

Outcomes for children

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SECTION 6: OUTCOMES FOR CHILDREN

This section is about the progress of different groups of children from their starting points. You may find it helpful to refer to pages 41–44 of the early years inspection handbook, pages 10–12 of the EYFS and Early Years Outcomes. You should evaluate how well you:

- identify children's starting points and the progress they are making over time
- support children who are disadvantaged or under-performing to catch up
- help children to work at typical levels of development for their age, including those whose development exceeds what is typical for their age
- help children to develop skills that will help them to be ready for the next stage of learning.

Do not just list what you do but consider the **impact** of your work and how well you and any assistants that work with you:

- challenge children to develop and make good progress towards the early learning goals from their starting points
- help children to think critically, play and explore and be active and creative learners
- check the progress children are making across the areas of learning
- ensure that children achieve as much as they can in relation to their starting points
- help children to enjoy their learning, be motivated and excited to take part in activities.

- children usually visit the setting twice before they start – at the second visit parents/carers complete a registration form with the proposed keyworker – this has proved a very effective way of building rapport as well as gathering information about the child and their family, their likes and dislikes, special words etc – parents/carers then take their child's new Learning Journey home to complete 'All About Me' pages (basic information) – and the Learning Journey also contains an introduction and information about what we do at pre-school and why with regard to the EYFS –
- **new children settle well and easily, those that find it more difficult are eased in very gently and are offered small chunks of time eg starting with 10 -20 minutes a day so that they feel secure that parent/carer is coming back – this approach has been almost 100% successful (in the**

instances where it hasn't worked we have worked together with parents to agree that it is in child's best interests to wait until they are older – and again this has been successful approach)

- each keyworker completes a baseline assessment on their keychildren within six weeks of the child starting with us – we hold formal reviews in October and April for all children – so for example, children starting in September (as majority do) will have baseline assessment done and review with parents/carers within 6/7 weeks of joining us
- this system of registration and review means that any concerns of parents/carers or ourselves are quickly identified and addressed
- tracking of children's progress is evidenced on progress charts which are completed every 3 to 4 months and always before each review – they offer clear visual evidence of progress, but a statement at footer of charts reassures parents/carers that where their child may not have moved up a band it does not mean that they have not made progress and we help parents/carers understand this by sharing information from EYFS guidance– we have found that parents/carers respond well to this shared process and concur with our assessments
- as children's progress is regularly tracked next steps are identified regularly by keyworkers and constantly evaluated, keyworkers improve their knowledge, understanding and skill as all members of the team are confident to consult one another to discuss a children's next steps and we learn from consulting one another
- individual children's needs are discussed in planning meetings or in post session evaluation so that activities and resources are tailored and where we have concerns the profile of that child is raised and extra attention paid by whole team
- we will often share observations with one another on each others key children so that a broader view of the child is built
- we aim to complete 2 year assessment checks within 6weeks on all children who join us who are under 36mths (an EYFS baseline assessment is also carried out)
- keyworkers assess their keychildren more closely in small group 'bubbles'
- if a child starts with us and additional needs have already been identified, or other professionals involved we ask to see copies of reports and seek written permission to liaise with them, usually health visitors and speech and language therapists

- children with additional needs or SEND have One Page Profiles and if necessary One Plans so that very particular needs are identified and extra support is given
- we have challenged other professionals when we feel that a family has not received an adequate service and in one case **this immediately activated a referral by Health Visitor to Paediatric team which in turn led to that child receiving Special Educational Needs (SEN) Premium from our local authority so that we were enabled to employ an extra member of staff for 9 hours a week – that child has made significant progress across all areas of learning**
- where special or additional needs are identified those children are given increased support in daily adult-led activities 1:1 or in small groups, and hover supported within the rest of the session and enabled to access the whole of the curriculum
- we have prepared thorough reports and accompanied families (at their request/ with their permission) to appointments to CADU and paediatricians, and SALT to ensure that those professionals receive a good all-round knowledge of the child
- **the child in receipt of SEN Premium who has been with us since he was 31 months and whose baseline assessment in all prime areas was 8-20 months has received significant support and accordingly has made significant progress and now at 51 months he is mainly in 30-50 months and some 40-60, and ready to prepare for transition to school in September**
- **a child who it was considered might be on the autistic spectrum – his behaviour was becoming increasingly challenging which was manifesting itself in him lashing out at peers for no apparent reason – after much thought I devised an action plan based on the feeling that he was actually very anxious and not coping and that this started from the very moment that he arrived each morning – the action plan was closely implemented and involved a carousel of 1:1 specific and hover support for the duration of the session – the unwanted behaviour quickly greatly reduced and then virtually ceased, and he began to build up positive relationships with some of his peers – he has since gone to school and is thriving**
- our sessions were dramatically changed just over a year ago as we felt that we weren't adequately meeting the varying needs of the children – we have use of 2 halls so we decided to split the group according to age and stage of development – the younger children and children who it was considered would benefit more from specific Developmental Movement Play spent the first hour of the session in the 'big hall' where there is virtually unlimited freedom of movement and this left the older children in a calmer and quieter environment where more

