**Special Educational Needs and Disability Policy & Procedure**

At Stepping Stones we recognise that all children have the right to access a broad and balanced curriculum, allowing them to progress and learn at a pace and level reflective of their individual abilities. The setting believes that all children have a right to gain experience and develop their knowledge and understanding alongside their peers no matter what their individual needs and are committed to the inclusion of all children. We provide an environment in which all children are supported to reach their full potential.

**Statement of intent**

At Stepping Stones we welcome all children regardless of ability or disability. We believe that all children are entitled to thesame rights, opportunities and experiences. We recognise and appreciate that children will progress at different rates and achieve expectations when they are ready. We try to be totally inclusive throughout attitudes, language, environment and vision for our setting.

**Aim**

Our aim is to monitor children’s progress throughout their time at playgroup and where children appear not to be making progress, either generally or in a specific aspect of their learning, we will offer different opportunities or alternative approaches to their learning, with regard to the DFEE Code of Practice on the Identification & Assessment of Special Educational Needs.

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

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

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

Graduated approach

Initial identification and support (identifying special educational needs)

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

Observation and assessment of children’s SEN

Where a child appears to be behind expected levels, or their progress gives cause for concern, educators should consider all the information about the child’s learning and development from within and beyond the setting.

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

**Planning intervention**

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

**Involving the child**

* The SEND Code of Practice supports the rights of children to be involved in decisions about their education.
* Inclusion of children with SEND helps build self-confidence and trust in others.
* Ascertaining children’s views may not be easy, a range of strategies will be needed.
* Accurate assessment helps identify children’s strengths and possible barriers to learning.
* The key person and setting manager/SENCo work in partnership with parents/carers and other agencies to involve the child wherever appropriate.
* Children are involved at appropriate stages of the assessment and to their level of ability.
* Establishing effective communication is essential for the child’s involvement.

**SEN support plan**

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

**Drawing up a SEN support plan**

* If external agencies are already involved at this stage, then they should also be invited to help decide on what appropriate interventions are needed to help meet outcomes for the child. The SENCo/setting manager should take the lead in coordinating further actions including preparation of the action plan and setting short-term targets.
* Where there are significant emerging concerns (or an identified special educational need or disability) targeted action plans are formulated that relate to a clear set of expected outcomes and stretching targets.
* A support plan highlights areas in which a child is progressing well; areas in which some additional support might be needed and any areas where there is a concern that a child may have a developmental delay (which may indicate a special educational need or disability). It describes the activities and strategies the provider intends to adopt to address any issues or concerns.
* Planned intervention should be based on the best possible evidence and have the required impact on progress with longer-term goals covering all aspects of learning and development and shorter-term targets meeting goals.
* The plan should focus on the needs of the child, the true characteristics, preferences, and aspirations of the child and involvement of the parents/carers with a clear set of targets and expected outcomes for the child. Effective planning at this stage should help parents/carers and children express their needs, wishes, and goals:
* focus on the child as an individual and not their SEN label
* be easy for children to understand and use clear ordinary language and images, rather than professional jargon
* highlight the child strengths and capacities
* enable the child, and those who know them best, to say what they have done, what they are interested in and what outcomes they are seeking in the future
* tailor support to the needs of the individual
* organise assessments to minimise demands on families
* bring together relevant professionals to discuss and agree together the overall approach
* If the child fails to make progress and multi-agency support is sought, then it is at this point that Early Help Assessment should be considered.

