

Schools Guide to Submitting an EHC Assessment Request and Annual Reviews

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School Guide to the new EHC Assessment process

Introduction

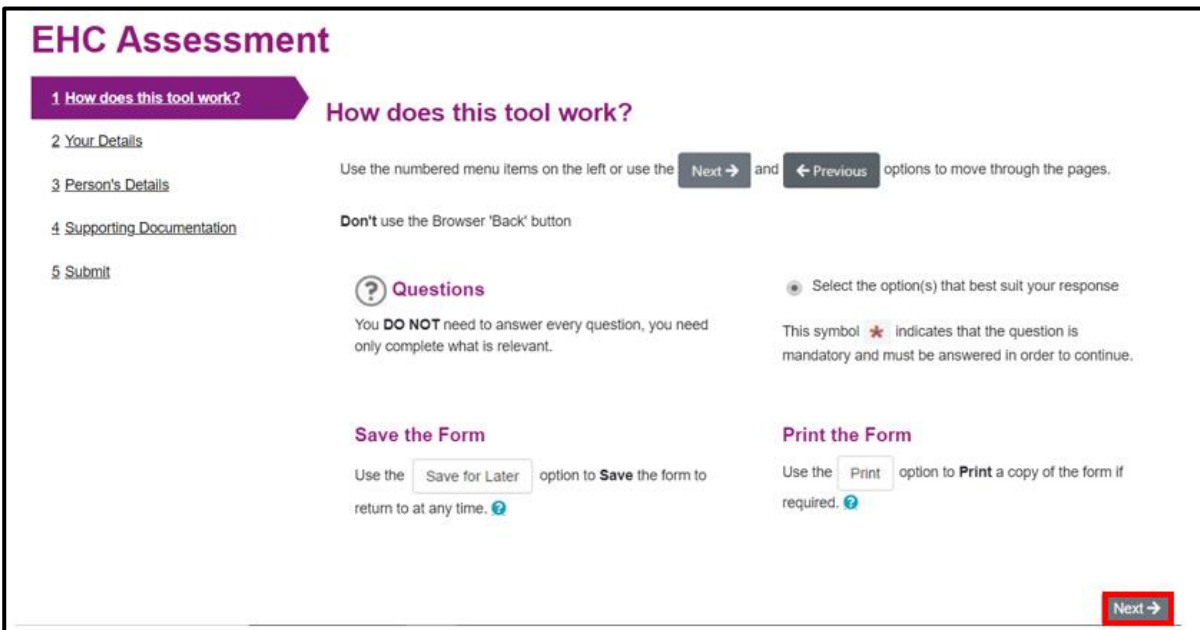
In March 2023 the SEND service moved to using Liquidlogic as a system of recording EHC Needs Assessments, Plans and Reviews. From 17th April 2023 it is expected that all requests for assessment, evidence and information gathering will be completed via the secure Liquidlogic Portal.

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**



EHC Assessment

1 **How does this tool work?**

2 [Your Details](#)

3 [Person's Details](#)

4 [Supporting Documentation](#)

5 [Submit](#)

How does this tool work?

Use the numbered menu items on the left or use the **Next** and **Previous** options to move through the pages.

Don't use the Browser 'Back' button

Questions

You **DO NOT** need to answer every question, you need only complete what is relevant.

Select the option(s) that best suit your response

This symbol ***** indicates that the question is mandatory and must be answered in order to continue.

Save the Form

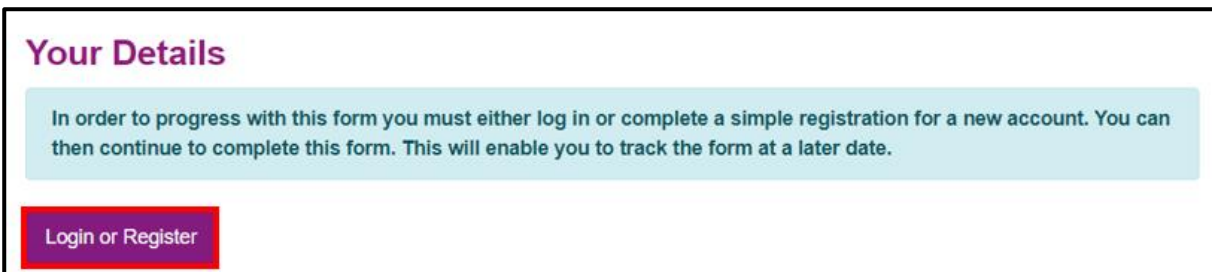
Use the **Save for Later** option to **Save** the form to return to at any time.

Print the Form

Use the **Print** option to **Print** a copy of the form if required.

Next

Click **Login or Register**



Your Details

In order to progress with this form you must either log in or complete a simple registration for a new account. You can then continue to complete this form. This will enable you to track the form at a later date.

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 users

If you're new to Worcestershire Portals, sign up for an account here

[Register 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.

Forename

Surname *

Is this account being used in a professional capacity?

