

Graduated Approach Early Years



The EYFS Stage Profile 2018 Handbook contains the regulatory and legal framework for early childhood education and care. Development Matters in the Early Years Foundation Stage describes what adults do and provide to ensure all children have the best possible start in life. This includes details of provision, which enables them to develop their personalities, talents and abilities irrespective of ethnicity, culture or religion, home language, family background, learning difficulties, disabilities or gender. Every child is a unique child who is constantly learning and can be resilient, capable, confident and self-assured.

Guiding Principles in relation to best practice include the following:

- To recognise that each child is unique and learns in different ways and at different points in their development.
- To appreciate the importance of the developmental stage of the child rather than their chronological age.
- To recognise that there are going to be vast differences within each cohort. There will be differences between gender, time of birth (autumn – summer), early birth, low birth weight, pre-birth circumstances, socio-economic factors and children/families who move frequently etc.
- Children need to have the opportunity to interact, form attachments and engage in order for the setting to effectively understand/evaluate the whole child.

The environment is pivotal to all the above. It needs to be stimulating and address the children's interests and needs. Practitioners must regularly reflect on the environment and their practice to ensure that it meets the needs of the children. All Early Years practitioners/teachers understand and observe each child's development and learning, assess progress and plan for next steps. Families have a crucial role in the development and assessment of their child's education and progress. Practitioners have a professional responsibility to involve and to listen to parents at regular intervals. Monitoring children's progress throughout the Early Years Foundation Stage is essential. Decisions about a child's level of need should be part of a continuous and systematic cycle of planning, action and review within a school/setting.

Early Years Range Descriptors Overview

<p>Quality First Teaching Range 1 Mild</p>	<ul style="list-style-type: none"> • May be slightly below age-related expectations – using the EYFS as a guide and being mindful that every child is unique • May develop spoken language at a slower rate than peers • Some difficulties understanding language • May present with some difficulties settling into the setting – may display heightened emotional distress and need peer/adult support to self-regulate • Occasional and short-term difficulties meeting the social expectations • At times may need additional adult support to meet needs
<p>Initial Support Range 2 Mild - Moderate</p>	<ul style="list-style-type: none"> • Mild – persistent difficulties and is not making expected progress despite a range of strategies and quality first teaching • Continuing and persistent difficulties are emerging – assess using EYFS • Spoken language is delayed • Difficulties in understanding language are more apparent • Mild -persistent difficulties with self-regulation • Difficulties with developing social connections • Difficulties following social expectations • Adult support is more frequently required to meet need
<p>SEND Support Range 3 Moderate</p>	<ul style="list-style-type: none"> • As above plus • Difficulties are more persistent requiring further support and intervention
<p>Enhanced SEND Support Range 4 Significant</p>	<ul style="list-style-type: none"> • As above plus • Difficulties are significant and persistent requiring further assessment and support

Initial Support – Range 2

NEEDS and CHALLENGES	<p>Cognition and learning:</p> <ul style="list-style-type: none">• The child is not making expected progress and difficulties are becoming apparent in relation to EYFS prime areas and is operating at least one level below their chronological age in more than one area of learning• The child may move quickly from one activity to another and need an adult help them to show them how to play and to stay and finish activities• The child may move around the room or sit still and watch other children but won't play unless an adult sits with them
ASSESS	<ul style="list-style-type: none">• Use Characteristics of Effective Learning to assess the child's learning style• Use the EYFS to assess skills• Key Person/Room Lead uses a differentiated approach to enable child to access the Foundation Stage using their personal learning styles and interests• Carry out more focussed observations to get more information• Talk to other members of staff about the information gathered• Stoke speaks Out Staged Pathway Toolkit• Stoke on Trent Early Years Child Development Tool (Prime areas)

<p>PLAN and DO</p>	<ul style="list-style-type: none"> • Use the appropriate programme from Stoke Speaks Out: <ul style="list-style-type: none"> - Time to Listen - Time to Talk • Ensure that activities match the child's interest • If appropriate, try to use the same favourite toys from home in the setting • Provide open ended play opportunities and play experiences e.g. outdoor exploration, building dens, using fabric, building blocks • Use the child's name to ensure you have their attention before speaking to them • Play alongside the child and copy what the child does to show interest in the activity then model ways to extend and develop the play (child holding doll, adult then holds doll and feeds doll using a spoon) • Allow for lots of repeated play, the child may need to repeat many times to learn/understand something • Always offer limited choices to give them opportunities to explore other options • Provide a range of familiar resources but include "new" experiences in small doses. E.g. sensory baskets add a new item every week
<p>EXPECTED OUTCOMES / REVIEW</p>	<ul style="list-style-type: none"> • Links to the Stoke speaks Out Early Communication Screening outcomes can be found here. • A 2019 government study into the Stoke Speaks Out programme can be found with this link. • Increased interest and curiosity about their world and things around them • Increased engagement and exploration of resources and activities • Increased enjoyment of stories, singing and games • Increased levels of independence and self-motivated learning

