**WOKINGHAM EYFS EDUCATION, HEALTH AND CARE PLAN ANNUAL REVIEW DOCUMENT** (replaces pre/post review form 01.01.2022)

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| **In Wokingham LA, EHC plans will be reviewed annually, and amended at key stages of education, employment, or training, as follows:**  **1. Six weeks before the meeting, settings arrange the annual review meeting date and request professionals’ advice about the child or young person.**  *All stakeholders involved in assessing, planning outcomes, or supporting the child or young person (CYP), are invited to give advice and attend the meeting. This must include seeking the CYP’s / parents’ / carers’ aspirations and views. Professionals should provide advice about outcomes relevant for the child or young person’s age and phase of education, including strategies for their achievement. From year 9 onwards, ideally before, advice-givers must also provide detailed information relating to preparation for adulthood (PfA). The school or educational setting SENCo will usually coordinate preparation for, and host and chair the review meeting.*  **2. At least two weeks before the meeting, settings pre-populate this document, and send it out to invitees, alongside all stakeholder advice received.**  *Prior to the meeting, the setting (with a focus on stakeholder advice thus-far received) should pre-populate and send out this annual review report.* ***Pre-populate with:***   * *Data sections known – e.g., key information, attendance, exclusions, attainment, advice received, etc.* * *Section A: note any new evidence submitted by or at the request of the CYP or parents/ carers; note significant changes in CYP voice and parent/ carer voice forms.* * *Sections A to K: an outline of any significant changes since the last review; in sections A to K, detail new stakeholder advice which may require EHCP amendment.* * *Section E/F: copy outcomes from section E in current EHCP ready to review as met, partially met or unmet. Complete costed provision map - F. considering advice.*   **3. Hold the annual review meeting - this is mandatory and is usually held at the CYP’s educational setting. Add further notes to this pre-populated form.**  *CYP and parents/ carers should be supported to engage fully in the annual review meeting (e.g., a power-point reviewing the year / support from SENDIASS in completing views). The review meeting should focus on progress towards achieving the outcomes specified in the EHC plan. Consideration is also given to what changes might be needed to provision, to help the CYP achieve EHCP outcomes, or whether changes are needed to the outcomes themselves. EHCP outcomes (section E) are overarching objectives which usually set out what needs to be achieved by the end of a phase or key stage of education, to enable the child or young person to progress successfully to the next phase or key stage, e.g., to make progress to enable access to a specific college course. Targets on settings’ ‘individual education plans’ (IEPs) are smaller steps towards outcomes and must be reviewed at least termly. These IEP targets are set and reviewed over the key stage, to enable achievement of the EHCP outcome. Progress will be evidenced and recorded, and targets updated, as part of the setting’s termly review of the CYP’s IEPs. EHCP outcome amendment is not usually expected annually.*  *EHCP provision (section F – education provision, G – health provision and H – social care provision) must state the support stakeholders’ advice say is required to enable outcomes to be achieved and to must address each of the CYP’s special educational needs (section B). Provision should clearly state: what support will be provided; who will deliver the support; duration and frequency of the intervention/ or support; and when its effectiveness on meeting needs and achieving outcomes will be reviewed.*  *EYFS End of key stage reviews*  *Early Years settings should review and amend EHCP strengths, needs, outcomes and provision at the end of EYFS, i.e., end of Reception (FS2) prior to moving into Key Stage 1. When a child has an EHCP in a pre-school setting or nursery (FS1), the annual review should be held, and amendments to the EHCP would not usually be required.