[](http://www.google.co.uk/url?sa=i&rct=j&q=pictures+for+children&source=images&cd=&cad=rja&uact=8&ved=0CAcQjRw&url=http://www.texasdentistryforkids.com/is-mouthwash-ok-for-kids/&ei=nfw9VfCgFNLZaprKgcAO&bvm=bv.91665533,d.d2s&psig=AFQjCNGXbBRce2eFCX3Ue2Pm8KhKOM1M3A&ust=1430212004789360)

**Early Years Special Educational Needs (SEND)**

**Transition Support Planning (into early years settings & Reception)**

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[](http://www.google.co.uk/url?sa=i&rct=j&q=pictures+for+children&source=images&cd=&cad=rja&uact=8&ved=0CAcQjRw&url=http://www.texasdentistryforkids.com/is-mouthwash-ok-for-kids/&ei=nfw9VfCgFNLZaprKgcAO&bvm=bv.91665533,d.d2s&psig=AFQjCNGXbBRce2eFCX3Ue2Pm8KhKOM1M3A&ust=1430212004789360)

**Early Years**

**Transition Information**

**1. Transitions for children with Special Educational Needs and/or disability: from home into an early years setting; changing between providers; or moving from a setting into school.**

It is important that when children start in a setting or move from one setting to another (at any stage of their childhood) they have a comprehensive transition which includes the passing on of all relevant information about them personally, socially, emotionally and academically to the new provision as this helps the receiving practitioner to better anticipate and therefore be able to meet their needs and gives rise to better outcomes, ensuring the best possible chance of a smooth transition and a successful placement.

**Transition for all children**

*Transitions should be seen as a process not an event and should be planned for and discussed with children and parents. Settings should communicate information which will secure continuity of experience for the child between settings.*

*Early Years foundation Stage Practice Guidance, 2008*

If transition is a process, the key to its success lies in the preparation and planning beforehand and the settling in, or follow up, afterwards.

**The voice of the child**

Transition is a time of change and can be a source of both excitement and anxiety for children and for their parents/carers. Throughout the transition process, young children need to feel secure and confident that their needs, wants, likes and dislikes will be understood.

*Early years providers [.....] should know precisely where children and young people with SEN are in their learning and development. They should ensure decisions are informed by the insights of parents and those of children [.....] themselves.*

*DfE and DH (2015) SEN and disability code of practice: 0-25 years, para 1.25*

Young children are dependent on the adults around them to share this important information. Practitioners and parents should be encouraged to share their observations of children’s choices, and the preferences reflected in these, at every stage. Respecting the different ways in which children communicate, toys, pictures, photographs of people and settings, creative role play using puppets and dolls in different scenarios, can all be used to promote communication and enable children to express their views.

**Transition into a setting/new environment**

Planning and preparation for transition may involve a range of different elements, though these are not necessarily separate activities. They are likely to include:

* establishing relationships
* sharing information
* visits
* creating continuities
* preparation in the setting
* training and support
* settling in and follow up

**Transition and settling into your environment/setting**

Transition should also be considered and valued in respect of settling in and including new children into your setting. It is crucial to gather and obtain as much information with regards to the child’s individual requirements prior to the child starting at the setting, in order to make any adjustments or adaptations that will support the inclusion of the child.

On entry you may find it useful to ask the following questions to parents/carers:

* Does your child have Special Educational Needs and or a Disability?
* Does your child have any specialist professionals involved e.g., SALT, Physio, OT, Paediatrician, Community Nursing team? Names and contact details
* Does your child have Social Care, or Early Help involvement?
* Is there a Story So Far, CIN plan or CP plan in place?
* Who is your HV? And when did the HV last make contact?
* Do you have any concerns regarding your child’s learning or development?
* Has your child attended any other childcare setting? Which? Are there any ILDP’s in place?

All parents/carers should be informed of the role of the SENCO, Early Identification, Inclusion and supporting individual children within your setting.

If concerns regarding the child’s learning and development are shared or identified, then the Early Identification and Graduated Approach should be followed.

**Supporting families of children with SEND**

It is important to recognise that transitions can be more difficult for children with special educational needs and/or disabilities. Therefore, when you are considering moving a child into a different room in your nursery or their transition to school, careful planning should be considered and managed to ensure the child’s individual needs are supported.

Most families will have their reception place confirmed around April; therefore, it is vitally important to begin to make plans for their transition as soon as possible after this date.

A person centred transition meeting is an ideal opportunity to enable you to share information about the child’s likes, dislikes, what works well and what support is needed. The meeting should involve the child’s key person, the nursery SENCO (if possible) the child’s parents, staff from the new school and any other professionals involved. This will ensure that all the relevant information is shared, and the transition period is planned carefully with all parties involved clear of the process and what they can do as individuals to support the child.

It is also important that with parental consent, you share your records of SEN support, ILDP’s and development assessments to illustrate what progress the child has made and identify the ongoing support they will need. During the meeting you can decide at what point the information will be transferred to the new setting.

# **2.** **Early Years guidelines for supporting transitions**

* Ensure the child’s full details are recorded accurately
* Use appendix 1 meeting agenda page 13 to support chairing the transition meeting
* Ensure all attendees have completed and signed page 8
* When considering actions on page 9 priority must be given to what will best support the transition phase and the settling-in process
* Ensure the identified actions page 9 are SMART (specific, measurable, achievable, realistic and time bound)
* Ensure each action agreed on page 9 has the initials of the person responsible for carrying it forward inserted in the action number column.
* For consistency include actions for parents / carers / guardians across home and setting where possible
* When completing the action plan (page 9) the early year’s representative must pay attention to the pre-settling-in arrangements for the child
* At the 6–8-week settling-in review pg.14 complete the review then a Short-Term Plan (STP) is to be initiated to support areas of need
* At the end of a transition phase ensure that the whole document is forwarded to the receiving/setting/room if the child is remaining within the same setting and a copy saved in the child’s electronic file

