

Child's Care Plan - Additional Educational Needs

A: DETAILS OF CHILD				
Surname:		First Names:		
Known as:		Date of Birth:		
Sex:		Religion:		
Nationality:		First Language:		
B: INDIVIDUAL EDUCATIONAL PLAN				
Care Staff Involved:				
AREA OF NEED: (tick appropriate box)				
	Communication & Interaction	Emotional / Social / Behaviour	Physical Development	Cognitive / Intellectual Development
TARGET(S) TO BE ACHIEVED:				
STRATEGIES & PROVISIONS / RESOURCES REQUIRED TO ACHIEVE TARGETS:				
OUTCOME / SUCCESS CRITERIA:				
EVALUATION & FUTURE ACTION:				
Parent / Carer Involvement:			Child's View:	
Signature of Parent / Carer: _____ Date: _____				