

Record of Annual Review of EHCP Meeting

Including school contribution

Complete all Sections in full

Name			
Date of Birth		Current Year Group	
Ethnicity		Chronological Yr if different	
Gender			
Address			
Home contact number			
Primary/Secondary Need			
Date of Review Meeting		Date of last review (Annual or Conversion)	
Reason for review	11-12 months since the Final EHCP/last review		
	For emergency reasons as needs have changed		
Current School			

Unique Pupil Number	
Name of Social worker (where applicable)	

Is this child/young person Looked After?	
Full Care Order, Interim Care Order, Section 20 or other	

Name of Parents/Carers Who has parental preference?	
Address/Contact Number (if different from above)	

Date last EHCP issued <i>(Paperwork <u>MUST</u> include the last Final EHCP as evidence that the correct document was reviewed)</i>	
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1. Views, Interests and Aspirations

Add in Bullet Points:

What is the child's view of their progress, interests and their aspirations

- What people **like and admire** about X - positive qualities, strengths, personal achievements and talents
- What is **important to X** - important people in X's life (including pets), friendships, important routines, favourite and least favourite activities/ lessons and things to be avoided that are important to X
- **How best to support/ what is helpful** to X and **what is not** at home, at the educational setting and in the wider community
- X's preferred hobbies and leisure activities at the educational setting, at home and in the wider community
- X's **short term aspirations**
- X's **long-term aspirations** including paid employment/ purposeful activity, independent living and community participation

What are the parent's views of the child's progress, interests and their aspirations:

The family's views:

- X's current needs and levels of independence at home and in the community.
- Family's beliefs about X's positive qualities, strengths, personal achievements and talents
- Summary of what is important to and how best to support X
- **What is going well** for X and the family and **what is not**

The family's aspirations for X's future

- Short term aspirations for X
- Long term aspirations for X including paid employment/ purposeful activity, independent living, health, well-being and community participation

2. Progress towards achieving the outcomes specified in the EHCP.

Please specifically comment on the child's rate of progress (i.e. progress over time)

NOTE: The outcomes on the EHCP were intended to cover a 2 to 3 year period and **should not** be changed unless there are significant reasons to do so e.g. a change of placement is needed in order to support the child's progress towards the outcomes.

Section E	Data – learning behaviours, academic progress, what he/ she can do now that they couldn't do before
Outcome (1) Copy & Paste from Section E in the Statutory EHC Plan	Progress: Add in <u>specific summative data</u> as evidence. <ul style="list-style-type: none">• Educational Setting's view• C/YP's view• Family view• Professionals' view
Outcome (2)	Progress:
Outcome (3)	Progress:
Outcome (4)	Progress:

Short term outcomes will be set and agreed through target planning between school, parents/carers, LA professionals and the child.

Summative comment on progress:

Refer to **Section B** in the EHC Plan (Strengths & SEN) and gather feedback from all stakeholders present. Use bullet points:

What has worked well in terms of provision and why?

What has not worked well and why?

Copy & paste/ use Snipping Tool to add in **Attendance Data** from SIMS etc.

Copy & Paste in / use Snipping Tool to add in **Summary Behaviour Data** (where relevant)

3. Summary of actions from Annual Review

Add in headings from everyone who is contributing (all professionals, family members and the child/ young person):

- Agreed next steps (what)
- By whom
- By when

If you **are not recommending changes** to the EHCP please:

- Agree in the review the **short** term outcomes for the next year, strategies to achieve them and attach to this document. (See below)
- Ensure that the C/YP's views and that of their parents is filled in under "Views, Interests and Aspirations"
- Then proceed to Section 8

4. Suggested changes to the EHCP wording

Note: Any requested changes to be made to the EHCP must be carried out on the **latest version of the EHCP** using **Bold** for suggested wording changes and ~~Strike through~~ function for suggested deletions.

Please attach reports from professionals who support the child and young person level of need and support any suggested changes. Minor changes may not result in an amended EHCP.

Please use the boxes below to record any conversations held during the meeting.

Any significant changes in circumstances:

- Please provide a summary of any changes in the child's family situation and educational history
- Summarise any changes of involvement with services providing advice for the child.

Use Bullet Points

Summary of child/young person's strengths and Special Educational Needs.

See Section B in the final Statutory EHC Plan – make any changes to the Word document using **Bold** for suggested **wording changes** and ~~Strike through~~ function for **suggested deletions**.

Make sure this does not include a description of Standard Inclusive Practice/ Quality First Teaching

Make sure each special educational need is articulated separately so you can easily check that there is provision to meet each need in Sections F, G & H.

Write 'see amended working document pages x-x'

Health needs which relate to Special Educational Needs

Please comment on any health needs that relate to the child's SEN: (this should be information provided by a health professional)

Make sure this does not include a description of Standard Inclusive Practice/ Quality First Teaching Bullet points – from GP, CAMHS, SALT, Paeds, OT, Physio, School Nurse, Sensory Support Service that goes into **Section F** because it is provision that **educates or trains**

Any Health needs which DO NOT relate directly to Special Educational Needs

Please comment on any health needs the child may have that do not relate to their SEN e.g. diabetes (this should be information provided by a health professional):

Summarise all health needs gathered from all professionals in **Section G**.