# **3. Child Information Form**

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Which Transition phase**  **is the focus***(circle or delete)* | **In -Transition -** home to setting | | | | | **Between Phases -** room to room | | | | | |
| **Setting name** |  | | | | | | **Name of the SENCO** | | |  | |
| **Child’s Name** |  | | | **Date of Birth** |  | | **Name of Parent / Carer / Guardian** | | |  | |
| **Contact number/s** |  | | | | | | **Email** |  | | | |
| **Home language / spoken** |  | | | | | | **Name of any siblings** | | |  | |
| **Name of current setting (if relevant)** |  | | | | | | **What term / year is the child expected leave**  **to leave your setting?** | | |  | |
| **Name of receiving setting** |  | | | | | |  | | |  | |
| **Does the child have an EHCP** | Yes | No | **If yes, date request was submitted**  **to SEN Team** | | | |  | | **Has an EHCP been issued?** | |  |
| **Is the child an eligible 2YO?** |  | | **If yes, can you confirm you**  **have seen proof** | | | |  | |  | | |
| **Does the child have any disability specialist equipment?** |  | | **If yes, please list items that will be transitioning with the child** | | | |  | | | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Attendees present to agree transition SEN support plan** | | | | | |
| **Name** | **Role** | **Email** | **Contact number** | **Signature** | **Action number** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
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|  |  |  |  |  |  |
|  |  |  |  |  |  |
| **Date of meeting** |  | **Review date** |  | | |

# **4. Action Plan**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Action** | | **Strategy** | **By Whom (initial)** | **By When (date)** | **Outcome** |
| **1** |  |  |  |  |  |
| **2** |  |  |  |  |  |
| **3** |  |  |  |  |  |
| **4** |  |  |  |  |  |
| **5** |  |  |  |  |  |
| **6** |  |  |  |  |  |
| **7** |  |  |  |  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Supporting Documentation (*Please tick which documents you will be submitting alongside this plan)*** | | | | | |
| Story So Far |  | Short Term Plan/ILDPs |  | Education Health and Care Plan |  |
| SALT report/care plan |  | Medical reports / Health Care Plan OT |  | Other (list) |  |
| **Additional Information *(Please record any items discussed relevant to the plan)*** | | | | | |
|  | | | | | |

# **5. Child Passport**

**What people like and admire about me**

**Insert Photo of the child**

**How best to support me?**

**I communicate by**

**What’s important to me**

**Likes and dislikes**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Child Passport** | **Name** |  | **DOB** |  | **Term** |  | **Passport Number i.e., 1, 2, 3** |  |

# **6. Short term Plan**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| ***At the settling-in review consider developing***  ***a STP to support target setting*** | | | | | **Assess** | | | **Plan** | | | | | **DO** | | **Review** | | | |
| **Short Term Plan** | | | | | **Term** | |  | **Child’s Name** | | |  | | | | **DOB** | |  | |
| **Focus on the 3 Prime Areas** *(Minimum 3 targets should be identified)*  **Using the Early Years Outcomes identify areas of focus from the 3 prime listed below. If you have more than 1 target in this area, then use the 2nd target row below** | | | | | **What can Ido now?** | | | **What am I expected to do in eight weeks’ time** | | | | | **How can you help me achieve this?** | | **How did I do?** | | | |
| **Assessment / strengths / difficulties** | | | **Target/ Goals** | | | | | **Actions / strategy and**  **resources** | | **Review of target / goals** | | | |
| **1st**  **Target** | **Personal, Social and Emotional Development** | | | |  | | |  | | | | |  | |  | | | |
| **2nd**  **Target** | *Personal, Social and Emotional Development* | | | |  | | |  | | | | |  | |  | | | |
| **1st**  **Target** | **Communication and Language development** | | | |  | | |  | | | | |  | |  | | | |
| **2nd**  **Target** | *Communication and Language Development* | | | |  | | |  | | | | |  | |  | | | |
| **1st**  **Target** | **Physical Development** | | | |  | | |  | | | | |  | |  | | | |
| **2nd**  **Target** | *Physical Development* | | | |  | | |  | | | | |  | |  | | | |
| **\*This section must be completed at the STP review using the Development Matters as a guide to making the best fit judgement on the child’s development \*** | | | | | | | | | | | | | | | | | | |
| **Personal Social Emotional** | | **Self Confidence**  **Self-Awareness** | **Manage Feeling & Behaviour** | **Making Relationships** | | **Communication** | | | **Listening &**  **Attention** | **Understand** | | **Speaking** | | **Physical** | | **Moving & Handling** | | **Help & Self Care** |
| **Age bands** *i.e 08 -20mths* | |  |  |  | | **Age bands** *i.e.16 26mths* | | |  |  | |  | | **Age bands** *i.e.22 36mths* | |  | |  |
| **Tracking**  *(highlight related milestone)* | | Emerging | Emerging | Emerging | | **Tracking**  *(highlight related milestone)* | | | Emerging | Emerging | | Emerging | | **Tracking**  *(highlight related milestone)* | | Emerging | | Emerging |
| Working  Towards | Working  within | Working  within | | Working  within | Working  within | | Working  within | | Working  within | | Working  within |
| Secure | Secure | Secure | | Secure | Secure | | Secure | | Secure | | Secure |

# **APPENDICES**

# **Appendix 1: Agenda**

|  |
| --- |
| Agenda to support Transition Meetings |

*SENCOs are advised to structure the process of a transition meeting. This agenda will support better*

*information sharing and forward planning for the child moving through the early years’ phases into other settings*

|  |  |
| --- | --- |
| **Guidelines** | |
| *This agenda will support transition planning across the 2 phases*   * **In - Transition** - **Home to early years setting / setting to setting** * **Between phases - Room to room / group to group:**   **Please ensure you gather evidence from the following:**  Early Years (EY) Staff / parents /carers / Educational Psychologist (EP), any professionals who are involved with the child i.e., Speech and Language Therapy (SALT). If professionals are unable to attend the meeting, please request a contribution that can feed into the support plan.   * Ensure all agreed actions are noted on the transition support plan * Once the plan is complete please ensure that you attach all relevant / supporting documents then send a copy securely to the receiving setting * Ensure a duplicate copy is placed in the child’s file (electronic or paper file) | |
| **Documents to be completed** | |
| 1 | Transition Support Plan |
| 2 | Short Term Plan |

