Guidelines and Procedures for Staged Intervention in the Early Years
Introduction

All children have a right to be included, to have equal access to services and to play and have fun. It is important that all children, including those with additional support needs have the opportunity to play and are equally included in games, activities and social opportunities. We are responsible for making sure this happens.

Under Getting it Right for Every Child (GIRFEC) it is our responsibility to work with children, families and other professionals to put the Child at the centre of all that we do.

This Guidance has been produced jointly between the Early Years Team and the Principal Teachers of Learning Support to provide clarity for staff working across the Early Years Sector, to support early intervention in meeting needs and to provide consistency of approach.

The Guidance provides strategies for staff to use and processes to follow which will support better outcomes for all children.

*We would welcome any feedback on how this Guidance can be improved.*

ASN Manager/Early Years Manager

CONTENT

1  Additional Support Needs
4  Staged Intervention level 1
5  Staged Intervention level 2
6  Staged Intervention level 3
7  Staged Intervention level 4
8  Roles and responsibilities

Appendices:  9  Examples of Evidence
           10  Pathway Summary
           11  Applying the Staged Approach
           12  Transitions (Home to Nursery)
           13  Transitions (Nursery to School)
           14  Manual Handling and Child Protection
**Additional Support Needs**

The Education (Additional Support for Learning) Act 2004 which was amended in 2009 introduced duties on local authorities to meet the needs of children and young people who have additional support needs. The Act defined additional support needs in much broader terms. Any different number of circumstances can affect a child’s ability to learn.

A child or young person has additional support needs if they need extra help (compared with their peers) to get the most out of nursery or school. This does not just mean academically, but also covers other aspects of being in nursery or school eg confidence, social skills or behaviour.

The needs of some children and young people are such that in order to benefit from nursery or school education they require support that is additional to or different from the provision provided to their peers. This support may be long or short term and may involve working in partnership with others. Additional support may include:

- A particular teaching approach
- Differentiation
- Access to Speech and Language Therapy, Occupational Therapy, Physiotherapy
- Additional time to complete tasks
- Access to support staff
- Provision of additional resources etc

All children and young people need support to help them learn, some need more support than others. The level of need and form of help is determined by the assessment of a child’s additional support needs. **The nature and amount of assessment that is required should always be proportionate.**

The Curriculum for Excellence provides structure for the learning, teaching and assessment for all children and young people aged 3-18.

Early Years staff are responsible for the learning and teaching of **ALL** the children in their group.
In the Western Isles additional support needs are met through the process of Staged Assessment and Intervention using the GIRFEC pathway (appendix 2).

Additional support needs (ASN) covers a range of things that may result in barriers to learning and play. This means that as well as identified disabilities such as autism spectrum disorder, cerebral palsy etc, other needs are taken into account. Additional support needs refers to children who face barriers to their learning because of things to do with their:

- Health or disability
- Learning environment
- Family circumstance
- Social and Emotional development

This would include children for whom English is an additional language, children who are the subject of bullying behaviour, have behavioural problems themselves or who are from disrupted families and those affected by drug/alcohol problems.

See the ASN Guidance document for Early Years Staff ‘helping children to succeed’ for a range of ideas to support children who present with any difficulties.

**Staged Assessment and Intervention**

Supporting Children’s Learning Code of Practice advocates the use of a staged approach when assessing and supporting the needs of children & young people.

Staged Assessment and Intervention provides a framework alongside GIRFEC for identifying, assessing, planning, implementing, evaluating and reviewing any interventions, strategies and actions as well as a structured system of record keeping for children and young people who have additional support needs. It emphasises early intervention to identify, record and assess needs, assessment is on-going and not restricted to a particular point or episode in a child’s life.

When assessing a child or young person’s needs we must consider the complex interplay of factors which influence the ability of a child or young person to reach their potential.

There are four stages of Staged Assessment and Intervention and children and young people are placed on a Stage according to how much their needs impact on their learning.
Identifying Additional Support Needs

Staged Assessment and Intervention is the process for identifying and assessing Additional Support Needs in the Western Isles.

