**Annual Review checklist and**

**Guidance for Annual** **Reviews**

**Checklist:**

* Make sure no other pupil names are present in the review documentation.
* The annual review should be typed, Handwritten notation should be avoided where possible, if provided should be in black ink and legible.
* Check to make sure that the Education, Health and Care Plan being reviewed is the most recent version.
* Additional reports from external agencies should be requested 6 weeks before the review meeting.
* Child views should be obtained where possible in addition to parental views.

**Statutory Guidance - extract from the Special Educational Needs and Disability Code of Practice (January 2015):**

The following requirements apply to reviews where a child or young person attends a school or other institution:

• The child’s parents or young person, a representative of the school or other institution attended, a local authority SEN Officer, a health service representative and a local authority social care representative **must** be invited and given at least two weeks’ notice of the date of the meeting. Other individuals relevant to the review should also be invited, including youth offending teams and job coaches where relevant

• The school (or, for children and young people attending another institution, the local authority) **must** seek advice and information about the child or young person prior to the meeting from all parties invited, and send any advice and information gathered to all those invited at least two weeks before the meeting.

• The meeting **must** focus on the child or young person’s progress towards achieving the outcomes specified in the EHC plan, and on what changes might need to be made to the support that is provided to help them achieve those outcomes, or whether changes are needed to the outcomes themselves. Children, parents and young people should be supported to engage fully in the review meeting.

• The school (or, for children and young people attending another institution, the local authority) **must** prepare and send a report of the meeting to everyone invited within two weeks of the meeting. The report **must** set out recommendations on any amendments required to the EHC plan, and should refer to any difference between the school or other institution’s recommendations and those of others attending the meeting

• Within four weeks of the review meeting, the local authority **must** decide whether it proposes to keep the EHC plan as it is, amend the plan, or cease to maintain the plan, and notify the child’s parent or the young person and the school or other institution attended

• If the plan needs to be amended, the local authority should start the process of amendment without delay

• If the local authority decides not to amend the plan or decides to cease to maintain it, they **must** notify the child’s parent or the young person of their right to appeal that decision and the time limits for doing so, of the requirements for them to consider mediation should they wish to appeal, and the availability of information, advice and support and disagreement resolution services

**Preparing for adulthood in reviews**

All reviews taking **must** include a focus on preparing for adulthood, including employment, independent living and participation in society. This transition planning **must** be built into the EHC plan and where relevant should include effective planning for young people moving from children’s to adult care and health services. It is particularly important in these reviews to seek and to record the views, wishes and feelings of the child or young person. From Year 9 onwards the review meeting organiser should invite representatives of post-16 institutions to these review meetings, particularly where the child or young person has expressed a desire to attend a particular institution. Review meetings taking place in Year 9 should have a particular focus on considering options and choices for the next phase of education.

As the young person is nearing the end of their time in formal education and the plan is likely to be ceased within the next 12 months, the annual review should consider good exit planning. Support, provision and outcomes should be agreed that will ensure the young person is supported to make a smooth transition to whatever they will be doing next – for example, moving on to higher education, employment, independent living or adult care. For further guidance on preparing for adulthood reviews, see Chapter 8, Preparing for adulthood from the earliest years.

**Checklist for documentation/information that should be included**

|  |  |
| --- | --- |
| **If separate notes of the meeting were taken are these included?** |  |
| **Is the support timetable/provision map included?** |  |
| **Are Individual Support Plans included?** |  |
| **Has attainment and attendance data been included?** |  |
| **Social Care contribution/involvement noted?** |  |
| **Updated Medical Reports (since last assessment or review)?** |  |
| **Current Therapy Reports (SALT/OT/PT)?** |  |

|  |  |  |
| --- | --- | --- |
| **SPECIAL EDUCATIONAL NEEDS ASSESSMENT SERVICE****Brent Civic Centre** **Engineers Way Tel: 020 8937 3232/3229****Wembley** HA9 0FJ Email: sen.reviews@brent.gov.uk  |  |  |

