

**SEN SUPPORT REVIEW REPORT**

The vast majority of children and young people with SEN or disabilities will have their needs met within local mainstream early years’ settings, schools and colleges. The SEN support review process is an essential element of that provision.

Where a child/young person is identified as having SEN, actions should be taken to remove barriers to learning. Educational settings should put effective SEN provision in place.

This SEN support should take a form of **ASSESS – PLAN – DO – REVIEW cycle**. It represents a graduated approach and allows for:

* Growing understanding of the child/young person’s needs
* Decisions and actions to be revisited, refined and revised
* Ensuring that the SEN support secures educational progress and agreed outcomes

This review form should help to guide parents, young people and practitioners through the review process and address all aspects of a child/young person’s life. It incorporates holistic and person centred principles and approaches.

How to carry out a good quality SEN Support review:

* Make sure meetings are arranged well in advance and the right people are invited **🗸**
* Give parents, children and young people the right information before the review meeting so that they have time to prepare**🗸**
* Make sure that person centred approach, tools and principles are used throughout the process**🗸**

For more detailed guidance on SEN Support please refer to the SEND Code of Practice 0-25:

* Early Years Settings – **Section 5**
* Schools – **Section 6**
* Further Education – **Section 7**

**How to use the SEN Support form?**

In Bath and North East Somerset we want to encourage consistent application of the principles of good quality SEN support reviews across all age groups in all types of educational settings. This document is intended to give a continuity of evidence and record keeping of the graduated response. It is recommended that it is used by all settings. It should also be the prime source of information during transition times.

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| --- | --- | --- | --- | --- |
|  | **Early Years** | **School age**  **(KS1 – Year 8)** | **School age**  **(Yr 9 – Yr 11)** | **Post 16** |
| **Part 1** | **🗸** | **🗸** | **🗸** | **🗸** |
| **Part 2** | **🗸** | **🗸** | **🗸** | **🗸** |
| **Part 3** | **🗸** | **🗸** | **🗸** | Optional (to be completed with agreement of the young person) |
| **Part 4** | Only complete page relevant to early years | Only complete page relevant to school age | Only complete page relevant to school age and preparation for adulthood post 16 | Only complete page relevant to post 16 |
| **Part 5** | **🗸** | **🗸** | **🗸** | **🗸** |
| Only complete sensory need section if relevant | | | |
| **Part 6** | **🗸** | **🗸** | **🗸** | **🗸** |
| **Part 7** | **🗸** | **🗸** | **🗸** | **🗸** |

# My Plan at SEN Support

**Version Number \_\_\_**

Picture

**Child/Young person Name:**

**Date of My Plan at SEN Support:**

**Part 1) Personal Details**

**Child/Young Person Information**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Child/Young person’s first name** |  | **Child/Young person's last name** |  | **Also known as (if applicable)** |  |
| **Date of Birth** | **dd / mm / yy** | **Year Group** |  | **Home Language(s)** |  |
| **Gender** |  | **Ethnicity** |  | **Religion** |  |
| **Address** |  | | | **Postcode** |  |
| **UPN Number** |  | | **NHS Number** |  | |
| **GP Name** |  | | **GP Contact Details** |  | |
| **Is the child/young person looked after by a local authority?** | **Yes / No** | **If YES please give the name of the local authority** |  | **Social Care Involvement?** | **Yes / No** |
| **Name of Social Worker** |  |
| **Name of parent(s)/ carer/those with parental responsibility** |  | | | **Relationship to child** |  |
| **Address (if different from above)** |  | | | **Postcode** |  |
| **Tel Number** |  | **Email address** |  | | |
| **Do parents need support in accessing information?** | | **Yes / No** (if yes please give details about support offered ) |  | | |

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| **Current setting(s)/school/college name & address** |  | | **SENCo / Inclusion Manager / SEN lead** |  |
| **Date of Admission** |  | **Sessions/Attendance** |  | |

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| **Information about all involved with the child/young person** | | | | | | | |
| **Name of person** | Post held / service | **Address** | **Telephone Number** | **Nature, level, frequency of support** | **Most recent involvement**  **-Date**  **-Type of involvement** | **Report attached**  **(please tick)** | **Attendance at SEN support**  **meeting**  **(please tick)** |
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**Part 2) Child/Young Person’s Voice / All about me (EXAMPLE ONLY)**

