**Education Setting Response checklist for parental request EHC Needs Assessment**

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| **Question** | **Please circle which best applies:** | | |
| 1. Does the child meet the threshold criteria for an EHCP assessment? **Please attach supporting document** | Yes | No |  |
| 1. Does the child meet the process criteria for an EHC assessment? I.e. 2 cycles of assess-plan-do-review | Yes | No |  |
| 1. Does the child require support that is above and beyond that which is normally available at SEN Specialist support to meet their needs? | Yes | No |  |
| **If you answered yes to questions 1 -3 please fill out the** [**Request for EHC Needs Assessment Form**](https://www.derby.gov.uk/education-and-learning/special-education-needs-disabilities/special-educational-needs-assessment/) **and return along with this checklist. If you answered no to any of the questions above please answer the remaining questions and return.** | | | |
| **Question** | **Please circle which best applies:** | | |
| 1. Does the child have special educational needs (SEND) that are evident in school? | Yes | No |  |
| 1. Has the child been accessing additional support for their additional needs at school? | Yes | No | Not applicable |
| 1. At what level have they been accessing support? | Not applicable | Targeted | Specialist SEND |
| 1. If applicable, state what additional support through the Graduated Response has been applied (bullet points) |  | | |
| 1. Have you involved relevant external professionals? | Yes | No | Not applicable |