

Schools Guide to Submitting an EHC Assessment Request and Annual Reviews

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School Guide to the new EHC Assessment process

Introduction

In March 2023 the SEND service moved to using Liquidlogic as a system of recording EHC Needs Assessments, Plans and Reviews. From 17th April 2023 it is expected that all requests for assessment, evidence and information gathering will be completed via the secure Liquidlogic Portal.

Accessing the form

The form is available via the Children's Portal. Select SEND Referral once logged in.

This will open the EHC Assessment Request form.

Click Next

1 How does this tool work?	How does this tool work?	
2 Your Details		
3 Person's Details	Use the numbered menu items on the left or use the Next →	and ePrevious options to move through the pages.
4 Supporting Documentation	Don't use the Browser 'Back' button	
5 Submit	Questions	 Select the option(s) that best suit your response
	You DO NOT need to answer every question, you need only complete what is relevant.	This symbol * indicates that the question is mandatory and must be answered in order to continue.
	Save the Form	Print the Form
	Use the Save for Later option to Save the form to	Use the Print option to Print a copy of the form if
	return to at any time. 2	required. 😧

Click Login or Register





New User Registration

An account is needed to use the system. Please register an account. This will also allow access to view any saved forms or forms submitted within the last 30 days.

Click on Register for new account

New ι	lsers
lf you're up for an	new to Worcestershire Portals, sign account here
Reaiste	er for new account

Complete all the details. Any section with a red * is mandatory and has to be completed before the account can be set up. Please tick that this account is being used in a professional capacity.

Scroll down the page for all the boxes to be visible.

in a subscription of the s				
Sumame *				
Is this account	being used in a pr	ofessional capacity?	1	
Property name				
House number or	name			
Street *				

Click Next (at the bottom of the screen)





Add the work email address. Please make sure it is spelt correctly as this is how to access into the system in the future.

Add a password that is easily remembered, but not one that is commonly used. It will also need to meet the password criteria (see below) for it to be allowed.

Add the password again in the Confirm Password box. Click **Next**

Decouverd *			
Password *			
Confirm pass	word *		

Password Policy

Your password must meet the following requirements:

- It must be at least 15 characters long
- It must contain at least one letter
- It must contain only letters, digits, and special characters
- It must contain at least one upper-case letter
- It must contain at least one numerical digit
- It must be different to your current password
- It must be different to your previous 8 passwords.

List of special characters that can be used: !"#%&'()*+,-.:;<=>?@[\]^_`{|}~

An email containing a verification code will be sent to the registered email. Please enter the code in the box. The easiest way to do this is by copy and paste, but it can be typed in. Check the number is correct before continuing.

If the email is not received, check spam or junk mail folders.



Register a new account - step 3
We have just sent you an email to confirm your email address. Please enter the code this contains below. Use the back button below if you would like to change your email address and try again or Please send me a new code if you need another one.
If you can't find this email, it may be in your spam/junk email folder.
Code *

Once the code is entered and checked, click Next



If the code is not recognised, click on **Please send me a new code** link

Please	send	me	а	new	code

The account has now been registered. Click **Continue**

Registration completed	
Your registration has been completed successfully. Click Continue to carry on with your session	n.
Continue	

The first time accessing the Liquidlogic portal, you will be asked to agree to the terms and conditions of use, read, tick to agree and press continue.

Click **Return to home** and select the **EHCP forms**, clicking on the relevant one or log out and return later.

Account Already Exists

If an account already exists, the system will display a warning message. Click **Continue** to log in or click **Forgotten password** to reset the password.



Logging In

Existing users only need to login, rather than register.

The portal session will stay active for 60 minutes from last use, and a warning message will appear asking "**if you want to stay logged in**" 2 minutes prior to end of session. It is advisable to **save and continue** regularly whilst completing the form.

Please note that there is a current issue which means if making 2 requests for different children at the same time please log out and in again to make the second request.