The following section should be completed using a person-centred approach. It is all about what is important **TO** the child/young person. This information usually comes from face to face meetings or informal discussions; in order to avoid speaking ‘on behalf’ of the child/young person they should be encouraged to complete it themselves, if necessary with support. Children/young people may decide to use pictures, symbols, text or any other way of expressing their views, they can answer some or all questions, as relevant to them (suggested questions may be amended)

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ One Page Profile**

Child/Young Person’s chosen Photos

(Please ensure photo shots of other children/young people are not shown in this photo)

**What People Like and Admire About Me**

**This section is intended to reflect the child’s views, wishes hopes and aspirations for the future**

**Note of how this was compiled and by whom – only use first person if written by or quoting child/young person – must state if written on behalf of child/young person and how.**

**Children/young people of all ages can give their views but appropriate support might have to be provided (relevant to child/young person’s age and special educational need)**

**This should be about the child/young person’s dreams, at times, in view of the adults they may be unrealistic!**

**Think about how I prefer to communicate**

**How I communicate, how I feel, behave and get on with others,**

**What I can do for myself**

**For young people 14+ include my aspirations for: Education,**

**Employment & training, Independence and housing,**

**Health, Friends,**

**Relationships,**

**Being part of my community**

**How I want to be supported**

**What is important to me**

**My hopes and wishes for the future**

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| **Part 3) Parent / Carer's Views** (continue on a separate sheet if necessary) |
| 1. **What are the hopes and aspirations for your child/young person?** 2. **Your child/young person now** (what do they enjoy, what are their strengths, what do they find difficult; this may include information about relationships, friendships, how they communicate, comments about their level of independence, personal care or any other aspects of their lives you feel are important) 3. **What is working well and what can be challenging** (how do you support your child/young person, how best to communicate, what works best, what could improve) 4. **Are there any other comments you wish to make?** |

**Part 4) Educational Assessments and Progress.** Please only complete the section which is relevant to the age of the child.

The age appropriate section below **must be completed in full in all cases.** Please complete the individual progress checker by writing and indicating whether the child is Emerging (E), Developing (D) or Secure (S) in that particular area.

**Early Years Foundation Stage (EYFS) - 2 year olds to Reception**

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| **Age/Stage of Development** | | | | | | | | |
| **Age in Months:**  **Date Completed:** | | **0-11**  **months** | **8-20**  **months** | **16-26**  **months** | **22-36**  **months** | **30-50**  **months** | **40-60+**  **months** | **ELG** |
| **Prime Areas of Learning** | |  |  |  |  |  |  |  |
| **Personal, Social and Emotional Development** | **Making relationships** |  |  |  |  |  |  |  |
| **Self-confidence and self-awareness** |  |  |  |  |  |  |  |
| **Managing feelings and behaviour** |  |  |  |  |  |  |  |
| **Communication and Language** | **Listening and attention** |  |  |  |  |  |  |  |
| **Understanding** |  |  |  |  |  |  |  |
| **Speaking** |  |  |  |  |  |  |  |
| **Physical Development** | **Moving and handling** |  |  |  |  |  |  |  |
| **Health and self-care** |  |  |  |  |  |  |  |
| **Specific Areas of Learning** | |  |  |  |  |  |  |  |
| **Literacy** | **Reading** |  |  |  |  |  |  |  |
| **Writing** |  |  |  |  |  |  |  |
| **Mathematics** | **Numbers** |  |  |  |  |  |  |  |
| **Shape, space and measure** |  |  |  |  |  |  |  |
| **Understanding the World** | **People and communities** |  |  |  |  |  |  |  |
| **The world** |  |  |  |  |  |  |  |
| **Technology** |  |  |  |  |  |  |  |
| **Expressive Arts and Design** | **Exploring and using media and materials** |  |  |  |  |  |  |  |
| **Being imaginative** |  |  |  |  |  |  |  |

Attendance at setting over the last 3 months (%) - …………….

**School age – KS1 and above**

Attainment levels listed below must be gained independently (without support).

