

My Support Plan

Guidance notes

The SEND Code of Practice 2015, 6.65 states that 'where a pupil is receiving SEN support, schools should talk to parents regularly to set clear outcomes and review progress towards them, discuss the activities and support that will help achieve them, and identify the responsibilities of the parent, the pupil and the school. Schools should meet parents at least three times each year.'

A My Support Plan should be completed as part of the graduated response; it should be considered, in the majority of cases, where a child/young person's need has been identified and a number of cycles of Assess-Plan-Do-Review have been completed. Interventions will become more focused and external professionals may well become involved at this point (although in some cases they will have been involved at an earlier stage, once the child/young person's SEND is identified). The My Support Plan template should be completed as a co-ordinated response, and should be completed at a Person Centred Planning Meeting.

Once outcomes and support have been agreed they should continue to be monitored using A-P-D-R templates; the Support Plan should be reviewed termly with the child/young person and their family to consider any changes in needs, provision or outcomes. It should focus on the progress being made towards outcomes and to address the identified needs. Where those involved in supporting the child/young person feel that progress is not being made and that further resources are needed to meet their SEN, a PCP meeting should be held and the completed My Support Plan, with all supporting documentation, should be sent to the Local Authority along with the checklist to request a statutory assessment of SEN.

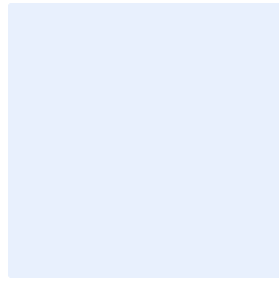
For further information, refer to the HCC SEN Assessment Pathway document.

All boxes in this document are expandable; please complete as many as possible and add additional boxes where necessary.



CYPName Support Plan

Insert child/young person's full name here



Include a photo or drawing of the child here with permission.

My Plan start date	
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Please tick if plan is being completed for an immediate request for a statutory EHC needs assessment <i>In some exceptional cases the Local Authority will consider requests for assessment without at least two terms' worth of reviews and A-P-D-R evidence, where it is considered that a child/young person's need is more urgent.</i>	<input type="checkbox"/>
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One page profile *This section should be completed by the child either independently or with support. The family can also be involved if appropriate. If you have an existing one page profile this may be substituted.*

This should support the 'Tell Us Once' approach and only need to be updated as situations change in the future and the plan is reviewed.

What I am good at:

This must be the child/young person's views.

It should cover hobbies, activities, things they enjoy doing such as particular subjects and areas of learning.

It can be updated regularly as the plan is reviewed and the cyp's views change.

My aspirations and hopes for the future:

This will vary depending on age. There is no right or wrong answer. The child/young person's aspiration is important in setting future outcomes. Depending on the ability of the child different approaches will be needed.

What is important to me:

- *How I communicate*
- *What I like to do*
- *How I stay healthy*
- *What is important to me in nursery/ school / college*
- *What I like to do – social activities*
- *Important people in my life: family, friends, pets*

What is important for me:

- *Critical things that you need to know about my health, wellbeing, behaviour*
- *How people communicate with me*
- *How I want to communicate with others*
- *How I want to be involved in decisions about me*

This should cover people and activities that are important currently.

How best to support me:

- *What support I need to make progress in education*
- *What support I need to help me with transition*
- *What support I need to access community / leisure activities*
- *What support I need to stay healthy and safe*
- *How I want to be supported*
- *What support I need to make decisions*

This should cover anything that the child feels they need help with. The parent or school may recognise the need for help and support but if the child does not then it should be included in later sections.

For very young / non-verbal children, consideration should be given as to how this can be established through visual prompts, things the child refuses to do or finds difficult.

Was this section completed independently? Yes / No

If no, how was the child/young person supported to complete it?

It is important to understand how these views were obtained, was it through discussion with a trusted adult, through sorting picture cards or from observations for example. This should only be written in the first person if they are the child's own words.