Property name

House number or name

Street *

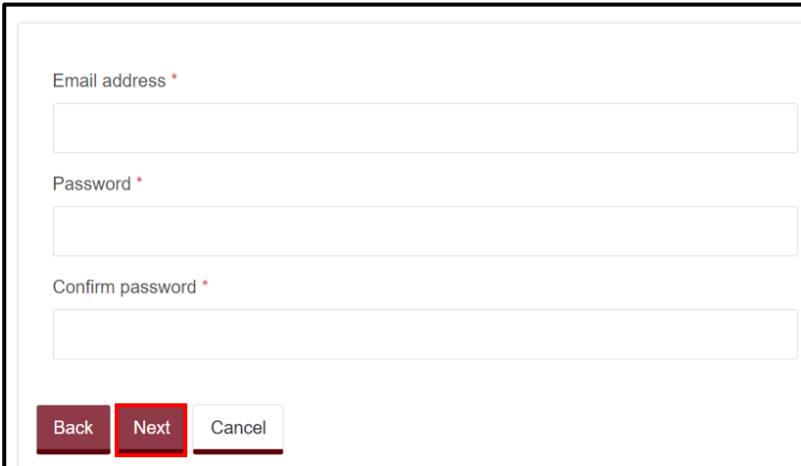
Area

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**



The screenshot shows a registration form with three input fields and three buttons. The first field is labeled 'Email address *', the second 'Password *', and the third 'Confirm password *'. Below the fields are three buttons: 'Back' (dark red), 'Next' (red), and 'Cancel' (white with a red border).

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

Back **Next** **Cancel**

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

[Please send me a 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.

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.

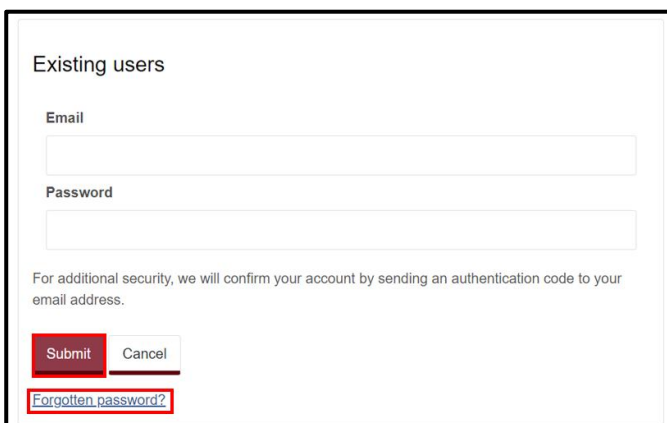
Logging In

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 [Password Policy](#) above)



Existing users

Email

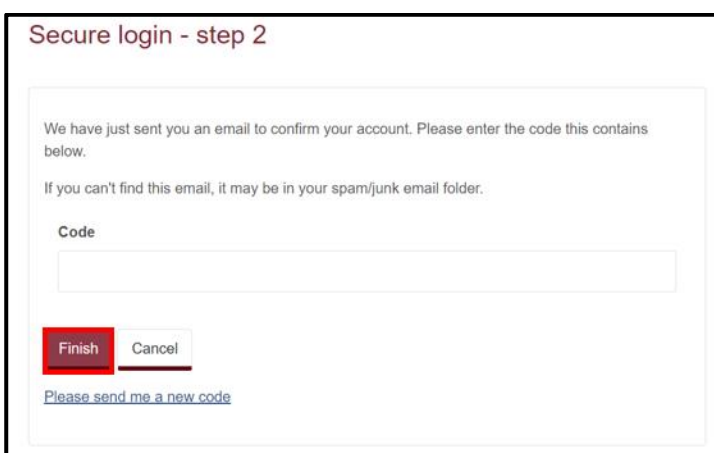
Password

For additional security, we will confirm your account by sending an authentication code to your email address.

[Forgotten password?](#)

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**



Secure login - step 2

We have just sent you an email to confirm your account. Please enter the code this contains below.

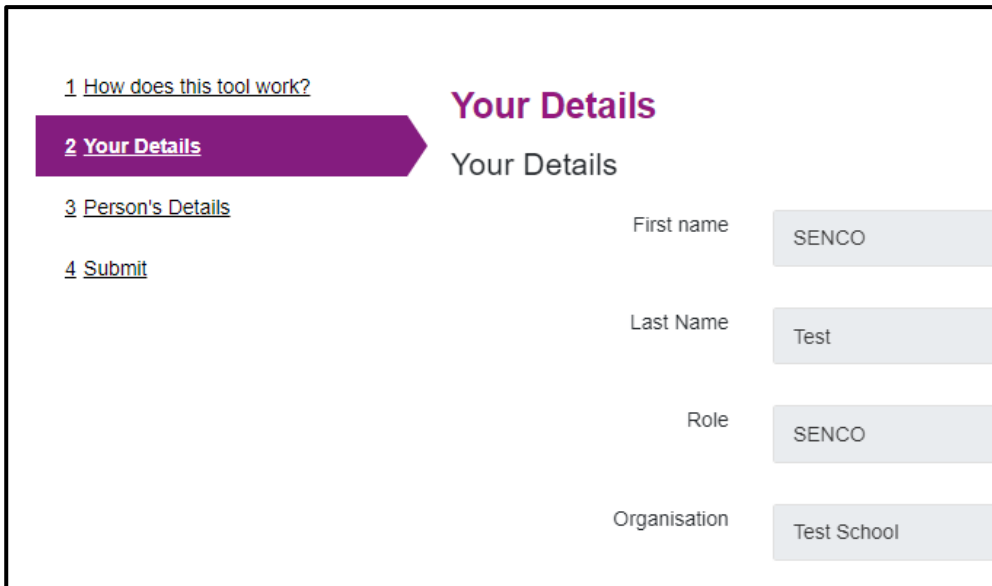
If you can't find this email, it may be in your spam/junk email folder.

