

**A: Personal Information**

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| **Name:** |  |
| **D.O.B:** |  |
| **Home language:** |  |
| **Gender:** |  |
| **Ethnicity:** |  |
| **Primary area of need:** | Communication and Interaction  Cognition and Learning  Social, Emotional Mental health  Physical and/or Sensory |
| **Other identified needs:**  **(choose all that apply\*)** | Executive Functioning and Working Memory  Attention and Concentration  Social Communication  Hearing Impairment  Multi-Sensory Impairment  Physical Difficulties  Social, Emotional and Mental Health  Speech, Language and Communication  Specific Learning Difficulties  Visual Impairment |
| **Social Care needs:**  **(choose all that apply\*)** | Child in Need  Child Protection  Child in Care  Other |

**Details of setting:**

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| **Early Years Setting /school/college:** |  | **My Key stage/year group:** |  |
| **Address:** |  | **Attendance** (absence – hours per week/days) Include details of any reduced timetable or off-site education arrangements |  |
| **Main contact:** |  | **Email:** |  |

**B: All about me**

I am years old

I communicate by:

**Hints and Tips:** Pupils may express their views through drawing, symbols, or other creative methods.

What is important to me:

What you can do to help me:

My fears / worries / things I don’t like:

My dream is to / in the future I want to:

My favourite things:

My strengths and talents:

What people like and admire about me:

**C: Professionals involved in my life**

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| **Name and Role** | **Written evidence from professional attached** | **Currently involved: start date/end date** |
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**D: Background Information**

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| **Outline any significant developments:**   * Family circumstances * Education * Medical/Health/external professionals |  |
| **What is working well for the child/young person and their family?** |  |
| **Further comments:**   * Family priorities e.g. relocation, housing, awaiting placement |  |

**E: Strengths and Special Educational Needs**

**Hints and Tips: Useful Definitions**

**Co-production:** child or young person’s views, information from parents and setting assessment information collected over time.

**Professionals**: include information about their work here, such as what they did, when and the key points from their involvement.

**APDR:** Identification of need, identify barriers to learning, what has been tried so far, the impact of additional support and what needs to happen next.

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|  | **Area of Need**  Provide a short description of needs that only applies to relevant areas | **Strengths:**  Personal qualities and interests. Clubs/activities they participate in. Do they have leadership role/class responsibilities? | **Special Educational Needs:**  Include key attainment data e.g. reading, spelling, SALT screening, assessment data, class observations and information from professional reports. |
| **Communication and Interaction** |  |  |
| **Cognition and Learning** |  |  |
| **Social, Emotional and Mental Health** |  |  |
| **Sensory and/or Physical** |  |  |

**F: Outcomes** **and Review**

**Hints and Tips:**

* Review SMART outcomes according to the needs of the child/ young person.
* What impact has the target had on the child/ young person’s learning?
* Do new outcomes need to be identified?
* Does support need to continue or does different support need to be implemented?

**0** – not achieved

**1** – Partly achieved

**2** – Achieved

**Hints and Tips:**

**Outcome:** A skill that you will have at some point in the future.

**Provision:** ‘additional to and different from’ what is available to all children/ young people and beyond OAP.

**OAP:** High quality and adaptive teaching strategies that are in place for the child/ young person and any reasonable adjustments that are part of a setting’s core offer.

**Hints and Tips:**

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|  | **Guiding Questions** | **Example** |
| Specific | What exactly should the CYP achieve? | “To use visual timetable to transition between activities…” |
| Measurable | How will we know the child has achieved it? | “…on 4 out of 5 occasions.” |
| Achievable | Is this realistic given the child’s needs and support? | Linked to CYP needs |
| Relevant | Does the outcome support the child’s learning or development? | Linked to curriculum access/development |
| Time -bound | When should this be achieved by? | “..within the next 6 weeks.” |

**Examples:**

* “Within 8 weeks, X will independently complete a 2-step maths problem using manipulatives in 4 out of 5 lessons.”
* “Within 6 weeks, X will initiate a peer interaction using a sentence starter during 3 playtimes per week.”
* “Within the next 6 weeks, X will use a calm-down strategy when upset, reducing incidents from 4 to 1 per week.”

