



Early Years Practice Procedures

January 2024

09.01 Waiting list and admissions

We aim to ensure that all sections of the community receive accessible information, and that our admissions procedures are fair, clear and open to all parents who apply for a place.

- The setting is widely advertised in places accessible to all sections of the community.
- Information about the setting is accessible, using plain English, in written and spoken form and, where appropriate, provided in different community languages and in other formats on request.
- Children with disabilities are supported to take full part in all activities within the setting and the setting makes reasonable adjustments to ensure that this will be the case from the time the child is placed on the waiting list.
- The waiting list is arranged in birth order and in addition may take into account the following:
 - the age of the child with priority being given to children eligible for the free entitlement
 - length of time on the waiting list
 - the vicinity of the home to the setting
 - siblings already attending the setting
 - the capacity of the setting to meet the individual needs of the child
- Funded places are offered in accordance with the Early Years Entitlements: Operational Guidance for local authorities and providers (DfE 2018) and any local conditions in place at the time,
- Where it is financially viable to do so, a place is kept vacant for an emergency admission.
- The setting and its practices are welcoming and make it clear that fathers, mothers, other relations and carers and childminders are all welcome.
- The setting and its practices operate in a way that encourages positive regard for and understanding of difference and ability, whether gender, family structure, class, background, religion, ethnicity or competence in spoken English.
- The needs and individual circumstances of children joining the setting are monitored on 09.1c Childcare and early education registration form, to ensure that no accidental or unintentional

discrimination is taking place and that reasonable adjustments are made as required.

- Section 05 Equality procedures is shared and widely promoted to all.
- Places are provided in accordance with 09.01d Childcare and early education terms and conditions issued to every parent when the child takes up their place. Failure to comply may result in the provision of a place being withdrawn.

Admissions

- Once an early education and childcare place has been offered the relevant paperwork is completed by the setting manager or deputy before the child starts and filed on the child's personal file. Forms completed include:
 - 07.01a Privacy Notice - explains what personal data we collect, why we collect it, how we use it, the control parent/carers have over their personal data and the procedures we have in place to protect it.
 - 09.01d Early education and childcare terms and conditions - govern the basis by which we provide early education and childcare.
 - 09.01c Early education and childcare registration form - contains personal information about the child and family that must be completed in full prior to the child commencing.

Children with SEND

- The manager must seek to determine an accurate assessment of a child's needs at registration. If the child's needs cannot be met from within the setting's core budget, then an application for SEN inclusion funding must be made immediately.
- Children with identified SEND must be offered a place when one becomes available as with any other child. However, the start date for children with more complex SEND will be determined by the preparations made to ensure the child's safety, well-being and accessibility in the setting. If a child's needs determine that adjustments need to be made, the manager must outline a realistic timeframe for completion, detailing the nature of adjustments e.g. risk assessment, staff training, health care plan and all other adjustments required. The child's safety at all times is paramount.
- At the time of registration, the manager must check to see if a child's family is in receipt of Disability Living Allowance, if so, the manager must ask for evidence to enable them to claim the Disability Access Fund directly from the local authority. If the family is eligible but not in receipt of the allowance, the setting manager will support the family in their application. More information can be found at www.gov.uk/disability-living-allowance-children/how-to-claim.
- Preparation for admitting a child with SEND must be made in a reasonable amount of time and any delay in the child starting is scrutinised by the setting manager to avoid discrimination and negative impact on the child and family. During a preparation period the family and relevant agencies and the local authority must be regularly updated on the progress of the preparations.

Safeguarding/child protection

If information is provided by the parents that a child who is starting at the setting is currently, or has

had involvement with social care, the designated person will contact the agency to seek further clarification.

Parents are advised on how to access the setting's policies and procedures.

Further guidance

Early Years Entitlements: Operational guidance for local authorities and providers (DfE 2018)

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/718181/Early_years_entitlements-operational_guidance.pdf

09.03 Prime times – The role of the key person

'Each child must be assigned a key person' (EYFS 2023)

Babies and young children need to form a secure attachment to key person when they join the setting to feel safe, happy, and eager to participate and learn.

The key person role

- A key person builds an on-going relationship with the child and his/her parents and is committed to that child's well-being while in the setting.
- Every child that attends is allocated a key person before they begin settling in - it is not the responsibility of the child to choose their own key person.
- Where possible a 'back up' key person is also identified for each child so that they can fulfil the role in the absence of the main key person, for example, during annual leave or sickness.
- The key person conducts the progress check at age two for their key children.
- The role is fully explained to parents on induction and the name of the child's key person and 'back up' key person is recorded on the child's registration form.
- The key person is central to settling a child into the setting. The setting manager and key person explain the need for a settling in process and agree a plan with the parents.
- Shift patterns and staff absence can affect a child who is just settling in; where possible, settling in should be matched to when the key person is on duty.
- The number of children for each key person takes into account the individual needs of children and the capacity of the key person to manage their cohort; it is also influenced by part-time places and part time staff. The setting manager should aim for consistency i.e. matching part-time staff to part-time children; full-time children should not be divided between key persons during the week.
- Photographs of key persons and their key groups are displayed clearly.
- The key person spends time daily with his or her key group to ensure their well-being.

