SEN Planning Tool for Early Years
Introduction

This planning tool details the different stages of the graduated approach, as described in the SEND Code of Practice 2014 and the expectations on early year’s providers.

The three levels of intervention are:

- **Quality First Teaching** for all children
- **SEN Support** for children who are identified as needing input in addition to their access to Quality First Teaching. This MAY include increased support in the setting as well as input/advice from external agencies. ‘Short note’ format could be used to record discussions with professionals and parents. ‘My Story’ may be introduced to parents to record information about their child to prevent the need to retell their story.
- **Education, Health and Care Plan (EHCP)** for children who are identified as needing increased support in the setting as well as input/advice from external agencies. For a small number of children, specialist provision may be appropriate to meet their complex and enduring needs.

For each level of intervention, the document provides information regarding:

- Pupil characteristics
- Required level of practitioner knowledge and understanding
- Specific implications related to provision for the four areas of need:
  - Cognition and Learning
  - Social, Emotional and Mental Health
  - Communication and Interaction
  - Sensory / Physical

The document is designed to be a point of reference for all Early Years providers and other professionals to:

- Provide a menu of interventions for each area of need, which supports the development of a personalised programme for individual children (SEN Support Plan with the addition of provision maps where appropriate).
- Ensure they are making appropriate provision by matching what a child is receiving against the benchmark provided by the document
- Be clear about what can reasonably be expected to be provided at each level
Quality First Teaching

Child Characteristics

- All children require good QFT. This alone may be all that is required for children operating within the broadly normal range of abilities but who may be making slower progress.
- Children may experience some difficulties accessing playing and learning opportunities or communicating and interacting with others.
- Focused observations in a variety of contexts indicate that the child requires some differentiation of activities.

Practitioner Knowledge and Understanding

All practitioners are responsible for meeting the needs of **all** children.

**All practitioners should:**

- Have a good working knowledge of child development
- Have undertaken Early Years Foundation Stage (EYFS) training
- Have a working knowledge of the Equality Act 2010 and SEND Code of Practice 2014
- Have a good understanding of EYFS and be able to apply this knowledge
- Use the Early Years Outcomes as an aid to help them understand the outcomes they should be working to
- Ensure that all children are included and not disadvantaged
- Be aware of welcoming parent/carers and working in partnership with parents/carers and other professionals
- Be mindful that parents/carers know their children best and listen to any concerns they express
- Be able to use observational skills effectively to inform planning
- Have knowledge of Early Support materials and information available through the Local Offer
- Know that what children ‘can do’ is the starting point for learning
- Be aware of the statutory progress check at two years and the integrated child progress review carried out by the child’s Health Visitor
“All early years providers should take steps to ensure that children with medical conditions get the support required to meet those needs. This is set out in the EYFS framework.” SEND Code of Practice (2014) Page 81 5.11

<table>
<thead>
<tr>
<th>Unique Child</th>
<th>Positive Relationships</th>
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<tr>
<td>• Children are valued as unique individuals and inclusive practice is ensured.</td>
<td>• Providers work in partnership with parents and carers to support children’s needs.</td>
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<td>• All practitioners should be alert to the early signs of needs that could</td>
<td>• Children’s views should be considered and valued.</td>
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<td>lead to later difficulties and be able to respond quickly and appropriately.</td>
<td>• There are positive trusting relationships between adults and children.</td>
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<td>• Inclusive practice ensures accessibility for children with SEND and values</td>
<td>• Each child has a key person.</td>
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<td>and respects diversity.</td>
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<td>• All providers must have and implement an effective SEND policy about</td>
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<td>ensuring equality of opportunity for children with learning difficulties</td>
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<td>and disabilities.</td>
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<th>Enabling Environment</th>
<th>Learning &amp; Development</th>
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<tr>
<td>• All planning starts with observing children in order to understand and</td>
<td>• Practitioners ensure that children’s learning and development occurs as an outcome</td>
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<td>consider their current interests, development and learning.</td>
<td>of their individual interest and ability and that planning for learning and development</td>
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<tr>
<td>• Accurate assessment of children’s learning to highlight children’s</td>
<td>takes account of these.</td>
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<td>strengths and areas for development.</td>
<td>• Ensure systems are in place to monitor the progress of children towards early learning</td>
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<td>• Environments should be reviewed regularly in light of children’s interests</td>
<td>goals.</td>
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<td>and developmental needs.</td>
<td>• Plan appropriate play and learning, based on the child’s interests and needs and</td>
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<td>• Provide communication friendly spaces</td>
<td>identify any concerns about the child’s development.</td>
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<td>• Within the environment ensure children’s learning styles are</td>
<td>• Adopt a systematic and routine approach to developing observations.</td>
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<td>considered.</td>
<td>• Use assessment to plan next steps in a child’s developmental process.</td>
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<td>• Make reasonable adjustments to ensure access to the environment</td>
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<th>Support &amp; Resources</th>
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<tr>
<td>All children’s individual development needs can be addressed with</td>
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<td>appropriately differentiated resources and learning opportunities/experiences.</td>
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Cognition & Learning