1. Personal details					
Full name:	<i>Complete all boxes</i>				
I like to be known as:					
Date of birth:		Gender:			
Ethnicity:		Religion:			
Home address:					
Telephone number:		Looked after / care leaver?			
UPN:		NHS No:		ICS No:	

2. Significant People – Parental Responsibility					
Relationship to child: <i>E.g. mum, dad, grandparent, step-parent, carer</i>					
First name:		Surname:			
Home address:					
Telephone:		E-mail:			
Any support needs?	<p><i>If adults have their own needs these should be identified here. It is important to note any need for adapted paper work (E.g. Enlarged font) or if a translator is required for conversations (In this case please ensure that the language of use is given)</i></p>				
Relationship to child: <i>It is important to include both parents if they both have PR</i>					
First name:		Surname:			
Home address:					
Telephone:		E-mail:			
Any support needs?					

2a. Significant People – who else is important to the child

Relationship to child: <i>This could be friends, relatives who play a particular role, support workers</i>			
First name:		Surname:	
Home address:			
Telephone:		E-mail:	
Any support needs?			
Relationship to child:			
First name:		Surname:	
Home address:			
Telephone:		E-mail:	
Any support needs?			

3. Details of educational setting

Name and address of school/setting:	<i>Complete all boxes</i>		
Date of entry:		Year Group:	
Name and role of main contact:			
Attendance (Include the current and previous academic year)			
Academic Year	Attendance %		
Exclusion (Include the current and previous academic year)			
Type of exclusion	Date of exclusion	Duration (if fixed term)	

5. Parent/carer views *You can use the template advice form to gather parents' views before the PCP meeting. The prompts are merely to help parents; they may wish to add other information. Attach the completed advice form as an appendix so that the school data protection/consent form is included.*

<p>Was this section completed independently? Yes/No <i>This section should be completed by the family either independently or with support from a key worker. Where the plan relates to a young person over 16, the young person <u>must</u> also be involved in completing it. This should support the 'Tell Us Once' approach and only need to be updated as situations change in the future and the plan is reviewed.</i></p>	
<p>If not, who helped (name and role): <i>This section may have been completed by someone other than the parent/carer acting in a supporting role</i></p>	
<p>Important information you need to know about #CYPname:</p>	<p><i>Please provide a brief history of your child. You may wish to think about your/ their health, eating/ sleeping, developmental milestones, social skills and relationships, attitude to school, taking part in activities in and out of setting). A summary of your child's needs. What is important to him/her? What is the impact of their SEND on the family as a whole? Parents should be supported to give a brief history of the child from birth onwards. Those supporting this should consider that this should give enough detail to be able to prevent further lengthy discussion about the past. They should also be aware that for many parents this may be a difficult thing to do.</i></p>
<p>What #CYPname is good at:</p>	<p><i>What has he/she enjoyed and achieved in the last year? What does he/she like to do? Anything that has worked well inside or outside of school in the last year? Parents should consider what they feel that the child likes and what they recognise the child is good at. This may differ from the One Page Profile as parents will recognise particular areas that the child may not or may not be able to communicate about.</i></p>
<p>What #CYPname needs help with:</p>	<p><i>Anything that is not working well. What would you like them to be able to achieve? What would they like to achieve? This should consider what they need in order to learn, to play, to keep healthy, to be independent and to prepare for the future and adult life.</i></p>
<p>How you can best support and communicate with #CYPname:</p>	<p><i>Information here could include strategies which parents/carers use to support the child which they have found beneficial. Are there things in place which have been seen to work well to support the learner? Consideration should be given as to how best to communicate with the learner. This may include use of languages such as Makaton or could be in regards to the child needing to be in a quiet space, away from others. It may also detail the sorts of language to be used, such as being very factual and direct, or questions to be used.</i></p>
<p>Our hopes and aspirations for #CYPname's future:</p>	<p><i>It may be very difficult for the family to see beyond the immediate issues and so support may need to be given to help them to identify what is important for them in the future and what they would like their child to be able to do. Thought should also be given to the fact that this may be a very difficult thing for the parent to do.</i></p>

6. Identified Special Educational Needs

What difficulties do you consider to be the main barriers to curriculum access and overall progress? Where appropriate complete more than one section.

