**Reintegration Meeting**

|  |  |  |
| --- | --- | --- |
| **Date of reintegration meeting:** | | |
| **Present at meeting:** | | |
| **Pupil details** | | |
| **Name:** | **Year group:** | **Needs:**  *e.g. Pupil Premium, CiC, CiN, SEND, EHCP* |
| **Support around the pupil:**  *e.g. EHAP, NDS team, OT, etc* | **Previous suspensions:** | **Current attendance:** |

|  |  |  |
| --- | --- | --- |
| **Suspension details** | | |
| **Date of suspension:** | **Date of return to school:** | **Number of days suspended:** |
| **Reason for suspension** *A brief summary of behaviour which led to the suspension and reference to the rule/policy. Include detail about the impact on others****.*** | | |
| **What have we learnt from this and what can we change?** *This needs to take account of what happened, what should have happened and the impact on others. It is an opportunity to identify triggers/hotspots so changes can be made to prevent similar behaviours reoccurring.* | | |
| **Previous suspensions** | | |
| **Details of any previous suspensions:** | | |
| **Total number of days suspended this term:** | | |

|  |
| --- |
| **Provision during suspension:** *(Include details of any work provided and marked over suspension period, alternative provision and/or interventions from counselling or behaviour services, SEND support or local safeguarding partners)* |
|  |

**Understanding needs and strengths**

*Ask the pupil what they want to get out of the reintegration process and agree on this together. Ask questions to establish whether there's an unmet need that your school can offer support for (Roots and Fruits tool can be useful here). For example: What makes you worry in school/at home? How do you feel about the support you're receiving? Who do you talk to when you're feeling upset or angry? What support did you find helpful when you were away from school? Pupil view can be collected outside of this meeting if more appropriate then incorporated into the plan.*

|  |
| --- |
| **What is going well at school?** |
| *What strengths and interests does the pupil have? What works – examples of success? What motivates – at home and at school?* |
| **What is not working well at school?** |
|  |
| **Needs** |
| *What needs / factors are impacting behaviours at school?* |
| **Hopes for the future at school** |
|  |

**Planning for success**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Targets** *Refer to previous targets if previous suspensions have occurred.* | | | | |
| **Area of concern** | **SMART target** | **Support and strategies to meet target** | **Review date** | **Evaluation of target** |
| 1) |  | **School will help me by…**  **My family will help me by…**  **I will help myself by…** |  |  |
| 2) |  | **School will help me by…**  **My family will help me by…**  **I will help myself by…** |  |  |
| 3) |  | **School will help me by…**  **My family will help me by…**  **I will help myself by…** |  |  |

|  |
| --- |
| **Monitoring** |
| *How will behaviour and progress be monitored and celebrated?*  **Date(s) of next review meeting:** |
| Is the pupil on a reduced timetable? Y / N *(add details)*  *(If yes, reintegration plan should be completed)* |

|  |  |
| --- | --- |
| **Further actions** | |
| Have the family been signposted to support if necessary?  Y / N *(add details)* | Have any safeguarding concerns been raised that require follow up actions?  Y / N *(add details)* |

|  |  |  |
| --- | --- | --- |
| **Additional comments** | | |
| **Pupil:**  **Signed:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | **Family:**  **Signed:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | **School:**  **Signed:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |