**Individual provision map/Individual education plan (gr2 and above)**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Child’s name:** |  | **DOB:** |  | **Date of plan:** |  |
| **Professionals / agencies involved:** |  | **Graduated Response Level:** | **2 / 3 / 4 / Exceptional** | **Key Person:** |  |

|  |  |
| --- | --- |
| **Observed strengths**  |  |
| **Child's preferred activity** |  |
| **Areas for development** (should be taken from the outside agency report) |  |

**SMART Targets** (refer to SMART target guidance)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Current achievement / baseline** (e.g. Child can….**)** | **SMART Targets** (E.g. Child will….) | **How will this be achieved (i.e. provision)?** | **Resources** | **When/who/where** | **Achieved/outcome** (e.g. Yes / No) |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

**Parent/carer signature: Date: Review date:**