Code

[Please send me a new code](#)

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

The registered users' details are displayed. Click **Next**



1 [How does this tool work?](#)

2 Your Details

3 [Person's Details](#)

4 [Submit](#)

Your Details

Your Details

First name	SENCO
Last Name	Test
Role	SENCO
Organisation	Test School

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

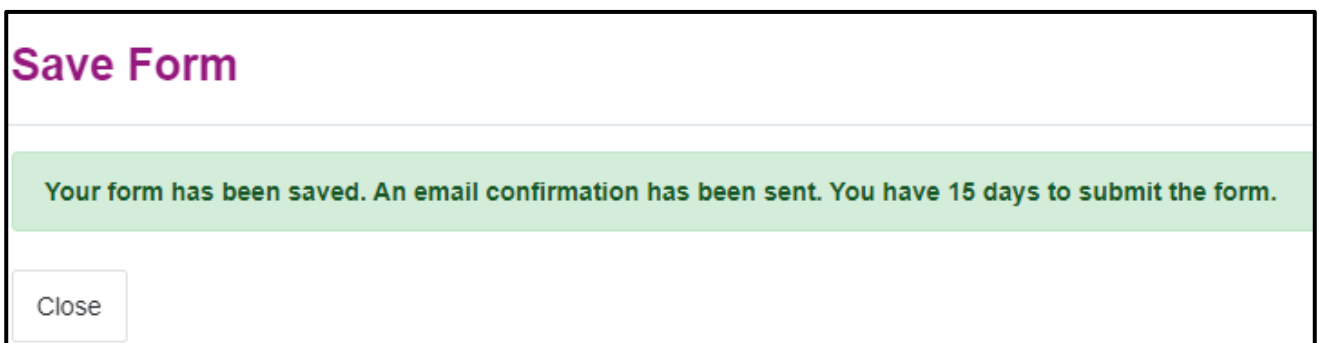
The form doesn't have to be completed all in one go. It can be saved and completed another time.

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



[Print](#) [Save for later](#) [Create PDF](#) [Close](#) [Cancel](#)

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



Save Form

Your form has been saved. An email confirmation has been sent. You have 15 days to submit the form.

[Close](#)

Liquidlogic User Guide

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.



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

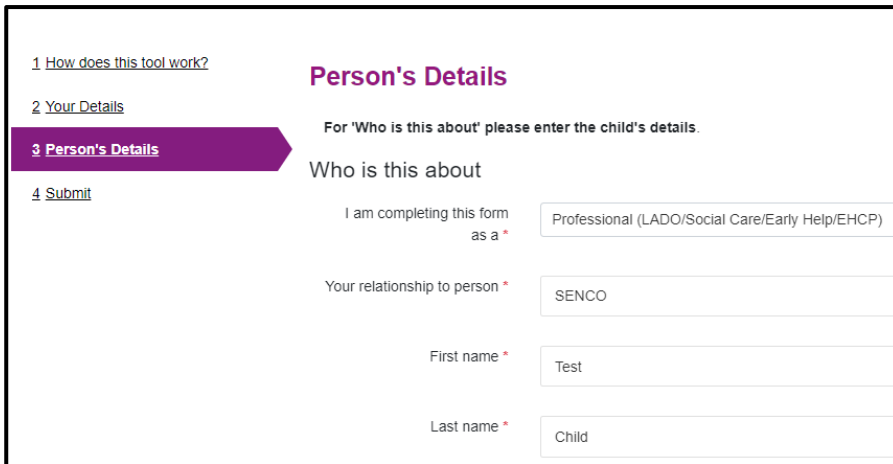
The form will now open at the screen that was last looked at and the form can be completed as required.

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?](#)

2 [Your Details](#)

3 **Person's Details**

4 [Submit](#)

Person's Details

For 'Who is this about' please enter the child'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 * 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 number or name

Postcode *

Find address

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

Select address * 

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

Requestor Name *

Requestor Type * Parent or Carer (Children Under 16)
 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 * Yes
 No

Is this child or young person being detained in relevant youth accommodation (RYA)? Yes
 No

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

Previous Schools/Settings (including early years settings if appropriate)

Please click into each individual cell and do not use the tab key to move between cells.

Name of school/setting	Start Date	End Date	Postcode
<input type="text"/>	<input type="text" value="dd-mm-yyyy"/>	<input type="text" value="dd-mm-yyyy"/>	<input type="text"/>

Full screen
+
-

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

What Key Stage Year Group are they in? *

▼

Is the child/young person in the correct year group for their age

Yes
 No

Current Year Group

▼

British Sign Language Used?

Yes
 No

Add details of parents/carers

Details of the parents/carers

Please provide details Child/Young Person's family members. Where parents share parental responsibility but do not live together please ensure that both parents details are included:

Please click into each individual cell and do not use the tab key to move between cells.

Name:	Address	Postcode	First Language: <small>(inc British Sign Language)</small>	Is an interpreter required? <small>If EHC needs assessment is agreed, will an interpreter be required.</small>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Full screen
+
-

Liquidlogic User Guide

Add details of professionals involved:

Professional Involvement

If the child/young person has had discussions with other professionals, please provide their names below.

If the child/young person is of school age, they need to have a discussion with the Head Teacher/SENCo about the child/young person special educational needs before returning this form.

Please click into each individual cell and do not use the tab key to move between cells.

Advisory Teacher:	<input type="text"/>
Medical Specialist:	<input type="text"/>
Educational Psychologist:	<input type="text"/>
Social Worker:	<input type="text"/>
Other:	<input type="text"/>

[Full screen](#)

Click Next

Professional

Complete the Professional section with details of the requestor

Professional

Please remember to save 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: 

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 *	<input type="text"/>
GP's Address *	<input type="text"/>
Health Authority *	<input type="text"/>
Disability / Diagnosis / Known Condition(s) *	<input type="text"/>
Diagnosed by *	<input type="text"/>

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: *	<input type="text"/>
Personality and strengths: *	<input type="text"/>
Interests out of school: Hobbies/interests/activities/friends and what support is needed to access these *	<input type="text"/>
What is important to the child/young Person ? (include their hopes and wishes) for the future: *	<input type="text"/>

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 remember to save your form regularly.

Result of reading, spelling or other assessments

What year group objectives or Pre-Key Stage Standard is the child working at? PLEASE USE ONLY THESE MEASURES.

If using curriculum year group objectives, progress could be shown over time by using Emerging (E) / Developing (D) / Secure (S) / Greater Depth (GD).

PRIMARY – Key Stage 1

	Chronological Yr Group	Working at	Chronological Yr Group	Working at
	2 years ago	2 years	1 years ago	1 year ago
Reading & Comprehension	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Writing	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
GPS (gram/punc/spell)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Maths	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Science	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

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)

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 * Yes No

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 form regularly.

Provision made from school's delegated budget to address the child/young person's SEN

Current allocated Resources/Provision from **Notional SEN Budget** A critical aspect in our decision making is how you have made provision at school, using your notional SEN Budget/ Element 2 Funding and how you have adapted over time to secure progress using the Worcestershire Graduated Response. We also suggest that you attach a copy of the pupil's timetable showing when support is allocated to them.

*Please refer to the Worcestershire Graduated Response for details of Notional SEN Budgets

Please note, where small group interventions are provided, the cost is divided by the number of pupils accessing the intervention.

Interventions

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 specifi intervention for 30 mins a d literacy
<input type="text"/>	<input type="text"/>	<input type="text"/>

[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.

Monitoring of SEN Support

Please give a brief account of strategies used in the "Assess, Plan, Review, Do" Cycle please indicate where these have been as a result of involvement of external agency involvement

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 *
<input type="text"/>	<input type="text"/>

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

Provide brief chronology of reviews undertaken: Please ensure that all individual provision maps/reviews are included with this submission and cross-reference and paginated. *

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 remember to save your form regularly.

External Professionals Involved

Please provide details of external Professionals who have informed your operation of the Graduated Response.

Professionals Involved

Please detail total period of involvement and attach a copy of their most recent report (usually less than 6 months old)

Name	Role of Professional	Dates of involvement - Start Date	Dates of involvement
<input type="text"/>	<input type="text"/>	<input type="text" value="dd-mm-yyyy"/>	<input type="text" value="dd-mm-yyyy"/>

[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

Section 8

Please remember to save your form regularly.

Supporting Evidence

Along with previous requested attachments, please provide information that is relevant to the statutory assessment criteria. Much of this evidence should already be available in the child/young person's SEN support plan. Evidence should be based on current need and include information gathered during the most recent 6 – 12 months (reports more than 12 – 18 months old are unlikely to be helpful).

Please attach the following evidence and tick to indicate that it has been included:

- Relevant reports from external specialist(s) which indicate the degree and complexity of difficulties. (A medical report is required for any child whom the request is being made on grounds of a medical diagnosis and its impact on the child's learning and access as well as follow-up therapy reports as appropriate).
- Any other relevant specific and objective up to date information about the child's attainments and social development, including information about the child's attendance and exclusions where relevant.
- For children under the age of 16, please attach the views of the child where this can be ascertained. Please attach in the supporting documentation section.
- Copies of the child's reviewed individual Education Plan
- Provision map
- Time table of support

All the evidence must combine to demonstrate purposeful and relevant action taken by the school/setting(s) over a sustained period of time.