Practitioners should:

- Be aware of the need to provide regular, frequent and appropriate opportunities for play and learning, in a range of forms and contexts.
- Provide opportunities for the development of imaginative and role play skills.
- Model effective play and problem solving skills. This should include supporting children in their problem solving and reasoning skills, giving children opportunities to explore, enjoy, learn, practice and talk about their developing understanding.
- Give children the opportunity to practice and extend their skills in all areas and to gain confidence and competence in their use.
- Ensure a consistent and appropriate level of language is used to support the developmental stage of the child.
- Signpost parents to appropriate materials.
- Provide a range of visual and practical play materials to support problem solving and reasoning e.g. providing a variety of play opportunities to encourage children to seek patterns, make connections and recognise relationships.
- Demonstrate a consistent use of language, commenting and using appropriate age/stage language with some picture / symbol support. This could include visual prompts such as whole day overview / visual timetable giving an overview for all children.
Social, Emotional and Mental Development

Children are encouraged to feel secure and confident to develop their own learning without fear of criticism.

Practitioners should:

- Praise all children regularly and show appreciation of children’s efforts and accomplishments.
- Have a working knowledge of Social Emotional Aspects of Development (SEAD) materials.
- Show warmth and respect and model good social skills.
- Support social interactions to enable all children to participate at an appropriate level.
- Provide a clear structure to the day and the environment, with the support of pictures and symbols and a visual timetable, where appropriate, to ensure smooth transitions between activities.
- Work collaboratively to create an environment which supports the social and emotional well-being of children.
- Make focused observations to inform future planning to meet individual needs.
- Provide a range of resources to support social, emotional and mental health.
- Work together with parents to facilitate a consistent and accurate two way sharing of information to support overall well-being.
- Ensure a range of approaches are used to promote understanding of emotions and feelings.
- Encourage children to think about issues from the viewpoint of others and actively involve them in learning the skills to resolve personal conflicts.
• Provide a quiet, calm area that children can access as they require.
• Differentiate approaches to meet the needs of individual children.
• Ensure children are involved in the decision making process and have opportunities to make informed choices.
• Provide a planned programme of personal, social and emotional development.
• Ensure good liaison between Early Years provider/nursery/child-minder and home.

Communication & Interaction

Effective Speech, Language and Communication development should offer children opportunities to experience a rich language environment. A place that celebrates their vocalisations/gestures develops their confidence and skills in expressing themselves; and nurtures opportunities to speak and listen in a range of situations.

Early Years settings should include visual and practical supports to aid understanding e.g. picture cues, visual supports and strategies, colour coding, designated communication friendly spaces and simple routines.

Practitioners should:

• Ensure there are opportunities for communication and play in a range of forms and contexts.
• Model effective communication skills including commenting, speaking, listening and the use of non-verbal communication.
• Consider the over use of questions for the youngest learners and be mindful of the time needed for children to respond.
• Encourage children to represent their likes, dislikes, interests and ideas in a range of ways, as appropriate, including verbal and non-verbal communication, modelling and play.
• Encourage social interaction at every opportunity.
• Offer a rich repertoire of songs and rhymes (age and stage appropriate), supplementing with sign, where required.
**Sensory and Physical**

Physical development involves providing opportunities for young children to be active, interactive and to develop their co-ordination, control and movement. Children must also be helped to understand the importance of physical activity, and to make healthy choices.

Practitioners should:

- Plan for ALL children to be physically active on a daily basis.
- Be aware that some children need more time, more encouragement, more support to complete tasks.
- Be aware that although independently mobile, some children may be unsteady on their feet and need time and space to move around.
- Recognise that there may be a delay in fine/gross motor skills development and should plan accordingly.

Sensory includes visual impairments, hearing impairments or a combination of both. Some children may have additional and/or complex needs.

**Visual Impairment** - Some children may have visual difficulties which are correctable with prescription or occlusion methods. Children with a visual impairment who have been diagnosed by a Consultant Ophthalmologist, or an Orthoptist would be referred to the SEND and Inclusion - Sensory/Physical Team.

A Qualified Teacher of the Visually Impaired (QTVI) will complete a functional vision assessment, provide advice, guidance or strategies, and allocate appropriate specialist levels of support from the Sensory Service.

Practitioners working collaboratively should:
• Be aware that all visual impairments have different implications for the child e.g. there may be difficulties with near, distance and/or field of vision and could affect their self-confidence and impact on many areas of development.

• Follow the guidance available from the SEND and Inclusion - Sensory/Physical Team

• Consideration of environmental factors such as: good lighting, clutter free environment and static furniture.

• Access to learning such as maximizing opportunities for the children to examine objects in demonstrations, ensuring good contrast between foreground and background in visually presented materials.

• Address the child by name to gain their attention

• Describe environment, objects and missed visual clues such as facial expressions and gestures.

Careful monitoring of the child’s progress and a written record of any difficulties that have arisen and the strategies used to minimise difficulties. Seek advice from the SEND and Inclusion - Sensory/Physical Team if necessary.

