

|  |  |
| --- | --- |
| Personal Education Plan | **Autumn Term:** |
| **Spring Term:**Click or tap to enter a date. |
| **Summer Term:**Click or tap to enter a date. |
| Autumn Term of following academic year: |
| **Student Name** | **Key Stage** **Year**  |

|  |  |  |
| --- | --- | --- |
| **PEP** | **Individual Progress** | **Meeting National ARE**  |
| **Autumn** |  |  |
| **Spring** |  |  |
| **Summer** |  |  |
| **End of Year** |  |  |

|  |  |  |
| --- | --- | --- |
|  |  |  |

PEP completed by:

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# Personal Information

|  |  |  |  |
| --- | --- | --- | --- |
| **Name** |  | **Date of birth** |  |
| **UPN** |  | **Year Group/ Key Stage** |  |
| **Current address** | **School address** |
|  |  |
| **Phone number** |  | **Phone number** |  |
| **If the Young Person is educated outside of the authority, where is this taking place?** |  |

People involved in my PEP meeting:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Title | **Name & contact details** | **Attended 1st PEP****Y / N** | **Attended 2nd PEP****Y / N** | **Attended 3rd PEP****Y / N** | cc:**Y / N** |
| **Young person** |  |  |  |  | Y |
| **Lead practitioner / Designated teacher** |  |  |  |  | Y |
| Social worker |  |  |  |  | Y |
| **Parent / Guardian** |  |  |  |  |  |
| **Carer / Key worker** |  |  |  |  | Y |
| **SENCO** |  |  |  |  | Y |
| **LAC Education****Caseworker** |  |  |  |  | Y |
| **Headteacher of Virtual School**  | Suzie Levett, Town Hall Ext 3, Bourne Avenue, Bournemouth, BH2 6DYTel: 01202 456345 |  |  |  | Y |
| **Copy to:Input to RAISE** | LAC co-ordinatorSocial Worker to attach to RAISE  | - | - | - | Y |

# Social Care Key Information

|  |
| --- |
| **Name of Social Worker:** |

|  |  |
| --- | --- |
| Young Person’s legal status (select below) | Type of placement (select below) |
| Choose an item. | Choose an item. |
| If Other, please specify below |
|  |

Summary of history

|  |  |
| --- | --- |
| **Date of first full-time care placement** |  |
| **Number of changes of placement since first coming into care**  |  |
| **Number of changes in last 12 months** |  |
| **Number of changes of Social Worker since coming into care**  |  |
| **Time without an allocated social worker** (dates) |  |
| **Additional Comments** |
|  |

|  |
| --- |
| **Past of current health concerns and/or prescribed medication the school should be aware of** |
| **Autumn:** |  |
| **Spring:** |  |
| **Summer:** |  |

# Education Provision*.*

|  |  |  |
| --- | --- | --- |
| **Name of school or alternative provision** | **From**(month & year) | **To**(month & year) |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
| **Time without a school / full-time provision**(if more that 20 days) | **From** (month & year) | **To**(month & year) |
|  |  |  |
| **Is young person currently without full-time provision?** |  |
| **If Yes, then please specify for how long without full-time provision.** |  |

Exclusions

|  |  |  |  |
| --- | --- | --- | --- |
| **School** | **Reason** | **Duration** | **Date** |
|  |  |  |  |

# Contacts and Permissions

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Autumn Term** | **Spring Term** | **Summer Term** |
| **Anyone for whom contact is prohibited and what position school should take if contacted by this person** |  |  |  |
|  **Who will school ring in an emergency?** |  |  |  |
| **Who will school send important letters to?** |  |  |  |
| **Who will school send my reports to?** |  |  |  |
| **Who will come to parent/carer evenings?** |  |  |  |
| **Who will come to my class assemblies and other school events?** |  |  |  |

Who will say I can go on school trips?

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Autumn Term** | **Spring Term** | **Summer Term** |
| **Local trips** |  |  |  |
| **Residential** |  |  |  |
| **Trips abroad**  |  |  |  |

|  |
| --- |
| **Please give details of all contact arrangements below**   |
|  |

# Young Person’s Views About School

|  |
| --- |
| **What are the best things about school? What are your favourite subjects?** |
| Autumn |  |
| Spring |  |
| Summer |  |
| **Which adults can you talk to in school? (If you need help or just for a chat)** |
| Autumn |  |
| Spring |  |
| Summer |  |
| **Do you need any more help with your school work? If so, what subjects?** |
| Autumn |  |
| Spring |  |
| Summer |  |

|  |
| --- |
| **Who are your friends?** |
| Autumn |  |
| Spring |  |
| Summer |  |
| **Do you go to any clubs or societies in or out of school? Are there any you would like to join?** |
| Autumn |  |
| Spring |  |
| Summer |  |

