**Summary Advice to be completed by the school or setting**

**for an Annual Review of an EHC Plan**

**To be circulated to all participants at least two weeks prior to the Annual Review meeting**

The Code of Practice emphasises that teachers are responsible for and accountable for the progress and development of all pupils in their class, including those with SEND where pupils access support from teaching assistants or specialist staff.

Schools will have their own internal forms for collecting information from school staff for an Annual Review and these, together with this form, should be included with the documents circulated in advance of the meeting.

This form represents **a summary** of the documentation provided by the school or setting. Supporting documentation such as assessment and attainment data and other relevant records should be available at the Review meeting and included in the appendices of the circulated Annual Review Report.

This report will contribute to the Annual Review of the Education, Health and Care Plan.

**1.**

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| **Details of child/young person** |
| **Name** | **Date of birth** | **Year group** |
|  |  |  |

|  |  |  |
| --- | --- | --- |
| **Date of Review** | **Time** | **Location** |
|  |  |  |
| **Details of person completing this form** |
| **Name and Address of setting** | **Tel number** |
|  |  |
| **Type of setting**  | **Email** |
|  |  |
| **Name of person completing this form** | **Role** |
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**2.**

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| **Is the child educated out of year group? If so, specify year group they should be in and why they are not** |
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| **School attendance since last annual review or issue of Plan, as appropriate** | **Actual** | **Possible** |
|  |  |
| **Have there been any significant periods/patterns of absence since the last review or issue of the Plan? If yes, please explain reasons and any action arising** |
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**3.**

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| **Other agency support/input** *Insert further rows as required* |  |  |  |
| **Agency**  | **Description of support/input***(eg consultation visit/ direct therapy etc)*  | **Frequency e.g. 1x per month**  | **Most recent date of involvement**  | **Date of most recent Report**  |
| Educational Professionals |   |   |   |   |
| Health Professionals |   |   |   |   |
| Social care Professionals |   |   |   |   |
| Careers Advisory Service (Yr 9 onwards) |   |   |   |   |
| Other  |   |   |   |   |

**4.**

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| **Attainment over time** |
|  | Nursery 1 | Nursery 2 | Reception |
| Personal, social and emotional development  |  |  |  |
| Physical development |  |  |  |
| Communication and language |  |  |  |
|  |  |  |  |
| Literacy |  |  |  |
| Mathematics |  |  |  |
| Understanding the world |  |  |  |
| Expressive arts and design  |  |  |  |

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| **Progress in Key Stages 1,2,3,4 and above****Please fill in relevant columns***NB Assessments might include SATS, NC level, P Levels, Teacher Assessment, GCSE Functional Skills Assessment, Standard or norm referenced tests, BTEC, NVQ, AS/A Level etc.*  |
| Type and date of assessment  | Subject area | Performance two years previously | Performance one year previously  | Current performance |
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**5.**

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| **The setting’s view of the child/young person’s progress** |
| ***Using bullet points please outline the child/young person’s strengths, skills and achievements over the past year any other notable progress e.g. involvement in school life/friendships etc.*** |
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| **Please provide a brief summary of the setting’s views of the child/ young person’s progress against the outcomes in the EHC Plan.***Please state any outcomes that you think have been achieved.* |
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| **Any other issues to be raised at the Annual Review meeting** |
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**6.**

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| **Changes to the child/young person’s Special Educational Needs** |
| **Please record the views of the setting in relation to any significant changes in the child/young person’s SENs e.g.** *changes in the degree of need, needs that no longer exist*  |
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| **Describe any new needs identified and specify how these impact on access to the curriculum** |
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**7.**

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| **For young people in Year 9 / post 16, a Transition Plan is required***NB Maintained schools, Academies and Free school have a statutory duty to ensure that pupils from Year 8 onwards are provided with independent careers guidance.* |
| **Has the young person identified a career pathway?**  | **Y** | **N** |
|  |  |
| **Have career guidance and progressions routes been discussed with the young person?**  |  |  |
| **A copy of the Transition Plan/Progression towards adulthood document should be included in the documentation - provide a brief summary below:**  |
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**8.**

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| **Outcomes suggested by the setting to be discussed at the Annual Review Meeting***(NB. When reviewing the EHC Plan, the long term outcomes may remain unchanged, and the short term outcomes in the Plan should normally have been met. In this case, new short term outcomes related to the long term ones should be suggested below.**If the long term outcomes have been met, then new long term outcomes and related short term outcomes should be suggested below.* 1. *Add or delete boxes as necessary to suit the number of long term outcomes required*
2. *There may a few short term outcomes related to each long term outcome*
3. *For phase Transfer stages of their education (e.g. years 2, 6, 11 etc.) the intended long term outcomes will need to focus on the next stage of their education or training.*

*Outcomes suggested by your setting should be discussed at the Annual Review meeting and may be adapted in accordance with suggestions made by the parents/carers/child/young person and any other professionals involved)**NB: If any of these outcomes have not been achieved but remain appropriate they should be discussed at the Review meeting and, if appropriate, carried forward to the summary of outcomes in section 9 of the Report of the Annual Review of an EHC Plan where new outcomes and provision will also be detailed.* |
| **Suggested Long Term and linked Short Term outcomes** **(***Long term outcomes to be achieved by the end of the Key Stage or Phase; short term to be achieved within the next 12 months.)* |
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**9.**

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| **Please describe any suggested significant changes to educational provision to be discussed at the Review** |
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**10.**

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| **Relevant documentation accompanying this Advice***Eg: support timetable/provision map, individual support plans, attainment data etc****If the child/young person has a Health Care Plan this must be attached to this form*** |
| **Description of document** | **Date** |
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**11.**

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| **Signed** |  |
| **Date**  |  |