



Milton Keynes
City Council

Ordinarily Available Provision.

Early Years

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Version 1

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What is Ordinarily Available Provision?

This local area Ordinarily Available Provision (OAP) document describes what should be available as part of universal good practice in our local early years settings for children with additional needs, or Special Educational Needs and Disability (SEND). The overarching approach is one of inclusion- and that small changes can have a big impact. Many approaches to support children with SEND are part of good quality practice for all.

The guidance is also designed to support early years providers in using the SEND Code of Practice 'graduated approach' to meeting need within a clear process of Assess, Plan, Do and Review. This cyclical approach allows early years practitioners to use their ordinarily available provision offer, and decide on the actions, approach and support needed for individual children. Clear reviews ensure consideration as to when it might be necessary to request specialist support from professionals.

The document identifies OAP within each SEND area of need as identified by the SEND Code of Practice. Please note that, for children who have an Autistic Spectrum Condition (ASC) and co-occurring sensory processing challenges, the ordinarily available provision can be found within the Communication and Interaction section.

This document has been created through collaboration between Milton Keynes Specialist Teaching Team, Milton Keynes Sensory Team, colleagues in both mainstream and specialist schools and early years settings, Health colleagues and SENDIAS (Special Educational Needs and Disabilities Information Advice and Support Service).

It will be reviewed twice per year (January and July), with updates as appropriate.

Working together in SEND – what the legislation tells us

This guidance is designed to support decision making for children causing us concern, because of delayed progress in learning and/or other areas of development.

The guidance has been written using:

SEND (Special Educational Needs and Disability) Code of Practice: 0-25 years, January 2015
Children and Families Act, 2014

Equalities Act, 2010

Teachers' Standards, 2012

Keeping Children Safe in Education, 2024

The guidance is to be used by staff in settings when identifying children and young people with SEND.

Staff should be aware of the need to continually monitor their response and subsequent provision for children with SEND due to their changing needs. Staff must work with children, and their parents/carers to plan, deliver and monitor the impact of the provision they make.

What is the local context in Milton Keynes?

SEND Joint Strategic Needs Assessment (JSNA) 2024

In line with national trends and population growth in the area, the overall number of children and young people with SEND in Milton Keynes is increasing and there is an expectation that the population of children and young people with SEND could grow from 2022/23 numbers of around 7500 to approximately 11,000 by 2030.

Milton Keynes has a slightly lower proportion overall of children and young people identified with SEND overall than other areas, at 14.4% compared to 17.3% nationally. However, there are variations between age groups, with rates of identified SEND key stage 3 in line with national, as opposed to key stages 1, 2 and particularly key stage 4 where rates are lower than national. Rates of EHCP's in Milton Keynes are growing more quickly than in other areas.

Boys are markedly more likely to be identified with SEND, as is the case across England. SEND may be identified slightly earlier in Milton Keynes than nationally, with SEND numbers peaking at age 9 compared to the national age of 10. The overall percentage of children with identified SEND declines through secondary school.

In the early years and reception, Speech, Language and Communication is the most identified area of need in Milton Keynes, and the number of children identified with this area of need is increasing. There is a lower than national rate of Autistic Spectrum Disorder identified in the early years, but this rate of identification increases in reception.

The rate of Specific Learning Difficulties makes up a higher proportion of need in the early years than other parts of England.

Milton Keynes has a higher proportion of school-age children identified as having Autistic Spectrum Disorder or Moderate Learning Difficulties as their primary need than in other areas of England. The gap is however closing in both cases, with identification of Moderate Learning Difficulties dropping in Milton Keynes to bring it closer in line with national rates, and Autistic Spectrum Disorder increasing nationally which is bringing Milton Keynes in line with national numbers. Across all age groups, Milton Keynes has a lower proportion than other national areas of children and young people with SEND who are identified as having Social, Emotional and Mental Health needs as their primary area of need.

SEND as defined by the SEND Code of Practice 2015:

The definition of Special Educational Needs is stated as follows:

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

A child of compulsory school age or a young person has a learning difficulty or disability if he or she: **I has a significantly greater difficulty in learning than the majority of others of the same age; or has a disability which prevents or hinders him or her from making use of facilities of a kind generally provided for others of the same age in mainstream schools or mainstream post-16 institutions.**” SEND Code of Practice: 0-25 years, 2015, p15

“For children aged two or more, special educational provision is educational or training provision that is **additional to or different from** that made generally for other children or young people of the same age by mainstream schools, maintained nursery schools, mainstream post-16 institutions or by relevant early years providers. For a child under two years of age, special educational provision means educational provision of any kind. A child under compulsory school age has special educational needs if he or she is likely to fall within the definition above or would so do if special educational provision was not made for them (Section 20 Children and Families Act 2014).” SEND Code of Practice: 0-25 years, 2015, p16

The EYFS Statutory Framework Nov 2024 states that

3.61 Early years providers must have arrangements in place to support children with Special Educational Needs and Disabilities (SEND). Maintained schools, academies and maintained nursery schools are required to identify a member of staff to act as Special Educational Needs Co-ordinator (SENCO) and other providers (in group provision) are expected to identify a SENCO. Maintained schools, academies and maintained nursery schools and all providers who are funded by the local authority to deliver early education places are required to have regard to the 0-25 SEND Code of Practice. Other providers may find it helpful to familiarise themselves with the early years section of the 0-25 SEND Code of Practice.

How might we identify SEND?

In identifying and supporting children with SEND, early years providers should be aware of the need for all pupils to access high quality teaching that is appropriately adapted and personalised. In addition, providers need to be aware of expectations for all practitioners, within the context of a setting wide approach to responding to children whose progress is causing concern, and who may have SEND

The Early Years Guide to the SEND Code of Practice 2015 (Pg 14) tells us that:

Where a child appears to be behind expected levels, or where a child's progress gives cause for concern, practitioners should consider all the information about the child's learning and development from within and beyond the setting, from formal checks, from practitioner observations and from any more detailed assessment of the child's needs.

From within the setting practitioners should particularly consider information on a child's progress in communication and language, physical development and personal, social and emotional development. Where any specialist advice has been sought from beyond the setting, this should also inform decisions about whether or not a child has SEN. All the information should be brought together with the observations of parents and considered with them.

A delay in learning and development in the early years may or may not indicate that a child has SEN, that is, that they have a learning difficulty or disability that calls for special educational provision. Equally, difficult or withdrawn behaviour does not necessarily mean that a child has SEN. However, where there are concerns, there should be an assessment to determine whether there are any causal factors such as an underlying learning or communication difficulty. 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, should be adopted

What else might be impacting on progress?

Before concluding a child has SEND the setting should consider, and plan a response to, any other contributory factors in exploring the reasons for delayed progress and or development. These factors can include:

- The quality of teaching
- Attendance
- The need for pastoral support (including any social care or health needs e.g.: Early Help, Children Social Care)
- Specific vulnerabilities impacting on the ability to learn and thrive in an educational setting: English additional language/ pupil premium/ children looked after/ asylum seekers/ travelling community/ physical or medical factors

A note about children with social care involvement:

Temporary behaviours of concern may be apparent during times of turbulence/trauma; and early years providers should be aware that these behaviours are often a result of circumstances and should not be viewed as a SEND in and of itself.

Four areas of need as defined in the SEND Code of Practice 2015

Needs are broken down into four broad areas- these give an overview of what should be planned for, and what actions should be taken. In practice, needs may cut across several different areas.

Communication and interaction

6.28 Children and young people with speech, language and communication needs (SLCN) have difficulty in communicating with others. This may be because they have difficulty saying what they want to, understanding what is being said to them or they do not understand or use social rules of communication. The profile for every child with SLCN is different and their needs may change over time. They may have difficulty with one, some or all of the different aspects of speech, language or social communication at different times of their lives.

6.29 Children and young people with ASD, including Asperger's Syndrome and Autism, are likely to have difficulties with social interaction. They may also experience difficulties with language, communication and imagination, which can impact on how they relate to others

Cognition and Learning

6.30 Support for learning difficulties may be required when children and young people learn at a slower pace than their peers, even with appropriate differentiation. Learning difficulties cover a wide range of needs, including moderate learning difficulties (MLD), severe learning difficulties (SLD), where children are likely to need support in all areas of the curriculum and associated difficulties with mobility and communication, through to profound and multiple learning difficulties (PMLD), where 98 children are likely to have severe and complex learning difficulties as well as a physical disability or sensory impairment.

6.31 Specific learning difficulties (SpLD), affect one or more specific aspects of learning. This encompasses a range of conditions such as dyslexia, dyscalculia and dyspraxia

Social, emotional and mental health difficulties

6.32 Children and young people may experience a wide range of social and emotional difficulties which manifest themselves in many ways. These may include becoming withdrawn or isolated, as well as displaying challenging, disruptive or disturbing behaviour. These behaviours may reflect underlying mental health difficulties such as anxiety or depression, self-harming, substance misuse, eating disorders or physical symptoms that are medically unexplained. Other children and young people may have disorders such as attention deficit disorder, attention deficit hyperactive disorder or attachment disorder.

6.33 Schools and colleges should have clear processes to support children and young people, including how they will manage the effect of any disruptive behaviour, so it does not adversely affect other pupils

Sensory and/or physical needs

6.34 Some children and young people require special educational provision because they have a disability which prevents or hinders them from making use of the educational facilities generally provided. These difficulties can be age related and may fluctuate over time. Many children and young people with vision impairment (VI), hearing impairment (HI) or a multi-sensory impairment (MSI) will require specialist support and/or equipment to access their learning, or habilitation support. Children and young people with an MSI have a combination of vision and hearing difficulties. Information on how to provide services for deafblind children and young people is available through the Social Care for Deafblind Children and Adults guidance published by the Department of Health (see the References Section under Chapter 6 for a link).

6.35 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 0-25 years 2015)

What do the Teacher's Standards (2012) tell us?

'As the teacher of a learner with special educational needs and/or disabilities (SEND), you have the opportunity to make a significant difference. Enabling all learners to do well within our inclusive school system is every teacher's responsibility.' (Whole School SEND, Jan 2024, Teacher Handbook: SEND)

Every teacher is a teacher of SEND is clear message from the SEND Code of Practice and is supported by each of the Teacher's Standards.

For example, Teacher Standard 5 states that, 'A teacher must adapt teaching to respond to the strengths and needs of all pupils'. This means that all teachers must:

- know when and how to differentiate appropriately, using approaches which enable pupils to be taught effectively
- have a secure understanding of how a range of factors can inhibit pupils' ability to learn, and how best to overcome these
- demonstrate an awareness of the physical, social and intellectual development of children, and know how to adapt teaching to support pupils' education at different stages of development
- have a clear understanding of the needs of all pupils, including those with special educational needs; those of high ability; those with English as an additional language; those with disabilities; and be able to use and evaluate distinctive teaching approaches to engage and support them

This would also include:

- quality first teaching (QFT) with suitable adjustments and the universal offer as the focus of provision
- implementing a graduated approach
- ensuring access to the class teacher during lessons that is fair and equitable
- working closely with colleagues, families and pupils to understand barriers and identify effective strategies

As the EEF in their recommendations for SEN in mainstream schools state: 'To a great extent, good teaching for pupils with SEND is good teaching for all'.

One of the most impactful experiences for learners with SEND (special educational needs and/or disabilities) is to have access to high quality, inclusive teaching. A significant proportion of the needs that teachers encounter in the mainstream classroom can be met through High Quality Teaching. This means removing barriers to learning, getting to know and understand individual learners, and ultimately bringing the graduated approach to life (Whole School SEND, Jan 2024, Teacher Handbook: SEND).

Section 1

Expectations of all non-maintained and maintained early years providers

This section outlines the expectations on all educational settings, according to the needs of the child.

The key principles of the SEN Code of Practice should be applied in all settings and throughout the child’s learning journey from birth to 5 years:

- The views, wishes and feelings of the child and the child’s parents.
- The importance of the child and parents, participating as fully as possible in decisions, and being provided with the information and support necessary to enable participation in those decisions.
- The need to support the child, and the child’s parents in order to facilitate the development of the child and to help them achieve the best possible educational and other outcomes, preparing them effectively for adulthood. ([SEND Code of Practice](#))

Broadly speaking much of this section will be an integral part of the setting’s provision for all children. It outlines some of the practices and adaptations that are part and parcel of quality first teaching. The provision and strategies outlined in this section may be required for children with SEND and/or disabilities but will undoubtedly be of benefit to all children in the setting.

Area	Expectations	How
SEND and legislation	<p>All staff should have an awareness of the SEND Code of Practice and what it means for their day to day practice- including how the graduated response to identifying and meeting need is delivered within their setting.</p> <p>The SenCo’s knowledge of the COP should allow him/her to appropriately support and</p>	<p>SEN Code of Practice SEND code of practice: 0 to 25 years - GOV.UK (www.gov.uk)</p> <p>Early Years guide to SEN Code of Practice SEND: guide for early years settings - GOV.UK (www.gov.uk)</p> <p>SEND Assessment Guidance and Resources: Help for early years providers : SEND assessment guidance and resources (education.gov.uk)</p> <p>SenCos undertake the Level 3 SenCo Award and/or local MK Role of the Early Years SenCo to ensure knowledge remains up to date: Early Years SENCO - Level 3 Best Practice Network</p> <p>All staff have access to the local centralised training offer- and relevant courses are attended:</p>

	challenge staff regarding inclusive practice.	Centralised training for professionals Milton Keynes City Council (mksendlocaloffer.co.uk)
	All setting staff should be familiar with relevant legislation such as the definition of disability within the Equality Act 2010, and understand what it means for their day to day practice.	Equality Act 2010: Definition of disability under the Equality Act 2010 - GOV.UK (www.gov.uk)
	All staff should be familiar with the Milton Keynes Early Years Provider's Guidance, and understand what it means for their day to day practice as well as how it links to national legislation and guidance Settings should update staff as appropriate on issues relating to SEND, as disseminated via the Early Years Essential (EYE)	EYs Providers Guidance and EYE: Useful early years information Milton Keynes City Council (milton-keynes.gov.uk) Attendance at half termly SEND Team/SenCo meetings- if invite not received email SENDsupport@milton-keynes.gov.uk

Area	Expectations	How
Safeguarding Environment	Establish a safe environment	<p>Read the DfE Early Years Foundation Stage (EYFS) for childminders/for group and school-based providers to ensure you are compliant with the safeguarding and welfare requirements</p> <p>Read Ofsted guidance Early Years inspection handbook</p> <p>Providers must have regard to the government's statutory guidance 'Working Together to Safeguard Children' and to the 'Prevent duty guidance for England and Wales'.</p> <p>Maintained nursery schools must have regards to 'Keeping Children Safe in Education' (KCSIE) statutory guidance; other</p>

		childcare providers may also find it helpful to refer to this guidance.
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Area	Expectations	How
<p>Inclusive environment</p>	<p>Establish an inclusive environment for children grounded in mutual respect.</p> <p>Early years settings should be proactive at addressing barriers to inclusion such as negativity, conscious and unconscious bias, and stereotyping.</p> <p>Early years settings will promote equality of access for all children in their care and must follow their legal responsibilities under the Equality Act (for example the provisions on reasonable adjustments).</p> <p>Early years settings are asked to actively promote British values, which are implicitly embedded within the EYFS.</p> <p>Whole setting development of positive attitudes which nurture collaborative approaches.</p> <p>Settings will actively work with parents and carers as a key aspect of good practice, with clear and regular communication giving parents a voice and</p>	<p>Providers may find it helpful to familiarise themselves with the early years section of the SEND Code of Practice and the Early Years: guide to the 0-25 SEND code of practice.</p> <p>Place the child’s views at the centre. Remembering that behaviour is a communication, and practitioners will have an active curiosity about what a child is trying to communicate to them.</p> <p>Implement clear relational strategies.</p> <p>Adopting a ‘can-do’ approach which reaches beyond statutory policy and legislative requirements to develop anti discriminatory attitudes and positive practice.</p> <p>Staff use and model respectful language. All language needs to provide hope, promote engagement and have high ambition.</p> <p>Promote equality and diversity by providing multicultural resources and displaying pictures/posters and providing books that promote positive images of race, cultures, ages, abilities and gender. Promote positive attitudes to diversity and difference. Encourage children to value aspects of their own lives and those of other people. Ensure that all children and their families are listened to and respected and feel included.</p> <p>Special Educational Needs and/or Disability (SEND) in the Early Years Pen Green Children's Centre</p>

