

**Post 16**

**Personal Education Plan**

**2020-21**

[virtualschool@telford.gov.uk](mailto:virtualschool@telford.gov.uk)

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Virtual School Head: Michelle Salter

**Overview**

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| --- | --- | --- | --- |
| **Name:** |  | | |
| **Year Group:** |  | **Date of Birth:** |  |
| **In Education, Employment or Training?** | Education  Employment  Training  NEET\* | **Education, Employment or Training Provider:** |  |
| **SEND:** | EHCP  SEND Support  N/A | **EAL:** | Y  N |
| **Date and time of this meeting:** |  | **Provisional date and time for next meeting:** |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Role** | **Name** | **Invited to meeting** | **Attended Meeting** |
| Designated Teacher |  | Y  N | Y  N |
| Virtual School |  | Y  N | Y  N |
| Social Worker |  | Y  N | Y  N |
| Personal Adviser |  | Y  N | Y  N |
| Foster Carer |  | Y  N | Y  N |
| Young Person |  | Y  N | Y  N |
|  |  | Y  N | Y  N |
|  |  | Y  N | Y  N |

*\*If a young person is NEET, this PEP will be supplemented by a NEET Action Plan.*

**Views and Aspirations**

This section of the plan should be completed by the young person and relevant designated teacher/tutor in advance of the PEP meeting. If the young person is NEET, then it should be completed by the Social Worker or Personal Adviser.

|  |  |
| --- | --- |
| **Current** | |
| **What is going well at the moment?** |  |
| **What changes/improvements could be made? Are there any changes or challenges you are facing now or that you might face soon?** |  |
| **What support is available to you?** **Where can you get Information, Advice and Guidance if you need it?** |  |
| **Future Plans** | |
| **What are your future plans for Education, Employment or Training?** |  |
| **What are your future career aspirations?** |  |
| **Would you like any support to visit or apply for university?** |  |

**Progress and Attainment**

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| --- | --- |
| **Prior Attainment** | |
| **Qualification & Subject** | **Achieved** |
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| **Attendance** | |
| **Current Attendance:** | % |
| **Reasons for absence:** |  |
| **Strategies to improve Attendance:** |  |

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| **Exclusions** | |
| **Any Fixed Term Exclusions?** | Y N |
| **If Yes, give details.** |  |

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| **Current Progress & Attainment** | | | |
| **Qualification & Subject** | **Current Attainment** | **End of Year Target** | **Progress?** |
|  |  |  | Below  At  Above |
|  |  |  | Below  At  Above |
|  |  |  | Below  At  Above |
|  |  |  | Below  At  Above |

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| **Feedback and Discussions** |
| **Attitude to learning** |
|  |
| **Relationships with others** |
|  |
| **Other achievements including extracurricular** |
|  |
| **Other issues or difficulties which impact on learning** |
|  |

**Targets**

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| --- | --- | --- | --- | --- |
| **Review of previous SMART Targets** | | | | |
| **SMART Target** | **Specific actions and interventions planned** | **Who will monitor & by when?** | **Envisaged Outcome** | **Outcome/Progress** |
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| **New SMART Targets** | | | |
| **SMART Target** | **Specific actions and interventions planned** | **Who will monitor & by when?** | **Envisaged Outcome** |
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| **Spring Term Only – Strengths & Difficulties Questionnaire** | | | |
| **SDQ Score:** |  | **Date of SDQ:** |  |
| **Notes (including intervention required if needed):** | | | |
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**Additional Information**

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| **Care Status Information** | | | |
| **Care Status** | S20  ICO  FCO  Care leaver | **Placement** | Foster Care  Shared Lives  Supported  Semi-independent  Other |
| **Notes** | | | |
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| **SEND Information** | | | |
| **SEND Status** | EHCP  SEND Support  N/A | **Primary Need** | Communication & Interaction  Cognition & Learning  SEMH  Sensory and/or Physical Needs |
| **Consulted with provider?** | Y  N | **Annual Review due date:** |  |
| **LA with Financial Responsibility:** |  | **LA holding plan under Belonging Regs:** |  |
| **Notes** | | | |
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| **EAL Information** | | | |
| **EAL** | Y  N | **First Language** |  |
| **Proficiency in reading in First Language** | Unable  Basic  Competent  Fluent | **Proficiency in writing in First Language** | Unable  Basic  Competent  Fluent |
| **Proficiency in English** | New to English  Early acquisition  Developing competence  Competent  Fluent | | |
| **Notes** | | | |
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|  | **Signed** | **Date** |
| **Plan completed by:** |  |  |
| **Social Worker approved:** |  |  |
| **Virtual School approved:** |  |  |