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| **ANNUAL REVIEW REPORT**  |

**Please note – the most recent Individual Support Plan must be submitted with this document, together with any medical or therapy reports. All sections of this form should be completed by the designated teacher.**

|  |  |
| --- | --- |
| **SCHOOL /College****NAME:** | **EMAIL ADDRESS FOR SCHOOL/COLLEGE SEN CONTACT:** |
| **SCHOOL CONTACT NUMBER:** |

## PUPIL DETAILS

|  |  |  |  |
| --- | --- | --- | --- |
| Pupil’s Surname |  | Date of Birth: |  |
| Pupil’s Forename: |  | Male/Female: |  |
| Home Address:Post Code: |  | Ethnicity: |  |
| Home Language: |  |
| Telephone No: |  |
|  | Parent Email: |  |
| Current Year Group |  | Review Date: |  |
| UPN: |  |

## CARER DETAILS

|  |  |  |
| --- | --- | --- |
|  | Legal Parent(s) | Other Legal Parent (e.g. if at different address) |
| Full names of parent(s) or Guardian(s) |  |  |
| Relationship to pupil (and details of parental responsibility)  |  |  |
| Address if different from pupil |  |  |
| Parental telephone number |  |  |
| Parental email |  |  |
| Looked After Child | Y/N | Belonging to Authority |  |

### LA PROVISION

|  |  |  |
| --- | --- | --- |
| **Support on EHC Plan** |  | **Support provided by school** |
| If so, please specify amount/type: |  | Please specify nature of provision: |

### ATTENDANCE

|  |  |  |
| --- | --- | --- |
| Percentage attendance for Academic Year |  | If cause for concern please indicate action taken and by whom: |
| ALL PROFESSIONALS INVOLVED WITH THE PUPIL MUST BE INVITED TO CONTRIBUTE AS DECISIONS AROUND PLACEMENT/PROVISION WILL BE MADE BASED ON THESE REPORTS |

##### Tick as appropriate

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Type of Contributor** | **Name of Contributor** | **Invited to Review** | **Attended Review** | **Written Report Attached** |
| Young Person |  |  |  |  |
| Parent/Carer (s) |  |  |  |  |
| Education Setting (Nursery / School / College) |  |  |  |  |
| Education Professionals |  |  |  |  |
| Health Professionals |  |  |  |  |
| Social Care Professionals |  |  |  |  |
| Careers Advisor (Year 9 onwards) |  |  |  |  |
| SENAS |  |  |  |  |
| Speech and Language Therapist (SALT) |  |  |  |  |
| Occupational Therapist (OT) |  |  |  |  |
| Physiotherapist (PT) |  |  |  |  |
| Other |  |  |  |  |
|  |  |  |  |  |
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| Evidence of attainment over time |

This statutory Annual Review forms part of the continuous cycle of Assess, Plan, Do, Review.

Information relating to attainment and academic progress over time and predicted attainment if known should be included with the advice circulated two weeks before the review meeting to enable it to be discussed.

**Essential Information Required - Record of Attainment:**

**Early Years Settings**: use the Early Years Foundation Stage Profile measures

**Schools/Colleges**: Levels of Attainment and Progress: provide details of levels (e.g. NC Levels, or the results of standardised testing and provide a key with an age equivalence)

(e.g. if a Year 5 pupil is working at the level of a pupil in Year 1 – instead of indicating well below 5W – please specify the discrepancy, if any, between the pupil’s attainment and age related expectations).

|  |  |  |  |
| --- | --- | --- | --- |
| **Subject/Course** | **Attainment from Last Year** | **Current Attainment** | **Age Equivalence of current attainment** |
|  |  |  |  |
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**Review of EHC Plan, Section C of the EHC Plan: Health Needs which relate to the young person’s SEN**

|  |  |
| --- | --- |
| Current Health Need | Proposed new Health Need (with corresponding Medical report attached) |
|  |  |