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Year Group** | **Attendance**  **%** | **Reading Level / Age** | | | **Writing Level** | | | **Maths**  **Level / Age** | | | **Other assessments** | **No. of Days Internal Exclusion** | **No. of Days External Exclusion** |
| **Aut** | **Spr** | **Sum** | **Aut** | **Spr** | **Sum** | **Aut** | **Spr** | **Sum** |
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| **Please comment on the rate of educational progress** (for example mention specific interventions that escalated progress, contextual background information, consider any inconsistences in assessment results)**.**  **Analysis of other progress** (for example social development, independence, confidence) |

**Post 16 - Attainment, preparation for adulthood and progress**

Attainment levels listed below must be gained independently (without support).

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Year Group** | **% Attendance** | **Subject/course** | **Level / Programme** | **Assessment Level and Date** | **Comments on progress** |
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| **Preparation for adulthood** (please comment on key element of the preparation for adulthood, must be completed for all children from year 9):  **Employability**  **Independent Living**  **Participation in society**  **Keeping healthy**  **Other** |

**Part 5) Special Educational Needs**. Please describe the child/young person’s strengths and needs. It is important to be specific about the **type and severity of need.** This information should be supported by the relevant evidence in relation to SEN, for example existing evidence of assessments or diagnosis.

**Summary of Special Educational Needs**

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| **Broad Areas of Need** | **Strengths** | **Needs** | **Specialist assessments carried out** | |
| **Communication and interaction**  To be completed in all cases | **Describe strengths and needs from assessment tools and reports; this should give an indication of severity, frequency and impact.** | | **Date** | **Type of assessment/ Carried out by** |
|  |  |  |  |
| **Cognition and learning**  To be completed in all cases | **Provide evidence of any standardised assessment supporting an indication of current attainment and cognitive strengths/weaknesses and impact.** | | **Date** | **Type of assessment/ Carried out by** |
|  |  |  |  |
| **Social, emotional and mental health**  To be completed in all cases | **Provide evidence of strengths and need based on evidence of assessments; the following examples of measures/audits should be also attached:**  **Incident logs / Structure observations / Boxall Profile or Thrive / GL emotional literacy assessment** | | **Date** | **Type of assessment/ Carried out by** |
|  |  |  |  |
| **Sensory and/or physical needs**  To be completed if relevant | **Relevant professional reports should be referenced for example care plans, manual handling plans, HI/VI assessments. Summary below should summarise strengths and needs (as relevant) and indicate severity, frequency and impact)** | | **Date** | **Type of assessment/ Carried out by** |
|  |  |  |  |

**Part 6) Outcomes.** Outcome is a benefit or difference made as a result of an intervention, it’s about what you get out not what you put in, it is personal, something the child/young person and their family has influence/control over. Outcomes are usually set out for what can be achieved by the end of a phase of education**.** You might find it helpful to use the following format: ***By the end of (time element) ……I want people to understand what I am saying (what I am aiming to achieve) so that I don’t get frustrated because I don’t feel listened to (why, impact).***

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| **Outcome (what I want to achieve)** | **By when** | **Impact (Why? What will be different?)** |
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**Part 7) Strategies and Support**.

Please record strategies and support which you are planning to put in place in order to achieve agreed outcomes. The following guidance should be taken into account:

* It is essential for the strategies listed below to be linked with needs and outcomes identified and advice from relevant support services
* The provision should be proportionate to the type and severity of need
* It is essential to clarify the evidence of impact

Please include information about external support services working with the child/young person or advising the school, for example, Educational Psychology, a specialist teacher for learning or behaviour, Speech and Language Therapist, Occupational Therapist etc.

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| **Date** | **Agreed Target**  *(must be linked to assessed need and help achieve agreed outcomes)* | **What will we do** | **Who will do it** | | | **How often / How long** *(Frequency)* | **Review by when?** | **Review of progress** | |
| **Whole class** | **Small group** | **Individual** | **Which strategies/support should be discontinued or amended?** | **What is recommended** |
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**Action plan**

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| **Action** | **By whom** | **By when** |
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**Date plan agreed:** ……………………………………………..

**Date plan to be reviewed:** ……………………………………………..

Please note a copy of this form must be given to the parent/carer and/or young person together with all supporting reports and assessments.

**Signed:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Child/Young Person

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Parents/Carers

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Headteacher / Principal / Setting Leader