*Skip agenda items not applicable dependant on which phase is the focus*

|  |  |
| --- | --- |
| **Item no** | **Agenda** |
| **1** | Welcome and introductions (Chair) |
| **2** | Purpose of the meeting (Chairs |
| **3** | General update on child from parent / carer / guardian / practitioner / key person/ Support services  *i.e., progress, strengths / update the child passport where necessary* |
| **4** | Discuss / review strategies / targets on the short-term plan |
| **5** | Discuss information regarding the setting-in procedures of the receiving setting |
| **6** | Discuss any areas of difficulty that the child may experience at the point of transition?  *Record as action/s for the receiving setting on the action plan* |
| **7** | Discuss the support available from the mainstream services and detail expected interventions available on the action plan |
| **8** | Discuss any further priority areas for development and list as actions |
| **10** | List any reports available i.e., medical / any pending referrals into services |
| **11** | To conclude the transition meeting thank the attendees for their contributions, clarify and agree all actions recorded and once updated all supporting documents will be sent securely to the receiving setting. |

# **Appendix 2: Settling-in Review**

|  |
| --- |
| Settling-in Review |

|  |
| --- |
| **Guidelines** |
| Staff should comment on:   * The child's developing relationships and interactions with other children and adults and the child’s preferred activities * What they have observed the child doing in the six areas of learning and ask parents/carers for their contribution to these observations * You should always give children at least six weeks to settle into a new environment and some children may take longer * If during the six-week settling-in period a concern about an aspect of a child's development becomes apparent, this review would be a good place to sensitively raise/mention your concerns to the parent. * You should then begin the monitoring process with parental consent and refer to appropriate professionals if required i.e., speech and language therapy (SALT). * If a child already has an identified special educational need you should still give them the six weeks to settle in before initiating a short-term plan/ILDP. You should continue using the strategies discussed in the transition meeting and put in place any resources needed to support the child. |

|  |  |  |  |
| --- | --- | --- | --- |
| **Settling name** |  | **Start Date** |  |
| **Child’s name** |  | **DOB** |  |
| **Parent’s name** |  | **Staff member** |  |
| **Date of meeting** |  | **Review date** |  |

|  |  |  |
| --- | --- | --- |
| **1** | **How do you feel your child has settled in?** | |
|  | | |
| **2** | **Have there been any difficulties in your child’s ability to settle? If yes, please specify** | |
|  | | |
| **3** | **Describe any aspect of your child’s learning and development you may have any concerns about?** | |
|  | | |
| **4** | **What do you feel has gone well?** | |
|  | | |
| **5** | **What do you think your child enjoys most about being at nursery? *Discuss the 3 prime areas?*** | |
|  | | |
| **Any other comments** | | |
|  | | |
| **Next steps** | | **What actions can be taken to further support the settling in process?**  ***i.e., extend the settling in for another 2 weeks?*** |
|  | | |

**Appendix 3: Guidance for Settings Planning a 6 monthly Review of an Education, Health and Care Plan (EHCP)**

|  |
| --- |
| **Guidance for Settings**  **Planning a 6 monthly Review of an Education, Health and Care Plan (EHCP)** |

**(Reviews for children under the age of 5 should be carried out within 6 months after the EHCP has been finalised or the previous review.)**

|  |  |
| --- | --- |
| **Time** | **Actions to be taken** |
| **At least 4 weeks prior to the review** | **Start Planning a Person-centred review**: It is the setting SENCO’s responsibility to organise the review   * Confirm a date with parents and professionals. * Consider how you are going to manage the meeting – how many practitioners will attend? How will you arrange cover? * Arrange a room for the meeting/ or facilitate virtually. * Consider how many people will be coming, comfort, privacy, and space * Send to parents the **invitation letter, parents’ report template, the All About Me**. * Send an **invite letter** to all the involved professionals (those listed in section K of the Plan if still involved) requesting attendance and a report. * It is appropriate to ask them to provide enough copies for all the attendees and to suggest a date that you require the report by. * If the child is transferring to a new school or setting, invite practitioners from that setting to attend. |
| **3-4 weeks prior to the meeting** | * SENCO to meet with the key person to collate all the information needed to write the setting report using template **setting report.** * It is fine to use bullet points in each section of the setting report. * Update the development assessments and review the latest APDR * Arrange a meeting with the parents to go through the Plan with them, looking at what changes might need to be recorded (it will be helpful to have a copy of the Plan and go through with a pencil and highlighter, pencilling in changes to discuss at the meeting). * **Update the All About Me.** * Collect child’s views using template **child’s views** |
| **At least two weeks prior to the meeting** | * Copy the setting report and the reports from the other professionals and parents. * Send the reports to all the attendees with a covering letter confirming the contents, a copy of the **agenda**, with any information about parking, route to the building etc (unless virtual). * Ideally the reports will have been sent to you in time for you to circulate them before the meeting but note some professionals may bring their reports along to the meeting. * Build in preparation time on the meeting day to make sure you have time and if possible, the resources to copy any late reports for attendees * Ensure you have arranged cover for the members of staff who will be attending the meeting and contributing. * Decide who will be note taking in the meeting and who will chair – it is sometimes difficult to do both. * Look at the **Head of Setting’s Report** to familiarise yourself with the format and the way the meeting should run and see the **Guidance on completing the report.** * You can begin to prepopulate some parts, for instance the register of attendees’ section 4. * Ensure that you have arranged for a time to write up the meeting notes after the meeting. |
| **On the day of the meeting** | **You will need**   * Spare copies of the agenda. * Your report and the other professionals’ reports (enough for all attendees if these haven’t already been sent) * The child’s SEN Support Plan including updated Development Matters Summary (you may want to have some extra copies, but it is not necessary to have one for all attendees) * Copies of the EHC Plan * A copy of the **Head of Setting’s Report** of the Annual Review Meeting * Tea and coffee (and biscuits!) |
| **At the meeting** | * The chair welcomes everyone and makes the introductions * Ensures that everyone has had time to read the reports and give a little more time if this is necessary * Explains the general way that the meeting will run and the aims for the meeting: * everyone to have the opportunity to briefly discuss the child’s progress * parents to have the opportunity to discuss their views and ask questions * opportunity for all to discuss things that have gone well and not so well * to record any changes that need to be made to the Plan * Participants take their turns to summarise their reports * Parents talk about their experiences and ask questions if required * The chairman draws together the main points that have been raised before moving on to look at the Plan * Everyone looks through the Plan and agrees on any changes that need to be made * The professionals will have provided their changes and advised on the changes to the outcomes and provision, giving the correct wording in their reports * The setting and parents will have already suggested changes and updates that need to be recorded so this need not take too long if everyone agrees on the changes * It is important that transition to the next school is discussed and recorded in the report * If parents want a special school, the reports and discussion must reflect this * Ensure the transfer review section of the report is completed * The chair brings the meeting to an end with a brief summary of the discussions and agreed actions, ensuring that the note taker records who will be doing what It can be appropriate to set the date of the next review at this time if the child will still be under five and at the same setting |
| **Following the meeting** | * The SENCO must complete the **Head of Setting’s Report** of the Annual Review Meeting and send it and all the reports to parents, professionals, and the SEN Team within **10 days** of the meeting. See the **Guidance on completing the report.** * See chart below for what happens once the SEN Team receive the paperwork. |

