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| **Date of Meeting:** |  | **Location:** |  |

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| **Enter the name of the pupil (or pupils if siblings are entering Fast Track together)** |
| **Name of pupil:** |  | **School:** |  |
| **Date of Birth:** |  | **Year Group:** |  |
|  |
| **Name of pupil:** |  | **School:** |  |
| **Date of Birth:** |  | **Year Group:** |  |

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| **Invitees Name:** | **DOB: (parents)** | **Role & Organisation:** | **Attended? (Y/N)**  | **Apologies given? (Y/N)** |
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| **Family Information:** Full details of all other parents and siblings should be requested where this information is NOT known. |
| **Parent(s):** |
| **Name:** |  | **Name:** |  |
| **DoB:** |  | **DoB:** |  |
| **Address:** |  | **Address:** |  |

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| **As parent(s) you have a responsibility in law to ensure your child’s regular attendance at school, you should be aware that the only defences available in law are:**1. **That the absences are with leave (i.e. that they have been agreed by the Headteacher);**
2. **That the absences are because of sickness or unavoidable cause;**
3. **That the absences fall on days of religious observance for the religion to which parents belong;**
4. **That the child is entitled to free transport to school and the LEA have failed to provide this;**
5. **That the child has no fixed abode, and the parent proves—**

**(a) that he is engaged in a trade or business of such a nature as to require him to travel from place to place,****(b) that the child has attended at a school as a registered pupil as regularly as the nature of that trade or business permits, and****(c) if the child has attained the age of six, that he has made at least 200 attendances during the period of 12 months ending with the date on which the proceedings were instituted.****If absences do not fall into any of these categories or the school have not been informed of reasons for absence, absences will be marked as unauthorised.** **Education Supervision Order (ESO)****We need to make you aware that, before instituting legal proceedings for an offence under s443/444 Education Act 1996, the LA has a duty to consider whether it would be appropriate to apply for an ESO; an application could be instead of or in addition to a prosecution.**  |

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| **WHY ARE WE HERE? SCHOOL INTERVENTIONS/SUPPORT PROVIDED TO DATE:**In this section, you should discuss: the child’s attendance to date providing and attaching a copy of the herringbone, impact in terms of academic progress, social development, behaviour, and emotional well-being as well as potential impact on outcomes for the child in all areas if low attendance continues. Ensure school support to date (both academic and pastoral) is noted including any EHAPs, support panels, and previous legal interventions (FPNs and Fast Track Prosecutions) if applicable. A log of phone calls/letters sent home to parent should also be **attached***.* |
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| **WHAT’S WORKING WELL?** (Identify and record pupil strengths that can be built upon to secure improved school attendance and the actions undertaken by parents to address the issue)  | **WHAT ARE WE WORRIED ABOUT?** (Identify and record the reasons for poor school attendance including barriers to improving the situation e.g. home issues, school issues, relationships, friendship groups, all relevant safeguarding concerns and the impact of absence on the child’s attainment and progress) |
| **Parent(s)**: | **Parent(s):** |
| **Child (*complete and attach wishes and feelings*):** | **Child (*complete and attach wishes and feelings*):** |
| **School:** | **School:** |
| **Other (professional or family member):**  | **Other (professional or family member):**  |

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| **FAMILY NETWORKING:** |
| **Are there friends and family who can support the family?** | Yes / No |
| **Does Family Group Conferencing need to be explored further?****(Contact** **FNA@norfolk.gov.uk** **for support and guidance)** | Yes / No | If yes, add to action plan below. |
| **Comments:** |  |

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| **WHAT NEEDS TO HAPPEN?** Actions should be SMART (Specific, Measurable, Achievable, Realistic and Timely) Ensure actions support the family and child and note all support and actions on-going and new. |
| **Actions to be taken:**  | **By When:** | **Person(s) responsible:**  | **How will we know it is working? (Child focused)** |
| 1. |  |  |  |  |
| 2. |  |  |  |  |
| 3. |  |  |  |  |
| 4. |  |  |  |  |
| 5. |  |  |  |  |
| 6. |  |  |  |  |

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| **OTHER KEY ISSUES DISCUSSED: (Please ensure you record any other issues/key points not captured above)** |
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| **Review Meeting Date (within 4-6 Weeks):** |  |
| **Time:**  |  |
| **Venue:** |  |

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| **The undersigned confirm that this is an accurate record of the discussions and outcomes agreed within the meeting. If a prosecution were to be brought by the Local Authority under Section 444 Education Act 1996 these minutes may be used as evidence.**  |
| **School Representative(s):** |
| **Name:** |  | **Date:** |  | **Signature:** |  |
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| **Name:** |  | **Date:** |  | **Signature:** |  |
| **Other Professional(s) (i.e., Social Worker, Family Practitioner, Medical Professional, etc.):** |
| **Name:** |  | **Date:** |  | **Signature:** |  |
| **Parents(s):** |
| **Please delete as applicable:**1. I agree with the content of these minutes and the plan. I have been made aware that I may be prosecuted for my child’s non-attendance at school if they do not attain 100% attendance for the review period.
2. I do not agree with the content of the Attendance Agreement for the following reasons:
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|  |
| **Name:** |  | **Date:** |  | **Signature:** |  |
| **Please delete as applicable:**1. I agree with the content of these minutes and the plan. I have been made aware that I may be prosecuted for my child’s non-attendance at school if they do not attain 100% attendance for the review period.
2. I do not agree with the content of the Attendance Agreement for the following reasons:
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| **Name:** |  | **Date:** |  | **Signature:** |  |
| **Child or Children (this section is voluntary for the child to complete):** |
| **Please delete as applicable:**1. I am happy with this plan.
2. I am not happy with this plan because:
 |
|  |  |  |
|  |
| **Name:** |  | **Date:** |  | **Signature:** |  |
| **Please delete as applicable:**1. I am happy with this plan.
2. I am not happy with this plan because:
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| **Name:** |  | **Date:** |  | **Signature:** |  |