**Education, Health and Care Plan:**

**Annual Review Report and meeting notes:**

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| **[Child/Young Person’s name]** |
| **[Child/Young Person’s current address]** |
| **Date of Birth:**  **xx** |
| **Date of annual review meeting:**  **xx** |
| **Current School/Setting:**  **xx** |

**This report should be submitted alongside an annotated EHC Plan**

**Age-Phase Transition Review? Yes No**



For more information about SEND Services in Newcastle visit our Local Offer website:

[www.newcastlesupportdirectory.org.uk/send-local-offer](http://www.newcastlesupportdirectory.org.uk/send-local-offer)

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| **PLEASE NOTE: This report should be read alongside professional reports, child/young person’s and parent/carer views, the SEND Outcomes Framework and the annotated EHCP.** |

#### **ALL PROFESSIONALS INVOLVED WITH THE PUPIL MUST BE INVITED TO CONTRIBUTETO THE ANNUAL REVIEW AND ASKED TO PROVIDE A REPORT**

Please advise who has been involved in this annual review:

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| **Type of Contributor** | | **Name of Contributor** | **Date Invited to Review** | **Attended Review** | **Written Report Attached** |
| Young Person | EHCP Views |  |  |  |  |
| SEND Outcomes Framework |  |
| Parent/Carer (s) | |  |  |  |  |
| Education Setting | |  |  |  | Annotated EHCP |
| Education Professionals | |  |  |  |  |
| Health Professionals | |  |  |  |  |
| Social Care Professionals | |  |  |  |  |
| SEND Outreach Service (SENDOS) | |  |  |  |  |
| Speech and Language Therapist (SALT) | |  |  |  |  |
| Occupational Therapist (OT) | |  |  |  |  |
| Physiotherapist (PT) | |  |  |  |  |
| Children’s Continuing Care | |  |  |  |  |
| Other | |  |  |  |  |
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| **SEND OUTCOMES FRAMEWORK** |
| A series of questions have been co-produced to help find out how children and young people are feeling about their lives. The SEND Outcomes questions aim to provide a holistic view of the child or young person. The overall feedback from children and young people will be monitored by the SEND Executive Board who will decide what needs to be put in place to improve progress towards these outcomes.  Please will you complete the questions with the child/young person at their annual review. The links to the questions are below:  [**Year 11 and below (new form)**](https://forms.office.com/e/bdFKXUsGHU)  [**Post-16 providers survey (new form)**](https://forms.office.com/e/WDe2tP2Vpg)  You MUST download a copy of the form so you can see if there are any actions you need to take in-line with your individual school processes.  If these online forms are not appropriate, please refer to Section 2 (Ideas 2&3) of ‘***The SEND Outcomes Guidance* document’** for further suggestions (this document can be found on the Local Offer at the bottom of the ‘EHC Annual Review Toolkit for Schools and Settings’ webpage). |

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| **UPDATES TO SECTION A**  **Views, interests, aspirations and goals of the child/young person and their parents/carers** |
| **My views. Please see below for some discussion prompts:**  Who is important to you?  What do you like about being with these people?  What do others like about you?  What’s important to you?  What are you good at?  What do you find difficult?  What’s going well in your life?  What do you like outside school/college?  **If preferred, there are several templates which have been co-produced with parents, carers, children and young people which are designed to assist young people to give their views:**  **Pupil Views - Bubble**  **Pupil Views - Plain**  **Pupil Views – Symbols**  (these documents can be found on the Local Offer at the bottom of the ‘EHC Annual Review Toolkit for Schools and Settings’ webpage). |
| **Child/ young person’s view are:** |
| **Who provided the views above?** |
|  |
| **Parent/carers views. Please see below for some discussion prompts:**  What would you like us to know about your child/young person?  Is there anything else that is important that you feel we should know?  This can include likes, dislikes, strengths and difficulties, what helps their learning and what helps them to be more independent.  Parent/carer may include any information sources that they feel best describe the child and young person – attach as an appendix to the plan. Please see our local offer which includes some templates to help with discussions **Parent/Carer Views** (this document can be found on the Local Offer at the bottom of the ‘EHC Annual Review Toolkit for Schools and Settings’ webpage). |
| **Parent/carer’s views are:** |

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| **UPDATES TO SECTION B**  **My Special Educational Needs and/or Disabilities** |
| **B2: Cognition and Learning** |
| Meeting notes (How has the last year been? /What is working? /What is not working? /Is there anything that people need to be aware of that is not included in the plan?) |
| **Please refer to Annotated EHCP for updates on outcomes and provision.** |

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| **B3: Communication and Interaction** |
| Meeting notes (How has the last year been? /What is working? /What is not working? /Is there anything that people need to be aware of that is not included in the plan?) |
| **Please refer to Annotated EHCP for updates on outcomes and provision.** |

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| **B4: Social, Emotional and Mental Health** |
| Meeting notes (How has the last year been? /What is working? /What is not working? /Is there anything that people need to be aware of that is not included in the plan?) |
| **Please refer to Annotated EHCP for updates on outcomes and provision.** |

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| **B5: Sensory and Physical** |
| Meeting notes (How has the last year been? /What is working? /What is not working? /Is there anything that people need to be aware of that is not included in the plan?) |
| **Please refer to Annotated EHCP for updates on outcomes and provision.** |

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| **UPDATES TO B6: Preparation for Adulthood** |