Enter the **email address registered** and the **password** and then click **Submit**. Click **Forgotten password** to reset. (see <u>Password Policy</u> above)

xisting users		
Email		
Password		
r additional security, v nail address.	e will confirm your accour	it by sending an authentication code to you
Submit Cancel		

A code will be sent to the registered email address. This code is for one time use only. A new code will be sent each time you log in.

Add the code and click on Finish

We have j	st sent you an email to confirm	your account. Please	enter the code this	contains
lf you can'	find this email, it may be in yo	ur spam/junk email folo	Jer.	
Code				
-	Cancel			



The first section explains how the portal form works. Click Next.

The registered users' details are displayed. Click Next

The All Caller of All Caller	Your Details	
2 Your Details	Your Details	
3 Person's Details	First name	SENCO
4 Submit		
	Last Name	Test
	Role	SENCO

Remember to save the form regularly and the form can be closed and returned to within 15 days. Each time the form is edited, the 15 days count will be reset.

Saving the form

The form doesn't have to be completed all in one go. It can be saved and completed another time.

Scroll to the bottom of the page if not already done so. Click Save for Later

Print	Save for later	Create PDF	Close	Cancel
1 1111	Ouve for fater	<u>Orcator Dr</u>	01000	Ouriour

Confirmation that the form is saved will be displayed. It will be saved for 15 days. Click **Close** to remove the message

Save I	orm
Your for	m has been saved. An email confirmation has been sent. You have 15 days to submit the form.
Close	



The form remains on screen so can continue to be completed and saved on a regular basis.

Click **Close** at the bottom of the form to close the form in order to return to the form at a later date. An email will also be sent to the registered email address confirming that the form has been saved. It can be accessed again via this email.

Recover a Form

Once a form has been saved, it can be retrieved from the **Recover a Form** section of the portal. The form is saved for 15 days and can be retrieved any time during this time. After 15 days of inactivity and if the form has not been submitted, the form will be deleted and the form will need to be started again.

Log in if not already done so.

Click Recover a Form at the top of the screen



All forms will be listed with the oldest first. Click on the form to open it. It will also state how many days are left to retrieve the form.

Cave			
No.	Start Date	Name	Description
1	07 Mar 2023 9:59 AM	test test	Portal EHC – Parent\Carer\CYP
2	27 Mar 2023 2:15 PM	Test send	Portal EHC – Parent\Carer\CYP

The form will now open at the screen that was last looked at and the form can be completed as required.



Person's Details

Complete the form. All questions/statements with a red * next to them are mandatory questions that **MUST** be completed before submitting the form.

Select Professional from the menu for I am completing this form as

Add role to relationship to person

1 How does this tool work? Person's 2 Your Details For 'Who is this 3 Person's Details Who is this 4 Submit Who is this	Details about' please enter the child's about	details
I am comple	ng this form as a *	ADO/Social Care/Early Help/EHCP)
Your relationsh	to person * SENCO	
	First name * Test	
	Last name * Child	

Complete the child's details. Scroll down the page to see all the boxes

Adding an Address

To add the child's address, type the postcode and then click Find Address

Address	
House nun	nber or name
	Postcode *
Find address	

Select the correct address from the list. Click on the drop-down arrow



Select address *

Select an address

*

Add the Requestor Name (name of school staff sending request) and requestor type of Professional

Requestor Name *	
Requestor Type *	O Parent or Carer (Children Under 16)
	\bigcirc Young Person (Over 16 and up to 25)
	○ Professional

Record whether the child is School Year 12 or above.

Year 12 and Above

If the young person is age 16 or above, the school can still send the request on their behalf.

Under the age of 16

If the child is not year 12 or above, additional questions will be displayed.

Child Looked After *	O Yes
	○ No
Is this child or young person	○ Yes
being detained in relevant youth accommodation	○ No
(RYA)?	