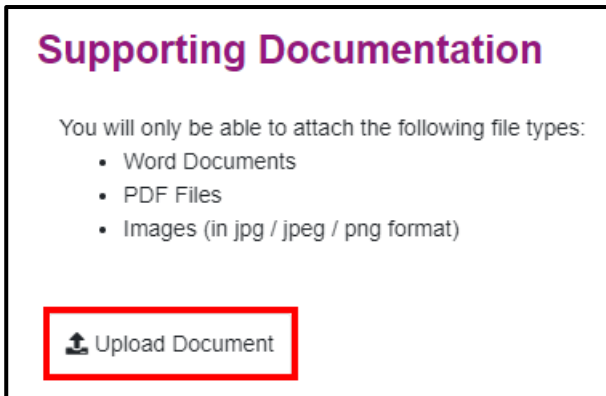
Child's Views must be uploaded and submitted as part of this request. If omitted, the request will not be considered complete and will not be accepted.

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.

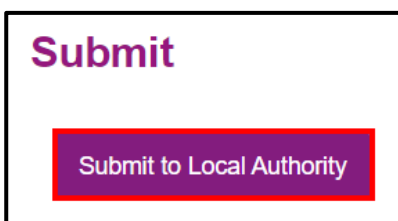
The size of some documents maybe too large to submit with the application. If this is the case (and only in these circumstances), please send the additional information only to senassessmentpsf@worcschildrenfirst.org.uk, with the child/young person's name and date of birth.

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

Once all documents have been attached, click **Next**

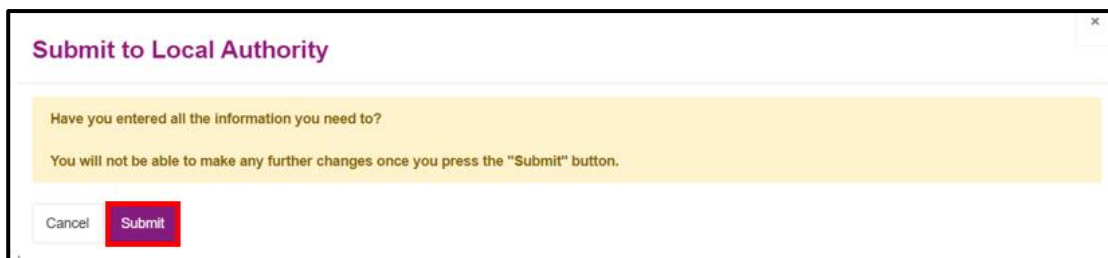
Submit

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**

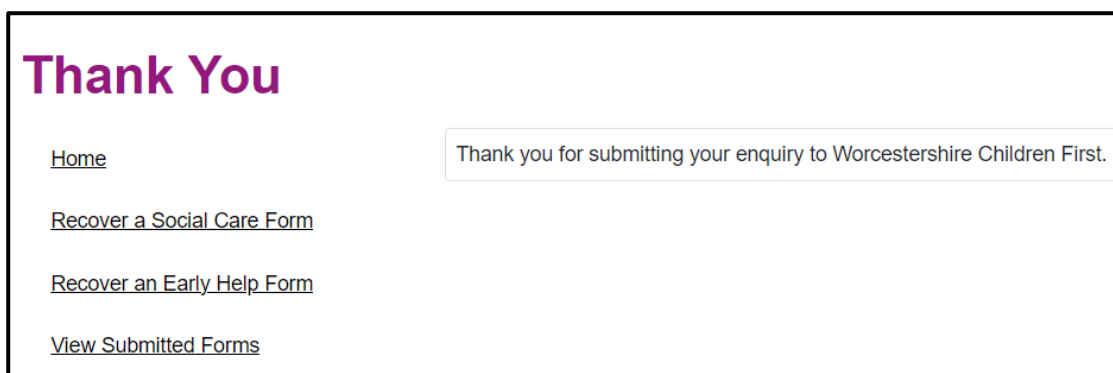


Submit to Local Authority

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.

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.

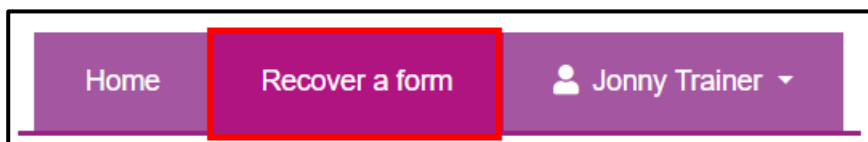
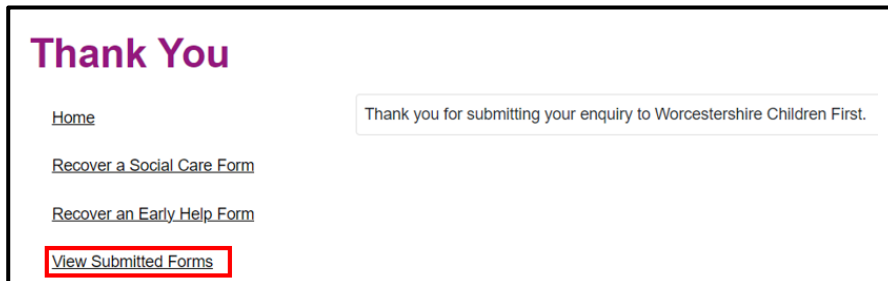
[Recover a Social Care Form](#)

