

**Personal Education Plan for:**

**Date of review:**

**ACADEMIC YEAR: 2020-2021**

**Early Years Foundation Stage (FS1 & FS2)**

**Guidance for completion of Personal Education Plan**

**To be started within 10 days of first coming into care and to be completed for the 20 day Looked After Review and should be reviewed in time for each subsequent Looked After Review or before if required due to changes in educational circumstances.**

All actions and targets must be agreed with the child/young person whose voice and contribution

to the plan should be central.

It is expected that this document is completed at a meeting between the social worker, designated teacher, foster carer, the child/young person and other professionals as appropriate. Child Information i.e. Section 1 (pre-populated by social worker) and Education Information i.e. Section 2 (pre-populated by school/education) data on attainment, progress and attendance should be completed by the school in advance and discussed with the child in advance of the meeting.

Targets should be set and agreed to accelerate learning where the child/young person is behind

age related expectations. The Virtual School should be invited to contribute to the Personal Education Plan (PEP) review meeting for all children who are looked after whose progress is below expected.

Relevant and additional tracking teacher assessments and progress information should be attached

to the PEP and uploaded onto Mosaic from all PEP review meetings.

All relevant members of staff, including supply teachers and staff, carers or key workers should be

made aware of the contents of the plan to ensure consistency of approach, expectation and provision.

Ensure that all targets that are set by education within the meeting are SMART (specific, measurable, achievable, relevant and timed for completion) and have an academic focus.

From year 8 onwards our children must have access to appropriate careers advice and guidance which should be reflected in the PEP.

Ensure that, on completion, all participants have a copy of the plan to inform all future actions.

If the parents/carers need support (e.g. taxis, childcare) in order to maintain links with the school,

social care should arrange this.

This plan forms part of the Care Plan and this plan must be reviewed termly (3 times a year).

Copies of all other plans relating to the child's education (Pastoral Support Plan, Individual

Education Plan, EHCP's, child's last school report etc.) should be attached to this plan and referred

to in the targets.

The Virtual School will have access to all PEPs for information and Quality Assurance purposes.

Full guidance to support the completion of this plan to be found at: <https://www.nottinghamshire.gov.uk/education/virtual-school/nottinghamshire-virtual-school/teachers-and-professionals/personal-education-plan>

**Personal Education Plan Meeting Agenda**

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| **Agenda Item**  |
| **Check in** Warm welcome  Introduction of who is in the meeting  ‘What’s worked well recently/since we last met…’  |
| **Attainment, progress, strengths & needs**Is the pre-populated education information accurately describing the strengths and needs of our child?  What do we need to add in to make sure it provides a better description? What are our child’s current attainment and progress? What else, if anything, needs to happen to support this?  |
| **Hopes, dreams and future goals** What are our child’s hopes, dreams and future goals?  What aspirations do our trusted adults hold for our child? Short term and long term (think about work experiences and employability skills at beginning of secondary school) What else does the child want us to know about their education (Mind of my own etc)?  |
| **Review targets** Review and reflect on previous target setting. How has our child responded, was it successful? Why? What else needs to be happening to accelerate our child’s progress?  |
| **Termly SMART target setting** What areas do we need to focus on to support our child’s development/progress even further? How will we do that? How does this reflect our child’s aspirations? Let’s create SMART targets around this…do they pass the ‘teacher come and see/hear me test’. |
| **Pupil Premium Spending** What areas are we needing to focus our PPP+ spending on to support the SMART targets?  |
| **Consideration of Nottinghamshire SEND process** Does our child have additional needs that require Nottinghamshire’s *graduated approach* to supporting SEND? Does the child need SEN support in school?  |
| **Achievement and extra-curricular activities** We know that a sense of belonging and connections are important, what extra-curricular and additional activities is our child/young person engaged in, being invited to or interested in being part of?  |
| **Transition Planning** Do we need to plan for any transitions during this Education Review? If yes, what support is needed for a positive transition?  |
| **Is the PEP purposeful?** Does the documentation reflect this?   |
| **Agree next review arrangements** Date and who needs to attend  |
| **Sharing with our child/young person** If the child is not at the meeting, decide how and who will share today’s discussion with them. Explore child-friendly ways of doing this  |
| **Check out** One thing I know I can do to support this young person  |

**Section 1 - Child/Young person’s Information**

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| --- | --- |
| **First name:** | **Surname:** |
| **Name known by, if different:**  |
| **Legal status of young person:** |
| **DOB:** | **Identifies as:** | **Ethnic origin:** |
| **Name of setting/school/provider:** |
| **Is the setting/school/provider in Nottinghamshire LA?** (Tick) | Yes |  | No |  |
| **Key Stage:** | **Year:** |
| **Does our young person have additional needs (SEND)?** (Tick) | Yes |  | No |  |
| **If yes, what is their main need?** |

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| **Carer** |
| Name:Address:Contact: |
| **Social Worker** |
| Name:Address:Contact: |
| **Virtual School or EY Specialist Teacher email:** |

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| **Any important information to share with school/setting?** e.g. who has parental responsibility, who can/cannot see our young person. |
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**Section 2 - Education Information**

(to be completed by education setting prior to review)

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| **Designated Teacher (must have QTS) or Safeguarding Lead for Early Years** |   |
| **Our young person's trusted/key adult in education** |   |

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| **Our setting gives our child/young person a sense of belonging, connection and safety by...** (Please list below how you do this e.g. availability of relationships with trusted adults, focus on repair of relationships, environment - having a safe space, sensory awareness etc.)  |
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**Attendance/Exclusions**