**Record keeping**

If a child has or is suspected of having a SEN, a dated record should be kept of:

* the initial cause for concern and the source of this information, (the progress check at age two and/or outcomes of previous interventions).
* the initial discussion with parents/carers raising the possibility of the child’s SEN
* the views of the parents/carers and other relevant persons including, wherever possible, the child’s views;
* the procedures followed with regard to the Code of Practice to meet the child’s SEND e.g. SEN support plan, referrals to external agencies and for statutory assessment
* evidence of the child’s progress and any identified barriers to learning
* advice from other relevant professionals; and all subsequent meetings with parents/carers and other persons and any subsequent referrals

Records may include

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

**Seeking additional funding/enhanced/top up**

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

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

**Statutory assessment**

* If a child has not made progress, then the next steps may be for the child to undergo an Education, Health and Care Assessment.
* If a child is under compulsory school age, the local authority will conduct an EHC needs assessment if they consider that the child’s needs cannot be met within the resources normally available to the early years setting.
* Children aged under age two are eligible where an assessment has indicated that the child is likely to have SEN which requires an EHC plan when they reach compulsory school age.
* When a child’s needs appear to be sufficiently complex, or the evidence suggest specialist intervention then the local authority is likely to conclude that an EHC plan is necessary
* The local authority should fully involve the parent/carers and must seek advice from the setting in making decisions about undertaking an EHC assessment and preparing an EHC plan.
* Settings should prepare by collating information about the child’s SEND including:
* documentation on the child’s progress in the setting
* interventions and support provided to date
* evidence of external agency assessment, support and recommendations
* parental views and wishes (and where appropriate those of the child)

The information will then be submitted to the local authority to allow them to accurately assess the child in the context of the support already given.

* The local authority mustinform the child’s parents/carers of their decision within six weeks of receiving a request for an assessment and give its reasons for their decision. If the local authority decides to conduct an assessment, it must ensure the child’s parents/carers are fully included right from the beginning and are invited to contribute their views. If the local authority subsequently decides not to conduct an assessment it must theninform the parents/carers of their right to appeal that decision, of the requirement for them to consider mediation should they wish to appeal.
* If the local authority decides that a statutory EHC plan is not necessary, it mustnotify the parents/carers and inform the provider, giving the reasons for the decision. This notification musttake place within 16 weeks of the initial request or of the child having otherwise been brought to the local authority’s attention.
* If the decision following an assessment is to compile an EHC plan the local authority should consult collaboratively with the parents/carers in the preparation of the plan ensuring that their views and their child’s preferences are taken into account and that plans describe positively what the child can do and has achieved to date.
* Plans are evidenced based and focus on short term outcomes and long-term aspirations for the child including family and community support. Parents/carers have the right to request a particular provision for their child to be named within their EHC plan.
* If an early years setting is named, the local authority must fund this provision. They cannot force a setting to take a child and can only name the provision in the EHC if the setting agrees.
* Local authorities should consider reviewing an EHC plan for a child under age five at least every three to six months. Such reviews would complement the duty to carry out a review at least annually but may be streamlined and not necessarily require the attendance of the full range of professionals, depending on the needs of the child. The child’s parents/carers mustbe fully consulted on any proposed changes to the EHC plan and made aware of their right to appeal to the Tribunal.

**External intervention and support**

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

**Somerset Choices**

We are a part of Somerset Choices which parents/carers can access on [www.somersetchoices.org.uk](http://www.somersetchoices.org.uk)

**Definition of Special Educational Needs**

Playgroup staff recognise the definition of special educational needs as detailed in the special education needs Code of Practice.

Children have Special Educational Needs if they have a learning need which calls for special provision to be made for them.

Children have a learning need if they:

1. Have significantly greater need than the majority of children the same age
2. Have a disability which prevents or hinders them from making use of educational facilities of a kind generally provided for children of the same age in schools within the local education authority
3. Are under compulsory school age and fall within the definition of A and B above or would do so if Special Educational Needs Provision was not made for them

Children must not be regarded as having a learning difficulty solely because the language or form of language of their home is different from the language in which they will be taught.

