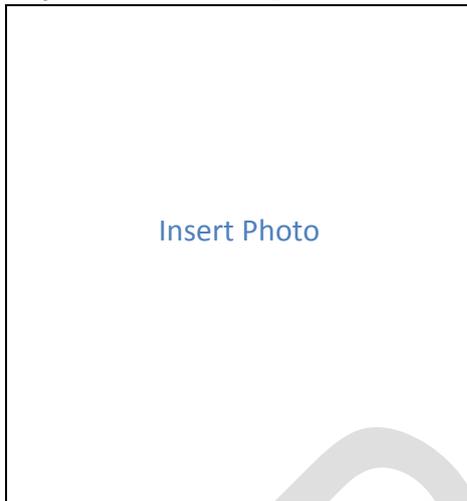


PLEASE INSERT YOUR  
SCHOOL LOGO HERE

## SEN Support - My ONE Plan

*Date: [date added when setting has issued]*

My Name is [insert full name]



I like to be known as [insert]

Date of First ONE Plan	
------------------------	--

## SEN Support - My ONE Plan

This is a non-statutory SEN Support Plan which documents needs and the provision required to meet them. It should be used in a person centred way with the child/young person and family and should be regularly reviewed through the assess, plan, do, review process

DETAILS OF CHILD/YOUNG PERSON			
<b>First Name(s)</b>		<b>Surname</b>	
<b>Home Address</b>		<b>Postcode</b>	
<b>Date of Birth</b>		<b>Gender</b>	
<b>Ethnicity</b>		<b>Religion</b>	
<b>UPN Number</b>		<b>NHS Number</b>	
<b>Broad Area of Need</b>		<b>Primary Need</b>	
<b>Current School</b>		<b>NCY</b>	

DETAILS OF PARENT(S) OR PERSON RESPONSIBLE		
<b>Name(s)</b>		
<b>Relationship</b>		
<b>Home Address</b>		
<b>Contact Number(s)</b>		
<b>Email Address</b>		

**Agreeing the Plan:** I understand that the information in this plan will be shared with relevant parties on a need to know basis. By signing this plan I accept the contents as accurate and appropriate.

	Name	Signature	Date
<b>Parent/Carer</b>			
<b>Named Person responsible for monitoring and reviewing this plan</b>			

**Part 1: One Page Profile (Important information that everyone should know about me)**

**How I Communicate:**

**What people like and admire about me:**

**What am I good at?**

**What is a challenge for me?**

**What is important to me now?**

**What would I like to do in the future/my life aspirations:**

**The following things are important for me in school:**

**How were these views gathered:** (the plan should be clear whether the child or young person is being quoted directly, or if the views of parents or professionals are being represented)

## Part 2: My Special Educational Needs

- All of the child or young person's identified special educational needs must be specified.
- SEN may include needs for health and social care provision that are treated as special educational provision because they educate or train the child or young person.
- Only complete the relevant boxes.
- Please ensure every Statement includes a reference to where it has originated (e.g. EP report dated Oct 14) or Class Teacher comments

### Current Strengths

### Achievements

### Communication and Interaction Needs:

### Cognition and Learning Needs:

### Social, Emotional and Mental Health Difficulties:

### Sensory and/or Physical Needs:

## Part 3: My Health and Social Care Needs

### Health Needs

**Please specify any Health needs which relate to the child or young person's SEN**

**Please specify any other Health care needs which are not related to the child or young person's SEN (e.g. a long term condition which might need on-going management)**

**Please provide details of the last involvement from relevant Health professionals**

**Please provide details of involvement that is expected over the coming year from relevant health professionals**

### Social Care Needs

**Please specify any Social Care needs which relate to the child or young person's SEN**

**Please specify any other Social care needs which are not related to the child or young person's SEN (e.g. a child in need or a child protection plan – inclusion of this information must only be with the approval for the parents/young person)**

## Part 4: Outcomes

- Please ensure Outcomes are SMART, clearly defining a measure and a timescale.
- At least one outcome should relate to an academic targets.
- All outcomes should correspond to the provision detailed in Part 5.