It is important to remember that babies and children develop in individual ways and at varying rates. Every area of development, whether sensory, physical, cognitive, play, communication, attention & listening or social and emotional is equally important. Every child is UNIQUE. Early Years settings should have high aspirations for ALL children, providing approaches to support the development of each child.

Children with complex needs will usually have these needs identified early through the Health Visitor and as a result of the 27-36 month check. A transition plan for these children to access their Early Years setting can be planned through PreScat, the Pre-School assessment Team.

However, for other children, the difficulties may only become evident as they grow and develop and as they learn and interact in new and different environments.

Monitoring the development and progress of all learners is important, as this indicates children who may not be making the progress expected. All children will start Nursery at different stages and with varied experiences; some are active, talkative and confident whilst others may be reticent, especially if they join a Croileagan/Sgoil Araich and have little experience of Gaidhlig and vice versa if the child’s first language is Gaidhlig, yet peers use English when communicating. It is important to have a good understanding of a child’s starting point (baseline) against which you can measure progress. Within Early Years settings this is done through the Child’s Profile.

All children are entitled to high quality learning experiences supported by skilled and qualified staff. Early Years settings deliver a Curriculum for Excellence which supports the learning and development of ALL children. They are supported by an Early Years Support Officer and the Head Teacher. Not all provisions are attached to schools, but all have access to an Early Years Officer.
Staged Intervention level 1

Staged Intervention level 1 is a monitoring process where staff have any concerns. Simple, supportive strategies are tried and recorded. Progress is monitored. Where progress is made no further action is required. Where concerns are ongoing, strategies can continue. If no progress is evident following this, consideration should be made to moving to Staged Intervention level 2.

Where there are any concerns about a child’s development staff will be:

- Sharing concerns with Play Leader/Nursery Manager/Head Teacher (whoever is the senior person on a day-to-day basis) and Parent/Carer
- Inform Health Visitor as Named Person
- Informing the Early Years Support Officer
- Trying strategies in ASN Guidance for Early Years Staff
- Recording information on Strategies Monitoring form (see ASN Guidance for Early Years Staff)
- Keeping any evidence (eg written observations)
- Establishing a baseline (ie where the child is currently, so that staff can identify whether interventions have supported progress).
- Considering the key GIRFEC questions (below)

GIRFEC 5 key questions

- What is getting in the way of the child’s wellbeing?
- Do I have all the information I need to help this child?
- What can I do now to help this child?
- What can my agency do to help this child?
- What additional help, if any, may be needed from others?
Staged Intervention level 2

Staged Intervention level 2 is used to record when concerns about a child’s development are ongoing and any strategies tried have had little impact.

Where there are ongoing concerns about a child’s development:

- Staff will share concerns with Play Leader/Nursery Manager/Head Teacher (whoever is the senior person on a day-to-day basis), Health Visitor and Parent/Carer.
- Play Leader/Nursery Manager/Head Teacher (whoever is the senior person on a day-to-day basis) will contact EYSO. Health Visitor to be contacted. For pre-school children, the Health Visitor is identified as the Named Person.
- Head Teacher informed (if not already involved).
- Child’s Meeting will be arranged by Health Visitor supported by Early Years Support Officer.
- Child’s Meeting is run by Health Visitor and is attended by Parent/Carer, Head Teacher, Nursery Key Worker and/or Play Leader/Nursery Manager.
- Child’s meeting looks at evidence, considers GIRFEC questions, agrees next steps – including identifying Lead Professional if there is to be multiple agency involvement and who Support for Learning contact* is for consultation and advice re observations/checklists for onward referrals etc.
- Child Assessment and Plan is completed at the meeting (proportionately) which will include agreed next steps – this may include possible referrals to other agencies.
- Child Assessment and Plan should be reviewed at least annually. Progress is monitored. Where progress is made the child may return to Staged Intervention level 1. Where concerns are ongoing, plan is updated and continues at level 2. If no progress is evident following interventions, consideration should be made to moving to Staged Intervention level 3.
- Head Teacher ensures SEEMiS is updated.