[Recover an Early Help Form](#)

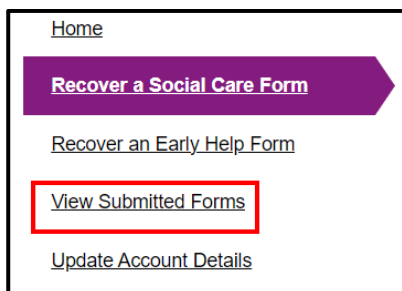
[View Submitted Forms](#)

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



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.

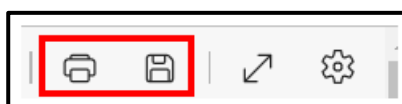
Please note that the Portal Response is not being used by the SEND teams, but this does not mean that the request has not been requested.



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

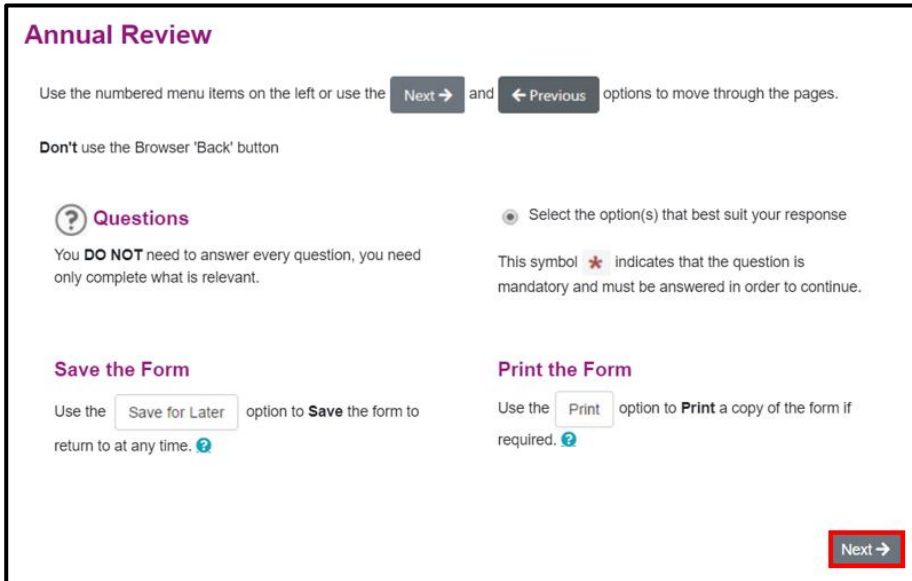


Submitting Annual Review paperwork

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**



Annual Review

Use the numbered menu items on the left or use the **Next →** and **← Previous** options to move through the pages.

Don't use the Browser 'Back' button

Questions
You **DO NOT** need to answer every question, you need only complete what is relevant.

Select the option(s) that best suit your response

This symbol ***** indicates that the question is mandatory and must be answered in order to continue.

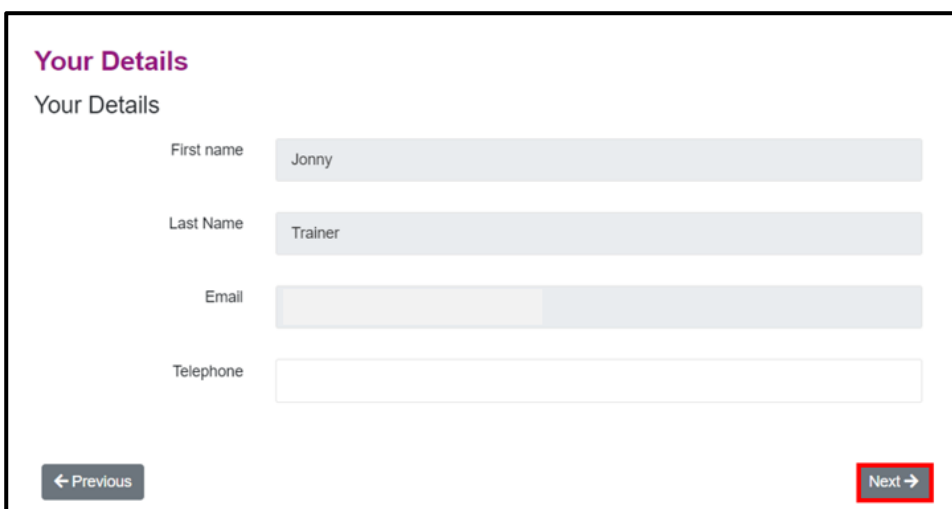
Save the Form
Use the **Save for Later** option to **Save** the form to return to at any time.