|  |
| --- |
| **Once the written report of the Annual Review, plus all associated reports/advice etc. received by the SEN Team** |

↓

|  |
| --- |
| **LA Integrated SEN Team decides what action is required in light of the document received.** |

↓

|  |  |  |
| --- | --- | --- |
| **Cease to Maintain** | **Amend** | **No Changes Required** |

↓

|  |  |  |
| --- | --- | --- |
| **SEN Team consults with parents/carers/young person and education setting** | **SEN Team sends copy of the current SEN Plan and amendments notice of intended changes to parents/carers/ young person** | **SEN Team notifies parents/carers/young person that no changes will be made to the EHC Plan and their right to appeal against this decision.** |

↓

|  |  |
| --- | --- |
| **Following Consultation, if EHC Plan is to be ceased parents/carers/ young person notified of their right to appeal** | **Parents/carers/ young person given 15 days to comment/respond** |

↓

|  |  |
| --- | --- |
| **Needs continue to be met without the need for EHC** | **Within 8 weeks of sending amendment notice SEN Team to issue amended EHC Plan and advise parents/carers/young person of right to appeal** |

 

# **Appendix 4 Agenda for 6 monthly Review of an EHCP**

# **Annual Review Agenda for 6 monthly Review of an Education, Health and Care Plan (EHCP)**

**Child’s name**…………………………………………………**D.O. B**………………………

**Date of meeting**…………………………………

**Time**……………………………………………....

**Venue**……………………………………………

**Confirmed attendees**:

**Apologies:**

*N.B. Ensure each attendee has copies of all the reports and give time at the beginning of the meeting for them to be read, if they have only just been provided*

*Offer drinks to all attendees*

* **Welcome and apologies**
* **Introductions**
* **Aims for the meeting** 
  + *everyone to have the opportunity to briefly discuss the child’s progress*
  + *parents to have the opportunity to discuss their views and ask questions*
  + *opportunity for all to discuss things that have gone well and not so well*
  + *to record any changes that need to be made to the Plan*
* **Setting/School report**
* **Professional reports**
* **Parental feedback and questions**
* **Summary**
  + Successes and things that have gone well
  + Areas for development
* **Review of Plan and recommended changes**
* **Transition plans** *(if appropriate)*
* **Home to school travel** *(if appropriate)*
* **AOB/Additional comments**
* **Summary of agreed actions – who and what**
* **Date of next review**



# **Appendix 5 Summary Document for 6 monthly Review of an EHCP**

|  |  |
| --- | --- |
| Name of setting / school / college |  |
| Date of current EHC Plan |  |

1. **CHILD/YOUNG PERSON DETAILS**

|  |  |  |  |
| --- | --- | --- | --- |
| Full Name |  | Preferred Name |  |
| Date of Birth |  | Gender |  |
| Address & contact details |  | Home Language |  |
| Ethnicity |  |
| Unique Pupil No. |  |
| Telephone |  | NHS No. |  |
| Email |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| NC Year Group |  | Is child/young person in their chronological year group? | Y / N |
| Is child/young person eligible for pupil premium? | Y / N | Is child/young person Looked After | Y / N |

1. **ADVICE TO LOCAL AUTHORITY FOLLOWING THIS REVIEW - full details to be included further on**

**(*“EHC Plans are not expected to be amended on a very frequent basis.”*  SEND Code of Practice 0 – 25 Years, 2015, para 9.193)**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Tick as req’d |  | Tick as req’d |  | Tick as req’d |
| Cease to maintain Plan |  | Amend section C |  | Amend section H1 |  |
| Make no amendments |  | Amend section D |  | Amend section H2 |  |
| Amend front page as above |  | Amend section E |  | Request re section I |  |
| Amend section A |  | Amend section F |  | Request re section J |  |
| Amend section B |  | Amend section G |  |

1. **FOR STUDENTS IN YEARS 10 AND ABOVE - POST 16 INTENTIONS**

|  |  |  |  |
| --- | --- | --- | --- |
| Intended post-16 destination, e.g., name of college, work etc |  | Intended Start date |  |
| Is referral to Adult & Family Wellbeing required/completed? | Y/N | Who will refer? |  |
| Is a mental capacity assessment required? | Y/N | Connexions form Preparation for the Future is attached | Y/N |