Broad area of need (please tick ONE box only)

Communication and interaction	<input type="checkbox"/>	SEMH	<input type="checkbox"/>
Cognition and learning	<input type="checkbox"/>	Sensory and/or physical	<input type="checkbox"/>

SEN Type (as identified on school census)

SPLD - Specific learning difficulty	<input type="checkbox"/>	HI - Hearing impairment	<input type="checkbox"/>
MLD - Moderate learning difficulty	<input type="checkbox"/>	VI - Visual impairment	<input type="checkbox"/>
SLD - Severe learning difficulty	<input type="checkbox"/>	MSI - Multi-sensory impairment	<input type="checkbox"/>
PMLD - Profound & multiple learning difficulty	<input type="checkbox"/>	PD - Physical disability	<input type="checkbox"/>
SEMH - Social, emotional and mental health	<input type="checkbox"/>	ASD - Autistic spectrum disorder	<input type="checkbox"/>
SLCN - Speech, language and communication needs	<input type="checkbox"/>	OTH - Other difficulty / disorder	<input type="checkbox"/>
NSA - SEN support but no specialist assessment of type of need			<input type="checkbox"/>

Details of any specific diagnoses: please include name of professional confirming diagnosis and date of diagnosis

Include here any diagnoses for which there is a confirmation/evidence in the form of medical reports or advice. These documents will be required as an appendix to support this information. Throughout each area of need it is important to identify firstly how the learner presents, E.g does not engage with written work but to also ensure that this is explored as to why the learner presents this way. E.g. Due to difficulties constructing sentences, poor fine motor skills or muscle tone in hands, difficulties with sensory feedback from the writing implement. This allows the appropriate support mechanisms to be identified.

Communication and interaction E.g. *This area should cover how the child communicates with others, including language and speech needs, as well as how they interact with peers and with adults.*

speech/language delay, disorder or impairment – Include any information from the involvement of SALT; autistic spectrum disorder (ASD) – please indicate if the child has a diagnosis of ASD and if so who has provided it OR has the child/young person been referred through contact point for assessment.

Areas of strength:

-
-
-
-

For each area consideration should be given to educational strengths. This will come directly from the education setting but can also be taken from reports of services involved with the learner, such as Educational Psychologists or outreach services. Where information is taken from reports these should be included in quotation marks and the reports included as part of the appendix.

Areas of need:

-
-
-
-

This information will again come directly from the education setting but can also be taken from reports of services involved with the learner, such as Educational Psychologists or outreach services. Where information is taken from reports these should be included in quotation marks and the reports included as part of the appendix. This section should include the difficulties which have been identified. For example comprehension of spoken language, turn taking in a conversation, attracting attention of another person in an appropriate way. It may also be appropriate here to identify any difficulties making or maintaining friendships that a child may have.

If for these sections there are no needs please write 'none'.

Cognition and learning *This section should include specific information for the CYP both in terms of education and in terms of self-help / self-care; attitude to learning; ability to be independent and organised; happiness / engagement in school; is the child involved in other curriculum activities/extended setting? severe learning difficulties; profound and multiple learning difficulties; specific learning difficulties; moderate learning difficulties.*

Areas of strength:

-
-
-
-

There should be identified strengths in each section, even if this is just; what the child enjoys, that they are well organised in class; s/he tries hard or engages in tasks which are specific to his/her interests

Areas of need:

-
-
-

This area should cover how the child or young person learns, what they struggle with; and areas they have particular needs with in regard to their learning. It should also cover details of how and in what areas they are not making progress. It should include attitude to learning; areas such as attendance, what the child does not enjoy. This section could also include any results from standardised assessments which have been completed to support the identification of specific learning difficulties. It may be appropriate to describe any classes in which the child is setted based on ability as well as any curriculum adjustments which have been made in order to support the child.

