

Support Plan: Birth-25 years

My support plan

My name is

Click here to enter text.

This is my plan to help me:

Click here to enter text.

Current setting: Click here to enter text.

Age: Click here to enter text.

Year Group: Click here to enter text.

Next steps: We have decided to...

Continue to use Support Plan as overview of need and provision

Apply for top up funding

Request an EHC needs assessment

Version number:

Click here to enter text.

Date the support plan was started:

Enter a date.

Review date:

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Information, Advice and Support

SEND Support Plans are for children and young people with identified special educational needs or a disability. They are non-statutory plans and should be used for children and young people who are on SEN Support in their educational setting. These plans can be used to request a statutory needs assessment / apply for top up funding where applicable.

A child or young person has special educational needs if he or she has a learning difficulty or disability which calls for special educational provision to be made for him or her. Special educational provision is usually resources or support that is additional to and different from what practitioner / teachers and settings would be able to provide for the majority of pupils in the setting.

Find out more about special educational needs in education from www.bristol.gov.uk/localoffer

Bristol's SEND Local Offer

Bristol's Local Offer - www.bristol.gov.uk/localoffer

A website full of information for parents, carers and young people with special educational needs and disabilities in Bristol, up to the age of 25. It has information on what services are available, events that are happening in the local area, where you can get support and advice and how you can feedback on the services you use.

Supportive Parents - www.supportiveparents.org.uk






"Supportive Parents provides the statutory SENDIAS Service in Bristol, North Somerset and South Gloucestershire. It provides free, impartial, confidential, information, advice and support to children, young people from 0-25 and their parents about any type of special educational need or disability. They offer information from the first concern right through the process of seeking statutory support to improve education experience. Supportive Parents are an independent charity and company limited by guarantee."

You may be eligible for certain benefits or grants if your child or young person has special educational needs. You can find out more from www.gov.uk/browse/benefits/disability.

All information is stored in accordance with Bristol local authority data protection policy www.bristol.gov.uk/data-protection-foi/data-protection-policy



My contact details

My first name is			My last name is		
	I was born on (Date of birth)			My number is (telephone number)	
	I live at (Home address & Postcode)			My Email address is	
				At home I speak (Home language)	

My parent(s) / carer(s) contact details	First	Second
Surname, Other name/s		
Relationship to child/young person		
Home address & Postcode (if different from above)		
Telephone/mobile number		
Email address		
Do you have any communication needs (e.g. you speak another language)		

Important Information

My Primary need is		My secondary need is	
---------------------------	--	-----------------------------	--

The name of the place where I go to learn is (School or setting)	
My key adult's name is (Name of teacher/practitioner/mentor/tutor)	

NHS number		Social Care Status/ Ref	
UPN / ULN / EY ref number		Pupil premium	Y/N

The people who helped me write this plan					
Name	Role	Contact detail (number / email address)	They work in:		Report attached:
			<input type="checkbox"/> Education <input type="checkbox"/> Health	<input type="checkbox"/> Social Care <input type="checkbox"/> Other	<i>Date of report</i>
			<input type="checkbox"/> Education <input type="checkbox"/> Health	<input type="checkbox"/> Social Care <input type="checkbox"/> Other	
			<input type="checkbox"/> Education <input type="checkbox"/> Health	<input type="checkbox"/> Social Care <input type="checkbox"/> Other	
			<input type="checkbox"/> Education <input type="checkbox"/> Health	<input type="checkbox"/> Social Care <input type="checkbox"/> Other	
			<input type="checkbox"/> Education <input type="checkbox"/> Health	<input type="checkbox"/> Social Care <input type="checkbox"/> Other	
			<input type="checkbox"/> Education <input type="checkbox"/> Health	<input type="checkbox"/> Social Care <input type="checkbox"/> Other	

How I participated in the development of my plan

Summary of how views and aspirations were gathered and when (e.g. when gathered or written/adapted)

How my parents/ carers participated in the development of my plan

Summary of how views and aspirations were gathered and when (e.g. when gathered or written/adapted)

The story of me

In child/ young person's words:

I was born with

I walked when I was....

