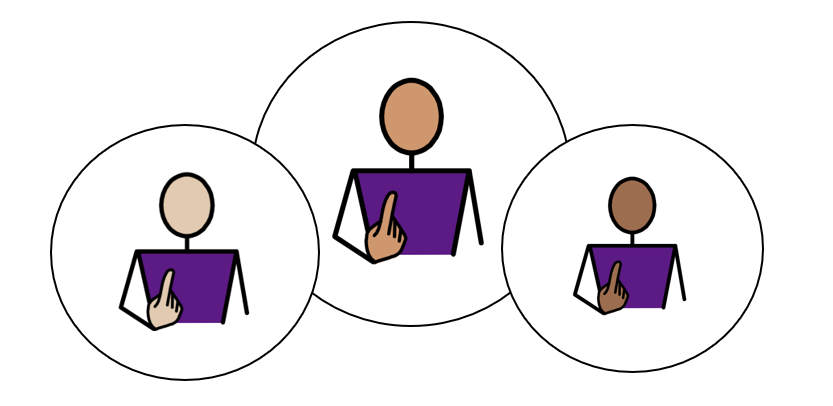
All about Me



Appendix 1A: Pathway 2-Primary

Voice of the Child / Young Person

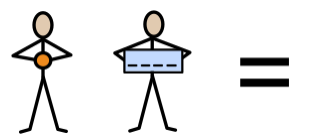
We use our Children’s and Young People’s Outcome Framework, below, to make sure that the support provided for you is having a positive impact on your life.

Children, Young People Outcomes Framework Image.
8 bubbles:
My Independence- There is a clear pathway supporting me to be as independent as I can
My Voice- I am listened to and understood
My Future- I have a choice about my future
My Health- I am as health as I can be
My Learning- I am the best that I can be at school, college or work
My Safety- I feel safe at home and out and about
My Community- I can do things I like in my local area
My Quality of Life- I am happy and enjoy life

This is your chance to tell everyone supporting you what is going well, and what needs to change, in order to help you reach your full potential. The following questions will help us to understand more about you, and your views about your life.

This form can be printed off, to add your own ideas and thoughts in the blank grey boxes, if you would like. An adult can read for you, and /or write your answers for you, if you would like help; and you can break it down into smaller parts, if you don’t want to complete it all at once. Alternatively, this form can be completed electronically, using the text boxes to add typed comments and /or selecting thoughts and views using the tick boxes  provided.

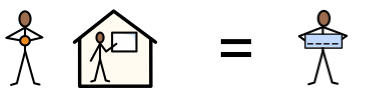
**Please use the information gathered through Pupil Voice to inform the Annual Review Meeting in terms of Outcomes and Provision.**

My name is:

Click or tap here to enter text.

Click or tap here to enter text.

My school/setting is called:



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| --- |
| This information was provided by:  Please select the relevant statement below to represent how the child’s views were gathered to complete Appendix 1A: |

|  |  |
| --- | --- |
| Child/ Young Person’s views were captured by completion of this form and through observations and discussions with the child, their parent(s), carer(s) and relevant professionals. |  |
| The Child/Young Person’s was able to take part in developing their Education, Health and Care Plan (EHCP) by contributing their wishes and aspirations with their parents (s) and the professionals working with them. |  |
| Due to their severe and complex needs, the child/young person is unable to express their views directly. Therefore, their views have been provided by the child’s teacher and parent/carer. |  |

Date of completed form:

Click or tap to enter a date.

Picture, drawing, or photo of me (*optional):*



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| My aspirations (goals) for the future:  **My**  **Future**    An image of a picture showing aspirations or goals for the child or young person of what they would like to accomplish in the future. Please use the text boxes below to record what their next steps would be and I want they would to be able to do in the near future. |

|  |  |  |
| --- | --- | --- |
| This year, I want to get better at: | Please use the text box to explain what the young person wants to get better at this year to accomplish their goals for the near future. | Please use this box to draw / type / write any of your ideas: |
| When I grow up, I would like to be: | Please use the text box to explain what the young person would like to be when they grow up. You can include examples of jobs. | Please use this box to draw / type / write any of your ideas: |

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| I am working towards Independence, by:  **My Independence**  On this page, the examples given are suggestions as to how the child or young person is working towards their independence. |

Comments:

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| --- | --- | --- | --- | --- | --- | --- |
| An image of a picture showing if the child or young person demonstrates their independence through knowing their routine. | An image of a picture showing that a child or young person is working towards their independence through self-care tasks. | An image of a picture showing that the child or young person is able to show their independence through managing their toilet hygiene. | An image of a picture showing a child or young person demonstrating their independence through learning to dress themselves. | An image of a picture showing the child or young person demonstrating their independence through asking for help. | An image of a picture showing a child or young person demonstrating their independence through telling people how they feel. | An image of a picture showing the child or young person demonstrating their independence by telling people what they want or need. |
| Knowing my routine | Doing self-care tasks | Managing my own toilet hygiene | Dressing independently | Asking for help | Telling people how I feel | Telling people what I want or need |

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| How I communicate best:  **My**  **Voice**    The images on this page show different ways in which the child or young person prefers to communicate to others. |

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| --- | --- | --- | --- | --- |
| An image of a picture showing a child or young person preferring to communicate by talking. | An image of a picture showing how the child or young person prefers to communicate by signing. | An image of a picture showing how the child or young person prefers to communicate by using symbols or visual aids. | An image of a picture showing how the child or young person  prefers to communicate by using communicative aids. | An image of a picture showing how the child or young person  prefers to communicate by  reading Braille. |
| Talking | Signing | Using Symbols | Augmentative Communication Aid | Reading Braille |

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| Comments: |

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| How I communicate best:  **My**  **Voice**    The images on this page show different ways in which the child or young person prefers to communicate to others. |

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| Who listens to me, at home?  Please use the text box to write or type about who lives at home with the child or young person. | Please use this box to draw / type / write any of your ideas: |
| Who listens to me, at my school, or in my setting?  Please use this text box to write or type who listens to the child or young person at school or in the setting. | Please use this box to draw / type / write any of your ideas: |

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| The examples on this page show different ways that the child or young person can keep themselves healthy.To keep myself healthy, I:  **My**  **Health** |

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| --- | --- | --- |
| An image of a picture showing that the child or young person can keep healthy by spending time outside each day. | An image of a picture showing the child or young person is able to tell someone when they feel unwell. | An image of a picture showing that the child or young person is able to keep screen-time within healthy limits. |
| Spend time outside each day | Tell someone when I feel unwell | Keep my screen-time within healthy limits |
| An image of a picture showing that the child or young person is able to keep healthy by understanding the importance of staying hydrated. | ~~An image of a picture showing that a child or young person is able to keep healthy by understanding the importance of eating a variety of food.~~ | An image of a picture showing that the child or young person is able to keep healthy by taking prescribed medication. |
| Stay hydrated | Try to eat a variety of foods | Take my prescribed medication |

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| The examples on this page show different ways that the child or young person can keep themselves healthy.To keep myself healthy, I:  **My**  **Health** |

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| An image of a picture showing that the child or young person is able to keep themselves healthy by understanding the importance of brushing their teeth. | An image of a picture showing the child or young person is able to keep themselves healthy by exercising. | An image of a picture showing the child or young person is able to keep healthy by getting enough sleep and rest. | An image of a picture showing the child or young person is able to understand the importance of showering or washing daily to keep healthy. | An image of a picture showing that the child or young person can keep themselves healthy and protected by using wearing suncream or protective clothing. |
| Brush my teeth daily | Exercise | Get enough sleep | Shower, or wash, daily | Wear suncream and /or protective clothing |

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| Please use this box to draw / type / write any of your ideas: |

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| The images on this page show the different ways in which the child or young person prefers to learn. The best way for me to learn, is:  **My Learning** |

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| An image of a picture showing the child or young person's best way of learning through visual images or pictures. | An image of a picture to show the child or young person's best way to learn through  hands- on, practical learning. | An image of a picture showing the child or young person's best way to learn by listening. | An image of a picture showing the child or young person's best way to learn is through using the outdoor space. | An image of a picture to show the child or young person's best way to learn is from project-based activities. |
| Visual | Kinaesthetic (practical, hands-on, doing things) | Auditory | Out-door | Project-based |
| An image of a picture showing the child's preferred style of learning through play-based activities. | An image of a picture showing the child or young person's best way of learning is through their special interests. | An image of a picture showing the child or young person's best way to learn is through watching videos. | An image of a picture showing the child or young person's best way to learn is through learning life skills. | An image of a picture showing that the child or young person learning by working towards and achieving their EHCP outcomes. |
| Play-based/ Child- Initiated | Special interest-based | Watching Videos | Life Skills-based | Working towards and achieving my EHCP outcomes |