	ensuring that the child is at the heart of the process.	
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Area	Expectations	How
Assessment and monitoring	2 year old progress checks are undertaken- and discussion is had around any next steps with parents/carers	Progress check at age 2 - GOV.UK (www.gov.uk)
	SenCo is aware of referral routes into Health, Social Care and Education, and can support other staff with signposting for support and advice	<p>SALT referral: Milton Keynes Early Years Speech and Language Therapy Team :: Central and North West London NHS Foundation Trust (cnwl.nhs.uk)</p> <p>Occupational Therapy advice/referral: Milton Keynes Children and Young People's Occupational Therapy Team :: Central and North West London NHS Foundation Trust (cnwl.nhs.uk)</p> <p>SEND Local Offer: Early Years (0-5 years) Milton Keynes City Council (mksendlocaloffer.co.uk)</p> <p>SEND Support Line: 01908 252222 SENDSupport@milton-keynes.gov.uk</p> <p>Children with Disabilities Social Care Team: 01908 253617 (Mon-Thurs 9.30am to 5pm and Fri 9.30am to 4.30pm) / Emergency Social Work Team: 01908 265545 childrendisabilityteam@milton-keynes.gov.uk</p> <p>Sensory Team: https://www.mksendlocaloffer.co.uk/education-and-send/what-send-team-does/sensory-team</p> <p>Children and Family Centres: Children and Family Centres Milton Keynes City Council (milton-keynes.gov.uk)</p> <p>Health Visiting Team (under 5) and School Nursing Team (over 5) Milton Keynes 0-19 Universal Health Service (Health Visitors and School Nurses) :: Central and North West London NHS Foundation Trust (cnwl.nhs.uk)</p>

	<p>SenCo knows how and where to access resources that support assessment- and can support other staff to use these.</p> <p>All staff use observation effectively to understand what a child can do and what their next steps are- and use transition periods to determine how children are settling.</p>	<p>Early Years documents Milton Keynes City Council (mksendlocaloffer.co.uk): Information regarding assessment, and tools that can help, and FACT and FACT+</p> <p>Birth to 5 Matters: Birth To 5 Matters – Guidance by the sector, for the sector</p> <p>A Celebratory Approach to Assessment in the EYs: A Celebratory Approach to SEND Assessment in the Early Years Pen Green Children's Centre</p> <p>Developmental Journals: Untitled (councilfordisabledchildren.org.uk)</p> <p>Cherry Garden School assessment tool-Branch maps – Cherry Garden School</p> <p>Sensory Checklist: Early years support and advice Milton Keynes City Council (mksendlocaloffer.co.uk)</p>
	<p>Staff have clear means of assessing what children can do, and ensuring that this is regularly monitored/reviewed.</p>	<p>Milton Keynes Early Years SEND Support Plan: EY SSP Feb 2024 update.docx (live.com)</p> <p>Use of settings own formats for recording and monitoring progress, including any APDR and/or trackers as appropriate for context of setting</p>
	<p>All staff have a sound knowledge of child development and use this to inform their practice</p>	<p>Mary Sheridan’s newly revised book From Birth to 5 Years is a helpful tool for newer members of staff</p>

Area	Expectations	How
<p>Staff skills and training</p>	<p>All staff have a sound understanding of child development and can use this to assess and plan for children's needs</p>	<p>https://educationendowmentfoundation.org.uk/education-evidence/early-years</p> <p>A Celebratory Approach to SEND Assessment in the Early Years Pen Green Children's Centre</p>
	<p>Manager to ensure staff have appropriate qualifications and encourage continued professional development for all</p>	<p>All staff to have a full and relevant EY qualification, as on the approved DfE list.</p> <p>Practitioners to actively seek out training to maintain skills and knowledge as part of their ongoing CPD (continuing professional development).</p> <p>Milton Keynes Early Years Training:</p>

		Early years training Milton Keynes City Council (milton-keynes.gov.uk) Milton Keynes Centralised Training: Centralised training for professionals Milton Keynes City Council (mksendlocaloffer.co.uk)
	All practitioners make a positive contribution to the progress of all children within the setting	Additional adults are deployed proactively in the environment and their impact on the child/ren is monitored carefully to ensure progress is made. Support is used sensitively to encourage and promote independence.
	Staff collaborate and have effective links with other relevant outside agencies and specialists.	Early years support and advice Milton Keynes City Council (mksendlocaloffer.co.uk) SEND support offer leaflet 2024 EPS.docx Staff know when and how to refer for extra support or advice. The setting is aware of, and regularly communicate with, any other professionals who are involved with each child. Advice received from other professionals is used to inform next steps and provision

Area	Expectations	How
Transitions	The setting have a transition policy that supports children starting their setting- and clearly demonstrates their approach.	Clear documented transition process to support new starters that is delivered with a warm welcome. Building a warm and a secure relationship with a key person is crucial for the child, and parents should feel involved and consulted. Information sharing should include how the child communicates their needs, e.g. when they are tired or hungry. Gradual settling in approaches for those children who need them, with clear review points. Staff access the SEND Support Service SENDsupport@milton-keynes.gov.uk to request advice regarding new starters- this can provide reassurance to all and allows concerns to be resolved.

	<p>Setting know how to prepare children for change and allow for this within setting routines,</p>	<p>Thought given to change within the setting and how this will be communicated/supported e.g.: new staff, sudden changes to routines, special events e.g.:</p> <ul style="list-style-type: none"> • Giving warnings • Use of visuals • Time to process • Use of safe spaces <p>Use of stories and resources to support children in order to practice change</p> <p>A provision offer than is predictable but not rigid- and allows for practice with flexibility</p>
	<p>Transition planning into school is undertaken by the SenCo and key staff</p> <p>Planning is undertaken in a strategic manner by the setting, taking into account priority SEND needs</p>	<p>Staff and parent relationships need to be positive to ensure that this information is shared in order that the appropriate support is offered. Ideally parents, including fathers, should be involved in any planning as parents have a wealth of knowledge that professionals can draw on.</p> <p>Contact made with receiving school, and any professionals involved as appropriate (e.g.: ensure new school have received SALT Communication Passport).</p> <p>Receiving school is invited to come into the setting to observe a group of children/individual; and school staff may be invited to build relationships with children (leading a story session for example).</p> <p>Paperwork is transferred in a timely fashion</p> <p>Practical considerations such as use of local school uniforms/badges; photo books of key staff to share</p> <p>Local Offer information to support transition planning, including practical preparation: Starting or changing school and transition support Milton Keynes City Council (mksendlocaloffer.co.uk)</p>
<p>We should recognise that all children, can be vulnerable at times of change, particularly those with additional needs e.g. those with a Special Educational Need (SEND) or a looked after child. Planning for these children will need additional, flexible support.</p>		

Area	Expectations	How
<p>Working in partnership with parents/carers</p>	<p>Transition Planning into setting: Staff should gather as much information as they can from families, prior to starting in the</p>	<p>Consider home visits and settling in sessions.</p> <p>All About Me- child's views: AA My Inclusion Plan.docx (live.com)</p>

	<p>setting so that they can begin to build a picture: Other settings attended Likes/dislikes of the child</p> <p>Professionals involved if needs already identified</p> <p>What parents think their child may need support with; any concerns if the child has needs</p>	<p>Encourage parents to bring their child along when looking around the setting.</p> <p>Registration period to start building a bond and relationship with the child and their parents.</p>
	<p>Staying in touch with parents:</p> <p>Parents know how they can access information, advice and support about SEND</p>	<p>Parents and carers are signposted to www.milton-keyneslocaloffer.org. This should also be referenced on the early years provider's website.</p> <p>Parents and carers are aware of the range of communication channels available for sharing information about their child: e.g. apps, online tools, communication books- and can use them successfully</p>
	<p>Speaking to parents regarding any SEND:</p> <p>Settings should consider who is best placed to raise concerns with parents/carers where they feel a child might have SEND.</p> <p>Settings should also consider how best to manage these sensitive conversations e.g.: where, when and with whom.</p> <p>Regular reviews of progress with parents to share achievements and agree next steps for development</p>	<p>SenCo and keyworker to work collaboratively</p> <p>Use of assessments, observations to support these conversations</p> <p>Dates that are planned in advance so that parents can plan for these and get the most from them</p>
	<p>Parents feel that they are welcome to share concerns, ask questions or enquire about the next steps for their</p>	<p>Open door policy/clearly communicated arrangements for parents to engage in both informal conversations and more formal discussions about their child</p>

	child's development and education	
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Area	Expectations	How
Physical environment	<p>Children's views are at the centre of planning and routinely sought to inform development, such as:</p> <p>Physical or sensory adaptations that they may require.</p> <p>Independent access to environment/ resources</p> <p>Have established practices for risk assessment keeping children both safe and included.</p> <p>Ensure activities and resources are at child height and accessible and use resources which can be moved and used in a variety of ways.</p> <p>Extra-curricular activities and educational visits are planned to fully include children with SEND, including those with social, emotional, and mental health and physical disabilities.</p>	<p>Settings should complete an access audit and Early Years providers that are maintained by a local authority such as maintained nursery schools, are required to produce an accessibility plan. They should publish and routinely review their accessibility plan.</p> <p>Consider MK support for hearing, vision, or multi-sensory impairment: 01908 669735 ext 147 Sensory Team Milton Keynes City Council (mksendlocaloffer.co.uk)</p> <p>Contact SENDsupport@milton-keynes.gov.uk for advice in this area.</p> <p>If child known to Sensory Team- contact for support</p>

Adults admire their environment; they can think about it and remember it- but a child absorbs it. The things he sees are not just remembered; they form part of his soul. He incarnates in himself all the world around him that his eyes see and his ears hear.