NEEDS and CHALLENGES	<p>Communication and Interaction:</p> <ul style="list-style-type: none"> • The child is not making expected progress and difficulties are becoming apparent in the area of Communication, Language and social interaction • The child may have not give consistent eye contact and may find it hard to take turns in a game • They may struggle with change and/or transition • They may find it hard to join in with activities with an adult • They may only play with a few selected activities and will usually play alone • Struggles to initiate conversation with peers
ASSESS	<ul style="list-style-type: none"> • Use the EYFS to assess skills. • Carry out more focussed observations to get more information. Talk to other members of staff about the information gathered. • Stoke speaks Out Staged Pathway Toolkit • Stoke on Trent Early Years Child Development Tool (Prime areas)
PLAN and DO	<ul style="list-style-type: none"> • Implement the appropriate programme from Stoke Speaks Out: <ul style="list-style-type: none"> - Time to Listen - Time to Talk • Use a visual approach to support the child's understanding such as a visual timetable, now/next board, objects of reference How to use a visual approach can be found here. • Adult modelling to promote communicate and language using simple language and repetition • Communication friendly environment: using photographs/pictures to show the routine of setting, use of gestures and signs, equipment labelled with photographs or pictures and words • Use a structured approach for tasks to have a clear beginning middle and end • Allow time for the child to respond to verbal communication • Use of non-verbal communication including signing and visuals

EXPECTED OUTCOMES / REVIEW	<ul style="list-style-type: none"> • Links to the Stoke speaks Out Early Communication Screening outcomes can be found here. • A 2019 government study into the Stoke Speaks Out programme can be found with this link. • Shows increased interest in peers • Will develop greater motivation to communicate and interact with others • Reduced distress as they move from transition point to another • Able to join in adult-led activities • Explores and engages with a variety of resources and activities • Increased motivation to engage in purposeful, reciprocal play with others
NEEDS and CHALLENGES	<p>Social, Emotional and Mental Health:</p> <ul style="list-style-type: none"> • The child is not making expected progress and difficulties are becoming apparent in relation to the area of Personal, Social and Emotional Development • They may struggle to respond to appropriate boundaries when encouraged and supported. • They need lots of adult help to join in with group activities. <ul style="list-style-type: none"> • They may find it hard to control their emotions and understanding the emotions of others; this will be shown by difficulties with taking turns, sharing, waiting and not yet being able play with other children (age and stage of development taken into consideration)
ASSESS	<ul style="list-style-type: none"> • Use the EYFS to assess skills • Stoke speaks Out Staged Pathway Toolkit • Stoke on Trent Early Years Child Development Tool (Prime areas) <p>Consider what is happening in the child's wider life by talking to parents</p>

<p>PLAN and DO</p>	<ul style="list-style-type: none"> • Reflect on the nursery environment, practice and routines and how this could be impacting on the child • Use an ABC chart to analyse the child's behaviour and to help to identify triggers and for some advice on appropriate interventions • Early Years Inclusive Learning Service Stoke SEN and Disability - Local Offer • Use Characteristics of Effective Learning to assess the child's learning style • Use observations to identify why the child is behaving in this way. Are there any triggers or times that appear more frequently? Are there certain objects the child mouths/touches/throws? Discuss with parents if they experience the same behaviours at home or notice anything at home • Provide the child with items that are safe to throw or push e.g. bean bags/pushing exercise balls. Make an activity from throwing e.g. throwing into a container and plan to this frequently throughout the day • Provide a quiet/safe environment that the child can retreat to when they are feeling unsecure • Ensure that all adults are using the strategies/resources provided consistently • Provide sensory cushions/designated space during carpet time and let the child have access to fidget toys if they help them to sit • Amend the routine to suit the child needs where reasonable e.g. allowing child to go outside first then let other children join • Use objects to support the child with moving onto new activities e.g. showing them a train indicating they can play with train track • Have access to 'choice boards' so the child can indicate their preferences. • Use sand timers to warn the child that the activity is coming to end
<p>EXPECTED OUTCOMES / REVIEW</p>	<ul style="list-style-type: none"> • Being able to name 3 emotions (self and in others) • Developing understanding of expected behaviours (socially appropriate) • Being able wait their turn • Being able to share a resource/activity • Follow an adult's lead • Able to self-soothe and calm after dysregulation (with adult help) • Start to develop reciprocal friendships

NEEDS and CHALLENGES	<p>Physical, Sensory and Medical Needs:</p> <ul style="list-style-type: none"> • The child is not making expected progress and difficulties are becoming apparent in relation to EYFS prime areas and is operating at least one developmental band below their chronological age in the area of physical development • Lack of coordination in physical skills when compared to other children of the same age • Some difficulties with dressing, meal times etc. (age and stage of development taken into consideration). • The child may not respond to their name. • They may not follow simple instructions. • They may watch other children to pick up cues in the environment. • They may lack concentration (age and stage of development taken into consideration). • They may find difficulties in negotiating obstacles and pathways in their environment. • They may look closely at objects. • May complain of headaches and/or rub eyes <p>May tire and lose concentration easily (age and stage of development taken into consideration)</p>
ASSESS	<ul style="list-style-type: none"> • Use the EYFS to assess skills • Setting to discuss concerns with parents/carers and liaise closely with health visiting service

