**Education Support Plan**

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| **Principles:**   * Child led and focused. * Inclusive in practice. * Holistic in view. * Needs led and outcome focused. | **Purpose:**   * Promote attachment aware and trauma informed approach and practice. * Add value to any other plans and provide SMART actions. * Increase visibility and understanding of needs of children who have experienced adversity. * Collaborative and inclusive of the views of the whole team around child. * Dynamic and flexible; responding to need and reflective in practice. |

**My name is:**

**My education is provided by:**

**My year group:**

**SEN status**: None/SEN support/EHCP (please provide the date of request or issue of an EHCP) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Why are we completing this plan?**

**I am in receipt of funding to support me. I receive £\_\_\_\_\_\_\_\_\_\_\_every year.**

**People who support me:**

|  |  |  |
| --- | --- | --- |
| **Role** | **Name and contact details** | **Dates of involvement** |
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**My experience of life so far:**

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**My thoughts:**

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| --- | --- |
| How do I see my future? | How close am I to my future me now? |
| What would help me to get there? | Who would help me to get there? |
| I think I might find the following tricky… | I’d like the following to happen… |
| What is important for you to know about me… | I’d also like to share… |

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| My parent/guardian/carers comments or reflections on my current education provision: |

**A little bit about what I am currently doing:**

Areas of study/interest/current school grades and/or information

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| Summary of discussion: |

**Action Plan for the academic year**

**Current needs/priorities agreed in the meeting** (not met by any other plan):

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| --- | --- | --- | --- | --- |
| Current Priorities – **Autumn Term** | SMART/Measurable Outcomes | Interventions/Actions | Associated costs: | Review date and comments |
| 1. |  |  |  |  |
| 2. |  |  |  |  |
| 3. |  |  |  |  |
| Additional actions agreed at meeting: | | | | |

|  |  |  |  |  |
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| Current Priorities – **Spring Term** | SMART/Measurable Outcomes | Interventions/Actions | Associated costs: | Review date and comments |
| 1. |  |  |  |  |
| 2. |  |  |  |  |
| 3. |  |  |  |  |
| Additional actions agreed at meeting: | | | | |

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| Current Priorities – **Summer Term** | SMART/Measurable Outcomes | Interventions/Actions | Associated costs: | Review date and comments |
| 1. |  |  |  |  |
| 2. |  |  |  |  |
| 3. |  |  |  |  |
| Additional actions agreed at meeting: | | | | |

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| --- | --- | --- |
| **Date of Plan:** | **Review date:** | **Completed by:** |