# **Support Plan: Birth-25 years**

## My support plan





| My name is  |  |
|---|--|
| 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 BSSP as overview of need and provision  |  |
|   |  |

| Ve | rsion | num | ber: |
|----|-------|-----|------|
|    |       |     |      |

Click here to enter text.

Date the support plan was started:

Enter a date.

Review date:

Enter a date.

## What's in this plan?

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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 / as a schools contribution to the needs assessment process/ 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:

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 <a href="https://www.gov.uk/browse/benefits/disability">www.gov.uk/browse/benefits/disability</a>.

All information is stored in accordance with Bristol local authority data protection policy

www.bristol.gov.uk/data-protection-foi/data-protection-policy

- CDC Outcomes Training for all teams New CDC E-learning course: Holistic Outcomes in EHC Plans | Council For Disabled Children
- The Outcomes Framework is now available on the Local Offer under the <u>Children and young people's outcomes framework Bristol's SEND Local Offer bristol.gov.uk</u> along with an <u>easy read booklet version</u> for families and young people.
- The Ordinarily available provision document is available here Ordinarily Available Provision Bristol's SEND Local Offer bristol.gov.uk

| My con           | My contact details                        |                 |             |                                     |  |
|------------------|---|-----------------|-------------|-------------------------------------|--|
| My first name is |   | My last name is |             |                                     |  |
|                  | I was born on<br>(Date of birth)          |                 | <b>6</b>    | My number is (telephone number)     |  |
|                  | I live at<br>(Home address<br>& Postcode) |                 |             | My Email address is (if applicable) |  |
|                  |   |                 | <b>'</b> }∈ | At home I speak<br>(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   |       |        |
| 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 SENDCo/teacher/practitioner | r/mentor/tutor) |                         |     |
|                                      |                 |                         |     |
| NHS number                           |                 | Social Care Status/ Ref |     |
| NHO HUHIDEI                          |                 | (If applicable)         |     |
| UPN / ULN / EY ref number            |                 | Pupil premium           | Y/N |

| The people who help me (agencies involved) |      |   |                       |              |                  |
|--|------|---|-----------------------|--------------|------------------|
| Name                                       | Role | Contact detail (number / email address) | They work in:         |              | Report attached: |
|  |      |   | □Education<br>□Health | □Social Care | Date of report   |
|  |      |   | □Education<br>□Health | □Social Care |                  |
|  |      |   | □Education<br>□Health | □Social Care |                  |
|  |      |   | □Education<br>□Health | □Social Care |                  |
|  |      |   | □Education<br>□Health | □Social Care |                  |
|  |      |   | □Education<br>□Health | □Social Care |                  |
|  |      |   | □Education<br>□Health | □Social Care |                  |

# 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)

| 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.   |
| Tilve With And have X sisters etc.  |
| I also spend time with  |

**Growing up** — There are things we all need to learn as we grow older if 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...

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 feel part of my community when...

I would feel more part of my community if...

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

Being independent in my life means I can...

Things I would like to be able to do for myself are...

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

In the future I want to be able to have a job doing / or be able to...

I would like to learn to...

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

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

#### What people like about me/ I am good at...

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.

Play skills

Physical skills

Friendships and social skills e.g. I have good non-verbal communication skills

#### What is important to me/ my main interests.....

Important routines/objects/people

Favourite play activities at nursery, at home and in the wider community

#### What I find hard....

Daily challenges and specific triggers

Types of play/interactions/activities

Sensory over/under stimulation - audio, tactile, visual

Transitions – between home & nursery, between outside & inside, between parts of the routine

Communication – listening and attention, understanding, expressing wants/needs or emotions

Keeping myself and others safe

### How best to support me.....

Strategies and resources

Use my personalised visual timetable and my now and next board/ choice board/box

Use the visual environment and resources to support my understanding

Get my attention before speaking to me

Give me time to process instructions and repeat if necessary

Give me clear simple instructions using the right number of key words

Provide a distraction free environment to practice skills modelled by an adult

Give me movement/ sensory breaks throughout the day

Build on my interests to develop and generalise my skills

#### These people are important to me....

Important people in my life including family, pets, friendships, staff etc

#### How best to communicate with me...

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

## **Progress I Have Made So Far**

\*For Early Years CYP only\*

Information from Development Matters and the Differentiated Early Years Outcomes (DEYO)

| Communication and Language                 |                            |
|--|----------------------------|
|  |                            |
|  |                            |
| Personal, Social and Emotional Development |                            |
|  |                            |
|  |                            |
| Physical Development                       |                            |
|  |                            |
|  |                            |
| Literacy                                   | Mathematics                |
|  |                            |
|  |                            |
| Understanding the World                    | Expressive Arts and Design |
|  |                            |
|  |                            |