1. **ATTENDEES**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name | Role | Attended  Y/N | Report provided & attached  Y/N | Other contribution  Y/N |
|  |  |  |  |  |
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|  |  |  |  |  |

1. **REVIEW OF ACTIONS & PROGRESS MADE SINCE PREVIOUS REVIEW/EHCP ISSUED**

|  |  |
| --- | --- |
| Actions agreed at last review & action taken/progress made |  |

|  |
| --- |
| Report on progress towards Long-term Outcomes |

|  |  |  |  |
| --- | --- | --- | --- |
| Outcome from EHC Plan | Strategies used | Progress towards outcome | Is the outcome still required? Yes/No |
| E1 |  |  |  |
| E2 |  |  |  |
| E3 |  |  |  |
| E4 |  |  |  |
| etc |  |  |  |

1. **OTHER DOCUMENTS APPENDED TO THIS REPORT**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Views of the child/young person | Y / N | Views of parents/carers | Y / N | Views of setting/ school/college | Y / N |
| Reports from other professionals please list: |  | | | | |
| Any views expressed at the meeting, but no written report provided |  | | | | |

1. **BRIEF NOTES OF DISCUSSION/VIEWS OF ATTENDEES not covered elsewhere**

|  |
| --- |
|  |

1. **RECOMMENDATION TO CEASE EHC PLAN - please indicate reason(s) by ticking**

|  |  |  |  |
| --- | --- | --- | --- |
| Outcomes have been achieved |  | Student can be supported at SEN Support level |  |
| Student is leaving school and will not require such a high level of support at college/apprenticeship |  | Student is leaving education |  |

1. **RECOMMENDED AND NECESSARY CHANGES TO EHC PLAN - as indicated on front page of this document. (*“EHC Plans are not expected to be amended on a very frequent basis.”*  SEND Code of Practice 0 – 25 Years, 2015, para 9.193)**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Section | Complete the requested changes below. (Changes to provision must be supported by written evidence) | | | | | | Evidence e.g. SALT report summary |
| A | Please attach updated Section A/All About Me | | | | | |  |
| B |  | Strengths | | | Areas for development | |  |
| Communication & Interaction |  | | |  | |
| Cognition & Learning |  | | |  | |
| Social, Emotional & Mental Health |  | | |  | |
| Sensory & Physical |  | | |  | |
| C |  | | | | | |  |
| D |  | | | | | |  |
| E |  | | | | | |  |
| F | Provision | | | Who will do it? | | When will it happen? |  |
|  | | |  | |  |
| G | Provision | | | Who will do it? | | When will it happen? |  |
|  | | |  | |  |
| H1 | Provision | | | Who will do it? | | When will it happen? |  |
|  | | |  | |  |
| H2 | Provision | | | Who will do it? | | When will it happen? |  |
|  | | |  | |  |
| I |  | | | | | |  |
| J | Outcomes for which PB is to be used | | Provision Arrangements proposed | | | Amount of PB requested |  |
|  | |  | | |  |

1. **ANNEX A (or IEP etc) AMENDMENTS TO BE APPENDED TO EHCP (these do not require amendments to the EHC Plan)**

|  |  |
| --- | --- |
| Amendments |  |
| To be made by |  |
| By when |  |

1. **ACTION REQUIRED AS A RESULT OF THIS REVIEW**

|  |  |
| --- | --- |
| **Action** | **Who, of the attendees, is responsible?** |

1. **ANY OTHER INFORMATION not recorded elsewhere**

|  |
| --- |
|  |

**13. CONFIRMATION OF ACCURACY OF SUMMARY**

|  |  |
| --- | --- |
| Compiled by (name & role) |  |
| Signed |  |
| Date |  |

1. **Phase Transfers only. Please arrange for this to be completed at the Annual Review. In the Annual Review for NCY -1, 1 (infant schools only) 5 and students intending to transfer to FE provision.**

**Transfer Review Summary**

|  |
| --- |
| **To be completed by school**  Recommendation from the Annual Review on type of provision required e.g., mainstream/RP/Special etc: |
| **To be completed by parents/carers or young person**  Preference(s) for next school/setting:  (Transport may not be provided if this is not the nearest appropriate school and/or is under 3 miles)  **Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Print name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Relationship to child: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |

**GUIDANCE NOTES FOR COMPLETING THE SUMMARY DOCUMENT**

|  |
| --- |
| 1. **Details of Child/Young Person and Parent/Carer**   A repeat of information contained in the EHCP but repeated for ease of reference and to allow a double check for administrative purposes. Details of carers/looked after status/pupil premium eligibility may have altered between reviews. |
| **2. Advice to Local Authority**  This summarises the conclusions reached by the Review which have an effect on the child/young person’s story or the outcomes (and hence resources etc). It can be to cease the EHCP or to make no amendments. If changes to the Plan are required, or there is a recommendation to cease an EHCP these need to be detailed in Section 9. and must be accompanied by relevant evidence. Please be mindful that the Department for Education states that “EHC plans are not expected to be amended on a very frequent basis.” Para 9.193 SEND Code of Practice, January 2015. |
| **3. Information relating to Students in Years 10 and above**  For these older students it is essential that this section is completed at each annual review. |
| **4. – 7. Background to Review and Discussion**  A record of those invited to attend; those who attended; and the information provided to assist the review, not all of which may be added to the Plan.  A record of the discussion during the Review of the progress against the outcomes determined in the Plan and in Annex A. It should record those outcomes that have been met and the reasons why any outcomes have not been achieved. |
| **8. Recommendation to Cease the EHC Plan**  It will need to focus on the actions required following the Review to support the achievement of any revised outcomes or to make further progress towards the outcomes already set out in the Plan. |
| **9. Recommended Amendments to the EHC Plan**  Clear details of the amendments requested; and where to find the evidence which supports them. These will be considered by the Local Authority and where appropriate an amended EHCP will be issued. |
| **10. Annex A (or equivalent document)**  Details of the amendments to short- and long-term outcomes, who is to support them and by when they should be achieved. |
| **11. Actions Required Following the Meeting**  It will need to focus on the actions required following the Review to support the achievement of any revised outcomes or to make further progress towards the outcomes already set out in the Plan. |
| **12. – 13. Any other Information of note and Confirmation of Accuracy of Summary**  This is to be signed and dated by the Headteacher/Head of setting or by the chair of the review meeting on their behalf. The document must be sent to the SEN Team within 10 calendar days, in Word format. |
| **14. Transfer Review Summary (complete for phase transfers only)**  It is essential that the annual review recommendations for future provision are completed. Schools and other professionals should not identify particular schools/settings, rather the type of setting i.e., mainstream, RP or special which is deemed to be appropriate.  Parents should be asked to indicate their preferred next school/setting/college and sign at the bottom of the page. |