Musical Instruments

|  |  |  |
| --- | --- | --- |
| Do you play a musical instrument? | Yes |[ ]  No |[ ]
| Do you have lessons on your instrument… | In School [ ]  Privately [ ]  Ceased Lessons[ ]  Self Taught [ ]  |
| How are you taught your instrument? | One-to-One  |[ ]  In a Group  |[ ]  As a Whole Class (First Access) |[ ]
| How long have you been learning your instrument? | 0 to 3 years |[ ]  3 to 5 years |[ ]  More than 5 years |[ ]

# My Achievements

|  |
| --- |
| C:\Users\whileyk\AppData\Local\Microsoft\Windows\Temporary Internet Files\Content.IE5\ZNR0WPC2\5694880812_e57aacbc2c_z[1].jpg |

(Feel free to include a copy of anything that you’re proud of. For example, it could be a piece of work, a certificate that you were awarded, or something else that you did in school.)

# My Carer/ Parent thinks

|  |  |  |
| --- | --- | --- |
| **My Strengths are:** | Autumn |  |
| Spring  |  |
| Summer  |  |
| **The Challenges I face are...** | Autumn |  |
| Spring  |  |
| Summer  |  |
| **Things that help me learn at home..** | Autumn |  |
| Spring  |  |
| Summer  |  |
| **Young person’s achievements.** | Autumn |  |
| Spring  |  |
| Summer  |  |

**Parent/Carer’s name .......................................... Signature....................................................**

# Special Educational Needs and Disability

Does this pupil have special educational needs and disability (SEND)?

|  |  |  |
| --- | --- | --- |
| Yes |[ ]  No |[ ]  Other |[ ]

|  |
| --- |
| If Yes, please describe the nature of SEND |
| This pupil has  |

|  |  |  |  |
| --- | --- | --- | --- |
| Do they have an Education, Health and Care Pan (EHCP)? | Yes |[ ]  No |[ ]  Other |[ ]
| When was the EHCP finalised? |  |
| Which Local Authority is responsible for administering the EHCP? |  |
| Who is the named SEND Officer at the Local Authority? |  |
| Who is the named SEND Officer at the school? |  |
| What is the main education need identified on the EHCP? |  |
| What support is specified on the EHCP? |  |

# Education Data

Attendance

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Attendance issues** (please attach attendance print-out**)** | **Last Academic Year** | **Autumn Term** | **Spring Term** | **Summer Term** |
| **Percentage attendance** (%) |  |  |  |  |
| **Authorised absences** |  |  |  |  |
| **Unauthorised absences** |  |  |  |  |
| **Punctuality**  |  |  |  |  |
| **Fixed-term exclusions** **(number of days)** |  |  |  |  |
| **Attendance print-out attached**  |  |  |  |  |

Progress Report

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Key stage | Reading | Writing | English / SPAG | Maths | Science |
| 1 |  |  |  |  |  |
| 2 |  |  |  |  |  |

Please use a grade of “*A”* to “*I”* as detailed in the table below to fill in the results on this page.

|  |  |  |
| --- | --- | --- |
| Below ARE | Age Related Expectation | Above ARE |
| I | H | G | F | E | D | C | B | A |
| Significantly Below (P-Levels) | Below | Working Towards ARE | ARE | Secure ARE | Working Towards Above | Above | Secure Above | Significantly Above |

|  |  |  |
| --- | --- | --- |
| **Key Stage 1** | **Year 1** | **Year 2** |
| **Assessment Date** | **Autumn Term** | **Spring Term** | **Summer Term** | **Year end target** | **Autumn Term** | **Spring Term** | **Summer Term** | **Year end target** |
|  |  |  |  |  |  |  |  |
| **Reading** |  |  |  |  |  |  |  |  |
| **Writing** |  |  |  |  |  |  |  |  |
| **English** |  |  |  |  |  |  |  |  |
| **Maths** |  |  |  |  |  |  |  |  |
| **Science** |  |  |  |  |  |  |  |  |

|  |  |  |
| --- | --- | --- |
| **Key Stage 2** | **Year 3** | **Year 4** |
| **Assessment Date** | **Autumn Term** | **Spring Term** | **Summer Term** | **Year end target** | **Autumn Term** | **Spring Term** | **Summer Term** | **Year end target** |
|  |  |  |  |  |  |  |  |
| **Reading** |  |  |  |  |  |  |  |  |
| **Writing** |  |  |  |  |  |  |  |  |
| **English** |  |  |  |  |  |  |  |  |
| **Maths** |  |  |  |  |  |  |  |  |
| **Science** |  |  |  |  |  |  |  |  |

|  |  |  |
| --- | --- | --- |
| **Key Stage 2** | **Year 5** | **Year 6** |
| **Assessment Date** | **Autumn Term** | **Spring Term** | **Summer Term** | **Year end target** | **Autumn Term** | **Spring Term** | **Summer Term** | **Year end target** |
|  |  |  |  |  |  |  |  |
| **Reading** |  |  |  |  |  |  |  |  |
| **Writing** |  |  |  |  |  |  |  |  |
| **English** |  |  |  |  |  |  |  |  |
| **Maths** |  |  |  |  |  |  |  |  |
| **Science** |  |  |  |  |  |  |  |  |