*  **4. Within two weeks after the meeting, settings edit, complete, and send out the meeting report to the LA, advice givers and everyone invited.**  *The setting’s representative (usually the SENCo) will have recorded minutes on this review form during the review meeting, while stakeholders are present, and can review and complete these review report document notes afterwards, in sections A to K as appropriate. Key meeting minutes on the report should be concise, noting: significant progress towards outcomes; significant changes; objectively represented stakeholder views; any changes to pre-populated report information. Refer to accompanying advice reports, and any late submitted reports (not shared prior to the meeting), which detail significant changes since the last review, and from which proposals to amend the EHCP have arisen. Note any outstanding actions, and refer to any differences between the setting’s recommendations, and those of others attending the meeting.*  **Include changes on the existing EHCP (*not tracked changes*), for end of key stage/ phase reviews, or interim annual reviews requesting amendments.**  *After the meeting, for end of key stage reviews, settings should make and send out proposed edits to the EHCP, based on advice and meeting report notes. When making changes, objectivity of the SENCo or LA officer is vital. Only amend the EHCP document if all stakeholders’ views are represented, and if all advice-givers agree these amendments are necessary. Include representation from the CYP, parents/ carers, and education, health, and social care advice.*  Use this format for editing the existing EHCP: normal type = no changes/ underlined type/ = amendments/ ~~strikethrough~~ = ~~deletions~~ (agreed by all)  *As the EHCP has been issued with the intention that it will last for a key stage or phase of education, changes should only be made to the EHCP after annual review meetings if amendments are sought. An LA SEN service decision will be made on whether to maintain, amend, or cease the EHCP. LA decision-making for amendment requests will be informed by documentation and evidence in support of significant changes. If no EHCP changes are requested, settings must still complete this form.*  **5. Within four weeks after the review meeting, the LA must decide whether it proposes to maintain, amend, or cease to maintain the plan and will notify the CYP, parents/ carers and the school or other institution attended. If amendments are to be made, the new EHCP will be sent out thereafter.**  *Continuing the EHCP: the existing EHCP is maintained.*  *Amending the EHCP for key stage reviews: If a decision is taken to amend the EHCP following a key stage review, the LA will consider the review report, the accompanying stakeholder reports, and the setting’s EHCP proposed changes. The LA will subsequently amend the EHCP and will share the LA proposed draft EHCP with stakeholders.*  *Amending the EHCP for annual reviews: If a decision is taken to amend the EHCP following an interim annual review, outside key education transition points, the LA will follow the same procedure as for end of key stage review amendments.*  *Reasons to cease to maintain the EHCP:*   * *the young person has met the outcomes as specified in the EHCP* * *the young person has taken up paid employment (excluding e.g., supported apprenticeships)* * *the young person has started higher education (F.E. college or university)* * *the young person aged 18 or over has left education and no longer wishes to engage in further education* * *the young person has turned 25* | | | | |
| **Key Information relating to the Child or Young Person** | | | |
| Child or young person’s (CYP) full (legal) name: |  | Preferred name |  |
| CYP Date of Birth: |  | Gender/ personal pronoun |  |
| CYP Address: |  | Young person (over 16) telephone/email |  |
| Parent/ carer contact 1 |  | Parent/ carer contact 2 |  |
| Relationship to CYP |  | Relationship to CYP |  |
| Address if different to above: |  | Address if different to above: |  |
| Telephone number: |  | Telephone number: |  |
| Email: |  | Email: |  |
| Person with parental responsibility |  | Key contact preferred method of contact (email/ telephone/ post) |  |

