**Transition Report – Early Intervention Indicators (EII)**

*This is an alternative/ additional report template settings can use to provide summary information for the child’s school based on the Transition Portal.*

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| Name of Child: | Home Address: |
| Date of Birth: | M/F |
| Name of Parent/ Carer (s): | Parent/ Carer Contact Numbers: |

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| Proposed School:  | Expected start date:  |

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| Current setting (pre-school): | Address of current setting:  |
| Name of setting key liaison worker: | Setting Contact Number: |

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| Developmental status |
| Status 1 | Needs significant support to access provision |  |
| Status 2 | Can access all areas of EY provision independently but still needs some support |  |
| Status 3 | Can access all areas of EY provision but we still have some concerns |  |

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| Medical status |
| Status 1 | Will require a plan to support or intervene e.g. diabetes |  |
| Status 2 | Self manages or self-medicates e.g. asthma inhaler  |  |
| Status 3 | Staff just need to be aware of a medical condition e.g. hayfever  |  |

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| Enhanced transition status |
| Status 1 | Specialist – we expect that extra transition time will be essential  |  |
| Status 2 | Targeted – additional support may well be required when they start  |  |
| Status 3 | Universal – keep an eye on them when they start  |  |

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| Other agency status |
| Status 1 | Active involvement of other agencies e.g. specialist teacher, speech therapist |  |
| Status 2 | Active involvement of other agencies e.g. child protection or children in need  |  |
| Status 3 | Current involvement of other agencies e.g. EHA, TAF, EWO |  |

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| SEND CoP stage  |
| Status 1 | EHCP (E) |  |
| Status 2 | SEND Support / no EHCP (K)  |  |
| Status 3 | Past support (N)  |  |

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| Graduated response  |
| Status 1 | Universal  |  |
| Status 2 | Targeted |  |
| Status 3 | Specialist  |  |
| Status 4 | EHCNA requested or EHCP |  |

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| Categorisation of Need  |
|  |  |  |  |  |  |  |
| ASD | SLCN | MLD | SLD | PMLD | SPLD | ADHD |
| SEMHD | PD | HI | VI | MSI | OTHER |  |

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| Additional information  |

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| Date completed:  |  | Completed by: Role:  |  |