

# Considerations for handing over to nursery

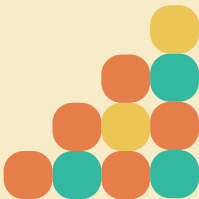
With thanks to Marsha Austin mum to Maya and Finn



[www.downsyndromeuk.co.uk](http://www.downsyndromeuk.co.uk) | 0330 111 2121 | PADS is a DSUK initiative | Registered Charity Number 1184564



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Starting nursery can be a daunting time for both the parents and child. There can be so many things to try and remember to hand over, organise, remind staff to do, or suggest, that we thought having a quick checklist of common things to consider for a child with Down syndrome might be a useful resource. This list is not exhaustive, there are sure to be more areas to consider. Equally there may be areas not relevant to your child, but please feel free to use this as a starting point.

**Abbreviations used:**

- DLA (Disability living allowance)
- EHCP (Education & health care plan)
- NG tube (Nasogastric tube)
- OT (Occupational Therapist)
- PEG tube (Percutaneous endoscopic gastrostomy tube)
- PT (Physiotherapist)
- SLT (Speech and Language Therapist)

POSSIBLE AREAS TO HANDOVER	EXAMPLES	DISCUSS AND AGREE A HANDOVER METHOD WITH THE NURSERY (EXAMPLES)	PROFESSIONALS INVOLVED WHO MIGHT BE ABLE TO SUPPORT HANDOVER
<b>FEEDING - MEALS AND SNACKS</b>	<ul style="list-style-type: none"> <li>◆ Dysphagia</li> <li>◆ Any particular food textures to use and avoid</li> <li>◆ Thickener - how to prepare if needed</li> <li>◆ Specific routine if any</li> <li>◆ Check out nursery menu and discuss suitability</li> <li>◆ Child may need more time for eating and drinking than peers</li> </ul>	<ul style="list-style-type: none"> <li>◆ Demonstration and practice.</li> <li>◆ Written advice</li> <li>◆ List of known foods enjoyed and foods to avoid</li> <li>◆ Share relevant reports</li> </ul>	<ul style="list-style-type: none"> <li>◆ SLT feeding team</li> <li>◆ OT/PT seating &amp; positioning</li> </ul>
	<ul style="list-style-type: none"> <li>◆ PEG / NG tube</li> <li>◆ May be having tasters therefore need specific guidance around this</li> </ul>	<ul style="list-style-type: none"> <li>◆ Specific training and what stock is needed to be kept at nursery (if any) and what travels between home and nursery</li> </ul>	<ul style="list-style-type: none"> <li>◆ Community paediatric nurse</li> <li>◆ Dietician</li> <li>◆ OT/PT seating &amp; positioning</li> </ul>
<b>FLUIDS</b>	<ul style="list-style-type: none"> <li>◆ Dysphagia</li> <li>◆ What type of bottle / straw cup / open cup</li> <li>◆ Thickener - how to prepare thickener</li> </ul>	<ul style="list-style-type: none"> <li>◆ Written advice</li> <li>◆ Share reports from SLT</li> </ul>	<ul style="list-style-type: none"> <li>◆ SLT feeding team</li> <li>◆ OT/PT seating &amp; positioning</li> <li>◆ Dietician</li> </ul>
	<ul style="list-style-type: none"> <li>◆ PEG / NG tube</li> <li>◆ But might be having tasters of fluids</li> </ul>	<ul style="list-style-type: none"> <li>◆ Specific training and what stock is needed to be kept at nursery (if any) and what travels between home and nursery</li> </ul>	<ul style="list-style-type: none"> <li>◆ Community paediatric nurse</li> <li>◆ Dietician</li> <li>◆ OT/PT seating &amp; positioning</li> </ul>