E.g. Diabetes, Epilepsy, hearing loss that is moderate in both ears at mid to low frequencies and profound in both ears at high frequencies, Asthma etc.

- Make sure these are not educational needs arising from health issues
- Add in any relevant detail reported by the health professionals in relation to the health need identified and agreed monitoring arrangements.
- *E.g. X's Asthma presents as more significant in winter months when she typically experiences two attacks per month. She is also more vulnerable to chest infections at this time of year.*

Social Care needs which relate to Special Educational Needs

Please comment on any changes to the Social Care needs that relate to the child's SEN: e.g. Visual impairment requiring rehabilitation training (this should be information provided by a social care professional).

- Summarise all social care needs gathered from all professionals – e.g. SAF, CIN, CP Plan, PEP

Inclusion of this information MUST be with the consent of the young person/family/ primary carer/ legal guardian

- Make sure these are not educational needs arising from social care issues
- Make sure this does not include a description of Standard Inclusive Practice/ Quality First Teaching

Bullet points – from Educational Setting, Social Care, Sensory Support Service that goes into **Section F** because it is provision that **educates or trains**

- *E.g. X's behaviour at home arising from his learning difficulties and autism mean that there are times when his personal safety and that of his sibling can be at risk.*

Any Social care needs which DO NOT relate directly to Special Educational Needs

Please comment on any changes to the social care needs the child may have that do not relate to their SEN e.g. family pressures that require respite care (*this should be information provided by a social care professional*).

Summarise all social care needs gathered from all professionals in **Sections H1 & H2**. (Any Social Care Provision which must be made for a child/young person under 18 resulting from section 2 of the Chronically Sick & Disabled Persons Act 1970)

E.g.

- X will receive 2x over-night residential respite care/ short breaks per month at The Bush funded by Personal Social Care Budget
- X will receive two hours per day help at home from a personal assistant to support feeding and dressing/ undressing. This time will be split across the morning and afternoon and will be available seven days a week.

5. Suggested changes to Outcomes.

This section should only be completed during a Key Stage Transfer, when Outcomes have been achieved or if there is a significant change in need.

See Section E: Where appropriate, outcomes should be joined across education, health and social care.

Do not include any provision in this section! Provision helps the child/ young person achieve an outcome: it is not an outcome in itself. Outcomes must link to future aspirations detailed in **Section A**.

These must be specific & measurable. What exactly is it everyone wants the child or young person to be able to do in 3-4 years' time? These are set by contributing professionals, not written by SEN/ PfA caseworkers.

Please provide reasons and evidence (where possible supported by professionals)

Communication and Interaction

-

Cognition and Learning

-

Social, Emotional and Mental Health

-

Sensory and/or Physical

-

6. Suggested changes to Provision.

Provision refers to programmes or support that needs to be put in place to help the child make progress towards the outcomes. **Note:** Health or social care provision which educates or trains a child must be treated as special educational provision and added to Section F.

Check carefully that provision reflects whether a child/ young person is in **Mainstream** or **Specialist Provision**, that it is **age appropriate** and **specified/ quantified (what, when, how frequently** (building in flexibility and graduated reduction in hours of individual support to increase independence), **how long for, delivered by who** and **for what reason/ why**).

There must be **at least one listed provision for each identified special educational need**.

Communication and Interaction

Changes to Special Educational Provision. Please provide reasons and evidence (where possible supported by professionals)

Use bullet points: All provision must be specified and quantified – evidence based provision/ strategy/ resource/ what, when, how frequently, delivered by whom and why.

Add in 'See X's report dated DD/MM/YY' for evidence

Cognition and Learning

Changes to Special Educational Provision. Please provide reasons and evidence (where possible supported by professionals)

Use bullet points: All provision must be specified and quantified – evidence based provision/ strategy/ resource/ what, when, how frequently, delivered by whom and why.

Add in 'See X's professional report dated DD/MM/YY' for evidence

Social, Emotional and Mental Health

Changes to Special Educational Provision. Please provide reasons and evidence (where possible supported by professionals)

Use bullet points: All provision must be specified and quantified – evidence based provision/ strategy/ resource/ what, when, how frequently, delivered by whom and why.

Add in 'See X's professional report dated DD/MM/YY' for evidence

Sensory and/or Physical

Changes to Special Educational Provision. Please provide reasons and evidence (where possible supported by professionals)

Use bullet points: All provision must be specified and quantified – evidence based provision/ strategy/ resource/ what, when, how frequently, delivered by whom and why.

Add in 'See X's professional report dated DD/MM/YY' for evidence

Summary of final recommendations and actions from Annual Review

Use bullet points: Who is going to do what, why and by when? Make sure all contributors' agreed actions are listed here.

