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Professional Involvement:				
	Name (and role)	Date involved from:	Still involved (please ✓)	Brief Summary of Involvement (attachment relevant information)
Post Adoption Support Team				
Education (Educational Psychologist, SEND team, EWS, EISS)				
Social Care/Early Help				
Health (including CAMHS)				
Speech and Language Therapy				
Physiotherapist/ Occupational Therapist				
Parent Family Support Service				
Other (such as ELSA, counsellor, therapist, youth support services)				

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Young Person's Views:

I am happy at school when...

I am less happy at school when...

The adults who help me at school are...

I am good at...

I find it more difficult and need support in...

When I find things hard, adults can help me by...

I am interested in learning more about...

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Significant information on early childhood experiences (Completed by parent/carer) (e.g. brief description of birth parent history, any periods in care, attachment experiences/any significant anniversaries/times of year):

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Current Challenges outside school (completed by parent/carer):

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Indicate where any further or more detailed information can be found (Completed by parent/carer and DT) (e.g. document held by parents/carers or in school file that is available to specific members of staff):

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Young person's areas of strength in school (Completed by the DT):

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Young person's areas of difficulty in school (Completed by the DT):

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What works well to support the young person?

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What makes the young person feel safe and secure?

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Young person's interests and successes (in and out of school) DT and parents/carers

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Academic Outcomes			
Subject area:	Current grade/level:	Target grade/level:	Pupil is making progress Yes/No?

Current Attendance %	Current Punctuality %
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Target Setting:			
Outcome/target	Action (what will we do to help them achieve this?)	Lead (who is responsible?)	Date (when will this be achieved by?)

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Review:		
Target/outcome	Achieved? Y/N/partially	Comment

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Pupil Premium (completed by the DT):		
Detail of expenditure	Detail of Intervention	Target/outcome this is linked to

This document has been shared with:		
Role	Name	Shared?
Headteacher		
Designated teacher		
Class teacher		
Form tutor		
SENCO		
Head of Year		
Other		

Next Meeting:	
Date:	Venue:

Completed By:	
Name:	Role: