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**Annual Review Report for Students in Early Years Settings**

Personal Details

|  |  |
| --- | --- |
| **Name** |  |
| **DOB** |  |
| **Child in Care?** |  |
| **If yes Name of Local Authority** |  |
| **Name of Social Care Officer:** |  |
| **Primary Need** |  |
| **If the Primary Need has changed what is it now** |  |
| **Diagnosis (if any)** |  |

Early Years Education Setting Details

|  |  |
| --- | --- |
| Education Setting (300 characters max): | Hours attended each week: |
|  |  |
|
|

Early Years Funding Information

|  |  |
| --- | --- |
| **Is the child entitled to the extended entitlement? (ie 30 hours):** |  |
| **Does the child access their EYE hours using a 'stretched offer'?:** |  |
| **If yes, please provide the Inland Revenue Eligibility Code: (11 digits max):** |  |

Statutory Review Recommendations

|  |  |
| --- | --- |
| **Date of Review Meeting** |  |
| **Date of last Review Meeting** |  |
| **Date of final EHCP/Statement** |  |
| **Latest EHCP issued by Somerset?:** |  |
| **If not LA that issued EHCP:** |  |
| **Type of Review** |  |
| **Recommendation** |  |
| **Is Section A being amended?** |  |
| **Is Section B being amended?** |  |
| **Is Section C being amended?** |  |
| **Is Section D being amended?** |  |
| **Is Section E being amended?** |  |
| **Is Section F being amended?** |  |
| **Is Section G being amended?** |  |
| **Is Section H1 being amended?** |  |
| **Is Section H2 being amended?** |  |
| **Is Section I being amended?** |  |
| **Is Section J being amended?** |  |
| **Please detail reasons for recommendation:** |  |

Parent/Carer Details

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Title | Forename | Surname | Relationship | Address Different to Student’s? | Address Changed since last Review? | Parental Responsibility |
|  |  |  |  |  |  |  |

**If the Parent/Carer Address is different to the student’s or it has changed since the last Annual Review it will appear here:**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Forename** | **Surname** | **Address Line 1** | **Address Line 2** | **Town** | **County** | **Postcode** |
|  |  |  |  |  |  |  |

**Further Contact Details**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Forename** | **Surname** | **Home Telephone Number** | **Work Telephone Number** | **Mobile Telephone Number** | **E-mail Address** |
|  |  |  |  |  |  |

**Parent/Carer Needs**

|  |  |  |  |
| --- | --- | --- | --- |
| **Forename** | **Surname** | **Does the contact have a disability that we may need to consider when communicating with them?** | **If Yes, Please specify below:** |
|  |  |  |  |

**Student’s Views: Complete Online or Upload?**

|  |
| --- |
| **Will you answer the student's views online or by uploading documents to answer the questions?:** |
|  |

**Student’s One Page Profile**

|  |
| --- |
| **Profile compiled by:** |
|  |

|  |
| --- |
| **Insert Key Person Name Here: (300 characters max):** |
|  |

|  |
| --- |
| **Things people like and admire about me ... (30,000 characters max):** |
|  |

|  |
| --- |
| **Things that are important to me ... (30,000 characters max):** |
|  |

|  |
| --- |
| **My hopes and dreams for the future ... (30,000 characters max):** |
|  |

|  |
| --- |
| **I need some help with ... (30,000 characters max):** |
|  |

Person Centred Documents

If the student or SENCO has chosen the option to answer the Student’s Views questions offline and to upload documents – any documents they have uploaded to the SEND Portal will be listed here:

|  |  |  |
| --- | --- | --- |
| Description of document uploaded (30,000 characters max): | File Type | File Name |
|  |  |  |

Parent/Carer Views

|  |  |  |  |
| --- | --- | --- | --- |
| Please note the name of the Parent/Carer who is submitting these views. If there are exceptional circumstances as to why views are not being submitted please note them here. (30,000 characters max): | Relationship to Young Person: | What is working well? (In education and outside of education) (30,000 characters max): | What is not working well? (In education and outside of education) (30,000 characters max): |
|  |  |  |  |

**Progress and Attainment**

|  |  |
| --- | --- |
| **Individual Progress Tracker - Early Years. Are you uploading this?:** |  |
| **The Early Support Developmental Journal. Are you uploading this?:** |  |

**Progress and Attainment (Attachments)**

If the SENCO has uploaded attachments to demonstrate the student’s Progress and Attainment – any attachments they have uploaded to the SEND Portal will be listed here:

|  |  |
| --- | --- |
| **Attachment File Type:** |  |
| **Attachment File Name:** |  |