PLAN and DO

- Ensure there is enough floor space and provide the child with plenty of opportunities to walk, run and crawl on different surfaces – grass, carpet, vinyl
- Provide outdoor equipment that encourages children to balance, climb, jump, slide, lift, pull, push, hang, spin and swing; for example, steps, logs, planks, wheelbarrows, tyres, tunnels, large balls, large blocks etc.
- Create a path with things to step onto (carpet mats for no height or blocks/logs) and paths with defined sections to step into (hoops, ladder on ground, tiles)
- Introduce an obstacle course with items at different heights and promote a range of movements such as climbing, crawling, tummy wriggling, rolling and sliding
- Provide builder's trays with a range of messy play opportunities and large surfaces to mark with paint, water and shaving foam using brushes and hands
- Provide a range of resources to build hand coordination, control and dexterity such as playdough, clay, finger and brush painting, tape, ribbons, string, rope and pulleys, water play equipment, pegs, threading, construction equipment and small world resources
- Introduce 'Start Stop' games to develop fine motor skills with musical instruments (fast/slow, loud/quiet): drumming using two hands and alternate hands, spoons and sticks on pots
- If the child uses technology such as a hearing aid, make sure they wear it that it is clean and the batteries are not flat
- Use the child's name to gain their attention
- Ensure that they are listening before you start speaking to them
- Make sure the child can see your face when you speak to them and your face is not in shadow
- Enable to child to access quieter areas for focused activities/interventions
- Use visual supports
- If the child wears glasses, encourage the child to bring them and wear them as appropriate
- Adapt the environment to ensure that the child is able to move around the setting safely e.g. clear paths between areas and different levels within the setting are marked with florescent tape
- Consideration given to lighting
- Ensure that the child is close to the practitioners during activities and use visual cues such as story props, puppets etc.

EXPECTED OUTCOMES / REVIEW	<ul style="list-style-type: none"> • Increased levels of independence • Increased levels of engagement with resources and activities • Increased confidence, skills and abilities
-----------------------------------	--

SEND Support – Range 3

NEEDS and challenges	<p>Cognition and learning:</p> <ul style="list-style-type: none"> • Further delay in reaching milestones • 2 development bands below their age in 2 or more aspects within the prime areas and is delayed in at least 2 out of 3 areas on the Stoke Speaks Out Child Development Tool • The child may have difficulties in remembering how to do things • The child may have significant difficulties with attention and need a high level of support to keep their attention on tasks
ASSESS	<ul style="list-style-type: none"> • The Stoke Speaks Out Child Development Tool is an example of a tool that can be used to gather further information. This can be found here • Hold a planned initial meeting with parents to gain their views, share information and plan the next steps together. Plan two-three achievable targets. Discuss how parents can reinforce this at home. Set a date for a review meeting in 6-8weeks time. Invite parents to the review • Refer to the speech therapy service at this point if necessary and parents agree • Refer into the EYILS if the child is not making expected progress and achieving their expected outcomes when intervention has been put into place

PLAN and DO

- Time to Listen (settings)
- Time to Talk (settings)
- Referral to Speech and Language Therapy/ SMILE group completed
- Consider what gains the child's interests and high levels of involvement and wellbeing
- Ensure that at each session attended, the child accesses an individually supported learning opportunity, small group time and support during child-initiated play, as based on the SEN Support plan
- Ensure there are plenty of opportunities to repeat activities
- New learning needs to be broken down into very small steps and activities have to be repeated lots of times for progress to be made
- Encourage children to use a range of stimulating open ended resources that encourage children to use all their senses
- Continue to create interesting experiences that develops a child's curiosity and motivation to explore

**EXPECTED OUTCOMES /
REVIEW**

- Links to the Stoke speaks Out Early Communication Screening outcomes can be found [here](#)
- A 2019 government study into the Stoke Speaks Out programme can be found with [this link](#)
- Increased interest and curiosity about their world and things around them
- Increased engagement and exploration of resources and activities
- Increased enjoyment of stories, singing and games
- Increased levels of independence and self-motivated learning
- There is better retention of information
- Greater independent use of strategies to access learning
- Links to the Stoke speaks Out Early Communication Screening outcomes can be found [here](#)
- A 2019 government study into the Stoke Speaks Out programme can be found with [this link](#)
- Shows increased interest in peers
- Will develop greater motivation to communicate and interact with others
- Reduced distress as they move from transition point to another
- Able to join in adult-led and/or peer activities
- Explores and engages with a variety of resources and activities
- Increased motivation to engage in purposeful, reciprocal play with others
- Increased attention and concentration in all areas

