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# Mainstream Early Years Social Communication Base

# Expression of Interest Form

This is an expression of interest form for the child named below to be considered to receive additional support within a social communication base at either:

(Please express your preference by ticking).

|  |  |  |  |
| --- | --- | --- | --- |
| Acorn Base at Norcot Nursery School |  | Apples Pips at Blagdon Nursery School |  |

**What are the Early Years Social Communication resource bases?**

Your child will have access to a base room which provides extra support focusing on speech and language activities, sensory support, small group activities such as “The Bucket”, social interaction games and intensive interaction techniques. Your child’s day and curriculum will include integration between the resource base, the nursery mainstream classroom and the garden.

Staff in the base receive training and support from speech and language therapist, occupational therapist and Brighter Futures for Children support workers to provide this resource. The resource base aims to meet children’s needs who do not need an Educational Health Care Plan. You can find out more details about whether your child will be eligible in the admissions and exit criteria.

**What will happen next?**

Your child will be invited to visit the base and the nursery school they would be attending and may be invited to spend time within the base to assess whether a place could be offered.

A member of the social communication resource panel and/or the inclusion lead from the selected nursery school may also arrange to visit your child in their current setting and/or home. Information will then be shared and discussed at a multi-agency panel and a decision made whether we can offer a placement within the base.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Child’s name: | |  | Child’s date of birth: | |  | |
| Home address:  Parent/carer names & contact details including e-mail | |  | Child’s current setting:  Setting contact phone number & email: | |  | |
| I give permission for the Early Years Inclusion SCB panel to contact my child’s current setting and professionals who are supporting my child to inform the SCB panel and consider a placement for my child.  I also enclose **recent professional reports** about my child and/or copies of my child’s **SEN Support Plans** from their current early years setting.  Parent signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | |
| **Please return this form with supporting evidence to the nursery school:**  **Norcot: kyskes@norcot.reading.sch.uk**  **Blagdon:** [**inclusionmanager@reysfederation.org**](mailto:inclusionmanager@reysfederation.org) **&** [**hos@blagdonnursery.reading.sch.uk**](mailto:hos@blagdonnursery.reading.sch.uk)  Please also send a copy to [early.years@brighterfutureforchildren.org](mailto:early.years@brighterfutureforchildren.org) | | | | | | |
| **Supporting Information:**  Please can you request that any professionals that are supporting your child also provide any professional viewpoint/Reports about your child’s additional needs. | | | | | | |
| **Named professionals** who are supporting my child and contact details:  **Please indicate any of the following:** | | |  | | | |
|  | Named Portage worker | |  | Diagnosis of ASC | |  |
|  | Speech and language assessment completed: | |  | Being assessed by CAMHS | |  |
|  | Waiting list for speech and language therapy | |  | Accepted onto CAMHS waiting List | |  |
|  | CAMHS referral made | |  | Social care involvement | |  |
|  | Hours requested: (am/pm/30) | |  | | | |
| **Additional Information about your child**  (Please provide any further information about your child’s needs and/or background information that may support panel in making their decision about a placement. | | | | | | |