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| **B6.1: Employment and the World of Work** |
| **This includes education, higher education, employment and exploring different employment options, such as support for becoming self-employed and help from supported employment agencies.** |
| Meeting notes (How has the last year been? /What is working? /What is not working? /Is there anything that people need to be aware of that is not included in the plan?) |
| **Please refer to Annotated EHCP for updates on outcomes and provision.** |

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| **B6.2: Living as Independently as possible** |
| **This means young people having choice, control and freedom over their lives and the support they have and their accommodation/living arrangements, including supported living.** |
| Meeting notes (How has the last year been? /What is working? /What is not working? /Is there anything that people need to be aware of that is not included in the plan?) |
| **Please refer to Annotated EHCP for updates on outcomes and provision.** |

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| **B6.3: Community and Social Involvement** |
| **This means participating in society and contributing to the local community, including having friends and supportive relationships.** |
| Meeting notes (How has the last year been? /What is working? /What is not working? /Is there anything that people need to be aware of that is not included in the plan?) |
| **Please refer to Annotated EHCP for updates on outcomes and provision.** |

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| **B6.4: Being as Healthy as possible** |
| **This means being as healthy as you can be in adult life.** |
| Meeting notes (How has the last year been? /What is working? /What is not working? /Is there anything that people need to be aware of that is not included in the plan?) |
| **Please refer to Annotated EHCP for updates on outcomes and provision.** |

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| **UPDATES TO SECTION C**  **My health needs which are related to my SEN or Disability** |
| Meeting notes (What is working? /What is not working? /Has anything changed since last year?):  The child/young person named in the plan has no Health needs Tick if applicable. |
| **Please refer to Annotated EHCP for updates on outcomes and provision.** |

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| **UPDATES TO SECTION D**  **My Social Care needs which are related to my SEN or Disability** |
| Meeting notes (What is working? /What is not working? Has anything changed since last year?):  The child/young person named in the plan has no Social Care needs Tick if applicable. |
| **Please refer to Annotated EHCP for updates on outcomes and provision.** |

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| **Section E – Current Outcomes Progress Update**  **Aims and aspirations**  *The monitoring and review arrangements for short-term outcomes will be agreed between the school/setting and parents/carers and will be reviewed regularly.*  ***Outcomes must be specific, measurable, achievable, relevant and time bound.*** | | | | | | | |
| **CURRENT LONG TERM OUTCOMES** | | **Met** | **Partially Met** | **Not Met** | **Comments** | | |
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| **Section E – New Outcomes**  **Aims and aspirations**  *The monitoring and review arrangements for short-term outcomes will be agreed between the school/setting and parents/carers and will be reviewed regularly.*  ***Outcomes must be specific, measurable, achievable, relevant and time bound.*** | | **Section F – New Provision**  **Additional educational support**  *This is provision which goes over and above Quality First Teaching and the Mainstream Guidance.* | | | | | |
| **LONG TERM OUTCOMES** | **To be achieved by** | **PROVISION** | | | | **By whom** | **Frequency and quantity** |
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| **Section I**  **Educational Placement**  **The name and type of the educational establishment/placement to be attended by the child/young person** *(if the name of a school or other educational establishment/placement is not specified in the EHC Plan, the type of school or educational establishment/placement can be specified).* |
| **Meeting notes around placement and whether needs can be met in current setting (if not then why?) What further support is required to maintain placement?** |
| **Child/Young Person/ Parent/ Carer’s preferred type of provision:** |  |
| **Child/Young Person/ Parent/ Carer’s preferred school / provision:** |  |
| **Year <0, 3, 5, 7 or 10 Future Transition Planning preferred school / provision:** |  |

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| **UPDATES TO SECTION J**  **Personal Budget** | | |
| Do the family have an education personal budget? | Yes | No |
| Do the family have a Personal Health Budget? | Yes | No |
| Do the family have a Social Care Personal Budget? | Yes | No |
| **If the child or young person is in receipt of Personal Budget Allocation from Education, Social Care or Health, please summarise the discussions regarding the personal budget allocation and how this is being used in relation to meeting sections F, G and H. Evidence is required from parents to demonstrate spend against identified provision:** | | |

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| **Additional Information** |
| **Details of the child/young person’s attendance over the last year.** |
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| **Details of any suspensions or exclusions over the last year.** |
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| **Current GP Practice:** |
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| **Children’s continuing care information (if applicable).** |
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| **Additional notes:** |
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If you need support or assistance to help you read and/or understand this document, please contact the SEND Support, Assessment and Review Service, detailed below:

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| --- | --- |
| SEND Support, Assessment and Review Team  Newcastle City Council  3rd Floor  Civic Centre  Barras Bridge  Newcastle Upon Tyne  NE1 8QH | Email [ehcp@newcastle.gov.uk](mailto:ehcp@newcastle.gov.uk)  Telephone: 0191 277 4650  Website: [www.newcastlesupportdirectory.org.uk/send-local-offer](http://www.newcastlesupportdirectory.org.uk/send-local-offer) |

**Appendix 1: Updates to Contacts**

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| **People who help and support me:** | | |
| **Supporting me in the community** | | |
| **Name** | **Title** | **Contact details** |
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| **Keeping me healthy** | | |
| **Name** | **Title** | **Contact details** |
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| **Helping with my education and training** | | |
| **Name** | **Title** | **Contact details** |
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| **Helping with my future** | | |
| **Name** | **Title** | **Contact details** |
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| **Any other important people** | | |
| **Name** | **Title** | **Contact details** |
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