My Early Years SEN Support Plan – Example

**Photo**

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| **Name:** | **Date of Birth**: |
| **Address:** | **Home language:** |
| **Parent/carer names:** | **Child Looked after?** Yes/No |
| **Date started:** | **Plan start:** |

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| **Monitoring Start Date:** |
| **Needs identified and key notes/dates from observations/records/discussion with other practitioners/parents/carers:** |

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| **Differentiated provision/strategies implemented over time and outcomes:** |

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| **Cognition & Learning** | **Communication & Interaction** | **Social Emotional & Mental Health** | **Sensory & Physical** |
| * Power of 2 * Auditory/Visual Memory skills | * Social Stories * Funtime * Play Interaction * Speech and Language Therapy Plan support * Early Bird * Bucket Activities (Attention Autism) * PECS | * Emotional Literacy - Feelings * Funtime * Play Interaction * Intensive Interaction * Meet and Greet | * Dyspraxia Programme * Big Moves * Ear Defenders * Toileting programme * Eating programme |

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| **Review Dates:** |  |  |
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| **Services Involved** | **Date** | **Name of Professionals** |
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| **SENIF: Date Requested** | **Outcome** |
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**EHC needs assessment requested on:**

**EHCP issued on:**

**Implementation meeting on:**

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| **Additional Information** |
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| **About Me:** |
| Things I enjoy and can do in the home and setting  Date:  Date:  Date:  Things I don’t like:  Date:  Date:  Date: |

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| **Areas of Need** |
| Cognition and Learning |
| Communication and Interaction |
| Social, Emotional and Mental Health |
| Physical and/or Sensory |

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| **Things you can do to help me:** |
| Date:  Date:  Date: |

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| **Outcomes: What I hope to be able to do in the next 12 months / difference make? Date:** |
| **1.**  **2.**  **3.**  **4.** |

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| **Plan (Target) and date:** | **Do – Who can help me and how** | **Review – progress I have made and date** |
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| **Plan (Target) and date:** | **Do – Who can help me and how** | **Review – progress I have made and date** |
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| **Plan (Target) and date** | **Do – Who can help me and how** | **Review – progress I have made and date** |
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| **Record of Review:** |
| **Review Date:**  **Attended by:**  **Apologies:**  **General update:**  Parents:  Setting:  Professionals:  **Actions Agreed:**  **Copies sent to:** |