<p>NEEDS and CHALLENGES</p>	<p>Communication and Interaction:</p> <ul style="list-style-type: none"> • The child will have lots of difficulties with things such as eye contact, turn taking/sharing difficulties etc • They will often be very worried and upset when things change • They will usually not want to join in with activities and games suggested by an adult • They will spend most the time on their own play and find it really hard to stop or move onto something else • They may lead adult by hand/arm to get whatever he/she wants or use adult's hand to make toys or equipment work • The child probably has difficulties with attention and may move quickly between activities and not stay long enough to learn new things • The child plays with toys or uses equipment differently to other children • They may avoid getting messy, not like loud noises, strong smells and tastes or places that have lots of colour and light or they may be the opposite of this and prefer getting very messy by covering themselves in paint, etc • Their language is very delayed and they need support from a Speech and Language Therapist
<p>ASSESS</p>	<ul style="list-style-type: none"> • The Stoke Speaks Out Child Development Tool is an example of a tool that can be used to gather further information. This can be found here • Hold a planned initial meeting with parents to gain their views, share information and plan the next steps together. Plan two-three achievable targets. Discuss how parents can reinforce this at home. Set a date for a review meeting in 6-8weeks time. Invite parents to the review • Refer to the speech therapy service at this point if necessary and parents agree • Refer into the EYILS if the child is not making expected progress and achieving their expected outcomes when intervention has been put into place

<p>PLAN and DO</p>	<ul style="list-style-type: none"> • Develop 'joint attention' by following the child's interests, joining them in their play, and modelling language appropriate to the child's level of development • Keep all distractions to a minimum • Allow extra time for processing information • Allow for frequent practice through recall and repetition • Give a warning when an activity is coming to an end and to support the transition • Introduce new activities and experiences sensitively and in smaller amounts, e.g. small tray of sand presented individually • Support development of sharing and turn taking in small groups and on individual basis if required • Offer child choices, e.g. from two songs, stories, drinks - support choice making visually with objects/pictures/symbols • Use specific praise (labelled praise), e.g. "good sitting" or "good drinking" etc • Adapt the content and presentation of language-based activities – story time, singing, ensuring the child is appropriately placed, gaining child's attention • Using their name, simplifying and reducing amount of language used.
<p>EXPECTED OUTCOMES / REVIEW</p>	<ul style="list-style-type: none"> • Links to the Stoke speaks Out Early Communication Screening outcomes can be found here • A 2019 government study into the Stoke Speaks Out programme can be found with this link • Shows increased interest in peers • Will develop greater motivation to communicate and interact with others • Reduced distress as they move from transition point to another • Able to join in adult-led and/or peer activities • Explores and engages with a variety of resources and activities • Increased motivation to engage in purposeful, reciprocal play with others • Increased attention and concentration in all areas

NEEDS and CHALLENGES	<p>Social, Emotional and Mental Health:</p> <ul style="list-style-type: none"> • Further delay in reaching milestones • 2 levels below their age in 2 or more aspects within the prime areas and is delayed in at least 2 out of 3 areas on the Stoke Speaks Out Child Development Tool • The child rarely joins in with activities, and will either avoid them or show difficult behaviour • They struggle to control their emotions and understanding the emotions of others; this will be shown by difficulties with taking turns and not yet being able play with other children
ASSESS	<ul style="list-style-type: none"> • The Stoke Speaks Out Child Development Tool is an example of a tool that can be used to gather further information. This can be found here • Hold a planned initial meeting with parents to gain their views, share information and plan the next steps together. Plan two-three achievable targets. Discuss how parents can reinforce this at home. Set a date for a review meeting in 6-8weeks time. Invite parents to the review • Refer to the speech therapy service at this point if necessary and parents agree • Refer into the EYILS if the child is not making expected progress and achieving their expected outcomes when intervention has been put into place
PLAN and DO	<ul style="list-style-type: none"> • Model friendly, caring behaviour in play that support successful interaction, e.g. ‘Can I have a go?’, ‘Do you want some playdough?’ etc • Use clear concise language, giving the child time to process • Ensure the setting has a quiet low stimuli area for the child to access adult led activities • Support sharing and taking turns. Initiate turn taking with an adult and when the child is ready, gradually introduce play with one other child • Ensure that there are plenty of opportunities to repeat activities • Ensure there is adequate uninterrupted time for the child to explore at their own pace and in a space, they feel comfortable • Where possible, try not to respond to unwanted behaviours designed to gain adult’s attention unless they are harmful to the child or others