*There may be a Support for Learning Teacher associated with the school – if not, and where nurseries are not directly attached to a school or are run privately, there will be Principal Teacher of Support for Learning who will assist directly or will identify a Support for Learning Teacher.

GIRFEC 5 key questions

- What is getting in the way of the child’s wellbeing?
- Do I have all the information I need to help this child?
- What can I do now to help this child?
- What can my agency do to help this child?
- What additional help, if any, may be needed from others?
Staged Intervention level 3

Staged Intervention level 3 may be required where targeted planning/support/interventions are required to support a child’s development and they require to follow specific individualised activities which differ significantly from the general activities of the children in Nursery on a daily basis. A Child Assessment and Plan will already be in place. Other agencies (eg Speech and Language Therapy/Occupational Therapy/Inclusion etc) may be involved. A Support for Learning Teacher will be involved. Evidence gathering will be ongoing.

- The Child’s Plan will clearly identify targets.
- There may be more detailed daily/weekly progress records to be completed.
- Short term targets should be reviewed termly.
- Long term targets are reviewed at the annual Child Assessment and Plan review.
- A Lead Professional may coordinate inputs where there is multi agency involvement.
- The Health Visitor as Named Person will be directly involved.
- Head Teacher ensures SEEMiS is updated.

GIRFEC 5 key questions
- What is getting in the way of the child’s wellbeing?
- Do I have all the information I need to help this child?
- What can I do now to help this child?
- What can my agency do to help this child?
- What additional help, if any, may be needed from others?
Staged Intervention level 4

Some young children will arrive at pre-school provision with already identified Additional Support Needs that are complex and/or multiple and this will have a significant impact on their learning. These needs require an ongoing, highly individualised and adapted curriculum which is different to that of their peers for most of their time in the Nursery. They may require access to a shared placement of require enhanced or specialist provision. There will be significant involvement from partner agencies such as health, social work and the voluntary sector and the area Principal Teacher of Learning Support will already have been informed and may already be involved. Needs will be ongoing.

As with Staged Intervention level 2 and 3, a Child’s Assessment and Plan should be in place with annual review of long term targets and termly review of short term targets.

- The Named Person and Lead Professional will work together to ensure all aspects of the Child’s Assessment and Plan are put in place.
- Children at Staged Intervention level 4 may meet the criteria for a Co-ordinated Support Plan (a legally binding document which confirms educational objectives and lists which partner agencies are involved and what they will do). This should be discussed at the annual review meeting. There is a section of the Child’s Assessment and Plan for recording any Co-ordinated Support Plan details.
- Day-to-day management will be as Staged Intervention level 3.
- Head Teacher ensures SEEMiS is updated.

GIRFEC 5 key questions
• What is getting in the way of the child’s wellbeing?
• Do I have all the information I need to help this child?
• What can I do now to help this child?
• What can my agency do to help this child?
• What additional help, if any, may be needed from others?
Staged Intervention roles and responsibilities

Named Person
The Named Person’s role is to respond to requests for help from a child, young person or parent, and those who work with them where they have concerns for a child’s wellbeing, Health Visitor for pre-school children. The Named Person is a key element of GIRFEC ensuring that there is a point of contact for every child and their parents/carers to enable wellbeing concerns to be considered in the round and appropriate early support and early intervention to be delivered if required.

Lead Professional (identified where a child has input from multiple agencies)
The Lead Professional’s role is to make sure that the Child’s Plan is managed properly and to co-ordinate the support described in the Plan. They act as the main point of contact for children, parents/carers and practitioners. They will consult and work with the Named Person. “The Lead Professional will be someone employed by one of the services involved in supporting the child and family. When a Child’s Plan is prepared the partners to the plan, including the child and parents, will need to consider who is the right person to take on the role of Lead Professional. In making that decision they will need to choose the practitioner who has the right skills and experience, and who can work with the child, the parents, the Named Person and the other services who support the child.”

