

Education, Health & Care (EHC) Plan Guidance



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The EHCP **must be person centred**.

It **must contain** the **young person's views** and **aspirations**.

It should be **jargon free**. Use simple language.

The EHCP is a **live, working document**.

It must include skills and outcomes that promote independent living skills.

SECTION A

This section must also include your aspirations and those of your child. Aspirations can be anything that you and your child would like them to achieve in the future, however unrealistic e.g. Jonny wants to be an astronaut.

Aspirations are not the same as measurable outcomes.

SECTION B

This section should include details of the special educational needs that have been identified. The needs should be broken down into strengths and needs and bullet pointed under the four broad areas of SEND or PfA (Preparing for Adulthood) headings. At Gateshead we encourage the use and incorporation of the PfA headings as early as possible within the EHCP. They must be used from Year 9 onwards as a minimum. At every review you should ensure this section is still accurate. Any formal diagnosis such as dyspraxia, Autism, Cerebral Palsy and sensory impairment would be in this section.

Communication & Interaction

This section should include speaking, understanding, social communication and relating to others.

Strengths:-

- Ruby's spoken language is at an early stage of development. She is able to communicate her needs through a mixture of single words, gesture and Makaton signing.

Needs:-

- Pascal has difficulties with the social use of language. He is not able to hold a conversation as he finds it hard to listen and take turns. He is also very literal and can come across as rude or abrupt.

Cognition & Learning

This section should include details general learning difficulties and more specific ones such as dyslexia.

Strengths:-

- He can sometimes copy simple play modelled by an adult when the activity interests him e.g. pushing train along track, manipulating dough or pretending to eat play food.

Needs:-

- Jennifer has difficulty processing information and following complex instructions.

Social, emotional and mental health

This section should include details of challenging, withdrawn or disruptive behaviour as well as any underlying mental health difficulties such as anxiety, eating disorders, self-harming. This section should also include difficulties experienced by pupils as a result of disorders such as ADD, ADHD and attachment disorder.

Strengths:-

- John shows his dislikes and likes through his different vocalisations and stamping his feet, he can use some words e.g. no.
- With visual support and objects of reference, David can transition from one activity to another with success.

Needs:-

- Ahmed has been diagnosed with ADHD. His behaviour can be very impulsive.
- Jessica has very high anxiety levels. She finds the school environment extremely stressful and has had periods of school refusal. She also has a history of self-harming.

Sensory and Physical Needs

This section should include eating, drinking, dressing if appropriate.

Strengths:-

- Sonja is in the early stages of toilet training, she is sometimes communicating her need to use the toilet.
- Ahmed can dress himself sometimes but needs help with zips and buttons.

Needs:-

- Matthew has a severe vision impairment and is registered blind.
- Tabitha has cerebral palsy and is a wheelchair user. She can walk very short distances with a walking frame but cannot manage steps.

PfA headings

www.preparingforadulthood.org.uk/downloads/pfa-review-toolkit.htm

Employment / Higher Education

What key skills are their strengths when thinking about getting closer to employment or further education? Have they any work placements organised? Do they have key interests and skills identified? Have they had careers advice?

Includes Training / Apprenticeships / Voluntary work / setting up a business / supported internships.

Independent Living

- Is the young person learning skills at home and at the setting that will help to promote independent living including cookery, financial and budget managing, shopping skills, laundry skills, personal hygiene, where would they like to live in the future and independent travel?
- Do they know about local housing options, housing benefits, social care support?

Friends, Relationships and Community

- Friendships in and outside of the setting.
- Community activities accessed?

Good Health (and wellbeing)

- Are they registered with a GP?
- Are they aware of the 14+ health check?
- What curriculum are they accessing to support a healthy lifestyle?
- What support is in place to address their alcohol intake, smoking, drug use, diet?