**Hearing Impairment - children with a recurring, mild/moderate conductive hearing loss, or a unilateral loss.** This may be associated with middle ear infections, glue ear or temporary perforated eardrums. These children will have been diagnosed by an ENT consultant or audiologist and a referral will have been made to the SEND and Inclusion Sensory/Physical Team. A Teacher of the Hearing Impaired will complete a functional hearing test, provide advice, guidance and strategies to staff.

**Practitioners should be aware** of the possible implications of the child’s hearing impairment upon their language development and confidence and follow the advice provided by the SEND and Inclusion - Sensory/Physical Team. Staff should also adopt the recommended strategies to ensure:

• the child is in the best position to see and hear when spoken to
  • There are frequent 1:1, paired or small group activities to facilitate language development in good listening conditions.
  • Modelling of effective communication skills, ensuring that the child is fully included, by establishing eye contact before speaking to the child and repeating other children’s comments when necessary.
  • Visual cues, facial expressions, gestures, contextual clues are used routinely to assist understanding.
  • Monitoring of the child’s language development, keeping a written record of examples of their spoken language.
  • Seek advice from the SEND and Inclusion - Sensory/Physical Team if you feel that the child’s hearing loss is impacting upon their language and communication development
**SEN Support - in addition to Quality First Teaching**

**Child Characteristics**
Children experience difficulties accessing playing and learning opportunities and/or communicating and interacting with others. Focused observations in a variety of contexts indicate that the child requires increased levels of differentiation and planning. This must be reviewed regularly to support the changing needs of the child, which may include increasing levels of support from external agencies.

**Practitioner Knowledge & Understanding**
In addition to Practitioner Knowledge & Understanding at Quality First Teaching, practitioners may require specialist additional advice / support or training in particular areas of need, e.g. autism, motor difficulties, medical care and individual health care plans.

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<td>- Key person/SENCo or other appropriate practitioner consults with relevant staff, parents and carers.</td>
<td>- Look at children’s involvement in their learning as well as the nature and quality of adult interaction in children’s learning.</td>
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<tr>
<td>- Child’s progress should be reviewed against Early Years outcomes and results used to plan for the next steps in a child’s development.</td>
<td>- Procedures in place for <strong>person centered reviews</strong></td>
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<tr>
<td>- Outside agencies may become involved in planning the development of provision depending upon the child’s needs.</td>
<td>- Procedures in place to document communications/actions taken (Chronologies or ‘short notes’.)</td>
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<td>- Increased communication with parents and carers.</td>
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### Enabling Environment

- Increase level of observation, planning and review.
- Begin to plan for enhanced personalised learning by knowing about each child.
- Increased communication across settings/agencies.
- Some adjustments to increase access to play and learning opportunities. Following specific programmes developed by specialist outside agencies.
- Make reasonable adjustments which may include making physical alterations/adaptations to the building.

### Learning & Development

- Increased access to small group or individual support from staff/resources within the setting.
- Further differentiation based on focused observation and assessment, including advice from outside agencies.
- The development of an SEN Support Plan and Provision Maps where applicable. These should include details of targeted support/action taken.

### Support and Resources

Children may require customised/specialised resources to improve access to play and learning. The resources may include extra practitioner time. The intervention/support will require some clear differentiation and its effectiveness monitored appropriately.

Practitioners should consult with their SENCo but be mindful that they have a responsibility to support all children. Practitioners should reflect on current provision and consider how to promote children’s access through changes or adaptations in order to overcome barriers to learning. Careful consideration must be given to transition arrangements – area to area, activity to activity, and from one setting to another.

In addition early years providers will need to consider; providing different learning materials or special equipment; some individual or group support for some children and staff development and training.

### Durham Portage Service

Durham Portage Service is a specialist service providing home based interventions for preschool children (0-3 years) who have significant additional needs in two or more areas of development. The portage service delivers developmental programmes in the family home alongside consultation and advice from the child’s health visitor and appropriate agencies.
parents/carers. The Portage Service is an integral part of networked arrangements for young children with significant and complex disabilities. As the needs of very young children vary over time, the Portage Service can respond effectively and efficiently by working in an integrated way to respond to the early identification of need through the provision of flexible, co-ordinated intervention programmes.

The Portage Service runs Baby groups and Transition groups and manages and supports the transition to the first education placement for the child. Portage workers provide opportunities for practitioners in early year’s settings to become familiar with children who will be transitioning to their setting, familiarising staff with developmental programmes that the children are following.

See Appendix 1 – Support Services for information regarding services available to support children in their early years.
Cognition & Learning

The provision should offer opportunities for access to differentiated learning materials and/or specialised or adapted equipment. Consideration should be given to group size and composition to facilitate positive participation and effective learning.

