

Apply for the Early Years SEN Inclusion Fund –sample 2

Attach parental consent: xxxxxxxxxxxxxxxxxxxxxxxxxxx

Organisation/setting name: xxxxxxxxxxxxxxxxxxxxxxxxxxx

This setting is in the borough of: xxxxxxxx

First name of manager: xxxxxxxx

Last name of manager: xxxxxxxx

Name of SENCO: xxxxxxxx

Address: xxxxxxxxx

Postcode: xxxxxxxx

Telephone: xxxxxxxx

Email: xxxxxxxxx

Child's name:xxxxxxxxxx

Child's date of birth: xxxxxxxx

Parent/Carer's name: xxxxxxxx

Parent/Carer's address: xxxxxxxxx

Date child began attending your setting: xxxxxxxxx

Monday: AM

Tuesday: AM

Wednesday: AM

Thursday: AM

Friday: AM

Is the child in receipt of Disability Living Allowance (DLA)? Yes

Is the child accessing Disability Access Fund (DAF)? No

As a result of your 'assess, plan, do, and review cycle' does the child have an Individual Targeted Plan (ITP) or targeted support plan in place? Yes

Upload all recent plans: ITP4.pdf, ITP5.docx.pdf

Have you sought advice from your Inclusion & Improvement Adviser (or school SENCo if you are school)? No

Is the child known to other professionals? Audiology, Community Paediatrician, Occupational Therapy, Speech & Language Team, AfC SEND Support Officer

Please upload the latest report(s) relating to the child:

NurserySocialCommunicationPathwayReview.pdf, OccupationalTherapyAdvice.pdf, SupportPlan_part1.pdf

Have you made a request for an Education Health and Care (EHCP) assessment? No

Child's additional needs: Child Z is due to be diagnosed in the UK on the 12 January 2018 at a Social Communication Pathway review meeting by the Child Development Service.

He/she has previously been diagnosed in X, on 12/10/2018, with 'Borderline Delayed Development with ADHD with Autism' (report sent with last application).

Child Z can occasionally follow a simple instruction such as getting his/her coat, if he/she wants to, depending on his/her mood. Child Z does understand and follow some the routines of Preschool with strong encouragement. If he/she does not want to do something, he/she will lay him/herself down on the floor and refuse to stand back up.

Child Z's eye contact with adults/peers is fleeting- 2-3 seconds maximum- and on his/her terms. Child Z's only vocalisations at the nursery are during counting 1-20 and the alphabet – where a third to a half of his/her utterances are recognisable in English. Child Z does respond to 'hello' at nursery when his/her mother directs/helps him/her to stop moving and wave hello. He/she does respond to 'goodbye' when directed by his/her mother to say good-bye at pick-up, whereby I will kneel down in front of him/her, direct his/her head to face mine to encourage direct eye contact and wave goodbye by high-fiving hands together with him/her.

Child Z does take adults by the hand, lead them to what he/she wants and then points to it.

Child Z does show his/her feelings through facial expressions; in particular, smiling with joy (e.g. when kicking down block towers) and frowning with pain. Child Z does sit and attend to activities that are self-chosen for 10 seconds to 2 minutes (e.g. telephone, toy, computer keyboard, messy play tables with sand or water). More often though he/she prefers to kneel on a chair and even more so, stand up. Very rarely, does Child Z sit and do adult-led activities for more than 2 minutes. Child Z requires strong 1-2-1 support to sit on a chair at the table for meal times and be encouraged to eat the food given to him/her.

Child Z shows interest in peers when they are wearing or playing with something he/she wants. However, this can often result in physical behaviour from him/her. He/she does not copy or initiate play from his/her peers. Child Z often walks into/over the top of them as though they are not there. He/she has shown no understanding of turn-taking or sharing. Child Z does not show empathy to others. Child Z constantly sensory seeks with his/her mouth. He/she is constantly roaming the room, picking up any toys/objects and putting them in his/her mouth. Child Z tries to put everything in his/her mouth and accordingly, requires constant 1-2-1 support for this repetitive behaviour.

Please give full details of steps taken:

Steps taken:

- We have been allotted some Sue Vialardi time as part of our last SEN award.
- ITP- P,S,E: strong focus on peer interactions- engagement & turn taking; C & L: focus on 'imitation' as directed by his/her Occupational Therapy goals; PD: self-care zipping/unzipping coat/backpack.
- Strong 1-2-1 support has been required for Child Z at all times whilst at nursery.
- Whilst, attempts are made several times each morning to engage Child Z in his/her ITP activities, it is dependent on his/her compliance as whether any engagement, focus and action can take place. When this is not the case, observations are always recorded as to his/her movements and particular interests that day.

-Particular efforts have been made to ensure at least one messy play table activity is available at all times to Child Z and that the dominant sensory element changes on a daily basis.
-Child Z has also commenced potty training, and it is upon his mother's wishes that he/she is taken to the toilet on a half-hourly basis to be given the opportunity to use the potty with support.

Child's chronological age in months (at point of submission): 46

Making relationships: 8:20

Self-confidence and awareness: 8:20

Managing feelings and behaviour: 8:20

Moving and handling: 8:20

Health and self-care: 8:20

Listening and attention: 8:20

Understanding: 8:20

Speaking: 8:20

Please add any further details: All emerging.

If successful how will funding be used?

Steps to be taken:

- We will request more Sue Vialardi time for observation and sensory work.
- ITP- P,S,E: strong focus on peer interactions- engagement & turn-taking activities; C & L: eye gaze therapy
- visual aids for communicating activity choice and 'now & next' for routine understanding
- PD: self-care: toilet training focus.
- Child Z is currently due to be reviewed by his/her OT (October/November 2017) and additional support targets recommended will be added to his/her ITP.
- Child Z's OT has currently advised that 5-10 minutes per hour be used for movement and proprioceptive activities as well as down time each hour (please see email attached above).
- Accordingly, strong 1-2-1 support will be required for Child Z at all times whilst at nursery to work on his/her ITP targets, as well as the above OT personal exercise schedule.
- Resources- messy play materials; sensory cushion; sensory toys; cause-and-effect toys.

Are you currently applying for the Early Years SEN Inclusion Fund grant for any other children at your setting?: Yes

Please provide the name(s) of the child/children: xxxxxxxx

Please confirm you have read and agreed to these terms and conditions: Yes