Social emotional and mental health *This section should comment on self-esteem / confidence levels; relationships with other children and adults, both in and out of the classroom; approach and attitude to learning; circumstances in which the child's behaviour gives cause for concern.*

Areas of strength:

-
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-
-

This section should include information on the learner's general presentation of mood. Attendance may be an indicator of this.

Areas of need:

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The areas of need here should include how the child presents in their general mood, their self-esteem. Other factors to consider include the involvement of mental health services such as CAMHS or Headstart. It will be helpful to include information on the reasonable adjustments which have been made to the school behaviour policy in order to support a learners SEN if required as well as making reference to any documentation which has been completed to understand a learners needs. This could include: Individual Behaviour Plans, De-escalation Plans, 5 point Scales, Positive Handling Plans, Risk Assessments, boxall profiles or THRIVE Approach Reports. Again these documents should be included in the appendix.

Sensory and/or physical *This section us focused on hearing impairment; visual impairment; multi-sensory impairment; physical difficulties.*

Areas of strength:

-
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This section can include information on a childs skills E.g. Learner has good vision with no need for corrective lenses and no concerns have been raised regarding his hearing.

Areas of need:

-
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-
-

It is important here to include the type and extent of disability as well as how it affects the child's learning and development. The length of time the child has had this impairment is also helpful. Where this information is taken from medical reports or outside agency reports it should be included in quotation marks and the documentation included in the appendix.

In this section it is important to identify the extent of a learners needs and also the adaptations which have been made as part of the schools reasonable adjustments to support the learner.

Information should be included about what assistive technology is in place to support the learner and how this impacts on their ability to access education alongside their peers.

It may be appropriate to comment on how the child navigates the school site and how they are supported to access practical subjects such as PE and technology, or where their sensory skills may have a greater impact. Eg. In modern foreign languages or music.

It will also be useful to identify any support which is required to access curriculum visits off the school site.

Developing independence; preparing for adulthood

Areas of strength:

-
-
-
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Consideration should be given as to how the learner is developing independence. From secondary this will cover progression towards adulthood; however areas of independence that are needed in life should be covered here from early ages.

Areas of need:

-
-
-
-

It will be important to consider any difficulties learners have with feeding, toileting, getting dressed/undressed and how these compare to the age related expectations. It will also be appropriate to consider a learners ability to share items, to understand how to keep themselves safe, as well as identify risks in the community and online. Are they able to travel to and from school independently?

If the learner has been involved in criminal activity or there are concerns over their decision making then this would be appropriate to include here also.

7. Identified health needs			
Does the child/young person have any confirmed medical diagnoses?	Yes: details <i>Specific diagnoses with details of who has provided this can be included here. Evidence must be provided to support this.</i> No		
Does the child/young person have any identified health needs related to their SEND? <i>Information in this section may come from a number of health reports.</i>	Yes: details No <i>It would be expected that information in this section comes from health professionals and reports.</i>		
Is an Individual Health Plan in place in school? <i>e.g. Epilepsy Plan, Asthma Plan, Diabetes Plan</i>	Yes/No	If yes, date when last reviewed:	<i>If yes, then this should also be attached</i>
Does the child/young person receive a Continuing Care package?	Yes/No/ Not known	If yes, please give details:	
Does the child/young person need any specialist equipment?	Yes/No	If yes, please give details, including who provides it:	
What is the impact of identified health needs on the child/young person?	<i>What is the impact of their health need on their education, home life, ability to socialise, independence etc?</i>		

If this information cannot be completed at the person centred planning (PCP) meeting, please ensure that a Health Advice Form is sent out and completed prior to finalising the Support Plan.