**Long-term outcome (s):** A skill/s that the pupil is expected to have mastered by the end of their current key stage or shortly thereafter. These outcomes should contribute meaningfully to preparation for adulthood e.g. employment, community participation and health and wellbeing.

**1.**

**2.**

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**Autumn Term**

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| **Outcomes & Provision** | | | | **Outcomes Review** | | | |
| **Special Educational Need**  As stated in section E | **Short-term outcome**  What is the area of concern? SMART target which is achievable within a term to work towards removing the barriers to learning.  Specify the linked long-term outcome. | **What we need to do to achieve the outcome:**  Action that is additional to and different from quality first teaching/OAP -  *Personalised curriculum, assistive technology or learning aids, individual or group work, therapeutic interventions. Include frequency and level of support.* | **What will success look like?**   * Who will do it? * By When? | **Outcome Review – First Cycle**  Include: Score 0-2 Date | **What is working well and why?** | **What needs to be improved?** | **New Outcome (if applicable)** |
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**Spring Term**

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| **Outcomes & Provision** | | | | **Outcomes Review** | | | |
| **Special Educational Need**  As stated in section E | **Short-term outcome**  What is the area of concern? SMART target which is achievable within a term to work towards removing the barriers to learning. | **What we need to do to achieve the outcome:**  Action that is additional to and different from quality first teaching/OAP -  *Personalised curriculum, assistive technology or learning aids, individual or group work, therapeutic interventions. Include frequency and level of support.* | **What will success look like?**   * Who will do it? * By When? | **Outcome Review – Second Cycle**  Include: Score 0-2 Date | **What is working well and why?** | **What needs to be improved?** | **New Outcome (if applicable)** |
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**Summer Term**

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| **Outcomes & Provision** | | | | **Outcomes Review** | | | |
| **Special Educational Need**  As stated in section E | **Short-term outcome**  What is the area of concern? SMART target which is achievable within a term to work towards removing the barriers to learning. | **What we need to do to achieve the outcome:**  Action that is additional to and different from quality first teaching/OAP -  *Personalised curriculum, assistive technology or learning aids, individual or group work, therapeutic interventions. Include frequency and level of support.* | **What will success look like?**   * Who will do it? * By When? | **Outcome Review – Third Cycle**  Include: Score 0-2 Date | **What is working well and why?** | **What needs to be improved?** | **New Outcome (if applicable)** |
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**J: Consent and Data Protection Information**

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| Parent/Child’s Consent for Information Storage and Information Sharing:  I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ consent to the personal data recorded on this form being collected, processed and stored for the purpose of providing services to:  **Tick appropriate box:**  Child or young person for whom I am a parent    Child or young person for whom I am |
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| Child or young person  I consent to the sharing of information between professional services that will directly support my child/me. I agree that information can be shared between these agencies for the purpose of carrying out an assessment or ongoing progress monitoring.  Signature:  The London Borough of Hillingdon, in its capacity of Data Controller, holds certain information about you and/or a child or young person (“personal data”) mentioned in this form which it needs to process for the purpose of providing the service of arranging and administering the assessment and Special Educational Needs Support Plan. We collect and process your personal data to allow us to provide this service. By ticking the box or boxes above, you are consenting that we can collect and process your personal data and the personal data of a child or young person mentioned in this form for the purposes set out. You have the right to withdraw your consent at any time by contacting: sasadmin@hillingdon.gov.uk  For further information including details about our retention policy please refer to the London Borough of Hillingdon - Data Protection Privacy Notice which can be found on [www.hillingdon.gov.uk/privacy](http://www.hillingdon.gov.uk/privacy) |