I talked when I was....

I live with And have x sisters etc.

I also spend time with....

I have a diagnosis of epilepsy which is controlled by medication.

The best way to communicate with me is

Verbally/ non-verbally using Makaton/ British Sign Language/ Other Alternative or Augmentative Communication systems

First/ Second language

Single words/two word phrases

How to get my attention

MY VIEWS, INTERESTS AND ASPIRATIONS (SECTION 1) *(what is important to me and what is important for me as judged by others with my best interests at heart)*

What people like about me/ I am good at...	What is important to me/ my main interests.....	
<p><i>Positive qualities and strengths e.g. I have a strong sense of what I want to do; I like to be independent; I respond well to adult support.</i></p> <p><i>Play skills</i></p> <p><i>Physical skills</i></p> <p><i>Friendships and social skills e.g. I have good non-verbal communication skills</i></p>	<p><i>Important routines/objects/people</i></p> <p><i>Favourite play activities at nursery, at home and in the wider community</i></p>	
What I find hard...	How best to support me.....	
<p><i>Daily challenges and specific triggers</i></p> <p><i>Types of play/interactions/activities</i></p> <p><i>Sensory over/under stimulation – audio, tactile, visual</i></p> <p><i>Transitions – between home & nursery, between outside & inside, between parts of the routine</i></p> <p><i>Communication – listening and attention, understanding, expressing wants/needs or emotions</i></p> <p><i>Keeping myself and others safe</i></p>	Teaching and relational strategies <p><i>Give me clear simple instructions using the right number of key words</i></p> <p><i>Provide a distraction free environment to practice skills modelled by an adult</i></p> <p><i>Build on my interests to develop and generalise my skills</i></p> <p><i>Use the visual environment and resources to support my understanding</i></p> <p><i>Get my attention before speaking to me</i></p> <p><i>Give me time to process instructions and repeat if necessary</i></p>	Resources <p><i>Use my personalised visual timetable and my now and next board/ choice board/box</i></p> <p><i>Give me movement/ sensory breaks throughout the day</i></p>
These people are important to me....		
<p><i>Important people in my life including family, pets, friendships, staff etc</i></p>		

Growing up – There are things we all need to learn as we grow older if we want to have good health, be independent, feel part of my community and have a job or meaningful activity (these are known as the **Preparing for Adulthood Outcomes**).

The things that help me to have good health are... I think I would have better health if...
<i>Eating a broad and balanced diet Getting more sleep Doing my daily physio exercises to help my fine and gross motor skills Taking my medication every day Having my immunisations</i>
I feel part of my community when... I would feel more part of my community if...
<i>I could engage in activities with others I could make friends I could develop strategies to help me feel calm and cope with change and different environments</i>

Being independent in my life means I can... Things I would like to be able to do for myself are...
<i>Dress and undress myself Learn to put on my own shoes Learn how to be safe when playing and exploring Feed myself and drink from a cup Make choices Use the toilet Find my own coat/bag/shoes</i>
In the future I want to be able to have a job doing / or be able to... I would like to learn to...
<i>Communicate what I'm thinking and feeling Develop strategies to help me feel calm and cope with change and different environments Follow guidance, instructions and requests</i>

<https://www.preparingforadulthood.org.uk/SiteAssets/Downloads/yeded5wb636481748062535810.pdf>

Progress I Have Made So Far

** For Early Years CYP only **

Age/stage bands from Development Matters or the Differentiated Early Years Outcomes (DEYO)