Parents

- Key persons are the first point of contact for parents with regard to matters concerning their child and any concerns parents may have are addressed with the key person in the first instance.
- Key persons support parents in their role as the child's first and most enduring educators.
- The key person is responsible for the child's developmental records, completing the progress check at age two, and for sharing information about progress with the child's parents.

Learning and development

- The key person helps to ensure that every child's learning and care is tailored to meet their individual needs. This is achieved through regular observation and assessment of children, using

information gathered about their achievements, interests and learning styles to plan for each individual child's learning and development.

- If a child's progress in any of the prime areas gives cause for concern, the key person must discuss this with the setting manager or SENCO and the child's parents.

Prime times

The key person role is explained further in the prime time procedures (09.04/06/07/08/10/14); the key person also maintains other responsibilities for key children including administering medication and signing accident records.

Back-up key person

- The role of the back-up key person is to step in when the main key person is absent or unavailable to provide a stable and consistent care relationship for the child.
- The back-up key person is identified when the child starts but is not introduced to the child until an attachment is beginning to form with the key person.
- The back-up key person gradually forms a relationship with the child until the child is happy to be cared for by this person.
- The back-up key person shares information with parents in the key person's absence and makes notes in the child's records where appropriate.
- The back-up key person ensures information is shared with the key person.

Safeguarding children

- The key person has a responsibility towards their key children to report any concern about their development, welfare or child protection matter to the setting manager and to follow the procedures in this respect.
- Regular supervision with the setting manager provides further opportunities to discuss the progress and welfare of key children.
- The back-up key person has a duty likewise.

Further guidance

[Being a Key Person in an Early Years Setting](#) (Alliance Publication)

09.04 Prime times – Settling in and transitions

To feel securely settled and ready to learn, children need to form attachments with the adults who care for them, primarily a key person, but others too. In this way they feel part of a community; they are able to contribute to that community and receive from it. Very young children, especially two- to three-year-olds, approach separation from their parent with anxieties, older children have a more secure understanding of 'people permanence' and are able to approach new experiences with confidence; but also need time to adjust and feel secure. It is the entitlement of all children to be settled comfortably into a new environment.

We follow a three-stage model of settling in based on three key needs:

1. *Proximity* - Babies and young children feel safest when a familiar adult, such as a parent, is present when they are getting used to a new carer and new surroundings. In this way they can become confident in engaging with those experiences independently later on.
2. *Secure base* – Because the initial need for proximity of the parent has been met, babies and young children gradually begin to feel secure with a key person in a new surrounding so that they are able to participate independently for small periods of time.
3. *Dependency* – Babies and young children are able to separate from parents' and main carers when they have formed a secure attachment to their key person who knows and understands them best and on whom they can depend for their needs to be met.

The setting manager and key person explain the need for settling in and agree a plan with the parents. They write this down and both key person and parents keep a copy. Each day they review the plan and agree what will happen the next day.

Settling-in for babies, children under two and those with SEND

- Start times for babies are staggered to allow sufficient one to one time with each child and parent.
- Babies should at least be at stage 2 of settling before the key person begins settling another child.
- Where a number of babies need to start – key persons can start settling one child in the morning and another in the afternoon. In their first week, children who are settling in will not stay all day.
- If a child has been identified as having SEND then the key person/SENCO and parents will need to identify and address potential barriers to settling in e.g. timings of medication and invasive procedures, specific routines and levels of support.

Promoting proximity

- For the first few days, the parent attends with the baby and does not leave for any time.
- One to two hours is sufficient for a baby and parent to attend on any one day initially.
- On the first day, the key person shows the parent around, introduces members of staff, and explains how the day is organised, making the parent and child feel welcome and comfortable.

- The key person always greets the parent and child. (Shift patterns may need to be adjusted when settling in.)
- The parent is invited to play with their child and the key person spends time with them. As much time as possible is allowed for the key person to do this.
- Over subsequent days, depending how the child is responding, the parent is invited to attend other significant times of the day, including lunch, sleep and afternoon play.
- At this time, the key person does not change or feed the baby but observes the parent's handling of the baby and how the baby responds.
- The key person will engage the baby in eye contact but not rush to handle or hold the baby if this causes them distress.
- The key person observes to see if the baby is recognising them, beginning to explore the environment (if able), noting what they seem to like and making sure it is available the next day.

