

Learning Support Plan

Name of Learner		Date	
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Identification of Needs

Difficulty	Maths		English		Learning Difficulty / Disability		Social	
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(A) Maths and English Difficulties

Relates to learner's difficulties with Maths or English. This will impact on the design of their learning programme and require additional support work. Initial Assessment results will indicate the practical areas of need that will be worked upon.

English assessment result	Entry 1		Entry 2		Entry 3		Level 1		Level 2	
Maths assessment result	Entry 1		Entry 2		Entry 3		Level 1		Level 2	

How the needs above affect the planned programme (including units within their planned qualifications)

What units / elements within the planned qualifications / programme will present particular challenges based on the identified Maths or English need?

<Replace the text here of details of the units within knowledge and competence aims the learner will have particular challenges with based on their assessed levels, i.e. unit X and X where measuring and mixing is required which will result in greater time spent in additional to general explanation of functional skills barriers, i.e. is at entry 3 and requires level 2 functional skill so a significant distance to travel>

(B) Specific Learning Difficulties & Disabilities (Additional Learning Need)

Relates to specific learning difficulties.

Dyslexia		Dyspraxia		Dyscalculia		Autism		Other	
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<insert text here if need identified from initial assessment tools and learner's responses from their application form regarding learning difficulties and disabilities>

(C) Social Needs (Personal and Social Development)

Relates to self-assessment.

Area of need discussed	Tick	Notes from discussion
Learning history		<insert text here if need identified from the self-assessment. This should include the history of the need, the context, the impact on the learner's ability to learn, the impact on potential employment and in employment environment and possible further support necessary. The notes made here should be of reasonable to significant depth. Ensure that you identify any areas the learner wishes to remain confidential and record them as such>
Home environment and support for learning		
Emotions and feelings		
Social factors		
Work readiness skills		
Are there any social support services currently offered by a third party?		
Details		

Identification section completed by	Name	Date	
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Trainer contact details - for the learner use

Work Number		Email Address	
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How would the learner like to be contacted?

Daytime		Evening		At work only		At DTA only	
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Support to be provided as a result of needs identified by Business Support Team

General activities to address barriers to learning

Specialist Maths or English support to be provided in workplace or classroom (if low levels)		Ongoing mentor support for Personal and Social Development (PSD)	
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Frequency of Support

Monthly Maths or English support visits in workplace or classroom		Monthly contact from Business Support Team for PSD	
Bi-Monthly Maths or English support visits		Frequent (more than one monthly) contact from Business Support Team for PSD	
Additional Maths or English support visits frequency to be flexible (see additional notes below)		Six monthly support review	x
		Three monthly support review	
		Monthly support review	
Loan or grant of additional equipment		Details of additional or replacement materials provided:	

Additional activities or adjustments planned by Business Support Team and further details including location of support, set times, dates if not reported elsewhere

In class or DTA resources to be provided

Additional days in training centre – weekly day release		Additional days in centre - attendance at training centre for Learning Support workshop	
In class teaching assistant to be provided		Weekly one to one private discussion at training centre	
Intentional small class size		Educational seminars	
Additional guided learning on English skills		Additional guided learning on Maths skills	

Details including seminars planned, location of support, times, dates

General activities to be provided by DTA

Additional visits to the workplace		Shorter but more frequent visits due to learning need	
Increased length of programme		Has programme length been amended?	y/n
Increased marking and assessment time due to learning needs		Additional guided learning hours on course	
Amended frequency of assessment or reviews		Adjustments planned e.g. coloured paper for dyslexia	
Additional or revised teaching resources			

Additional Activities or adjustments planned and further details including location of support, times, dates

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Exam adjustments that will be necessary (Based on Maths / English Need)

Reader		Note taker	
Additional time for exams		Other:	
Other:		Other:	

Details

Additional activities to be provided by third parties (Based on Social Needs)

Personal counselling		Learning Support Assistant (in class)	
Speech Therapist		Communication Support Worker (Braille)	
Physiotherapist		Social Worker	
Personal Care Assistant		Other	

Details including contact info and location

Confirmation of the Learning Support Plan

I am satisfied the adjustments made to the learner's programme are required and deemed reasonable in order to address their barriers to learning. Without the support above it is thought the learner would be unlikely to achieve or would face significant difficulties (Additional Support Funding will be claimed) .	
I am satisfied that though there is a support need it is not deemed significant and will not be a barrier to learning and achievement (No Additional Support Funding will be claimed) .	

Name of staff		Signature	
MIS Informed of Claim	Trainer supplied with Learning Support Plan	First Contact planned for:	

Learner's confirmation of the Learning Support Plan

I am satisfied the adjustments made to my programme are required and deemed reasonable in order to address my barriers to learning.		
Learner Signature		Date

Learning Support Plan

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Support contact log			
Date of this contact			
Staff's comments			
Confirm any amendments made to the Learning Support Plan			
Date of this contact			
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Support Review (to be conducted at least every six months)

Date of this review		
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Staff's comments on the effectiveness of the support

Learner's comments on the effectiveness of the support

Employer's comments on the effectiveness of the support

Confirm any amendments made to the Learning Support Plan

Review Confirmation

I am satisfied the adjustments made to the learner's programme are still required and deemed reasonable in order to address their barriers to learning. Without the support above it is thought the learner would be unlikely to achieve or would face significant difficulties (Additional Support Funding will be claimed).	
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I am satisfied that the support arrangements are no longer required (No Additional Support Funding will be claimed).	
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Name of staff		Signature	
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Learner Signature		Date	
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Office Use

MIS informed of claim end (if support no longer required)		Trainer supplied with copy of review		Review updated to file	
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