8. Identified social care needs			
Does the child/young person have any identified social care needs related to their SEND? <i>This section should be completed even where there is no formal social care involvement, if it is felt that a child/young person has some level of needs related to social care.</i>	Yes: details No <i>Identified needs would be expected to come from service reports; if it is felt that there are <u>no</u> social care needs this should be identified and the section left blank.</i>		
Has the Local Offer been discussed with the family?	Yes: details No		
Is a Child Protection Plan in place?	Yes/No/ No consent	If yes, date when last reviewed:	<i>The family's agreement <u>must</u> be sought to include this information.</i>
Is a Child in Need Plan in place?	Yes/No/ Not known	If yes, date when last reviewed:	<i>All plans should be attached.</i>
Is an Early Help support plan in place?	Yes/No/ Not known	If yes, date when last reviewed:	
Does the child/young person receive any funding through direct payments or a personal budget?	Yes/No/ Not known	If yes, please give details:	
What is the impact of identified social care needs on the child/young person? <i>This could be in relation to their SEND or otherwise</i>	<i>Include details of:</i> <i>What impact the CYP's SEND has on the family and the family's needs. What do the child/young person and family find difficult, challenging or stressful?</i> <i>What is not working well?</i> <i>Does family life have any impact on the CYP's learning?</i> <i>Independence skills</i> <i>Preparation for adult life</i> <i>What is important to the child/young person?</i> <i>What does the child/young person do outside of school? Do they see friends, attend groups, clubs or activities?</i> <i>What are their hobbies or interests? Where do they go to do these things? Do they face any challenges or barriers accessing these activities?</i> <i>Is the child safe at home and in the community? Do they feel safe?</i> <i>Has the family had any previous social care assessments or involvement?</i>		

If this information cannot be completed at the PCP meeting, please ensure that, where appropriate, a Social Care Advice Form is sent out and completed prior to finalising the Support Plan.

9. Outcomes (in SMART format) for education, health and social care

Describe the outcomes that are wanted for the child/young person, based on the goals and aspirations agreed with the family. Longer term outcomes should usually be for a Key Stage or up to a point of transition.

For young people in Year 9 and above, outcomes should clearly demonstrate how the young person is being prepared for adulthood, including post 16 education and/or training opportunities, independent living and travel.

#1

Longer term outcome: By (date)....# will be able to.....

Outcomes must detail what will be different and what impact this will have on the child/young person's life and future.

Outcomes must be realistic with a clear possible end point. They should not be an aspiration but should lead towards that aspiration.

Why is this important? What difference will it make?

What will the child or young person be able to do differently in the future and what difference will it make in their life.

#2

Longer term outcome: By (date)....# will be able to.....

Why is this important? What difference will it make?

#3

Longer term outcome: By (date)....# will be able to.....

Why is this important? What difference will it make?

#4

Longer term outcome: By (date)....# will be able to.....

Why is this important? What difference will it make?

The SEND Code of Practice (2015) states:

6.65 Where a pupil is receiving SEN support, schools should talk to parents regularly to set clear outcomes and review progress towards them, discuss the activities and support that will help

achieve them, and identify the responsibilities of the parent, the pupil and the school. Schools should meet parents at least three times each year.

6.71 A record of the outcomes, action and support agreed through the discussion should be kept and shared with all the appropriate school staff. This record should be given to the pupil’s parents. The school’s management information system should be updated as appropriate.

10. Provision recommended to meet needs: <i>Include provision that is recommended for each outcome in Section 9.</i>		
10a. Educational provision <i>The Provision detailed here should not include teaching and learning strategies or other provision that should be readily provided in schools or early years settings. It should not include things that might be considered to be Quality First Teaching or anything that would usually be provided for children within Element One funding.</i>		
Type of support/provision. What is the educational provision required? <i>Teaching and learning strategies; interventions; programmes, facilities and resources</i>	Timescales/ frequency <i>How often will this happen and for how long? Be as specific as possible</i>	Who will provide this support?
<i>This section should list all provision <u>over and above</u> that which is usually provided through Quality First teaching. – It is also useful to identify who recommended this support. It may be the school SENCO based on previous experience of recommendations made for other learners with similar difficulties.</i>	<i>Be specific e.g. twice a week for 30 minutes. This will continue for 10 sessions when progress will be reviewed. Or This remains ongoing until following previous review of impact yielding positive outcomes.</i>	<i>Named staff; outreach provision etc</i>

10b. Health provision		
Type of support/provision. What is the health provision required? <i>Programmes; interventions; therapies; equipment</i>	Timescales/ frequency <i>How often will this happen and for how long? Be as specific as possible</i>	Who will provide this support?
	<i>Be specific e.g. twice a week for 30 minutes.</i>	

10c. Social Care provision		
Type of support/provision. What is the social care provision required? <i>Direct payments; respite care; PA; opportunities to attend social events</i>	Timescales/ frequency <i>How often will this happen and for how long? Be as specific as possible</i>	Who will provide this support?
	<i>Be specific e.g. twice a week for 30 minutes.</i>	

1. Agreement and signatories

Name of person completing Support Plan:	<i>School/setting member of staff responsible</i>	Role:	
Date agreed:		Signature:	
Parent / carer name / young person (16+):		Signature:	

2. Closure and sharing

My Plan closed date:		Closure reason:	
Plan passed to another setting:	Yes/No	If yes, name and address of setting:	

Appendices

Appendix 1: Attainment and progress made

Attainment and progress in main curriculum areas

Please add in details of attainment, progress made and rate of progress. Please be clear if you are using EYFS / P Scales / NC / GCSE unsupported levels and indicating end of KS/teacher assessment. Please provide age equivalent, standardised scores or teacher assessment if you prefer. Evidence should include comparative data to enable understanding of the attainment levels, e.g. tell us how the CYP compares, in performance terms, in relation to their peers.

It is helpful to include a copy of the learner's progress data over time. This may include previous end of Key Stage data as well as currently working at data and anticipated data. This information should be clear as to what level the child is currently working at compared to where they are expected to be working based on prior attainment. Where schools report on attitude to learning in a coded format. E.g. E, M, L then this should clearly include a key E.g. Exceeding expectations, Meeting expectations, Less than expectations. Where schools report using numbers it should be clear whether these relate to GCSE grades or a schools own internal progress measure. A learners targets can be helpful to support an understanding of this.

Appendix 2: Assess-Plan-Do-Review

Please attach here evidence of your Assess-Plan-Do-Review cycle.

You may use the attached template or insert your existing documents; please ensure that your document covers the following:

- What targets the child/young person is working towards.
- What specific support and interventions are being delivered to enable the child/young person to achieve their agreed targets.
- Who is involved in supporting the child or young person.
- What has been achieved / not achieved.
- What is working / not working.
- Details of further monitoring (review).

ASSESS-PLAN-DO-REVIEW CYCLE		Name:				DOB:			
Support / interventions offered in school; and/or agencies and settings involved	Cycle 1		Cycle 2		Cycle 3		Cycle 4		
	Target	Review	Target	Review	Target	Review	Target	Review	
Portage →	<p>9.5.17 Try to implement objects of reference for key transitions. Use motivators to engage A in interaction. Try different sensory 'tuff spot' activities</p>	<p>6.6.17 Portage worker to contact E Area SENCo The aim was for a phased transition to the toddler room from the baby room. A is at the stage of beginning to introduce the baby room. He can settle in there for short periods before becoming upset.</p>	<p>6.6.17 Increase the amount of time A spends away from mum Create a social story on the iPad for A to watch at home. Mum to provide a photo of her, that A can hold/look at in her absence.</p>	<p>28.11.17 A is not yet able to attend without his mother and can cope with attending for 30-40 minutes each afternoon. The nursery receiving 100% funding from the Early Years Team. A KW has been appointed and been on home visits to help A get to know her to help support transition to nursery</p>					
Early Years Inclusion Team →	<p>13.6.17 A KW to be identified for September (2017) KW to conduct some joint home visit with Portage worker SENCo at Octagon to prepare photos of the setting for parents and refer A to Early Years panel. EY Area Senco and Portage worker to conduct joint visit to Octagon to observe A on 3.7.17</p>	<p>3.7.17 Keyworker appointed for A. A very slow transition to begin again from September supported by Portage building to be supported by a practitioner in the setting</p>	<p>3.7.17 Transition sessions to be very short (10 mins) initially and gradually increased Mum agreed to stay to help support the transition from home to nursery</p>	<p>21.3.18 A is now able to access the setting for all his sessions, staying for 2 hours each time. Walks into the nursery holding mum's hand and then distracted so mum can leave. A is beginning to engage with his keyworker and the periods when he has been distressed have decreased substantially</p>	<p>21.3.18 For A to be able to access his full 15 hours nursery entitlement with a high level of support. To engage in some intensive interaction To engage with some high motivators in the setting supported by an adult.</p>	<p>18.6.18 A is attending nursery for the full 15 hours per week unless he is poorly or had no sleep. He has built up a good relationship with his keyworker. A leads his keyworker to what he wants/needs. A will eat a cracker for snack. Referral made to Ganton Outreach.</p>			

