Annual Review

Request for Professional involvement

(this form needs to be completed by the professional/parent/setting at least 6 weeks prior to the annual review)

This request relates to

<table>
<thead>
<tr>
<th>A child/young person who lives in Enfield and attends an <strong>Educational Setting located in Enfield</strong></th>
<th>Please tick</th>
</tr>
</thead>
<tbody>
<tr>
<td>A child/young person who lives in Enfield but attend an <strong>Educational Setting located outside of Enfield</strong></td>
<td></td>
</tr>
<tr>
<td>A child/young person who is attending an <strong>Alternative Provision</strong> within Enfield or outside of Enfield</td>
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<tr>
<td>A child/young person who is <strong>Elective Home Educated (EHE)</strong></td>
<td></td>
</tr>
<tr>
<td>A child/young person who is <strong>Not in Education, Employment or Training (NEET)</strong></td>
<td></td>
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</tbody>
</table>

**Details of Educational Setting/Professional requesting involvement:**

Name of setting or key person/parent (if child/young person does not attend a setting):

Address:

Contact Name:  Role:

Telephone contact details:

e-mail:

Day/Residential setting (please delete)

**Details of Child/Young Person:**

Full Name:  Date of Birth:

Address:

Full Name of Parent/Guardian:  Relationship to Child/Young Person:

Parent’s/Guardian’s Address if different:

Looked After child: Yes/No (if yes, please note which authority the child/young person is looked after by)
### Reason for professional involvement/advice:

<table>
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<tr>
<th>Setting requires professional involvement prior to requesting <strong>change of provision</strong></th>
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<tr>
<th>Child/young person’s <strong>needs may have changed</strong> and an updated assessment is needed so that the EHCP can be updated</th>
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| **Parents and/or child and young person has requested** the involvement of a professional from Enfield:  
<table>
<thead>
<tr>
<th>Please give details:</th>
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</table>

| **There is a crisis/recent event at home or at school** that requires involvement of a professional from Enfield:  
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<tr>
<th>Please give details:</th>
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<tr>
<th><strong>Child/young person is in residential setting</strong> and Enfield Officer input is needed at each annual review</th>
</tr>
</thead>
</table>

### Brief summary of concerns/issues

Please provide the child/young person’s views, if ascertained:

Please provide the views parents/carers, if ascertained:

Please confirm that this request has been shared with the family and/or young person?

| Yes | No |

### Provisional Date of Annual Review:

**Signature of person completing form:**

| Date: |
This form can be sent via secure email to sen@enfield.gov.uk using EGRESS, or via post to:

Special Educational Needs Service
London Borough of Enfield
Civic Centre
PO Box 56
Silver Street
Enfield
EN1 3XQ

For office use only:

Date discussed at Panel:

Outcome of discussion and reasons:

Enfield service(s) allocated:

Nature of involvement suggested/time allocated:

SEN Officer to send request to allocated service/response to setting:

Services:

Health services related to the EHCP (e.g. speech and language) are usually provided by the borough where the school is located.

CAMHS services related to the EHCP are usually provided by the CAMHS services according to the GP address.

Local Authority Services related to the EHCP are usually provided by Enfield Council and will include SEN Services, Educational Psychology and Social Care.