**Identifying SEN in Stepping Stones**

At Stepping Stones we use a variety of tools to help us to assess children attending our setting. These include:

* Sharing of ‘All About Me’ booklet
* Pre-school planned entry meetings (if required)
* School entry plan meetings (if required)
* 2 year old checks
* EYFS recorded on Famly including learning pathways, observations and next steps
* Communication, SEN & Social toolkits
* ECAT forms
* ABCC observations (and other positive planning behaviour strategies)
* Developmental journals (if required)
* Multi-agency liaison and sharing of support/care plans and outcomes
* Following our Somerset Core Standards:
	+ 0-5 years
	+ Cognition and learning
	+ Communication and interaction
	+ Social, emotional and mental health needs
	+ Physical, mental and alternative communication needs
	+ Hearing impairment
	+ Visual impairment

**Procedure**

* We designate a member of staff to be special educational needs co-ordinator (SENCO) and give her name to parents/carers – Paula Lukins.
* We provide a statement showing how we provide for children with SEN/disabilities within this policy and procedure
* Our Somerset Choices page is available to read on our website and via the Somerset County Council link page. This gives practitioners and parents/carers clear, comprehensive up to date information about the available provision for those children with SEN needs and how to access it.
* We ensure that the provision for children with SEN/disabilities is the responsibility of all members of the setting.
* We ensure that our inclusive admissions practice ensures equality of access and opportunity. Accessibility is also identified within our provision and needs are met accordingly.
* Medical needs and accessibility are identified within our SEN practices – see relevant policy.
* We use many tools for identifying SEN such as: Pre-school entry information/planned entry meetings, 2 year old checks, EYFS learning pathways and observations, ECAT/ABCCs etc, developmental journal, information from parents/carers and outside agencies, support plans.
* We ensure that our physical environment is as far as possible suitable for children with disabilities.
* We work closely with parents/carers of children with SEN/disabilities to create and maintain a positive partnership.
* We ensure that parents/carers are fully involved at all stages of our ‘graduated approach’ (assess, plan, do, review) of their children's education.
* We provide parents/carers with information on sources of independent advice and support.
* We liaise with other professionals involved with children with SEN/disabilities and their families, including transition arrangements to other settings and schools, including sharing information between settings, pre-school entry planning & school entry planning.
* Where necessary we apply for high needs funding arrangements to ensure needs are met, including evidence collected from all involved. Any funding received is audited on an individual basis.
* We use the graduated approach system for identifying, assessing and responding to children's special educational needs.
* We provide a broad and balanced curriculum for all children with SEN/disabilities.
* We provide a differentiated curriculum to meet individual needs and abilities.
* We use a system of planning, implementing, monitoring, evaluating and reviewing support plans for children with SEN/disabilities which are agreed with parents/carers, all parties sharing decision making and target setting.
* We ensure that children with SEN/disabilities are appropriately involved at all stages of the graduated approach, taking into account their levels of ability.
* We use a system for keeping records of the assessment, planning, provision and review for children with SEN/disabilities.
* We provide resources (human and financial) to implement our SEN/disability policy.
* We ensure the privacy of children with SEN/disabilities when intimate care is being provided.
* We provide training opportunities so the whole team can be responsible for identifying and meeting needs.
* We provide in-service training for practitioners and volunteers.
* We raise awareness of any specialism the setting has to offer, e.g. STC trained staff/AAP training etc…
* We ensure the effectiveness of our SEN/disability provision by collecting information from a range of sources e.g. support plan reviews, staff and management meetings, parent/carer and external agency's views, inspections and complaints. This information is collated, evaluated and reviewed annually.
* We use Education Health Care Plans to aid our practice and provide additional targets for our support plans.
* We have systems in place for working with other agencies through each stage of the Early Help Assessment (EHA) (as required).
* Parent/carers are an integral part of our graduated approach as well as any involvement from specialists.
* We provide a complaints procedure.
* We monitor and review our policy and procedures annually and as needed.

**Further guidance**

[SEND Code of Practice: 0 to 25 years](http://www.gov.uk/government/publications/send-code-of-practice-0-to-25) (DfE and DoH 2015)

[Ready, Steady, SENCO](https://portal.eyalliance.org.uk/Shop#!prod/303f4ad6-7564-ea11-a811-000d3a0ba8fe/curr/GBP) (Alliance 2018)

Updated and implemented Autumn Term 2023– reviewed regularly and the procedure monitored and evaluated