**Review of EHC Plan, Section G: Any Health provision reasonably required by the learning difficulties (and incorporated within the EHC Plan – include any new medical needs/diagnoses and attach corresponding report)**

|  |  |  |
| --- | --- | --- |
| Current Health Provision | Current Health Outcome | Proposed new Health Provision and Outcome(with corresponding Medical report attached) |
|  |  |  |

**Review of EHC Plan, Section D: Social Care Needs which relate to the young person’s SEN**

|  |  |  |
| --- | --- | --- |
| Current Social Care Needs | Current Social Care Outcome | Proposed new Social Care Needs and Outcome (with corresponding Social Care report attached) |
|  |  |  |

**Review of EHC Plan, Section H1 and H2: Social Care Provision**

|  |
| --- |
| **Section H1:** *The social care provision which must be made for a child or young person under 18 resulting from section 2 of the Chronically Sick and Disabled Persons Act 1970 (CSDPA)*  |

|  |  |  |
| --- | --- | --- |
| **Current Social Care provision (including type of placement if relevant)**  | Current Provision | Proposed Change (with report) |
|  |  |

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| **Section H2:** *Any other social care provision reasonably required by the learning difficulties or disabilities which result in the child or young person having SEN.* |

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| --- | --- | --- |
| **Current Social Care provision (including type of placement if relevant)** | Current Provision | Proposed Change (with report) |
|  |  |

**Review of EHC Plan, Section (J) – Personal Budget**

|  |  |  |
| --- | --- | --- |
| Type of Personal Budget: Education / Health / Social Care | Outcome for which the Personal Budget has been allocated | Continue with arrangement / Cease arrangement or new arrangement required |
|  |  |  |
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**Review of current EHC Plan, Section (E), the young person’s Outcomes and the steps to achieve them.**

Please state if the outcome has been met and no longer applies. If Outcomes are met **and** no new Outcomes are proposed consideration will be given to **ceasing** the Education, Health and Care Plan.

**Please tick what progress has been made towards each EHC outcome since the last annual review.**

**Each Outcome is listed in Section E of the EHCP.**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **What progress towards achieving the outcome has been made?**  | **OuTcome 1** | **OUTCOME 2** | **OUTCOME 3** | **OUTCOME 4** | **OUTCOME 5** | **OUTCOME 6** | **OUTCOME 7** | **outcome 8** |
| 1. **Child has regressed**
 |  |  |  |  |  |  |  |  |
| 1. **No progress towards outcome**
 |  |  |  |  |  |  |  |  |
| 1. **Some progress made towards outcome**
 |  |  |  |  |  |  |  |  |
| 1. **Good progress made towards outcome**
 |  |  |  |  |  |  |  |  |
| 1. **Outcome nearly achieved**
 |  |  |  |  |  |  |  |  |
| 1. **Outcome achieved (new outcome to be set or area of need removed)**
 |  |  |  |  |  |  |  |  |

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| **If the young person has either regressed or made no progress towards their outcome, please detail reasons why:** |
|  |

**Proposed new outcomes and steps to achieve these**

* For young people in Foundation Stage: Outcomes should be set for the end of Key Stage 1
* For young people in Key Stage 1: Outcomes should be set for the end of Key Stage 2
* For young people in Key Stage 2: Outcomes should be set for the start of Key Stage 3
* For young people in Key Stage 3: Outcomes should be set for the end of Key Stage 4
* For young people in Key Stage 4: Outcomes should be set for the end of sixth form/further education
* **For pupils in Year 5, please set Outcomes to be achieved by the beginning of Key Stage 3**
* **For all pupils please specify Outcomes focussed on preparing for adulthood (to include health, community, independence and employment)**

**Steps are for the young person to achieve their long term outcomes specified, until their next statutory annual review (typically targets for the young person over the course of a year – not to be confused with EHC Plan Outcomes or provision required).**

**Outcome –** What the child/young person will achieve by the next Key Stage

**Steps to Achieve Outcome –** What the child/young person will do on a short term basis to progress towards achieving the outcome (short term targets)

