



All About Me Name of Child DATE SET: Autumn 2016 DATE REVIEWED: Spring 2017 **CLASS TEACHER CLASS: SENCO ASSISTANT SENCO SPEECH THERAPIST PHYSIO** OT SPECIAL NEEDS ASSISTANT **EMERGENCY HEALTH CARE PLAN** MEDICAL INFORMATION **PUPIL PREMIUM IMPORTANT PEOPLE OUTSIDE SCHOOL** HOME LANGUAGE—EAL STATEMENT / EHCP

PHYSICAL & SENSORY NEEDS WHEELCHAIR USER SEATING, POSITION & **POSTURE TRANSFERS INTIMATE CARE SPLINTS & SUPPORTS DRESSING** EATING, DRINKING & **SNACK**

PHYSICAL & SENSORY NEEDS	
GROSS MOTOR SKILLS	
FINE MOTOR SKILLS	
OCCUPATIONAL THERAPY	
PHYSIOTHERAPY	
SENSORY NEEDS	
HEARING & VISION	
SWIMMING	
HORSE RIDING	

COGNITION & LEARNING		
GENERAL ACADEMIC DIFFICULTIES		
SPECIFIC LEARNING DIFFICULTIES		
INDEPENDENCE		
RECORDING USING ICT & OTHER TECHNOLOGY		
DIFFERENTIATION RESOURCES		
BEHAVIOUR ISSUES		

LANGUAGE AND COMMUNICATION	
SPEECH & LANGUAGE	
ABILITY TO EXPRESS NEEDS feelings , hurt, in pain	
RECEPTIVE LANGUAGE understanding	
EXPRESSIVE LANGUAGE expressing	
MAKATON	

EMOTIONAL AND MENTAL HEALTH	
BEHAVIOUR & EMOTION REGULATION	
THINGS THAT CAUSE UPSET / WORRY	
RELATIONSHIPS & FRIENDS	
FAVOURITE THINGS	

OTHER INFORMATION	
SAFETY	
HELP AT HOME	
ADDITIONAL INFORMATION	
ACTION	