Transition Action Plan - Example

Transition Action plan:	Year ? to Year ?	**Name:**	**********
SEND Code:	SEN support (K) /EHCP (E)/ None (N)	**Focus for Transition Planning:**	SLCN/SEMH/C&L/P&S or Personal/Medical

Area of Need	Professionals involved	Actions needed to support areas of need:	Who by?	By when?	Completed?
Social, Emotional and Mental Health (SEMH) e.g. - EBSA - Demand anxiety - ADHD - dysregulates in school	e.g. CAMHS, COMPASS, ISAT	Designated staff member to check in with	*****	*****	*****
		Enhanced visits to new setting	*****	*****	*****
		Pictures or new setting shared in advance	*****	*****	*****
		Safe space for when dysregulated	*****	*****	*****
		Staff aware of needs in advance	*****	*****	*****
		Update escalation curve	*****	*****	*****
Speech, Language and Communication Need (SLCN) e.g. - difficulty communicating - uses PECS - Makaton	e.g. CAHMS, Speech and language	Staff training for PECS	*****	*****	*****
		Communication board shared with new staff	*****	*****	*****
			*****	*****	*****
			*****	*****	*****
			*****	*****	*****
			*****	*****	*****
Physical and Sensory e.g. - noise sensitive - dislikes physical touch - wheelchair user with postural support equipment	e.g. CAMHS, COMPASS, ISAT	Sensory audit completed for new setting	*****	*****	*****
		Seating at the back of room with view of door	*****	*****	*****
		Safe space in place for them if needed	*****	*****	*****
			*****	*****	*****
			*****	*****	*****
			*****	*****	*****
Cognition and Learning e.g. - SPLD concerns - Dyscalculia concerns - working * years below ARE	e.g. Education Psychologist, Specialist teachers	Reports assessing need shared with new setting	*****	*****	*****
		Overlays for reading in place for start date	*****	*****	*****
		Adaptive technology (laptop) in place	*****	*****	*****
			*****	*****	*****
			*****	*****	*****
			*****	*****	*****

Area of Need	Professionals involved	Actions needed to support areas of need:	Who by?	By when?	Completed?
Personal e.g. - home circumstances - LAC/CIN/CP/Early Help - safeguarding - PEP provision - EBSA	e.g. Social Worker, Family support, Virtual School, Bereavement support	New staff invited to Summer PEP	*****	*****	*****
		Social worker details shared	*****	*****	*****
		Parental contact schedule information shared	*****	*****	*****
		Safeguarding background shared with key staff	*****	*****	*****
			*****	*****	*****
			*****	*****	*****
Medical e.g. - Care plan in place - diagnosed medical condition - related risks like choking - risk assessments - specific staff training (diabetes etc)	e.g. GP, Physiotherapist, Paediatrician	Medical reports/information passed over	*****	*****	*****
		Staff trained to support specific medical needs	*****	*****	*****
		Risk assessments read and implemented in advance of transition	*****	*****	*****
		Diabetes care plan in place and shared with all involved staff	*****	*****	*****
			*****	*****	*****
			*****	*****	*****
Preparation for Adulthood (Employment, Community, Independence & Being Healthy) e.g. - travel anxiety - medication management - healthy lifestyle support - intimate care - financial planning	e.g. Social Worker, Family support worker, OT, Physio, CAMHS, Nurse, Dietician	Watch to be worn to support timings of medicine	*****	*****	*****
		Travel training to be conducted for new setting	*****	*****	*****
		Involvement in sports/exercise clubs at new setting	*****	*****	*****
		Intimate care plan to be discussed and shared with focus on increasing independence where possible	*****	*****	*****
		Signpost for DLA/funding available for travel and to SEND transport team	*****	*****	*****
		Dietician contact details shared	*****	*****	*****
Other e.g. - parent missed meeting - inclusion funding in place at current setting - family in need of further support - one page profile	e.g. SENCO, Family support worker	Current and new SENCO to write Inclusion Funding application together	*****	*****	*****
		Parent voice to be gathered post meeting	*****	*****	*****
		Refer to Early Help	*****	*****	*****
		One page profile/all about me shared with new setting	*****	*****	*****
			*****	*****	*****
			*****	*****	*****

Log of meeting dates (include initial date and any reviews):	**/**/** **/**/** **/**/**	**Shared & agreed by SENCO/Lead professional in new setting:**	(INSERT NAME)
Agreed by Current SENCO:	(INSERT NAME)	**Agreed by Child/Young Person:**	(INSERT NAME)
Agreed by Parent/Carer:	(INSERT NAME)	**Pupil voice activity completed and shared with transition team:**	(Date shared with team)