Promoting secure base

- When the young child has experienced different times of the day, these are then fitted together to establish continuity of the day.
- The parent now attends with the baby for the whole morning including lunch time. During this time, the key person and parent establish how the baby is getting to know the key person. They note when the baby seems distressed and when the baby is happy and build on this.
- If the baby is responding to the situation with smiles and eagerness to be held, then the baby is ready for the parent to spend short periods of time away in another part of the building. If signs of distress are still apparent then the separation will be approached more slowly, starting with the parent staying in the room, but taking a 'back seat', while the key person spends time with the baby.
- When the parent leaves, they always say goodbye and say they are coming back. Parents should never slip away without the baby noticing; this leads to greater distress.
- Gradually, time out of the room is extended from 10 to 20 minutes, and then 30 minutes.
- When baby can comfortably cope with 30 minutes, the key person and parent plan the next stage.
- Parents can be asked to bring in a recently worn tee shirt or scarf that smells of them. Babies will often settle if they can smell the familiar smell of the parent. Some parents may agree to send in a recording of a song that they sing to get their baby to sleep, especially if it is in their home language.

Promoting dependency

- Attachment can be seen when the baby shows signs that they are happy to transfer their need to be dependent onto the key person. Key persons look for signs such as the baby being pleased to

see them, looking for them when distressed, holding out their arms to be held, establishing eye contact, responding to play, feeding and taking comfort from the key person.

- Parents can now leave their baby for longer, until the baby can cope with a longer day.
- After 4-6 weeks, the key person reviews the settling in plan with the parent and discusses how well the child has settled. They discuss problems that may have arisen and plan how they will be overcome. They plan for the next few weeks and set a time to review. As babies and toddlers grow and change so rapidly, meeting every 6 weeks is recommended.

Part-time babies and toddlers

- Part-time babies have the same needs when settling in as full-time babies. However, part-time attendance means that there may be gaps between times the baby is in one week to the next.
- During settling in the baby and parent attend every day, even on the days when they will not usually, until the baby is settled and comfortably attached to the key person. Then the normal pattern of attendance should commence.
- A settling in review takes place after 6 weeks for the key person and parent to discuss how well the baby has settled, formed an attachment and adapted to the setting. Any adverse changes of behaviour at home (or in the setting) are addressed as a sign of separation difficulty.

When babies do not seem to settle

- It is not good for babies to be in a setting when they are acutely distressed and anxious. A baby who is not securely attached and settled is overwhelmed with fear. They are unable to participate in any activity and do not learn. It is not in their immediate or long-term interest to attempt to prolong what is an agonising experience for them.
- A highly distressed baby will need 1:1 attention consistently; their distress will upset other babies and put stress on staff. If this is the case, the key person discusses with the manager or deputy.
- Attempts are made to reduce anxiety and distress through a planned approach with the parent.
- The three stages of settling-in are reviewed and the plan is pitched back at the appropriate stage.
- Particular triggers of distress are discussed to see what can be done to alleviate it.
- If all attempts have been made and the baby or toddler still cannot cope without the parent, then the place is offered only with the parent attending. In some cases it may be appropriate to withdraw the place and help the parent consider alternatives. For a child 'in need' this may need to be discussed with the social care worker, where one is allocated to the child, health visitor or referring agency.

When a parent is unable or refuses to take part in settling in

- Information about the 'settling in' plan is given at the first visit and the reasons are explained.
- If the parent feels that this will be difficult – perhaps another close relative can come in instead.

- Genuine difficulties need to be handled sensitively, but generally speaking this is not an issue where the parent has a choice not to attend with their child. A parent who refuses to take part in settling in may have the offer of the place withdrawn.

Prolonged absences

- If babies or toddlers are absent from the setting for any for periods of time beyond one or two weeks, their attachment to their key persons will have decreased and will need to be built up again.
- Parents are made aware of the need to 're-settle' their children and a plan is agreed.

Moving up from baby room to the main room

- One-year olds are not moved to the main room before their second birthday or before they can cope; they are given the opportunity to visit the main group as part of a normal day and participate in play and join in at mealtimes, becoming familiar with adults, children and the environment.
- When approaching their second birthday, and when a vacancy arises, a new key person is identified. The key person discusses the plan for the child moving up with the parents.
- The baby room key person and the parents agree how the child will be settled; ideally parents spend time with their child and new key person before the move takes place.
- The current key person will spend time with the child in the new group, liaising with the new key person and ensuring that the child is familiar with all the main times of the day.
- The child gradually spends more time with the new key person until they can cope in their new room.

Two-year-olds starting a setting for the first time

- A two-year-old may have little or no experience of group care. As part of gathering information from parents, it is important to find out about the child's experience of non-parental care, for example grandparents, or childminder; this informs staff as to how a child may respond to a new situation.
- The three-stage approach involving *Proximity*, *Secure Base* and *Dependency/Independence* is applied to two-year-olds as to younger children.
- After the induction meeting with the setting manager or deputy and key person, a settling-in plan is drawn up. Where possible, a home visit is carried out for the same purpose.
- To settle in a two-year-old, the setting will go through the same process of gradually increasing the time a child attends with a parent/carer during the proximity stage.
- On the first day, the parent attends with the child, and stays for the morning (less if the child becomes tired). On day two, the parent stays longer and on day three stays until, and including lunch

- It is evident that the child is developing a sense of secure base when he or she shows interest in activities and begins to engage with the key person and other children. Then the parent/ carer may gradually start to spend short periods of time in another room to see how the child responds, this time increases until the child can manage a whole session without the parent.
- Separation causes anxiety in two-year-olds, as they have no concept of where their parents have gone. Parents should always say goodbye and tell them when they will return. Patience with the process will ensure children are happy and eager to come to play and be cared for in the setting.