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| Primary special educational need |  | Secondary educational need(s) |  |
| Date of issue of EHC final amended plan |  | Date of last review meeting |  |
| Date of current review meeting |  | Where will the review be held |  |
| School, education, or training setting |  | National curriculum year |  |
| Is the child or young person in care of the Local Authority, please state legal status of being looked after (LAC/ Adopted/ Special Guardianship Order): | |  | |
| Has looked after status changed since the last annual review? Yes/ No | |  | |
| Child in Need (CIN) / Child Protection Plan (CPP) | |  | |
| Social worker name/ early help support worker and contact no. (if applicable) | |  | |
| EAL: What language is used at home by child/ parents/ carers? | |  | |
| Is interpretation support needed? If so, describe what help is required. | |  | |
| Is the CYP receipt of pupil premium (PP)? If so, how is PP being used? | |  | |
| Does the CYP receive free school meals? | |  | |
| Traveller/ Armed Forces/ Youth Offender | |  | |
| NHS number | |  | |

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| **Attendance** | Previous Academic Year % | | Current Academic Year to Date % | |
| AA | UA | AA | UA |
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| **Exclusions** | Previous Academic Year | | Current Academic Year | |
| No. of Exclusions | Total No. Days | No. of Exclusions | Total No. Days |
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| **Section A: School’s update on the Child’s and Parents’/ Carers’ profile:** | | | | |
| **Have there been any significant changes in the child or young person’s description under Section A of the EHC Plan that require an EHCP amendment?** | | | **Yes/ No** | |
| *N.B. Refer to Child Voice / Parent/ Carer Voice booklets and review meeting views. Note significant changes only.* | | | | |
| **Child’s views** | | | | |
| Has the child’s views and aspirations changed since the last annual review? | | | | |
| **Parents’/ carers’ views** | | | | |
| Has the parents’ or carers’ views and aspirations for their child changed since the last annual review? | | | | |
| **Section B: Setting overview on the identified EDUCATION strengths and special educational needs of the child.** | | | | |
| **Have there been any significant changes in the child’s description under Section B of the EHC Plan that require an EHCP amendment?** | | | | **Yes/ No** |
| *Refer to education stakeholder assessments and reports*  *(e.g., from: nursery; school; other educational setting; educational psychologist; SALT; OT; etc. Note no changes or significant changes only here. Summarise evidence for proposed stakeholder changes to strengths and needs. Ensure only educational needs is included (e.g., if SALT includes health & education needs)* | | | | |
| **Cognition and learning** | What do stakeholders say has changed? | Any new needs? | | |
| **Communication and social interaction** | What do stakeholders say has changed? | Any new needs? | | |
| **Social emotional and mental health** | What do stakeholders say has changed? | Any new needs? | | |
| **Sensory and/or physical** | What do stakeholders say has changed? | Any new needs? | | |

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| **Section B: (continued) Preparation for Adulthood (PfA) Strengths and Needs** | | |
| *Preparation for adulthood (PfA) strengths and special educational needs of the child. Please indicate under each area of PfA, the skills and knowledge already achieved (strengths), and note what skills and knowledge needs to be developed to succeed in the future. Whatever the phase of education, it is good practice to review PfA needs from the early years, and* ***essential from Year 9****. If making EHCP tracked changes, incorporate PfA needs in ‘section B’ SEND needs- C&L; C&I; SEMH; S&P.*  Refer to the ‘Wokingham PfA outcomes by areas of need’ document for more guidance on how to incorporate PfA needs into the EHCP when making proposed changes. | | |
| **Employment and Training strengths and needs:**  *(The skills and knowledge that will be beneficial in achieving the CYP’s chosen educational outcomes. For example, consider subject option choices alongside long-term career goals.)* | What do stakeholders say has changed? | Any new needs? |
| **Independence strength and needs:**  *(The skills and knowledge that will be beneficial in achieving independence, both in terms of practical skills, independent travel/living, daily life skills, and understanding the world around us.)* | What do stakeholders say has changed? | Any new needs? |
| **Community Inclusion strengths and needs:**  *(The skills and knowledge that will be beneficial in achieving full status as a member of the community. This will include developing friendships; staying safe at home, outdoors, and online; accessing groups; understanding social norms and relationships; and building resilience.)* | What do stakeholders say has changed? | Any new needs? |
| **Health strengths and needs:**  *(The skills and knowledge to understand the concept of being healthy, including the benefits of exercise, healthy food choices and mental health; understanding the need for dental/ vision/ hearing checks; sex education; risks associated with drugs and alcohol and being able to apply information to keep safe)* | What do stakeholders say has changed? | Any new needs? |

