

Annual Review Meeting Young People's Feedback Form

Information for Schools and Colleges:

- 1) This feedback form is for young people to complete to share their views about their Annual Review Meeting. There is also an online version of this form (see no.5)
- 2) This feedback form should be completed after each formal review meeting and will be submitted to the SEND Team as part of the Annual Review documentation. The form should be completed as soon after the Annual Review Meeting as possible.
- 3) The feedback form should contain the young person's views only.
- 4) Where possible, the young person should complete the form independently. Some young people will need support in order to complete the form. This could include support with reading, scribing, altering the language or adapting the form to make it more accessible. Please ensure the box at the end of the form is completed to explain what support was given and by whom.
- 5) The online survey can be accessed here: <u>https://surveys.achievingforchildren.org.uk/s/YPfeedback3/</u> or by scanning the code below using a smartphone camera:





Annual Review Meeting Feedback Form





My Annual Review Meeting



Important Information

 vas not completed please provide information as to why this was: if you were unable to obtain feedback from the child/young person)			
My name (optional):			
My school, college or setting:			
<i>I live in:</i> (please circle)			
Kingston Richmond			
I went to my Annual Review Meeting (please circle)			
✓ ×			
True False			



Before the Meeting

Please circle a symbol to show us how true each statement is for you.

	I was given information about my meeting				
		~	×		
	True	Sort of	False		
	Someone helped me prepare for my meeting				
	1	~	×		
SHE	True	Sort of	False		
	I have looked at my Education, Health and Care Plan				
1	1	~	*		
EHCP	True	Sort of	False		
	I know what I am working towards (my targets)				
	1	~	22		
/ - \	True	Sort of	False		



At the Meeting

Please circle a symbol to show us how true each statement is for you.

	I was asked to give my views at my meeting				
	✓	\sim	×		
, , -	True	Sort of	False		
	My views were listened to and taken seriously				
(P)	✓	~	×		
	True	Sort of	False		
	My Education, Health and Care Plan will help me achieve				
	my goals				
	✓	\sim	×		
	True	Sort of	False		
	If there is something else you would like support with to help you reach your goals, please tell us here:				
	My Annual Review Meeting was helpful				
	True	Sort of	F alse		
	Tue	Sort Oj	ו עושב		



About this form





Thank you very much for completing this form!

If you would like to talk to someone about this form, please contact:

Grace Over, Participation Officer



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