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| --- | --- | --- | --- | --- | --- | --- |
| **If of statutory school age, is our young person accessing their legal entitlement to 25 hours of education?** (Tick as appropriate)  | Yes  |   | No  |   | N/A  |   |
| **If no, what is being done to resolve this?** |
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| **Attendance (%)** |   |
| **If below 95%, what actions are being taken or planned?** |   |

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| **Does our child/young person access alternative provision?** (Tick as appropriate)  | Yes  |   | No  |   | N/A  |   |
| **If yes, please provide details** (what, where, how many hours?)  |
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| **Exclusions****Since the last PEP, has our young person had any fixed term exclusions?** | Yes  |   | No  |   |
| **If yes, how many days/sessions of education were missed?** |   |
| **Actions to prevent further exclusions** |
|   |

**Attainment and Progress** Early Years: FS 1 & 2

(to be completed by education setting prior to review)

**Chronological age in months:**

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| Copy & paste Better Start data or progress data which demonstrates current attainment and assessment over time |

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| **Is our young person meeting age related expectations?** (Tick) | Yes |  | No |  | In some areas |  |
| **Has our young person made progress over the last term?** (Tick) | Yes |  | No |  | In some areas |  |
| **How much progress have they made?** Refer to the prime areas e.g. 1 step progress (emerging to developing) in communication & language.

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| Communication and Language |  |
| Physical Development |  |
| Personal, social and emotional development |  |
| Literacy |  |
| Mathematics |  |
| Understanding the World |  |
| Expressive Arts and Design |  |

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**Strengths and Needs**

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| **Relationships: What are the strengths in our child’s relationships? Does our child need ant support with peer/adult relationship?** |
| Strengths:  |
| Need:  | Action required  | Person(s) Responsible  |
|   |   |   |

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| **Communication Skills: How does our child communicate to get their needs met?** |
| Strengths:  |
| Need:  | Action required  | Person(s) Responsible  |
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| **Does our young person have English as an additional language?** (Tick) | Yes |  | No |  |
| If yes, is additional support required? Please state. |

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| **Mental Health and Emotional Wellbeing** |
| Strengths:  |
| Need:  | Action required  | Person(s) Responsible  |
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| **Executive Functioning Skills: Being able to plan, organise, monitor and carry out tasks throughout the day** (e.g. emotional regulation, memory, initiate task, shift from one task to another) |
| Strengths:  |
| Need:  | Action required  | Person(s) Responsible  |
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| **Preparing for Adulthood: friends, part of a community, skills to employment, skills to greater independence and skills to good health** (see guidance for e.gs of skills from age 3 upwards) |
| Strengths:  |
| Need:  | Action required  | Person(s) Responsible  |
|   |   |   |

**Section 3 - The PEP Meeting**

(See Agenda Outline on Page 3. More detail in guidance)

Our child/young person’s Team

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| --- | --- | --- | --- |
|   | Name  | Invited  | Attended  |
| Social Worker  |   |   |   |
| Foster/Residential Carer  |   |   |   |
| Designated Teacher (EY – Safeguarding)  |   |   |   |
| Education staff  |   |   |   |
|   |   |   |   |
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| What has gone well since we last met? (document successes) |
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**Hopes, dreams and future goals**

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| **Child’s/young persons:**    |
| **Adults’ best hopes for our child/young person:**      |
| **What else does our child/young person want us to know about education?** E.g. mind of my own, discussion in meeting or with adults prior to meeting        |

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| **Do the Strengths and Needs accurately describe our child/young person?** (tick) | Yes   |  | No  |  |
| **If no, amend the section as appropriate to reflect our child/young person** |

**Action Planning SMART targets**

Autumn term

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| **Area of concern** (use assessment data)  | **SMART targets to address concerns**\* | **What will you do?**Specific actions/interventions. Who will be responsible?  | How will (EY)PP+ be spent to support meeting targets?  | **Review** (Achieved/ partially achieved/ not achieved)  |
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\*Add and remove rows for number of targets required

Spring term

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| **Area of concern** (use assessment data)  | **SMART targets to address concerns**\* | **What will you do?**Specific actions/interventions. Who will be responsible?  | How will (EY)PP+ be spent to support meeting targets?  | **Review** (Achieved/ partially achieved/ not achieved)  |
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\*Add and remove rows for number of targets required

Summer term

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| --- | --- | --- | --- | --- |
| **Area of concern** (use assessment data)  | **SMART targets to address concerns**\* | **What will you do?**Specific actions/interventions. Who will be responsible?  | How will (EY)PP+ be spent to support meeting targets?  | **Review** (Achieved/ partially achieved/ not achieved)  |
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\*Add and remove rows for number of targets required

**Achievements**

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| Please list any achievements linked to education/extra-curricular activities e.g. attendance, grades, activity, progress, engagement, wider community.  |
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**Extra-curricular and additional activities**

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| We know that a sense of belonging and connections are important, what extra-curricular or additional activities is our child/young person engaged in, being invited to or interested in being a part of?  |
|     |
| Is there anything we need to do to facilitate engagement in extra-curricular activities? State who is responsible.  |
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**Transition planning**

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| **Is our young person, due to transition to the next phase of education, employment or training?** (Tick as appropriate)  | yes  |   | no  |   |
| **If yes, please detail transition plans below to ensure thorough discussions are held to inform next steps** e.g. has a school/college place been applied for, name next setting, dates starting new phase, detail support needed for positive transition including discussions with key staff at next school. |
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**Next review**

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| **Date of next review** |  |
| **Who to invite** (consider staff from next school or year group if due to transition) |  |