

SEN SUPPORT PLAN (Start Date)

Parents/education setting/professionals may wish to insert a photograph here

Full Name
Date of Birth
Address & contact details
Telephone

Preferred Name
Gender
Home Language
Ethnicity
Educational Setting
Key Contact

Parent(s)/Carer(s) with Parental Responsibility
Relationship to Child/Young Person
Address & contact details
Telephone
Email



All About “Me”

What’s important to / for me:

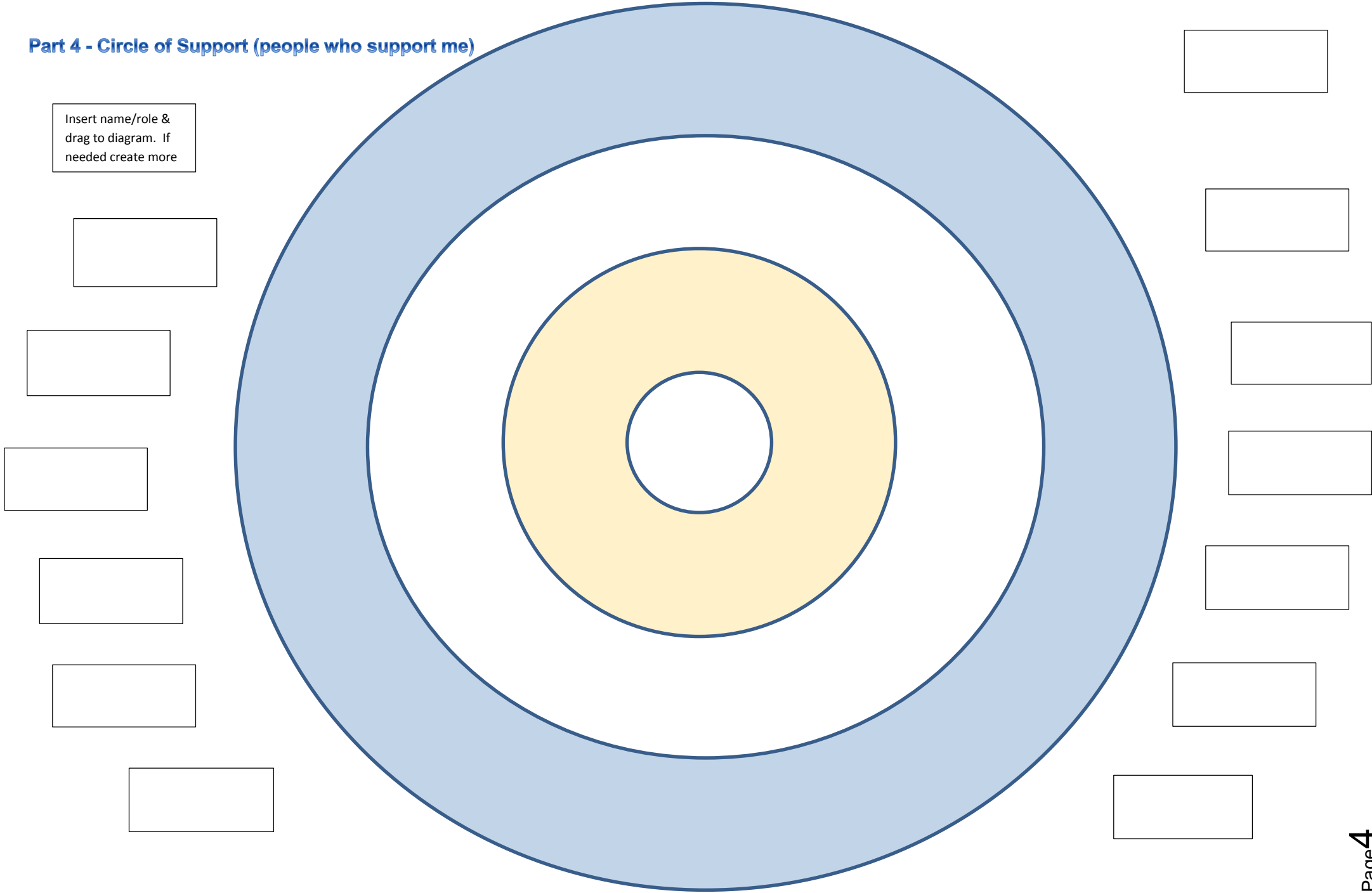
How best to support me:

What people like and admire about me:

Part 3 - %'s Profile (To include family story, %'s story, brief history including medical needs, aspirations – education, health, independent living (Parent/Carer's or Young Person's), what is working well now, what is not working so well)

Part 4 - Circle of Support (people who support me)

Insert name/role &
drag to diagram. If
needed create more



Part 5 - Contact details of professionals involved

Role/Designation	Name	Contact Details	Last involvement/ advice given date

Part 6 - Details of meetings with parents/carers and child/young person:

Date and Type of Meeting	Attendees	Agreed Priorities/Outcomes/Actions

Part 7 - Skills/Strengths and Needs for Support as agreed with parents/carers and child/young/person and supporting professionals

	Strengths/Capabilities	Needs for Support
Family / Home Environment		
Communication and Interaction		
Cognition and Learning		
Social, Emotional and Mental Health		
Sensory and Physical (including medical)		
Independence and Community Involvement		

Part 8 - Planning Document for Short-term Outcomes as agreed by the education setting, involved professionals, parents/carers and child/young person This part of the plan must be reviewed/updated at three times annually, but it may require more frequent reviews depending on the child/young person's response to the interventions and progress made. Updated pages may be appended to this School-Based Support Plan.

Child's Name:	DoB:	Year Group:	Start date:	Review due date:

Long Term Outcomes (if/as appropriate)

Short-term Outcome	Provision/Intervention	Session/Time (Mins)	Staff/Pupil Ratio	Pro-rata Time	Staff Involved	Annual Cost (£)	Review of Progress using TME*
How parents/carers can support this plan:				Total Time		Total Cost (£)	

Any Health or Social Care assessed needs and provision made:

Part 9 Monitoring Progress using assessments appropriate to the child/young person's age and needs (Target Monitoring and Evaluation (TME) is recommended - guidance for use is on the Bucks gfl)

Target 1: _____

Rating: 1 2 3 4 5 6 7 8 9 10

Descriptor of baseline level:

Descriptor of level achieved:

Target 2: _____

Rating: 1 2 3 4 5 6 7 8 9 10

Descriptor of baseline level:

Descriptor of level achieved:

Target 3: _____

Rating: 1 2 3 4 5 6 7 8 9 10

Descriptor of baseline level:

Descriptor of level achieved:

Area e.g. literacy/numeracy & test used	Date Assessed	Date Assessed		Date Assessed		Date Assessed	
	Age when assessed	Age when assessed		Age when assessed		Age when assessed	
	Level Attained/Age Equiv./Standardised Score	Level Attained/Age Equiv./Standardised Score	Progress	Level Attained/Age Equiv./Standardised Score	Progress	Level Attained/Age Equiv./Standardised Score	Progress

This SEN Support Plan has been agreed on (date) by the following people:

Signed:..... (Parent/Carer)

Signed:..... (SENCo)

Signed:..... (Teacher)

Signed:..... (Other please specify)

Signed:..... (Other please specify)

Signed:..... (Other please specify)

This document should be circulated to everyone involved in supporting the child/young person as soon as possible after being agreed

Part 10 One Page Profile for Class / Subject Teacher's information

Pupil Name:	Yr Group:	Category of SEN:	Author:
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Latest Reading Age/date:	SEN Support Date Commenced:	Last Updated:
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<u>Strengths/Capabilities</u> <ul style="list-style-type: none">•	<u>Recommended Teaching/Support Strategies</u> <ul style="list-style-type: none">•
<u>Difficulties</u> <ul style="list-style-type: none">•	

Desired Outcomes:	Progress towards Outcomes	Notes
<ul style="list-style-type: none">•		