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| **Section C: Setting overview of the identified HEALTH strengths and needs of the child/ young person** | | |
| **Have there been any significant changes in the child’s description under Section C of the EHC Plan that require an EHCP amendment?** | | **Yes/ No** |
| *Refer to health stakeholder assessments and reports, (e.g., health care plans; health professional medication reports; therapy reports, SALT; OT; Physiotherapy; Visual or Hearing-Impaired Service; CAMHS; dietician/ eating disorder service, etc.). Note no changes or significant changes only here. Summarise evidence for proposed stakeholder changes to strengths and needs. Ensure only health needs is included (e.g., if SALT includes health & education needs, education needs fit in section B)* | | |
| What does health professionals’ advice say has changed? | Any new needs? | |

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| **Section D: Setting overview of the identified SOCIAL CARE strengths and needs of the child/ young person** | | |
| **Have there been any significant changes in the child’s description under Section D of the EHC Plan that require an EHCP amendment?** | | **Yes/ No** |
| *Refer to social care stakeholder assessments and reports, (e.g., social worker, personal assistant, early help, safeguarding, youth offending team reports…) Note no changes or significant changes only here. Summarise evidence for proposed stakeholder changes to strengths and needs. Ensure only social care needs is included.* | | |
| **H1: Refer to any needs informing provision made by social care for the child/young person in relation to their disability (through personal budget where applicable). Social Care provision must be made for a child/young person under 18 resulting from section 2 of the Chronically Sick & Disabled Persons Act 1970.** | | |
| What does social care advice say has changed? | Any new needs? | |
| **H2: Refer to any needs informing support being made by social care. Include details of needs relating to LAC status / CIN/ CPP/ TAC/ YOS if appropriate.** | | |
| What does social care advice say has changed? | Any new needs? | |

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| **Section E: Outcomes** | | | | | |
| **Have there been any significant changes in the child’s description under Section E of the EHC Plan that require an EHCP amendment?** | | | | | **Yes/ No** |
| ***Prior to reviewing outcomes, ensure you have completed the appropriate attainment table in appendix 1 for their age or phase of education.***  *Refer to stakeholder assessments and reports. Copy overarching outcomes from the current EHCP and indicate if these are met, partially met or ongoing. Note significant changes only. N.B. Minor targets (and steps towards outcomes) will be reviewed on the last year’s termly IEPs. Ensure outcomes link and encompass needs in B, C and D.* | | | | | |
| **Copy outcomes from current EHCP here:** | **Progress made towards the overarching outcome** (quantify or qualify changes)  e.g., Outcome: By the end of Reception, X will read and write words and short sentences from letters and sounds phase 2 and 3, and answer what, who, where and why comprehension questions on texts. | **Progress made towards outcomes** | | | |
| **1** |  | **Met** | **Partially met** | **Unmet** | |
| **2** |  | **Met** | **Partially met** | **Unmet** | |
| **3** |  | **Met** | **Partially met** | **Unmet** | |
| **4** |  | **Met** | **Partially met** | **Unmet** | |
| **5** |  | **Met** | **Partially met** | **Unmet** | |
| **New SMART Outcomes:** | **Propose new outcomes for annual reviews; for key stage reviews, make tracked changes to outcomes.** | **Where can supporting evidence for this proposed new outcome be found?** | | | |
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| **Section F: Special educational provision** | | | | | |
| **Have there been any significant changes in the child’s description under Section F of the EHC Plan that require an EHCP amendment?** | | | | | **Yes/ No** |
| **Provision map***– From within the setting’s own budget, demonstrate how the £10K (element 1 and 2 funding) has been deployed / 20 hours equivalent LSA / TA support.* | | | | | |
| **Desired outcome** | **Provision:**  **Interventions, Aids, Adaptations, Equipment** | **By whom?** | **Frequency/**  **time of intervention per week** | **Cost of intervention** | **Outcome** |
| e.g., Maintain friendships in school, at home and in the community | Social skills training within small group of no more than six peers | Teaching assistant | (2 x 30-minute sessions weekly) | £150  (1 hour @ £15 per week x 10 weeks) | Can take turns with a familiar peer at break/ lunchtime |
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| **Provision map***– From within the setting’s own budget, demonstrate how the high needs EHCP high needs top-up funding has been deployed* | | | | | |
| **Desired outcome** | **Provision:**  **Interventions, Aids, Adaptations, Equipment** | **By whom?** | **Frequency/**  **time of intervention per week** | **Cost of intervention** | **Outcome** |
| e.g., By end of Reception, X will count objects to 20 and match to numerals. | Daily number intervention using concrete resources to count, order and match numerals | 1:1 support  Higher level teaching assistant | 4 x 30 minutes per week | £1440  (2 hours @ £40 per week x 36 weeks) | Can count in 1s to 20, and identify quantities and numerals to 20 |
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| **TOTAL COST OF PROVISION (INCLUDING SETTING’S OWN BUDGET):** | | | | £ | |
| **CURRENT EHCP TOP-UP FUNDING: (+/- COMPARED TO COST OF PROVISION)** | | | | £ | |

