



CARLTON
ACADEMY TRUST

Carlton Academy Trust Early Years and Foundation Stage Policy

Approved on behalf of Trustees:

Gareth Logan

Review Date:

November 2022

Next Review:

July 2025



Policy Aims

- Enable EYFS children to access a broad and balanced curriculum, providing them with extensive knowledge and skills to make good progress through school and acquire the cultural capital they need to succeed in life
- Promote quality and consistency in teaching and learning so that every child makes good progress
- Facilitate close partnership working between practitioners and parents/carers.

Legislation

This policy is based on requirements set out in the 2021 statutory framework for the Early Years Foundation Stage (EYFS).

Definitions

Any reference to 'Parents' in this document is an umbrella term also encompassing carers.

Environment

We aim to provide children with an exciting and engaging learning environment that inspires curiosity, first-hand experiences, independence, and language-rich development.

Curriculum

The curriculum is ambitious and designed to meet the needs of all children, regardless of individual needs or starting points, and provide the knowledge and cultural capital they need to succeed in life.

EYFS is comprised of seven areas of learning and development. Three of these are considered prime areas which are particularly important for igniting curiosity and enthusiasm for learning, building children's capacity to learn, form relationships and thrive as follows:

- Communication and language
- Physical development
- Personal, social, and emotional development

Of these, Communication and Language is the most important as it underpins learning across all other areas.

The prime areas are supplemented by four specific areas:

- Literacy
- Mathematics
- Understanding the World
- Expressive arts and design

There are daily phonics, literacy, and mathematics lessons to develop skills in these areas.

The curriculum is progressively sequenced, with a strong focus on vocabulary, building on what children know and can do to ensure a clear progression from nursery into reception then Year 1, securing a strong educational foundation for future studies.

The knowledge, skills, and vocabulary to be taught at each stage are explicit, allowing practitioners to effectively build on prior knowledge. Alongside this structured curriculum, we provide a personalised self-directed approach to learning where children follow their interests.



The curriculum should be delivered through a range of means including direct teaching, purposeful/facilitated provision and independent exploration using classrooms, outdoor spaces, and wider community. This allows children to learn in different ways in a variety of environments.

Planning must be structured to reflect the individual needs, interests, and stage of development of each child so that they can be offered a challenging and enjoyable learning experience. Where a child has or suspected to have Special Educational Needs or a Disability (SEND), specialist advice and support should be sought from both within and outside of the school/Trust as appropriate.

Speech and Language

Delayed language development often leads to consequential under-performance throughout life, both within and outside of formal education. To identify and address any issues, the school/Trust uses the 'WellComm Early Years Speech and Language Toolkit', which effectively highlights children requiring speech and language support.

Assessment

Children are assessed on an ongoing basis through observation of their skills, capabilities, gaps in learning, interests, and preferred ways of working. These contribute towards termly formal assessments which also consider other information and evidence from their work/activities, feedback from practitioners, and information from parents. These assessments are shared with parents and used to inform future planning and enable a personalised approach to learning which reflects children's skills and interests.

At the end of EYFS, an Early Years Foundation Stage profile is completed for each child, showing whether they are meeting expected levels of development across the 17 Early Learning Goals.

Working with Parents

Schools work closely with parents as children learn and develop best when there is a strong working relationship between both. To promote this, each child is assigned a Key Person who helps to ensure that a child's learning and care is tailored to meet their needs. They also help families to engage with specialist support where needed and support the child's development at home through remote learning resources and asking parents to report any observations relating to their child's development.

Schools also encourage parents to attend half-termly end of topic celebrations, and involvement in extra-curricular programmes such as '50 Things to do Before you are 5'.

Transition

During the summer term nursery staff complete home visits for each child joining in September. They are then invited to 'Stay and Play' sessions at the start of the Autumn term before their official start date.

Reception children who have not previously been to an education setting (school/nursery) are also visited at home during the summer term. Those children currently attending a school or nursery are visited within that setting.

Safeguarding and Child Protection

Children's safety is always the main priority, and any safeguarding issues are dealt with according to the Trust Safeguarding and Child Protection policy.

Child Missing on Premises

If a child goes missing the member of staff should immediately alert the Head of School and Designated Safeguarding Lead (DSL), and take the following actions:

- Make a thorough search of the building and grounds.
- Check the register to ensure no other children are missing
- Check doors and gates to see if there has been a breach which would allow a child to leave the site
- Head of School or DSL calls and informs parents if the child is not found following the search
- Head of School or DSL speaks to staff to establish the last time when the child was seen, taking detailed notes
- Head of School informs Director of Primary, Director of Safeguarding and Chief Executive Officer
- Trust Director of Safeguarding and Trust Director of Facilities and Compliance commence an investigation

Schools should take proactive measures to prevent children going missing by making parents aware of entry and exit points and that they have responsibility for any other children they bring on to the school site.

Child Missing on Educational Visit

As soon as a child is suspected as missing, a register/headcount should immediately be made to establish numbers and identities.

One or more members of staff (as appropriate) should then conduct a search of the immediate area. In a managed facility or venue, site staff may conduct or help with a search and assist with follow-up actions such as contacting police.

If the child still can't be found, the following actions must immediately be taken:

- Incident reported to Head of School and DSL, who in turn will inform the Trust Director of Safeguarding, Director of Facilities and Compliance, Director of Primary and CEO
- Visit leader reports the child missing to the police who will advise as to further actions
- Head of School or DSL contacts the parents
- Remaining children taken back to school

Procedure for Children Not Collected from School

Parents must be made aware of the importance of collecting their child on time and the expectation that they immediately contact the school if they may be late.