# **Appendix 6 Annotated Summary Document for 6 monthly Review of an EHCP**

|  |  |
| --- | --- |
| Name of setting / school / college |  |
| Date of current EHC Plan |  |

1. **CHILD/YOUNG PERSON DETAILS**

|  |  |  |  |
| --- | --- | --- | --- |
| Full Name | A repeat of information contained in the EHCP but repeated for ease of reference and to allow a double check for administrative purposes.  Details of carers/looked after status/pupil premium eligibility may have altered between reviews.  It is helpful if you can indicate if information has changed. For example, by putting: “note new address” | Preferred Name |  |
| Date of Birth |  | Gender |  |
| Address & contact details |  | Home Language |  |
| Ethnicity |  |
| Unique Pupil No. |  |
| Telephone |  | NHS No. |  |
| Email |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| NC Year Group |  | Is child/young person in their chronological year group? | Y / N |
| Is child/young person eligible for pupil premium? | Y / N | Is child/young person Looked After | Y / N |

1. **ADVICE TO LOCAL AUTHORITY FOLLOWING THIS REVIEW - full details to be included further on**

**(*“EHC Plans are not expected to be amended on a very frequent basis.”*  SEND Code of Practice 0 – 25 Years, 2015, para 9.193)**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Tick as req’d | Indicate clearly with a ✓ whether   * the plan should be ceased to be maintained OR * no amendments need to be made OR * The section/sections where amendments need to be made. | Tick as req’d |  | Tick as req’d |
| Cease to maintain Plan |  | Amend section C |  | Amend section H1 |  |
| Make no amendments |  | Amend section D |  | Amend section H2 |  |
| Amend front page as above |  | Amend section E |  | Request re section I |  |
| Amend section A |  | Amend section F |  | Request re section J |  |
| Amend section B |  | Amend section G |  |

1. **FOR STUDENTS IN YEARS 10 AND ABOVE - POST 16 INTENTIONS**

|  |  |  |  |
| --- | --- | --- | --- |
| Intended post-16 destination, e.g., name of college, work etc  Not Applicable for Early Years Children |  | Intended Start date |  |
| Is referral to Adult & Family Wellbeing required/completed? | Y/N | Who will refer? |  |
| Is a mental capacity assessment required? | Y/N | Connexions form Preparation for the Future is attached | Y/N |

1. **ATTENDEES**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name  List of those invited to the meeting. Parents/carers and all involved professionals should be invited, including those listed on the EHCP. Indicate whether they attended, whether they submitted a report or other contribution (i.e., verbally at meeting). Everyone invited will need to receive a copy of this completed form and any associated reports. | Role | Attended  Y/N | Report provided & attached  Y/N | Other contribution  Y/N |
|  |  |  |  |  |
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|  |  |  |  |  |

1. **REVIEW OF ACTIONS & PROGRESS MADE SINCE PREVIOUS REVIEW/EHCP ISSUED**

|  |  |
| --- | --- |
| Actions agreed at last review & action taken/progress made  Note any actions from the last review and any related action undertaken |  |
| Report on progress towards Long-term Outcomes (refer to Annex A reviews and append as necessary)  Summary of progress towards long term outcomes –any significant changes to outcomes will be indicated in section 9 of this form. |  |

1. **OTHER DOCUMENTS APPENDED TO THIS REPORT**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Views of the child/young person  Clearly indicate the documents that will be attached to the report and remember to include them with your form!  If issues are discussed at the meeting but the parents’ or professionals’ views are not included in reports, details should be added here. | Y / N | Views of parents/carers | Y / N | Views of setting/ school/college | Y / N |
| Reports from other professionals please list: |  | | | | |
| Any views expressed at the meeting, but no written report provided |  | | | | |

1. **BRIEF NOTES OF DISCUSSION/VIEWS OF ATTENDEES not covered elsewhere**

|  |
| --- |
| Summary – of any points of discussion that are not recorded elsewhere in the report. Can be bullet pointed |

1. **RECOMMENDATION TO CEASE EHC PLAN - please indicate reason(s) by ticking**

|  |  |  |  |
| --- | --- | --- | --- |
| Outcomes have been achieved |  | Student can be supported at SEN Support level |  |
| Student is leaving school and will not require such a high level of support at college/apprenticeship |  | Student is leaving education |  |

1. **RECOMMENDED AND NECESSARY CHANGES TO EHC PLAN - as indicated on front page of this document. (*“EHC Plans are not expected to be amended on a very frequent basis.”*  SEND Code of Practice 0 – 25 Years, 2015, para 9.193)**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Section | Complete the requested changes below. (Changes to provision must be supported by written evidence) | | | | | | Evidence e.g. SALT report summary |
| A | Please attach updated Section A/All About Me | | | | | |  |
| B | Indicate clearly on this form any alterations to the child’s EHCP. The lettering corresponds with the sections of the EHCP.  Also indicate attached evidence that supports the need for changes.  The boxes on the form will expand to allow you to add more information.  These alterations will be considered by the Local Authority and where appropriate an amended EHCP will be issued | Strengths | | | Areas for development | |  |
| Communication & Interaction |  | | |  | |
| Cognition & Learning |  | | |  | |
| Social, Emotional & Mental Health |  | | |  | |
| Sensory & Physical |  | | |  | |
| C |  | | | | | |  |
| D |  | | | | | |  |
| E |  | | | | | |  |
| F | Provision | | | Who will do it? | | When will it happen? |  |
|  | | |  | |  |
| G | Provision | | | Who will do it? | | When will it happen? |  |
|  | | |  | |  |
| H1 | Provision | | | Who will do it? | | When will it happen? |  |
|  | | |  | |  |
| H2 | Provision | | | Who will do it? | | When will it happen? |  |
|  | | |  | |  |
| I |  | | | | | |  |
| J | Outcomes for which PB is to be used | | Provision Arrangements proposed | | | Amount of PB requested |  |
|  | |  | | |  |

