St Helens Early Years Assessment Resource















Community and Mental Health Services













This checklist was originally developed by Solent NHS Children's Therapy Service as a general guide to the development of communication, physical and functional skills in children from birth to school entry.

It has been adapted by services in St Helens and may be used to monitor a child's development, help identify children whose skills are delayed or disordered (uneven pattern) and when to be concerned. It should be referred to prior to referral to any of the therapy services to identify strategies that may be used to support the child without the need for referral and / or to provide evidence of the need for referral to specialist therapy services.

When using this checklist, consideration must be given to the normal variation in development that children can present with during the early years which would not give cause for concern.

The following services have been involved in adapting this tracker for use in St Helens –

The Bridge Centre Paediatric Speech & Language Therapy Team Paediatric Occupational Therapy 0-19 Health Visiting Team **Hearing Support Service** Halton and St Helens Continence Service Early Years Quality and Inclusion Team St Helens Library Service St Helens Children's Centres

Contact details

Service	Contact Details	Websites
The Bridge Centre	The Bridge Centre Based at Moss Bank Children's Centre Kentmere Avenue, Moss Bank, St Helens, WA11 7PQ Tel: 01744 673131 Email: Bridge@sthelens.gov.uk	Webpage: https://www.sthelens.gov.uk/send/support-services/the-bridge-centre/
Paediatric Speech & Language Therapy Team	Children's Speech and Language Therapy Service Birch Unit, Peasley Cross Hospital Marshall Cross Road St Helens WA9 3DE Tel: 01744 415 609 Email: mcn-tr.sthelens-slt@nhs.net	Webpage: Speech and Language Therapy - Children :: Mersey Care NHS Foundation Trust Useful websites: I can - www.lcan.org Makaton - www.makaton.org
Paediatric Occupational Therapy	Specialist Paediatric Occupational Therapist Manor Farm Primary Care Resource Centre Manor Farm Road, Huyton, L36 OUB Tel: 0151 244 4387 Email: Childhealthservices@merseycare.nhs.uk	Webpage: Children's Therapies Team :: Mersey Care NHS Foundation Trust
Hearing & Vision Support Service	Hearing & Vision Support Service School Age Disabilities Team, Newton Children's Centre Patterson Street, Newton- le -Willows, WA12 9PZ Tel: 01744 673135 Email: SchoolAgeTeam@sthelens.gov.uk	Webpage: https://www.sthelens.gov.uk/send/support-services/hearing-support-service/ Other useful websites: https://www.ndcs.org.uk/ https://bridgewater.nhs.uk/haltonsthelens/childrensaudiology/
Paediatric Continence Service	St Helens and Knowsley Hospitals NHS Trust Lowe House Health Centre 103 Crab Street, St Helens, WA10 2DJ Tel: 01744 626701 Email: Paediatric.continenceservice@nhs.net	Webpage: https://www.sthk.nhs.uk/community-services Other useful websites: https://www.eric.org.uk/ https://www.bbuk.org.uk/

St Helens Children's Centres	Central Link Hub: Tel : 01744 673444 Parr Hub: Tel : 01744 671788 Email : childrenscentres@sthelens.gov.uk	Webpage: https://www.sthelens.gov.uk/social-care-health/children-and-families/childrens-centres-in-st-helens/
St Helens Library Service	See the webpage for contact details for your local library Email: libraries@sthelens.gov.uk	Webpage: https://sthlibrarieswp.koha-ptfs.co.uk/
0-19 Haydock/Newton	Tel: 01744 624321 Email: mcn-tr.newtonhaydock0-19team@nhs.net	Webpage: https://www.sthelens.gov.uk/public-health-and-
0-19 South Team	Tel: 01744 624925 Email: mcn-tr.southteam0-5@nhs.net (health visiting) mcn-tr.southteam5-19@nhs.net (school health)	wellbeing/services/0-19-healthy-child-programme/
0-19 North Team	Tel: 01744 624313 Email: mcn-tr.mossbankhealthvisitors@nhs.net (health visiting) mcn-tr.billingeschoolnurses@nhs.net (school health)	
EYQI Team	Tel: 01744 673379 / 01744 671051 Email: EYHUB@sthelens.gov.uk	Webpage: https://www.sthelens.gov.uk/send/0-4-years-early-years/

Thanks to

Abigail Broadbelt – Halton & St Helens Paediatric Continence Service Kathryn Boothroyd – St Helens Library Services Manager Donna Cullen – Early Years Quality & Inclusion Team Chris Dixon - Early Years Quality & Inclusion Team Emma Flynn - Bridge Centre manager Jane Gavaghan – Senior Portage Worker, The Bridge Ian Henry – Children's Centre Manager

Rebecca Mann – Specialist Paediatric Therapist Alicia Monks – Specialist SEND Teacher, The Bridge Hannah Rigby – 0-19 Health Visiting Team Rachael Shovelton — Specialist Speech & Language Therapist Lisa Stocks — Hearing Support Service

Lidia Wolos - Early Years Quality & Inclusion Team



HOW TO USE THESE CHECKLISTS

- o These checklists provide a general overview of communication, feeding, physical and functional development in children from birth to school entry.
- With the introduction of the EYFS Statutory Framework 2021, we are reminded that most children will make sound progress, given favourable circumstances at home and in their setting, so it is not necessary to track lots of examples of their learning and progress. However, we need to notice quickly if a child may be having difficulties with their development, and we need to take action promptly. (Julian Grenier)
- o These checklists should **not** be used as a universal tracker for all children, but as a way of checking the development of children if you have specific concerns and also to see where you can refer to at different stages.
- o For those children who fail to meet the milestones for their age, checklists relevant for a younger child may be used to identify the degree of delay or atypical patterns of development.
- o The pie chart at the end of the pack may be used to plot a child's skills and may be used to show patterns & degree of change over a period of time.
- o This document will be updated annually to reflect any changes in services or groups on offer in St Helens.
- o The checkpoints from Development Matters and Every Child a Talker have been added for reference.

		Birth -	3 Months		
Developmental Area	Milestone	How to Assess	Advice	When to be concerned	Where to Refer
Play	Responds with pleasure to tickling & friendly voices	Observation of baby with adult / carer Engage in play with baby	Carer to spend time playing on the floor with baby e.g. bouncing, tickling, singing, peek-a-boo Talk to your baby throughout the day Imitate actions & vocalisations that baby makes Share books with baby that are colourful, interactive & robust Discourage excessive use of TV & electronic devices in the home Has the family got access to books & toys?	No or poor interaction with baby by adult / carers Baby doesn't respond to pleasurable activities or when spoken to	Signpost to groups in local Children's Centre – Infant Bonding, Play in the Home, Theraplay, Discuss with 0-19 Team Consider a hearing assessment Signpost to library services for access to free books
Attention & Listening	Turns toward a familiar sound such as adult / carer's voice Enjoys listening to adult / carer's voice above all others Startled by loud noises Extremely distractible	 Engage with baby in play - make noises outside the baby's visual field - see if baby turns to noise outside visual field 	eye contact	Not turning to sounds No startle response No eye contact Unable to sit and concentrate for short periods	-Signpost to 0-19 team -Signpost to groups in local Children's Centres – Sessions about use of dummies,
Understanding	Recognises adult / carer's voice & turns to look at them when speaking Adult / carer can calm baby using soft voice Baby smiles, makes cooing sounds	•Observation of baby with adult / carer	Talk to baby during daily routines & activities, commenting on what you are doing together Talk using lots of intonation or in a song-song voice Respond to baby's sounds Use home language with baby if not native English speaker Range of toys with different properties - texture, shape, colour	No response to adult / carer No vocalization Baby not reaching expected milestones Understanding of parents	Consider a referral to How Babies learn to Talk Consider referral to Audiology Signpost to GP Consider a referral to the Nurtur Pathway Signpost to websites Talking
Talking	cooing, gurgling, raspberries &	Observation of baby with adult / carer -Check no dummy or bottle all the time -Check there are limited distractions -Check family health and wellbeing	Respond to baby's vocalizations by making sounds back Take turns with baby making sounds & facial expressions Discourage use of dummies as they prevent the baby from making sounds Share books that are colourful and interactive	No crying or unusual cry No babbling or other vocalisations	Point, ICAN, Tiny Happy People Consider a referral to the Menta Health Team Signpost to Read and Rhyme times in libraries BLUSH (Books and Language Unite St Helens) packs for parents available to borrow from libraries
Social Interaction	Gazes at faces & copies facial movements e.g. sticking out tongue Makes eye contact for increasing lengths of time Observation with baby & adult / carer	 Can baby imitate poking out tongue? Is baby smiling and cooing? 	Turn television & other background noises OFF for some time in the day. Involve baby in family activities as often as possible	No or very poor eye contact even with familiar adult / carer No imitation of adult / carer Concerns about family health	Signpost to 6-week check where Bookstart pack is gifted

Developmental Area	Milestone	How to Assess	Advice	When to be concerned	Where to Refer
Feeding	Rhythmical sucking from breast, bottle of milk or water, beaker of water	Observation of baby with adult / carer Check position of baby Check position of mum – has she got a place to feed the baby without distractions?	-Baby is in semi-reclined position, fully supported to promote eye contact between carer & child -Has mum got available family support? -Has mum got access to water and food? -Consider mum's physical and emotional healthDoes parent need support making up formula feeds?	Nasal regurgitation or poor sucking which may indicate difficulties with palate Frequent coughing or choking when feeding Pain when feeding Clicking sound when baby is breastfeeding Baby or mum are unwell Painful swelling to breasts Baby losing weight Could baby be tongue-tied?	Signpost to local breast feeding support team Signpost to local 0-19 weighing hub to ensure adequate weight gain Consider referral to SaLT for feeding/swallowing assessment Signpost to the GP- Would need to rule out medical reason for when to be concerned for example floppy larynx, reflux, milk intolerance Signpost to groups in local Children's Centre – What to expect and when, Mini Chefs
Supine (lying on back)	Prefers to lie with head in midline Limbs are moving freely Movements of all four limbs are smooth and continuous Kicks legs vigorously alternately or together on occasions Hands loosely open Can bring hands to midline on chest or reaching Swipes at a toy held in vision Can maintain a voluntary grasp and involuntary release Becoming more aware of hands	Observation of baby Engage in play with baby Suspend toy in midline above child Hold a light easily grasped toy next to the baby's hand	Give baby time on the floor lying on their back underneath toys held above such as a baby gym Provide toys that are light and easy to handle Place toys in midline for child to visually focus on and reach for Encourage baby to look at their hands Reduce baby-walker time	If Milestones are not being reached. (See first column)	-Signpost to groups in local Children's Centre – What to expect and when, Baby massage -Contact OT or physiotherapist service - see website for carer information leaflets. -Signpost to the 0-19 Team
Prone lying (on tummy)	Weight is forward on bent arms initially then lifts head and shoulders off of the floor using forearms for support Scratches actively at the floor, on the face and clothing with raking movements of the hands / fingers Bottom flat (pelvis flat on the floor)	Observation of baby on tummy Engage in play with baby using noisy /interesting toy (Be aware child may lose control of head and can hit floor) Look at home conditions — is there available space for floor-play?	Practice tummy time on floor / on adult / carer /in carrying Small roll or rolled hand towel can be used under chest Put toys of interest with interesting textures / bright colours / noise output near to the hands to explore and 'rake'	If Milestones are not being reached. (See first column)	