EXPECTED OUTCOMES / REVIEW	<ul style="list-style-type: none"> • Being able to name 3 emotions (self and in others) • Developing understanding of expected behaviours (socially appropriate) • Being able to wait their turn • Being able to share a resource/activity • Follow an adult's lead • Able to self-soothe and calm after dysregulation (with adult help) • Start to develop reciprocal friendships
NEEDS and CHALLENGES	<p>Physical, Sensory and Medical Needs:</p> <ul style="list-style-type: none"> • child must have a recognised visual impairment and/or an assessed visual deficit which is not fully corrected by lenses or glasses Or • child has a diagnosed hearing loss • child has hearing aids or cochlear implants Or • Physical/medical difficulties that require varied and extensive equipment, adapted resources and regular support • Physical independence is impaired and requires input or programmes from relevant professionals
ASSESS	<ul style="list-style-type: none"> • The Stoke Speaks Out Child Development Tool is an example of a tool that can be used to gather further information. This can be found here • Hold a planned initial meeting with parents to gain their views, share information and plan the next steps together. Plan two-three achievable targets. Discuss how parents can reinforce this at home. Set a date for a review meeting in 6-8weeks time. Invite parents to the review • Refer to the speech therapy service at this point if necessary and parents agree • Refer into the EYILS if the child is not making expected progress and achieving their expected outcomes when intervention has been put into place

PLAN and DO	<ul style="list-style-type: none"> • Follow specific advice and guidance from specialist services including the HI and VI team or physiotherapists and occupational therapists., including the use of any specialist equipment loaned to the setting • Create a calm, quiet area that the child can have as a safe area which they can return to when they need to • Try to keep the physical environment as consistent as possible • Enable to child to access quieter areas for focused activities/interventions • Follow the strategies advised by the child's Physiotherapist and/or Occupational Therapist • Provide an environment that supports a child's developing independence e.g. position furniture to enable children to access resources, activities etc.
EXPECTED OUTCOMES / REVIEW	<ul style="list-style-type: none"> • Increased levels of independence • Increased levels of engagement with resources and activities • Increased confidence, skills and abilities

Enhanced SEND Support – Range 4

NEEDS and CHALLENGES	Cognition and learning: <ul style="list-style-type: none">• The child is delayed in at least 2 out of 3 areas on the Stoke Speaks Out Child Development Tool by more than 12 months• The child finds it very difficult to remember new skills and ideas, even when they are broken down into very small steps• The child requires a very high levels of individual support to access any activity
ASSESS	<ul style="list-style-type: none">• The Stoke Speaks Out Child Development Tool is an example of a tool that can be used to gather further information. This can be found here• For child's with complex needs, the Early Support Developmental Journal can be downloaded and used as an assessment tool and to help to plan next steps, the link to download is Early Years Developmental Journal (ncb.org.uk)• For children with Down Syndrome, the Early support journal can be down loaded by following Downs Syndrome Development Journal - Early Support (councilfordisabledchildren.org.uk)

<p>PLAN and DO</p>	<ul style="list-style-type: none"> • Use interventions and strategies as suggested advice provided by specialist support services such as the Early years team, Speech therapists, physiotherapists etc. • Monitor and review the SEN Support plan, focusing on the child’s progress and the impact of strategies and interventions used. This should be completed at least every 6 weeks as part of the ‘Assess, Plan, Do, Review’ process • Follow the child’s interests and provide activities that use all of their senses to help them to develop curiosity and to motivate them to play for increasingly long periods of time. Provide individual “treasure baskets” that contain the child’s favourite activities that be used when working on individual targets with the child • Watch closely how a child responds to different situations through their body language, voice and facial expressions – and respond to this • If advised by the speech therapist, the child will be supported in using alternative ways of communicating such as using PECS® (Picture Exchange Communication System) or Makaton Mencap (a sign language for children with delayed communication) and other visual approaches Visual supports (autism.org.uk) • Evidence for using an Curiosity Based approach can be found in the by following this link
<p>EXPECTED OUTCOMES / REVIEW</p>	<ul style="list-style-type: none"> • Links to the Stoke speaks Out Early Communication Screening outcomes can be found here • A 2019 government study into the Stoke Speaks Out programme can be found with this link • Increased interest and curiosity about their world and things around them • Increased engagement and exploration of resources and activities • Increased enjoyment of stories, singing and games • Increased levels of independence and self-motivated learning • There is better retention of information • Greater independent use of strategies to access learning

<p>NEEDS and CHALLENGES</p>	<p>Communication and Interaction:</p> <ul style="list-style-type: none"> • Significant and persistent communication difficulties which require intensive support and clear identified strategies for the child to communicate • Limited understanding of social boundaries in play or other activities, including social interaction • Significant and persistent difficulties in following adult directed activities • Significantly restricted interests and strong evidence of repetitive interests • The child’s level of anxiety limits their ability to access and join in with activities • Attention on any activity is very short – although the child may concentrate on some activities intensely e.g. spinning wheels • The child may show little or no sense of danger and require close supervision to ensure their safety, e.g. climbing, mouthing objects, running, throwing etc • The child will be unable to communicate their wants and needs without an adult who knows them well to understand their behaviour and body language • They may need an alternative way of communicating
<p>ASSESS</p>	<ul style="list-style-type: none"> • The Stoke Speaks Out Child Development Tool is an example of a tool that can be used to gather further information. This can be found here