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| The images on this page show the different ways in which adults can provide support to the child or young person in their educational setting.Adults can help me, by giving me:  **My Support** |

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| --- | --- | --- | --- | --- |
| An image of a picture showing the best way to support adults can support is providing thinking time for the child or young person. | An image of a picture showing that adults can provide children or young people with support by giving them a visual timetable or objects of reference. | An image of a picture showing that adults can support the child or young person by providing them ear defenders to wear. | An image of a picture to show that adults can support a child or young person by providing them with fiddle toys. | An image of a picture showing the child or young person can be supported by an adult providing them with regular movement breaks. |
| Thinking time | Visual timetables / check-lists | Ear defenders | Fiddle toys | Movement breaks |
| An image of a picture showing the child or young person can be supported by adult providing them with chunked tasks through small steps to success. | An image of a picture showing that adults can provide children or young people with support by using social stories. | An image of a picture showing that adults can give children or young people support by providing them with choices. | An image of a picture showing that a child or person can be supported by an adult providing them access to their own safe space. | An image of a picture showing that adults can help children or young people by providing them with rewards or by using a reward system. |
| Small steps to success (‘chunked’ tasks) | Social Stories | Choices | A safe space | Motivators / Rewards |

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| I feel safe at school:  **My**  **Safety**    An image of a picture showing if the child or young person feels safe at school. Please select Yes, No or Unsure in the boxes below. |

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| --- | --- | --- |
| An image of a picture showing a  green tick to select Yes. | An image of a picture showing a red cross to select No. | An image of a picture showing a question mark, red cross and green tick to select Unsure. |
| Yes | No | Unsure |

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| Please use this box to draw / type / write any of your ideas: |

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| --- |
| Keeping myself safe:  **My**  **Safety** |

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| Who can help me at home?  An image of a picture showing who can help the child or young person at home. | Who can help me at school?  An image of a picture showing who can help the child or young person at school. |
| Please use this box to draw / type / write any of your ideas: | Please use this box to draw / type / write any of your ideas: |

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| Adults can teach me to keep safe, by helping me to:  **My**  **Safety**    The images on this page are examples of how adults can keep teach the child or young person how to keep safe at school. |

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| An image of a picture showing that adults can teach children or young people to keep safe by teaching them to follow instructions. | An image of a picture showing that adults can keep children or young people safe by teaching them to recognise danger. | An image of a picture showing adults can help keep children or young people safe by teaching them to practise self regulation. | An image of a picture showing adults can help keep children or young people safe by teaching them to understand  what to do in a fire drill. | An image of a picture showing that adults can help keep me safe by teaching me to understand road safety. |
| Follow adult direction to keep me safe | Recognise Danger | Practise Self-Regulation | Understand what to do in a fire drill | Understand Road Safety |
| An image of a picture showing that adults can help keep me safe by teaching me to be aware of stranger danger. | An image of a picture showing that adults can help keep me safe by teaching me to practise online safety. | An image of a picture showing that adults can help to keep me safe by teaching me to keep healthy and look after my body. | An image of a picture showing that adults can help keep me safe by teaching me to understand consent for example knowing my body and my choice. | An image of a picture showing that adults can help keep me safe by teaching me to understand boundaries knowing I have the right to say no and change my mind. |
| Be aware of Stranger Danger | Practise  Online Safety | Keep healthy and look after my body | Understand Consent:  My body; My choice | Understand Boundaries: My right to say No, and change my mind |

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| Outside of my school, or setting, I like:  **My Community**    The images on this page show examples of hobbies and things the child or young person enjoys outside of their school or setting. |

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| --- | --- | --- | --- | --- |
| An image of a picture showing that the child or young person enjoys playing football outside of their school or setting. | An image of a picture showing the child or young person enjoys swimming outside of their school or setting. | An image of a picture showing that the child or young person enjoys horse riding outside of their school or setting. | An image of a picture showing that the child or young person enjoys gymnastics outside of their school or setting. | An image of a picture showing the child or young person enjoys gaming outside of their school or setting. |
| Football | Swimming | Horse riding | Gymnastics | Gaming |
| An image of a picture showing the child or young person enjoys socialising outside of their school or setting. | An image of a picture showing the child or young person enjoying reading outside of their school or setting. | An image of a picture showing the child or young person enjoying soft play outside of their school or setting. | An image of a picture showing the child or young person enjoying dancing outside of their school or setting. | An image of a picture showing the child or young person enjoying playing music outside of their school or setting. |
| Socialising | Reading | Soft play | Dancing | Playing Music |