focused activities could be carried out – there was an instant amelioration of what had for a while up to that point felt unsatisfactory – **eg the youngest child who needed space and time to learn basic social skills had his needs met calmly and effectively – the child who was exceeding typical development verbalised that he was enjoying pre-school more – we were able to plan activities according to need in the separate sessions – this has led to an increase in focus activities both adult-led and child-initiated and greater opportunity for more meaningful observation and assessment and therefore planning –**

- the 'split' session lasts for about an hour and within that time both groups have experienced appropriately timed circle times according to their needs and stages of development – the expectation for children to participate in circle times is considered important by us but if it is felt that some children are not engaging with this then we reflect and adapt – for example the younger children responded very well to having the same story using props eg Mr Gumpy's Outing, each day for a week –the props and book are then made available for play - **a 2 year old boy who did not usually access books independently – was observed playing with the props, turning the pages of the book and retelling the story, putting each animal in to the boat corresponding with each page – 2 of our children with EAL also accessed this and had clearly followed the story although retelling it with each other in their home language**
- a child exceeding typical development was showing particular interest in the human body - this interest was observed from comments that he made and more particularly the deep interest he showed in sharing a text book about the digestive system, and how he was able to retain many of the facts that he'd learned – this provoked planning around this interest and included adding other information books, doctor/hospital role-play, accessing resources from school next door including velcro skeleton and 3D body with removable parts, healthy eating, messy play – red gloop (blood)
- children with EAL or additional and special needs respond to and use visual aids for routines
- children with language and communication delay use Makaton signs and copied sets are given to family so that signs may be reinforced at home (parents have given positive feedback that signs are in use at home)
- 3 children with EAL who started with us in September, with no English, one of those is now fairly fluent in English, another has good understanding but naturally speaks less but is nonetheless expressing herself in English and increasing her English vocabulary, the other child understands and responds to instruction and listens well at gathering and story times, and

joins in with rhymes eg '5 Little Monkeys Jumping On the Bed', and says limited words in English, a younger 4th child with EAL has some understanding and is beginning to say a few words, her mother sometimes speaks to her in English as well as her home language

- the older group of children (school cohort) sit well and listen attentively and positively participate in circle time activities involving phonics and maths and listen attentively at storytime
- the younger children come willingly to circle time and join in with songs and talking time and good use of visual and concrete aids is made
- the children are happy, confident, enthusiastic, motivated and purposeful in their play and exploration
- the children play happily together in small and large groups and build up strong relationships with one another
- the children cope with conflicts with one another and older children especially can usually use strategies to negotiate verbally or practically such as fetching a timer or finding an alternative resource
- the children going to school in September are becoming ready for that and transition programme in last half-term ensures that they are even more ready
- all children are making progress in varying degrees according to their progress charts, evidence in their Learning Journeys, our general observation and parents comments to us in reviews and in general

Your priorities for improvement.

- gather more evidence and increase opportunities so that children are clearly thinking critically, creatively and problem-solving
- children increasingly contributing to ideas for planning
- increasing children KNOWING that they have a voice in what goes on by adults acting on their ideas and suggestions

- sustaining creative and effective planning as a direct result of observations and assessment
- continue to develop investigative area outside as continuous provision
- introduce currently exciting sporadic science activities and experiments as a daily experience
- create system to robustly evaluate activities to consider what learning has taken place (possibly reinstate a former system that worked well for a time)

My Practice Is:

Outstanding: my practice is exemplary	
Good: my practice is strong	X
Requires improvement: my practice is not good enough and I know it needs to improve	
Inadequate: my practice requires significant improvement	