

ACTION PLANNING FORM



Name of Child/Young Person:

Date:

Consistent response to behaviour - what we will all say.

Have we identified any triggers that cause the behaviour? Are there any patterns? What are we doing about this?

Learning for child/young person (e.g Relationships Sexual Health & Parenthood Education - Which topics? Which resource? (e.g. www.rshp.scot). Delivered in class, group and/or individually - by which teacher(s)? Other learning?

Other measures in school (monitoring, safety planning, nurture group, aspects highlighted by Young Person Checklist/GIRFEC etc).

Measures at home (consistent response, replicated learning, rewards, consequences).