			3-6 months		
Developmental Area	Milestone	How to Assess	Advice	When to be concerned	Where to Refer
Play	Mouthing, shaking, hitting (object against floor, wall), examining, feeling/rubbing, dropping (and looking), throwing Reaching out for toys Playing with fingers e.g. clasping & unclasping	-Observation of baby with adult / carer -Engage baby in play with familiar toys -Look at home conditions -Consider parents' emotional well-being -Check parents' understanding of play	Follow the baby's lead giving lots of eye-contact. Initiate simple actions & vocalisations. Play games such as peek-a-boo. Provide toys that are large, colourful & easy to handle. Provide toys with different properties i.e. textures, shapes & colours. Engage with books that are colourful, interactive & robust Demonstrate play to parents	No or limited response to adult / carer No or limited interest in toys Parents' emotional health	Signpost to groups in local Children's Centre – Play in the Home, Theraplay, Consider support from 0-19 team to develop play skills in home Consider referral to Home Start Signpost to Library Services for access to free books
Attention & Listening	The baby watches the adult / carer's face when he or she talks Extremely distractible	Observation of adult / carer & child interaction	Reduce background noise Follow baby's lead & interest	Lack of interest in adults / carers or the environment Lack of engagement with adult / carers	Signpost to groups in local Children's Centres – eg Sessions about use of dummies,
Understanding	The baby shows excitement at the sound of approaching voices Able to distinguish between tones of voice e.g. friendly or cross	Observation of adult / carer & child interaction	Adult / carer responds to sound baby makes Talk to baby during daily routines activities commenting on what you are doing together Use home language with baby	Not turning to sounds No startle to response	Consider a referral to How Babies Learn to Talk, Consider referral to audiology Signpost to websites Talking
Talking	The baby makes vocal noises to get attention and makes sounds back to the adult / carer when talked to The baby laughs during play and babbles to themselves using sounds such as 'a-a', 'goo-goo'	Observation of adult / carer & child interaction	Responding to vocalisation by making sounds back, taking turns with sounds & faces Discourage excess use of dummies Adult / carers to model different shapes with lips and tongue Share books that are colourful and interactive	No babbling or other sounds Overuse of dummy No crying or unusual cry	Point, ICAN, Tiny Happy People Signpost to Read and Rhyme times in libraries BLUSH (Books and Language Unite St Helens) packs for parents available to borrow from libraries
Social Interaction	The baby senses different emotions in the adult / carers'/carers' voice and may respond differently for example, smile, quieten, laugh. The baby cries in different ways to express different needs Baby laughs, chuckles, squeals in play	Observation of adult / carer & child interaction	•Encourage adult / carers to respond to the baby's smiles and facial expressions -Adult / carers to imitate the sounds baby makes	Baby not smiling Adult / carers/carers not responding to baby's smiles or sounds	Signpost to groups in local Children's Centre – Play in the Home, Theraplay, Refer to 0-19 team Consider an EHAT if there are other environmental factors
Feeding	Appears to 'spit out' food using back/forward tongue movement. Hand to breast/bottle	Observation of feeding Check equipment – has parent got access to a beaker, spoon, chair etc	Introduce cup at 6 months Introduce spoon for puree Baby needs to experience many different tastes before changing texture Check position upright and supported Check family finances Nutritional advice – appropriate foods to try	frequent coughing and choking when feeding	Signpost to NHS health & well-being support team Signpost to groups in local Children's Centre – What to expect and when, Mini-Chefs Referral to SLT for assessment of feeding/swallowing skills

		3-6	months		
Developmental Area	Milestone	How to Assess	Advice	When to be concerned	Where to Refer
Supine (lying on back)	-Prefers to lie with head in midline raises head to look at feet - Lifts legs vertically to grasp foot/later both lags - Kick strongly - Movements of arms in brisk purposeful fashion, will hold them up to be lifted	- Observation of baby -Engage in play with baby	- Use toys to encourage child to place head in midline - Introduce child's hands to their feet - Introduce child's hands to their body and bringing both hands together - Provide toys that are large colourful and easy to handle - Use of a baby gym/ playmate with suspended toys	Child unable to turn head Child unable to lift legs Child unable to lift arms to reach Hands tightly fisted Obvious asymmetry in play	-Encourage attendance at groups run at children's centres -Baby massage -Contact OT or physiotherapist service see website for carer information leafletsSignpost to the 0-19 team
Pull to sit	- When hands grasped braces shoulders and pulls themselves to sit	- Grasp child's hands await reaction		Child lacks head control at 6 months	
Sitting	-Sits with support -Turns head from side to side to look around - will hold arms up to be lifted Arms held away from body - Reaching out for toys	- Place in sitting on the floor use toys to encourage head movement Check home conditions – Is there available space & equipment?	-Place and support child in sitting -Use pillows behind to prevent falling while playing from the frontEncourage sitting looking first -e.g. at a book then incorporate -playing with the hands once stable -Have parents got access to toys and books?	Child unable to turn head - Child unable to lift arms to reach towards adult / carer or a toy - Hands are fisted -Obvious asymmetry	Signpost to Library Services for access to free books
Prone lying (on tummy)	-Lifts head and shoulders and chest off of the floor using extended arms, flat hands for support - Can roll front to back and usually back to front Rolling involves shift of weight through upper limbs pushing through one arm then the other -Hands are open	- Observation of baby on tummy -Engage in play with baby using noisy /interesting toy	-Practice tummy time on floor / on adult / carer /in carrying - Small roll or rolled hand towel can be used under chest -Place interesting toys near to the child's hands and encourage them to reach out to explore them	- Unable to lift head does not attempt -Not attempting to change position -Not attempting to reach out for toys -Hands are fisted -Obvious asymmetry	
Standing	Bouncer and walker use is not recom	mended by Paediatric Physiothera	apists		
Hand skills	- Brings hands and toys to mouth Hands come together in midline with fingers playing together then toys are passed between hands Scoops up toys between palmar (whole hand grasp) and body initially then grasping with whole hand grasp in fingers e.g. a block	- Observation of baby on tummy -Engage in play with baby using noisy /interesting or light easily grasped toys	-Place interesting toys near to the child's hands and encourage them to reach out to explore them and hold -Encourage midline play with both hands -Put noisy toys out of sight and encourage the child to look for them	-Not attempting to reach out for toys -Hands are fisted -Obvious asymmetry and one side not being used -Not interested in toys and not looking for them when they are out of sight	•Signpost to the 0-19 team •Contact OT or physiotherapist service see website for carer information leaflets.
Development Matters Checkpoints At 6 months	Personal, Social & Emotional Doe	ne baby using speech sounds (voices, turn to their own name (babbling) to communicate with me and respond to the emotion d enjoyment?	adults?	ons with babbling?



		6-1	2 months		
Development al Area	Milestone	How to Assess	Advice	When to be concerned	Where to Refer
Play	-Child exploring objects through mouth & handsChild will look at and imitate adult -Child more interested in toys and performing actions on them e.g. shaking a rattle, banging objects together, adding rings to stackChild enjoys simple cause & effect games e.g. peeka-booUses everyday objects appropriately during play e.g. brushing own hairAble to take turns e.g. rolling ball - child & mother	Engage child in play with familiar objects & toys Observation of child playing with adult / carer	Adult / carer spending time playing with the child Encourage lap games & peek-a-boo Playing simple turn-taking games, copying child's actions Follow the child's interest Access to everyday objects during play Demonstrate play Provide appropriate toys & equipment	No interest in toys, not reaching out for things of interest Not imitating single actions in familiar games e.g. clapping hands Mouths everything and shows no understanding of objects No turn taking	Signpost to groups in local Children's Centre – Play in the Home, Theraplay, Start to use Graduated Approach Signpost to the 0-19 team Signpost to Library Services for access to free books
Attention & Listening	-The child locates the source of another's voice with accuracyThe child can now focus on different sounds e.g. telephone, door bell, clockExtremely distractible	Observation of adult / carer & child interaction	Access to big toys that child can manipulate and explore Toys that are noisy Share books that are colourful and interactive Promote communication friendly environment e.g. reduce background noise, muted colours, objects with texture	Lack of engagement in activities or environment	Signpost to groups in local Children's Centres – Sessions about use of dummies, Consider a referral to How Babies learn to Talk, Consider referral to audiology
Understanding	The child understands frequently used words such as 'all gone', 'no', and 'bye-bye' especially when supported by gestures and the words are used in context. The child stops and looks when she hears her own name Responds to tone of voice e.g. 'no' with appropriate intonation	Observation of adult / carer & child interaction Engaging child in play with familiar toys & objects	Use of appropriate tone of voice Talk to the child about everyday things e.g. getting dressed – talk about what you are doing Comment during play, making words sound interesting Use gesture to support words e.g. waving bye bye Adults using simple short phrases	Lack of response to sounds Not responding to tone of voice appropriately Adult / carers using complex language all the time	Signpost to the 0-19 team Signpost to websites Talking Point, ICAN, Tiny Happy People Signpost to Read and Rhyme time in libraries BLUSH (Books and Language Unite St Helens)
Talking	The child uses speech sounds (babbling) to communicate with adult / carers; says sounds like 'ba-ba', 'no- no', 'gogo' and stops babbling when he hears a familiar adult / carer voice. The child uses gestures such as waving & pointing to help communicate. By nine months child shouts to gain attention waits then shouts again At around 12 months the child begins to use single words e.g. 'mummum', 'dada', 'tete' (teddy)	Engage child in play with familiar objects & toys on the floor - Observation of child playing with adult / carer	Repeat back sounds and take turns making them Make sounds for child to imitate Offer choices visually between toys e.g. 'do you want the ball or book'. Encourage child to take the one they want Advice about stopping dummy	-Little or no sound made -Not reaching for objects of interest -Overuse of dummy -Lack of babbling -Does not attempt to communicate using whole body movements	packs for parents available to borrow from libraries
Social Interaction	The child enjoys action rhymes and songs and tries to copy adult / carer speech sounds and lip movements. The child is starting to take 'turns' in conversations (using babble) May be more reserved with strangers Begins to offer toys to adult but doesn't let go	-Engage child in play with familiar objects & toys -Observation of child playing with carer -Observation of family home conditions	Giving games with toys Play with the baby and include it in group activities, maybe attend a mother & toddlers group etc	-in an older child e.g. 9-12 months it may be a concern if they show no fear of strangers	Signpost to groups in local Children's Centre – Play in the Home, Theraplay, Refer to 0-19 team Consider an EHAT if there are other environmental factors Consider referral to pediatrician -Signpost to Read and Rhyme time in libraries