Print the Form
Use the **Print** option to **Print** a copy of the form if required.

Next →

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 *

Your relationship to person *

First name *

Last name *

Date of birth * 

Is date of birth estimated?

Gender *

Scroll down the page to add the address. Click **Next**

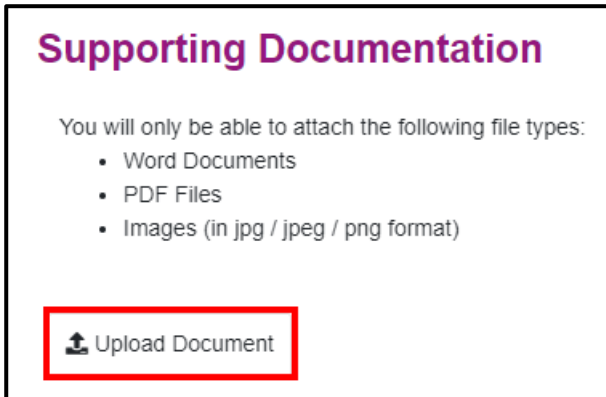
Address

County Hall
Spetchley Road
Worcester
WR5 2NP

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.

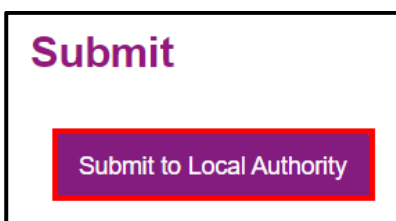
For Annual Reviews, please send any oversized documents to either North Area Team (sennorth@worcschildrenfirst.org.uk) for Bromsgrove, Redditch and Wyre Forest or South Area Team (sensouth@worcschildrenfirst.org.uk) for Worcester, Malvern, Wychavon (based on pupils' home postcode).

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

Once all documents have been attached, click **Next**

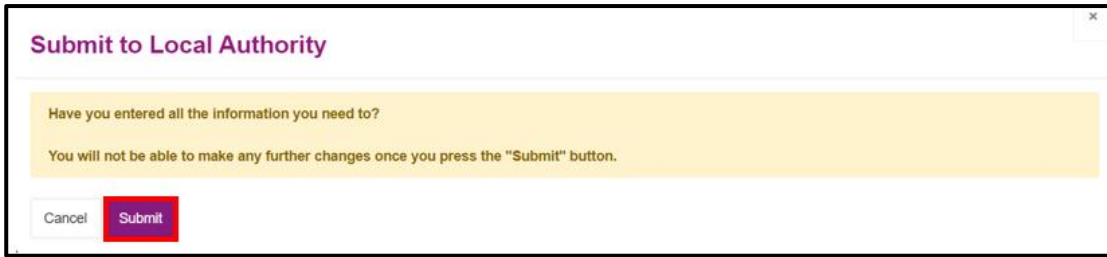
Submit

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**

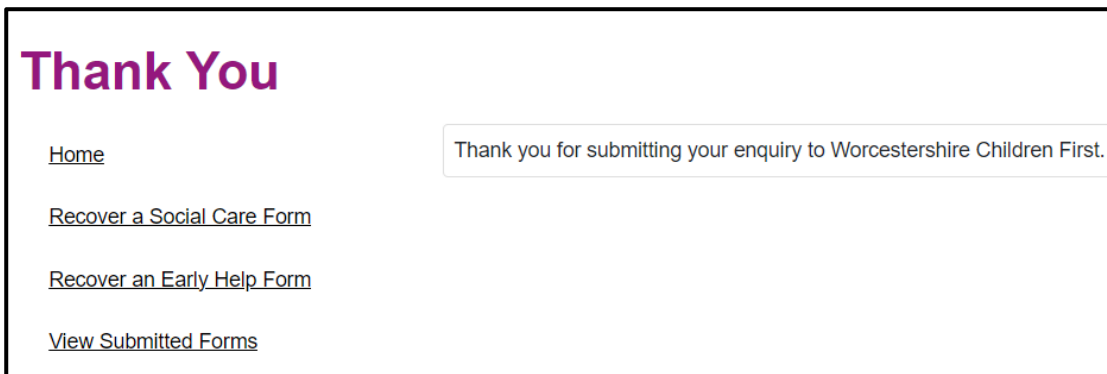


Submit to Local Authority

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.

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 [Viewing and Printing Submitted Forms](#) 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 Children First** and will be called **New Documents**.

Click on the email to open it.