Add details of the child's school in the table provided. To view the table in a bigger screen, click Full Screen

Please Note: Please click into each individual box and do not use the tab key to move between boxes



ease click into each individual cell a	and do not use the tab key to move	between cells.	
lame of school/setting	Start Date	End Date	Postcode
	dd-mm-yyyy	dd-mm-yyyy	

Add details about the school stage and year group using the drop-down arrows where appropriate

What Key Stage Year Group are they in? *	Key Stage 2	•
Is the child/young person in	Yes	
the correct year group for their age	○ No	
Current Year Group	Year 4	*
British Sign Language	O Yes	
Used?	○ No	

Add details of parents/carers

Details of the	e parents/carers	6		
Please provide d together please	letails Child/Young Pers ensure that both parent	son's family members. W s details are included:	/here parents share parenta	al responsibility but do not live
Please click into e	each individual cell and do r	not use the tab key to move	between cells.	
			First Language:	Is an interpreter required?
Name:	Address	Postcode	(inc British Sign Language)	If EHC needs assessment is agreed, will a interpreter be required.
				Full screen + -

Add details of professionals involved:

rofessional Involveme	nt
If the child/young person has	s had discussions with other professionals, please provide their names below.
If the child /youg person is o about the child/young person	of school age, they need to have a discussion with the Head Teacher/SENCo In special educational needs before returning this form.
Please click into each individual cell a	nd do not use the tab key to move between cells.
Advisory Teacher:	
Medical Specialist:	
Educational Psychologist:	
Social Worker:	
Other:	
	Full scree



Click Next

Professional

Complete the Professional section with details of the requestor

Professional	
Please remember to s	ave your form regularly.
Name of person making this request:	
(if not parents/carers)	
Address:	
Postcode:	
Job title/relationship to child/young person:	
Telephone number:	
Mobile number:	
Email address:	
Date request submitted:	dd-mm-yyyy

Scroll down the screen and click Next





Family Conversation

GP Details/Diagnosis

Add details of the child's GP and details of the diagnosis received. If not relevant, please add N/A. Please remember to click into each field, do not use the tab function.

GP's Name *	
GP's Address *	
Health Authority *	
Disability Disability / Diagnosis / Known Condition(s) *	
Diagnosed by *	

Add details of Social Care involvement and key contact details. Please remember to click into each field, do not use the tab function.

Complete the **Child's Story** and any relevant sections. **Please add N/A if the question is not relevant to the child. All sections with red * are mandatory and must be completed before submitting the form.**

Child's/Young Person's family story: *	
Personality and strengths: *	
Interests out of school: Hobbies/interests/activities/f riends and what support is needed to access these *	
What is important to the child/young Person ? (include their hopes and wishes) for the future: *	

What is going well for the Child/Young person and their family

Complete all relevant sections, adding N/A where not appropriate for the child. The text boxes will expand as required.

Health Needs

Add any details of the child's health needs and any concerns you are wanting to raise.

Signatures

The form uses electronic signatures. Please type in **name** and **date** Click **Next**



Section 3

Remember to save your form regularly

Section 3 covers the child's school results. Complete all relevant sections. Scroll across the screen to view all fields in the table. Alternatively, click Full Screen to view the full table. **Please remember to click into each field in the table, do not tab across and use the plus icon to add a new row.**

Section 3					
Please rememb	Please remember to save your form regularly.				
Result of readin	ng, spelling or other as	sessments			
What year group obj	jectives or Pre-Key Stage Stand	ard is the child work	ing at? PLEASE USE ONLY THES	E MEASURES.	
If using curriculum ye (S) / Greater Depth (C	ar group objectives, progress coul GD).	id be shown over time	by using Emerging (E) / Developing	(D) / Secure	
PRIMARY – Key Stag	ge 1				
	Chronological Yr Group	Working at	Chronological Yr Group	Working a	
	2 years ago	2 years	1 years ago	1 year ago	
Reading & Comprehension					
Writing					
GPS (gram/punc/spell)					
Maths					
Science					
				Full screen	

Click Next



Section 4

Complete the details regarding the child's strengths/talents and add attendance over 3 terms.