Three- and four-year-olds

- Most children of this age can move through the stages more quickly and confidently.
- Some children take longer, and their needs for proximity and secure base stages should be accommodated as much as possible.
- Some children appear to leap to dependency/independence within a couple of days. In most cases, they will revert to the need for proximity and secure base. It can be difficult to progress to true dependency/independence and this can be frustrating.
- After the parent attends for an induction meeting with the setting manager or deputy and key person, (or in some circumstances a home visit), a settling-in plan is drawn up.
- On the first day, the parent attends with the child and stays for the morning (less if the child becomes tired), on day two, longer and the next day stays until and including lunch (if full day care).
- If the child shows interest in the activities and is beginning to engage with the key person and other children, the parent spends time in the parent room (if available) to see how the child responds.
- Parents are encouraged to explain to their child where they are going, and that they will return.
- If by the fifth day, the child is able to spend more time without the parent, the child may be ready for a short day or session the following week, progressing to a full day or session very soon.

For children whose first language is not English

- For many children learning English as an additional language, the stage of proximity takes longer as the child is dependent upon the parents' input to make sense of what is going on.
- If the parent does not speak English, efforts are made to source an interpreter for induction; it will be helpful for them to see around the setting and be clear about their role in interpreting in the play area.
- The settling-in programme is explained to the parent, and it is emphasised how important it is that they stay with the child and talk to him/her in the home language to be able to explain things.
- Through the interpreter, the key person will try to gauge the child's level of skills in their home language; this will give the key person an idea of the child's interests and levels of understanding.

- The need for the parent to converse in the child's home language is important.
- The key person makes the parent feel welcome using smiles and gestures.
- With the parent, make a list of key words in the child's home language; sometimes it is useful to write the word as you would pronounce it. These words will be used with the child and parents will be addressed with 'hello' and 'goodbye' in their language.
- The key person prepares for the child's visits by having a favourite toy or activity ready for the child to provide a means to interact with the child.
- Children will be spoken to as per any other child, using gestures and facial expressions to help.
- When the child feels happy to spend time with the key person (secure base), the parent should spend time outside of the room.
- Progress with settling in will be done as with any other child; it just takes a little longer to reach dependency/independence.

09.05 Establishing children's starting points

When children start at the setting they arrive at different levels of learning and development. In order to help them to settle and make rapid progress it is important that they are provided with care and learning opportunities that are suited to their needs, interests and abilities. This means establishing and understanding their starting points and whether there are any obstacles to their learning, so that teaching can be tailored to the 'unique child'.

- The aim of establishing a child's starting points is to ensure that the most appropriate care and learning is provided from the outset.
- Starting points are established by gathering information from the first contact with the child's parents at induction and during the 'settling in' period. Staff do not 'wait and see' how the child is settling before they begin to gather information.
- The key person is responsible for establishing their key children's starting points by gathering information in the following ways:
 - observation of the child during settling in visits
 - discussion with the child's parents
 - building on information that has been gathered during registration by referring to the registration form

The information gathered is recorded within two weeks of the child's official start date and sooner where possible.

- The key person must make a 'best fit' judgment about the age band the child is working in, referring to Development Matters or Birth to Five Matters.
- The key person should complete details by indicating where they have gathered their evidence from, using more than one source where possible i.e. parent comment and observation during settling in.

If the initial assessment raises any concerns that extra support may be required procedure 09.13 Identification, assessment and support for children with SEND is followed.

09.06 Prime times – arrivals and departures

Prime times of the day make the very best of routine opportunities to promote 'tuning-in' to the child emotionally and to create opportunities for learning. Arrivals and departures are key times in the day when children need support from their carer to make the transition smooth and happy; these times of day also pose a certain level of risk as parents and carers come and go. All staff are aware of the potential risks and take measures to minimise them.

Arrivals

- Whenever possible the key person or back up key person always greets young children. This ensures that young children are received into the setting by a familiar and trusted adult.
- The key person who greets the child marks their presence and time of arrival in the register.
- If a child who is expected fails to arrive, this is recorded on the child's personal file and the setting manager is immediately notified so that they can contact the child's parents to find out why the child is absent following procedure 09.02 Absence.
- The key person ensures that the child has been signed in by the parent and there is a clear indication of who will be collecting the child, and at what time.
- The key person greets the parents and takes time to hear information the parents need to share. They inform the parents of aspects of the day, such as if there is an agency member of staff or flexible worker in, which members of staff will be around later when parents collect their child, any planned outings, or special planned event. Any consent forms are signed.
- The key person receives the child physically and tunes in to how he or she is feeling and prepares to meet his/her needs.
- Parents should spend a few minutes with their child and key person before leaving. Many parents will be in a hurry, but this can have an unsettling effect.
- Always ensure that the parents say goodbye to their child and say when they are coming back, such as 'after tea', rather than just 'later'.
- If the member of staff receiving the child is not the key person, the member of staff will hand over the information shared by the parents to the key person when they arrive.