## **Progress Made So Far**

\*For school age CYP only\*

|                     | Quantitative Outcomes for Pupil |                |      |  |  |  |  |  |  |
|---------------------|---------------------------------|----------------|------|--|--|--|--|--|--|
| Date/Age            |                                 |                |      |  |  |  |  |  |  |
| Area/Subject        |                                 |                |      |  |  |  |  |  |  |
|                     |                                 |                |      |  |  |  |  |  |  |
|                     |                                 |                |      |  |  |  |  |  |  |
|                     |                                 |                |      |  |  |  |  |  |  |
|                     |                                 |                |      |  |  |  |  |  |  |
| Attendance          |                                 |                |      |  |  |  |  |  |  |
| Progress Summary to | date (using stan                | dardised measu | res) |  |  |  |  |  |  |
|                     |                                 |                |      |  |  |  |  |  |  |
|                     |                                 |                |      |  |  |  |  |  |  |

| Qualitative Outcomes for Pupil  |
|---|
| Independence/confidence/attitude to learning  |
|   |
| Social skills / relationships   |
|   |
| Behaviour / ability to make well informed choices   |
|   |
| Other e.g. attendance, involvement of parents, participation in wider school activities (school council, clubs etc) |
|   |

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

# 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 communicate effectively.

**Cognition and Learning** – Support needed to help with learning.

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

Sensory and/or Physical - Support needed to access 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

### 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

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.

**Social welfare needs; Emotional well-being needs; Mental health needs:** 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, and this stops me from participating in community activities and groups.

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

Physical needs - Gross motor: 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

| My long term outcomes   | Area of need  Communication and Interaction (C&I), Cognition and Learning (C&L), Social, Emotional, Mental Health (SEMH) Or Sensory and Physical (S/P) | My short term outcomes (towards long term outcomes)   | Provision/ Support Strategy or intervention  | Delivery and<br>monitoring<br>Who, when,<br>frequency  | What difference did it make/ what are the next steps  Was the outcome achieved   |
|---|--|---|--|--|--|
| (linked to aspirations on p7 and p8)  I would like to be able to make choices  I want to be able to follow guidance, instructions and requests  I would like to engage in activities with others  To be able to cope in a range of environments | Communication & Interaction  | 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. | <ul> <li>Motivating activities with corresponding picture symbol cards; range to gradually increase. Begin by offering a choice of one preferred and one non-preferred item.</li> <li>Provide activities in a distraction free environment; reduction of distractions to gradually decrease.</li> <li>Follow and build on interest in to motivate choice-making.</li> <li>Begin by providing hand-overhand support from a physical prompter (as agreed with parents/carers); to gradually reduce.</li> <li>Affirm choice verbally using reduced and repeated language and by immediately providing selected activity.</li> </ul> | Be specific  • Key Person/Early Years Support Worker  • SENCo • Family members  Throughout the nursery session in different areas and a variety of activities. | <ul> <li>(to be completed on review)</li> <li>Was the outcome achieved?</li> <li>Yes.</li> <li>What difference did it make?</li> <li>I am now able to indicate what I want from a choice of three symbol cards.</li> <li>I am now able to participate in singing time by selecting a song.</li> <li>I am now able to indicate which snack item I would like.</li> <li>Next step</li> <li>I will be able to independently make a choice by accessing, selecting and exchanging a picture symbol with an adult during freeplay.</li> </ul> |