PLAN and DO

- Use interventions and strategies as suggested advice provided by specialist support services such as the Early years team, Speech therapists, physiotherapists etc.
- Monitor and review the SEN Support plan, focusing on the child's progress and the impact of strategies and interventions used. This should be completed at least every 6 weeks as part of the 'Assess, Plan, Do, Review' process
- Encourage the child's early communication skills by following the child's interests and copying their play
- Use attention "Attention Buckets" with small groups of children to help them to develop their interest in adult led activities. This intervention comes from the Attention Autism approach devised by Gina Davies
- The EYILS may provide advice on using the "Hanan" approach to supporting communication development. The aim of activities in this approach are to;
 - improve the child's social skills.
 - Help the child to engage in back-and-forth interactions.
 - Improve their understanding of language
- If advised by the speech therapist, the child will be supported in using alternative ways of communicating such as using PECS® ([Picture Exchange Communication System](#)) or [Makaton | Mencap](#) (a sign language for children with delayed communication) and other visual approaches [Visual supports \(autism.org.uk\)](#)
- For some children a [TEACCH](#) may be advised. The key idea is to teach children in a way that makes the most of their strengths and works around their areas of difficulty
- Look at the learning environment, providing an area where distractions can be reduced, using structured activities and building on the child's strengths and interest to support development. The National Autistic Society recommends the use of the [SPELL](#) approach for some children

<p>EXPECTED OUTCOMES / REVIEW</p>	<ul style="list-style-type: none"> • Shows increased interest in peers • Will develop greater motivation to communicate and interact with others • Reduced distress as they move from transition point to another • Able to join in adult-led and/or peer activities • Explores and engages with a variety of resources and activities • Increased motivation to engage in purposeful, reciprocal play with others • Increased attention and concentration in all areas • You can find out more about encouraging early communication skills through using the link to Intensive Interaction here • Information about the TEACCH approach can be found here: • Strategies and interventions - TEACCH (autism.org.uk)
<p>NEEDS and CHALLENGES</p>	<p>Communication and Interaction:</p> <ul style="list-style-type: none"> • Significant and persistent communication difficulties which require intensive support and clear identified strategies for the child to communicate • Limited understanding of social boundaries in play or other activities, including social interaction • Significant and persistent difficulties in following adult directed activities • Significantly restricted interests and strong evidence of repetitive interests • The child's level of anxiety limits their ability to access and join in with activities • Attention on any activity is very short – although the child may concentrate on some activities intensely e.g. spinning wheels • The child may show little or no sense of danger and require close supervision to ensure their safety, e.g. climbing, mouthing objects, running, throwing etc • The child will be unable to communicate their wants and needs without an adult who knows them well to understand their behaviour and body language • They may need an alternative way of communicating
<p>ASSESS</p>	<ul style="list-style-type: none"> • The Stoke Speaks Out Child Development Tool is an example of a tool that can be used to gather further information. This can be found here

PLAN and DO

- Use interventions and strategies as suggested advice provided by specialist support services such as the Early years team, Speech therapists, physiotherapists etc.
- Monitor and review the SEN Support plan, focusing on the child's progress and the impact of strategies and interventions used. This should be completed at least every 6 weeks as part of the 'Assess, Plan, Do, Review' process
- Encourage the child's early communication skills by following the child's interests and copying their play
- Use attention "Attention Buckets" with small groups of children to help them to develop their interest in adult led activities. This intervention comes from the Attention Autism approach devised by Gina Davies
- The EYILS may provide advice on using the "Hanan" approach to supporting communication development. The aim of activities in this approach are to;
 - improve the child's social skills.
 - Help the child to engage in back-and-forth interactions.
 - Improve their understanding of language
- If advised by the speech therapist, the child will be supported in using alternative ways of communicating such as using PECS® ([Picture Exchange Communication System](#)) or [Makaton | Mencap](#) (a sign language for children with delayed communication) and other visual approaches [Visual supports \(autism.org.uk\)](#)
- For some children a [TEACCH](#) may be advised. The key idea is to teach children in a way that makes the most of their strengths and works around their areas of difficulty
- Look at the learning environment, providing an area where distractions can be reduced, using structured activities and building on the child's strengths and interest to support development. The National Autistic Society recommends the use of the [SPELL](#) approach for some children