**Progress and Attainment (Summary)**

|  |
| --- |
| **Progress and Attainment - a summary of the student's Progress and Attainment based on the data uploaded. (30,000 characters max):** |
|  |

**Changes to Needs - Educational**

|  |
| --- |
| **Have the student's needs changed as detailed in Section B of the EHC Plan?:** |
|  |

|  |  |
| --- | --- |
| **Cognition and Learning** | |
| **Strengths (30,000 characters max):** | **Needs (30,000 characters max):** |
|  |  |
| **Communication and Interaction** | |
| **Strengths (30,000 characters max):** | **Needs (30,000 characters max):** |
|  |  |
| **Social, emotional and wellbeing** | |
| **Strengths (30,000 characters max):** | **Needs (30,000 characters max):** |
|  |  |
| **Sensory and/or physical needs** | |
| **Strengths (30,000 characters max):** | **Needs (30,000 characters max):** |
|  |  |
| **Self-help, independence skills and keeping safe - Strengths (30,000 characters max):** | |
| **Strengths (30,000 characters max):** | **Needs (30,000 characters max):** |
|  |  |

**Change to Needs – Educational (Evidence)**

If the SENCO has uploaded attachments to demonstrate changes to the student’s educational needs – any attachments they have uploaded to the SEND Portal will be listed here:

|  |  |  |
| --- | --- | --- |
| **File Type** | **File Name** | **Description of Evidence for Changes to Educational Needs** |
|  |  |  |

**Changes to Needs – Health**

|  |  |
| --- | --- |
| **Are you submitting a medical report that notes changes to the student's health needs?:** |  |
| **Have you got permission from the student's parent(s) or carer(s) to submit a medical report?:** |  |

**Changes to Needs – Health (Evidence)**

If the SENCO has uploaded attachments to demonstrate changes to the student’s medical needs – any attachments they have uploaded to the SEND Portal will be listed here:

|  |  |  |
| --- | --- | --- |
| **File Type** | **File Name** | **Description of Evidence for Changes to Health Needs** |
|  |  |  |

**Change to Needs – Social Care**

|  |  |
| --- | --- |
| **Are you submitting a social care report?:** |  |
| **Have you got permission from the student's parent(s) or carer(s) to submit a social care report?:** |  |

**Change to Needs – Social Care (Evidence)**

If the SENCO has uploaded attachments to demonstrate changes to the student’s social care needs – any attachments they have uploaded to the SEND Portal will be listed here:

|  |  |  |
| --- | --- | --- |
| **File Type** | **File Name** | **Description of Evidence for Changes to Social Care Needs** |
|  |  |  |

**Early Help Assessment**

|  |  |
| --- | --- |
| **Is there an Early Help Assessment in place?:** |  |
| **If yes, the Early Help Assessment should be uploaded to the Portal as below** | |
| **File Type** |  |
| **File Name** |  |
| **Does an Early Help Assessment need to be completed?:** |  |

**Review of Educational Outcomes**

|  |  |  |
| --- | --- | --- |
| **Please list any of the outcomes in Section E of the EHC Plan which have been met (30,000 characters max):** | **Please provide any comments on the child/young person's progress towards the outcomes. (30,000 characters max):** | **Are there any recommended new outcomes relating to the needs in Section B? (30,000 characters max):** |
|  |  |  |

**Contributors to the Review**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Contributor Role:** | **If Other Specify:** | **Forename** | **Surname** | **Invited?** | **Attended?** | **Contributed a Report?** |
|  |  |  |  |  |  |  |

**Additional Information**

|  |
| --- |
| **Action Plan/Whom/When (eg Request for Advisory Service or ITS update/School/1st April 2019) (30,000 characters max):** |
|  |
| **Additional Comments (30,000 characters max):** |
|  |

**Personal Budget**

|  |  |
| --- | --- |
| **Is a Personal Budget being requested?:** |  |
| **If yes, the Personal Budget Request Form should be uploaded to the Portal as below** | |
| **File Type:** |  |
| **File Name:** |  |

|  |
| --- |
| **Documents to Attach** |

|  |  |  |  |
| --- | --- | --- | --- |
| **Have you got permission from the student's parent(s) or carer(s) to submit this report?:** | **Description of additional report (30,000 characters max):** | **File Type:** | **File Name:** |
|  |  |  |  |