| Cognition& Learning               | 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.                                   | <ul> <li>Distraction free environment</li> <li>Follow and build on interest in familiar stories and songs.</li> <li>Use clear and consistent actions.</li> <li>Model expectation.</li> <li>Frequent repetition to support understanding</li> </ul>  | Be specific  • Key Person/Early Years Support Worker  • SENCo • Family members  Once every session as a focused activity.                                      | <ul> <li>(to be completed on review)</li> <li>Was the outcome achieved:</li> <li>Yes.</li> <li>What difference did it make?</li> <li>I am now able to copy five actions in three different songs.</li> <li>I am now able to indicate a song choice through demonstration of an action.</li> <li>I can now focus my attention with three different adults for 5 minutes for a singing/musical activity.</li> <li>Next step</li> <li>I will be able to follow a verbal and visual instruction to either stop or go in a structured activity or game.</li> </ul> |
|-----------------------------------|--|---|--|---|
| Social, Emotional & Mental Health | 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. | <ul> <li>Provide structured activity in a distraction free environment; reduction of distractions to gradually decrease</li> <li>Follow and build on interest into motivate turn-taking.</li> <li>Use visuals e.g. whiteboard to support understanding of turn-taking; use of visuals to gradually decrease.</li> <li>Model expectation.</li> <li>Affirm expectation verbally using reduced and repeated language.</li> </ul> | Be specific  • Key Person/Early Years Support Worker  • SENCo • Family members  Throughout the nursery session in different areas and a variety of activities. | to be completed on review)  Was the outcome achieved:  Yes, when a visual prompt is used alongside a verbal prompt.  What difference did it make?  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 am now able to tolerate my peers alongside me in other structured activities such as snacktime.   |

|                     |  |  |  | Next step 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.   |
|---------------------|--|--|--|--|
| Physical or Sensory | 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. | <ul> <li>Adjustment of the routine so that I can go into the nursery room before my peers arrive.</li> <li>Adults to be alert to indicators that my anxiety is increasing and to reassure.</li> <li>Small group activities in a quieter environment every session to reduce sensory overload.</li> </ul> | Be specific  • Key Person/Early Years Support Worker  • SENCo • Family members Once every session/throughout the nursery day | <ul> <li>(to be completed on review)</li> <li>Was the outcome achieved:</li> <li>No.</li> <li>What difference did it make?</li> <li>I am now able to join free play for 10 minutes every session alongside an adult.</li> <li>I am now able to tell an adult when I need to go to a quieter environment.</li> <li>I have developed a friendship in small group.</li> <li>Next step</li> <li>Mediation of the sensory environment to reduce noise levels, reduce visual stimulation and to create calm area within the room.</li> <li>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.</li> </ul> |

# **ADDITIONAL HEALTH INFORMATION (SECTION 3)**

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

Summarise all health needs gathered from all professional reports e.g.

- 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
- 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.

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 attend appointments at the hospital every eight weeks where ......is monitored by my consultant. My care plan is shared with everyone who helps me.

# **ADDITIONAL CARE INFORMATION (SECTION 4)**

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

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) e.g.

- My behaviour at home means that there are times when my personal safety and that of my sibling can be at risk.
- I have extremely limited mobility. This means that I face significant challenges in joining in with social activities including family outings and holidays.

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.

| 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 |
|   |            |

## **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   |
|---|---|--|
| Please outline the routine of the session | What action will be taken? What will the adult/adults do with/for the child?  | What will this support do for the child? What will be the positive benefits for the child? |
|   | 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. | e.g. Child to be able to communicate choices effectively to adults and peers.              |

### **School aged Individual Costed Provision Map**

\* For School age CYP only \*

| Number of pupils in class/ group: |                 | Number of Support Staff/ TAs allocated to class/group:        |             |
|-----------------------------------|-----------------|---|-------------|
| Place (CORE SCHOOL BASED) Ordina  | arily Available | Provision - what is available for all- Quality First Teaching | Cost £4,000 |

**Needs, outcomes and provision** – provision in additional to and different from universal provision.

N.B. For children/ young people in receipt of enhanced pupil premium (CiC/ PLAC) please reference where provision is covered from that funding stream and exclude from costing.

| Area of need  | Provision/ support to meet needs | Cost & time |   |
|---|----------------------------------|-------------|---|
|   |                                  |             |   |
|   |                                  |             |   |
|   |                                  |             |   |
|   |                                  |             |   |
|   |                                  |             |   |
|   |                                  |             |   |
| Targeted and specialised provision Element 2 and 3 total cost |                                  |             | £ |
| -£6,000: Element 3 requested                                  |                                  |             | £ |

### Agreement to this plan

We agree that....

- ✓ People listened to everyone's views and aspirations when writing this plan.
- ✓ We are happy with what is written in this plan and support identified.
- ✓ We are happy for this plan to be shared with other professionals.

| 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 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 SENDCo/ 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. |