Practitioners should offer focused smaller group activities planned to promote:

- Imaginative and creative play through structured play activities.
- Reasoning and problem solving skills through activities which are broken into small steps, modelled and scaffolded.
- A variety of practical materials and experiences to promote learning in the areas of problem solving, reasoning and concept development.
- Emphasis on the increasing differentiation of materials and presentation of play opportunities
- The investigation of objects and materials to encourage understanding of similarities, differences, pattern and change.
- Access to additional and flexible arrangements in a small group and/or individual basis to support individual outcomes
- Increased opportunities for repetition and reinforcement of new learning so that skills can be generalized and transferred

At SEN support there will be systematic monitoring and observation of the child’s progress in terms of the effectiveness of the interventions. Assess, plan, do, review will focus on:

- Progress made by the child
- Effectiveness of the strategies used
- Updated information or advice received by parents or professionals. My Story to be updated where appropriate.
- Focused monitoring and review of the child’s progress and achievement with the child’s parents and external agencies
- Increased opportunities for repetition and reinforcement of new learning so that skills can be consolidated.

Health Care Professionals, Portage Service, Specialist teachers or the Educational Psychologist may be involved in providing consultation and advice on strategies or teaching methods. This may extend to observing and assessing the child to inform provision and monitor
“Children with more complex developmental and sensory needs may be identified at birth.” SEND Code of Practice (2014) Page 81 5.14

Emotional, Social and Mental Development

Children have access to a planned programme of personal, social and emotional development to meet their individual needs, e.g. Social and Emotional Aspects of Development (SEAD) materials. Practitioners may involve external support services for advice and guidance

Practitioners should:

• Work closely with parents to ensure effective communication and shared decision making
• Implement interventions that are additional to or different from those already provided and have planned outcomes to target specific areas of need
• Seek additional advice from appropriate agencies e.g. One Point, First Contact or Health visitor, where broader issues experienced by the family are impacting upon the child’s wellbeing.
• Introduce small group work to promote positive interactions.
• Make focused observations to inform future planning to meet individual need
• Use age and stage appropriate behaviour management strategies, e.g. distraction techniques, close supervision for impulsive children, withdrawal to a quiet, calm area. It is essential to have an understanding of the ‘causal factors’ contributing to the changes in behaviour.
• Practitioners to make reference to support materials e.g. Inclusion Development Programme
• Support for children who require a more flexible approach to routines.
• Continue to plan and implement differentiated activities to meet individual needs monitored by SENCo and senior management.
• Implement advice and individualized programmes to meet the emotional, social and mental development and wellbeing of the child
• Evaluate and monitor individual plans, programmes and strategies and amend as appropriate in consultation with the child, parents/carers, SENCo and other professionals involved.
• Targeted purposeful support from a consistent adult (key person).

SEN Support plans will be developed in consultation with the child, the parents and carers, SENCo and key personnel through informed observations and discussions. Head teacher, qualified teacher, EYFS lead or setting manager should work with the SENCo to ensure a consistent approach is used to support children.

“Persistent disruptive or withdrawn behaviours do not necessarily mean that a child or young person has SEN. Where there are concerns, there should be an assessment to determine whether there are any causal factors such as undiagnosed learning difficulties, difficulties with communication or mental health
issues. If it is thought housing, family or other domestic circumstances may be contributing to the presenting behaviour a multi-agency approach, supported by the use of approaches such as the Early Help Assessment, may be appropriate. In all cases, early identification and intervention can significantly reduce the use of more costly intervention at a later stage.”

Communication & Interaction

Provision should offer structure, routine and predictability with specific consideration to preparation for transition between activities and changes to the routines of the day.

Practitioners should:

- Keep parents informed of strategies used in the setting and offer advice for home learning
- Encourage a clear link and overlap between home and setting approaches/programmes
- Implement an additional assessment tool which outlines the areas of speech, language and communication development in more detail to identify the specific areas of need. Use the Every Child A Talker (ECaT) Monitoring Tool in addition to the usual monitoring and assessment schemes.
- Have planned outcomes to target specific areas of need
- Have a consistent approach to using the appropriate level of language to meet the child’s needs
- Review the impact of time limited interventions

Focused smaller group and individual activities to promote:

- Speech, language and communication development with specific materials/programmes as advised by an appropriate specialist. This may include the use of augmented communication systems such as PECs, Makaton.
- Imaginative and creative play through structured play activities
- Social and emotional awareness and children’s wellbeing
- Support self-help skills and independence

Consideration must be given to group size and composition to facilitate positive participation.
“Identifying and assessing SEN for young people whose first language is not English requires particular care. Early Years practitioners should look carefully at all aspects of child’s learning and development to establish whether any delay is related to learning English as an additional language or if it arises from SEN or disability. Difficulties related solely to learning English as an additional language are not SEN.”

Sensory/Physical

Early years providers must work collaboratively with parents/carers and other professionals involved (i.e. Physiotherapist, Occupational Therapist, Advisory Teachers, Educational Psychologist) making reasonable adjustments to support a child with SEND.

“They must make reasonable adjustments, including the provision of auxiliary aids and services, to ensure that disabled children and young people are not at a substantial disadvantage compared with their peers. This duty is anticipatory – it requires thought to be given in advance to what disabled children and young people might require and what adjustments might need to be made to prevent that disadvantage.”