7. Assessments

National Curriculum Assessment								
Please complete fully (include last year's levels)								
	FS	Y1	Y2	Y3	Y4	Y5	Y6	Evaluate progress
English								On entry data: Summative data to date: Summative comment
Speaking / Listening								On entry data: Summative data to date: Summative comment
Reading								On entry data: Summative data to date: Summative comment
Writing								On entry data: Summative data to date: Summative comment
Overall Subject level								On entry data: Summative data to date: Summative comment
Mathematics								On entry data: Summative data to date: Summative comment
Science								On entry data: Summative data to date: Summative comment
Standardised test results and/or Entry Assessment								
Date of Test	Name of Test/Assessment			Results		Administered by (name and role)		

National Curriculum Assessment								
Please complete fully (include last year's levels)								
	Y7	Y8	Y9	Y10	Y11	Y12	Y13	Evaluate progress
English								On entry data: Summative data to date: Summative comment
Speaking / Listening								On entry data: Summative data to date: Summative comment
Reading								On entry data: Summative data to date: Summative comment
Writing								On entry data: Summative data to date: Summative comment
Overall Subject level								On entry data: Summative data to date: Summative comment
Mathematics								On entry data: Summative data to date: Summative comment
Science								On entry data: Summative data to date: Summative comment
Standardised test results and/or Entry Assessment								
Date of Test	Name of Test/Assessment					Results	Administered by (name and role)	

Post 16 Only:

Predicted or achieved grades/qualifications results or relevant accreditation
<ul style="list-style-type: none">•

Predicted or achieved Foundation or level 1/2 course
<ul style="list-style-type: none">•

Other accreditation, assessments or achievements
<ul style="list-style-type: none">•

8. Short term outcomes have been agreed for the next year and are attached to this review. Yes/No

Add in a table here:

Long term outcomes (Lift all existing Outcomes from Section E)	Agreed short term outcomes for the next 12 months Agreed between the young person/ family/ legal guardian, involved professionals and educational setting (where relevant). What outcomes are to be achieved by the next Annual Review in 12 months' time?
Outcome (1)	These need to be the small stepping stones that will enable progress towards the long term outcome.
Outcome (2)	
Outcome (3)	
Outcome (4)	

Etc.

9. Advice & Information - Contributors to the EHCP Annual Review Meeting/Process

Name	Position	Contact details (address/telephone/email)	Report Attached Y/N (inc date)	Attendance at meeting Y/N
First name Surname	Role	Email address	DD/MM/YYYY	Yes/ No

10. Placement

Current school placement remains appropriate	Yes (Delete as applicable)	No (please state type of school requested) Add in if applicable
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11. Transition

Transition plan

Following the completion of their course, what is the young person moving on to i.e. Employment, Apprenticeship, HE or other Educational placement. Outline their future plans and what are the next steps/actions required to ensure the young person can successful transition to their next destination?

NB what transitional arrangements need to be agreed, does the young person travel independently, if moving on to HE are they independent learners and if applicable have applied for study support etc.

Ensure what, who, and by when have been agreed

Signature on behalf of the school	Add in electronic signature
Name:	First name Surname
Date:	DD/MM/YYYY (Date of actual AR meeting, not the date you submitted the paperwork)

Outcomes of the Annual Review - to be completed AT END of the review meeting		
PLEASE ENSURE THIS TABLE IS COMPLETED FULLY AND CLEARLY		
For pupils with Statements of SEN / EHCP:		
1	Pupil's EHCP needs amending – please attach a copy of current plan with the proposed wording changes included.	YES / NO
2	Recommendation for a pupil to transfer to another school	YES / NO
3	The plan should cease	YES / NO
For pupils with NO Statement of SEN or NO Education Health Care Plan (EHCP):		
4	An EHCP is requested:	YES / NO
	Please indicate reason:	
	a) Specialist provision may be requested to meet pupil's needs	YES / NO
	b) Parent/Carer request	YES / NO
	c) Please state any other reason:	
For all pupils:		
5	a) Request to be made to Top Up Panel for Top Up funding	YES / NO
	b) Request to be made to Top Up Panel for continuation of current Top Up	YES / NO
6	Date of Top Up Panel to which school is applying? (must be within 12 months of AR date) – Please complete Section D – application for NFF funding	MAY / NOV

Head teacher's Signature: Add in electronic signature **Date:** DD/MM/YY

Parent/Carer signature: Add in electronic signature **Date:** DD/MM/YY

The following checklist MUST be completed and relevant documents attached as appropriate:			
Attendance print out	See AR Section 2	Any other reports, as appropriate:	
Pupil contribution	See AR Section 1	EP report	Attach
Parent/Carer contribution	See AR Section 1	Bristol Autism Team	Attach
Costed Individual Provision Map/Plan	Attach	Early Years report	Attach
Costed School Provision Map/Plan	Attach	Medical Report	Attach
IEP		S<	Attach
		Physio	Attach
Y9 Transition report or equivalent		OT	Attach
LPW 139'A'	N/A	CAMHS	Attach
		Sensory Support Service	Attach
Social Care report	Attach	Other including Independent (Parentally instructed) professional reports	Attach
Is Pupil a CHILD IN CARE?	Yes/ No		
For CIC – latest ECLAS/PEP	Attach		