Communication and Language	
Listening and attention: Understanding: Speaking:	
Personal, Social and Emotional Development	
Making relationships: Self-confidence and self-awareness: Managing feelings and behaviour:	
Physical Development	
Moving and Handling: Health and self-care:	
Literacy	Mathematics
Reading: Writing:	Numbers: Shape, space and measure:
Understanding the World	Expressive Arts and Design
People and communities: The world: Technology:	Exploring and using media and materials: Being imaginative:

Timeline of provision/support

Date	Details
	<p><u>Action to date:</u> <i>Meeting with parents</i> <i>Meeting with professionals, parents and SENCo</i> <i>Placed on SEN register</i> <i>Further assessment of need</i> <i>Additional intervention identified and put in place</i> <i>Staff training</i></p>
	<p><u>Next steps:</u> <i>Referred to paediatrician / EP</i> <i>Apply for Early Years SEN Panel Funding</i></p>

MY STRENGTHS, NEEDS, OUTCOMES AND PROVISION (SECTION 2)

Using graduated response – assess, plan, do, review

This part of the plan has information on:

- **Strengths** - What you're good at
- **Needs / assess** – What you need help with
- **Outcomes** – What you want to be able to achieve in the future
- **Provision / plan, do**– What support or resources you need to be able to achieve the outcomes you want.
- **Review**- Did you achieve it?

This plan should make sure all needs have been identified.

This section looks at strengths, needs, outcomes and provision to help you live your life:

Communication and Interaction – Support needed to help you communicate effectively.

Cognition and Learning – Support needed to help with learning.

Social, Emotional and Mental Health – Support needed for your wellbeing, to ensure positive interactions and to keep safe.

Sensory and/or Physical – Support needed to access your learning.

Top Tips

When writing this section....

- ✓ Refer to views, aspirations and interests in section 1
- ✓ add Health or Social Care provision which supports education.
- ✓ Make sure the outcomes are SMART

Specific
Measurable
Achievable
Realistic
Time limited

My strengths, needs, outcomes and provision - Communication & Interaction

My strengths are...

Summarise strengths; refer to professional reports if appropriate

Refer to attainment in relation to communication & interaction e.g. I can show if I don't like something through gesture

My needs are...

Needs that require education or training that is in addition to, or different from that made generally for others of the same chronological age in settings

Speech and language needs

I am not yet able to use functional communication

Listening and attention needs

I find it hard to concentrate for longer than 2 minutes

Social communication needs

I find it hard to understand how other people are feeling and this makes me feel stressed

What I want to do in the future... (inc. long term outcomes)....	What I want to achieve (and by when)	My Provision/ Support Strategy or intervention?	Delivery and monitoring Who, when, frequency	What difference did it make/ what are the next steps.... Was the outcome achieved
<p><i>(linked to aspirations on p7 and p8)</i></p> <p><i>I would like to be able to make choices</i></p>	<p><i>By next review (maximum of 6 months), I will be able to indicate a preference from a choice of two activities by selecting a picture symbol card.</i></p>	<ul style="list-style-type: none"> <i>• Motivating activities with corresponding picture symbol cards; range to gradually increase. Begin by offering a choice of one preferred and one non-preferred item.</i> <i>• Provide activities in a distraction free environment; reduction of distractions to gradually decrease.</i> <i>• Follow and build on interest in ...to motivate choice-making.</i> <i>• Begin by providing hand-over-hand support from a physical prompter (as agreed with parents/carers); to gradually reduce;</i> <i>• Affirm choice verbally using reduced and repeated language and by immediately providing selected activity.</i> 	<p><i>Be specific</i></p> <ul style="list-style-type: none"> <i>• Key Person/Early Years Support Worker</i> <i>• SENCo</i> <i>• Family members</i> <p><i>Throughout the nursery session in different areas and a variety of activities.</i></p>	<p><i>(to be completed on review)</i></p> <p><i>Was the outcome achieved:</i></p> <ul style="list-style-type: none"> <i>• Yes.</i> <p><i>What difference did it make:</i></p> <ul style="list-style-type: none"> <i>• I am now able to indicate what I want from a choice of three symbol cards.</i> <i>• I am now able to participate in singing time by selecting a song.</i> <i>• I am now able to indicate which snack item I would like.</i> <p><i>Next step</i></p> <ul style="list-style-type: none"> <i>• I will be able to independently make a choice by accessing, selecting and exchanging a picture symbol with an adult during freeplay.</i>

My strengths, needs, outcomes and provision - Cognition and Learning

My strengths are...

