

Education, Health and Care Plan ANNUAL REVIEW REPORT

for

Date of this Annual Review	Date of last Annual Review

Have requests for updated reports/assessments/input been sent to all involved professionals 2 weeks before the invitations to the review meeting? <i>e.g. CAMHS, Therapies, Social Care,</i>	Yes / No
Have Parent(s)/Carer(s)/Young Person been contacted to contribute their views?	Yes / No
Have all involved with the child/young person been invited to the review at least 2 weeks prior?	Yes / No
Have copies of all reports received been sent alongside invitations to the review meeting?	Yes / No

Child / Young Person's Details

Preferred name	
First name	
Surname	
Date of Birth	
Gender	
Religion	
Home language	
Primary communication method	
Current Year Group	
Contact number/email address (if over 16)	
Home address and postcode	
Name of GP	
Address of GP	

Is the child / young person looked after by a Local Authority?	Yes / No
If yes, which Local Authority (with contact details)?	

Is the child / young person identified as a Child In Need?	Yes / No
If yes, who is the main contact in Social Care?	

Is the child / young person subject to a Child Protection Plan?	Yes / No
If yes, who is the main contact in Social Care?	

Is travel assistance currently provided by SEND?	Yes / No
If yes, please complete below	
Type of travel assistance provided	
Is a Passenger Assistant provided?	Yes / No
Is the child / young person a sole passenger?	Yes / No
Would Travel Training be beneficial and appropriate at this time?	Yes / No

Any other comments

Parent / Carer Details

Parent / Carer 1

First name	
Surname	
Home address and postcode	
Relationship to Child / Young person	
Home language	
Communication needs e.g. interpreter, BSL	
Contact number(s)	
Email address	
Does this person have Parental Responsibility?	

Parent / Carer 2

First name	
Surname	
Home address and postcode	
Relationship to Child / Young person	
Home language	
Communication needs e.g. interpreter, BSL	
Contact number(s)	
Email address	
Does this person have Parental Responsibility?	

Section A - Child / Young Person's thoughts

This section should represent a summary of the child/young person's views and thoughts. You can use any methods and tools from your toolkit (such as mind maps, pictures, circle of support, etc.) to ascertain the child/young person's views., Please attach any tools used to this form.

What is important to me?	
What do I enjoy doing at school/college?	
What have I done well at school/college this year?	
What do I like doing outside of school/college?	
What helps me learn in school/college? <i>e.g. in the classroom, in the playground etc.</i>	
What do I find difficult?	
What do I need help with?	
What do I want to change?	
What would help me with my problems/ worries/ difficulties?	
What do I want to do in the future?	

Did anyone help me complete this? If so, what	
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is their name and how did they help?	
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Parent / Carer views

What has gone well this year?	
Has your child/young person had any special achievements you would like recognised?	
What are your aspirations, hopes and ambitions for your child/young person?	
Has your child/young person received support from Health?	Yes / No
What help has been received? Has this been helpful and if so why?	
Has your child/young person received support from Social Care?	Yes / No
What help has been received? Has this support been helpful and if so why?	
Has your child/young person received support from any other agencies? Please name. e.g. Social Care, Health / CAMHS, Therapies	
What help has been received? Has this support been helpful and if so why?	

Has the educational support your child/young person has received helped them make progress?	
How would you like things to improve?	
Would you like a personal budget? If yes please say how you would use it and any other relevant comments?	
Any other comments?	

Section B - Changes to Education Needs

Cognition and Learning	
Information that needs amending and reasons	
Information that needs including and reasons	

Communication and Interaction	
Information that needs amending and reasons	
Information that needs including and reasons	

Social, Emotional and Mental Health	
Information that needs amending and reasons	
Information that needs including and reasons	

Sensory and/or Physical	
Information that needs amending and reasons	
Information that needs including and reasons	

Overall attendance figure for this academic year	Authorised	%
	Unauthorised	%
Comments		

Section C - Changes to Health Needs

Do current needs within Section C of the EHCP continue to be accurate and relevant?		Yes / No
If not, please explain the changes and their possible impact on learning:		
Have any new health needs have been identified in the last year, that have an impact on the child/young person's ability to learn?		Yes / No
If yes, please detail additional needs:		
Professional evidence supporting new health need attached:		
Name of professional	Report	Date of report

Section D - Changes to Social Care Needs

Do current needs within Section D of the EHCP continue to be accurate and relevant?	Yes / No	
If no, please detail why:		
Have any new social care needs been identified in the last year?	Yes / No	
If yes, please detail additional needs:		
Has an assessment or review of the relevant social care plan been carried out?	Yes / No	
If yes, please detail additional needs:		
Have you received a carer's assessment in the past 12 months?	Yes / No	
If yes, please provide relevant details:		
Professional evidence supporting new social care need attached:		
Name of professional	Report	Date of report

