



Annual Review of an EHCP

Date of Annual Review Meeting:

Time:

School should fill in as much as possible and send out to the parents and the Local Authority two weeks prior to the Annual Review meeting.

| Section 1 – personal details, child/young person’s views and parent/carer views | | |
|--|--------------------|----------------|
| Child/Young Person Details | | |
| Name: | Gender: | Date of Birth: |
| Home Language: | Ethnicity: | Religion: |
| UPN: | | |
| Address: | | |
| Postcode: | | |
| Primary Area of SEN: | | |
| Communication and Interaction <input type="checkbox"/> | | |
| Cognition and Learning <input type="checkbox"/> | | |
| Social, Emotional and Mental Health <input type="checkbox"/> | | |
| Sensory or Physical <input type="checkbox"/> | | |
| Is the Child/Young Person a Child in Care? Yes/No | | |
| If yes, which Authority is the child/young person in care to? | | |
| Name of Social Worker: | Workplace Address: | |
| Telephone Number: | Email Address: | |
| Parent/Carer Details – 1st contact | | |
| Name of Parent/Carer: | | |
| Address: | | |
| Postcode: | | |
| Home Telephone Number: | Mobile Number: | |
| Email Address: | | |



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|--|--|---------------------------------|--|
| Preferred Method of Contact: | | Parental Responsibility: Yes/No | |
| Parent/Carer Details – 2nd contact | | | |
| Name of Parent/Carer: | | | |
| Address: | | | |
| Postcode: | | | |
| Home Telephone Number: | | Mobile Number: | |
| Email Address: | | | |
| Preferred Method of Contact: | | Parental Responsibility: Yes/No | |

| Section 2 – record of people invited to and attending the meeting. | | | |
|---|------------------------------------|----------------------------|-------------------------------------|
| Name of Independent Supporter and/or Advocate: | | Name of lead professional: | |
| Name | Role and/or relationship to family | Attended Yes/No | Report requested/received Yes/No |
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| Section 3 – Child/Young Person’s Views & Aspirations |
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| A paper version of this section is available; please ask for one if you would prefer it in that format. |
| <i>I am good at:</i> |
| |
| <i>I find it difficult to:</i> |
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| <i>I need to improve:</i> |
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| <i>I am proud of:</i> |
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| <i>Things which help me to learn:</i> |
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| Section 4 – Parent/Carer Views & Aspirations |
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| A paper version of this section is available; please ask for one if you would prefer it in that format. |
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| <i>What progress do you think your child has made this year?</i> |
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| <i>What do you think your child still finds difficult?</i> |
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| <i>Have there been any significant changes in your child's needs?</i> |
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| <i>How do you (or could you) help your child at home?</i> |
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Do you have any other comments?

| Section 5 - Attendance Data | |
|--|------------------------------|
| <i>Please give % attendance data for current and previous year</i> | |
| Attendance (current year) = | Attendance (Previous year) = |



Section 6 - Attainment Data
 Please provide details of National Curriculum levels, demonstrating both current attainment and rates of progress.
 (please use appropriate table for age/stage)

| EYFS | Nursery 1 | Nursery 2 | Reception |
|--|------------------|------------------|------------------|
| Personal, Social Emotional Development | | | |
| Communication, language and literacy | | | |
| Mathematical Development | | | |
| Knowledge and understanding of the world | | | |
| Physical development | | | |
| Creative development | | | |

Primary

| | Year 1 | Year 2 | Year 3 | Year 4 | Year 4 | Year 5 |
|---------|---------------|---------------|---------------|---------------|---------------|---------------|
| S and L | | | | | | |
| Reading | | | | | | |
| Writing | | | | | | |
| Maths | | | | | | |

Secondary

| | Year 7 | Year 8 | Year 9* | Year 10* | Year 11* | Year 12 | Year 13 |
|--|---------------|---------------|----------------|-----------------|-----------------|----------------|----------------|
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|---------|--|--|--|--|--|--|--|
| S and L | | | | | | | |
| Reading | | | | | | | |
| Writing | | | | | | | |
| Maths | | | | | | | |

Evidence of Transition Planning – Year 9 onwards

Transition plan included: Yes / No

Analysis of academic progress – please comment on progress over the key stage and over the last 12 months

Analysis of other progress – including social, emotional and physical as relevant



Summary of additional provision put in place this year

School resources used £.....

