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| **Child’s Details** | | | | | |
| **Name** |  | **Date of Birth** |  | **Year of School Entry** |  |
| **Address** |  | | | **Post code** |  |
|  |  | | | **Home Language** |  |

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| **Parent / Carer Details (with parental responsibility)** | | | |
| **Name** |  | **Relationship to the child** |  |
| **Address (if different from above)** |  | **Postcode** |  |
| **Telephone numbers** |  | **Email address** |  |
| **Name** |  | **Relationship to the child** |  |
| **Address** |  | **Post code** |  |
| **Telephone number** |  | **E-mail address** |  |

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| **Medical or Health Information** | | | | |
| **G.P Name** |  | **NHS Number** |  | |
| **G.P. Address** |  | | **Postcode** |  |
| **Health Visitor** |  | **Contact details** |  | |

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| **Early Years Provider Details** | | | |
| **Setting Name** |  | **Manager** |  |
| **Telephone number** |  | **SENCO** |  |
| **Email** |  | **Key Worker** |  |
| **Address** |  | | |

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| **Attendance** | | | | | | |
| **Date started** |  | **Attends Term time** |  | | **Attends Full year** |  |
|  | **Autumn** | **Spring** | | **Summer** | | |
| **Monday** |  |  | |  | | |
| **Tuesday** |  |  | |  | | |
| **Wednesday** |  |  | |  | | |
| **Thursday** |  |  | |  | | |
| **Friday** |  |  | |  | | |
| **Total hours per week** |  |  | |  | | |
| **Staffing Ratio** |  |  | |  | | |

**Please copy the above table and insert for second year if needed**

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| **Family Circumstances** | | | | | | |
| **TAF** | **CIN** | **CP Plan** | **LAC** | **DLA** | **2 Year funded** | **3/4 Year**  **funded** |
| Yes/No | Yes/No | Yes/No | Yes/No | Yes/No | Yes/No  No. of hours   |  | | --- | |  | | Yes/No  No. of hours   |  | | --- | |  | |

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| **Graduated Response** | | | | | |
|  | **Discussion with parents** | **Action for Inclusion Meeting** | **Action for Inclusion Plan Review** | **Targeted Interventions written** | **Targeted Interventions reviewed** |
| **Date** |  |  |  |  |  |
| **Date** |  |  |  |  |  |
| **Date** |  |  |  |  |  |
| **Date** |  |  |  |  |  |

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| **Referrals to Professionals (made by setting)** | | | | | |
|  | **Date** | **Outcome** |  | **Date** | **Outcome** |
| **SALT** |  |  | **Physio** |  |  |
| **Paediatrician** |  |  | **OT** |  |  |
| **EP** |  |  | **Other** |  |  |
|  |  |  |  |  |  |

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| **Professionals Involved** | | | |
| **Name** | **Role / Service** | **Contact Details** | |
| **email** | **phone** |
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| **Diagnosis (If any)** | **Given by** | **Date** |
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| **Areas of Need** | |
| **Communication and Interaction** | |
| **Strengths** | **Special educational needs related to learning** |
|  |  |
| **Cognition, Play and Learning** | |
| **Strengths** | **Special educational needs related to learning** |
|  |  |
| **Sensory and/or Physical** | |
| **Strengths** | **Special educational needs related to learning** |
|  |  |
| **Social, Emotional and Mental Health** | |
| **Strengths** | **Special educational needs related to learning** |
|  |  |

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| **Early Years Inclusion Funding** | | | |
| Date Inclusion Funding request submitted |  | Outcome of Panel (level of funding/hours) |  |
| Review of Inclusion Funding due (date) |  | Date EHC Needs Assessment requested (if applicable) |  |

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| **Early Years Foundation Stage - Learning and Development Summary** | | | | |
| **Characteristics of Effective Learning**  ***Playing and exploring***: *How do they find out and explore? How do they play with what they know? Are they willing to have a go?*  ***Active learning*:** *Do they become involved and concentrate? Do they enjoy achieving what they set out to do? Do they keep on trying? Behaviour in relation to multisensory stimuli?*  ***Creating and thinking critically*:** *Do they have their own ideas? Do they make links? Do they choose different ways of doing things?* | | | | |
| **Describe how the child learns:** | | | | |
| **Areas of Learning** | | **Am I learning within my age range according to the EYFS and observation checkpoints in Development Matters?** | | **Comments / Briefly describe what the child can do** |
| **Yes** | **No** |
| **Personal, Social and Emotional Development** | **Self-Regulation** |  |  |  |
| **Managing Self** |  |  |  |
| **Building Relationships** |  |  |  |
| **Communication and Language** | **Listening, Attention & Understanding** |  |  |  |
| **Speaking** |  |  |  |
| **Physical Development** | **Gross motor skills** |  |  |  |
| **Fine motor skills** |  |  |  |
| **The specific areas**  **(Include information if appropriate)** | **Literacy** |  |  |  |
| **Maths** |  |  |  |
| **Understanding the World** |  |  |  |
| **Expressive Arts and Design** |  |  |  |

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| **EY SEND Profile Completed by** | **Name** |  |
|  | **Date** |  |

**Confirmation of parental consent**

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| --- | --- | --- | --- |
| **Name of child / young person:** |  | | |
| **Declaration of Consent** | **Printed Name** | **Signature** | **Date** |
| I am the parent of the above-named child and have \*parental responsibility, I have been made aware of my data protection rights. I agree that the EY SEND Profile is a true representation of my child’s history and I understand that that it may be shared with other education, health & social care professionals as appropriate. |  |  |  |

**Please ensure that you have read the** [**privacy notice**](https://www.cheshirewestandchester.gov.uk/system-pages/privacy-notices/special-educational-needs-and-disability-privacy-notice.aspx) **available on the Council website**. We take your privacy seriously and will only use your personal information to administer the service you have requested from us.

\***Parental responsibility is defined** under Section 3 (1) of the Children Act 1989 as meaning all the duties, rights, powers, responsibilities, and authority which parents have with respect to their children and their children’s property. Under Section 2 of the Children Act 1989, parental responsibility falls upon:

* all mothers and fathers who were married to each other at the time of the child’s birth (including those who have since separated or divorced).
* mothers who were not married to the father at the time of the child’s birth.
* fathers who were not married to the mother at the time of the child’s birth, but who have obtained parental responsibility either by agreement with the child’s mother or through a court order.
* Under Section 12 of the Children Act 1989, where a court makes a residence order in favour of any person who is not the parent or guardian of the child, that person has parental responsibility for the child while the residence order remains in force.
* Under section 33 (3) of the Children Act 1989, while a care order is in force with respect to a child, the social services department designated by the order will have parental responsibility for that child and will have the power (subject to certain provisions) to determine the extent to which a parent or guardian of the child may meet his or her parental responsibility for the child. The social services department cannot have parental responsibility for a child unless that child is the subject of a care order, except for very limited purposes where an emergency protection order is in force under Section 44 of the Children Act 1989.