

**Early Years Panel**  
**Nursery / Setting Update**

Name of child:	Date of birth: Age in months:
Parent(s) / Carer(s)	Information submitted by Role/Position
Early Years Setting	
Contact - Telephone	Email Address
Date child started: Days and hours child attends:  Attendance % (approx.):	Is this child in receipt of 2 year funding?  3/4 year old funding? 15 hours or 30 hours
Details of any other setting attended / shared care:	
Early Help Assessment YES / NO Date completed: Lead Professional:	
Key professionals/agencies involved	
Support currently in place <i>Please outline what you have already done to support this child. Include details of plans in place eg IEP, IBP, SEND plan, reviews to date and impact. Please attach where appropriate.</i>	
Is there any additional funding in place? eg SENDIF/DAF Please give details	
Do you wish the Early Years Panel to consider whether this child is eligible for SEND Inclusion Funding (SENDIF) at the complex level of need? Please give details: <i>(refer to the Portsmouth Profile of Need and how additional funding would be used)</i>	
Summary of strengths/ areas of progress:	
Summary of concerns:	

**Please return to:**

EYP, Floor 2, Core 1-2, Civic Offices, Guildhall Square, Portsmouth, PO1 2EA  
e-mail: EYSP@secure.portsmouthcc.gov.uk

## Early Years Panel Nursery / Setting Update

**Please include current EYFS assessment information**

**Child's current age in months:**

Please circle the EYFS developmental stage that the child is currently working within for the prime areas below:

### Personal Social and Emotional Development

Making Relationships	<i>0-11 months</i>	<i>8-20 months</i>	<i>16-26 months</i>	<i>22-36 months</i>	<i>30-50 months</i>	<i>40-60+ months</i>
Self Confidence and Self Awareness	<i>0-11 months</i>	<i>8-20 months</i>	<i>16-26 months</i>	<i>22-36 months</i>	<i>30-50 months</i>	<i>40-60+ months</i>
Managing Feelings and Behaviour	<i>0-11 months</i>	<i>8-20 months</i>	<i>16-26 months</i>	<i>22-36 months</i>	<i>30-50 months</i>	<i>40-60+ months</i>

**Meeting developmental expectations? Yes / No**

If not, what are the main concerns?

### Communication and Language Development

Listening and Attention	<i>0-11 months</i>	<i>8-20 months</i>	<i>16-26 months</i>	<i>22-36 months</i>	<i>30-50 months</i>	<i>40-60+ months</i>
Understanding	<i>0-11 months</i>	<i>8-20 months</i>	<i>16-26 months</i>	<i>22-36 months</i>	<i>30-50 months</i>	<i>40-60+ months</i>
Speaking	<i>0-11 months</i>	<i>8-20 months</i>	<i>16-26 months</i>	<i>22-36 months</i>	<i>30-50 months</i>	<i>40-60+ months</i>

**Meeting developmental expectations? Yes / No**

If not, what are the main concerns?

### Physical Development

Moving and Handling	<i>0-11 months</i>	<i>8-20 months</i>	<i>16-26 months</i>	<i>22-36 months</i>	<i>30-50 months</i>	<i>40-60+ months</i>
Health and Self Care	<i>0-11 months</i>	<i>8-20 months</i>	<i>16-26 months</i>	<i>22-36 months</i>	<i>30-50 months</i>	<i>40-60+ months</i>

**Meeting developmental expectations? Yes / No**

If not, what are the main concerns?

Parent(s)/Carer(s) views

Signed (parent)

Print Name

Date

Signed (setting)

Print Name

Role

Date

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