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| **Section F: Special educational provision (continued) - Details of external specialist provision** | | | | |
| **Who delivered the provision?** | **What interventions were undertaken?** | **How often, for how long and over what time?** | **How has the intervention been reviewed/evaluated?** | **What were the outcomes for the child?** |
| e.g., Speech and language therapist | Derbyshire language intervention for vocabulary development to expand prepositions / 2-3-word phrases. | Half hour weekly for one term | Assessed by SALT termly  Practice by TA daily | Can use four- and five-word phrases to name objects, describe actions, and use prepositions in, on, over, under. |
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| **Section G: Setting overview of HEALTH provision provided for the child/ young person** | |
| **Have there been any significant changes in the child’s description under Section G of the EHC Plan that require an EHCP amendment?** | **Yes/ No** |
| *The health provision in Section G would usually span a Key Stage or phase of education. If this has concluded, please record changes below. Please ensure that this is linked to any changes to needs referenced in Section C and that there is medical evidence to support any changes.* | |
| What does health professional advice say has changed? | |

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| **Section H1 and H2: Setting overview of SOCIAL CARE provision provided for the child/ young person** | | |
| **Have there been any significant changes in the child’s description under Section H1/H2 that require an EHCP amendment?** | | **Yes/ No** |
| *The social care provision in Section H1 and H2 would usually span a Key Stage or phase of education. If this has concluded, please record changes below. Please ensure that this is linked to any changes to needs referenced in Section D and that there is social care evidence to support any changes.* | | |
| **H1: Refer to any provision made by social care for the child/young person in relation to their disability (through personal budget where applicable). Social Care provision must be made for a child/young person under 18 resulting from section 2 of the Chronically Sick & Disabled Persons Act 1970.** | | |
| What does social care advice say has changed? | | |
| **H2: Refer to any support being made by social care. Include details of needs relating to LAC status / CIN/ CPP/ TAC/ YOS if appropriate.** | | |
| What does social care advice say has changed? | | |
| **Post-review - Summary and Recommendations from the Annual Review meeting** | | |
| **Advice to the Local Authority In the light of the progress reported, the current levels of attainment, and the pupil’s inclusion in the life of the setting, the advice to the local authority, from those contributing to this Annual Review, is to:** | | |
| N.B Remember that an EHCP is written to span a key stage/ phase of education, and it is ultimately the LA decision which determines whether to maintain, amend or cease the plan. The EHCP will rarely be amended within a key stage, unless professionals outline **significant changes.** | Please tick | |
| **Cease to maintain the EHC plan** |  | |
| **Maintain the EHC plan with no amendments** |  | |
| **Maintain and amend the EHC plan (indicate below)** |  | |
| **In exceptional circumstances a reassessment may be necessary. Is a reassessment being requested? Please give reasons in sections above.** |  | |

