			EARLY YEARS	SEN SUPPORT PLAN		
Name of child:	Ххх		Date of birth:	Xx/xx/xx	Year group: Age in months:	Yr X
Date this plan start	ed:	Sep 23		Date this plan to be reviewed:	Dec 23	
Agreement of Supp	ort Plan					

Agreement of Support Plan					
Teacher/SENCO signature:		Date:	Parent/Carer signature:	Date:	

Aspirations/strengths/interests:	Preparing for Adulthood Outcomes:	Achieved Yes/No
-Xxx is a very happy little boy who is determined in everything he does.	Xxx will use gestures to choose between two toys.	
-He enjoys exploring the resources both indoors and	 Xxx will engage in an adult led activity for 4 mins. 	
outdoors but particularly likes the outdoorsHe enjoys sensory experiences particularly touch and	Xxx will recognise when he is feeling angry.	
feel.	 Xxx will be able to take turns with a peer during an activity or game for 2 mins. 	
	Xxx will put his coat on when asked to do so by an adult.	
	Xxx will jump with two feet together.	

Overview of needs:

Xxx was diagnosed with Autism in September 2020 from the SCAT Team. He has difficulty maintaining focus and attention. He prefers to follow his own agenda of flitting between different areas of the room and investigating objects for short periods. He struggles to follow instructions. Xxx has limited speech and delayed social skills Xxx struggles to express himself. He sometimes can become very upset and frustrated when he cannot make his needs known. Xxx shows limited awareness of danger. Xxx has limited self-care and independence skills.

April 2024

Education:

Specific needs	What? (including provision & resources)	Stage of provision	When? (frequency, duration, group size)	By Whom? (staffing requirements)
Cognition and Learning	1a Adults to break down information presented to him using visual task cards	additional	1a Daily within curriculum sessions as and when	TA
Xxx has difficulty understanding	to support processing skills and auditory		required 1:1 30 mins daily	
instructions and what is asked of him	working memory		1b Daily within curriculum	Teacher/Key
	1b Allow time for Xxx to process	OAP	sessions as and when	worker
	instructions	0711	required 1:1	TA
2. Cognition and Learning	2a Adult support to facilitate Xxx's access to resource packs	additional	2a Daily within curriculum sessions as and when	TA
Xxx has difficulty complying during a work	,		required 1:1 20 mins daily	
session for any more than a 3 min task per session			2b Daily within curriculum	
per session	2b Supply Xxx with trays of interest	OAP	sessions as and when required.	Teacher/TA
3. Communication and Interaction	3a Adult led intensive interaction sessions	additional	3a Daily up to 15 mins 1:1	TA
Xxx has limited speech and struggles to			3b Daily within curriculum	Class
effectively communicate with others.	3b Illustrated topic word lists and support available when needed	OAP		Teacher/TA
				Class
4.0 : 1.5 .: 1.11 .::	3c Visual aids	OAP	3c Daily within curriculum	Teacher/TA
4. Social, Emotional and Mental Health	4a Adult to support Xxx with recommended activities and bespoke	additional	4a Daily 1:1 10 mins (50 mins per week)	TA
Xxx finds it difficult to understand and	interventions: provide examples		Times per meenty	
manage his emotions				All Staff
	4b Adult available to support Xxx to feel more confident and capable.	OAP	4b 1:1 during the day as required	
5. Social, Emotional and Mental Health	5a. Emphasize on sharing across the day	OAP	5a 1:1 during the day as required	All Staff
	5b. Adult modelling of turn taking games and responses and drawing them to his attention.	additional	5b 1:1 10 mins daily (50 mins per week)	Class Teacher/TA

April 2024 2

Xxx finds it difficult to wait and take turns, interacting with one child during adult led game and follow a sequence				
Sensory and Physical Limited independence and self-care skills such as eating and drinking	6a. Adult prompts at snack and lunchtime.	additional	6a 1:1 10 mins (50 mins per week), 1:1 Lunchtime 30 mins daily (150 mins per week)	TA Lunchtime Supervisor
7. Sensory and Physical Limited movement skills	7a Adult facilitated gross motor intervention.	additional	7a 1:1 10 mins (50 mins per week),	TA
	7b Trampette recommended by OT Sept 21, £150	additional	7b. Not applicable	Purchased with DAF

Health and or Social Care (delete if not appropriate):

Specific needs	What? (including provision & resources)	Stage of provision	When? (frequency, duration, group size)	By Whom? (staffing requirements)

Review

Summary of discussion: (To include pupil and parent/carer voice)			Recommendations of review meeting:			
			a) Support Plan to continue – new o	utcomes set Y/N		
			b) Support Plan to continue request	EY SEND funding Y/N		
			c) EHC Assessment to be requested	Y/N		
% Attendance:			d) SEN Support ceases (schools remo register)	ove from SEN Y/N		
Teacher/SENCO signature:	Date:		Parent/Carer signature:	Date:		
Does the child/young person have an Individual Health Care Plan? yes/no			Does the child/young person have a Care Plan/PEP? yes/no			

April 2024 3

April 2024 4