Before coming to LIFT consider the following...

Have you followed the graduated approach and Kent processes?		
Graduated Approach Flow Chart for EY settings		
First time that a concern has been raised – start at Universal. Don't panic!		
Always look holistically – what else is going on for the child?		
Universal adjustments are not enough – go to Targeted support, at least two terms (2 Targeted Plans)		
Progress and evidence show that practice at Targeted is not enough – consult with E&I Team.		
If the child is within a year of starting school – move through stages more rapidly.		
Other professionals are already involved with child – start at Personalised (use Personalised Plan)		
Consider which referral routes may be appropriate or have already been accepted. This may include:		
Portage- https://www.kelsi.org.uk/special-education-needs/special-education-needs/special-educational-needs/kent-		
<u>portage</u>		
Sensory Services (HI/VI/MSI)		
https://www.stlsvalence.com/page/?title=STLS+Sensory+Service+Kent&pid=10		
 Physical Disability https://www.stlsvalence.com/page/?title=STLS+PD+Kent&pid=9 		
(PD referrals are made via EY LIFT).		
 Health – CCCT or Community Speech and Language (referrals made via NHS Pod website). 		
 Education – Personalised support from EY Specialist Teachers - bring to EY LIFT. 		
NB Children with a diagnosis who are progressing well may not need to be brought to EY LIFT.		
See <u>The One Stop Document for Early Years Special Educational Needs Coordinators</u> for useful links.		
Remember if a setting or parents are considering an Education, Health and Care Needs assessment,		
the setting should have followed and have evidence of the graduated approach and Kent's processes.		
Parental requests MUST show discussion with setting (see KELSI for guidance).		

Have you used the Best Practice Guidance for the Early Years document? Each setting has a copy. https://www.kelsi.org.uk/early-years/equality-and-inclusion/best-practice-guidance-for-the-early-years	Yes/No
 Use BPG document for ideas and strategies to support child in the four broad areas of need. Use a BPG audit tool as a working document to record adjustments, strategies and impact that are being used at the Universal, Targeted level remember to add dates. 	

Have you sought advice from Equality and Inclusion Team (E&I)?			
Have you sought advice from Equality and Inclusion Team (E&I)?			
E&I Team can support with Universal or Targeted practice including writing Targeted Plans.			
 Request support from E&I Team via <u>Equality and Inclusion request form</u> 			
E&I Team will provide a Record of Conversation with agreed actions; virtual/face to face visit.			
 Use agreed actions from E&I as strategies in T Plans and review impact on child's progress. 			
Use E&I Record of Conversation as evidence as part of EY LIFT request.			
Follow E&I advice about when to consider bringing to EY LIFT.			

Have you made a referral to Early Help? Information is available at:	
https://www.kelsi.org.uk/special-education-needs/integrated-childrens-services/early-help-contacts	
Talk with family about support and advice available from Early Help.	

Have you linked with the Health Visiting Team?	Yes/No	
Families or settings can make referrals to Health Visiting Service for a range of concerns regarding		
children's development www.kentcht.nhs.uk/service/kent-baby/health-visiting-service/		
 Talk with family about involvement with Health Visiting (HV) team. 		
 Ask if child has had their health and development review at 2? What was the outcome? 		
Do they need another Health Visitor assessment?		
If there are social communication concerns, discuss requesting an ASQSE (Ages and Stages)		
Questionnaire Social Emotional) assessment, in person where possible.		
 Setting can provide overview of how child presents in setting and current levels of 		
development.		
Consider HV feedback and if needed, complete EY LIFT request.		

Have y	ou looked at and used resources available on St Nicholas School website?	Yes/No
https:/	<u>//www.st-nicholas.kent.sch.uk/STLS/advice-for-sencos</u>	
Senso	ry resources to find out more about a child's sensory needs:	
•	Sensory assessment – complete copy at setting and ask families to complete copy at home.	
•	Sensory profile – look at similarities and differences between two assessments, are they	
	demonstrating sensory seeking behaviours and/or sensory avoidant behaviours?	
•	Supporting children with sensory differences – use this document to ideas and strategies to provide for children's sensory needs.	
Also se	ee BPG Sensory Processing pages 23-4 or NAS website for Sensory Resources/strategies.	
•	If no progress after intervention - consult with E&I Team or consider bringing to EY LIFT.	
Functi	onal behaviour analysis resources:	
•	Complete an ABC or ABCC form to record what happens when child finds situations	
	challenging/difficult or displays challenging behaviours. Then complete an analysis of key times,	
	possible triggers for certain behaviours/frustrations.	
•	Remember to record when it is going well for children to identify strategies that are working.	
•	Complete a TEACCH Iceberg as a team to understand the 'whys' underneath the presenting behaviour	
	and brainstorm some 'hows' (strategies to support).	
•	If Child's wellbeing is low- look at 'How I am Feeling' PowerPoint/Understanding Emotions	
•	Consider the child's experience of Lockdown	
•	If no progress after intervention - consult with E&I Team or consider bringing to EY LIFT.	
Play sl	xills analysis:	
•	Observe child's play skills and identify child's current level of play. 'Supporting Play' document can be used to identify appropriate strategies to support.	
•	If no progress after intervention - consult with E&I Team or consider bringing to EY LIFT.	
Visual	supports:	
•	Consider how visuals are used as a universal strategy to support all children with understanding of	
	routine, passing of time and emotional stability (see BPG p35-36).	
•	Consider which type of visual supports would be most appropriate for child e.g. real objects,	
	photographs of real objects, symbols and implement.	
•	If no progress after intervention - consult with E&I Team or consider bringing to EY LIFT.	
Joint A	Attention and Intensive Interaction:	
•	Implement and evaluate these interventions.	
•	If no progress after intervention - consult with E&I Team or consider bringing to EY LIFT.	

Have you looked at and used resources, workshops and information available on NHS Pod website? https://www.kentcht.nhs.uk/childrens-therapies-the-pod/	Yes/No
 Look at range of resources and information on Occupational therapy, Physiotherapy, Speech and Language therapy and Care Coordination. 	
 Speech and language therapy: https://www.kentcht.nhs.uk/childrens-therapies-the-pod/speech-and-language-therapy/ Look at language tree and identify where child is with their language development. Are they still developing attention and listening, social communication and play at the 'roots' level? Look at related useful leaflets for ideas and strategies. This information can be shared with parents to support at home. Use the developmental norms from Speech and Language Therapy (SALT) referral paperwork to support more detailed assessments of child's language skills. 	
Consider whether a referral to SALT would be appropriate.	

See Kelsi Local Inclusion Forum Team (LIFT) page, EY LIFT section for required paperwork to bring case to EY LIFT: https://www.kelsi.org.uk/special-education-needs/special-educational-needs/local-inclusion-forum-teams
Please ensure you are using the most recent paperwork. **Requests on out-of-date paperwork will be returned.**

Just a note about accessing SENIF before coming to EY LIFT

SENIF is usually applied for post EY LIFT, unless child is accessing Portage on entry to setting. In this circumstance, SENIF application <u>must</u> be made within the first 7 weeks of child starting setting. Applications through SENIF: <u>www.kelsi.org.uk/special-education-needs/special-educational-needs/senif</u>