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| **Do the contents of EHC Plan require updating?** | |
| **Section A: The profile** | **Yes/ No** |
| **Section B: The strengths and special educational needs** | **Yes/ No** |
| **Section C: The strengths and health needs** | **Yes/ No** |
| **Section D: The strengths and social care needs** | **Yes/ No** |
| **Section F: Special educational provision** | **Yes/ No** |
| **Section G: Health provision** | **Yes/ No** |
| **Section H1: Social care provision (CS&DPA 1970)** | **Yes/ No** |
| **Section H2: Social care provision** | **Yes/ No** |

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| **Section I: Educational placement recommendations (Settings cannot make named recommendations, but can suggest the type of setting)** | | |
| **Is the child person appropriately included in their current setting this academic year?** |  | |
| **Will the child person remain appropriate for inclusion in their current setting for the following academic year / next key stage?** |  | |
| **If not appropriate for mainstream, what type of setting is suggested?** |  | |
| **What are parents/ carers and CYP placement views and preferences?** |  | |
| **What are parents/carers and the child’s views?** |  | |
| **Phase Transfer: Entry into school / Junior school / Secondary school / Post 16** |  | |
| **Indicate likely type of placement being considered for next educational phase** |  | |
| **Name of setting of parental / young person preference (if known)** |  | |
| **Section J: Personal Budget** | | |
| **Has a personal budget been identified on the EHC Plan?** | |  |
| **Is the personal budget still correct?** | |  |
| If no, please advise: | | |
| **Is a direct payment being received?** | |  |
| If yes, advise how the outcomes in F, G or H are being met by the direct payment: | | |
| **Is a change to the direct payment being requested?** | |  |
| If yes, please advise: | | |
| **Is a personal budget being newly requested to be identified within the EHC plan?** | |  |
| Is a direct payment being newly requested? | |  |

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| **Name of people contributing to this review** | **Profession of advice-giver/ meeting attendee**  *(Amend accordingly)* | **Documentation submitted**  *(If more than one document, please amend the type/ name of the document and highlight each one submitted)* | **Date of issue of advice documentation in place for the CYP** | **Invited to meeting and written report requested?** | **Written report received?** | **Attended review meeting?** |
| 1 | Parent/ carer | Parent/ carer voice |  | **Yes/ No** | **Yes/ No** | **Yes/ No** |
| 2 | Child/ young person | Child Voice/ Young Person Voice |  | **Yes/ No** | **Yes/ No** | **Yes/ No** |
| 3 | LA officer/ representative | n/a |  | **Yes/ No** | **Yes/ No** | **Yes/ No** |
| 4 | Educational psychologist (EP) | Annual review EP advice/  Most recent or new EP report |  | **Yes/ No** | **Yes/ No** | **Yes/ No** |
| 5 | SENCo | Three terms of reviewed IEPs  Education advice report  Proposed changes made on current EHCP  Completed costed provision map  Annual review meeting minutes |  | **Yes/ No** | **Yes/ No** | **Yes/ No** |
| 6 | Class teacher or tutor from CYP’s current EYFS setting | Annual review advice  Assessment/ review documentation |  | **Yes/ No** | **Yes/ No** | **Yes/ No** |
| 7 | Early years setting or CYP’s new setting | Annual review advice  Attainment / IEP documentation |  | **Yes/ No** | **Yes/ No** | **Yes/ No** |
| 8 | Speech and Language therapist (SALT) | Annual review advice  Assessment/ review documentation |  | **Yes/ No** | **Yes/ No** | **Yes/ No** |
| 9 | Occupational therapist (OT) | Annual review advice  Assessment/ review documentation |  | **Yes/ No** | **Yes/ No** | **Yes/ No** |
| 10 | Visual/ Hearing Impaired Service | Annual review advice  Assessment/ review documentation |  | **Yes/ No** | **Yes/ No** | **Yes/ No** |
| 11 | CYPS/ CAMHS/  Other SEMH therapy service | Annual review advice  Assessment/ review documentation |  | **Yes/ No** | **Yes/ No** | **Yes/ No** |
| 12 | Social Worker/ Early Help  Personal Assistant | Annual review advice  Assessment/ review documentation |  | **Yes/ No** | **Yes/ No** | **Yes/ No** |
| 13 | Health consultant | Annual review advice  Assessment/ review documentation |  | **Yes/ No** | **Yes/ No** | **Yes/ No** |
| 14 | Behaviour support worker | Annual review advice  Assessment/ review documentation |  | **Yes/ No** | **Yes/ No** | **Yes/ No** |
| 15 | Portage support worker | Annual review advice |  | **Yes/ No** | **Yes/ No** | **Yes/ No** |
| 16 | Early Years Inclusion Funding Documentation | Evidence of how Early Years Inclusion Funding has been allocated |  | **Yes/ No** | **Yes/ No** | **Yes/ No** |
| 17 | SENDIASS |  |  | **Yes/ No** | **Yes/ No** | **Yes/ No** |