Early Years Support Officer
Authority contact beyond the Nursery/School. Can be contacted at any point of the Staged Intervention process but will be directly involved if a child is moving from Staged Intervention level 1 to level 2. Will liaise with Play leaders/Nursery Managers and Head Teachers and will work with Support for Learning Teachers and/or Principal Teachers of Support for Learning to help identify next steps.

Support for Learning Teacher
Could be involved in an advisory role at Staged Intervention level 2. Will work with Early Years Support Officer to help identify next steps, may support Nursery staff to complete any specific checklists requested (eg for a Speech and Language Therapy referral). Is likely to be directly involved where a child is progressing to a Staged Intervention level 3 and will be involved where a child is at Staged Intervention level 4. Works with Nursery associated with a Primary school and may be asked by the Principal Teachers of Support for Learning to liaise with private establishments.

Principal Teacher of Support for Learning
Could be involved in an advisory role at Staged Intervention level 2 where there is no Support for Learning Teacher available at the associated Primary school or where it is a privately run establishment. Where a child is moving to Staged Intervention level 3 the
**Principal Teacher of Support for Learning** should be made aware of the child if not already involved. Will process any **Requests to Commit Resources** which are made as a result of extra resources/staffing requests.

**Health Visitor**
First point of contact for families with health concerns. Identified as **Named Person** and will work closely with **Lead Professional** (if appointed) to progress any matters related to **Child’s Assessment and Plan**.

**Head Teacher**
Kept informed. Ensures details are recorded on SEEMiS. Oversees transition and takes over from **Health Visitor** as **Named Person** on entry to school.

**Examples of evidence**
The following list gives examples of evidence which can be recorded to assist with identifying baselines:

- Observations of the child engaged in different activities
- Child’s strengths
- Evidence from tracking (informal or formal) and developmental stage eg 27-36 month check
- Information from the parent/carer about the child in and out of setting
- Child’s views & responses to learning opportunities
- Confidence within setting, any anxiety or behaviour issues
- Relationships and interactions with adults and peers
- Communication, use of language, listening & response to questioning
- Motor skills both gross and fine motor

- Attention levels
- Child’s achievements
- Attendance
- Other agency involvement/information eg Health Visitor, Speech and Language Therapist, Physiotherapist, Occupational Therapist
- Examples of work done with **and** without support
Early Years staff concerned about child.

Minor adaptations (ASN GUIDANCE BOOKLET) Monitored by staff

Inform Health Visitor as Named Person. Initial discussion with EYSO about impact of minor adaptations and other evidence gathered. Agree strategies to try etc with EYSO. Inform Parents of concerns

EYSO to support staff with observations and developmental checklists. Inform HT

Consult with & seek further advice/support from Health Visitor and/or Allied Health Professionals Initial contact for advice from Support for Learning Teacher (eg phone/email)

Differentiation, intervention, adaptation, evidence gathered using template (ASN GUIDANCE BOOKLET)

Still concerned, arrange a Child’s Meeting to discuss Child’s Plan, additional resources required etc Support for Learning Teacher identified to liaise with EYSO and Early Years staff to provide input on identified ASNs, support writing Child’s Plan and monitoring progress. HT ensures recorded on SEEMiS

Review Child’s Plan.

Still concerns, all staff follow Staged Assessment and Intervention process. Remain at stage 2 or move to stage 3.

Needs met, no concerns. No additional support required. Move to stage 1 or Universal

Stage 1

Stage 2

ASNs

No additional support required

No additional support required

Remain Stage 1

Remain at stage 2 or move to stage 3

Universal
Applying the Staged Approach to ASN in Early Years settings.
This chart shows the graduated response which settings should refer to in order to meet children’s individual needs.