All sections with red * are mandatory and must be completed before submitting the form.

Section 4			
Please remember to	save your form regularly.		
Describe the child/young person's strengths/talents from first hand experience of the pupil in the teaching situation: Details of recent attendance	record over 3 terms (including present term	1)	
Term *	Possible *	Actual *	
Autumn	30	28	
		Full screen +	-

Scroll the screen down to see all sections.

Complete details relating to EHC Needs assessment criteria

Communication and interaction *	⊖ Yes ● No
Social, Emotional and Mental Health *	
Details	
Cognition and learning *	○ Yes ● No
Sensory and/or physical *	⊖Yes ⊛No

Scroll down the screen and click Next



Section 5

This section covers provision made from the school's delegated budget to address the SEN needs of the child. Complete all relevant sections. **Please remember to click into each field in the table, do not tab across and use the plus icon to add a new row.**

Section 5		
Please remember to save your for	rm regularly.	
Provision made from school's de person's SEN	legated budget to address the c	hild/young
Current allocated Resources/Provision from Not made provision at school, using your notional SI progress using the Worcestershire Graduated R showing when support is allocated to them.	tional SEN Budget A critical aspect in our decisi EN Budget/ Element 2 Funding and how you hav esponse. We also suggest that you attach a cop	on making is how you have we adapted over time to secure y of the pupil's timetable
*Please refer to the Worcestershire Graduated P Please note, where small group interventions ar intervention.	Response for details of Notional SEN Budgets e provided, the cost is divided by the number of	pupils accessing the
What is the provision? e.g. TA support in class/specific intervention or programme?	What are/were the expected outcomes? e.g. academic/ emotional health and well being/ attendance/ gross and fine motor skill development.	What is the timescale and fr the provision? e.g. TA supp (attach timetable) or specifii intervention for 30 mins a di literacy
		Full screen + -

Scroll down the page and click Next



Section 6

This section covers Monitoring of SEN Support

Complete the details of the Assess, Plan, Review, Do cycle. All sections with red * are mandatory and must be completed before submitting the form. Please remember to click into each field in the table, do not tab across.

Section 6	
Please remember to save your form regularly	y.
Monitoring of SEN Support	
Please give a brief account of strategies used in the "Assess, P as a result of involvement of external agency involvement	lan, Review, Do" Cycle please indicate where these have been
Assess, Plan, Do, Review Cycle One.	
Action taken to address SEN including in-class, small group and individual support *	What was the effect of this intervention e.g. educational outcomes, learning gains *
	Full screen + -

To add another line, click on the + or to delete click -



Scroll down to add additional Assess, Plan, Review, Do cycles.

Add a brief chronology of reviews undertaken



Click Next



Section 7

This section is used to record the details of any external professionals involved with the child. Please remember to click into each field in the table, do not tab across and use the plus icon to add a new row.

Section 7			
Please rem	ember to save your form	regularly.	
External Pro	ofessionals Involved		
Please provide	details of external Professionals wh	o have informed your operation of the Graduate	d Response.
Professionals In Please detail total	wolved period of involvement and attach a copy of t Role of Professional	heir most recent report (usually less than 6 months old)	Dates of involvement
		dd-mm-yyyy	dd-mm-yyyy
		23	
			Full screen + -

Click Next

Section 8

This section is where supporting evidence is listed and these documents can be uploaded to the form in the Supporting Documents section



Scroll down the page and click Next



Supporting Documents

Supporting documents can be uploaded in this section and sent with the request for assessment. The Child's Views must be uploaded and submitted as part of this request. The request will not be considered complete and won't be accepted.

Click Upload Document



Select the file to be uploaded and click Open

The document will be displayed on the screen. Only one document at a time can be uploaded.