		6-12 mo	nths		
Developmental Area	Milestone	How to Assess	Advice	When to be concerned	Where to Refer
Feeding	Munching develops. Bites food when placed in side of mouth Holds bottle independently Will put hands to cup Picks up finger food Chewing develops after 9 months Move from mashed textures to chopped foods Tries to hold spoon but control limited	- Observation of child feeding - Observation of available equipment Observation of a meal time	-Child to touch & experience food -Child to play with food -Advice that child is likely to gag on new textures -Adult / carers to model eating & drinking actions -Check position upright & becoming independent -Child has access to open cup drinking by 12 months	Poor position for eating -Difficulties weaning -frequent coughing and choking when feeding -Baby not gaining weight -Baby's health condition Reactions to foods	-Signpost to groups in local Children's Centre – What to expect and when, Mini-Chefs -Referral to SLT for assessment of feeding/swallowing skills -Consider referral to 0-19 team -Referral to GP Referral to Dietician
Sitting	6-9 months - Sits unsupported - Uses two hands to play - Leans forward to pick up toy and returns to sitting - Stretches to reach toys	Place in sitting on the floor use toys to encourage activity place in lying to observe movement into sitting	Encourage play in sitting with pillows behind for safety offer toys and encourage play in one hand and with both hands together -Place toys slightly out of reach and encourage to reach for	Unable to maintain independent sitting even momentarily Unmotivated to reach for toys Unable to move out of sitting or does not attempt to save self when reaching or unbalanced	Contact OT or physiotherapist service see website for carer information leaflets. Refer to 0-19 team
Floor movement	6-9 months -Can roll -Can move around floor by rolling, wriggling on tummy or crawling -Pulls to stand on occasions, cannot lower self back to floor -when held in standing will step alternate feet 9-12 months -Can move around floor with ease by crawl/ commando crawl/bottom shuffle or bear crawling Pulls to stand is starting to control sitting down again	- Observation of baby moving on floor -Engage in play with baby using noisy /interesting toy	- Use toys which can be rolled cars /balls - move toys up higher to encourage and attempt to pull to stand to a firm object such as a sofa Bouncer and walker use is not recommended by paediatric Physiotherapists Bottom shuffling is not an indication of abnormal movement patterns.		Contact OT or physiotherapist service see website for carer information leaflets. Refer to 0-19 team – Has the child had a 9-12 month contact with the 0-19 team?
Hand skills / Self-help skills	6-9 months Pats objects with flat hands Maintains grasp and shakes a toy Bangs two toys together, claps hands etc Removes object from a container initially, then develops skills to place it back in then eventually can tip objects out Gives an object to an adult / carer Holds a toy with two hands 9-12 months Holds 2 objects in one hand. Points with index finger with other fingers flexed By 12 months begins to used more refined grasp on small object e.g. pincer grasp between index finger and thumb, e.g.self feeding and picking up finger foods Reaches for bottle and steers it to the mouth later will drink from an open cup held by an adult / carer	- Observation of baby playing / eating / drinking - Engage in play using noisy / interesting toys	- Encourage play and model shaking a rattle, pressing a pushbutton toy, turning a page in a book, banging toys together, pointing to things in a book, putting things in and out of a container Check if the child has had a 9-12 month contact with the 0-19 team.	-Not attempting to reach out for toys -Hands are fisted -Obvious asymmetry -Not interested in toys and not looking for them when they are out of sight -Unable to functionally play with toys e.g. shaking rattle, pointing to items in a book, bang two toys together	Signpost to Library Services for access to free books



Commented [CD1]:

	Development Matters Checkpoints at 12 months	Rarely	Sometimes	Always
	Does the baby 'take turns' by babbling and using single words?			
Communication	Does the baby point to things and use gestures to show things to adults and share interests?			
and Language	Is the baby beginning to use single words like: mummum, dada, tete (teddy)?			
	Can the baby choose between two objects: "do you want the ball or the car"?			
Personal, Social & Emotional Development	Does the baby start to be shy around strangers and show preferences for certain people and toys?			
	Can the baby pull to stand from a sitting position and sit down?			
Physical Development	Can the baby pick up something small with their first finger and thumb (such as a piece of string)?			
ECAT Checkpoints (Eve	ry Child a Talker)			
Understanding Language	Stops and looks when hears own name. (by 12 months ⊠)			
Speaking	Gradually develops speech sounds (babbling) to communicate with adults; says sounds like 'baba', 'nono', 'gogo'. (by 11 months ⊠)			
Social Communication	Uses voice, gesture, eye contact and facial expression to make contact with people and keep their attention. (by 12 months ⊠)			

		12-	15 months		
Developmental Area	Milestone	How to Assess	Advice	When to be concerned	Where to Refer
Play	Child may still bang two objects together, stack & build towers with two cubes etc Relational play e.g. spoon in a cup, put chair to table etc Self pretend play e.g. feeding self, making 'feeding' sounds, brushing hair & washing self. Child may play with familiar adult and notice other children. Puts objects in/out of boxes	Observation of adult / carer & child interaction Engaging child in play with familiar toys & objects	Adult / carers demonstrate how objects are used and label objects & actions for child. Child has access to a range of every day objects for play	Not showing understanding of objects by use e.g. brushing hair with hairbrush Lack of interest with toys	Signpost to groups in local Children's Centre - Play in the Home, Theraplay, Consider referral to paediatrician Follow the graduated response. Consider discussing with Nursery Outreach from The Bridge Centre Signpost to Library Services for access to free books
Attention & Listening	The Child focuses on music & singing and enjoys sound-making toys/objects The child listens & responds to simple, routine instructions The child begins to concentrate on self chosen activities resisting interference from adult / carers	Observation of adult / carer & child interaction Engaging child in play with familiar toys & objects	Follow the child's lead where possible in play Reduce background noise Adult / carer to spend at least 5-10 minutes per day playing with child Engaging child's interest by offering a wide range of activities in & outside the house	-Child is easily distracted by noises or activities in the environment	Signpost to groups in local Children's Centres Consider a referral to How babies learn to Talk / Tots Talking Consider referral to audiology
Understanding	The child understands and follows simple instructions such as 'come here' Child can understand simple words in context e.g. cup, milk or daddy Child able to point to familiar people when named Engages in Peek-a-boo.	Observation of adult / carer & child interaction Engaging child in play with familiar toys & objects	Back up simple instructions with gestures such as pointing etc Adult / carers/carers to comment during play and name the objects during play -Play simple 'where is' games e.g. 'where is mummy' Reduce background noise	-Child is not showing situational understanding e.g. bowl = snacktime -Not responding to different voice tones or Peek-a-boo	-Signpost to websites Talking Point, ICAN, Tiny Happy People -Signpost to Library Services for access to free books -Signpost to Read and Rhyme time in libraries -BLUSH (Books and Language
Talking	-Child is showing signs of intention to communicate -Child can communicate needs by pointing and vocalising -Child may still babble but does so loudly with intonationChild uses gesture and specific sounds/ vocalisations to get needs met -Child says around 10 single words although these may not be clear	Observation of adult / carer & child interaction Engaging child in play with familiar toys & objects .	Repeat words the child says to show they were understood and to model accurate production Use symbolic noises for animals, cars etc Offer choices, Encoure commenting rather than questioning Repeat key words frequently during play or stories or any regular activities Share books that are colourful and interactive	what's that?" to demand speech from the child	Unite St Helens) packs for parents available to borrow from libraries
Social Interaction	The child likes being with familiar adult and enjoys watching adult for short periods of time Child may need reassurance from carer in new surroundings	Observation of adult / carer & child interaction	Observation of adult / carer/child interaction	-Child not showing signs of communicative intent e.g. -looking, pointing, smiling -Poor adult / carer/child relationship or interaction	

	12-15 months							
Developmental Area	Milestone	How to Assess	Advice	When to be concerned	Where to Refer			
Feeding	Chewing skills develop Lip closure during chew is developing Can drink from a straw Holds cup but often spills drink Brings loaded spoon to mouth but often tips it over Moves from demand feeding towards participating in routine family meal times	- Observation of child feeding - Observation of home conditions	Important to offer an increasing variety of textures. From 14 months child enjoys imitating adult / carers when eating & drinking Adult / carers to ensure increasing opportunity to use open cup for drinking despite risk of spilling Encourage messy play	-Shows any signs of physical difficulty with early chewing motions - Regularly cough or chokes when eating or drinking	•Referral to Speech & Language Team •Refer to 0-19 team •Signpost to groups in local Childrens Centres – Mini- chefs			
Sitting	-Kneels unaided or with support Stable in sitting -Child props backwards to save themselves -Reaches out and moves towards toy to collect it	- Place toy on appropriate level surface - Observe skills in sitting and moving on the floor	Place toys on appropriate height surface to encourage reaching from sitting Encourage play in sitting with pillows behind for safety if required - Carer playing from the front Offer toys and encourage play in one hand and with both hands together Place toys out of reach and encourage to move towards	- Unable to maintain independent sitting at 12 months - Unmotivated to reach for toys - Unable to move out of sitting kneeling position	Contact Occupational / physiotherapy service Follow website link through the local offer for patient leaflet information.			
Other movement	May crawl up stairs and down backwards (only if child has regular access to stairs) Physically restless desires to move and does not like to be restrained on mothers lap in buggy etc	- Observation of baby moving	-Encourage crawling games -encourage visits to soft play areas	Unable to roll at 12 months No floor movement Clicking sounds heard when changing nappy Discomfort on movement of legs & hips Baby walker still used	•Refer to 0-19 team			
Standing	- Can push a wheeled toy on a level surface -May walk alone with wide base of support, arms held high or at shoulder level -Gets down from standing by collapsing backwards to bottom or forwards on to hands then back into sitting -Can stand up with minimal assistance of furniture	- Observation and placement in standing if required	- Child to have access to push along toys - Encourage child to attempt standing to reach toys etc Bouncer and walker use is not recommended by Paediatric Physiotherapists please see 'Baby walker leaflet'	-Unable to take weight on flat feet when placed in standing against furniture Baby not crawling				
Hand Skills / self-help skills	-Builds tower of 2 bricks -Uses precise pincer grasp to pick up an object and release into a container -Able to tip a container to tip out the contents - Opens a book -Places rings on a post / circle into an easy inset puzzles / circle into a posting toy - Steadies the toy whilst playing with the other hand -Begins to scribble with whole hand (dagger) palmar grasp on a pencil / crayon - Beginning to hold a spoon - Beginning to hold a lidded cup	- Observation of child playing / eating / drinking - Engage in play using toys	- Encourage play and model shaking a rattle, pressing a pushbutton toy, turning a page in a book, banging toys together, pointing to things in a book, putting small items in and out of a container - Encourage 'Playfulness' -Encourage development of upper limb / hand skills in eating and drinking (if developmentally ready and safe to do so) e.g. holding cup, using a spoon, - Encourage development of upper limb / hand skills in self- help skills e.g. dressing with arms up to put on easy garments	-Not attempting to reach out for toys -Hands are fisted -Obvious asymmetry -Not interested in toys and not looking for them when they are out of sight -Unable to functionally play with toys e.g. shaking rattle, pointing to items in a book, hold toys with 2 hands together	Signpost to Library Services for access to free books			