Summarise strengths; refer to professional reports if appropriate.

Refer to attainment in relation to cognition and learning e.g. I can focus my attention with my key person for a few minutes for a singing/musical activity.

My needs are...

Needs that require education or training that is in addition to, or different from that made generally for others of the same chronological age in settings

Cognitive functioning

I find it hard to learn in the same way as everyone else, so I lots of repetition and a multi-sensory support

Concentration and focus needs

I find it hard to concentrate for more than 2 minutes. I can get very anxious and upset if I am asked to do something, which I don't want to do or is too difficult for me.

What I want to do in the future... (inc. long term outcomes)...	What I want to achieve (and by when)	My Provision/ Support Strategy or intervention?	Delivery and monitoring Who, when, frequency	What difference did it make/ what are the next steps.... Was the outcome achieved
<p><i>(linked to aspirations on p7 and p8)</i></p> <p><i>I want to be able to follow guidance, instructions and requests</i></p>	<p><i>By next review (maximum of 6 months), I will be able to copy three actions that are verbally and visually modelled by an adult during a song or story.</i></p>	<ul style="list-style-type: none"> • <i>Distraction free environment</i> • <i>Follow and build on interest in familiar stories and songs.</i> • <i>Use clear and consistent actions.</i> • <i>Model expectation;</i> • <i>Frequent repetition to support understanding,</i> 	<p><i>Be specific</i></p> <ul style="list-style-type: none"> • <i>Key Person/Early Years Support Worker</i> • <i>SENCo</i> • <i>Family members</i> <p><i>Once every session as a focused activity.</i></p>	<p><i>(to be completed on review)</i></p> <p><i>Was the outcome achieved:</i></p> <ul style="list-style-type: none"> • <i>Yes.</i> <p><i>What difference did it make:</i></p> <ul style="list-style-type: none"> • <i>I am now able to copy five actions in three different songs.</i> • <i>I am now able to indicate a song choice through demonstration of an action.</i> • <i>I can now focus my attention with three different adults for 5 minutes for a singing/musical activity.</i> <p><i>Next step</i></p> <p><i>I will be able to follow a verbal and visual instruction to either stop or go in a structured activity or game.</i></p>

My strengths, needs, outcomes and provision - Social, Emotional and Mental Health

My strengths are...

*Summarise strengths; refer to professional reports if appropriate
Refer to attainment in relation to social, emotional and mental health e.g. I can tolerate playing alongside my peers.*

My needs are...

Needs that require education or training that is in addition to, or different from that made generally for others of the same chronological age in settings

Social welfare needs; Emotional well-being needs; Mental health needs

E.g. I like familiar routines, as they give me reassurance about what is happening now and next.

I find change difficult and this can lead to me feeling anxious and running around the nursery

In unfamiliar environments I struggle to manage my behaviours . This stops me from participating in community activities and groups.