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<p><b>COMMUNICATION</b></p>	<ul style="list-style-type: none"> <li>♦ Makaton /Signalong</li> <li>♦ Common signs used</li> <li>♦ E.g. Interpretations of the child’s sign because lots of kids will use an approximation, so staff even if Makaton/Signalong trained might not recognise your child’s sign being used</li> </ul>	<ul style="list-style-type: none"> <li>♦ Share which signs your child uses and how as there may be variations on interpretations. Use photos or videos if needed</li> <li>♦ Update as your child learns more</li> <li>♦ Suggest key worker can observe a private/charity/NHS SLT session that child may attend</li> <li>♦ Suggest Keyworker attend online (or face to face) Makaton training</li> </ul>	<ul style="list-style-type: none"> <li>♦ SLT</li> <li>♦ Portage</li> <li>♦ Charity based organisations (that your child may be attending in relation to communication development, eg local Down syndrome support group’s communication development class)</li> </ul>
	<ul style="list-style-type: none"> <li>♦ See and learn (DSE) programmes (cards or need access to tablet)</li> </ul>	<ul style="list-style-type: none"> <li>♦ Suggest key worker can observe any private/charity/NHS SLT session that child may attend</li> </ul>	
	<ul style="list-style-type: none"> <li>♦ Jolly phonics initial sounds with signs</li> </ul>	<ul style="list-style-type: none"> <li>♦ Share resources - use the same ones if possible</li> </ul>	
	<ul style="list-style-type: none"> <li>♦ Pace of communication</li> <li>♦ The five S’s – Sign, Say less (short and simple), Stress (the keyword), Slow down (pause between words), Show (what you are talking about)</li> </ul>	<ul style="list-style-type: none"> <li>♦ Share resources</li> <li>♦ Suggest key worker can observe any relevant sessions child attends</li> </ul>	
	<ul style="list-style-type: none"> <li>♦ Visual timetables /now and next boards</li> </ul>	<ul style="list-style-type: none"> <li>♦ Provide examples</li> </ul>	
	<ul style="list-style-type: none"> <li>♦ Pictorial social stories (of what nursery looks like inside for each room and details of the routine in advance of starting; staff members)</li> </ul>	<ul style="list-style-type: none"> <li>♦ Have one made before child starts, that can be used at home for child to become familiar with new nursery</li> </ul>	
	<ul style="list-style-type: none"> <li>♦ Agree a way to handover information (for start and end of day), and what you feel needs to be included in this</li> </ul>	<ul style="list-style-type: none"> <li>♦ Perhaps use of a communication book; some nurseries use online apps</li> </ul>	



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<b>COMMUNICATION</b>		<ul style="list-style-type: none"> <li>◆ <a href="#">Recommend viewing an introduction to oral motor skills from Jo Gawn</a></li> <li>◆ <a href="#">A beginner's guide to signing by Nicola Enoch</a></li> </ul>	
<b>PHYSICAL ABILITIES</b>	<ul style="list-style-type: none"> <li>◆ Hypertonia (low muscle tone) and implications; especially when handling and positioning</li> <li>◆ Hyper-mobility and implications. E.g. when handling and importance of postural supports if needed</li> <li>◆ Nappy changing time top tips</li> </ul>	<ul style="list-style-type: none"> <li>◆ Share relevant information and resources as needed</li> </ul>	<ul style="list-style-type: none"> <li>◆ PT - recommended exercises and a visit to advise</li> </ul>
<b>MOBILITY</b>	<ul style="list-style-type: none"> <li>◆ Tummy time advice</li> <li>◆ How does child move (rolling, crawling, bottom shuffling, walking)</li> <li>◆ Any equipment needed (see below also)</li> <li>◆ How does child stand and cruise</li> <li>◆ What are they safe to attempt</li> <li>◆ Identify any potential risks</li> <li>◆ What space is needed</li> </ul>	<ul style="list-style-type: none"> <li>◆ Session to handover physiotherapy recommended exercises</li> <li>◆ Share written programmes and relevant reports</li> <li>◆ <a href="#">Insightful physiotherapy advice from Donna Murphy</a></li> </ul>	<ul style="list-style-type: none"> <li>◆ PT - recommended exercises and a visit to advise</li> </ul>
<b>EQUIPMENT</b>	<ul style="list-style-type: none"> <li>◆ Examples could include...</li> <li>◆ Seating - common area that needs to be checked, your child may be shorter in stature - therefore may need a chair that allows them to have feet on floor or at least on a solid surface during activities or eating. Important for fine motor skill development concentration levels, and ability to follow a given situation</li> </ul>	<ul style="list-style-type: none"> <li>◆ Provide any relevant reports. Assist in completing risk assessments with nursery regarding equipment</li> <li>◆ Training on specific equipment use</li> </ul>	<ul style="list-style-type: none"> <li>◆ PT</li> <li>◆ OT - may need to assess environment within nursery</li> <li>◆ SLT</li> </ul>