Class Teacher Report

|  |
| --- |
| **Areas of strength (academic and social)** |
| Autumn |  |
| Spring  |  |
| Summer |  |
| **Areas of concern (academic and social)** |
| Autumn |  |
| Spring  |  |
| Summer |  |
| **Peer relationships/ Social Skills** |
| Autumn |  |
| Spring  |  |
| Summer |  |
| **Child’s progress since the last PEP** |
| Autumn |  |
| Spring  |  |
| Summer |  |
| **Current academic targets in core subjects** |
| Autumn |  |
| Spring  |  |
| Summer |  |
| **Any other comments?** |
| Autumn |  |
| Spring  |  |
| Summer |  |

# Education Plan

Short-term plans

**Background information, social care update & summary of progress since last PEP Review**

|  |
| --- |
| **Autumn** |
|  |

|  |
| --- |
| **Spring** |
|  |

|  |
| --- |
| **Summer** |
|  |

Short Term Educational Priorities

|  |  |  |  |
| --- | --- | --- | --- |
| **Educational Priority** | **Term** | **Specific area of concern/priority** | **How will these be addressed?** |
| **Attendance / punctuality concerns** | Autumn |  |  |
| Spring  |  |  |
| Summer |  |  |
|  |
| **Special Educational Needs** (learning, emotional, pastoral) | Autumn |  |  |
| Spring  |  |  |
| Summer |  |  |
|  |
| **Study support in class/ home learning** | Autumn |  |  |
| Spring  |  |  |
| Summer |  |  |

|  |
| --- |
|  |
| Cultural / Religious needs | Autumn |  |  |
| Spring  |  |  |
| Summer |  |  |
|  |
| Personal development | Autumn |  |  |
| Spring  |  |  |
| Summer |  |  |
|  |
| Other agency involvement | Autumn |  |  |
| Spring  |  |  |
| Summer |  |  |

Short-term education actions (SMART) Autumn Term

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Desired Outcome** | **How will this be achieved?**  | **Who can help – what can they do?** | **By** (date) | **Review Outcome** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| **Who will discuss this PEP with the young person and when will it take place?** |
|  |

Short-term education actions (SMART) Spring Term

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Desired Outcome** | **How will this be achieved?**  | **Who can help – what can they do?** | **By** (date) | **Review Outcome** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| **Who will discuss this PEP with the young person and when will it take place?** |
|  |

Short-term education actions (SMART) Summer Term

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Desired Outcome** | **How will this be achieved?**  | **Who can help – what can they do?** | **By** (date) | **Review Outcome** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| **Who will discuss this PEP with the young person and when will it take place?** |
|  |

Long-Term Education Plans

|  |
| --- |
| Key Stage and Other Transitions (e.g. assessments and transfers) |
| Action | By Whom |
|  |  |

Year 6 Transition

|  |  |  |  |
| --- | --- | --- | --- |
| Action | By Whom | Completed | Date |
| Apply for a school place |  | Yes [ ]  | No [ ]  |  |
| Which school |  |
| Attach transition plan |  | Yes [ ]  | No [ ]  |  |
| Identify transport needs |  | Yes [ ]  | No [ ]  |  |
| Invite Secondary School Designated LAC Teacher to final year 6 PEP |  | Yes [ ]  | No [ ]  |  |
| Name of Secondary School Designated LAC Teacher |  |

|  |
| --- |
| **Who will discuss this PEP with the young person and when will it take place?** |
|  |

# Pupil Premium

**How is the Pupil Premium being used to improve the educational outcomes for this young person? To be completed by the School prior to PEP. Clear evidence must be provided.**

Autumn

|  |  |  |  |
| --- | --- | --- | --- |
| **Action**  | **Impact/Outcome** | **By whom** | **Cost of provision** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| **Total Spend** |  |

Spring

|  |  |  |  |
| --- | --- | --- | --- |
| **Action**  | **Impact/Outcome** | **By whom** | **Cost of provision** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| **Total Spend** |  |

Summer

|  |  |  |  |
| --- | --- | --- | --- |
| **Action**  | **Impact/Outcome** | **By whom** | **Cost of provision** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| **Total Spend** |  |

Effectiveness

Please rate the effectiveness of Pupil Premium spending on improving their educational outcomes.

N/A = not spent on this category 1 = not very effective at all 5 = very effective

|  |  |  |  |
| --- | --- | --- | --- |
| Category of Spending | Autumn | Spring | Summer |
| Books |  |  |  |
| 1:1 Tuition |  |  |  |
| Trips/Activities |  |  |  |
| Professional Input |  |  |  |
| Gifted & Talented |  |  |  |
| TA Support |  |  |  |
| Music |  |  |  |
| Sport |  |  |  |

# Appendix A: Attendance Register

# Appendix B: School Reports