



Statement / Education, Health and Care (EHC) Plan Annual Review Meeting Report

Name:			
DOB:		Year Group:	
Educational Setting:			
Current Support:			
Date of the Last Annual Review:			
Date of this Review:			

Summary of Recommendations: <i>(Delete as appropriate)</i>		
Maintain Statement / EHC Plan	Yes	No
Amend Statement / EHC Plan <i>(Please give details of the sections that need amending in the summary and recommendations section of the annual review)</i>	Yes	No
Cease Statement / EHC Plan	Yes	No
Year 5 Reviews – Secondary provision discussed? <i>(Please detail parent's preference for secondary in the transition section of the annual review).</i>	Yes	No
Year 9 + – Transition to Adulthood, options discussed? <i>(Please detail discussions regarding preparing for adulthood and ensure that outcomes focus on education/training, preparation for employment, health and wellbeing, friends, community and leisure and independence/independent living, including input from transitions social worker).</i>	Yes	No

Summary of Annual Review Discussion:

Please summarise the child / young person's and parent's views first, updating the child / young person's one page profile (what we like and admire about the child / young person, what is important to them, and how best to support them).

Please also look at what is working well for the child / young person, and what may not be going so well for them; this could be at home, at school or within the community.

Young person's aspirations (hopes and dreams) and what is important to them now and in the future:

Other people's aspirations for the young person:

What has been working well since the last review at home, in education or training and in the community from the perspectives of the child/young person, parent/carer and professionals:

What's not been working well since the last review at home, in education or training and in the community from the perspectives of the young person, parent/carer and professionals

What is needed to support any changes since the last review at home, in education or the community? (including any recent medical diagnosis, reports to be provided)

	Identified Strength	Identified needs
Education / Employment		
Health		
Care and Independence Skills		
Friends and Relationships / Social Life		
Educational progress and attainment record (as levels are no longer in use you will need to express this section in age equivalent terms in order to demonstrate progress/lack of progress).		
Spelling and Literacy		
Reading		
Writing		
Maths		
Any other relevant discussion		
Outcomes: <i>(Looking at outcomes for the child / young person, these should include health and care outcomes if applicable, as well as educational)</i>		
Reviewed outcomes	Has outcome been achieved? If not what changes need to be made?	

New agreed outcomes	How will these be achieved and who needs to be involved? What support is required to achieve outcomes and when will they be reviewed?

Summary of the Key Action Points and Recommendations from the Annual Review Meeting:

(If there are any recommendations to amend, the annotated statement / EHC plan should be attached, or please detail those amendments below)

(Please note that any recommendations to amend the statement / plan must be evidence based and supported by relevant assessments and / or professional reports)

Any outstanding actions from the last review?	To be completed by when?

New agreed action	To be completed by when?

Is the Child / Young Person due to transfer?

Yes *If yes, please complete the transition section below*

No

Transition:

(Please consider the child / young person's views, the parent / carer views and the views of all professionals involved here. Please also consider anticipated strategies and training requirements of the receiving school on transfer, and any integration arrangements between schools in preparation for transfer).

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This report should be signed by the Headteacher / Principal / SENCO of the child / young person's educational establishment and must be returned to the local authority within 10 working days of the annual review meeting date. This form must be sent with a copy of all written advice received, including:

- views of the child / young person
- parent / carer views
- for year 5 reviews, the views of all in regards to secondary provision;
- for year 9 reviews, the views of all in regards to planning for adulthood and the possible options post 16.

The form must also be circulated to the child / young person's parent / carers and / or the young person and anyone who contributed to the meeting in writing or in person.

Name:	
Position:	
Signed:	
Date:	

Please return the completed documentation to:

Special Educational Needs,
c/o The Scanning and Support Team,
Lower Ground Floor, Stopford House,
Town Hall,
Stockport
SK1 3XE