1. **ANNEX A (or IEP etc) AMENDMENTS TO BE APPENDED TO EHCP (these do not require amendments to the EHC Plan)**

|  |  |
| --- | --- |
| Amendments |  |
| To be made by |  |
| By when |  |

1. **ACTION REQUIRED AS A RESULT OF THIS REVIEW**

|  |  |
| --- | --- |
| **Action**  List any actions to support the achievement of any revised outcomes, or to make further progress towards the outcomes already set out in the detail, who is responsible for undertaking the action or coordinating the action. | **Who, of the attendees, is responsible?** |

1. **ANY OTHER INFORMATION not recorded elsewhere**

|  |
| --- |
| Add any additional information that does not fit into any other part of the form. |

**13. CONFIRMATION OF ACCURACY OF SUMMARY**

This is to be signed and dated by the Head of Setting or by the chair of the review meeting on their behalf. The document must be sent to the SEN Team within 10 calendar days, in Word format.

[senteam@bury.gov.uk](mailto:senteam@bury.gov.uk)

It is a good idea to put a contact phone number and email in case of queries.

|  |  |
| --- | --- |
| Compiled by (name & role) |  |
| Signed |  |
| Date |  |

1. **Phase Transfers only. Please arrange for this to be completed at the Annual Review. In the Annual Review for NCY -1, 1 (infant schools only) 5 and students intending to transfer to FE provision.**

**Transfer Review Summary**

|  |
| --- |
| **To be completed by school**  Recommendation from the Annual Review on type of provision required e.g., mainstream/ARP/Special etc:  This form should be completed if the child is due to transfer to school  This section should be completed by the SENCO or Head of Setting  It is essential that the annual review recommendations for future provision are completed. Schools and other professionals should not identify schools/settings, rather the type of setting i.e., mainstream, RP or special, whichever is deemed to be appropriate |

|  |
| --- |
| **To be completed by parents/carers or young person**  Preference(s) for next school/setting:  (Transport may not be provided if this is not the nearest appropriate school and/or is under 3 miles)  This section should be completed by the parents or carers.  Parents should be asked to indicate their preferred next school/setting/college and sign at the bottom of the page.  **Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Print name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Relationship to child: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |

**GUIDANCE NOTES FOR COMPLETING THE SUMMARY DOCUMENT**

|  |
| --- |
| 1. **Details of Child/Young Person and Parent/Carer**   A repeat of information contained in the EHCP but repeated for ease of reference and to allow a double check for administrative purposes. Details of carers/looked after status/pupil premium eligibility may have altered between reviews. |
| **2. Advice to Local Authority**  This summarises the conclusions reached by the Review which have an effect on the child/young person’s story or the outcomes (and hence resources etc). It can be to cease the EHCP or to make no amendments. If changes to the Plan are required, or there is a recommendation to cease an EHCP these need to be detailed in Section 9. and must be accompanied by relevant evidence. Please be mindful that the Department for Education states that “EHC plans are not expected to be amended on a very frequent basis.” Para 9.193 SEND Code of Practice, January 2015. |
| **3. Information relating to Students in Years 10 and above**  For these older students it is essential that this section is completed at each annual review. |
| **4. – 7. Background to Review and Discussion**  A record of those invited to attend; those who attended; and the information provided to assist the review, not all of which may be added to the Plan.  A record of the discussion during the Review of the progress against the outcomes determined in the Plan and in Annex A. It should record those outcomes that have been met and the reasons why any outcomes have not been achieved. |
| **8. Recommendation to Cease the EHC Plan**  It will need to focus on the actions required following the Review to support the achievement of any revised outcomes or to make further progress towards the outcomes already set out in the Plan. |
| **9. Recommended Amendments to the EHC Plan**  Clear details of the amendments requested; and where to find the evidence which supports them. These will be considered by the Local Authority and where appropriate an amended EHCP will be issued. |
| **10. Annex A (or equivalent document)**  Details of the amendments to short- and long-term outcomes, who is to support them and by when they should be achieved. |
| **11. Actions Required Following the Meeting**  It will need to focus on the actions required following the Review to support the achievement of any revised outcomes or to make further progress towards the outcomes already set out in the Plan. |
| **12. – 13. Any other Information of note and Confirmation of Accuracy of Summary**  This is to be signed and dated by the Headteacher/Head of setting or by the chair of the review meeting on their behalf. The document must be sent to the SEN Team within 10 calendar days, in Word format. |
| **14. Transfer Review Summary (complete for phase transfers only)**  It is essential that the annual review recommendations for future provision are completed. Schools and other professionals should not identify schools/settings, rather the type of setting i.e., mainstream, RP or special which is deemed to be appropriate.  Parents should be asked to indicate their preferred next school/setting/college and sign at the bottom of the page. |

# Appendix 7: SEN Support in Early Years - A Graduated Approach

It is a recommendation that all practitioners implementing SEN support (the graduated approach) must record all agreed targets/strategies on the Short-Term Plan (STP) or ILDP proforma. All STPs/ILDPs must be reviewed every 8 weeks to monitor the effectiveness of the interventions delivered.