			15-18 months		
Developmental Area	Milestone	How to Assess	Advice	When to be concerned	Where to Refer
Play	Child engages in pretend/symbolic play with dolls/teddies etc e.g. feeding doll with spoon, brushing dolls hair	-Engage child in play with familiar objects	-Adult / carers to engage in joint play with child & toys to provide commentary & modelling of actions	-Lack of interest in toys -Lack of imitation of pretend play despite adult / carer modelling -Poor access to dolly's & teddies etc	-Signpost to groups in local Children's Centre – Play in the Home, Theraplay, -Consider referral to paediatrician -Follow the graduated responseConsider discussing with Nursery Outreach from The Bridge Centre -Signpost to 0-19 team
Attention & Listening	The child listens & responds to simple information & instructions e.g. 'Ben put your shoes on', 'Aysha, give to Daddy'. 'Aysha, give to Daddy'.	Observation of adult / carer/child Engaging child in play with familiar toys & objects	-Follow the child's lead in play -Reduce background noise -Adult / carer to spend at least 5-10 minutes per day playing with child -Engaging child's interest by offering a wide range of activities in & outside the house	-Child is easily distracted by noises or activities in the environment	Signpost to groups in local Children's Centres Consider a referral to How Babies learn to Talk / Tots
Understanding	The child understands a wide range of single words and some familiar phrases, e.g. 'coat on', 'give ball', 'cuddle teddy' Child can give some named familiar objects to adult / carer on request e.g. car, apple, book. The child recognises and points to some objects and pictures in books if asked.	Observation of adult / carer/child interaction Engaging child in play with familiar toys & objects encouraging child to point to objects on request	Adult / carers to use simple language when giving instructions focusing on key words e.g. 'coat on' rather than 'its time to put your coat on to go outside' -Adult / carers to support spoken word with gesture or sign Share books that are colourful and interactive	Child not following simple adult / carer instructions e.g. 'put your coat on' even when routine & familiar	Talking Consider referral to audiology Signpost to websites Talking Point, ICAN, Tiny Happy People Signpost to 0-19 team
Talking	The child still babbles but uses but can use up to 20 single words correctly, although they may not be clear Child will mix babbling & single words during play The child will use intonation, pitch and changing volume when 'talking' The child will copy gestures & words from adult / carers.	Observation of adult / carer/child interaction Engaging child in play with familiar toys & objects and encouraging child to name objects	Encourage adult / carer and child to watch Cbeebies together, 'Something Special' program & Ra Ra the Noisy Lion Offer forced alternatives such as 'juice or milk?' to encourage verbal response Continue to comment on chosen play Continue to model familiar language in simple sentences repetitively through songs and stories Use gesture or sign to support verbal communication Discourage use of dummy	-Child using only jargon -Child has either no single words or just 'mummy & daddy' -Shows signs of frustration when adult / carers are unable to respond to his communication attempts .	-Signpost to Library Services for access to free books -Signpost to Read and Rhyme time in libraries -BLUSH (Books and Language Unite St Helens) packs for parents available to borrow from libraries
Social Interaction	The child prefers to play alone with familiar adult / carer near by The child is increasingly independent but needs support & feedback from familiar adult / carer in all social interaction.	Observation of adult / carer/child interaction	Demonstrate play / interactions for parent to copy	Child appears unaffected if familiar adult / carer not around Child does not seek support from any adult or carer	



			15-18 months		
Developmental Area	Milestone	How to Assess	Advice	When to be concerned	Where to Refer
	Chewing skills develop Lip closure during chew is developing Can drink from a straw Holds cup but often spills drink Brings loaded spoon to mouth but often tips it over Moves from demand feeding towards participating in routine family mealtimes	- Observation of child feeding	Important to offer an increasing variety of textures. From 14 months child enjoys imitating adult / carers when eating & drinking Adult / carers to ensure increasing opportunity to use open cup for drinking despite risk of spilling	Shows any signs of physical difficulty with early chewing motions Doesn't enjoy playing with food Tolerates limited range of textures Has recurrent chest infections Regularly cough or chokes when eating or drinking	Referral to SaLT if concerns with swallowing Signpost to 0-19 team Signpost to NHS well being services Signpost to local Childrens Centre – Mini-chefs
Sitting	Kneels unaided Stable in sitting Child props backwards to save themselves Reaches out and moves towards toy to collect it	- Observation - Observe skills in sitting and moving on the floor	-Encourage visits to soft play areas - Encourage play in sitting with pillows behind for safety if required Adult / carer playing from the front - Offer toys and encourage play in one hand and with both hands together - Place toys out of reach and encourage to move towards	- Unable to tolerate weight bearing on knees Unable to maintain secure independent sitting - Unmotivated / unable to reach for toys - Unable to move out of sitting to retrieve a toy	Contact Occupational / physiotherapy service Follow website link through the local offer for patient leaflet information
Other movement	May walk up stairs and down or come down on bottom or backwards (only if child has regular access to stairs)	- Observation	-Encourage visits to soft play areas, Encourage floor play Discourage baby walkers		Parents are advised by 0-19 Team to contact the team if their child is not walking at 18 months. This is then
	Walks alone with feet only slightly apart -Starts and stops purposely and freely -runs carefully head up eyes on the floor. Pulls and pushes large toys Can carry a large toy Reverses into a chair, or slides sideways to sit Likes to climbing into an adult / carers chair forwards and turns when in chair Squats to pick up toys from the floor standing without assistance.	- Observation - Toys placed on the floor	Discourage the use of shoes in the home in unsteady cruising children	- Child unable to cruise at furniture at 18 months - Child not pulling to stand or attempting at 15 months - Child who is walking is unable to maintain squat or rise from squat position independently	referred to their GP who will request a Paediatric Hospital appointment and possibly a hip scan. Signpost to groups in local Childrens Centres – Selfhelp skill sessions
	-Builds tower of 2 to 3 bricks -Uses precise pincer grasp to pick up an object and release into a container -Able to tip a container to tip out the contents -Turns several pages of a book -Places rings on a post / 2 shapes into an easy inset puzzles / shape into a posting toy Consistently steadies the toy whilst playing with the other hand -Scribbles with a pencil / crayon holding using a pronated palmar grasp (all fingers but hand turned over) Begins to establish hand preference Pretend play begins Engaging in messy play Holds a spoon and beginning to load Holds a lidded cup	Observation of child playing / eating / drinking Engage in play using toys	- Encourage play and model shaking a rattle, pressing a pushbutton toy, turning a page in a book, banging toys together, pointing to things in a book, putting small items in and out of a container - Encourage 'Playfulness' -Encourage development of upper limb / hand skills in eating and drinking (if developmentally ready and safe to do so) e.g. holding cup, using a spoon, - Encourage development of upper limb / hand skills in self- help skills e.g. dressing with arms up to put on easy garments -Encourage messy food play	-Not attempting to reach out for toys -Hands are fisted -Obvious asymmetry -Not interested in toys and not looking for them when they are out of sight -Unable to functionally play with toys e.g. shaking rattle, pointing to items in a book, hold toys with 2 hands together	-Signpost to Library Services for access to free books



Development	Matters Checkpoints at 18 months	Rarely	Somet	Alway s
	Is the Toddler listening and responding to a simple instruction like: "put on your shoes"?			
Communication	Can the baby say around 10 words at about 15 months? (They may not all be clear)			
and Language	Does the toddler understand lots of different single words and some two-word phrases, such as "give me" or "shoes on"?			
	At 18 months is the toddler using a range of adult like speech patterns (jargon; gibberish) and at least 20 clear words?			
Personal, Social & Emotional Development	Is the toddler increasingly curious about their world and wanting to explore it and be noticed by you?			
ECAT Checkpoir	its (Every Child a Talker)			
Speaking	Uses single words. (by 16 months ⊠)			
Social Communication	Uses pointing with eye gaze to make requests and to share an interest. (by 18 months ⊠)			

			18-24 months		
Developmental Area	Milestone	How to Assess	Advice	When to be concerned	Where to Refer
Play	-Child enjoys repetitive actions e.g. putting objects in/out of bags or boxes -Pretend play skills developing e.g. acting out simple activities such as washing doll -Beginning to use objects imaginatively e.g. cardboard box as car -Understands and plays appropriately with small world toys -e.g. Duplo or Play-Mobil	-Engage child in play with familiar objects -Observe child playing in home environment	Adult / carers to model and support imaginative play with boxes etc Adult / carers to model joining play sequences together e.g. cook for then feed dolly Adult / carer to model & support small world play using familiar scenes from home -life	Not relating objects to doll or teddy e.g. hairbrush for dolls hair No understanding of miniature toys Lack of imagination in play Lack of resources for play Too many toys/objects.	Signpost to groups in local Children's Centre – Play in the Home, Theraplay, Consider referral to paediatrician Follow the graduated response. Signpost to 0-19 team If play is significantly delayed gain consent for Bridge Centre Outreach service or Nurture pathway
Attention & Listening	Child can concentrate on an activity they have chosen but can't tolerate direction from an adult / carer	and objects	Encourage child to focus on activity for increasing lengths of time e.g. using sand timer as visual prompt Reduce resources available to	-Constantly flitting between activities -Too many resources -The environment is not -communication friendly e.gnoise, light, colour -	Signpost to groups in local Childrens Centres •Consider referral to audiology If attention and listening is significantly delayed gain consent
Understanding	-Child points to simple body parts on request -Can give a number familiar objects on request -Can follow simple instructions without gestural cues e.g. Where is your shoe? -Performs simple actions on request -e.g. 'down', 'jump up', 'eat', 'clap hands'	Engage child in play giving simple instructions e.g. 'give me the ball' Share rhymes with child	enable child to choose Consider impact of colour, noise & light as distractions in the environment Share books that are colourful and interactive	-Unable to follow instructions even with gestural cues -Poor attention & listening skills -No interest in picture books -Child has no or limited knowledge of nursery or action rhymes	for Bridge Čentre Outreach service Signpost to websites Talking Point, ICAN, Tiny Happy People Signpost to websites Talking Point, ICAN, Tiny Happy People
Talking	The child is able to use an increasing number of single words but not always clear Child continues to use a lot of jargon or nonsense speech e.g. linked babbling Child starting to join words together e.g. 'ball gone' Range of speech sounds increasing The child uses intonation, pitch and changing volume when 'talking' By 2 years the child is able to use up to 50 single words correctly	Observation of child during play Engage child in play Output Output	Adult to name objects and actions for child in context /during play Adult to use simple two word phrases which child will copy when ready Adult repeat child's two word utterance and add extra word e.g. 'car gone' becomes 'yes, blue car gone' Adult repeats words clearly for child to hear but don't insist on child repeating back	-Adult / carers not responding to child's attempts to communicate e.g. adult asks child 'what's that?' and then doesn't name object for child if child unable -Adult / carer corrects child pronunciation appropriately -Child is unintelligible to familiar adult / carers -Adult / carers/carers make child repeat words or phrases insisting on accuracy.	Consider a referral to How Babies Learn to Talk If social interaction is significantly delayed gain consent for Bridge Centre Outreach service Consider a referral to the Bridge Centre -Signpost to Library Services for access to free books
Social Interaction	-Child initiates and maintains eye contact with familiar and some less familiar adult / carers -Child demonstrates simple turn taking in activities e.g. rolling a ball back & forth -Child responds appropriately to tones of voice e.g. anger -Child makes request by pointing.	Observation of child during play Engage with child in his play	-Encourage choice making by pointing & looking -Encourage turn taking in games such as bubble blowing -Encourage child to join in action rhymes e.g. 'here we go -round the mulberry bush'	-Little or no eye contact -Difficulty taking turns with adult / carers or peers -Fixed in own set of -routines/behaviour -Appears to be 'in own world' -	Signpost to Read and Rhyme time in libraries BLUSH (Books and Language Unite St Helens) packs for parents available to borrow from libraries