Injuries noted on arrival

- If a child is noted to have visible injuries when they arrive at the setting procedure 6.1 is followed.

Changing shifts and handing over information

- When the key person leaves or goes on a break, they handover the care of the child to a 'back-up' key person.
- If someone other than the key person receives the child, he/she will share any information from the parent and write a note for the key person. Confidential information should be shared with the setting manager to pass on.

- The key person shares information with the back-up key person, in this way they ensure that all information is passed on to the parent in the key person's absence.

Departures

- Children are prepared for home, with clean faces, hands and clothes if required.
- The key person always aims to greet parents when they arrive, ensuring that the person who has arrived to collect the child is named on the signing in/out form. They hand over the child personally and enter the time of departure in the register.
- Only persons aged over 16 years should normally collect children. If a parent has no alternative, then this is agreed with the setting manager and a risk assessment completed and signed by the parent. In all cases the setting manager will ask the parents to ensure that in future alternative arrangements are made. If the parent is under 16 years of age a risk assessment will be completed. No child will be collected by anyone who has not reached 14 years of age. The risk assessment should take account of factors such as age/vulnerability of child, journey travelled, arrangements upon leaving the setting to go home/elsewhere.
- Educators verbally exchange information with parents.
- If someone other than the key person is with the child at the end of the day, the key person should pass general information to the other staff or write a note for the parents. Confidential information should be shared with the setting manager to pass on.

Maintaining children's safety and security

Arrivals and departures pose a particular threat to the safety and security of the children, particularly when parents arrive at the same time or when in shared premises. To minimise the risk of a child leaving the building unnoticed, the setting manager conducts a risk assessment that identifies potential risks and the measures put in place to minimise them, such as staff busy talking to individual parents or doors left ajar. The risk assessment is shared with their line manager and is updated as and when required. View procedure 01.01 Risk assessment and 01.01a Generic risk assessment form for further guidance.

09.7 Prime times – Baby and toddler mealtimes

Feeding and mealtimes are key times in the day for being close and to promote security, as well as for exploration and learning. We understand the importance of a healthy balanced diet for young children.

Bottle fed babies

- Babies' hands are washed prior to being given their bottle.
- Babies are fed by their key person or back-up key person if they are not in.
- Bottles are warmed and ready in time; babies should not be left hungry and crying while bottles are being prepared.
- The key person sits in a comfortable chair, or on cushions to feed the baby; the key person needs to be relaxed and calm.
- Babies should be held close so that eye contact can be made. Key persons are responsive to their communication gestures during feeding, talking quietly to them, stroking or holding their hands.
- Babies are winded after feeding, nappies are changed and the baby is settled to sleep or play.
- Other key children may want to be close to their carer when a baby is being fed. This may allay any anxiety or feelings of jealousy, especially for toddlers.
- Planning for feeding times should be done to try to avoid overlap so that one-to-one attention can be given. If this cannot be avoided the feeding times should be arranged so that the key person can comfortably be with both babies at the same time. Unless in extreme circumstances, feeding should not be regarded as a shared task; unfamiliar carers should not take over feeding times just to 'get it done'.
- Babies will want to hold their own bottles, but they are never left propped up with a bottle to feed themselves.

Toddler mealtimes

- For the most part, older babies and toddlers who are feeding themselves have their meals in their space, with their key group and key person.
- Staff who are eating with the children must role-model hygiene, healthy eating and best practice at all times, for example not drinking cans of fizzy drinks in front of the children.
- Food is brought to their room in serving dishes on a trolley.
- Staff arrange the table before toddlers sit down; there should be no waiting time.
- Babies' and toddlers' hands are wiped/washed clean before their meal.
- Key persons serve their children; they ask their children what they want; they do not put food on plates if the toddler indicates that they do not want it. Toddlers can get very upset if their detested food is put in front of them; they do not understand 'try a little bit' in the way an older child does.