What I want to do in the future... (inc. long term outcomes)...	What I want to achieve (and by when)	My Provision/ Support Strategy or intervention?	Delivery and monitoring Who, when, frequency	What difference did it make/ what are the next steps.... Was the outcome achieved
<p><i>(linked to aspirations on p7 and p8)</i></p> <p><i>I would like to engage in activities with others</i></p>	<p><i>By next review (maximum of 6 months), I will be able to take turns with a peer in activities during freeplay every session when verbally prompted by an adult using a supporting visual.</i></p>	<ul style="list-style-type: none"> • <i>Provide structured activity in a distraction free environment; reduction of distractions to gradually decrease</i> • <i>Follow and build on interest in ...to motivate turn-taking.</i> • <i>Use visuals e.g. whiteboard to support understanding of turn-taking; use of visuals to gradually decrease.</i> • <i>Model expectation;</i> • <i>Affirm expectation verbally using reduced and repeated language.</i> 	<p><i>Be specific</i></p> <ul style="list-style-type: none"> • <i>Key Person/Early Years Support Worker</i> • <i>SENCo</i> • <i>Family members</i> <p><i>Throughout the nursery session in different areas and a variety of activities.</i></p>	<p><i>(to be completed on review)</i></p> <p><i>Was the outcome achieved:</i></p> <ul style="list-style-type: none"> • <i>Yes, when a visual prompt is used alongside a verbal prompt.</i> <p><i>What difference did it make:</i></p> <ul style="list-style-type: none"> • <i>I am now able to take turns with two peers when verbally and visually prompted by an adult for up to 10 turns in a structured activity in a freeplay environment.</i> • <i>I am now able to tolerate my peers alongside me in other structured activities such as snacktime.</i> <p><i>Next step</i></p> <ul style="list-style-type: none"> • <i>When verbally and visually prompted by an adult, I will be able to share resources with up to three peers at an open ended activity in a freeplay environment.</i>

My strengths, needs, outcomes and provision - Physical and/or Sensory

My strengths are...

*Summarise strengths; refer to professional reports if appropriate
Refer to attainment in relation to physical and/or sensory .e.g. I can walk unaided with confidence*

My needs are...

Needs that require education or training that is in addition to, or different from that made generally for others of the same chronological age in settings

***Sensory needs:** I find busy, noisy places overwhelming and frightening*

***Physical needs – Gross motor:** E.g. I have Cerebral Palsy which affects my right side; I experience difficulty when trying to move quickly.*

***Physical needs – Fine motor:** I find it hard to hold a spoon and need special cutlery*

What I want to do in the future... (inc. long term outcomes)....	What I want to achieve (and by when)	My Provision/ Support Strategy or intervention?	Delivery and monitoring Who, when, frequency	What difference did it make/ what are the next steps.... Was the outcome achieved
<p><i>(linked to aspirations on p7 and p8) To be able to cope in a range of environments</i></p>	<p><i>By next review (maximum of 6 months), I will be able to independently join free play in the nursery room for 15 minutes every session.</i></p>	<ul style="list-style-type: none"> <i>• Adjustment of the routine so that I can go into the nursery room before my peers arrive.</i> <i>• Adults to be alert to indicators that my anxiety is increasing and to reassure.</i> <i>• Small group activities in a quieter environment every session to reduce sensory overload.</i> 	<p><i>Be specific</i></p> <ul style="list-style-type: none"> <i>• Key Person/Early Years Support Worker</i> <i>• SENCo</i> <i>• Family members</i> <p><i>Once every session/throughout the nursery day</i></p>	<p><i>(to be completed on review) Was the outcome achieved:</i></p> <ul style="list-style-type: none"> <i>• No.</i> <p><i>What difference did it make:</i></p> <ul style="list-style-type: none"> <i>• I am now able to join free play for 10 minutes every session alongside an adult.</i> <i>• I am now able to tell an adult when I need to go to a quieter environment.</i> <i>• I have developed a friendship in small group.</i> <p><i>Next step</i></p> <ul style="list-style-type: none"> <i>• Mediation of the sensory environment to reduce noise levels, reduce visual stimulation and to create calm area within the room.</i> <i>• I will be able to join free play in the nursery room for 5 minutes every session alongside an adult and 5 minutes with a friend.</i>

ADDITIONAL HEALTH INFORMATION (SECTION 3)

You should add information about health needs like on-going health care needs and personal care needs.