<p>NHS SALT →</p>			<p>3.10.17 & 17.10.17 Initial Assessment at home by R SALT referred by T (HV) A presents with a social communication disorder. He is predominantly at a pre intentional level of communication and likes to follow his own agenda. To follow a Communication Plan.</p>	<p>We don't have a record of the impact of this communication plan but we do know it was followed by the keyworker at The Octagon</p>	<p>20.11.18 To complete new Communication Plan. To arrange for J to visit A To inform parents of the next Communication Plan training. To introduce sensory cues, slowly and inform parents To find out if there is more intensive interaction training To show parents the cause and effect toys that are used at school</p>	<p>J not been in yet. Parents and TA doing Communication Plan training/ Intensive Interaction 4.4.19</p>		
<p>AFS1 →</p>					<p>24.4.18 2.5.18 3.5.18 9.5.18 Information gathering and meetings about A's transition to AFS1 in September 2018</p>	<p>Sept'18 A successful in receiving the 100% funding for A. SALT NHS got in touch with Aand C came in at the end of November to assess and review A's progress and to write a new communication plan</p>	<p>14.1.19 Dad agreed to starting the EHCP process as he understands A needs full time support to be able to access the learning environment in school. Agreed to meet on 13.2.19 to hold a SEN Support Plan Meeting at school.</p>	<p>13.2.19 Multi agency meeting with school ,dad, Ganton & Tweendykes Outreach and Early Years Team. The content of the Long and Short term outcomes were discussed and agreed (see document).</p>
<p>Tweendykes and Ganton →</p>					<p>24.5.18 To continue with intensive interaction to build his joint attention. Use visuals such as objects to help establish a daily routine. Introduce sensory play in interactive stories.</p>	<p>24.5.18 It was recommended that the Outreach team accept the referral from The Octagon nursery and begin a programme of support with the setting</p>	<p>June '18 Develop interaction through games and activities and Introduce simple structured activities within the daily routine. Use 'Show me don't tell me' approach</p>	<p>July'18 A has responded really well to working in quieter areas. This has provided opportunities for both A and his keyworker to develop his interactions and social skills.</p>

ASSESS-PLAN-DO-REVIEW CYCLE	Name:	DOB:
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Support / interventions offered in school; and/or agencies and settings involved	Cycle 1		Cycle 2		Cycle 3		Cycle 4	
	Target	Review	Target	Review	Target	Review	Target	Review

Appendix 3: Review of Support Plan

This is a suggested template; if you have your own review document please insert here.

Review of Support Plan: Record of discussion	
Date of review:	
Who attended:	
Notes of discussion:	
Actions to be taken:	
Parent/carer/young person's comments:	
	<p>Do parents/carers/young person agree that all areas of difficulty/need have been recognised and appropriate action taken (e.g. involvement of appropriate services)? Yes/No If no please give details: <i>Ensure that this question is covered in the review meeting; any areas of disagreement or dissatisfaction should be covered here.</i></p>
Date of next review:	
Who needs to be invited to next review:	

Agreement and signatories			
Name of person completing Support Plan review:		Role:	
Date agreed:		Signature:	
Parent / carer name / young person (16+):		Signature:	

Please duplicate review record as required.