EHCP top-up funding of £.....

Section 7 – Education: Progress toward outcomes set in EHCP

(Insert or delete rows as required)

| Long - term Outcome (End of Key Stage/Phase) | Short -Term Outcome (Up to 12 months) | Has the outcome been met? Yes/No/Partially | Impact/Progress towards meeting the long term outcomes |
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| Health – Progress towards outcomes set in EHCP | | | |
|--|--|--|---|
| Long - term Outcome (End of Key Stage/Phase) | Short -Term Outcome (Up to 12 months) | Has the outcome been met? Yes/No/Partially | Impact/Progress towards meeting the long term outcomes |
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| Social Care – Progress towards outcomes set in EHCP | | | |
| Long - term Outcome (End of Key Stage/Phase) | Short -Term Outcome (Up to 12 months) | Has the outcome been met? Yes/No/Partially | Impact/Progress towards meeting the long term outcomes |
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Section 8 - New short – term (or continued) outcomes as a result of the annual review meeting/discussion
 (If existing short – term objectives have not been met/partially met and are to remain, indicate what changes will be made to the provision for the future). Add or delete rows as required.

Education:

| Long - Term Outcome | Short –Term Outcome | Date set | Provision including frequency, duration and staff-to-pupil ratio |
|---------------------|---------------------|----------|--|
| | | | |
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Health:

| Long - Term Outcome | Short –Term Outcome | Date set | Provision including frequency, duration and staff-to-pupil ratio |
|---------------------|---------------------|----------|--|
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Social Care:

| Long - Term Outcome | Short –Term Outcome | Date set | Provision including frequency, duration and staff-to-pupil ratio |
|---------------------|---------------------|----------|--|
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| Section 9 - Summary of key action points from annual review meeting (Record of discussion) | Action |
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| Personal Budget |
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| <p>Does the young person, parent or carer want a Personal Budget?</p> <p>Yes / No / Want more information before deciding</p> |

| Recommendations (*delete as appropriate) | | |
|--|---------|--|
| Maintain EHCP | Yes/No* | If Yes; All agree that long-term/short-term outcomes remain appropriate and that the level of support is sufficient to meet needs. |
| Amend EHCP | Yes/No* | If Yes; please indicate what specific amendments are requested below and give evidence to support that request. |
| Cease EHCP | Yes/No* | If Yes; please give details and signpost to evidence to support the cease request (ie: child/young person's needs can be fully met at SEN Support) |
| Reassessment of needs | Yes/No* | If Yes; please explain why reassessment of needs is being requested. |

| Suggested amendments if required – please give details (e.g: decrease/increase in provision, removal/addition of outcomes or change of provision/setting) |
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| Signatures | Printed | Signed | Date |
|--|---------|--------|------|
| Head Teacher | | | |
| SENCo/Senior Manager/ Teacher | | | |
| Parent / carer | | | |
| Child / young person (if appropriate) | | | |

| Agreement of Parent /Carer | |
|--|--------|
| *Delete as appropriate | |
| Child/Young Person's name: | D.O.B. |
| <input type="checkbox"/> I/we agree with papers being shared with educational settings, schools and professionals as and when appropriate. | |
| Signed: | Date: |
| (Parent / Carer) Delete as appropriate | |
| Signed: | Date: |
| (Parent / Carer) Delete as appropriate | |
| Signed: | Date: |
| (Child/Young Person – if appropriate) Delete as appropriate | |



Please send completed Annual Review documents to the Local Authority **immediately** following the Annual Review meeting, ensuring all sections are fully completed including parental consent (on the next page). Attach any reports that are referred to within the body of the report.

Date Annual Review Paperwork received into LA: