

Holbourn House Day Nursery & Pre-School
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Supporting Children with Special Educational Needs and Disabilities (SEND)

Our policy has been guided by the SEND code of practice 0-25 (updated 2020) and we will use this document as a tool/reference to ensure the code of practice is met.

A paper copy is available within the setting or alternatively search www.gov.uk/government/publications/send-code-of-practice-0-to-25

Our Aim:

Is to provide a setting where all children and parents including those with special educational needs are supported so that every child can reach their full potential. We ensure inclusive practise throughout all our activities aiming to create a fun, interesting and stimulating environment. (See admissions policy)

EYFS Link;

Providers must have arrangements in place to support children with SEN or disabilities. Maintained schools, maintained nursery schools and all providers who are funded by the local authority to deliver early education places must have regard to the Special Educational Needs Code of Practice

Our Practice

Bernadette Martin is the designated member of staff for Special Educational Needs and disabilities (SEND), She is the setting's INco and PANco too. Alison Pope is the designated SEND deputy and Rachel Martin as SENDco support and helps wherever needed.

The provision for children with SEND is the responsibility of all staff and we undergo regular self-reflection processes to ensure the effectiveness of high quality inclusive practice.

Children who have started attending Holbourn House with an existing diagnosis of a disability will have a PEEP (personal emergency evacuation procedure), HCP (Health care plan) and a risk assessment carried out as routine. These will be annually reviewed and updated if necessary. These systems are put in place to ensure the best, suitable and necessary care strategies are available and practised by all staff working with children with SEND.

Progress Check at Two

We are required to do a progress check on every child between the ages of 24 and 36 months. The progress check concentrates on 3 prime areas (EYFS) and must be shared with parent and carers. This process will help with early identification for children who may need additional support.

Assessments

Assessment plays an important part in helping parents, carers and practitioners to recognise children's progress, understand their needs, and to plan activities and support

We are required to carry out regular assessments on children to keep track of development and ensure children make progress. These assessments inform staff and flag any developmental needs, which can then be looked at in further detail. These assessments are shared with parents/ carers on completion to ensure transparency.

If additional needs are identified...

We can then ensure the effectiveness of our special educational needs provision by identifying individual needs in addition to or different from other children and we set in place small steps alongside strategies to help those children reach their full potential.

We will endeavour to make reasonable adjustments to practice and the environment to ensure it meets the needs of all children. If the child's needs still cannot be met then further discussions with parents/carers will take place about the future of their time at Holbourn House.

The steps for providing a pathway to Education, health and care for children with SEND;

- 1. Staff/family workers get to know the family and child/children in their group, this enables early intervention if those children's needs are more than or additional to other children in the setting.
- 2. Strong links and relationships between the setting and our families are vital to enhance a clear, open communication pathway between us both.
- 3. Be aware of child's needs, either by observations and assessments, information passed on by parents, outside agencies or other setting. This may include health plans, play plans, one page profiles, CDC reports etc...
- 4. We discuss and work closely to outline concerns and set informal targets.
- 5. If the child has not responded well to these arrangements a formal meeting with the child's parents will be organised to consider different strategies and ideas to ensure development.
- 6. A range of tried and tested strategies can be put into place Work station, choice basket, visual prompts, British sign language, intense programs of support, timed tasks, routine charts, pictures to aid communication.
- 7. Review dates will be made at the end of every meeting aiming for on a 6 weekly basis, however this would depend on the needs of the child.
- 8. All meetings will be recorded and strategies will be written on an Action, plan, do, review (A.P.D.R) form.
- 9. A small steps approach will be taken and targets will be set that are achievable.
- 10. Input from both the parents and the SENDco will be utilised to ensure that long-term goals are met.
- 11. The A.P.D.R will then be disseminated to all staff to ensure holistic practice and activities/resources/environment will be created to enable these statements to be met. Staff to acknowledge that small steps are vital for children to meet their goals.
- 12. The review process (every 6 weeks) will enable any adaptations to take place, new targets to be set and for steps to be broken down even smaller to make sure we have a continuous theme of success.
- 13. Make notes/observations and assessments of progress, sharing and celebrating success no matter how small it is.
- 14. We ensure children's needs are met fully; this may mean tapping into reserves, resources, high needs funding, extra staffing, equipment, training etc...
- 15. If a child is still having difficulty reaching the targets we will discuss and agree with the child's parents to contact other agencies.
- 16. A referral will be made to an agreed agency via the Northamptonshire county council website and advice can also be obtained from the Specialist Support Service.

- 17. These meetings will continue on a 6 weekly basis with all parties deciding on the best action to be taken.
- 18. A.P.D.R's will be considered and continued **if needed** as well as the targets agreed on during the 6 weekly meetings to ensure the setting keeps on target with the child's current needs/abilities.
- 19. Our SENDco ensures a smooth transition to and from other settings by passing on all documentation and knowledge about the child.
- 20. The SENDco will attend or lead TAF, CIN or EHA (Team around the family) meetings to ensure correct representation of the setting and the child.
- 21. The SENDco will liaise with other professionals involved with children with special educational needs and disabilities and their families.

Education Health Care Plan (EHC plan)

An EHC plan is for children and young people aged up to 25 who need more support than is available through special educational needs support. This plan will identify educational health and social needs.

Referrals can be made by: a Doctor, Heath visitor, Teacher, or nursery practitioner.

When a decision has been made to carry out an EHC assessment, information will be collated from all agencies involved and written into a draft plan. This plan will then be discussed and altered at a final review meeting; this then goes to the local authority for a final decision.

- We support parents with sources of independent advice.
- We liaise with other settings and schools.
- We provide resources to implement our SEND Policy
- We can provide advice and training for parents and staff.
- We raise awareness of any specialist skill the setting has to offer, e.g. British sign language trained staff.
- We have knowledge and understand the Equality Act (2010)

Glossary of terms:

SENDco = Special educational needs and disabilities coordinator – ensuring the rights and correct support for all children.

PANco = Physical activity and nutrition coordinator – responsible for leading an ethos and support of health and well being of all children, families and staff.

INco = Inclusion coordinator – making sure every child is and can be included in everything looking at innovative ways to tackle barriers.