

**PREPARING FOR YOUR
TRANSFER REVIEW FROM A
STATEMENT TO AN
EDUCATION, HEALTH AND
CARE PLAN**

Place your photograph
here

My Name is _____

Contents

In this booklet you can record useful information that will help us and you prepare for your review.

You may want to ask a parent, family member, teacher or friend to help you fill in the information. At the bottom of each page you can write the name of the people who helped you fill it in. You can write, draw or include photographs for your answers and if you need to you can add extra pages.

There is also section (page 12) for the views of your parents/carers.

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Important people in my life



Special Educational
Needs & Disability

Please put the names or pictures of important people in the relevant spaces provided, continued on page 3.

Family

Friends

_____ helped me fill in this page.

Important people in my life



Special Educational
Needs & Disability

Please put the names or pictures of important people in the relevant spaces provided, continued from page 2.

School Staff and Paid Support

Others

_____ helped me fill in this page.

What people like and admire about me



Special Educational
Needs & Disability

In this section you may wish to write, make or list or drawings to show what people like say they like and admire about you in the box below:

_____ helped me fill in this page.



What I like to do

In this section you may wish to write, make or list or drawings to show what you like to do in the box below:

At
home

With
friends

At
school

_____ helped me fill in this page.



Things that I like and dislike

Below are some boxes for you to fill in to show your likes and dislikes – you could write, draw a picture or add a photo. Some ideas include food/drink, music, TV programmes, hobbies etc.

Things that I like

Things that I dislike

_____ helped me fill in this page.

Important to/ Important for



Special Educational
Needs & Disability

Important to me

Use this section to list what is **important to you** (what makes you happy and content on a day-to-day basis e.g. 'waking up and going to bed at the same time every day' or 'listening to my favourite CD')

Important for me

Use this section to list what is **important for you** (what you need to do to be healthy and safe e.g. 'taking daily medication' or 'help crossing the busy road to and from school')

_____ helped me fill in this page.



Looking to the future

This may relate to the immediate future or a few years on and may include anything from simply being happy, meeting new people to getting a job or being more independent. You do not have to fill in every box.

Education, Training and Employment

Health

Friends, Relationships & Community

Independence and Housing



How I communicate

You may not have any communication issues, if this is the case please leave this section blank.

What I do when I'm...

Happy

**Sad,
upset
or
in pain**

**Angry
or
frustrated**

_____ helped me fill in this page.

What is the best way to support me?



Special Educational
Needs & Disability

Here you can write about what is working for you (this can include services that you use or support you and information that you access).

_____ helped me fill in this page.



What issues need resolving?

Here you can list any aspects of services or support that may not be working for you or specific issues that you feel need resolving.

Questions that I want to ask

_____ helped me fill in this page.

Views of _____'s Parents/Carers



Special Educational
Needs & Disability

Please tell us about the past year for you as a family in relation to your child:

What would you like your child to achieve in the next year?

**Bath & North East
Somerset Council**



**Bath and North East Somerset
Clinical Commissioning Group**