**Foundation Stage Individual Support Plan (ISP)**

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| **Name:** | **Date of Birth:** | **Year Group:** |
| **Name of Setting:** | | **Start date at setting:** |
| **Date of this ISP:** | **Review date for this ISP:** | **ISP Number:** |
| **Long Term Educational Needs:** | | **Health Needs:** |
| **Social Care Needs/Involvement:** | | **CIN/CPP/LAC:** |
| Does the child have an EHC Plan, if so what is the review date? | | Has an EHFSA been completed?  Date: |

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| **Other agencies involved** (Name and Job Title) | | | | | | | | | | | | | | | | | | | |
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| Attainment levels in Prime Areas (emerging E, within W, secure S ) | | | | | | | | | | | | | | | | | | | |
|  | PSED | | | | | | | Communication and Language | | | | | | | Physical | | | | |
| MR | | SC & SA | | MF & B | | | L&A | | U | | | S | | M & H | | H & S C | | |
| Start of academic year/ on entry  Date:  Age in months: |  | |  | |  | | |  | |  | | |  | |  | |  | | |
| Current attainment:  Date:  Age in months: |  | |  | |  | | |  | |  | | |  | |  | |  | | |
| Attainment levels in Specific Areas | | | | | | | | | | | | | | | | | | | |
|  | | Literacy | | Mathematics | | | | | Expressive Arts and Design | | | | | Understanding the World | | | | | |
|  | | R | W | N | | | SSM | | E A & D | | | B I | | P & C | | W | | T | |
| Start of academic year/ on entry  Date:  Age in months: | |  |  |  | | |  | |  | | |  | |  | |  | |  | |
| Current attainment:  Date:  Age in months: | |  |  |  | | |  | |  | | |  | |  | |  | |  | |
| **The pupil’s one page profile must be attached to this form** | | | | | | | | | | | | | | | | | | | |
| **Parent’s views** | | | | | | | **Child/Young Person’s views** | | | | | | | | | | | | |
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| **Additional information:**  *Upcoming appointments, referrals made, significant family events etc.* | | | | | | | | | | | | | | | | | | | |

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| **My Outcomes** | | | | | | |
| 1. **Speech, Language and Communication Needs**   **Aspiration:**  **Desired outcome:** **To be achieved by:** | | | | | | |
| **Short term target**  *I can...* | **Strategies:**  *How will this be achieved? Use the strategies provided to you from outside agencies and note who has given them* | | **Provision**:  *Who is supporting the child for how long each session?* | | **Review of progress towards target**  *Has the target been met? If so, how, if not why not? What needs changing?* | |
|  |  | |  | |  | |
| 1. Cognition and Learning   **Aspiration:**  Desired outcome: To be achieved by: | | | | | | |
| **Short term target:** *I can* | **Strategies:**  *How will this be achieved? Use the strategies provided to you from outside agencies and note who has given them* | | **Provision**:  *Who is supporting the child for how long each session?* | | **Review of progress towards target**  *Has the target been met? If so, how, if not why not? What needs changing?* | |
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| 1. **Social, Emotional and Mental Health**   **Aspiration:**  **Desired outcome: To be achieved by:** | | | | | | |
| **Short term target:** *I can* | **Strategies:**  *How will this be achieved? Use the strategies provided to you from outside agencies and note who has given them* | | **Provision**:  *Who is supporting the child for how long each session?* | | **Review of progress towards target**  *Has the target been met? If so, how, if not why not? What needs changing?* | |
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| 1. **Physical and Sensory**   **Aspiration:**  **Desired outcome: To be achieved by:** | | | | | | |
| **Short term target**  *I can...* | **Strategies:**  *How will this be achieved? Use the strategies provided to you from outside agencies and note who has given them* | | **Provision**:  *Who is supporting the child for how long each session?* | | **Review of progress towards target**  *Has the target been met? If so, how, if not why not? What needs changing?* | |
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| ISP co-produced by: (those present) | | | | | | |
| Signed | | Senco (print name) | | Signed | | Parent/Carer (print name) |
| Date: | | | | | | |