Strengths	Needs
<p><i>I have developed a good sleeping pattern and I sleep for 7 hours without waking. I can use the toilet independently and am dry at night</i></p>	<p>Summarise all health needs gathered from all professional reports. e.g.:</p> <ul style="list-style-type: none"> • <i>I have Cerebral Palsy and a visual field difficulty - homonymous hemianopia - which means that the left side of my vision is severely reduced. This affects my ability to navigate safely in unfamiliar or busy environments</i> • <i>Diabetes, Epilepsy, hearing loss that is moderate in both ears at mid to low frequencies and profound in both ears at high frequencies, Asthma etc.</i> <p><i>Add in any relevant detail reported by the health professionals in relation to the health need identified. e.g. My Asthma is worse in winter and I am more vulnerable to chest infections at this time of year.</i></p> <p><i>I attend appointments at the hospital every eight weeks whereis monitored by my consultant.</i></p> <p><i>My care plan is shared with everyone who helps me.</i></p>

ADDITIONAL CARE INFORMATION (SECTION 4)

You should include any social care information and links to other plans and/or personalised support plans.

Strengths	Needs
<p><i>I have settled well into my new foster placement and am getting on well with the family.</i></p>	<p>Summarise all social care needs gathered from all professional reports – e.g. SAF, CIN, CP Plan, PEP (Inclusion of this information MUST be with the consent of the young person/family/ primary carer/ legal guardian)</p> <p>e.g.:</p> <ul style="list-style-type: none"> • <i>My behaviour at home means that there are times when my personal safety and that of my sibling can be at risk.</i> • <i>I have extremely limited mobility. This means that I face significant challenges in joining in with social activities including family outings and holidays.</i> <p><i>My home is adapted to give me a self-contained bedroom with walk in shower and has storage space for the equipment I use on a daily basis.</i></p>

When this plan will be reviewed

The day the plan will be reviewed	
The person who will arrange the review Key working lead	
Their contact details Telephone and email	

Important dates and transitions	Date
The date I will change school/setting or change key stage For example Starting Nursery, Nursery to Primary school or year 9 to year 10, or year 11 onward	DD/MM/YYYY

Reports that helped us write this plan (Appendix 1)

Name of the report	Name of the person that wrote the report	Their position / role	Date they wrote the report / gave advice

Individual Provision Plan- Early Years

** For Early Years CYP only **

Child's Name:	Date of Birth:			Date Completed:
Early Years Setting	Sessions Attended	AYR	TTO	Group Size Ratio (adult:child)

Routine of Session	Intervention	Positive Outcome for Child
<p><i>Please outline the routine of the session</i></p>	<p><i>What action will be taken? What will the adult/adults do with/for the child?</i></p> <p><i>e.g. Adult to offer two choices of activity and model names signs for the activity. Adult to acknowledge choice by removing other activity and positively reinforce with praise.</i></p>	<p><i>What will this support do for the child? What will be the positive benefits for the child?</i></p> <p><i>e.g Child to be able to communicate choices effectively to adults and peers.</i></p>

My agreement to this plan

I agree that....

- ✓ People listened to my views and aspirations when we were writing this plan.
- ✓ I am happy with what is written about me in this plan and support identified.
- ✓ I am happy for this plan to be shared with other professionals if it will help me to achieve it.

Next steps: We have decided to.....

e.g. request an EHC needs assessment, apply for top up funding etc...

My signature	Date Click here to enter a date.
My parent(s) / carer(s) signature	Date Click here to enter a date.

Professionals Agreement We agree to support you to achieving the outcomes in this plan by delivering the provision we agreed and to help you review your progress when it is due. We agree that we will protect your information in line with GDPR and our organisations data protection policies

Signed by key working lead (on behalf of all the people who helped write this plan)	Date Click here to enter a date.
Head teacher/ setting lead signature	Date Click here to enter a date.

Signed off by Service Director for Education, Learning and Skills 21st March 2019