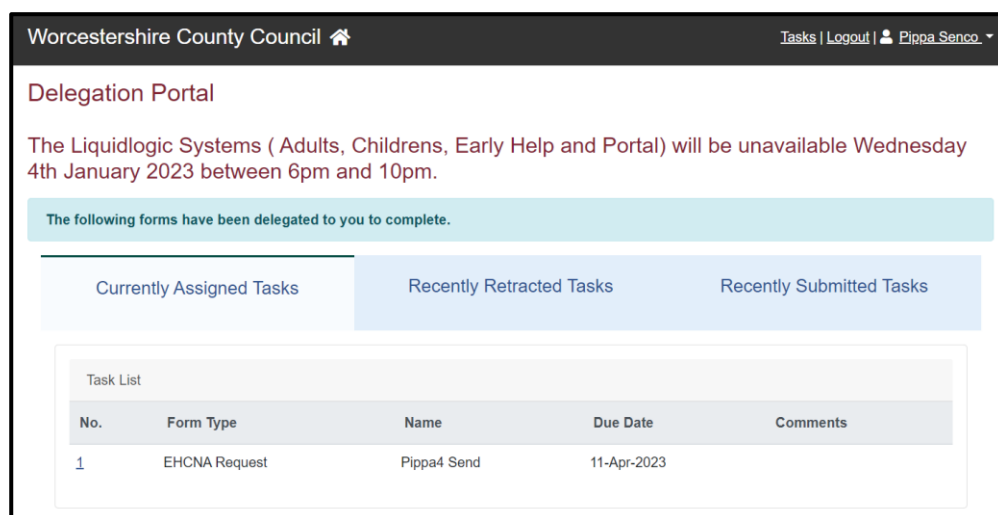
Click on the **Worcestershire Children First Portal** link to access the delegation portal. The email will also state the **date when it should be completed by**



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.**

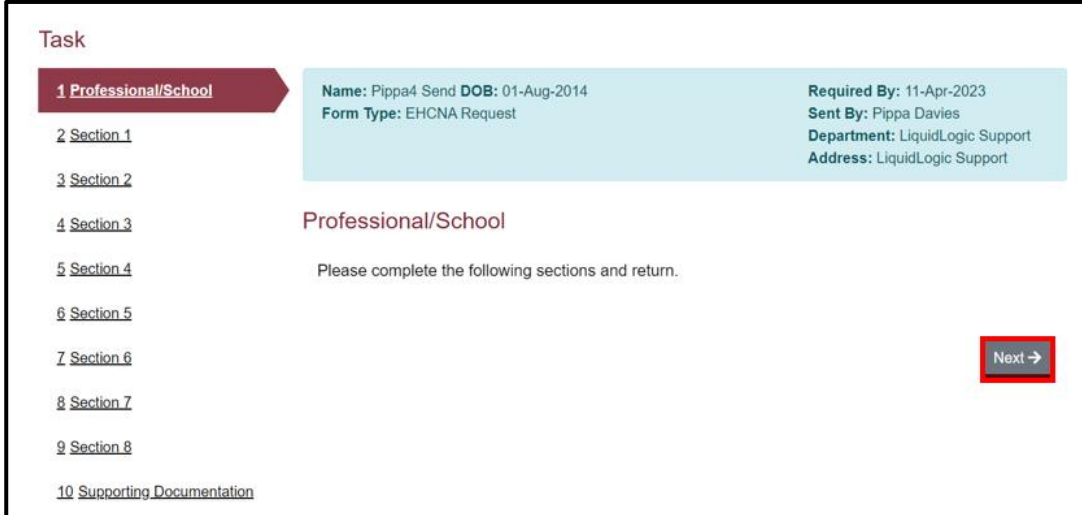
A code will be sent to confirm login. Add this to log in.

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.



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 [Supporting Evidence](#) section of this guide for further guidance.

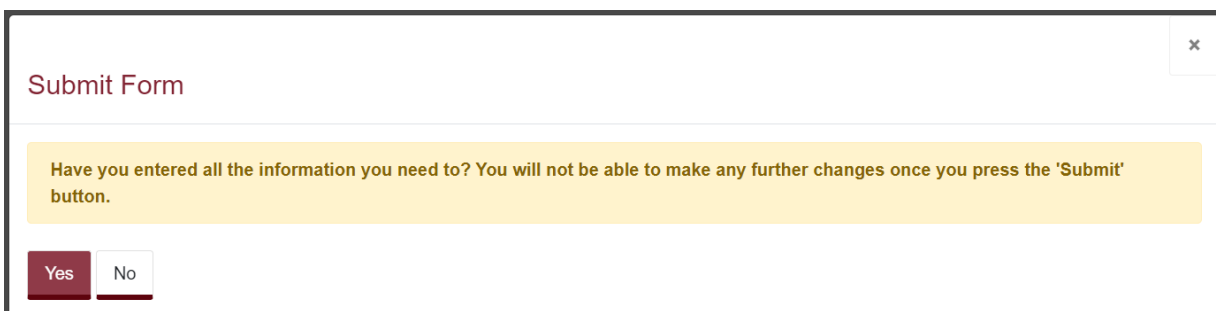
These documents can be uploaded via Supporting Documentation. See the [Supporting Documents](#) section of the guide on how to upload the relevant documents.

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.



Liquidlogic User Guide

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
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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.

Tasks | **Logout** |  Pippa Senco ▾