The size of some documents maybe too large to submit with the application. If this is the case (and only in these circumstances), please send the additional information only to senassessmentpsf@worcschildrenfirst.org.uk, with the child/young person's name and date of birth.

Click Upload Document again to upload additional documents. Repeat as required.

Once all documents have been attached, click Next

Submit

Click Submit to Local Authority to send the form.



Please note that once submitted, changes cannot be made to the form, so please check and amend before submitting.

A warning will be displayed confirming that no changes can be made. Click Submit



Submit to Local Authority	×
Have you entered all the information you need to? You will not be able to make any further changes once you press the "Submit" button.	
Cancel Submit	

The **Thank You screen** will be displayed confirming the form has been submitted. **An email** will also be sent to the registered email address confirming the form has been submitted.

Thank You	
Home	Thank you for submitting your enquiry to Worcestershire Children First.
Recover a Social Care Form	
Recover an Early Help Form	
View Submitted Forms	



Viewing and Printing Submitted Forms

Submitted forms are available on the account for **30 days once submitted**. The form can be viewed either by clicking **View Submitted Forms** on the Thank You screen or by clicking on **Recover A Form** at the top of the screen

Thank Yo	u				
Home	Home Thank you for submitting your enquiry to Worcestershire Children First.				
Recover a Social Care	• Form				
Recover an Early Help	Form				
View Submitted Forms	2				
Home	Recover a form	💄 Jonny Trainer 👻			

Click View Submitted Forms



All submitted forms will be displayed in a table, with the most recent first. **Click on the purple writing** to open the form.

Please note that the Portal Response is not being used by the SEND teams, but this does not mean that the request has not been requested.

Decently Submitte	d Forma (Last 20)	Dava		
Recently Submitte	d Forms (Last 30	Days)		
Details	Name	Date	Response	Unique Reference
Portal EHC – Parent\Carer\CYP	Parent SEND	27 Jan 2023	No response posted	LL-DS-P10U-FZGBPD

The form will be opened in **pdf format**. The form can be saved or printed from this point.

Click on the **printer** icon to print or on the **disk** icon to save



School EHCA Guide v2.0



Submitting Annual Review paperwork

Annual Review paperwork can now be submitted via the EHCP Annual Review form accessible from the Children's Portal.

Click on the EHCP Annual Review Form link. This will open the form.

Click Next

e the nu	mbered menu item	is on the left or use the Next →	and + Prev	ious	options to move through the pages.
on't use t	he Browser 'Back'	button			
? Qi	uestions		Sele	ect the o	ption(s) that best suit your response
You DO NOT need to answer every question, you need only complete what is relevant.		This symbol 🖌 indicates that the question is mandatory and must be answered in order to continue.			
Save the Form		Print the Form			
Use the	Save for Later	option to Save the form to	Use the	Print	option to Print a copy of the form if
return to at any time. 3		required.	required. 🧕		

Your Details

This section is pre-populated with the details recorded for the account logged in. Click Next

Your Details		
Your Details		
First name	Jonny	
Last Name	Trainer	
Email		
Telephone		
← Previous		Next →



Person's Details

Complete the details of the child/young person that the Annual Review is for

Person's Details	
Who is this about	
I am completing this form as a *	Professional (LADO/Social Care/Early Help/EHCP) *
Your relationship to person *	SENCO
First name *	Test
Last name *	Send
Date of birth *	01/06/2014
	□ Is date of birth estimated?
Gender *	Female

Scroll down the page to add the address. Click $\ensuremath{\textbf{Next}}$

County Hall Spetchley Road	t i		
Worcester			
THIS ZIT			
Reset address	Search again		



Supporting Documents

The Annual Review documents can be uploaded in this section and sent with the completed form.

Click Upload Document



Select the file to be uploaded and click Open

The document will be displayed on the screen. Only one document at a time can be uploaded.