		18-2	4 months		
Developmental Area	Milestone	How to Assess	Advice	When to be concerned	Where to Refer
Feeding	-Chews with lips closed -Cup now placed between lips rather than teeth -Child able to load spoon and take to mouth without spilling -Child enjoys imitating other children eating -Child enjoys pretending to feed dolls & teddies	Observation of child feeding	Extend range of firmer foods offered to promote chewing Ensure open cup drinking for majority of hydration	Poor chewing still gaining most nutrition from bottle Limited access to finger foods and firmer foods Limited range of textures.	Referral to SaLT if concerns with swallowing •Signpost to 0-19 team •Signpost to NHS well being services •Signpost to groups in local Childrens Centres – Mini-chefs
Sitting	Stable in sitting a small chair and table	- Observe skills in sitting	Encourage visits to soft play areas, parks and outdoor play to strengthen child posturally	Unable to safely maintain secure independent sitting on a chair	Contact Occupational Therapy / physiotherapy service
Standing	- Runs safely on whole foot stopping and starting with ease - Pushes and pulls large wheeled toys easily forwards and usually walking backwards -Pulls small toys along with obvious awareness of direction - Likes to climb on furniture to look out of the window etc can get back down again - Squats to play or rest .Stands without the use of hands	- Observation	Encourage adult / carers to take find opportunities such as play sessions at children's centres where their child can take part and learn from children around them.	-Child who is walking is unable to maintain squat or rise from squat position independently - Child unable to independently walk at 24months	Follow website link through the local offer for patient leaflet information Parents are advised by 0-19 Team to contact the team if their child is not walking at 18 months. This is then referred to their GP who will request
Other movement	- Walk up stairs and down holding onto rail or wall two feet to a step	- Observation	Encourage visits to soft play areas, parks and outdoor play	-Crawling up stairs	a Paediatric Hospital appointment and possibly a hip scan.
Ball Skills	-Throws ball overhand and forwards, without falling over -Walks into a large ball when trying to kick it -Sits on a small trike but cannot use pedals but can move it using feet	- Observation in an environment with access to toys	Encourage adult / carers to take part in these activities and find opportunities such as play sessions at children's centres See games and activities leaflet	- unable to sit on trike - unable to grasp ball	Signpost to groups in local Childrens Centres - Self-help skill sessions
Hand Skills / Self help skills	-Builds tower of 4 to 6 bricks -Threads large beads -Turns over one page of a book -Places rings on a post / square & triangle shape into an easy inset puzzles / shape into a posting toy - Straight and circular scribbles with a pencil / crayon holding using a pronated palmar grasp (all fingers but hand turned over)Progressing to short vertical line Preferred hand used more than half of the time - Engaging in messy play - Loading a spoon and feeding self with it - Holding a lidded cup and using independently	Observation of child playing / eating / drinking Engage in play using toys Share books that are colourful and interactive with child turning pages	- Encourage play and model posting, placing shapes into inset puzzles, threading etc Encourage development of upper limb / hand skills in eating and drinking (if developmentally ready and safe to do so) e.g. drinking from lidded / open cup, independent feeding, washing face etc Encourage development of upper limb / hand skills in self- help skills e.g. dressing with arms up to put on easy garments - Encourage messy food play	-Unable to hold a pencil -Unable to use 2 hands together -Unable to place an object into a container	Signpost to Library Services for access to free books

	Development Matters Checkpoints at 2 years	Rarely	Some	Always
	Is the child showing an interest in what other children are playing and sometimes joins in?			
	Towards their second birthday, can the child use up to 50 words?			
Communication	Is the child beginning to put two or three words together: "more milk"?			
Communication and Language	Is the child frequently asking questions, such as the names of people and objects?			
	Can the child understand many more words than they can say – between 200-500 words?			
	Can the child understand simple questions and instructions like: "where's your hat" or "what's the boy in the picture doing"?			
Personal, Social	Does the child start to see themselves as a separate person? For example, do they decide what to play with, what to eat, what to wear?			
& Emotional Development	Between the ages of 2 and 3, does the child start to enjoy the company of other children and want to play with them?			
Physical Development	Can the toddler run well, kick a ball, and jump with both feet off the ground at the same time?			
ECAT Checkpoin	nt (Every Child a Talker)			
Speaking	Beginning to put two words together (eg 'want ball', 'more juice'. (by 24 months ⊠)			

			24-30 months		
Developmental Area	Milestone	How to Assess	Advice	When to be concerned	Where to Refer
Play	Child able to use object symbolically e.g. banana becoming a phone. Child will join play sequences together e.g. undresses doll, prepares bath, washes doll and dresses it	•Engage child in play with range of miniature objects and resources for imaginative play	*Adult / carers playing with child to model extended sequences of play *Opportunities for child to socialise with other children in groups *Access to everyday objects / clothes for role play and dressing up with adult / carer commentary *Adult / carers to initiate imaginative/ symbolic play with familiar objects e.g. large box becomes a castle	-Not acting out simple daily routines with doll or teddy Not relating to miniature toys or using objects symbolically Repetitive play / not extending sequences of play Displaying sensory behaviours for example hand flapping, repetitive movements, climibing, mouthing.	Signpost to groups in local Children's Centre – Play in the Home, Theraplay, Follow the graduated response. If play is significantly delayed gain consent for Bridge Centre Outreach service or Nurture pathway If play is significantly delayed gain consent for Bridge Centre Outreach service Consider seedlings program at home and nursery for sensory behaviors.
Attention & Listening	The child is beginning to listen to talk with interest but is easily distracted The child will listen to talk addressed to himself but finds it difficult if prompts are not provided e.g. use of name, 'stop & listen'.	•Engage with child in play with familiar toys and objects	Adult / carers to use simple language and gain child's attention before speaking Adult / carers encourage child to focus on activity for increasing lengths of time e.g. using sand timer as a visual prompt Ensure environment supports listening e.g. reduce background noise		Refer to SaLT if concerns with language If attention and listening is significantly delayed gain consent
Understanding	-Child beginning to understand longer phrases i.e. 'make teddy jump' -Child beginning to understand familiar/routine phrases e.g. 'put teddy in the box', 'get your coat & bag'Recognises actions in pictures	Engage child in play giving two word instructions e.g. ball in bag Observation of child playing	-Adult / carers to talk about every day events as they do them using simple language -Adult / carers introduce basic concept words e.g. size & position -Encourage child to tell familiar stories to organise sequences of language	Child is slow to respond to language but is better when shown what to do. Poor situational understanding within familiar routine e.g. shoes at the door ready = ready to go to shops No interest in books or stories Poor concentration & listening skills	for Bridge Centre Outreach service Consider a referral to the Bridge Centre if there are concerns in more than 1 area Signpost to the 0-19 team – has there been a 2 year
Talking	Child able to use a wide range of words including descriptive language functions Child may become non-fluent Beginning to link more than 2 words	Observation of child during play Engage child in play encouraging child to talk as playing	Child has access to range of experiences to develop vocabulary repeat sentences back to child adding in grammatical elements Do not to insist on child repeating sentences back to them Model sounds in words but not to ask child to repeat back Share books that are colourful and interactive	Reluctance to communicate ideas/frustration Only using single words or 2 word phrases by 30 months If non-fluency appears to be developing into a stammer Speech is unintelligible to familiar adults Muddled word order in sentences Limited or poor vocabulary Communicates by pointing rather than talking	-Signpost to Library Services for access to free books -Signpost to Read and Rhyme time in libraries -BLUSH (Books and Language Unite St Helens) packs for parents available to borrow from libraries
Social Interaction	Child holds a conversation but jumps from topic to topic. Child is interested in others play and will join in	Observation of child during play or interaction with other children or adult / carers Engage with child in his play	-Ensure opportunities to socialise with other children -Opportunities to develop turn taking skills in a range of activities -Model appropriate listening & talking -Use language of emotions with child -Prepare child for change in routine either verbally or supporting with -picture or signs	-Child unable to engage in interaction with peers -Child struggles to listen to conversation in a to and fro mannerChild becomes distressed if routine changes -Can appear aggressive towards other children	

		24-30 months		
Developmental Area	Milestone	Advice	When to be concerned	Where to Refer
Feeding	Eats & drinks well with little spillage Holds cup in one hand Uses spoon independently	Encourage regular use of spoon & fork and adult / carers to model using spoon & fork Encourage regular use of cup Support & advice for wider range of food availability	Poor control of spoon & fork Not able to hold cup independently Limited access to wide range of food & textures	Signpost to Childrens Centre – Mini-chefs 0-19 team Referral to SaLT if concerns with swallowing Follow website link through the local offer for patient leaflet information for early feeding skills
Sitting	Stable in sitting a small chair and table	Encourage visits to soft play areas, parks and outdoor play to strengthen child posturally	Unable to safely maintain secure independent sitting on a chair / potty	•Physiotherapy / Occupational
Standing	Runs safely on whole foot stopping and starting with ease Pushes and pulls large wheeled toys easily forwards and usually walking backwards some difficulty steering around obstacles Can jump off small step with two feet Can stand on tiptoe if shown Squats to play or rest stands without the use of hands	- Play chasing games -Play jumping in puddles etc Encourage adult / carers to take find opportunities such as play sessions at children's centres where their child can take part and learn from children around them.	-Child who is walking is unable to maintain squat or rise from squat position independently - Child unable to independently walk at 24months Persistent toe walker 80-90% of the time	If there are concerns with motor development follow the link from the local offer for patient advice leaflets Contact the service if there are significant concerns regarding
Other movement	- Walk up stairs and down holding onto rail or wall two feet to a step confidently	Encourage visits to soft play areas, parks and outdoor play	-Child crawls up stairs	motor skills development and/or other areas of concern.
Ball Skills	-Throws ball from hand stiffly at body level - Kicks large ball, gently and unevenly -Climbs size appropriate play apparatus	- Encourage participation in these activities - see games and activities leaflet		•Signpost to the 0-19 team – has there been a 2 year
Hand Skills	Builds tower of 8 to 10 bricks Builds bridge with 3 bricks in imitation Builds bridge with 3 bricks in imitation Threads large beads Turns over 3 pages of a board book Places 5 rings on a post in order /3 shapes into inset puzzle / 4 part nesting toy Copies a vertical line / horizontal line and circle with a pencil / crayon when shown Generally has developed hand preference Engaging in messy play	•Encourage play and model posting, placing shapes into inset puzzles, pegs into a peg board, threading etc. •-Encourage messy play with a variety of different safe textures e.g. dry, sticky, wet etc •Share books that are colourful and interactive, encourage child to turn the pages	-Unable to use 2 hands together -Unable to place an object into a container	progress check? •Signpost to Library Services for access to free books •Signpost to local Children's Centre – Ready for School,
Self help skills	-Drinking from open cup, stabbing with a fork, scoops and can use fork and spoon together, washes and dries hands and face. Unbuttons large button. -Asking to use the potty progressing to toilet training, pulling at nappy, showing awareness when wet/soiled.	Encourage development of upper limb / hand skills in eating and drinking (if developmentally ready and safe to do so) e.g. drinking from open cup, stabbing with a fork, scooping and using a fork and spoon together, washing and drying hands and face. Encourage development of upper limb / hand skills / sequencing skills in self-help skills e.g. taking off shoes/coat Encourage changing nappies/pull ups in the bathroom. Access to suitable toileting facilities i.e. potty/seat reducer/step. Observing other family members	- Unable to assist with the dressing process at all e.g. arms up, pulling socks off etc. - Unable to eat / drink independently	