Section E - Current Education Outcomes

(for PfA guidance on outcomes please visit preparingforadulthood.org.uk)

Preparing for Adulthood (PfA) outcomes are:

1. Progression to further / higher education and/or employment
2. Independent Living and Housing
3. Friendships, relationships and being part of my community
4. Being as healthy as possible in adult life

Please indicate the relevant number in the last column

Outcome from the EHCP	Please indicate progress in relation to the CYP's targets in their SEN Support Plan	Does it remain appropriate?	Comments	How does this outcome relate to PfA?
1	Below expectations/ Expected / Exceeding expectations	Yes / No	<i>What went well?</i> <i>What could be improved?</i>	
2	Below expectations/ Expected / Exceeding expectations	Yes / No	<i>What went well?</i> <i>What could be improved?</i>	
3	Below expectations/ Expected / Exceeding expectations	Yes / No	<i>What went well?</i> <i>What could be improved?</i>	
4	Below expectations/ Expected / Exceeding expectations	Yes / No	<i>What went well?</i> <i>What could be improved?</i>	

* Please add further rows if required

Progress and attainment over the last year

Area /Subject / Course	Type of assessment	Current level / progress	Projected level / progress

Is there clear evidence that an EHCP is still required?	Yes / No
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Suggested New Outcome(s)

If the child / young person is in a transitional year, new outcomes must be devised for each area of need and for the next key stage.

Outcome for the EHCP		To be achieved by	How does this outcome relate to PfA?
1			<i>Employment/ Independent Living/ Community Inclusion/ Being Healthy</i>
2			<i>Employment/ Independent Living/ Community Inclusion/ Being Healthy</i>
3			<i>Employment/ Independent Living/ Community Inclusion/ Being Healthy</i>
4			<i>Employment/ Independent Living/ Community Inclusion/ Being Healthy</i>

*** Please add further outcomes if required**

This section must be completed for young people in Year 9 onwards:

Since the last annual review:
What Post-16 Pathways have been explored and identified?
What support is being provided regarding opportunities in employment?
Where does the young person want to live in the future, who with and what support may they need in the future?
How has the young person been supported to manage their own health needs? What support may they need in the future?
What arrangements are in place for the young person to access social and community activities?

Section F - Current Education Provision

Cognition and Learning	
Information that needs amending and reasons	
information that needs including and reasons	

Communication and Interaction	
Information that needs amending and reasons	
information that needs including and reasons	

Social, Emotional and Mental Health	
Information that needs amending and reasons	
information that needs including and reasons	

Sensory and/or Physical	
Information that needs amending and reasons	
information that needs including and reasons	

Section G - Current Health Provision

Information that needs amending and reasons	
information that needs including and reasons	

Section H1 - Current Social Care Provision

Information that needs amending and reasons	
information that needs including and reasons	

Section H2 - Current Social Care Provision

Information that needs amending and reasons	
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information that needs including and reasons	
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Section I - Placement

Is current placement still able to achieve the desired outcomes?	Yes / No
How have resources been used to meet the child / young person's educational needs? (Inclusion of a provision map is desired)	
Is any additional equipment used? If so, for which outcome and is it still required?	

Is the child / young person in a transitional year? (please tick if applicable)		
Pre-School/Foundation to Primary school		
Infants to Junior school		
Primary to Secondary school		
KS3 to KS4 (Year 9)		
KS4 to KS5 (Year 11)		
Year 13		
Year 14		
Post Year 19		
If applicable, what is the parent/carer / young person preference for next placement?		
	Name of school / college	Comments
1		
2		

Section J - Personal Budget

Is there a personal budget already in place?	Yes / No
If yes, what has been the impact of the personal budget on achieving outcomes?	
Does the parent/carer(s)/young person wish to request a personal budget?	Yes / No
How will the personal budget impact future achievement of outcomes?	

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Section K - Contributors to this Annual Review

Name	Role	Advice submitted for review?	Contact details

Discussion points at the Annual Review meeting

Action Points	By whom	By when

Form completed by:

Name	
Role	
Contact details	
Signature	
Date	

Appendices:

	Included?
Attendance report	
Academic data	
Individual Education Plan (IEP)/ SEN Support Plan	
Behaviour log (where applicable)	
Reports from school/college staff	
Reports from external professionals (e.g. SALT, OT)	
Short Breaks Provider Reports/ Plan	
All about me	
Other (please state)	