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### Part 5: My Support Plan (What we have agreed to do)

Date Agreed:

What will we do?	When will we do it?	Who will do it?	How often will it be done?	How will we know if we have succeeded?	Date Completed

## Part 6

These are the people who were involved in my first Plan:

Name and contact details	Role/JD	How did they contribute?	Date Report Provided

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## Part 7: Educational History, Progress and Assessments

Please update Part 7 as the child makes progress through the relevant stages.

<b>Educational Placement History</b> (previous schools/settings attended)	<b>Type of Setting</b>	<b>Start Date</b>	<b>End Date</b>

<b>EYFS - Record the child's level of development against each aspect of learning and development</b>			
<b>Areas</b>	<b>Months</b>	<b>Areas</b>	<b>Months</b>
<b>Personal Social Emotional Development</b>			
Making Relationships		Managing Feelings and Behaviour	
Self Confidence & Self Awareness			
<b>Communication and Language</b>			
Listening and Attention		Understanding Language	
Speaking			
<b>Physical Development</b>			
Moving and Handling		Health and Self-care	
<b>Literacy</b>			
Read		Write	
<b>Mathematics</b>			
Numbers		Shape, Space and Measure	
<b>Understanding the World</b>			
Technology		People and Communities	
The World			
<b>Expressive Arts &amp; Design</b>			
Exploring and using Media & Materials		Being Imaginative	

<b>Primary - National Curriculum Assessment - Please complete fully (include previous year's levels)</b>							
	Y1	Y2	Y3	Y4	Y5	Y6	Expected Progress
Speaking/Listening							
Reading							
Writing							
Numeracy							
Science							

<b>Secondary - National Curriculum Assessment - Please complete fully (include previous year's levels)</b>								
	Y7	Y8	Y9	Y10	Y11	Y12	Y13	Expected Progress
English								
Maths								
Science								

<b>Further Education - Levels</b>		
	Name of Course	Expected Progress
Entry Level 1		
Entry Level 2		
Entry Level 3		
Level 1		
Level 2		
Level 3		

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## Guidance for Reviewing SEN Support

Schools should regularly and carefully review the quality of teaching for all pupils, including those at risk of underachievement. This includes reviewing and, where necessary, improving, teachers' understanding of strategies to identify and support vulnerable pupils and their knowledge of the SEN most frequently encountered.

The provision of support for SEN should take the form of a four-part cycle through which earlier decisions and actions are revisited, refined and revised with a growing understanding of the pupil's needs and of what supports the pupil in making good progress and securing good outcomes. This is known as the graduated approach. It draws on more detailed approaches, more frequent review and more specialist expertise in successive cycles in order to match interventions to the SEN of children and young people.

During the review cycle schools should:

- Consider the effectiveness of the support and interventions and their impact on the pupil's progress should be reviewed in line with the agreed date.
- Evaluate the impact and quality of the support and interventions
- Provide parents and young people with clear information about the impact of the support and interventions provided, enabling them to be involved in planning next steps along with having opportunities to share their views.

This information should feed back into the analysis of the pupil's needs. The class or subject teacher, working with the SENCO, should revise the support in light of the pupil's progress and development, deciding on any changes to the support and outcomes in consultation with the parent and pupil.

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## Appendix A: Review Summary

Please attach a new Appendix A after each Review Meeting – please retain all previous documents.

<b>Person Centred Review Meeting held at (Date &amp; Location):</b>

<b>How has [insert name] and his/her family participated in this Review Meeting:</b>

<b>Who was involved in the Review Meeting:</b>

**Please consider with the Young Person, family and professionals what's working and not working...**

- At home and in my community
- In education
- With my health and healthcare (if relevant)
- With support from Social Services (if relevant)
- In other areas of life

	What's Working	What's Not Working
From my view	•	•
From the family view	•	•
From education	•	•
From health	•	•
From social services	•	•
From others	•	•

**Please amend 'My Current Support' tabs as required to reflect the support being provided**

My Current Support	Amount I receive	Please tick the appropriate box			It would be better if...
		More than I need	About right	Not enough	
Learning support					
Short break 'hours'					
Support from health					
Support with personal care					
Family and friends					
Other services					

### My Support Plan (What we have agreed to do)

Date Agreed:

What will we do?	When will we do it?	Who will do it?	How often will it be done?	How will we know if we have succeeded?	Date Completed