- Babies and toddlers are not discouraged from eating with their fingers; this exploration of their food with their hands is the beginning of self-feeding. When they have finished, they may wish to 'play' further with any remaining food. It is fine for them to get a bit messy; they, and their table can be cleaned afterwards.
- Babies and toddlers are given time to eat at their own pace and are not hurried to fit in with adults' tasks and breaks.
- Mealtimes are relaxed opportunities for social interaction of babies and toddlers with their group and the adults who care for them. It is a time of sensory learning and learning skills, as well as for the fundamental satisfaction of being fed.
- In order to protect children with food allergies or specific dietary requirements, children are discouraged from sharing and swapping their food with one another.
- While toddlers are mainly fed in their rooms, opportunities should be open for older children to be invited into their room for lunch, especially siblings, or children who have just moved up into the older group. There should also be opportunities for babies and toddlers to join the older children for, providing they do not find this unsettling or distressing.
- Information for parents is displayed on the parent's notice board, including:
 - Ten Steps for Healthy Toddlers https://infantandtoddlerforum.org/media/upload/pdf-downloads/HR_toddler_booklet_green.pdf
 - Daily menus including identification of any foods containing allergens

09.09 Prime times – Intimate care and nappy changing

Prime times of the day make the very best of routine opportunities to promote 'tuning-in' to the child emotionally and to create opportunities for learning. Nappy changing times are key times in the day for being close and promoting security as well as for communication, exploration and learning.

Babies

- Babies/young children are usually changed within sight or hearing of other staff whilst maintaining their dignity and privacy at all times. Where the layout of the setting makes this difficult to achieve, the setting manager completes a risk assessment to ensure that alternative arrangements are in place
- Key persons have a list of personalised changing or checking times for the babies and toddlers in their care.
- Key persons undertake changing babies in their key groups wherever possible; back up key persons change them if the key person is absent.
- Nappy changing areas are warm; there are no bright lights shining down in babies' eyes.
- There are mobiles or other objects of interest to take the baby's attention.
- Each baby has their own basket to hand, containing their nappies and changing wipes; there may also be a special toy for the baby to play with.
- Members of staff put on aprons before changing starts and the area is prepared, gloves are always worn for soiled nappies.
- All members of staff are familiar with the hygiene procedures and carry these out when changing nappies.
- Key persons ensure that nappy changing is relaxed and a happy time for babies.
- Key persons never turn their back on a child or leave them unattended on a changing mat.
- Key persons are gentle when changing; they allow time for communicating with the baby, talking, and responding to the baby's sounds. They allow time for play and 'rituals' that the baby enjoys, such as gently tickling tummies or toes.
- Key persons avoid pulling faces and making negative comment about the nappy contents.
- Key persons do not make inappropriate comments about babies' genitals, nor attempt to pull back a baby boy's foreskin to clean unless there is a genuine need to do so for hygiene purposes.

Nappy changing records.

- Key persons record when they changed the baby and whether the baby passed a stool and if there was anything unusual about it e.g. hard and shiny, soft and runny or an unusual colour.

- If the baby does not pass a stool, or if he/she strains to do so, or is passing hard or shiny stools, the parents will be informed. The baby may be constipated so their feed may need to be adjusted. Constipation in babies is not 'normal' and every effort is made with the parent to help them adjust the diet until soft, formed stools are passed.
- A stool that is an unusual colour can usually be related to the food that was eaten, so it is important that this is noted. However, a stool that is black, green or very white indicates a problem, and the child should be taken to the doctor.
- Very soft, watery stools are signs of diarrhoea; strict hygiene needs to be carried out in cleaning the changing area to prevent spread of infection. The parent should be called to inform them, and that if any further symptoms occur they may be required to collect their child.
- Sometimes a baby may have a sore bottom. This may have happened at home as a result of poor care; or the baby may have eaten something that, when passed, created some soreness. The baby also may be allergic to a product being used. This must be noted and discussed with the parent and a plan devised and agreed to help heal the soreness. This may include use of nappy cream or leaving the baby without a nappy in some circumstances. If a medicated nappy cream such as Sudocrem is used, this must be recorded as per procedure 04.02 Administration of medicine.

Young children, intimate care and toileting

- Wherever possible, key persons undertake changing young children in their key groups; back-up key persons change them if the key person is absent.
- Young children from two years may be put into 'pull ups' as soon as they are comfortable with this and if parents agree.
- Changing areas are warm, appropriately sited and there are safe areas to lay young children if they need to have their bottoms cleaned. There are mobiles or other objects of interest to take the child's attention.
- If children refuse to lie down for nappy change, they can be changed whilst standing up, providing it is still possible to clean them effectively.
- Each young child has his/her own basket to hand with their nappies/pull ups and changing wipes.
- Key persons ensure that nappy changing is relaxed and a time to promote independence in young children.
- Young children are encouraged to take an interest in using the toilet; they may just want to sit on it and talk to a friend who is also using the toilet.
- They are encouraged to wash their hands and have soap and paper towels to hand. They should be allowed time for some play as they explore the water and the soap.
- Anti-bacterial hand wash liquid or soap should not be used by young children, as they are no more effective than ordinary soap and water.