For Annual Reviews, please send any oversized documents to either North Area Team (sennorth@worcschildrenfirst.org.uk) for Bromsgrove, Redditch and Wyre Forest or South Area Team (sensouth@worcschildrenfirst.org.uk) for Worcester, Malvern, Wychavon (based on pupils' home postcode).

Click **Upload Document** again to upload additional documents. Repeat as required.

Once all documents have been attached, click Next

Submit

Click Submit to Local Authority to send the form.



Please note that once submitted, changes cannot be made to the form, so please check and amend before submitting.

A warning will be displayed confirming that no changes can be made. Click Submit



Submit to Local Authority	×
Have you entered all the information you need to? You will not be able to make any further changes once you press the "Submit" button.	
Cancel Submit	

The **Thank You screen** will be displayed confirming the form has been submitted. **An email** will also be sent to the registered email address confirming the form has been submitted.

Thank You	
Home	Thank you for submitting your enquiry to Worcestershire Children First.
Recover a Social Care Form	
Recover an Early Help Form	
View Submitted Forms	

The submitted form will be saved for 30 days. The form can also be printed. See <u>Viewing</u> and <u>Printing Submitted Forms</u> section for details on how to do this.



Delegation Portal

When a parent submits an EHC Needs Assessment Request the Professional section of the request is delegated to the SENCo at the listed school. This is done through the delegation portal. This process also applies when School Consultations are sent prior to Final Plan.

When the section is delegated an email is sent to the registered SENCo email address. It will be from **Worcestershire County Council** and will be called **New Documents**.

Click on the email to open it.

Click on the **Worcestershire Portal link** to access the delegation portal. The email will also state the **date when it should be completed by**

From: Worcestershire Children First < <u>donotreply@liquidlogic.co.uk</u> >
Sent: Thursday, April 6, 2023 2:57:10 PM
To:
Subject: New Documents
New Documents
A new document has been sent to you and is due for completion by 11-Apr-2023.
Please log in to the Worcestershire Children First Portal o complete this.
Many Thanks
SEND Team, Worcestershire Children First

Log into the portal. The login details will be the **registered SENCo email address or work email address**. This is the same as the login used to send EHCNA Requests.

A code will be sent to confirm login. Add this to log in.

The **delegation portal** will be displayed with any documents requiring action listed in the table.





Click on the form to be completed

The delegated section will be displayed. Work through the sections as appropriate. Click Next to move to the next section.

1 Professional/School	Name: Pippa4 Send DOB: 01-Aug-2014	Required By: 11-Apr-2023
2 Section 1	Form type: Enclina Request	Department: LiquidLogic Support Address: LiquidLogic Support
3 Section 2		
4 Section 3	Professional/School	
5 Section 4	Please complete the following sections and return.	
6 Section 5		
7 Section 6		Next →
8 Section 7		
9 Section 8		

The form can be saved at any time. Click **Save** at the bottom of the screen.

Section 8 gives details of any Supporting Evidence that can be included. Check the box to identify which documents are included. See the <u>Supporting Evidence</u> section of this guide for further guidance.

These documents can be uploaded via Supporting Documentation. See the <u>Supporting</u> <u>Documents</u> section of the guide on how to upload the relevant documents.

Click Submit Contribution



Submit Form

Click **Yes** to confirm that all sections are complete and ready for submission. If this is not the case, click No.





The form has now been returned to the SEND team and has now been removed from the delegation portal. The submitted form will be available for 30 days in the Recently Submitted Tasks section of the EHM portal

Delegation Portal					
The Liquidlogic Systems (Adults, Childrens, Early Help and Portal) will be unavailable Wednesday 4th January 2023 between 6pm and 10pm.					
There are no forms assigned to you waiting to be completed.					
Currently Assigned Tasks	Recently Retracted Tasks	Recently Submitted Tasks			
No currently assigned tasks					

Log out of the delegation portal by clicking on the Logout button in the top right-hand corner of the screen.