***Outline main views of meeting attendees. If differing views have arisen between stakeholders in the review, please outline significant differences below.***

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| Summary of child’s views following meeting |
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| Summary of parents /carers’ views following meeting |
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| Summary of professionals’ views following meeting |
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| Summary of setting’s views following meeting |
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| Actions outstanding from the meeting –  *Are any professional/ specialist reports awaited to inform amendments to the EHCP? Do any appointments need to be arranged? Are setting consultations requested? Etc.* |
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| Date of next review | |  |
| Is a member of SEN service requested to attend? | If yes, please give a reason: | |
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| In the event of a query, please advise who to contact and contact number: | | |
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| **Date** |  |
| **Signature** |  |
| **Name & Role of person completing the review form** |  |
| **Signature** |  |
| **Name of parent(s)/ carer(s) attending the review** |  |

**Appendix 1: Attainment Information *– Complete appropriate age-related or ability-related table.***

**N.B. Early Years Settings may prefer to submit Wokingham Early Years Developmental Journal (EYDJ) Outcomes Grid instead of this table.**

**Settings MUST ensure outcomes are recorded for ALL areas of development listed below, i.e., not just prime areas of development.**

**Ensure three termly reviewed SEN support plans/ Individual Education Plans are included with documentation as evidence of the ‘Graduated Response’.**

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| **Early Years Settings/ EYFS**  **Choose best-fit age range**  [Development Matters - Non-statutory curriculum guidance for the early years foundation stage (publishing.service.gov.uk)](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/1007446/6.7534_DfE_Development_Matters_Report_and_illustrations_web__2_.pdf) | | | | | | | | |
| Date assessed | Age | Communication and Language | Physical Development | Personal, social and emotional development | Literacy | Maths | Understanding the world | Expressive arts and design |
|  | **0-2** |  |  |  |  |  |  |  |
|  | **2-3** |  |  |  |  |  |  |  |
|  | **3-4** |  |  |  |  |  |  |  |
|  | **4-5** |  |  |  |  |  |  |  |
| **Comments -If there are sub-area exceptions to best-fit range** | **Playing and exploring / engagement:** | **Listening, attention & understanding:** | **Gross motor skills:** | **Self-regulation:** | **Comprehension:** | **Number:** | **Past and present:** | **Creating with materials:** |
|  |  |  |  |  |  |  |  |
| **Active learning/ motivation:** | **Speaking:** | **Fine motor skills:** | **Managing self:** | **Word reading:** | **Numerical patterns:** | **People, culture and communities:** | **Being imaginative and expressive:** |
|  |  |  |  |  |  |  |  |
| **Creative and critical thinking:** |  |  | **Building relationships:** | **Writing:** |  | **The natural world:** |  |
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| **Other Assessments** *– Record progress over time (e.g., educational psychologist assessments/ processing speed assessments informing exam access arrangements)* | | | | | |
| Area assessed  (e.g., Reading) | Assessment tool / test used | Previous result/score | Date | Most recent result/score | Date |
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