Maria Montessori

Section 2- Areas of need

Communication and Interaction creating a communication friendly environment

There are two important factors that are key to supporting a child's communication development; the environment they are in and the adults they are interacting with.

An effective communication partner supports the child's communication development through the use of **Adult-child interaction strategies** to enable two way interactions (including preverbal, non-verbal, communication symbols, signing and verbal interactions). Adults are able to support children to take opportunities to initiate interactions and are able to positively respond to all communication attempts (both verbal and non verbal) to enable interactions.

Some children are bilingual from birth because their families have talked to them in more than one language. Some children will be acquiring English as an additional language (EAL). As with their first language, this needs to be learnt in a context, through practical meaningful experiences and interaction with others. These children may spend a long time listening before they speak English and will often be able to understand much of what they hear, particularly where communication through gesture, sign, facial expression and using visual support is encouraged. Having a home language(s) that is not English does not cause speech, language and communication difficulties. Families should be encouraged to continue using their home language(s) with their child.

A communication friendly environment is a space that encourages and promotes good communication by supporting speaking and listening skills, emotional well-being, physical development and engagement. When creating a communication friendly environment, it is important to consider some of the following areas:

- **Layout** - Consider the layout of the environment; Is there opportunity for individual play and group play? Are there quieter, cosy areas that children can access when they need some quiet time?
- **Lighting** – How bright is your room? Bright lights can be distracting. Can you use more natural light? Can your space offer darker areas of the room?
- **Space** – Is there adequate space Children can become frustrated and feel overwhelmed in small, busy areas. Does the environment offer children enough space?
- **Choice**- are there opportunities for children to make choices independently? When given choices children can feel more in control of their play and are more likely to comment on what they are doing. Providing too many choices can also make the children overwhelmed and lose interest.
- **Noise Levels** – Is your environment loud? Have an echo? Consider creating an area where sound can be absorbed to provide a space for children to be able to access a quiet area.

- **Visual Aids** – do you have visual support that is accessible to the child throughout the day? Visual aids can be used to support within the daily routine to help the child to understand what is happening. Is the child able to use these to communicate effectively with staff and children?
- **Visual distraction** - Too many visuals can be a distraction for children. Are there lots of distractions on your walls/hanging from the ceilings? Consider having an area for visuals to hang from the ceiling rather than across the whole space. Ensure there are areas that are free from visuals; Children who are distracted by their surrounding will have difficulties maintaining their attention and listening.

Identified barrier and/or need	Provision and/or strategies: approaches, adjustments and specific interventions expected to be made by EYs providers
<p>Difficulties with attention and listening skills</p>	<p>Use the child’s name to gain their attention.</p> <p>Get face to face with the child to interact with them at their level</p> <p>Play alongside and interactively with me to extend my focus</p> <p>Keep instructions short and simple.</p> <p>Use highly motivating activities/items that they enjoy to establish and support to extend their attention.</p> <p>Provide regular, short breaks</p> <p>Use visual prompts such as pictures, photographs, puppets to support the child’s attention.</p> <p>Consider use of timers, so they know they only have to focus for a comfortable amount of time.</p> <p>Play lots of listening games with actions</p> <p>Consider a hearing referral</p> <p>Advice and resources :: Central and North West London NHS Foundation Trust (cnwl.nhs.uk) select `looking and listening` tab.</p>
<p>Difficulties understanding what is being said to them</p>	<p>Get down to the child’s level to gain their attention</p> <p>Ensure you have engaged the child’s attention before talking to them</p> <p>Think about the environment and how to limit any distractions.</p> <p>Use facial expressions, intonation and non-verbal communication when you interact with the child.</p> <p>Provide the child with additional time to process and understand what is being communicated</p>

	<p>Support learning and understanding through songs, rhymes and stories with actions</p> <p>Use simple language to match the child's level of understanding</p> <p>Provide choices rather than using open questions.</p> <p>Use actions/gesture alongside spoken language to support understanding.</p> <p>Use visuals such as objects of reference, pictures, Now and next boards, visual timetables, social stories.</p> <p>Break down longer instructions to give only one instruction at a time</p> <p>Limit the number of questions used; try to comment on what the child is doing rather than questioning.</p> <p>Use lots of visual prompts including non-verbal communication to support spoken language.</p> <p>Advice and resources :: Central and North West London NHS Foundation Trust (cnwl.nhs.uk) select `understanding` tab.</p>
<p>Difficulties using language to express themselves</p>	<p>Comment on the child's interests matching the complexity of their language e.g. if the child uses one word to communicate, comment on their play using 1-2 words</p> <p>Repeat and expand on what the child has said by repeating what they have said and adding a word.</p> <p>Allow the child time to process and respond; do not interrupt or guess what they are trying to say before they have finished.</p> <p>Positively respond to all of the child's attempts to communicate verbally</p> <p>Demonstrate active listening so that the child knows you are interested.</p> <p>Offer the use of alternative methods of communication such as pictures and signing.</p> <p>Following the child's lead and interests</p> <p>Understand the child's behaviour may be a form of communication</p> <p>Support extension of the child's conversations by asking questions to keep the conversation going.</p> <p>Use interesting items or activities as motivators to stimulate conversation</p> <p>Model the use of correct words and grammar when talking with the child.</p>

	<p>Advice and resources :: Central and North West London NHS Foundation Trust (cnwl.nhs.uk) select `talking` tab.</p>
<p>Difficulties with speech sounds</p>	<p>Model language – reflect back correct speech rather than correcting the child.</p> <p>Model accurate pronunciations; emphasizing the key sound that the child may have made an error with.</p> <p>Develop sound awareness through games such as identifying sounds they can hear in the environment or that you make from behind a barrier.</p> <p>Engage in early phonological games with the child such as `I spy`, `sound treasure hunts`, `odd one out`</p> <p>Advice and resources :: Central and North West London NHS Foundation Trust (cnwl.nhs.uk) select `speech sounds` tab.</p>
<p>Difficulties with social interaction</p>	<p>Support the child with early interaction by gaining their attention.</p> <p>Be at the child's level</p> <p>Provide time for the child to respond.</p> <p>Follow the child's lead</p> <p>Support the child to engage by changing your tone of voice, body language, facial expressions.</p> <p>Use the child's name and a motivating toy to gain their attention.</p> <p>Reward the child when they look at/engage with you with motivating activities such as motivating toys like bubbles, spinning tops, puppets.</p> <p>Play alongside the child with a parallel set of resources then copy their actions. You can then turn this into a turn taking game.</p> <p>Initiate people games e.g. ready steady go, peek a boo.</p> <p>Follow the child's interests and engage in what they want to play with. Gradually introduce new areas of play by ensuring the resources and play opportunities are interesting and motivating for the child</p> <p>Offer the child choices of what to play</p> <p>Support the child to interact with the children they choose and accept when they do not want to play.</p> <p>Model and promote positive relationships that are trusting and caring.</p> <p>Be reliable and consistent</p>

