

Checklist for Child Starting Preschool Setting

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|---|------------|-------------|-------------|
| Child's Name: | DOB: | | |
| Caseholder: | | | |
| | Who | What | When |
| Planning meeting. People to be invited: <ul style="list-style-type: none"> - Parents - Setting - - - - | | | |
| Liaise with IDS Teacher responsible for that setting | | | |
| Risk Assessment | | | |
| Health Care Plan | | | |
| Handling Plan | | | |
| Eating Advice | | | |
| Advice from other professionals | | | |
| Child and parents visit setting | | | |
| Support staff identified | | | |
| Support staff trained | | | |
| Relevant record transferred: <ul style="list-style-type: none"> • IEP • Teaching Talking profile • EYFS stage/planning | | | |
| <ul style="list-style-type: none"> • Monitoring arrangements agreed • Date set for half termly review. | | | |