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<b>EQUIPMENT</b>	<ul style="list-style-type: none"> <li>◆ Standing frame - is there space, how and when used</li> <li>◆ Walkers - assess space required for use and ability to access all required areas safely. Consider how busy the environment is</li> <li>◆ Orthotics / Braces</li> <li>◆ Equipment related to feeding equipment</li> <li>◆ Equipment related to recommended exercises</li> </ul>		
<b>NAP TIME</b>	<ul style="list-style-type: none"> <li>◆ Home routine</li> </ul>	<ul style="list-style-type: none"> <li>◆ Provide any sleep cues</li> </ul>	
<b>POTTY TRAINING</b>	<ul style="list-style-type: none"> <li>◆ Pants for school campaign</li> <li>◆ Routine at home</li> <li>◆ 4 step approach</li> <li>◆ Makaton/Signalong signs used regarding toilet time</li> </ul>	<ul style="list-style-type: none"> <li>◆ Information from DSUK's 4 step programme in association with Bladder &amp; Bowel UK</li> <li>◆ <a href="#">PADS has a support group on potty training</a></li> <li>◆ <a href="#">The four step programme to potty training by June Rogers</a></li> <li>◆ <a href="#">An insightful talk about constipation by June Rogers</a></li> </ul>	
<b>SENSORY PROCESSING NEEDS</b>	<ul style="list-style-type: none"> <li>◆ Sensory seeking behaviours</li> <li>◆ Sound sensitivity / auditory defensiveness - handover awareness of this and what strategies are being used/helping</li> </ul>	<ul style="list-style-type: none"> <li>◆ Provide relevant reports /training</li> <li>◆ Recommend viewing <a href="#">Munira Adenwalla's #PADSPods</a> on sensory and auditory processing</li> </ul>	<ul style="list-style-type: none"> <li>◆ Portage/OT</li> </ul>
<b>HEARING</b>	<ul style="list-style-type: none"> <li>◆ Hearing loss / Glue ear - implications on learning and ability to follow. Consider positioning in room during activities.</li> <li>◆ Hearing aids / bands</li> </ul>	<ul style="list-style-type: none"> <li>◆ Audiology reports</li> </ul>	



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<b>ANY SPECIAL PROVISIONS</b>	<ul style="list-style-type: none"> <li>◆ E.g. Emergency clean bear (in a secret bag) in the school bag in case of emergency as soft toys may not currently be allowed due to COVID-19. Are there any specific special provisions required in case child becomes distressed, for example due to sensory overload from being around lots of loud children</li> </ul>		<ul style="list-style-type: none"> <li>◆ OT / SLT</li> </ul>
<b>SIGHT</b>	<ul style="list-style-type: none"> <li>◆ Short / long sighted</li> <li>◆ Glasses</li> </ul>	<ul style="list-style-type: none"> <li>◆ Provide relevant reports and recommendations</li> <li>◆ Recommend viewing <a href="#">Maggie Woodhouse's #PADSPods</a> on vision and also her talk on children wearing glasses</li> </ul>	
<b>TIME</b>	<ul style="list-style-type: none"> <li>◆ Does your child take a little longer than others to eat and drink, perhaps to complete a task such as getting dressed, going to the toilet etc.?</li> <li>◆ Allow more time for child to respond when communicating</li> </ul>	<ul style="list-style-type: none"> <li>◆ Discussion and acknowledgment that supporting the child with required time is essential in identified areas and ensure this will be part of their care plan</li> </ul>	
<b>ANY ADDITIONAL NEEDS/ DIAGNOSIS</b>	<ul style="list-style-type: none"> <li>◆ There are a few known conditions associated to Down syndrome that may have implications on care and support needed. E.g. heart conditions that may impact energy levels and oxygen saturation</li> </ul>	<ul style="list-style-type: none"> <li>◆ These will need to be handed over with all relevant reports, recommendations and if appropriate joint working with specialist teams</li> <li>◆ Liaise with specialist teams to see if they have any concerns or advice regarding starting in a nursery setting if needed</li> </ul>	<ul style="list-style-type: none"> <li>◆ E.g. specialist team such as cardiology team</li> </ul>