<table>
<thead>
<tr>
<th>Level</th>
<th>Who</th>
<th>Action</th>
<th>Next Steps</th>
</tr>
</thead>
<tbody>
<tr>
<td>Stage 1</td>
<td>Nursery Staff &amp; EYSO, HV, HT, Parents</td>
<td>Differentiation Staff adjust activities according to individual needs to help the child succeed and progress</td>
<td>Gather evidence of what tried &amp; impact. Call Child’s Meeting. Involve SFL</td>
</tr>
<tr>
<td>Stage 2</td>
<td>Nursery Staff &amp; EYO, HT, Parents, SFL, HV, AHPs</td>
<td>Child’s Plan agreed. Additional or different activities and/or resources are used to meet child’s needs. Plan is reviewed regularly.</td>
<td>Move to stage 3, individualised curriculum, multi-agency input to meet needs.</td>
</tr>
<tr>
<td>Stage 3</td>
<td>Nursery Staff &amp; EYO, HT, Parents, SFL, PTLSs, HV, AHPs</td>
<td>Certain aspects of the Curriculum are individualised in order for child’s needs to be met as in Child’s Plan.</td>
<td>Move to stage 4, ASN is complex or multiple</td>
</tr>
<tr>
<td>Stage 4</td>
<td>Nursery Staff &amp; EYO, HT, Parents, SFL, PTLSs, HV, AHPs</td>
<td>Intensive, multi-agency planning of support. Curriculum is highly individualised or adapted.</td>
<td>Consider if meet criteria for a CSP</td>
</tr>
</tbody>
</table>
Transitions for Children who require Additional Support.

From Home to Nursery

The Act places the following duties on the Education Authority:

- Provide additional support where a child under age of 3 has been brought to the attention of WIHB as having ASN arising from a disability.
- Identify ASN of children in pre-school provision and make appropriate arrangements for support

Information gathering starts at least 6 months before the child starts pre-school where child is known to Education Dept. Early identification, planning & support are important.

Pre-school children may be referred to Pre-Scat in Southern Isles or ATU in Lewis & Harris. These groups will support the transition into pre-school as required.

Staged Intervention will operate in all pre-school provider establishments and this will identify, assess, monitor & review children with ASNs.

<table>
<thead>
<tr>
<th>Timetable for Transition to Pre-School Provision</th>
</tr>
</thead>
<tbody>
<tr>
<td>Before the age of 3 and ongoing.</td>
</tr>
<tr>
<td>6 months prior to starting pre-school</td>
</tr>
<tr>
<td>3 months prior to starting school</td>
</tr>
<tr>
<td>6 weeks after starting</td>
</tr>
</tbody>
</table>
**From Pre-School to Primary**

In order to comply with the statutory regulations the transition planning process should begin at least 6 months before the Primary 1 entry date and information should be provided to the school at least 3 months before this date.

Key features of effective practice to support transition to Primary School would be early planning and communication through meetings between key adults (possibly Staged Intervention Meetings/reviews, Pre-Scat or ATU), effective transfer of information and if required identification of and training for staff.

6 months before starting school a Transition Plan is drawn up which will include induction arrangements, additional visits for child and/or parents, school staff to visit pre-school provider to meet child and/or observe.

**Timetable for Transition to Primary School**

<table>
<thead>
<tr>
<th>Sept-Dec</th>
<th>Options explained to parents</th>
</tr>
</thead>
</table>
| January/February    | Multi-agency Meeting with parents. (Pre-Scat or ATU)  
Transition Plan agreed.  
Minute distributed |
| February            | School Enrolment             |
| February onwards    | Transition plan implemented to include:  
- Visits: parents  
  - child  
  - school staff  
- Compilation of information |
| End of May          | Pre-School Transition Record, IEP, CSP, Passport passed to school |
| Sept/Oct            | Review with parents & agencies as appropriate |
**Manual Handling**

Moving and handling pupils can be a part of working with children with complex additional support needs. Common situations which can be potentially hazardous occur when moving into and out of vehicles, lifting wheelchairs or a buggy; intimate care, transferring between specialist seating and equipment and emergency evacuation. All manual handling operations that are a risk to individual employees and individual children should be avoided as far as is reasonably practicable. All manual handling should be risk assessed and a plan drawn up. The Occupational Therapist and Physiotherapist may be involved in producing and advising on this. Staff should attend manual and handling training. Staff should discuss any concerns with their Early Years Support Officer.

**Child Protection**


The protection of children is everyone’s job and everyone’s responsibility. If you are worried or concerned about a child in your setting you should contact CNES Social work.