**09.13b SEN Support - Action plan**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Date: | | | | **This is Me!**  *IMAGE OF CHILD* | | |
| My name is: | | | |
| My DOB is: | | | |
| I can: | | | |
| I would like to: | | | |
| This is what is important to me: | | | | | | |
| I can’t do everything I like because: | | | | | | |
| My parents/carers think: | | | | | | |
| My key person thinks: | | | | | | |
| I receive help from: | | | | | | |
| I already have this help from my setting: | | | | | | |
| I would like to try this activity | | | | | | |
| When and where? | | | | | | |
| With whom? | | | | | | |
| With what? | | | | | | |
| The outcome should be: | | | | | | |
| I may also like to try to | | | | | | |
| When and where? | | | | | | |
| With whom? | | | | | | |
| With what? | | | | | | |
| The outcome should be: | | | | | | |
| My parents/carers will help me by: | | | | | | |
| We will look at my plan again on: | | | | | | |
| **Action plan - Recording Sheet** | | | | | | |
| Name of child: | | | Key person: | | | |
| Planned objective: | | | | | | |
| Date: | Activity: | Outcomes: | | | | Persons present: |
|  |  |  | | | |  |
|  |  |  | | | |  |
|  |  |  | | | |  |
|  |  |  | | | |  |
|  |  |  | | | |  |
|  |  |  | | | |  |
|  |  |  | | | |  |
|  |  |  | | | |  |
|  |  |  | | | |  |
|  |  |  | | | |  |
|  |  |  | | | |  |
|  |  |  | | | |  |
|  |  |  | | | |  |
|  |  |  | | | |  |
| Notes: | | | | | | |
|  | | | | | | |
| **Action plan - Review sheet** | | | | | Date | |
| Name of child: | | | | | | |
| People present at this review: | | | | | | |
| Planned objectives: | | | | | | |
| Outcome (setting): | | | | | | |
| Next steps: | | | | | | |

Black text on a white background

Description automatically generated

Rosalind Hambidge (Director) Date: 15/2/2023

Signed on behalf of Little Oak Pre-school (Witney) Ltd

Policy review due: October 2023