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| The images on this page show examples of hobbies and things the child or young person enjoys outside of their school or setting.Outside of my school, or setting, I like:  **My Community** |

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| --- | --- | --- | --- | --- |
| An image of a picture of the child or young person enjoying going shopping outside of their school or setting. | An image of a picture showing the child or young person enjoying going to the cinema outside of their school setting. | An image of a picture showing the child or young person enjoying singing outside of their school or setting. | An image of a picture showing the child or young person enjoying trampolining outside their school or setting. | An image of a picture showing the child or young person enjoying going to the park outside of their school or setting. |
| Shopping | Cinema | Singing | Trampolining | Going to the park |

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| Please use this box to draw / type / write any of your ideas: |

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| On this page, the pictures are examples of the child or young person's quality of life. The examples suggested show what the child or young person enjoys in their school or setting.My quality of Life: At school, I feel good, when:  **My Quality of Life** |

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| --- | --- | --- | --- | --- |
| An image of a picture to show that the child or young person feels good when they played with their favourite toy. | An image of a picture showing that the child or young person feels good when someone says well done to them. | An image of a picture showing the child or young person feels good when they have computer time. | An image of a picture showing the child or young person feeling good when it is Forest School. | An image of a picture showing the child or young person feeling good when it was their favourite lesson at school. |
| I played with my favourite toy | Somebody said: “Well done!” | I had computer time | It was Forest School | It was my favourite lesson |

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| Please use this box to draw / type / write any of your ideas: |

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| My quality of Life- At home, I am happy when I am with:  **My Quality of Life**    On this page, the pictures are examples of the child or young person's quality of life. The examples suggested show what the child or young person enjoys in their school or setting. |

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| --- | --- | --- |
| An image of a picture to show that at home I am happy with my family. | An image of a picture to show that at home I am happy with my pets. | An image of a picture to show that I am happy being with my close friends. |
| My family | My pets | My close friends |

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| Please use this box to draw / type / write any of your ideas: |

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| At my school or setting, overall:  This page tells you information about the  young person's feelings they have at their school or setting. Please select Yes, No or I dont know for each image. |

|  |  |  |  |
| --- | --- | --- | --- |
| My Setting: | An image of a picture showing a green tick to select Yes.  Yes  Yes | An image of a picture showing a Red Cross to select No.  No  No | An image of a picture showing I don't know.  I don’t know |
| **My Future –** I have a choice about my future.  An image of a picture showing that I have choice about my future. |  |  |  |
| **My Independence -** I have the right support to enable me to be as independent as I can be.  An image of a picture showing that I have the right support to enable me to be as independent as I can be. |  |  |  |
| **My Voice -** I feel listened to.  An image of a picture showing that I  feeling listened to. |  |  |  |
| **My Health –** I have the right health support to enable me to be as healthy as I can be.  An image of a picture showing that I have the right health support to enable me to be as healthy as I can be. |  |  |  |
| **My Learning/Support** - I feel I have the right amount of support in my setting.  An image of a picture showing that I have the right amount of support in my setting. |  |  |  |
| **My Safety** - I feel safe.  An image of a picture showing that I feel safe in my school or setting. |  |  |  |
| **My Quality of Life- I am happy and enjoy life.**  My quality of life |  |  |  |
| An image of a picture showing that I  have a sense of belonging in my community.**My Community** - I have a sense of belonging. |  |  |  |

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| I have been included in my Annual Review meeting:  An image of a picture showing that i have been included in my annual review meeting.  Please select *Not Applicable* if their annual review meeting has not been held yet meeting (the annual review meeting is held within a year after the EHCP of its first issue or from the date of the last review). |

|  |  |  |  |
| --- | --- | --- | --- |
| Not Applicable  An image of a picture to select Not Applicable as my annual review meeting has not happened yet. | Yes  An image of a green tick to select Yes that I have been included within my annual review meeting. | No  An image of a picture showing a red cross to select No I have not been included in my annual review meeting. | Not Sure  An image of a picture showing I dont know. I am not sure if my annual review meeting has happened yet. |
|  |  |  |  |

Anything else:



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| Comments: |