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<b>ILLNESS</b>	<ul style="list-style-type: none"> <li>◆ Some children with Down syndrome don't always show they are ill as clearly/in the same manner as those without Down syndrome</li> <li>◆ You know your child best, share what small clues you have learnt that are meaningful for your child that for another child might not mean they are poorly</li> <li>◆ Does your child need an extra layer when outside due to not managing their temperature as well as a neuro-typical child?</li> <li>◆ Does your child have any particular clues or signs when beginning to be unwell?</li> </ul>	<ul style="list-style-type: none"> <li>◆ Written handover and discussion with key workers</li> </ul>	
<b>RISK ASSESSMENTS</b>	<ul style="list-style-type: none"> <li>◆ Nurseries will be responsible for this, but you may want to have a discussion around it. Examples could include...</li> <li>◆ Outdoor space - e.g. Slopes and steps. stepping up/down steps that might be easy for other kids not so easy for child with low muscle tone, impaired vision and/or who are less steady on their feet</li> <li>◆ Indoor space - e.g. inability to use walking aids safely in busy areas</li> </ul>	<ul style="list-style-type: none"> <li>◆ Discuss any concerns</li> </ul>	
<b>EHCP</b>	<ul style="list-style-type: none"> <li>◆ Acknowledgement from start that differentiated curriculum is required - it's not just 'keep her safe/keep her entertained' it's also 'enable her to learn' - so play and activities may need to be modified by existing staff before legal provisions are in place</li> </ul>	<ul style="list-style-type: none"> <li>◆ Discuss Legal framework process (EHCP in England, Statement in NI &amp; Wales, Co-ordinated support plan in Scotland) with the nursery and gain understanding of process in your area - make a plan from there</li> <li>◆ If any additional funding is allocated to the childcare setting for your child, discuss with the nursery to ensure used in a way that best meets your child's needs. Consider if subsidised training available through local support group.</li> </ul>	<ul style="list-style-type: none"> <li>◆ All those involved and Early years team</li> </ul>

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<b>SETTING TARGETS</b>	<ul style="list-style-type: none"> <li>Identifying targets with all associated therapies</li> <li>Discuss any educational targets with nursery (likely to be set once in attendance)</li> </ul>		<ul style="list-style-type: none"> <li>All those involved and Early years team</li> </ul>
<b>2 YEAR OLD FUNDING</b>	<ul style="list-style-type: none"> <li>Ensure the nursery you choose has 2 year old funding option which your child is eligible for if they are in receipt of DLA. Discuss how this all works in your area as there are differences between local authorities. This can affect access to disability inclusion funding which in some areas needs to be accessed and used before you can apply for EHCP</li> </ul>	<ul style="list-style-type: none"> <li>Discuss any concerns and ensure you understand the processes in your area</li> </ul>	<ul style="list-style-type: none"> <li>Early years team</li> </ul>
<b>CONSIDER A LONGER SETTling IN PERIOD</b>	<ul style="list-style-type: none"> <li>May need a longer settling in period. A phased start. Partly to have enough time to handover all these things and to give child time to adjust and take in new things if needed. May need more parental support during this time</li> </ul>	<ul style="list-style-type: none"> <li>Discuss any concerns</li> </ul>	<ul style="list-style-type: none"> <li>Portage, OT, SLT</li> </ul>
<b>BEHAVIOUR &amp; EXPECTATIONS</b>	<ul style="list-style-type: none"> <li>Ensure nursery has high expectations, that they will not baby your child but expect them to behave appropriately Advise that children with Down syndrome are strong visual learners so benefit from being with well-behaved peer role models</li> <li>It is recommended that the child with Down syndrome remains with peers of same age, even if physically not at same stage, in order to ensure behaviour, language, communication are modelled from appropriate peers</li> </ul>	<ul style="list-style-type: none"> <li><a href="#">Introduce numbers early - great talk from The Maths Mum</a></li> <li>Your language around Down syndrome is really important, <a href="#">please refer to these language cards</a></li> </ul>	



**POSSIBLE AREAS TO HANDOVER**

**EXAMPLES**

**DISCUSS AND AGREE A HANDOVER METHOD WITH THE NURSERY (EXAMPLES)**

**PROFESSIONALS INVOLVED WHO MIGHT BE ABLE TO SUPPORT HANDOVER**

**TRAINING AND RESOURCES**

- ◆ Discuss with the setting what training they have accessed and plans for future training

- ◆ Signpost to relevant training and sources of information
- ◆ [A fantastic learning resource that we recommend Special iApps by Colin Dean](#)
- ◆ [DSUK's closed support group for professionals working in preschools](#)
- ◆ PADS supplies Nursery Packs that include recommended story books featuring characters with Down syndrome and literature to send home to educate families around Down syndrome



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