		30-36 months		
Developmental Area	Milestone	Advice	When to be concerned	Where to Refer
Play	Child will join play sequences together e.g. undresses doll, prepares bath, washes doll and dresses it Child enjoys company of other children but plays alongside rather than co-operatively Child will copy adult / carers & other children. Play will be more imaginative, acting out adult / carer roles with toys e.g. telling them off, giving directions	-Adult playing with child to model extended sequences of play *Opportunities for child to socialise with other children *Access to everyday objects / clothes for role play and dressing up with adult commentary *Adult / carers to initiate imaginative/symbolic play with familiar objects e.g. large box becomes a castle	Not acting out simple daily routines with doll or teddy routines with doll or teddy routines with a sall world toys or using objects symbolically repetitive play / not extending sequences of play	Signpost to groups in local Children's Centre – Play in the Home, Theraplay, If play is significantly delayed gain consent for Bridge Centre Outreach service Consider seedlings program at home and nursery for sensory behaviors.
Attention & Listening	The child is beginning to listen to talk with interest but is easily distracted The child will listen to talk addressed to himself but finds it difficult if prompts are not provided e.g. use of name, 'stop & listen'.	-Use simple language and gain child's attention before speaking -Encourage child to focus on activity for increasing lengths of time e.g. using sand timer as a visual prompt -Ensure environment supports listening e.g. reduce background noise	Unable to listen or attend to simple directions Poor concentration for either self or adult chosen activities Highly distractible in the environment to other noises	Sign post to groups in local Childrens Centres Chatterbox? Consider referral to audiology Refer to SLT if concerns
Understanding	-Child beginning to understand longer phrases i.e. 'make teddy jump' -Child beginning to understand familiar phrases e.g. 'put teddy in the box', 'get your coat & bag'Child is developing an understanding of simple concepts including in/on/under and big/littleChild understands simple 'who' 'what' and 'where' questions but not 'why'Understands sentences with two key words e.g. dolly's/daddy's feet/hands -Child understands a simple story when supported with picturesRecognises actions in pictures	Adult / carers to talk about every day events as they do them using simple language Adult / carers introduce basic concept words e.g. size & position supported with gesture or sign Encourage child to tell familiar stories to organise sequences of language	Child is slow to respond to language but is better when shown what to do. Poor situational understanding within familiar routine e.g. shoes at the door already = ready to go to shops No interest in books or stories Poor concentration & listening skills	with understanding alongside other areas of development. If attention and listening is significantly delayed gain consent for Bridge Centre Outreach service Consider a referral to the Bridge Centre if there are concerns in more than 1 area Signpost to the 0-19 team – has there been a
Talking	-Child able to use a wide range of words including descriptive language -Able to link 3 words i.e. 'want more juice' -Can use up to 300 words by age 3Child may have problems saying some speech sounds: but is mostly understood Often omits grammatical endings or words e.g. boy kick_ball ('s' is missing), cat eats_mouse ('the' is missing)	-Child has access to range of experiences to develop vocabulary -Repeat sentences back to child adding in grammatical elements -Adult not to insist on child repeating sentences back to them Adults are aware to model sounds in words but not to ask child to repeat back	Reluctance to communicate ideas/ frustration Only using single words or two word phrases by 30 months If non-fluency appears to be developing into a stammer Speech is unintelligible to familiar adult Muddled word order in sentences Limited or poor vocabulary Communicates by pointing not talking	2 year progress check? Signpost to Library Services for access to free books Signpost to Read and Rhyme time in libraries BLUSH (Books and Language Unite St
Social Interaction	Child is interested in others play and will join in Child able to express emotions towards adult / carers & peers using words not just actions Observation of child during play or interactions Engage with child in his play	Ensure opportunities to socialise Opportunities to develop turn taking skills in a range of activities Model appropriate listening & talking Use language of emotions with child Prepare child for change in routine either verbally or with pictures or signs	Child unable to introduce or maintain topic of conversation Child struggles to express emotions and may appear aggressive to other children Child struggles to listen or take turns in conversation - appears to dominate conversation Child becomes distressed if routine change	Helens) packs for parents available to borrow from libraries - Signpost to local

		30-36 months		
Area	Milestone	Advice	When to be concerned	Where to Refer
Feeding	Uses spoon independently From 30 months starts to use spoon & fork with adult / carer grip May become fussy or show fluctuating appetite	Encourage regular use of spoon & fork and adult / carers/carers to model using spoon & fork Encourage regular use of cup Support & advice for wider range of food availability	Poor control of spoon & fork Not able to hold cup independently Limited access to wide range of food & textures	-Signpost to Childrens Centre – Mini-chefs -0-19 team -Referral to SLT if concerns with swallowing -See the local offer for patient leaflet information for early feeding skills
Sitting	- Stable in sitting a small chair and table	Encourage visits to soft play areas, parks and outdoor play to strengthen child posturally	- Unable to safely maintain independent sitting on a chair/potty	•Physiotherapy / Occupational
Standing	Runs safely on whole foot stopping and starting with ease and avoiding obstacles Can run Pushing and pulling large wheeled toys easily forwards and backwards steering around obstacles Can jump off small step with two feet Can walk on tiptoe Can tand on one leg momentarily when shown		-intiguities with gross motor skills	If there are concerns with motor development follow the link from the local offer for patient advice leaflets Contact the service if there are significant concerns regarding motor skills
Other movement	Walk up stairs using alternating feet, comes down two feet to a step, can carry a large toy Can jump from bottom step two feet together Awareness of size and movements of own body in relation to external objects and space	Encourage play sessions at children's centres where child can take part and learn from children around them.	Unable to walk up and downstairs two feet to a step holding the hand rail at 48 mths unable to jump with two feet together at 48 months	development and/or other areas of concern. Signpost to the 0-19 team – has there been a 2 year
Ball Skills	-Throws ball overhand and catches a large ball arms extended - Kicks ball forcibly - Kides tricycle pedalling & steering round wide corners -Climbs size appropriate play apparatus with ease	Encourage visits to soft play areas, parks and outdoor play	If unable to pedal and steer tricycle at 46 months	progress check? •Signpost to Library Services for access to free books
Hand Skills	Builds tower of 8 to 10 bricks Builds bridge with 3 bricks in imitation Builds bridge with 3 bricks in imitation Threads large beads Turns over 3 pages of a board book Places 5 rings on a post in order / 3 shapes into inset puzzle / 4 part nesting toy Copies a vertical line / horizontal line and circle with a pencil / crayon when demonstrated. Holds using a digital pronated grasp (held in straight fingers but hand turned over) Snips paper with scissors Generally has developed hand preference Knows how to hold scissors and snip paper Engaging in messy play	Encourage play and model posting, placing shapes into inset puzzles, pegs into a peg board, threading etc. Encourage messy play with a variety of different safe textures e.g. dry, sticky, wet etc Share books that are colourful and interactive, encourage child to turn the pages	-Unable to hold a pencil -Unable to use 2 hands together -Unable to place an object into a container	-Signpost to local Children's Centre – Ready for School,
Self help skills	-Prinking from open cup, stabbing with a fork, scoops and can use fork and spoon together, washes and dries hands and face. Unbuttons large button. -Asking to use the potty progressing to toilet training, pulling at nappy, showing awareness when wet/soiled. -Bowel and bladder success in appropriate place although may not consistent	Encourage development of upper limb / hand skills in eating and drinking e.g. drinking from open cup, stabbing with a fork, scooping and using a fork and spoon together, washing and drying hands and face, taking off shoes/coat -Encourage changing nappies/pull ups in the bathroomAccess to suitable toileting facilities i.e. potty/seat reducer/stepObserving other family members -Regular toileting routine no more frequent then hourly Encourage trial in underwear monitoring wetting pattern.	- Unable to assist with the dressing process at all e.g. arms up, pulling socks off etc. Unable to eat / drink independently	



	Development Matters Checkpoints at 3 years	Rarely	Sometimes	Always
	Can the child shift from one task to another if you get their attention. Using the child's name can help. "Jason, can you stop now? We're tidying up".			
	Can the child use around 300 words? These include descriptive language. They include words for time (for example: now, later), space (for example, over there) and function (for example, they can tell you a sponge is for washing)			
	Is the child linking up to five words together?			
Communication and Language	Is the child using pronouns (me, him, she), and using plurals and prepositions (in, on, under) – these may not always be used correctly to start with.			
	Can the child follow instructions with three key words like: "can you wash dolly's face?"			
	Can the child show that they understand action words by pointing to the right picture in a book. For example: "who's jumping?"			
	Can the child shift from one task to another if you fully obtain their attention, for example, by using their name?			
	Does the child start to enjoy the company of other children and want to play with them?			
Personal, Social & Emotional Development	Can the child sometimes manage to share or take turns with others, with adult guidance and understanding 'yours' and 'mine'?			
Development	Can the child settle to some activities for a while?			
Physical Development	Can the child climb confidently, catch a large ball and pedal a tricycle?			
ECAT Checkpoin	nts			
Listening & Attention	Singled channelled attention. Can shift to a different task if attention fully obtained – using child's name helps focus. (by 36 months 🖾)			
Understanding Language	Identifies action words by pointing to the right picture, e.g. "Who's jumping?" (by 30 months ⊠)			