Practitioners should offer:

- Targeted support for some activities e.g. help with coat, shoes, getting on/off equipment, managing clothes at the toilet.
- Planned outcomes to target specific areas of need
- Additional support to develop gross motor skills e.g. using a walking aid/rollator, positioning support in specialised equipment or following a programme to develop motor skills as recommended by an external specialist
- Alternative arrangements for some activities e.g. sit on chair rather than the floor at carpet time and in assembly.

If a child is not known to other professionals in the first instance seek advice from the child’s Health Visitor.

Refer to Early Years support materials available at [http://ncb.org.uk/early-support/resources](http://ncb.org.uk/early-support/resources)

Visual Impairment - children with moderate visual impairment e.g. children with reduced distance vision

- Discuss visual concerns with parents and suggest they seek clarification through an Optician/General Practitioner.
- A referral form to be completed and returned to: SEND and Inclusion - Sensory/Physical Team with parental consent for involvement, if this has not already been done prior to nursery entry.
- Attend INSET provided by the Qualified Teacher of the Visually Impaired (QTVI) from the SEND and Inclusion - Sensory/Physical Team.
- SEN Support Plan, Outcomes, interventions and provision map written collaboratively with the QTVI and reviewed on an agreed timescale.
• All areas of the curriculum should be accessible with appropriate adaptations or modification.
• Ensure the use of any necessary specialist equipment is implemented.

Visual Impairment (continued) - child with moderate to severe visual impairment

• Staff time allocated for regular monitoring and support meeting with QTVI from the SEND and Inclusion - Sensory/Physical Team
• Adaptations to the environment and teaching materials as advised by the QTVI
• Individual/small group teaching of specific skills as modelled by the QTVI, and in collaboration with SEND and Inclusion – Sensory/Physical Team.
• Support to access activities not easily accessible, e.g. climbing frames etc.
• High levels of adult support throughout the nursery session to ensure access and understanding throughout the nursery session.

Hearing Impairment - children with mild/moderate permanent hearing impairment with hearing aids. These children will have been diagnosed by an ENT consultant or audiologist and a referral will have been made to the SEND and Inclusion Sensory/Physical Team. A Teacher of the Hearing Impaired will complete a functional hearing test, provide advice, guidance and strategies to staff.

Practitioners should be aware of the possible implications of the child’s hearing impairment upon their listening, language development and communication and follow the advice provided by the SEND and Inclusion - Sensory/Physical Team. Staff should also adopt the recommended strategies to ensure:

• The child is in the best position to see and hear when spoken to
• There are frequent 1:1, paired or small group activities to facilitate language development in good listening conditions.
• Modelling of effective communication skills, ensuring that the child is fully included, by establishing eye contact before speaking to the child and repeating other children’s comments when necessary.
• Visual cues, facial expressions, gestures and contextual clues are used routinely to assist understanding
• Monitoring of the child’s language development, keeping a written record of examples of their spoken language.
• Attend INSET provided by the SEND and Inclusion - Sensory/Physical Team.
• Input from Sensory/ Physical Team staff into the child’s SEN Support Plan, outcomes, interventions and provision map which will be reviewed on an agreed time scale.
• Named member of staff to take responsibility to check hearing equipment is working (TOD will give training on this).

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- Monitoring of the child’s language development, keeping a written record of examples of their spoken language.
- Attend INSET provided by the SEND and Inclusion - Sensory/Physical Team.
- Input from Sensory/Physical Team staff into the child’s SEN Support Plan, outcomes, interventions and provision which will be reviewed on an agreed time scale.
- Named member of staff to take responsibility to check hearing equipment is working (TOD will give training on this).

**In addition**

- **Staff within the setting**
  - Time allocated for regular monitoring, shadowing and support meetings with the Teacher of the Deaf (TOD) or other members of the Sensory/Physical Team e.g. Communication Support Worker or Specialist Speech and Language Therapist.
  - High levels of adult support to ensure access and understanding throughout the nursery session e.g. to comment on play and provide language and new vocabulary which prepares the child for an activity or an event.
  - Additional training on the use and maintenance of radio aids.
  - Additional training on signed communication to support understanding of speech.

- **Sensory/Physical Team Staff**
  - Regular input and advice given by Teacher of the Deaf on adaptations to the environment and teaching materials.
Education, Health and Care Plan - in addition to SEN Support and Quality First Teaching

Child Characteristics

Children experience significant, enduring, and/or complex difficulties accessing playing and learning opportunities. Focused observations in a variety of contexts indicate that the child requires significant levels of differentiation and planning, often to an individualised level.