- Key persons are gentle when changing and avoid pulling faces and making negative comment about the nappy contents.
- Wipes or cotton wool and water are used to clean the child. Where cultural practices involve children being washed and dried with towels, staff aim to make reasonable adjustments to achieve the desired results in consultation with the child's parents. Where this is not possible it is explained to parents the reasons why. The use of wipes or cotton wool and water achieves the same outcome whilst reducing the risk of cross infection from items such as towels that are not 'single use' or disposable.
- Key persons do not make inappropriate comments about young children's genitals when changing their nappies.
- The procedure for dealing with sore bottoms is the same as that for babies.
- Older children use the toilet when needed and are encouraged to be independent.
- Members of staffs do not wipe older children's bottoms unless there is a need, or unless the child has asked.
- Key persons are responsible for changing where possible. Back-up key persons take over in the key person's absence, but where it is unavoidable that other members of staff are brought in, they must be briefed as to their responsibilities towards designated children, so that no child is inadvertently overlooked and that all children's needs continue to be met.
- Parents are encouraged to provide enough changes of clothes for 'accidents when children are potty training.
- If spare clothes are kept by the setting, they are 'gender neutral' i.e. neutral colours, and are clean, in good condition and are in a range of appropriate sizes.
- If young children are left in wet or soiled nappies/pull-ups in the setting, this may constitute neglect and will be a disciplinary matter.

Nappy changing is always done in an appropriate/designated area. Children are not changed in play areas or next to snack tables. If there are limitations for nappy change areas due to the lay-out of the room or space available this is discussed with the setting manager's line manager so that an appropriate site can be agreed that maintains the dignity of the child and good hygiene practice.

09.10 Prime times – Sleep and rest time

Sleep and rest times are key times in the day for being close and promoting security. Younger children will need to sleep but older children do not usually need to. No child is made to sleep.

Babies under one year

- Babies have a designated place to sleep and personalised bedding. This consists of top and bottom cotton sheets, cotton blanket or polyester filled duvet. Pillows are not used.
- Babies have their own place to put their clothes in as well as any special toy or comforter that they need for sleep.
- Babies are prepared by their key person. Nappies are changed and heavier clothing removed. Babies are soothed to sleep by their key person. If they are distressed, their key person comforts them. Key persons very gently stroke or pat babies.
- The sleep area is made quiet, perhaps with soft music playing and curtains drawn.
- Babies are placed on their backs to sleep
- Sleeping babies are supervised at regular intervals, at least every ten minutes; this is recorded with the time checked and the initials of the person responsible for checking.

Children over 2yrs old

- Children sleep on rest mats and have their own personalised bedding.
- Children have a suitable place or basket to store clothes, shoes and a special toy, book or comforter for sleep. This is labelled with a photo so they can identify their basket (if used).
- Nappies are changed and heavier clothing removed.
- Hair accessories that may come loose or detach are removed before sleep/rest time.
- A separate area is made quiet, perhaps with soft music playing and curtains drawn.
- Children are settled by their key person and comforted to sleep. Key persons may gently stroke or pat children.
- If children fall asleep in-situ it may be necessary to move or wake them to make sure they are comfortable, they are not left to sleep in a buggy or bouncy chair.
- Sleeping children are regularly checked at least every ten minutes and are within sight and/or hearing of staff

Young children

- Young children sleep on rest mats and have their own personalised bedding.
- Young children each have a place to put their clothes and shoes in, and in which they keep any special toy, book, or comforter that they need for sleep.
- Nappies are changed and heavier clothing is removed.
- Hair accessories with parts that may come loose or detached and pose a choking hazard are removed before sleep/rest time.

- A separate area of the room is made as quiet as possible, perhaps with some soft music playing and curtains drawn.
- Young children are settled by their key person. They are soothed to sleep. Key persons may stroke or very gently pat children.
- Sleeping children are supervised within sight and/or hearing of staff at all times.

Further guidance

[Safer Sleep for Babies](http://www.lullabytrust.org.uk/safer-sleep-advice) (Lullaby Trust) www.lullabytrust.org.uk/safer-sleep-advice

09.11 Managing separation anxiety in children under 2 years old

Separation anxiety occurs when babies and toddlers do not feel securely attached to their key person. Taking steps to reduce anxiety and promote attachment is a priority task for the key person in partnership with the parent.

- Separation anxiety can be identified when signals are clearly understood by members of staff.
- Distress in children produces high levels of corticosteroids (neurochemicals) which hinder brain functioning. It is detrimental for babies to experience prolonged distress. Signals include:
 - crying inconsolably for extended periods; causing coughing or difficulty to breath or vomiting
 - holding breath
 - head banging or rocking
 - ambivalent feelings towards the key person, i.e. wanting to be picked up then struggling free
 - frantic movement or lashing out with arms and legs
 - biting, tantrums and snatching from others.
 - jealousy shown towards other children in the key group
 - refusing food or drink or showing signs of digestive problems
 - temporary interest in toys or others, then crying again.
 - prolonged periods of sleep
 - switching off, staring blankly
 - anxiousness about who is coming in and out of a room, standing by the door for long periods
 - being held, but not responding or smiling
 - crying when the parent collects or cheering up and eager when parent collects
- A picture of evidence builds up which may suggest that the baby/toddler is experiencing separation anxiety. This needs to be discussed with the parent and a plan made to help the child settle.
- The parent and key person discuss the reasons that the separation anxiety has developed or been made worse. It could be due to:
 - hurried settling-in due to pressures on parents
 - inadequate settling in due to the key person being absent or the baby not being brought in each day to complete the settling-in plan
 - the key person's absence during settling in period
 - changes of staff
 - part time attendance not allowing sufficient continuity for the baby to become familiar with the surroundings and to make an attachment to the key person