**Provision -** What will be provided for the child/young person in order for them to achieve their outcomes

|  |  |  |  |
| --- | --- | --- | --- |
| **Current Outcome** | **Current Steps** | **New Outcome (if outcome has been achieved)** | **Steps for New Outcome** |
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Please set an Outcome for Preparing for Adulthood (FOR ALL AGES):

|  |  |  |
| --- | --- | --- |
| Outcome | Steps for Outcome | Provision required to achieve outcome |
|  |  |  |

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| --- |
| **Views on progress since issue of EHCP or previous Annual Review** |

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| --- |
| 1. **Please identify areas of strength and progress made in each area:**
 |
| **Communication and Interaction:****Cognition and Learning:****Social, Emotional and Mental Health:****Sensory and Physical:** |

|  |  |  |
| --- | --- | --- |
| 1. **Are there any areas of concern or significant changes that the school/setting feel that the LA should know about related to education, health or social care?**
 | YES | NO |
| If yes, please specify |
|  |
| 1. **Young person’s views of progress made and updated aspirations – Please attach additional page if necessary**
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| 1. **Parental views of progress made and updated aspirations for the future life of your child/young person you are caring for? – Please attach additional page if necessary**
 |
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| 1. **What does the parent/young person think is needed to help achieve their outcomes in the next phase transfer?**
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|  |

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| --- |
| **For all young people** |
| **Next significant event e.g. leaving school/ moving setting/ next Key Stage etc. include any expressed preference for the next setting and anticipated date of transfer** |
|  |
| **Year 9 and over – Progression towards Adulthood** |
| **Has the young person identified a career pathway?** | **Has careers guidance been discussed with the young person?** |
|  |
| **Please indicate any potential post 16 education settings / courses that the young person has expressed an interest in.** |
|  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **5 Has the recommended level of therapy (SALT/OT/PT) changed?** | YES |  | NO |  |
| **6 Should the EHC plan be amended?** | YES |  | NO |  |

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| --- |
| If yes, please add typed annotations within a word version of the EHCP and attach to this review (See guidelines for advice) |

|  |  |  |  |
| --- | --- | --- | --- |
| Signature of completing officer/designated teacher |  | Date |  |

Name of completing officer/designated teacher:

Email of completing officer/designated teacher:

# DFE Guidance on coding a child’s ethnicity

In accordance with the DfE Common Basic Data Set main categories, sub categories and approved extended categories of ethnicity, it has been recommended that the Local Authority and Schools should adopt consistent reporting in terms of ethnicity. The new categories have been appended below for your convenience to enable you to provide the information at the beginning of the Annual Review form for reporting purposes to the DfE.

|  |  |  |
| --- | --- | --- |
| **Main category** **(DfE SFRs)** | **Sub- category**  | **DfE main code** **(stat returns)** |
| White  | White - British  | WBRI  |
| White  | Traveller of Irish heritage  | WIRT  |
| White  | Any other white background  | WOTH  |
| White  | Gypsy / Roma  | WROM  |
| Mixed/Dual background  | White and Black Caribbean  | MWBC  |
| Mixed/Dual background  | White and Black African  | MWBA  |
| Mixed/Dual background  | White and Asian  | MWAS  |
| Mixed/Dual background  | Any other mixed background  | MOTH  |
| Asian or Asian British  | Indian  | AIND  |
| Asian or Asian British  | Pakistani  | APKN  |
| Asian or Asian British  | Bangladeshi  | ABAN  |
| Asian or Asian British  | Any other Asian background  | AOTH  |
| Black or Black British  | Black Caribbean  | BCRB  |
| Black or Black British  | Black - African  | BAFR  |
| Black or Black British  | Any other Black background  | BOTH  |
| Chinese  | Chinese  | CHNE  |
| Any other ethnic group  | Any other ethnic group  | OOTH  |
| Refused  | Refused  | REFU  |
| Information not yet obtained  | Information not yet obtained  | NOBT  |