	<p>Assess and adjust the physical environment to ensure the child is physically and emotionally safe.</p> <p>Consider use of social stories.</p> <p>Model turn taking in conversation.</p> <p>Advice and resources :: Central and North West London NHS Foundation Trust (cnwl.nhs.uk) select `social interaction and communication` tab.</p>
<p>Physical difficulties with eating or drinking in terms of chewing and swallowing.</p>	<p>Encourage child to engage in messy play activities to support exploration of different textures, sights, tastes and smells of foods.</p> <p>Use consistent routines around mealtimes – e.g. wash hands, help lay the table, sit at table, eat meal, help clear table</p> <p>Allow your child the choice to accept or reject food</p> <p>Praise your child for positive eating and mealtime behaviours</p> <p>Milton Keynes Early Years Complex Needs Speech and Language Therapy Team :: Central and North West London NHS Foundation Trust (cnwl.nhs.uk) – select `resources` and then `eating and drinking`.</p>
<p>Difficulties with using fluent speech.</p>	<p>Allow the child time to talk – don't hurry or interrupt them.</p> <p>Wait, listen and take turns when talking together.</p> <p>Do not draw attention to how they are talking; focus and respond to what they are saying.</p> <p>Avoid direct questions; offer choices or use comments instead of questions to generate interactions.</p> <p>Speak to your child in short, simple sentences, allowing pauses between the sentences, thus slowing your rate of speech.</p> <p>Follow your child's lead. Talk when he/she wants to talk, but find ways of having fun and building confidence that doesn't necessarily involve talking, e.g. drawing, making something.</p> <p>British Stammering Association: www.stamma.org</p> <p>Action for Stammering Children: www.actionforstammeringchildren.org/michael-palin-centre/</p> <p>Useful Video – 7 Top Tips for Talking with the Child who Stammers www.youtube.com/watch?v=wTpckAufNDE</p>
<p>Difficulties speaking and interacting in certain settings e.g. in</p>	<p>Reduce all pressure to use verbal language. Accept nonverbal communication (e.g. pointing) as the child's way of communicating.</p>

<p>public/nursery when known to be able to speak and interact freely in other environments e.g. home</p>	<p>Avoid overuse of questions and open questions like ‘What have you done today?’</p> <p>Replace questions with comments – instead of saying ‘Have you got new shoes on?’, you could say ‘Wow, nice new shoes!’</p> <p>Offer choices and show the objects so the child can point or reach.</p> <p>Promote activities with peers or unfamiliar adults where talking is not essential (e.g. picture lotto games, Playmobil, Mr Potato Head, songs with actions).</p> <p>www.selectivemutism.org</p> <p>Advice and resources :: Central and North West London NHS Foundation Trust (cnwl.nhs.uk) – select ‘selective mutism’ tab</p>
<p>Difficulties with sensory processing and feeling overwhelmed.</p>	<p>Carefully watch to see if there is anything in particular that overwhelms the child – how do they react to noise, smell, touch, light, colour, tastes? Which areas of the environment do they avoid or feel comfortable in?</p> <p>Create a calming space so that they can take themselves away from the noise and bustle of the room. A quiet corner with a few cushions, a blanket and a fabric drape to make it cosy is ideal. A pop-up tent or a table with a cover over it to create a den also works.</p> <p>Take their needs into account when deciding what to put in the calm den – put in some sensory resources, but not lots of toys.</p> <p>Sensory checklist and other useful information- Useful resources Milton Keynes City Council (mksendlocaloffer.co.uk)</p>
<p>Useful Resources:</p> <p>Learning to talk 1 to 2 years - NHS (www.nhs.uk)</p> <p>BBC Tiny Happy People</p> <p>MK 0-19 service (Health visitors) Children’s Universal Health Services Milton Keynes Childrens Health (cnwl.nhs.uk)</p> <p>www.speechandlanguage.org.uk</p> <p>Milton Keynes local offer - Milton Keynes City Council (mksendlocaloffer.co.uk)</p> <p>Milton Keynes Children’s and Families Centres - Children and Family Centres Milton Keynes City Council (milton-keynes.gov.uk)</p> <p>Milton Keynes Speech and Language Therapy service - www.mkchildslt.co.uk</p>	
<p>Suggested Training:</p> <p>Training courses - Speech and Language UK: Changing young lives</p> <p>Milton Keynes Early Years Communication training - please contact the speech and language therapy department for upcoming dates</p> <p>Signalong training – please contact the speech and language therapy department for upcoming dates</p> <p>LA SEND - Milton Keynes City Council (mksendlocaloffer.co.uk)</p>	

Cognition and Learning (play skills and early learning experiences)

In the Early Years we might consider a child’s cognition development to be linked to how they play, explore, problem solve and learn. This area covers literacy, mathematical understanding, and developing a knowledge of the world around them.

Children in the early years learn through play and exploration of their environment, mediated by adults who they know well. As children reach different developmental stages, they will start to display recognised styles of play such as sensory play, solitary play, onlooker play, parallel play, associative play, and cooperative play. When children play, they engage their imagination, problem-solving skills, and creativity.

The following can and should be applied to children aged 0-5 years.

Identified barrier and/or need	Provision and/or strategies: approaches, adjustments and specific interventions expected to be made by EYs providers
<p>Not playing with resources in the way we might expect for the child’s age</p>	<p>Observe and consider where the child’s development is at- how does their play differ from what you might expect at this age, considering the broad developmental norms we see in early years:</p> <p>DfE guidance Sep 2024- Help for early years providers : SEND assessment guidance and resources (education.gov.uk)</p> <p>Development Matters: Development Matters - Non-statutory curriculum guidance for the early years foundation stage (publishing.service.gov.uk)</p> <p>Birth to 5 Matters: Birth To 5 Matters – Guidance by the sector, for the sector</p> <p>Mary Sheridan- <i>From Birth to 5 Years</i> (2021)</p> <p>Julian Grenier- <i>Working with the revised Early Years Foundation Stage: Principles into Practice</i> (2021)</p> <p>If in a day nursery environment, use toys/resources from other age groups as needed to ensure there are developmentally appropriate resources available for all.</p> <p>Use child’s interests to make activities as exciting as possible, to build engagement. Provide opportunities to repeat, embed and extend favourite activities.</p> <p>Adapt with child’s changes, ensure the environment is inviting and engaging to meet their new interests.</p> <p>Store resources in a predictable fashion and ensure they are accessible, maximising children’s independence.</p>

	<p>Create a calm, quiet and distraction free area to introduce and model new skills – this can be small but will have a significant impact.</p> <p>Plan in independent time periods for children who are over reliant on adults. Give children a visual cue to show that the practitioner is busy at the moment but will be available soon e.g. practitioner may wear a special hat.</p> <p>A diverse range of picture and story books including those that offer sensory input such as touchy-feely books.</p> <p>Use ‘copy boxes’ of duplicate items, using which adults can model play sequences.</p> <p>Offer challenges, e.g.: encouraging them to think and interact e.g., giving the child a yoghurt pot but not a spoon, give a paint pot but not a brush.</p> <p>Copy children’s play and pause to see if the child responds. Model and extend play and then introduce a new action e.g. stirring the tea during a tea party.</p> <p>MK Occupational Therapy- Play Skills: Word document template (cnwl.nhs.uk)</p> <p>Sensory_play_Activities.pdf (mksendlocaloffer.co.uk)</p> <p>Play_Strategies_Exploratory_Play.pdf (cnwl.nhs.uk)</p> <p>MK SEND Local Offer- Messy Play Activities: Word document template (cnwl.nhs.uk)</p>
<p>Not retaining skills previously observed</p>	<p>Provide many regular opportunities for over learning new skills- by presenting learning in different ways, to allow for children to revisit.</p> <p>Use visual support materials to aid understanding. Choose materials based on the child’s level of understanding – objects of reference, photographs and then symbols.</p> <p>Tasks should be broken down into small achievable steps- use of backward and forward chaining, and task analysis.</p>
<p>Limited curiosity or interest in what is around them</p>	<p>Use the child’s interests, and present learning that ignites curiosity and engagement.</p> <p>Time for children to explore independently within a safe environment offering them time, but also intervening sensitively to extend their play.</p> <p>Easily accessible play items that children can explore and discover independently.</p> <p>Choice boards or books help children to choose activities and communicate what they would like to do.</p> <p>First/then or now/next systems to help children to access activities they wouldn’t usually experience, this also extends attention and focus</p>

<p>Limited attention/focus for learning</p>	<p>Reduce the group size for some carpet activities e.g. story time. Try to reduce or minimize background noise/activity during group times.</p> <p>Children may find it challenging to stay in the group for a long period of time, so have realistic expectations for individual children</p> <p>Carefully plan where areas are placed in the room. For example, have the book area in a corner away from the outside door. Be aware of throughfares as these can be highly distracting.</p> <p>Use natural resources e.g. wood, metal, real leaves, mud as these can offer opportunities for more language to be used, sensory engagement to support listening & attention & something more interesting to talk about than plastic equipment.</p> <p>Use shorter, more interactive stories and use visual props to extend attention and help the child to stay focused</p> <p>Reduce distractions when playing with the child e.g. cover some activities up with a cloth or sheet e.g. computer/water tray.</p> <p>First/then or now/next systems to help children to access activities they wouldn't usually experience, and this also extends attention and focus</p> <p>Workstations/structure for learning for children to focus on short task and brings a clear structure to activities. Start with one task and increase over time. This gives children chance to practice listening and attention skills and also develop confidence to try new activities.</p> <p>For ideas on how to develop attention and build on play: Advice and resources :: Central and North West London NHS Foundation Trust (cnwl.nhs.uk)</p>
<p>Limited evidence of problem solving; gives up easily</p>	<p>Practitioners to model and to wonder out loud about possible problem solving solutions.</p> <p>Ensure activities are available for the child's level of need to achieve, as well as those that challenge.</p> <p>Allow children thinking time. Observe, wait and listen (OWL) rather than taking the lead in the child's play</p> <p>MK Occupational Therapy- Supporting Attention: Word document template (cnwl.nhs.uk)</p>
<p>Uneven profile across EYFS areas</p>	<p>Support schematic play patterns to build on individual children's interests, therefore taking part in powerful learning opportunities through sustained shared learning experiences</p> <p>Flexible indoor and outdoor spaces arranged with accessible resources where children can explore, transform, build, move and role play.</p>

	<p>Repeat and revisit activities particularly in small groups as this can offer reassurance, and build confidence</p> <p>When making resources available, think about stages of development and skills of the children you support: eg: Shape sorters • 3-piece inlaid puzzles (chunky handles) • 4/5-piece inlaid puzzles – smaller handles • 3-piece simple interlocking – linear first puzzle</p> <p>Consider the use of clear and simple tasks that the child can easily focus on and complete with increasing independence- these can also be used to teach newer skills that the child then generalises into their free independent/free play.</p> <p>Schemas PACEY</p> <p>Activity ideas- clear ending tasks, activities to try at home- Useful resources Milton Keynes City Council (mksendlocaloffer.co.uk)</p> <p>TEACCH- ideas for structuring play and learning-TEACCH Tips TEACCH® Autism Program</p> <p>Education Development Trust- Supporting play in early years settings - Education Development Trust (edt.org)</p>
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Social, Emotional and Mental Health

Personal, Social and Emotional Development is crucial for all children if they are to lead happy and healthy lives. Attachments and meaningful relationships, resilience and emotional regulation can be impacted for young children who may have experienced upheaval or trauma in their lives so far- and for some this may be considered a long term SEND.

Identified barrier and/or need	Provision and/or strategies: approaches, adjustments and specific interventions expected to be made by EYs providers
Awareness of themselves, and others	
Awareness of self	<p>When with babies, support their sense of agency and autonomy, by only putting them into positions they can get into and out of themselves.</p> <p>Support child to understand how they might be feeling by verbalising what you can see such as, 'I can see you are angry because...' and support to find a solution.</p> <p>Use a whole communication approach with the children to explain basic routines (verbal cues/physical cues/sign language/objects of reference) as well as to describe what is happening in front of you as above.</p> <p>interactions facing the child focusing on eye contact, interactions and facial expressions.</p> <p>Notice and respect the signals of very young children when they no longer want to play or engage, pause and be quiet when they turn away.</p> <p>Explain to parents that once babies establish 'object permanence' they become more aware of the presence or absence of their parent. Object permanence means knowing that something continues to exist even when out of sight. This can make separations much more distressing and difficult between 6-24 months – secure attachments with familiar adults are key.</p> <p>Use of mirrors to support understanding of emotions and facial expressions.</p> <p>Create a secure base for toddlers to return to for "emotional refueling" when encountering new situations or social conflict and challenges.</p> <p>Create regular daily opportunities to be in very small key person groups or 1:1 time with the key person.</p>
Limited interest in others	<p>Share in babies' happy and joyful experiences, joining in with their excitement without overwhelming them with your responses. Be consistent in your responses so that babies gradually become aware of reasonable boundaries (those that keep them safe).</p>

	<p>Early people games with a familiar adult moving on to a peer when appropriate</p> <p>Intensive interaction: Intensive Interaction 04.pdf (mencap.org.uk)</p> <p>Develop interactions facing the child focusing on eye contact, interactions and facial expressions</p> <p>Support a toddler’s explorations by drawing their attention to interesting things and smiling and nodding as they explore</p> <p>Develop early secure attachments to key people who tune into the child’s method of communication and remain close by the child to support attachment</p> <p>Give your full attention when young children look to you for a response making your response overly obvious.</p> <p>Use exaggerated facial expressions to express your emotions</p>
<p>Inappropriate interactions with others such as physical approaches in order to communicate and interact</p>	<p>Maintain an awareness and understanding that children who have had adverse experiences may require additional support.</p> <p>Be on hand to support social interactions between children.</p> <p>Model gentleness and kindness in your interactions with children and each other.</p> <p>Help toddlers to understand each other’s thoughts and needs by suggesting useful phrases, commenting on what might be going on in their minds and modelling respectful and considerate responses during play.</p> <p>As they get older, support children to find ways into the play and friendship groups of others e.g., encourage them to stand and watch from the side; talk about what they see; suggest ways of joining in.</p> <p>Offer praise and celebrate children’s shared play, cooperation and their demonstrations of empathy (eg: ‘I loved it when you took turns with...’). Reward the behaviours you want to see- by catching the child when they are getting it right.</p> <p>Consider what each child values when it comes to rewards- e.g. a high five, a hug or specific praise and give it instantly.</p>
<p>Self-regulation</p>	

<p>Frequent periods of overwhelm; limited resilience when things go wrong/are different</p>	<p>Develop early secure attachments to key people who tune into the child's method of communication and remain close by the child to support attachment</p> <p>Support to coregulate with a regulated adult – adult must be in a regulated state to do this effectively with the child.</p> <p>Validate children's emotions by giving messages that all feelings are okay e.g., "it's okay to be cross, we all get cross sometimes". Adults to help children to label their emotions throughout the day during 'in the moment' interactions as well as focused activities.</p> <p>Adults to observe the child's likes and dislikes, speak to parents/carers and support child's wellbeing by incorporating comforters or objects from home/routines from home such as songs before naps or during nappy changing to develop consistency in care.</p> <p>Ensure basic routines have an obvious, predictable flow with key objects/songs/places where things take place e.g. nappy changing, feeding, play and so on.</p> <p>Provide sensory breaks during the session to try to elevate sensory overwhelm and lessen self-harm behaviours, these will need to be different for different personalities/needs.</p> <p>When distressed behaviours are observed look for patterns in what has happened leading up to them to see what needs to be changed for the child. What is leading to overwhelm? What sensory input is overwhelming? How can these be changed? Adapt the child's routine to try to intervene before distressed behaviours occur with motivating activities, calming sensory input such as TACPAC, crunchy foods, a drink, blowing through a straw.</p> <p>Complete a sensory checklist for the child: Early years support and advice Milton Keynes City Council (mksendlocaloffer.co.uk) and choose Sensory.</p> <p>Provide a low sensory input space (dim lights, quiet space, low demands, low interactions, no touching of the child whilst very distressed, reduce eye contact) Be aware that once a child appears to have calmed after a meltdown that they are prone to be re-triggered easily so ensure the above is given a long enough time before gradually re-introducing additional sensory stimulation.</p> <p>Ensure that expectations during group times are appropriate for the child's developmental stage.</p> <p>SCERTS: Professional (scerts.com)</p> <p>TACPAC Home - Tacpac TACPAC</p>
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	Supporting behaviours of concern Milton Keynes City Council (mksendlocaloffer.co.uk)
Well being	
Observed low levels of well being	<p>Develop early secure attachments to key people who tune into the child’s method of communication and remain close by the child to support attachment.</p> <p>Where possible provide a small team of familiar adults to support the child to develop trusting relationships. These adults should engage in all caregiving activities.</p> <p>Use the same toys/activities and so on to develop a sense of belonging and familiarity.</p> <p>Commentary to explain basic routines or basic routines have an obvious, predictable flow with key objects/songs/places where things take place e.g. nappy changing, feeding, play and so on.</p> <p>Find out about individual children and find some time to talk to them individually every day. If the child does not like to be the center of attention, find other ways to include them.</p> <p>Give ‘special ‘jobs’ to build self-esteem- these will support children with low wellbeing to see themselves as capable.</p> <p>If staff need to give feedback to parents in the hearing of the child, try to maintain positivity.</p> <p>Mental Health and Wellbeing Hub Milton Keynes City Council (mksendlocaloffer.co.uk)</p> <p>Early Years - Emotionally Healthy Schools</p>
General resources	
<p>SEND Local Offer: Early years support and advice Milton Keynes City Council (mksendlocaloffer.co.uk)</p> <p>Early Education Website- lots of information on supporting behaviour, attachment and trauma, ACE’s (Adverse Childhood Experiences)- Early years pedagogy - Early Education (early-education.org.uk)</p> <p>Anna Freud Centre: For under fives Anna Freud</p> <p>Children and Family Centres: Children and Family Centres what we offer Milton Keynes City Council (milton-keynes.gov.uk)</p>	

<https://www.bbc.co.uk/tiny-happy-people>

<https://learning.nspcc.org.uk/child-health-development>

<https://solihullapproachparenting.com/>

Attachment/Social Communication needs- [The Coventry Grid » Drawing The Ideal Self](#)

Sensory and Physical Development

In order to be able to play, learn and carry out everyday activities, children need to develop their sensory and physical skills. These skills are developed through natural play and exploration and through the provision of lots of opportunities to practice skills at the child's developmental level (which may differ from their peers).

For children to be able to move their bodies in a planned way they need to have developed their vestibular system. This tells the brain about our position and how we are moving. It helps control our movement and balance. They also need to develop their proprioceptive system. This system lets us know where our body is in relation to the immediate space around us. It also lets us know how to move our body and how much force we need to carry out a task. To support the development of both these systems, babies and young children need lots of opportunities to move around, crawl, climb, jump, lift and run. Outdoor play is ideal for this. These systems help children to be able to control their bodies enough to be able to move around safely but also to sit still and concentrate better. Outdoor play will also help children develop strength and coordination, which is vital to support their fine motor development. Both gross and fine motor skills are needed for children to be independent in self-care tasks, such as dressing and feeding themselves.

The following can and should be used for children aged 0-5 years

Identified barrier and/or need	Provision and/or strategies: approaches, adjustments and specific interventions expected to be made by EYs providers
Gross motor	
Difficulty in supporting themselves in a range of positions to access play (including tummy, side, high kneel)	Place activities at a range of heights to encourage the use of different positions to access them. Use easels, low tables and upturned boxes.
Sitting	<p>Support children to sit in a range of positions on the floor such as cross legged, long leg sitting and side sitting (not 'W' sitting).</p> <p>Provide furniture to lean against if needed.</p> <p>When sitting on chairs, making sure that feet are flat on the floor, so the child is stable.</p> <p>Provide treasure baskets for babies to be able to sit and play for a sustained period and to support body positioning and to strengthen core muscles.</p> <p>Encourage babies to climb by providing safe equipment such as pillows, soft play, foam blocks on a safe surface.</p>

	<p>Make sensory bags and pouches for example by filling organza bags or clean socks with tactile, fragrant, visual, taste safe and auditory materials. Such as tactile- dried lavender, leaves. Fragrant- dried herbs, dried flowers (edible). Visual- Dehydrated fruits or reflective items. Taste- Dehydrated vegetables. Auditory- bells, emergency foil blanket.</p>
<p>Moving safely on a range of surfaces (stopping, starting, avoiding obstacles)</p>	<p>Offer a range of activities that encourage movement in different ways, such as obstacle courses using everyday items or floor-based play activities such as a car mat.</p> <p>A range of activities to develop and practice their balance and proprioception- large climbing equipment and creating obstacle courses using everyday items in your setting are great for this.</p> <p>Where possible, access places with a range of surfaces, such as grass, bark and tarmac and with some slopes and uneven surfaces.</p> <p>Provide space and equipment for vigorous and risky, physical play</p>
<p>Using equipment safely</p>	<p>Provide a range of ride on toys that take into account a range of physical needs/development eg: a kiddie coupe style car could be used if support is needed in sitting, whilst a balance bike will challenge the ability to balance more.</p> <p>Use big, slow-moving items such as balloons and bubbles. Provide large balls and bats and reduce the sizes as skills develop.</p> <p>Use large construction materials to help strengthen arms and shoulders- practice crossing the midline</p> <p>Take into account the clarity of sound and images produced by toys – some songs and speech may not be clear to a child with hearing or multi-sensory needs. If it is too busy, the images may not be clear for a pupil with vision or multi-sensory needs.</p>
<p>Fine motor</p>	
<p>Reaching, grasping and releasing; later manipulating items</p>	<p>Provide containers that children can drop objects into. Providing collections of interesting objects to explore eg: treasure baskets/bags, loose parts collections.</p> <p>As skills develop, provide opportunities to pick up and manipulate smaller objects. Activities like playdough, peg boards, threading big beads or cotton reels or picking up objects with tongs and large tweezers would all help.</p> <p>Provide a range of simple cause and effect toys – toys that light up or make noises are great but so are things like shape sorters, large inset</p>

	<p>puzzles or car/ball ramps. Model how to use these. Staff may need to use toys from other age groups if in day nursery settings (eg: bringing toys from the toddler room into pre-school area).</p>
Using small tools and materials	<p>Adapt and simplify activities and provide alternative equipment, such as chunky chinks or big brushes. Allow enough time to explore the resources- focus on supporting the experience without the needs for a finished product.</p> <p>Allow the opportunity for children to mark make in a range of positions (eg: standing up, laying down, drawing in the air with scarves/ribbons). Mark making with large tools helps children practice moving their arms across their body (crossing the mid-line) which will support early writing skills.</p> <p>Offer increasingly challenging building materials, starting with objects such as stacking toys, wooden blocks or washing up sponges before moving onto to bigger interlocking equipment, like Duplo. Model their use and reduce levels of prompting as skills develop. Smaller materials help to practice manipulating small objects and strengthen fingers. This will also support the development of planning and problem solving.</p> <p>Occupational Therapy advice re: early writing- Word document template (cnwl.nhs.uk)</p> <p>Occupational Therapy advice re: scissor skills- Word document template (cnwl.nhs.uk)</p>
Self care	
Supporting drinking	<p>Provide a range of different cups that support at different developmental stages eg: two handled cups/one handled cups and then on to holding a beaker using both hands.</p> <p>Spouted cups and sports bottles may reduce the chance of spillages but using these all the time can hinder children learning to use an open cup. 'Doidy' style cups can help as they are angled making it easier to tip.</p> <p>Encourage children to sit in a well-supported position so that they have better control of arms and body and are able to slowly tip the cup to drink from it.</p>
Supporting handwashing	<p>Make sure that all children can reach the sink, soap and towels- use steps where needed</p> <p>Consider how children can access items as taps, soap dispensers, hand dryers and paper towels- and make adjustments where you can.</p> <p>Provide modelling support regularly, and use simple visuals to support understanding of sequencing when hand washing</p>

<p>Developing toilet independence</p>	<p>Make the bathroom as pleasant a place to be as you can.</p> <p>Engage with parents to establish when children are developmentally ready for toilet training- and develop a partnership approach that allows for consistency.</p> <p>Be mindful of using potties- these can be supportive initially as they are portable, but they provide a very different experience to using the toilet which is another set of skills to master.</p> <p>When changing nappies for children over the age of 2 you may wish to encourage the child to stand- this method supports the adult's back and also helps the child to more fully participate in the process.</p> <p>Consider adjustments such as steps and toilet inserts so all children can feel comfortable when using the toilet.</p> <p>All staff should use familiar language/agreed scripts for toilet training to ensure consistency. Support independence by asking families to dress children in clothes that are easy to pull up/down – no belts or buttons.</p> <p>Break the task down into single steps, such as pulling trousers down, using toilet paper, flushing, washing hands. Teach them one at a time, starting with the last step so that the child successfully finish the task.</p> <p>Refer to ERIC for further advice on toileting training and related issues- Home - ERIC</p> <p>Occupational Therapy advice re: toilet training Word document template (cnwl.nhs.uk)</p>
<p>Dressing and undressing</p>	<p>Make sure children know where their coats/wellies/shoes are- use visuals in the environment to support this. Provide prompts to support children to hang their coats etc, with increasing independence.</p> <p>Encourage families to dress children in loose fitting clothes with minimum fastenings - tops with easy openings, elasticated waists, shoes with Velcro fastenings</p> <p>Use task analysis and backward chaining to support the process of undressing / dressing.</p> <p>When putting shoes on-make sure children are well supported and balanced so that their hands are free to use. It will be helpful to encourage children to sit on a chair, floor or lean on a wall to do this.as families to put a sticker or mark inside shoes so the child know which way round they go</p> <p>Develop routines for teaching children to develop independence with coats eg: teaching them to connect the zip whilst the coat is on their</p>