		36-42	months	
Developmental Area	Milestone	Advice	When to be concerned	Where to Refer
Play	Imaginative & pretend play develops Joins in play with other children	Access to dressing up box for role play Access to everyday objects for imaginative play Opportunities to socialise with peers e.g. pre-school/groups	Repetitive play Not initiating or organising own play No interest in or interaction with other children	Signpost to groups in local Children's Centre – Play in the Home, Theraplay, If play is significantly delayed gain consent for Bridge Centre Outreach service Consider a referral to the Bridge Centre Consider seedlings program at home and nursery for sensory behaviors.
Attention & Listening	Stops to listen for directions from an adult / carer but may need support to do this e.g. hand to ear for 'listen'. Concentrates on activity he has chosen for 10-15 minutes Child enjoys listening to stories	Adult / carers sit with child doing puzzles etc to extend attention span	Unable to listen nor follow simply adult / carer directions Poor attention skills	Signpost to groups in local Childrens Centres Consider referral to audiology If attention and listening is significantly delayed gain consent for Bridge Centre Outreach service .
Understanding	Understands early concepts such as big/little, in/on/under, colours and numbers Understands simple conversations about an activity as you are doing it Understands sentences containing 3-4 key words e.g. 1, 'put teddy in big box', 2, 'put big brick in teddy's bag', Can answer simple who & what questions e.g. 'who is outside'.	Opportunities for a range of different & interesting activities, e.g. sorting & matching activities Labelling early concepts during conversation Talk about every day events as they happen	Follows what others do instead of language – may appear vague/confused Does not follow 2-3 word instructions Excessive interest in colour or number rather than in object Gives unusual or no answers to questions May talk a lot about things of interest to him but not able to reply appropriately to adult / carer questions May be described as disobedient	Consider a referral to the Bridge Centre if there are concerns in more than 1 area Refer to SLT Signpost to the 0-19 team Signpost to Library Services for access to free books Signpost to Read and Rhyme time in libraries BLUSH (Books and Language Unite St Helens)
Talking	Using a large vocabulary including object words, action words and descriptive words Uses 3-5 words in a sentence Beginning to use small words & word endings e.g. 'my brother is kicking the balls Speech may still sound immature - common immature patterns are cluster reduction e.g. spoon as poon, fronting e.g. car as tar,	Giving child opportunities to talk Adult / carers to repeat child's immature sentences or pronunciations so he hears good models Opportunities to play with sounds e.g. snakes says sssss, quiet shihhh	If beginning to stammer Muddled word order Inappropriate correcting of child's speech language by adult / carers Poor control of lips/tongue for sounds Distorted vowel sounds	packs for parents available to borrow from libraries Signpost to local Children's Centre – Ready for School,
Social Interaction	Can turn take appropriately in conversation Can introduce and maintain a topic of conversation Expresses feelings appropriately Answers questions by talking	Opportunities for child to socialise with other children Encourage child to participate in small group activities Develop turn taking skills in a range of activities	May be aggressive towards other children Unable to express emotions May become distressed if routine changes May talk a lot without responding to the person he is talking with	



		36-42 months		
Developmental Area	Milestone	Advice	When to be concerned	Where to Refer
Feeding	Enjoys helping adult / carers prepare food Pours liquid from jug into cup	•Ensure exposure to new foods & variety of eating situations	Child avoiding certain foods- eg dry / wet foods Child eating none food items. Child still mouthing objects	Signpost to Childrens Centre – Mini-chefs 0-19 team
Sitting	Stable in sitting a small chair and table	Encourage visits to soft play areas, parks and outdoor play to strengthen child posturally	- Unable to safely maintain secure independent sitting on a chair / potty / toilet	Physiotherapy / Occupational
Standing	- Climbs ladders - Can walk, run and stand on tiptoe - Can stand on one leg for 3-5 seconds - Can hop on preferred foot - Can stand/walk on heels when shown		Unable to walk up and downstairs two feet to a step holing the hand rail If unable to jump with two feet together at 48 months	If there are concerns with motor development follow the link from the local offer for patient advice leaflets
Ball Skills	-Throws ball overhand and catches with more skill - Kicks ball forcibly with skill - Can use a bat	- Encourage adult / carers to find opportunities such as play sessions at children's centres where their child can take part and learn from children around them.	Unable to attempt to throw ball or kick ball	Refer to the service if there are significant concerns regarding motor skills development. Signpost to the 0-19 team
Hand Skills	-Builds tower of 10+ bricks -Threads medium beads -Places 5 rings on a post in order / 3 shapes into inset puzzle / 4 part nesting toy - Copies a cross (+), with a pencil / crayon Supports the paper when 'drawing' - Holds using a static (still) tripod grasp on the pencil - Has developed hand preference - Engaging in messy play	- Encourage play and model posting, placing shapes into inset puzzles, pegs into a peg boards, threading etcEncourage messy play with a variety of different safe textures e.g. dry, sticky, wet etcShare books that are colourful and interactive, encourage child to turn the pages	-Unable to hold a pencil -Unable to use 2 hands together -Unable to place an object into a container / shape in a form board etc - Encourage pencil skills activities such as dot to dots, simple mazes and colouring within an easy boundary / picture.	Refer to health visiting team for support in developing toileting awareness/routine and skills. If support has been provided by health visiting services - toilet skills assessment to be included with referral to Paediatric Continence Service. Signpost to Library Services for access to free books
Self help skills	-Drinking from open cup, stabbing with a fork, scoops and can use fork and spoon together, washes and dries hands and face. - Unbuttons large button. - Toilet trained - Developing personal care skills - Can get on / off the toilet unaided - Adorns garments such as a t-shirt with some help, shoes (possibly the wrong way round), pulling up trousers	Encourage development of upper limb / hand skills in eating and drinking (if developmentally ready and safe to do so) e.g. drinking from open cup, start to encourage use of a toddler style knife and continue with stabbing with a fork, using a fork and spoon together, washing and drying hands and face. Encourage development of upper limb / hand skills / sequencing skills in self-help skills e.g. dressing - taking off shoes and coat / dressing up Encourage access to the bathroom and toilet facilities/trial underwear and monitor wetting pattern/Introduce reward system to recognize efforts made.	- Unable to assist with the dressing process at all e.g. arms up, pulling socks off etc Unable to eat / drink independently - Child showing limited/no awareness of their toileting skills.	•Signpost to local Children's Centre – Ready for School,

	42-48 months					
Developmental Area	Milestone	Advice	When to be concerned	Where to Refer		
Play	Imaginative & pretend play develops Joins in play with other children Child begins to solve jigsaw puzzles through a mixture of thinking and trial and error Child begins to play co-operatively with other children Dramatic play develops with play kitchen equipment or medical kits.	•Access to dressing up box for role play •Access to everyday objects for imaginative play •Opportunities to socialise with peers e.g. pre- school/groups	Repetitive play Not initiating or organising own play No interest in or interaction with other children	Signpost to groups in local Children's Centre – Play in the Home, Theraplay, If play is significantly delayed gain consent for Bridge Centre Outreach service Consider a referral to the Bridge Centre Consider seedlings program at home and nursery for sensory behaviors.		
Attention & Listening	Stops to listen for directions from an adult / carer but may need support to do this e.g. hand to ear for 'listen'. Concentrates on activity he has chosen for 10-15 minutes	Adult / carers sit with child doing puzzles etc to extend attention span	-Unable to listen nor follow simply adult / carer directions -Poor attention skills Child finds it difficult to switch attention between speaker and task	Signpost to groups in local Childrens Centres Consider referral to audiology If attention and listening is significantly		
Understanding	-Understands early concepts such as big/little, in/on/under, colours and numbers -Understands simple conversations about an activity as you are doing it -Understands sentences containing 3-4 key words e.g., 'put teddy in big box', 'put big brick in teddy's bag' -Can answer simple who & what questions e.g. 'who is outside'Child understands questions or instructions with 2 parts e.g. "get your coat and stand by the door" -Child is developing awareness of time in relation to past, present and future -Child is beginning to understand WHY questions	Opportunities for a range of different & interesting activities, e.g. sorting & matching activities Labelling early concepts during conversation Talk about every day events as they happen	-Follows what others do instead of language – may appear vague/confused -Does not follow 2-3 word instructions -Excessive interest in colour or number rather than in object -Gives unusual or no answers to questions -May talk a lot about things of interest to him but not able to reply appropriately to adult / carer questions -May be described as disobedient	there are concerns in more than 1 area •Refer to SaLT		
Talking	Using a large vocabulary including object words, action words and descriptive words Uses 3-5 words in a sentence Beginning to use small words & word endings e.g. 'my brother is kicking the balls Speech may still sound immature - common immature patterns are cluster reduction e.g. spoon as poon, fronting e.g. car as ta, stopping sun as dun Child may use 4-6 words in sentences Child may use future and past tenses Child may continue to have problems with irregular words e.g. 'fell' becomes 'falled', 'mice' becomes 'mouses' Speech may still show some immature patterns	•Giving child opportunities to talk •Adult / carers to repeat child's immature sentences or pronunciations so he hears good models •Opportunities to play with sounds •e.g. snakes says sssss, quiet shhhh	If beginning to stammer Muddled word order Inappropriate correcting of child's speech & language by adult / carers Poor control of lips/tongue for sounds Distorted vowel sounds	-Signpost to Library Services for access to free books -Signpost to Read and Rhyme time in libraries -BLUSH (Books and Language Unite St Helens) packs for parents available to borrow from libraries -Signpost to local Children's Centre – Ready for School,		
Social Interaction	Can turn take appropriately in conversation Can introduce and maintain a topic of conversation Expresses feelings appropriately Answers questions by talking Child will initiate conversations Child may disagree with adult / carers or peers using words not just actions	*Opportunities for child to socialise with other children *Encourage child to participate in small group activities *Develop turn taking skills in a range of activities	May be aggressive towards other children Unable to express emotions May become distressed if routine changes May talk a lot without responding to the person he is talking with	Consider a referral to the Bridge Centre if there are concerns in more than 1 area Refer to SLT		

	42-48 months					
Developmental Area	Milestone	Advice	When to be concerned	Where to Refer		
Feeding	Pours liquid from jug into cup Uses fork and spreads butter on bread with knife	*Ensure exposure to new foods & variety of eating situations	Child avoiding certain foods- eg dry / wet foods Child eating none food items. Child still mouthing objects	Signpost to Childrens Centre – Mini-chefs Signpost to 0-19 team		
Sitting	Stable in sitting a small chair and table	Encourage visits to soft play areas, parks and outdoor play to strengthen child posturally	- Unable to safely maintain secure independent sitting on a chair / potty / toilet	Physiotherapy / Occupational If there are concerns with motor development follow the link		
Standing	- Climbs ladders - Can walk, run and stand on tiptoe - Can stand on one leg for 3-5 seconds - Can hop on preferred foot - Can stand/walk on heels when shown		- Unable to walk up and downstairs two feet to a step holing the hand rail -If unable to jump with two feet together at 48 months	from the local offer for patient advice leaflets Refer to the service if there are significant concerns regarding motor skills development. •Signpost to 0-19 team		
Ball Skills	-Throws ball overhand and catches with more skill - Kicks ball forcibly with skill - Can use a bat	Encourage adult / carers to find opportunities such as play sessions at children's centres where their child can take part and learn from children around them.	Unable to throw ball or kick ball			
Hand Skills	-Builds tower of 10+ bricks -Threads medium beads -Places 5 rings on a post in order / 3 shapes into inset puzzle / 4 part nesting toy - Copies a cross (+), with a pencil / crayon Supports the paper when 'drawing' - Holds using a static (still) tripod grasp on the pencil - Has developed hand preference -Knows how to hold scissors and use scissors to cut a piece of paper in half - Engaging in messy play	- Encourage play and model posting, placing shapes into inset puzzles, pegs into a peg boards, threading etcEncourage messy play with a variety of different safe textures e.g. dry, sticky, wet etcShare books that are colourful and interactive, encourage child to turn the pages	-Unable to hold a pencil -Unable to use 2 hands together -Unable to place an object into a container / shape in a form board etc - Encourage pencil skills activities such as dot to dots, simple mazes and colouring within an easy boundary / picture.	Signpost to Library Services for access to free books		
Self help skills	-Drinking from open cup, stabbing with a fork, scoops and can use fork and spoon together, washes and dries hands and face. - Unbuttons large button. - Toilet trained - Able to initiate personal care after toilet visits - Adorns garments such as a t-shirt with some help, shoes (possibly the wrong way round), pulling up trousers etc	Encourage development of upper limb / hand skills in eating and drinking (if developmentally ready and safe to do so) e.g. drinking from open cup, start to encourage use of a toddler style knife and continue with stabbing with a fork, using a fork and spoon together, washing and drying hands and face. - Encourage development of upper limb / hand skills / sequencing skills in self-help skills e.g. dressing - taking off shoes and coat / dressing up Encourage access to the bathroom and toilet facilities/trial underwear and monitor wetting pattern/Introduce reward system to recognize efforts made.	- Unable to assist with the dressing process at all e.g. arms up, pulling socks off etc Unable to eat / drink independently - Child showing limited/no awareness of their toileting skills.	- Has support been provided by health visiting services? If so toilet skills assessment to be included with referral to Paediatric Continence Service Signpost to local Children's Centre – Ready for School,		

