
- access audits
- health care plans (including guidelines for administering medication)
- SEN action plans
- meetings with parents/carers and other agencies
- additional information from and to outside agencies
- agreements with parents/carers
- guidelines for the use of children's individual equipment; Early help CAF referrals
- referral to the local authority identifying a child's special educational needs and request for statutory Education, Health, Care (EHC) needs assessment; and a copy of an EHC plan

Seeking additional funding/enhanced/top up

If the child's needs cannot be met from within the setting's core funding, then it will be at this point that the evidence collated will be used to apply for top up/enhanced funding from the local authority's SENIF fund. If a new or existing child is disabled, then the setting should check if the family is in receipt or have applied for Disability Living Allowance. If so, the setting will be able to apply to their local authority for the local Disability Access Fund.

Statutory education, health and care (EHC) assessment and plan

Statutory assessment

- If a child has not made progress, then the next steps may be for the child to undergo an Education, Health and Care Assessment.
- If a child is under compulsory school age, the local authority will conduct an EHC needs assessment if they consider that the child's needs cannot be met within the resources normally available to the early years setting.

- Children aged under age two are eligible where an assessment has indicated that the child is likely to have SEN which requires an EHC plan when they reach compulsory school age.
- When a child's needs appear to be sufficiently complex, or the evidence suggest specialist intervention then the local authority is likely to conclude that an EHC plan is necessary
- The local authority should fully involve the parent and must seek advice from the setting in making decisions about undertaking an EHC assessment and preparing an EHC plan.
- Settings should prepare by collating information about the child's SEND including:
    - documentation on the child's progress in the setting
    - interventions and support provided to date
    - evidence of external agency assessment, support and recommendations
    - parent/carer views and wishes (and where appropriate those of the child)

      The information will then be submitted to the local authority to allow them to accurately assess the child in the context of the support already given.
- The local authority must inform the child's parents of their decision within six weeks of receiving a request for an assessment and give its reasons for their decision. If the local authority decides to conduct an assessment, it must ensure the child's parents are fully included right from the beginning and are invited to contribute their views. If the local authority subsequently decides not to conduct an assessment it must then inform the parents of their right to appeal that decision, of the requirement for them to consider mediation should they wish to appeal.
- If the local authority decides that a statutory EHC plan is not necessary, it must notify the parents/carers and inform the provider, giving the reasons for the decision. This notification must take place within 16 weeks of the initial request or of the child having otherwise been brought to the local authority's attention.
- If the decision following an assessment is to compile an EHC plan the local authority should consult collaboratively with the parents/carers in the preparation of the plan ensuring that their views and their child's preferences are considered and that plans describe positively what the child can do and has achieved to date.
- Plans are evidenced based and focus on short term outcomes and long-term aspirations for the child including family and community support. Parents/carers have the right to request a particular provision for their child to be named within their EHC plan.
- If an early years setting is named, the local authority must fund this provision. They cannot force a setting to take a child and can only name the provision in the EHC if the setting agrees.

- Local authorities should consider reviewing an EHC plan for a child under age five at least every three to six months. Such reviews would complement the duty to carry out a review at least annually but may be streamlined and not necessarily require the attendance of the full range of professionals, depending on the needs of the child. The child's parents/carers must be fully consulted on any proposed changes to the EHC plan and made aware of their right to appeal to the Tribunal.

External intervention and support

Where external agency intervention has been identified to help support a child with SEND then this intervention should be recommended in writing by a suitably reliable source such as a speech and language therapist, paediatrician or educational psychologist.

Further guidance

SEND Code of Practice: 0 to 25 years (DfE and DoH 2015)

Ready, Steady, SENCO (Alliance Publication)

This policy was reviewed by	The Fledgelings Preschool
On	October 2026
Date to be reviewed	October 2027
Name of signatory	Ann Goodall
Role of signatory	Committee Member