- change of key person in the setting
 - changes at home – stress events in the family
 - baby's illness
 - family having been away on holiday
 - previous distressing experiences with another setting
- The goal of any plan is to ensure the child is secure through forming an attachment with the key person.
 - The settling in process is reviewed; if any aspect has been missed, this needs to be re-planned. This may include the need for the parent to stay or find a close relative or friend whom the child feels safe with if the parent cannot be there.
 - A baby who will be attending on a part-time basis will need to come in daily until he/she is familiar and beginning to settle.

09.13 Identification, assessment and support for children with SEND

We have regard for the Special Educational Needs and Disability (SEND) (DfE and DoH 2015) which states that local authorities must 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 to give each child support to fulfil their potential. During the Covid outbreak we will review and update children's SEN support plans more frequently to ensure their progress and well-being.

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, 9.12a SEN Support: Initial record of concern form can be used for this purpose.
- 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.

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 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 are not already aware of a concern, then the information is shared with them. Once parents 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 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 09.13b SEN support: 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.
- 09.13b SEN support: Action plan described below, 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 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 action plan

- 09.13b SEN support: Action 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 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 file so that any 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, 04.2a Health care plan form 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 action 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.
- 09.13b SEN support: Action 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 with a clear set of targets and expected outcomes for the child. Effective planning at this stage should help parents 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/CAF 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). 09.13a SEN support: Initial record of concern form can also be used for this purpose drawing information from other sources
- the initial discussion with parents raising the possibility of the child's SEN
- the views of the parents 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 action 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 and other persons and any subsequent referrals

Records may include

- observation and monitoring sheets
- expressions of concern
- risk assessments
- access audits (01.01b)
- health care plans (including guidelines for administering medication)
- SEN action plans
- meetings with parents and other agencies
- additional information from and to outside agencies
- agreements with parents

- guidelines for the use of children's individual equipment; Early help CAF 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 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 must inform the child's parents 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 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 then inform the parents 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 must notify the parents and inform the provider, giving the reasons for the decision. This notification must take 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 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 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 must be 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.

Further guidance

[SEND Code of Practice: 0 to 25 years](#) (DfE and DoH 2015)

[Ready, Steady, SENCO](#) (Alliance Publication)

09.14 Prime times – Transition to school

Moving on to school is a major transition in a child's life involving separation from familiar adults and children. Older children have a more secure understanding of 'people permanence' and are able to approach new experiences with confidence. However, they need preparation if they are to approach transition to school with confidence and an awareness of what to expect.

Partnership with schools

- Details of the school that a child will be attending are recorded in the child's file along with the name of the reception class teacher.
- Every effort is made to forge and maintain strong links with all schools that children may attend. The setting manager will approach schools in order to open lines of communication where these have not previously existed.
- Details of the school's transition or settling in procedures are kept by the setting and are referred to so that members of staff are familiar with them and can develop a consistent approach to transition with teachers, parents and children.
- Teachers are welcomed into the setting and sufficient time is made for them to spend both with the child, their parents and with the key person, to discuss and share information that will support the child's transition to school.
- A child's learning journey record is forwarded to the school along with other information that will aid transition and settling in. Parents receive a copy of this.
- Any action plans relating to a child's additional needs are also shared, where this is in place.
- Other formal documentation such as safeguarding information is prepared in line with procedure 07.06 Transfer of records.

Partnership with parents

- Key persons discuss transition to school with parents and set aside time to discuss learning and development summaries. Parents are encouraged to contribute to summaries.
- Key persons will discuss with parents how they are preparing their child for school and will share information about how the setting is working in partnership with the school to aid transition.
- Key persons will make clear to parents the information that will be shared with the school, for example, information regarding child protection and work that has taken place to ensure the child's welfare.

Increasing familiarity for children

- Where the setting is on, or adjacent to a school site, there will be opportunities for children to become familiar with staff and school premises, for example shared use of outdoor and indoor spaces, activities and resources.
- Where possible, the key person will take the child to visit the new school, if this is the school's transition policy.

- If there are several schools in a catchment area, or the setting is not within a reasonable distance of the school, other means of familiarisation will be explored. This could be through videos, photographs or other information about the school that can be shown within the setting. Staff may borrow resources from the schools and will use these with the children.

Preparing children for leaving

- Children and parents form bonds with adults and children in the setting and will need preparation for separating from the relationships they have formed.
- The child's last day should be prepared for in advance and marked with a special celebration or party that acknowledges that the child is moving on.
- Parents should not be discouraged from bringing the child for the occasional brief visit, as separations often take time to complete. Sometimes children need the reassurance that their nursery/pre-school is still there and that they are remembered.