Practitioner Knowledge & Understanding
In addition to practitioner knowledge and understanding at Quality First Teaching and SEN Support, practitioners will:

- Require specialist training, for example moving and handling, sensory training and guidance for supporting Autistic Spectrum Disorder.
- Need to be aware of the provision and support required, as described in the child’s Education, Health and Care Plan (EHCP) and be able to clearly monitor progress made.
- Collaboration between education, health and social care to provide the services required by the child – multi-agency approach

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<td>- A clear understanding of the child’s needs, how they best like to learn and how they can be supported to engage and learn alongside their peers.</td>
<td>- Embedded procedures in place for person centred reviews which are consistently used during review meetings.</td>
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<tr>
<td>- Outside agencies will be involved in planning the development of elements of provision.</td>
<td>- A range of methods developed to ensure the child’s views are taken into consideration.</td>
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<td>- There will be active planning in place that should change and adapt in line with the child’s developmental/emotional needs.</td>
<td>- Personalised learning for the majority of the EYFS curriculum.</td>
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<td>- Effective transition arrangements will support well-being and place the child and the family at the centre of this process.</td>
<td>- Assess, plan, do, review cycle embedded to complement the SEN support plan as well as the EHC Plan.</td>
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Support & Resources
Children will require additional support from the Early Years provider. In addition providers will need to consider; providing different learning materials or special equipment; some individual or group support for some children and staff development and training.

**Cognition & Learning**

The early year’s provision should offer opportunities for access to differentiated learning materials and/or specialised or adapted equipment. Consideration should be given to group size and composition to facilitate positive participation and effective learning.

There should be:

- An increase in the frequency, often across the session, of the programmes outlined in SEN Support.
- Close liaison with parents/carers to share information and to review progress.
- Additional targeted support or support in small groups on a regular basis to promote the development of play and learning skills, and to enable curricular access. Opportunities to join small groups to develop individual skills such as turn taking, joint attention, etc.
- Individual programmes and target setting within the context of an inclusive curriculum.
- Consultation with external professionals for support with curriculum planning and delivery, to coordinate interventions and to access specialist resources.
- Personalised learning taking consideration of Early Years Foundation Stage Curriculum.

**Emotional, Social and Mental Development**

Continue with all of the strategies listed in Quality First Teaching and SEN Support.

Practitioners should:

- Support children to access individualised programmes reinforced through focused observations.
- Use a range of strategies to ensure the child, parent/carers and professionals are included in developing plans and programmes.
- Use effective strategies linked to the child’s individual programme such as withdrawal to a quiet area, distraction techniques, close supervision for impulsive children.
- Use positive approaches to behaviour management, taking into consideration the child’s age and stage of development.
- Provide individual and small group support to encourage positive interactions and to support social, emotional and mental difficulties.
• Consult with external professionals for support with curriculum planning and delivery, to coordinate interventions and to access specialist resources.

• Have a clear system for monitoring and evaluating individual plans, programmes and strategies.

Communication & Interaction

There will be an increase in the frequency, often across the session, of the programmes outlined in SEN Support. Early Years providers should offer individualised intensive programmes which might include elements of:

• Speech development

• Language development

• Alternative communication

• Intensive interaction

• Supported play and opportunities for supported social interaction

• Reduction of sensory defensiveness and increased sensory integration

• Emotional awareness

Practitioners should use strategies to support emotional regulation and seek advice and guidance from external specialists as appropriate and implement advice from speech and language therapists, educational psychologists and specialist teachers.

Sensory / Physical

Some children and young people with a physical disability (PD) require additional ongoing support and equipment to access all the opportunities available to their peers. Send Code of Practice 2014 pg. 98 6.35

• Practitioners should continue with all the strategies from Quality First Teaching and SEN Support

Visual Impairment - a child with severe/profound visual impairment (6/36 to 6/60 or less)
• Collaboration with the Habilitation Officer and QTVI at the SEND and Inclusion – Sensory/Physical Team to facilitate intensive specialist skills teaching, e.g. mobility, self-help skills, accessing the curriculum through non-sighted methods, management of highly specialist equipment etc. requiring high levels of staff allocated time.


<table>
<thead>
<tr>
<th>Vision Loss</th>
<th>Criteria</th>
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</thead>
<tbody>
<tr>
<td>Mild Vision Loss</td>
<td>Within the range 6/12-6/18 Snellen/Kay</td>
</tr>
<tr>
<td></td>
<td>LogMAR 0.3-0.48</td>
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<tr>
<td></td>
<td>But with visual field loss</td>
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<tr>
<td></td>
<td>Multi-sensory: Dual impairment with a mild loss in the most affected modality</td>
</tr>
<tr>
<td>Moderate Vision Loss</td>
<td>Within the range 6/18 – 6/36 Snellen/Kay</td>
</tr>
<tr>
<td></td>
<td>Within the range 0.5 – 0.78 LogMAR</td>
</tr>
<tr>
<td></td>
<td>Multi-sensory: Dual impairment with a moderate loss in both or the most affected modality</td>
</tr>
<tr>
<td>Severe Vision Loss</td>
<td>Within the range 6/36 – 6/60 Snellen/Kay</td>
</tr>
<tr>
<td></td>
<td>Within the range 0.8 – 1.0 LogMAR</td>
</tr>
<tr>
<td></td>
<td>Multi-sensory: Dual impairment with a severe loss in both or the most affected modality</td>
</tr>
<tr>
<td>Profound Vision Loss</td>
<td>Blind 6/60 or less Snellen/Kay</td>
</tr>
<tr>
<td></td>
<td>Blind 1.02 LogMAR or worse</td>
</tr>
<tr>
<td></td>
<td>Multi-sensory: Dual impairment with a profound loss in both or the most affected modality</td>
</tr>
</tbody>
</table>