<p>EXPECTED OUTCOMES / REVIEW</p>	<ul style="list-style-type: none"> • Shows increased interest in peers • Will develop greater motivation to communicate and interact with others • Reduced distress as they move from transition point to another • Able to join in adult-led and/or peer activities • Explores and engages with a variety of resources and activities • Increased motivation to engage in purposeful, reciprocal play with others • Increased attention and concentration in all areas • You can find out more about encouraging early communication skills through using the link to Intensive Interaction here • Information about the TEACCH approach can be found here: • Strategies and interventions - TEACCH (autism.org.uk)
<p>NEEDS and CHALLENGES</p>	<p>Social, Emotional and Mental Health:</p> <ul style="list-style-type: none"> • The child requires a high level of adult support and intervention to take part in activities • They may present with unpredictable extremes of demanding behaviour which affects the child's safety and that of others and which damages equipment or materials • They may have lots of difficulties with regulating their emotions and recognising those of other people
<p>ASSESS</p>	<ul style="list-style-type: none"> • The Stoke Speaks Out Child Development Tool is an example of a tool that can be used to gather further information. This can be found here • Work with parents to gather information about the barriers to learning

PLAN and DO	<ul style="list-style-type: none"> • Use interventions and strategies as suggested advice provided by specialist support services such as the Early Years team, Speech therapists, etc. • Monitor and review the SEN Support plan, focussing on the child's progress and the impact of strategies and interventions used. This should be completed at least every 6 weeks as part of the 'Assess, Plan, Do, Review' process • Meet with parents/carers to devise a shared home-nursery approach to supporting the child's behaviour. This will ensure that the child has clear expectations and that everyone working with the child will be using consistent language and responses and rewards to reinforce positive behaviour
	<ul style="list-style-type: none"> • Use interventions and strategies as suggested advice provided by specialist support services such as the Early years team, Speech therapists, physiotherapists and specialist teacher of the deaf and visually impaired • Monitor and review the SEN Support plan, focusing on the child's progress and the impact of strategies and interventions used. This should be completed at least every 6 weeks as part of the 'Assess-Plan-Do-Review' process
EXPECTED OUTCOMES / REVIEW	<ul style="list-style-type: none"> • Being able to name 3 emotions (self and in others) • Developing understanding of expected behaviours (socially appropriate) • Being able wait their turn • Being able to share a resource/activity • Follow an adult's lead • Able to self-soothe and calm after dysregulation (with adult help) • Start to develop reciprocal friendships

NEEDS and CHALLENGES	<p>Physical, Sensory and Medical Needs:</p> <ul style="list-style-type: none"> • Difficulties may affect the child’s ability to access the Early Years Foundation Stage (EYFS) curriculum for the majority of the time in the setting • The child will also have observed, persistent, and significant difficulties with one or more of the following: <ul style="list-style-type: none"> - Delayed language development - Accessing undifferentiated activities - Accessing activities/provision without a high level of adult support - Accessing activities in a large group - Developing social skills - Communicating with staff and other children • The safety and well-being of the child may be at risk and require a high level of support • Adults may need specialist training to support physical/medical needs • Significant medical difficulties that require controlled medication and intensive intervention throughout the day
ASSESS	<ul style="list-style-type: none"> • The Stoke Speaks Out Child Development Tool is an example of a tool that can be used to gather further information. This can be found here • For child with complex needs, the Early Support Developmental Journal can be downloaded and used as an assessment tool and to help to plan next steps, the link to download is Early Years Developmental Journal (ncb.org.uk)
PLAN and DO	<ul style="list-style-type: none"> • Use interventions and strategies as suggested advice provided by specialist support services such as the Early years team, Speech therapists, physiotherapists and specialist teacher of the deaf and visually impaired • Monitor and review the SEN Support plan, focusing on the child’s progress and the impact of strategies and interventions used. This should be completed at least every 6 weeks as part of the ‘Assess-Plan-Do-Review’ process
EXPECTED OUTCOMES / REVIEW	<ul style="list-style-type: none"> • Increased levels of independence • Increased levels of engagement with resources and activities • Increased confidence, skills and abilities

Cognition and Learning: Preparation for Adulthood Outcomes and Provision Early Years (0-4 Years)

Employability/Education	<ul style="list-style-type: none"> • child will engage in aspects of real-world/role play and show developing awareness of the tasks carried out by different professionals (doctor, nurse, firefighter, police officer) • child will show interest in activities and resources within the nursery environment and will engage in aspects of exploratory, functional and sensory play, demonstrating developing understanding of the world around them • child will show developing imagination through substitution and representation of objects within play (using a cardboard tube to represent a phone, for example) • child will begin to make meaningful choices between objects and activities • child will show increased listening skills and task focus
Independence	<ul style="list-style-type: none"> • child will make choices between options offered at snack and mealtimes • child will have an understanding of risk/safety within the home (hot pans, cooker top, boiling water etc.)
Community Participation	<ul style="list-style-type: none"> • child will show a developing understanding of friendships and interaction with others and will be able to name 'friends' within their nursery group
Health	<ul style="list-style-type: none"> • child will begin to recognise which foods and drinks are healthier and the importance of a healthy diet • child will have an understanding of the importance of self-care routines to maintain good health (washing hands, cleaning teeth, having a bath etc.) • child will have a developing understanding that some substances are harmful to ingest or touch • child will have an understanding of basic feelings and emotions