Schools have a duty of care for an uncollected child until a parent arrives or transferred into the care of an approved carer/council official/police officer, etc. Where a child is uncollected,



the school should make immediate steps to contact parents or other emergency contacts by phone.

Children must never be released to a person who is unknown to the school without the parent's written authorisation or instruction. A child should not be released when there is any doubt concerning their identity and may be referred to the police depending on circumstances.

If contact with parents or emergency contacts cannot be made, the Head of School or DSL must contact the Multi Agency Safeguarding Hub (MASH) duty service to determine next steps. MASH should be contacted no later than 16:30 to enable the best quality response from the team.

When a child is taken to a foster home or similar, the school should wherever possible leave a message at the family home indicating its location and contact details. To ensure adequate safeguarding when this occurs, schools must have at least two staff members involved in this process.

Poorly Children

Children should not remain in school when they are unwell, which both protects them and other children.

When a child is ill, schools should contact parents and ask them to collect their child as soon as reasonably possible. Before being collected, the child should be cared for in a quiet, calm area with their Key Person or another familiar member of staff.

Children with an infectious disease - commonly diarrhoea and chicken pox - should not return to the school until they have been clear of illness for at least 48 hours.

When a contagious infection is identified in school, parents should be informed to enable them to spot potential early signs of illness in their child. Any items that have been touched by a contagious/ill child should be cleaned and sterilised thoroughly to reduce the spread of infection.

The Head of School retains the right to refuse admission to a child who is unwell to reduce the spread of illness or infection.

Administering Medicines

Schools can administer prescription medicines when it would be detrimental to a child's health/welfare if they did not do this.

It is preferable that children begin taking medicine at least 48 hours before attending school to ensure there are no adverse effects related to their use and have had time to take effect. The Key Person is responsible for administration of medication to children under their charge. This includes obtaining parental consent and storing medicines correctly. Other suitably trained members of staff take over these responsibilities in their absence.

Only medicines prescribed by a doctor/other medical professional can be administered. Parents must provide written consent and provide the following information:

- Medicine name and strength
- Dosage and frequency of use



- Possible side-effects
- Storage
- Who prescribed it

Where training is required to administer medicines, this must be provided by a recognised health professional.

No child should self-administer medicines. Where they understand when they need medication (such as with asthma), they should be encouraged to tell their Key Person who can administer this to them. However, this does not replace the need for staff to proactively observe and respond to a child's needs.

Schools must ensure all medicines are:

- Prescribed for the child in question showing their full name and date of birth
- In-date and prescribed for the current condition. Any out-of-date medicines should be handed back to parents
- Stored securely in original containers clearly labelled in a plastic box/container, inaccessible to other children in a high cupboard or refrigerator
- Handed back to parents at the end of the day by the child's Key Person

Accurate records must be made when any medicine is administered, which should be passed to parents at the end of the day including:

- Name of child
- Medication name and strength
- Dose given and method
- Date and time of dose/s
- Name and signature of staff member administering medicine
- Parent's signature

Risk Assessments and Health Care Plans

A risk assessment must be made for each child with medical conditions that require medication. This is completed by the SENDCO in liaison with parents and health professionals, where relevant. The assessment should consider the setting, routines and activities, other risk factors and arrangements for educational visits.

A Health Care Plan is required to support more serious medical conditions. They are created in liaison with and agreement of parents, outlining the Key Persons' role, information to be shared with other staff and measures taken in an emergency. Plans must be reviewed every six months (or more frequently where necessary) and assess how well it is managing the child's needs.

Additional training may sometimes be required to enable Key Staff to obtain a basic understanding of the condition or how to correctly administer medicines.

Educational Visits

Children with medical needs must be accompanied on an educational visit by their Key Person or other staff member fully aware and able to deal with their medical needs.

These needs must be fully risk-assessed in advance of the visit.

Medication must be kept in a sealed plastic box clearly labelled with the child's name, name of medication, and parental consent form. It must also include:

- Doses
- When and how to administer
- Record card which is updated whenever medicine is given. This record must be passed to and signed by a parent on return, then appended to the school medicine records.

If a child needs to be taken to hospital while on the trip, their medication box must be taken with them.



Statutory Documents

Below is a list of statutory policies and procedures all schools with an Early Years Foundation Stage (EYFS) must hold, as specified in the statutory framework for the EYFS.

Statutory policy/procedure	CAT policy/procedure
Safeguarding policy and procedures (to be reviewed at least annually) which must: <ul style="list-style-type: none"> • Explain the action to be taken when there are safeguarding concerns about a child and in the event of an allegation being made against a member of staff • Cover the use of mobile phones and cameras in the setting 	CAT Safeguarding and Child Protection Policy CAT Policy for Dealing with Allegations of Abuse Against Staff, Contractors and Volunteers CAT Staff Code of Conduct, Social Media and ICT Acceptable Use Policy
Procedure for responding to children who are ill or infectious (which must be discussed with parents/carers)	CAT EYFS Policy CAT Health and Safety Policy
Administering medicines policy, which must include systems for: <ul style="list-style-type: none"> • Obtaining information about a child's needs for medicines • Keeping this information up to date 	CAT First Aid Policy CAT Health and Safety Policy CAT EYFS Policy
Emergency evacuation procedure	CAT Health and Safety Policy
Procedure for checking the identity of visitors	CAT Safeguarding and Child Protection Policy
Procedures to be followed in the event of: <ul style="list-style-type: none"> • A parent or carer failing to collect a child at the appointed time • A child going missing at, or away from, the setting 	CAT Safeguarding and Child Protection Policy CAT EYFS Policy
Procedure for dealing with concerns and complaints from parents or carers	CAT Complaints Policy