Hearing Impairment - a child with a severe/profound permanent hearing loss (with hearing aids/cochlear implants and possibly a radio aid). The hearing loss will have a significant impact on the child’s early language development. These children will have been diagnosed by an Ear Nose and Throat consultant or audiologist and a referral will have been made to the SEND and Inclusion Sensory/Physical Team. They will have had hearing aids issued or cochlear implants fitted. A Teacher of the Hearing Impaired will complete a functional hearing test; provide advice, guidance and strategies to staff.
**Practitioners should be aware** of the possible implications of the child’s hearing impairment upon their listening, language development and communication and follow the advice provided by the SEND and Inclusion - Sensory/Physical Team. Staff should also adopt the recommended strategies to ensure:

- The child is in the best position to see and hear when spoken to
- There are frequent 1:1, paired or small group activities to facilitate language development in good listening conditions.
- Modelling of effective communication skills ensuring that the child is fully included, by establishing eye contact before speaking to the child and repeating other children’s comments when necessary.
- Visual cues, facial expressions, gestures and contextual clues are used routinely to assist understanding
- Monitoring of the child’s language development, keeping a written record of examples of their spoken language.
- Attend INSET provided by the SEND and Inclusion - Sensory/Physical Team.
- Input from the Sensory/Physical Team staff into the child’s Education Health and Care Plan, outcomes, interventions and provision map which will be reviewed on an agreed time scale.
- Named member of staff to take responsibility to check hearing equipment is working (TOD will give training on this).

**In addition**

- **Staff within the setting**
  - Time allocated for regular monitoring, shadowing and support meetings with the Teacher of the Deaf (TOD) or other members of the Sensory/Physical Team e.g. Communication Support Worker or Specialist Speech and Language Therapist.
  - High levels of adult support to ensure access and understanding throughout the nursery session E.g. to comment on play and provide language and new vocabulary which prepares the child for an activity or an event
  - Additional training on the use and maintenance of radio aids.
  - Additional training on signed communication to support understanding of speech

- **Sensory/Physical Team Staff**
  - Regular input and advice given by Teacher of the Deaf on adaptations to the environment and teaching materials
  - Intensive language development interventions by Sensory/Physical Team staff in the form of 1:1 and/or small group teaching to develop early pre-verbal skills, listening skills, speech, vocabulary and sign communication (if appropriate)
- Provision of ongoing training for signed communication (if appropriate) within the setting and also in the home
- Offer of more formalised British Sign Language courses (if appropriate)
- Additional training from Cochlear Implant Team key workers (if appropriate)

**Multiple Disability and Sensory Impairment (MDSI)**

These are children who have visual or hearing loss or a combination of both with additional difficulties sometimes with multiple and complex needs. These may be physical disabilities which make movement difficult, or perhaps difficulty communicating and understanding what is happening to them or medical difficulties all of which may impact on the child’s development. Most referrals to the SEND and Inclusion - Sensory/Physical Team are made by health professionals soon after birth. In some cases referrals are made following a medical trauma which has impacted on their abilities and development.

A child with MDSI is generally known to our service before they enter educational settings:

- Practitioner time is allocated for regular monitoring and support meetings with Specialist Staff (Qualified Teacher for Multi-Sensory Impairment (QTMSI), Teacher Of the Deaf (TOD) etc.)
- QTMSI will provide an activity planner with suggestions of activities to support the development of the child’s sensory awareness and overall development.
- Working collaboratively with all professionals involved with the child including SEND and Inclusion - Sensory/Physical Team. Health - Speech Therapist, Occupational Therapist, Physiotherapy, Social Care - Respite care workers, social workers
- Early Years Practitioners understand the importance of Care Plans for Moving and Handling, medical management plans and risk assessments
- Practitioners follow advice and guidance from other professionals
- Adaptations to the environment and teaching materials as advised by the Qualified Teacher of Multiple Sensory Impairment (QTMSI)
- Individual teaching of specific skills as modelled by the QTMSI, and in collaboration with SEND and Inclusion - Sensory/Physical Team
- Support to access activities not easily accessible, e.g. bringing the activity to the child, providing sensory experiences, same opportunities as their peers
- High levels of adult support throughout the child’s attendance to ensure safety, medical interventions if required, access and understanding throughout the nursery session
Nursery to ensure appropriate equipment is available and implemented for the child e.g. working chair, standing frame where required.

