

Review of an Education Health and Care Plan Parent Views

The annual review meeting is where you, your child or young person, the education provider and any professionals attending will jointly review your child or young person's progress towards outcomes in their Education, Health and Care Plan (EHCP).

This form is to help you to prepare for this meeting. It also may help you to draft some amendments to Part A of the EHCP ready for the next update of the EHCP.

Will the EHCP be amended or updated after the review meeting?

The Local Authority is **not** expected to update the EHCP every year and outcomes are generally set for 2 or 3 years ahead. We understand that all children develop and change so some aspects of the EHCP are likely to be out of date. Review minutes are stored alongside the EHCP, so the latest information is always available to those who need it.

The Local Authority always updates EHCPs before key transition points (e.g. nursery to infants, primary to secondary, or into post 16 education) with new outcomes looking forward to the end of the next phase of education. In other years, we amend if provision cannot be properly delivered without a change being made. We will send you a letter soon after the meeting telling you whether we plan to update the EHCP.

Your contribution

If you wish to, please attach an up to date photograph of your child (must be printable in black and white), a drawing by them or a contribution chosen by your child or young person.

If you have already provided your views to someone else (e.g. a SENCO, social worker), or wish to wait for the review meeting itself, you do not have to complete this form. You can also choose to give us your views in a different way e.g. just a simple note or an email.

CHANGES TO CONTACT AND FAMILY INFORMATION

Please record any information that needs amending, updates to the first part of the EHCP.

1. Your child or young person's details					
Forename(s)		Surname			
Likes to be called		Date of birth			
Home address and postcode					
To which borough is Council Tax paid					
Child's own Contact Details (if appropriate)	Home phone Mobile Email				
Primary Language used at home:		Other Languages used at home:			



2. Your information (Parents or Carers)				
	Parent/carer 1	Parent/carer 2		
Title				
Forename(s)				
Surname				
Relationship to child or young person				
Do you have parental responsibility?	Yes / No	Yes / No		
Home address & postcode, if different from child				
Home phone				
Mobile phone				
Email				
First language				
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YOUR VIEWS

Please keep your comments as clear as possible (e.g. use bullets). You do not need to write in every box.

3. Background

e.g. who the child lives with, past events or medical diagnoses that may be contributing to their special educational needs

4. What do you like and admire about your child or young person?

e.g. Things you are proud of, personal qualities, strengths, interests, achievements, things that surprise you or make you smile

5. What is important to your child or young person? What do you think is important for them?

e.g. Important people, pets, what makes them calm or happy, what would they not like to be without, what would they like to try or do more of, what could potentially make a real difference to their life?

6. What progress has been made towards the outcomes in the EHCP?

e.g. Are they still relevant and important? If progress has not been made, what could be done to change this?



This section is prima think about these ca	nrily for parents of children/young people in year 9 upwai tegories at all ages	rds but please	look at it and
Aspirations: key go	pals for adult life		
Independence (self-c	are, travel, housing, money, cooking, communication, safety)		
Preparing for employ •	ment and daily activities (skills, qualifications, work readiness,	communication)
Participating in societ	y (voting, going to events, leisure activities, friends & support	networks)	
Health (healthy diet,	exercise, access to health care/health checks, self-medication	, mental health)	
7. Any other infor	mation you feel is important		
8. Details of perso	on completing this form		
Name (CAPITALS)		Date	

Please send this to the school or other education provider or take it with you to the annual review meeting.

If you have any questions, please contact us at SEN@hounslow.gov.uk (contact number 020 8583 2672).

This information will be shared with Hounslow Council Staff (as appropriate), Social Care Professionals, Educational Psychology Services, NHS Clinical Commissioning Groups (CCGs), and representatives from Hounslow schools.

Our Children's Services and Education Privacy Statement can be found on Hounslow Council's website, www.hounslow.gov.uk. This explains the data we hold (including special category data), what we do with it, with whom we share it, how we keep it safe, and your rights with regard to data protection.

Please contact us if you would like this document in easy read, another more accessible format, or if you need it to be translated to another language.