	<p>lap/the floor and stepping into it, before pulling it up. Chunky zips are easier. A piece of ribbon or a key ring attached to the zip tab can also help.</p> <p>Occupational Therapy advice re: dressing and backward chaining to support this- Word document template (cnwl.nhs.uk)</p>
<p>Biting and/or putting inedible items into mouth beyond 2.5 years</p>	<p>Biting may occur because children are frustrated, cross or want attention. They may not be able to use speech to tell you how they feel. You can help by making a note of when they bite in an ABCD chart, and seeing if there is a pattern- this will support you to understand the function of the biting (eg: is it communication, sensory seeking, relieving discomfort from teething etc).</p> <p>Try giving them safe objects to bite instead, such as a piece of raw carrot, a teether or 'Chewelry'.</p> <p>Occupational Therapy- Joining in with Sensory Differences- Word document template (cnwl.nhs.uk)</p> <p>Information on identifying and supporting behaviours of concern, and ABCD charts- Early years support and advice Milton Keynes City Council (mksendlocaloffer.co.uk)</p>
<p>Difficulty with stillness for concentration</p>	<p>Let them move around and experience equipment: pushing, rocking, rolling, and spinning may help them with stillness and sitting when needed.</p> <p>They may like to be hugged, lean on you, wrap themselves in a blanket or have a weighted toy, cushion or blanket on their lap.</p> <p>Providing them with a selection of fidget toys to hold whilst they are sitting listening.</p> <p>Information on Activity Breaks- Early years support and advice Milton Keynes City Council (mksendlocaloffer.co.uk)</p>
<p>Visual impairment</p>	
<p>Has difficulty seeing</p>	<p>Ensure the environment is well-lit and glare free Ensure pathways are clear and consider uneven surfaces Ensure child is seated near the front for whole group inputs Bear in mind that, if children wear a uniform, it will be tricky for a child with VI to distinguish children they know from those they do not.</p> <p>If the child need glasses, encourage them to keep them on. Make sure they are clean.</p> <p>Provide a selection of black and white resources. Use clear labelling- black pen on contrasting colours can be supportive.</p> <p>Provide mirrors and reflective resources.</p>

	<p>Provide repetition of verbal instructions and check their understanding. Repeating key points Consider supportive management of turn taking activities Allow time for processing information</p>
Difficulty moving around independently	<p>Keep the floor uncluttered. Train the adults and other children to tidy up as they go along – ‘pick it, play with it, put it away’.</p> <p>Trying to keep the resources and furniture in the same place as much as possible, so that they know where they are. Show them where they are if you have moved them and ensure they are clearly labelled.</p>
Difficulty in being visually included	<p>Following the advice of the Specialist advisory teacher, if they are involved. If they are not, and there is clinical evidence of vision difficulties that cannot be corrected by glasses (e.g., a letter from an ophthalmologist), request support from them.</p> <p>Check if the lighting levels are OK for them and see if you can adjust them if necessary. Outdoors, providing shade for them and placing some of the child’s favourite activities there. Encouraging their friends to join them there. Wearing a sun cap or sunglasses outdoors may help them cope with the bright sun.</p> <p>Make and hang natural mobiles (use string to hang pinecones, corks feathers and dehydrated fruits from a stick/ branch) and wind chimes, to develop auditory and visual awareness.</p> <p>Consider use of small group social skills interventions so that interactions and friendships can be supported in a sensitive and planned manner.</p>
Hearing impairment (incl glue ear):	
Has difficulty hearing	<p>Turn off background music and try to keep background noise to a minimum- consider where the noisiest parts of the room are and avoid talking or reading stories there (eg near noisy fan heaters, kitchen areas)</p> <p>Ensure child is seated near the front for whole group input, and is facing the speaker so the child can benefit from facial expressions and lip patterns. Provide opportunities to develop vocabulary, language and social skills so that important turn taking skills can be developed.</p> <p>Check the child’s understanding after giving information and instructions.</p> <p>Consider how adults might support differently when playing outside with the child, and how the weather impacts on the ability to hear (eg: when it is raining and/or windy).</p> <p>Referring to the audiologist or ask parents to take them to the GP, if you think they are having trouble hearing.</p> <p>If the child has hearing aids check these are working twice a day and follow the advice of the Teacher of the Deaf if they are involved.</p>

	<p>Consider changing batteries and helping to keep moulds and tubes clean if necessary.</p>
<p>Difficulty understanding what is happening</p>	<p>Asking other people to keep quiet when child need to listen (Don't move chairs about or make snack when it's story time for instance)</p> <p>Get close to the child, ideally on their level, face to face, when you talk to them. Make sure they know you are talking to them, for example you might need to tap them on the shoulder.</p> <p>Don't assume they have heard instructions you have given to the whole group. Tell them separately if needed.</p> <p>Keep language clear and concise.</p> <p>Using facial expressions, signs, gestures and real-life objects to support their understanding of communication.</p> <p>Using visual aids to help them understand what you are saying. You could use simple actions or pictures to demonstrate what you want them to do. A visual timetable or showing them an object (such as a plate for snack time) will help them understand what is going to happen next and what they need to do. Having regular routines will help this.</p>
<p>Multi sensory impairment (eg: vision and hearing): (Department of Health "Think Dual Sensory" 1995) "Deaf-blindness is not just a deaf person who cannot see, or a blind person who cannot hear. The two impairments together increase the effects of each".</p>	
<p>Difficulty accessing the environment and play/ learning</p>	<p>Setting SenCo's should clarify the nature and possible implications of the diagnoses by liaising with The Sensory Team, parents and health professionals, for example:</p> <ul style="list-style-type: none"> • Mild or greater vision needs in both eyes and • Unilateral hearing loss supported with a hearing aid • Mild or greater hearing loss <p>The setting should carry out a basic assessment of the impact of the hearing needs and vision needs with the school nurse and a further consultation with the Sensory Team</p> <p>In addition-</p> <p>Keep background noise to a minimum.</p> <p>Ensure a well-lit, glare-free environment.</p> <p>Clear pathways.</p> <p>Clear labelling of resources and environment.</p> <p>Opportunities for social skills and language development</p>

	<p>Line marking and visually friendly environments as per environmental audit and similar interventions suggested by Habilitation Specialist or QTVI</p> <p>Minimise distractions- both auditory and visual</p> <p>Consider seating position to consider hearing and vision needs (eg: front of the group, facing speaker, check for glare.</p> <p>Clear pathways for movement and access</p> <p>Quiet areas to access language; build in breaks for fatigue</p> <p>Use ICT and technologies to support access</p> <p>Use resources and materials modified to support pupil's needs</p> <p>Use of sensory stories to support early literacy</p> <p>Access to small group social, emotional and wellbeing programmes</p> <p>Adapted PE-type activities/outdoor resources e.g., brightly contrasting equipment</p> <p>Take account of mobility and hearing needs such as accessing training from the Sensory Team</p>
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Medical Needs: Many of the needs under consideration here can be met with a robust and collaborative Health Care Plan in place.

<p>Severe and complex medical needs eg: Diabetes Type 1 Epilepsy Trachey in situ</p>	<p>Communication with family is key for both staff and family to feel trusting and confident</p> <p>Refer to Statutory framework for the early years foundation stage for group and school providers (publishing.service.gov.uk)</p> <p>Support equipment such as lockable medicine cabinets, first aid bags, fridges</p> <p>Rotated medication/care training that means a team of staff is trained- and that school ensure have refresher training as and when needed</p> <p>Health Care Plans (HCP) that are reviewed regularly with family and key professionals</p> <p>Liaising with specialist colleagues for up-to-date training, and a clear refresher programme planned for.</p> <p>Bereavement training and policies in place</p> <p>Regular home and setting contact when/if child is not able to attend, to maintain 'sense of belonging' with peers and the community.</p>
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Complex Nursing Team: cnw-tr.ComplexNeedsTeam@nhs.net

Health Visiting Team: [Milton Keynes 0-19 Universal Health Service \(Health Visitors and School Nurses\) :: Central and North West London NHS Foundation Trust \(cnwl.nhs.uk\)](#)

[Supporting pupils with medical conditions - templates.docx \(live.com\)](#)

[Children and young people with health needs | Milton Keynes City Council \(mksendlocaloffer.co.uk\)](#)