### Appendix 1 – Support Services

<table>
<thead>
<tr>
<th>Service</th>
<th>TEL</th>
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<tbody>
<tr>
<td>Durham SEND Information, Advice &amp; Support Service formally Parent Partnership Service</td>
<td>0191 5873541 or 03000 267007</td>
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<tr>
<td>SEND Statutory Casework Team formally SEN Place ment &amp; Provision</td>
<td>03000 268878</td>
</tr>
<tr>
<td>Educational Psychology Service</td>
<td>03000 263333</td>
</tr>
<tr>
<td>Portage Service</td>
<td>03000 263333</td>
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<tr>
<td>Inclusion &amp; Achievement SEND Team</td>
<td>03000 263333</td>
</tr>
<tr>
<td>Inclusion &amp; Achievement(SEND) Team formally Sensory Support Service</td>
<td>03000 264530</td>
</tr>
<tr>
<td>County Durham and Darlington Speech and Language Therapy Service</td>
<td>01429 522717</td>
</tr>
<tr>
<td>Children’s Occupational Therapy Service</td>
<td>0191 387 6359</td>
</tr>
<tr>
<td>Equalities &amp; Intervention Team formally EMTAS</td>
<td>01740 656998 or 01740 657792</td>
</tr>
<tr>
<td>Early Years Team</td>
<td>03000 268916</td>
</tr>
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</table>
### Appendix 2 - Useful Websites and additional material and resources

<table>
<thead>
<tr>
<th>Autism</th>
<th>Early Years</th>
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<tbody>
<tr>
<td><strong>Autistica</strong></td>
<td><strong>Department for Education</strong></td>
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<tr>
<td><a href="http://www.autistica.org.uk">www.autistica.org.uk</a></td>
<td><a href="http://www.gov.uk">www.gov.uk</a></td>
</tr>
<tr>
<td>National Autistic Society</td>
<td><strong>Foundation Years</strong></td>
</tr>
<tr>
<td>North East Autistic Society</td>
<td><strong>National Children’s Bureau</strong></td>
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<tr>
<td><a href="http://www.ne-as.org.uk">www.ne-as.org.uk</a></td>
<td><a href="http://www.ncb.org.uk">www.ncb.org.uk</a></td>
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<tr>
<td>4 Children</td>
<td><strong>Parents</strong></td>
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<tr>
<td><strong>Down Syndrome</strong></td>
<td>Contact-a-Family</td>
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<tr>
<td>Down’s Syndrome Association</td>
<td><a href="http://www.cafamily.org.uk">www.cafamily.org.uk</a></td>
</tr>
<tr>
<td><a href="http://www.downs-syndrome.org.uk">www.downs-syndrome.org.uk</a></td>
<td>Family &amp; Childcare Trust</td>
</tr>
<tr>
<td>Down Syndrome Education Trust</td>
<td><a href="http://www.familyandchildcaretrust.org">www.familyandchildcaretrust.org</a></td>
</tr>
<tr>
<td><a href="http://www.downsed.org">www.downsed.org</a></td>
<td>Family Information Service (Local Offer)</td>
</tr>
<tr>
<td>Down’s Syndrome North East</td>
<td><a href="http://www.countydurhamfamilies.info">www.countydurhamfamilies.info</a></td>
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<tr>
<td><a href="http://www.dsne.org.uk">www.dsne.org.uk</a></td>
<td>Making Changes Together Parents Steering Group</td>
</tr>
<tr>
<td>Education Centre for Children with Down Syndrome</td>
<td><a href="http://www.mctdurham.co.uk">www.mctdurham.co.uk</a></td>
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<tr>
<td><a href="http://www.eccds.org.uk">www.eccds.org.uk</a></td>
<td><strong>Council for Disabled Children</strong></td>
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<td><a href="http://www.councilfordisabledchildren.org.uk">www.councilfordisabledchildren.org.uk</a></td>
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<tr>
<th>Speech, Language &amp; Communication</th>
<th>Sensory Needs</th>
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<tr>
<td><strong>Afasic – Unlocking speech and language</strong></td>
<td><strong>National Deaf Children’s Society</strong></td>
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<td><a href="http://www.afasic.org.uk">www.afasic.org.uk</a></td>
<td><a href="http://www.ndcs.org.uk">www.ndcs.org.uk</a></td>
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<tr>
<td><strong>I Can – The Children’s Communication Charity</strong></td>
<td><strong>Royal National Institute for the Blind</strong></td>
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<td><a href="http://www.ican.org.uk">www.ican.org.uk</a></td>
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<tr>
<td><strong>Literacy Trust</strong></td>
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<tr>
<td><strong>Makaton</strong></td>
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<td><a href="http://www.makaton.org">www.makaton.org</a></td>
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<tr>
<td>General</td>
<td>Resources</td>
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<tr>
<td>Association for Spina Bifida and Hydrocephalus</td>
<td>ECaT monitoring Tool</td>
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<tr>
<td>Cerebra – Brain related conditions</td>
<td>Early Support Materials</td>
</tr>
<tr>
<td>National Development Team for Inclusion</td>
<td>Social and Emotional Aspects of Development (SEAD) materials</td>
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<td>SCOPE</td>
<td>Inclusion Development Programme (IDP) materials</td>
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