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| Education Supports for Children in Care |
| Education re-engagement plan |
| OFFICIAL |

ESCC program workers must complete this form for all clients of the Education Support for Children in Care Program. It may be informed by the Progressive Achievements Task. This is a diagnostic tool schools use to assess literacy and numeracy levels. Please retain for possible audit.

# Part 1: About you

## Young person’s information

| Information required | Details |
| --- | --- |
| Name of young person: |       |
| Date of birth: |       |
| Gender: |       |
| Address: |       |
| Phone: |       |
| Aboriginal /Torres Strait Islander: |       |
| Ethnic/cultural background: |       |
| Language spoken: |       |
| Interpreter required: |       |
| Carer(s) name(s) and number(s) |       |

## School information

| Information required | Details |
| --- | --- |
| School year: |       |
| School name: |       |

## School contacts

| School contact | Name | Role | Email | Phone |
| --- | --- | --- | --- | --- |
| School contact 1 |       |       |       |       |
| School contact 2 |       |       |       |       |

## Support services

| Care type | Care agency | Case manager | Phone | Email | Referred by |
| --- | --- | --- | --- | --- | --- |
|       |       |       |       |       |       |
|       |       |       |       |       |       |

## Support needs

| Information required | Support needs |
| --- | --- |
| Communication /literacy notes |       |
| Strategies for managing emotions |       |

# Part 2: Information gathering and assessment

| Information required | Assessment |
| --- | --- |
| **Strengths:**Useful tools/supports for re-engagement. Services, supportive relationships, school opportunities, recreation, interests |       |
| **Possible barriers:**Issues/challenges that may impact on school engagement. Emotional, social and Educational needs, AoD, ID, physical and mental health, conflict, school, home, trauma, racism at school, school moves. |       |
| **Analysis:**What are the key areas requiring support/assistance to reduce barriers? How are these factors impacting on school re-engagement/sustainability? How can the strengths be utilised in the young person’s re-engagement into school? |       |
| **Suggestions:**What has/hasn’t worked? What needs consideration? What actions will occur to work towards school re-engagement? |       |

# Part 3: Re-engagement plan goals

|  | **Date** | **Goal** | **Strategies** | **Person responsible** | **Timeline** | **Review** | **Outcomes** |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  |       |       |       |       |       |       |       |
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# Part 4: Endorsement

| Required information | Details |
| --- | --- |
| ESCC teacher:(name, signature, date) |       |
| ESCC teacher contact information(phone, email) |       |
| Case manager endorsement that the plan is aligned with the case plan:(name, signature, date) |       |
| Case manager contact details(phone, email) |       |
| Copy provided to child or young person, SSG and care team (yes, no) |       |

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