Child will have reached expected outcomes in relation to EFYS ELG (40-60 months) upon transition from Early Years to Reception, with reference to Prime Areas of Learning: literacy skills, Mathematics, Understanding of the world and Expressive Art and Design

Communication and Interaction: Preparation for Adulthood Outcomes and Provision

Early Years (0-4 Years)

Employability/Education	<ul style="list-style-type: none"> • child will be able to follow direction within routines and comply with simple instructions • child will show increased listening skills, attention and task focus • child will have the communication and interaction skills to facilitate joint play with peers • child will have the language and communication skills to support real world/role play (doctor, nurse, builder, firefighter, policeman)
Independence	<ul style="list-style-type: none"> • child will have the communication and interaction skills required to request objects or help as required • child will have the language and communication skills necessary to support their understanding and ability to make choices between options offered (indoor/outdoor play, snack time, meal time, activities to access within free play etc)
Community Participation	<ul style="list-style-type: none"> • child will have the communication and interaction skills required to support the development of shared interaction, friendships and play with peers
Health	<ul style="list-style-type: none"> • child will be able to alert an adult at times when they are hurt or feeling unwell • child will have the communication skills required skills to convey basic feelings to others to facilitate emotional well being

Child will have reached expected outcomes in relation to EFYS ELG (40-60 months) upon transition from Early Years to Reception, with reference to Prime Areas of Learning for Communication and Interaction: Listening and Attention, Understanding and Speaking

Social, Emotional and Mental Health: Preparation for Adulthood Outcomes and Provision Early Years (0-4 Years)

Employability/Education	<ul style="list-style-type: none"> • child will have the social and emotional skills and resilience required to be able to adapt to change and new environments • child will be more able to regulate basic feelings; developing skills such as waiting to take a turn in an activity or when wanting to share news with an adult
Independence	<ul style="list-style-type: none"> • child will develop a growing awareness of independent living skills through real-world play (kitchens, DIY, cleaning) • child will be able to sit alongside peers to access meal times and snack times, developing the skills to pass out plates, cutlery and cups to their peers and to take a turn to serve themselves and others
Community Participation	<ul style="list-style-type: none"> • child will have social skills necessary to facilitate shared play and interaction with peers, developing a growing awareness of friendships to support emotional wellbeing and self-esteem • child will be able to recognise indicators of basic feelings in peers (happy and sad) and with support and modelling will respond accordingly at their developmental level (giving a hug to a peer who is crying for example) • With prompting, child will begin to develop an awareness of basic social conventions in interaction with other, for example, using please and thankyou when asking for or receiving things from others
Health	<ul style="list-style-type: none"> • child will attend necessary dental, medical and optical checks following parental direction and supervision • child will cooperate with self-care and personal hygiene routines with prompting and adult support as required • child will show awareness of basic feelings and will have the support and strategies required to promote resilience and emotional wellbeing

Child will have reached expected outcomes in relation to EFYS ELG (40-60 months) upon transition from Early Years to Reception, with reference to Personal, Social and Emotional Prime Areas of learning: Making Relationships, Self Confidence and Self Awareness and Managing Feelings and Behaviour

Physical, Sensory and Medical: Preparation for Adulthood Outcomes and Provision Early Years (0-4 Years)

Employability/Education	<ul style="list-style-type: none"> • Child will access the EY environment and activities in accordance with their physical capabilities, to support them to make progress towards early learning goals. N.B, for some children with complex medical/physical needs, alternative feeding plans will need to be considered following guidance from relevant professionals. • Child will dress and undress with increasing independence in accordance with their physical/medical needs.
Independence	<ul style="list-style-type: none"> • Child will be able to use the toilet independently in accordance with their physical/medical needs/diagnoses. • Child will participate in mealtime routines using cutlery with increasing dexterity and independence to feed themselves appropriately. N.B for some children
Community Participation	<ul style="list-style-type: none"> • Child will have social skills • Child will access community-based activities/clubs/groups in accordance with their physical/medical capabilities, to facilitate shared play and interaction and to support the development of friendships with peers. • Child will access visits/day trips as appropriate
Health	<ul style="list-style-type: none"> • Child will have reached expected outcomes in relation to EYFS ELG (40-60 months) upon transition from Early Years to Reception, with reference to Prime Areas of learning: Physical Development: Moving and Handling and Health and Self Care. • Child will attend regular medical, optical and visual checks to support good health. • Child will comply with self-care routines and medical routines to support good physical health. • Child will engage in regular physical exercise to maintain good physical health and support the development of gross motor skills. • Child will try a range of new foods offered to support the development of a balanced and healthy diet.

Child will have reached expected outcomes in relation to EFYS ELG (40-60 months) upon transition from Early Years to Reception, with reference to Personal, Social and Emotional Prime Areas of learning: Making Relationships, Self Confidence and Self Awareness and Managing Feelings and Behaviour