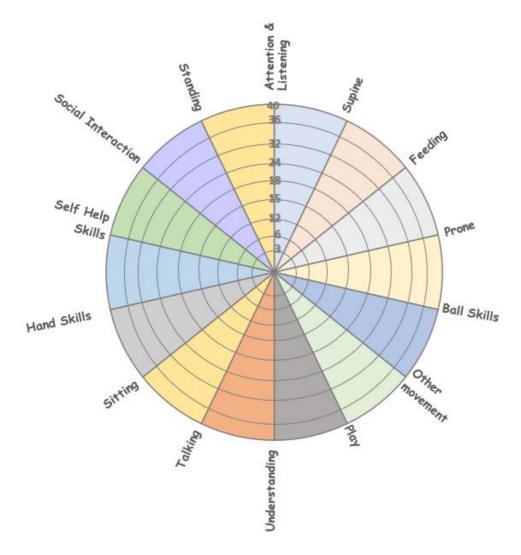
	Development Matters Checkpoints at 4 years	Rarely	Sometimes	Always
Communication and Language	Is the child using sentences of 4-6 words – "I want to play with cars" or "what's that thing called?"			
	Can the child use sentences joined up with words like 'because', 'or', 'and'? for example: "I like ice cream because it makes my tongue shiver".			
	Is the child using the future and past tense: "I am going to the park" and "I went to the shop"?			
	Can the child answer simple 'why' questions?			
	Does the child play alongside others rather than always wanting to play alone?			
	Does the child take part in pretend play (for example being 'mummy' or daddy'?)			
Personal, Social & Emotional Development	Does the child take part on other pretend play with different roles – being the Gruffalo, for example?			
	Can the child generally negotiate solutions to conflicts in their play?			
	Is the child reliably dry during the day? Support children who are struggling with toilet training, in partnership with their parents. Seek medical advice, if necessary from a health visitor or GP.			

		48-60 months		
Developmental Area	Milestone	Advice	When to be concerned	Where to Refer
Play	Complex & imaginative play develops involving changing roles Organising and co-operating with other children	-Invite friends to play -Opportunities to develop imaginative play e.g. role play doctors surgery	Repetitive isolated play Unable to follow social rules in play e.g. turn taking Not joining in with other children's play	Signpost to local Children's Centre – Play in the Home, Theraplay, Discuss with Bridge Centre outreach service. Referral to the Bridge Centre depending on age this would be referral through EHAT system or reception outreach program Refer to SLT Complete seedlings at home and in setting.
Attention & Listening	Able to move focus between tasks but may still need to stop activity to listen	May need adult / carer support to listen e.g. calling name before giving instruction Adult / carers to ensure child has opportunity to learn from good peer models of listening within large / small groups	Unable to listen to adult / carer directions when engrossed in own activity	Discuss with Bridge Centre outreach service. Referral to the Bridge Centre depending on age this would be referral through EHAT system or reception outreach program
Understanding	Can understand instructions given to a group of children Able to follow simple stories without pictures Will understand instructions containing sequencing words such 'first/after/last Can give a reason when asked a 'why' question The child is aware of more complex humour and enjoys simple jokes Understand past/present/future time	•Encourage group games such as 'Simon says' Look at family photographs, DVDs etc and encourage talk about present & future •Share humorous books •Talk about cause & effect relationships with appropriate games	-Always the last child to respond to group instructions -Watches other children intently before acting -Only able to follow one element of a longer instruction -Doesn't enjoy listening to stories	Refer to SLT Discuss with Bridge Centre outreach service. Signpost to 0-19 team Consider referral to
Talking	Child uses well-formed sentences Grammar mostly appropriate but still some errors e.g. 'I catched it' Able to join phrases together e.g. 'I am going to wear my boots because it's raining' Can hold a simple conversation about something which is not immediate Speech is generally intelligible Most sounds are present Clusters beginning to develop e.g. sp & bl	-Adult / carers repeat immature sentences correctly but not expecting child to repeat back -Adult / carers break up complex words or sound combinations and model to child	-Immature sentence structure e.g. 'me kick ball goal' -Inappropriate correcting of child's speech & language by adult / carers -Poor control of lips/tongue for sounds -Distorted vowel sounds -Dysfluent talking	Paediatrician Consider a referral to the Nurture Pathway Complete a referral to the Neurodevelopmental Pathway Signpost to Library Services for access to free books
Social Interaction	Child chooses own friends Able to play co-operatively with other children & adult / carers Able to greet people appropriately Can take part in pretend conversations Can start conversations with several different strategies such as asking questions, making comments using a name Child able to plan construction and make believe activities Shows awareness of the needs of his listener	Opportunities to engage in conversation with peers - -group discussions and activities	Poor listener awareness Often talks for long periods of time about the same subject	Signpost to Read and Rhyme time in libraries BLUSH (Books and Language Unite St Helens) packs for parents available to borrow from libraries Signpost to local Children's Centre – Ready for School,

		48-60 months			
Developmental Area	Milestone	Advice	When to be concerned	Where to Refer	
Sitting	Stable in sitting a small chair and table	Encourage visits to soft play areas, parks and outdoor play to strengthen child posturally	Unable to maintain upright and symmetrical sitting posture on small chair for 10 minutes.	Physiotherapy / Occupational If there are concerns with	
Standing	Walks easily on narrow line Climbs ladders Can stand on one leg for 8-10 seconds Can hop on either foot 2-3meters Can walk on heels	Encourage visits to soft play areas, parks and outdoor play	Child falling behind peers in Gross motor skills clumsy with	motor development follow the link from the local offer for patient advice leaflets *Refer to the service if there are significant concerns regarding motor skills development. *Signpost to 0-19 team	
Other movement	Active and skilful in climbing, sliding, swinging, digging, - Skips on alternate feet - Bends and touches toes with legs straight	Encourage visits to soft play areas, parks and outdoor play	poor coordination, effecting willingness to participate in physical activity		
Ball skills	-Plays all variety of ball games with considerable ability appreciates scoring and rules of the game. - moves rhythmically to music	Encourage adult / carers to find opportunities for their chills to participate in such activities see games and activities leaflet		Signpost to Library Services for access to free books -Signpost to Childrens Centre	
Hand Skills	-Uses a dynamic tripod grasp of the pencil with movement of the fingers -Able to cut a triangle and progressing to a circle -Able to copy a square, with a pencil / crayon. Also progressively shapes involving diagonal lines e.g. triangle, diagonal cross leading eventually to early letter formation	-Encourage play and model post placing shapes into inset puzzles, pegs into a peg board, threading etcEncourage pencil skills activities such as dot to dots, simple mazes and colouring within an easy boundary / picture, copying simple shapes in a multi media way such as in paint / finger on a carpet square etc -Ensure child is able to copy prewriting shapes before writing letters - Encourage activities with tongs / large tweezers to develop the movements required for scissors then progress to snipping thin card - Share books that are colourful and interactive, encourage child to turn the pages	Child falling significantly behind peers in fine motor / bilateral skills, difficulties with pencil tasks and self help.skills effecting willingness to participate in these types of activities.	– Šelf-help skills	
Self help skills	Drinking from open cup, stabbing with a fork, scoops and can use fork and spoon together, washes and dries hands and face. Unbuttons large button. Toilet trained -Can get on / off the toilet unaided -Able to manage personal care following toilet visits independently. Puts on clothes such as a t-shirt with some help, shoes (possibly the wrong way round), pulling up trousers etc.	- Encourage adult / carers to practice this with their child e.g. knife and fork. Help hand over hand and practice with Playdoh - Encourage washing and drying hands and face, brushing hair etc. Practice on dolls, in the mirror etc - Play dressing up games, - Encourage access to the bathroom and toilet facilities/trial underwear and monitor wetting pattern/Introduce reward system to recognize efforts made.	Limited or no Self help skills -Child showing limited/no awareness of their toileting skills.	- Has support been provided by health visiting services if so toilet skills assessment to be included with referral to Paediatric Continence Service.	

Name of child: Date of Birth:

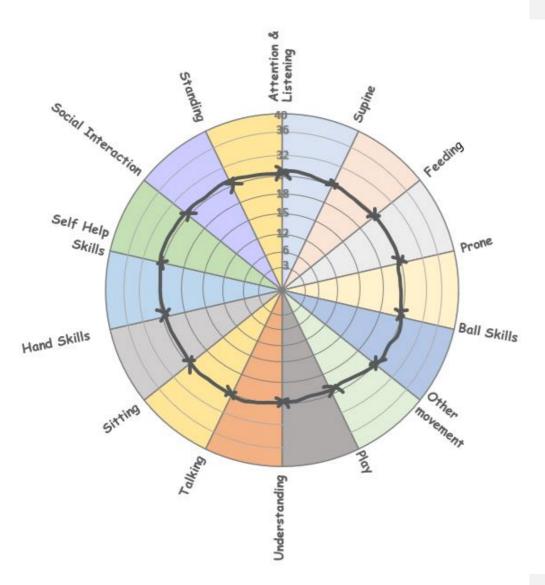
Age at this checkpoint:



EXAMPLE 1: Within Normal Limits

Name of child: A Date of Birth:

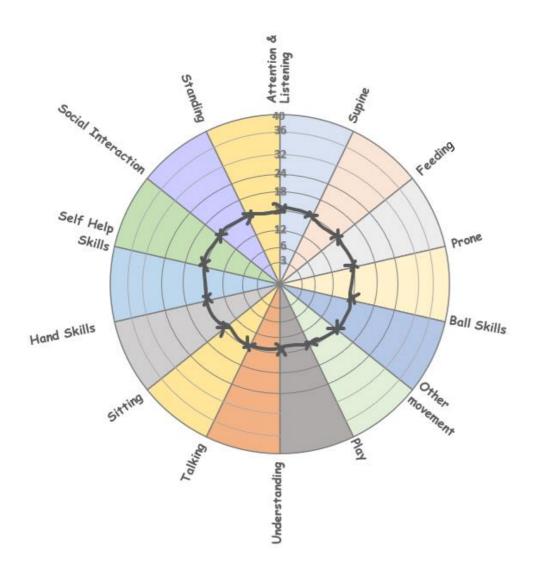
Age at this checkpoint: 26 months



EXAMPLE 2: Delayed Development

Name of child: B Date of Birth:

Age at this checkpoint: 26 months



EXAMPLE 3: Disordered Development

Name of child: C Date of Birth:

Age at this checkpoint: 26 months