**Plan**

Where SEN Support has been agreed, the practitioner and the SENCO should agree, in consultation with the parent:

• The outcomes they are seeking for the child

• The interventions and support to be put in place

• The expected impact on progress, development,

• Date for review

Plans should:

• Take into account the views of the child

• Select the interventions and support to meet

the outcomes identified

• Base interventions and support on reliable evidence of effectiveness

• Be delivered by practitioners with relevant skills and knowledge

• Identify and address any related staff development needs

*SEN and disability code of practice, para 5.40*

**This cycle of action should be revisited regularly and in increasing detail to identify the best way of securing good progress for the child**

At each stage parents should be part of the review contributing to the assessment and planning of intended outcomes and actions with the setting.

**Assess**

• Early years’ practitioner works with the setting SENCO and the child's parents to bring together all the information and analyse the child's needs

• The initial assessment should be reviewed regularly to ensure support is matched to need

• Where there is little or no improvement a referral for a specialist assessment maybe necessary with parental consent

*SEN and disability code of Practice, para 5.39*

Plan

Assess

Child

**Review**

On the agreed date, the practitioner and SENCO working with the child’s parents, and taking into account the child’s views, should:

• Review the effectiveness of the support

• Review the impact of the support on the child’s progress

• Evaluate the impact and quality of support

In the light of child’s progress, they agree:

• Any changes to the outcomes

• Any changes to the support and

• Next steps

*SEN and disability code of practice, para 5.43*

*SEN and disability code of practice, para 5.43*

# Do

Review

*Special educational needs are thought of*

*in 4 broad areas:*

*Communication and Interaction,*

*Cognition and Learning,*

*Social Emotional and Mental Health,*

*Sensory and / or Physical*

**Do**

The early years’ practitioner, usually the child’s key person:

• Remains responsible for working with the child

on daily basis

• Oversee the implementations of the agreed interventions or programmes

The SENCO supports the practitioner, key person in:

• Assessing the child’s response to action taken

• Problem solving

• Advising on effective implementation of support

*SEN and disability code of practice, para 5.42*

# Appendix 8: Requesting Statutory Assessment (EHC Assessment)

If you feel a child within your setting/you are working with requires an EHC Assessment, you are required to complete the attached Request for EHC Form, the form is used for children and young people 0-25.

Once completed the request to assess form will need to be returned (emailed) to the SEN Team all details are on the attached Request for an EHC Assessment form.

**Required documentation for an EHC request for assessment**



Please see statutory assessment (EHC Assessment) timeframes below.

**Stage 1 (Week 0-6)**

* The nursery working with the child make a request for an EHC assessment to the Local Authority (LA).
* A Multi-Agency Panel will consider the information provided and decide if the request meets the thresholds for an EHC assessment.
* An SEN Caseworker (SEN Team) will contact the parents to explain the process. The Caseworker will be the point of contact for families during the assessment period.
* Professionals and education providers should ensure that they provide support and information to the parent and child throughout the process.
* Relevant professionals will be asked to provide any information that will assist the LA in making a decision as to whether the assessment should go ahead.
* The Education Provider, Health Services, Social Care, Educational Psychology Service, and any other relevant professionals will be told whether an EHC assessment is to go ahead.

**Stage 2 (Weeks 6-12)**

* The assessment process starts, and additional information is collected.
* Parents will receive a keep in touch (KIT) call from an SEN Caseworker. A person-centred planning meeting will be offered.
* All professionals involved with the child will be asked to provide a summary of their assessments which identifies the child’s strengths and areas of need and short- and long-term outcomes. Meetings with child and parents are arranged, as necessary.
* All relevant information gathered by professionals should ensure that families only have to ‘tell it once’.
* Professionals will undertake any relevant assessments and will provide information to identify the needs of the child, identify resources which are supporting the child already; identify the outcomes short and long term that would be appropriate in their professional view and identify the resources from their Service that will be needed to meet the outcomes they are recommending.

The information provided by professionals for the assessment should be co-produced with the parents, child.

Wherever possible assessment within and across agencies should be co-ordinated to avoid too much disruption for the family.

**Stage 3 (Weeks 12-16)**

* The SEN Caseworker ensures that all the information needed for the assessment is gathered.
* A person-centred planning meeting is held.
* The Multi-Agency SEND Panel meets to:
* Agree whether or not an EHC plan is required; and agree the level of resources/support from each Agency that is required to meet the child’s needs.
* If the Panel agrees to an EHC plan a draft plan is sent to the parents for consideration. The SEN Caseworker will contact the family and discuss the outline plan.
* If an EHC plan is not agreed, then a multi-agency support plan will be drawn up and sent to the parents.
* Professionals identified can attend the Person-Centred Planning Meeting.
* Professionals will receive and check the draft EHC plan to ensure that their advice is properly represented in the plan.

If an EHC plan is not agreed, then they may be invited to a meeting to discuss how everyone involved can work together to achieve the outcomes identified for the child.

**Stage 4 (weeks 16-20)**

* Further meetings will be arranged if they are requested.
* Any changes requested are considered and where possible are made to the draft plan.
* Consultations with schools take place.
* Further amended plans are issued if there have been significant changes to the plan.
* The SEN Caseworker will explain if changes that have been requested are not made to the plan.
* The plan is finalised, signed, and sent to parents, the educational establishment named on the plan and all professionals who have provided advice for the plan.
* Professionals will check the draft EHC plan to ensure that their advice has been fully included. They will feedback to the SEN caseworker if further changes are needed.
* The final plan is issued to professionals and the educational establishment with an indication of when the plan should be reviewed.

**Stage 5 (Weeks 20+)**

* Parents can request further meetings about the final plan.
* Parents can submit an appeal following mediation if they are unhappy with parts B, F and I of the final EHC plan and if this cannot be resolved locally.
* The Education Provider meets with child and parents to agree the short-term targets.
* The LA will remind the Education Provider when a review must take place.
* The Education Provider will arrange the review of the EHC Plan.
* The review is held and any significant changes to the plan are sent to the SEN Team for consideration of any amendments required.
* The SEN team will inform parents as to whether changes to the EHC plan are to be made.