SECTION E: Outcomes

There should be a minimum of three long term outcomes that focus on how the young person can progress with their learning up to the end of the next Key Stage. Long term outcomes will be reviewed at the end of the next Key Stage. The outcomes should clearly link to key skills that will allow the young person to reach their **aspirations/goals**. The outcomes must be devised in discussion with the young person and their parents and carers as well as all of the people who have provided advice. The outcomes need to describe what the young person will be able to do as a result of getting the extra help in Sections F-H. **DO NOT USE words including have access to, opportunities for, regular, improve, will develop.**

- Emily will plan an out of school activity once a week with a group of friends by the time she moves on to college.
- By the end of year 6, Dion will independently make a sandwich following the pictorial step by step guide.
- By age 18, Jonathan will have achieved a level 1 qualification in maths and English as part of his career pathway.
- By the end of Key Stage 1, Parveen will use spoken language to communicate her basic needs five times per day.

The Action Plan should show the short term outcomes/steps towards achieving these long term outcomes. The short term outcomes in the Action Plan show how the Young Person will work towards meeting these long term outcomes during the next 12 months and the help and support in terms of provision that they will be given to do this.

The Action Plan should be current, appropriate and in line with the long term outcomes. The setting should informally review progress every term with parents/carers and keep a record of both their views and the young person's

The EHC Plan will be formally reviewed annually to:

- Consider whether the EHC Plan is still appropriate and decide whether to make amendments or to cease to continue it;
- Look at the progress that the young person has made towards meeting the long term outcomes and set new short term outcomes;
- Update the Action Plan for the next year
- Review the special provision made and whether it was effective in meeting needs;
- Update the One Page profile.

A representative of the Local Authority must be invited to this review.

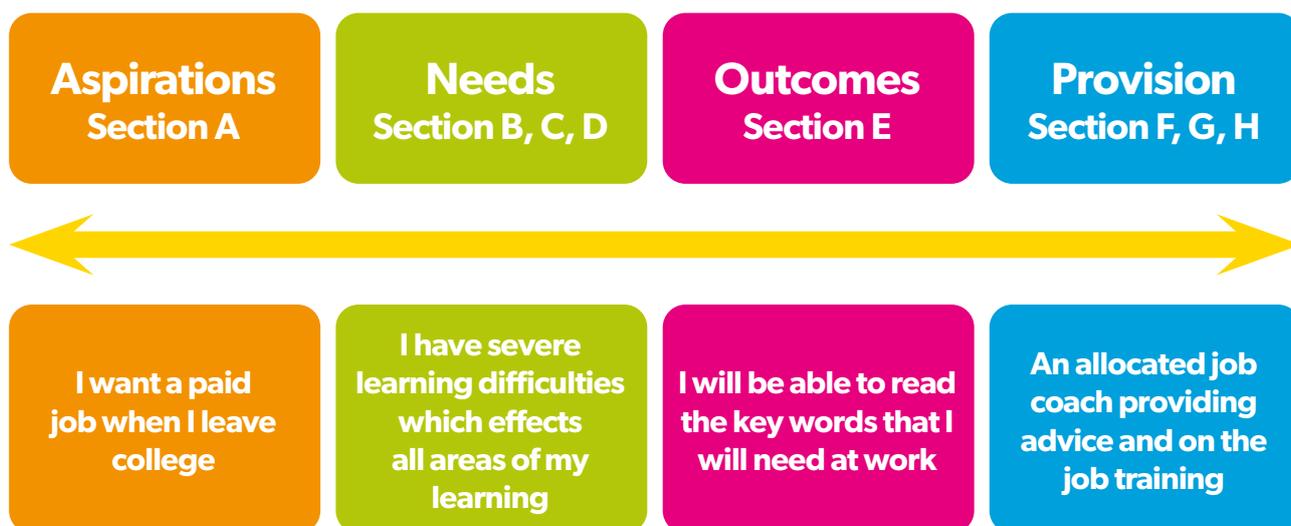
Arrangements should be in place to make sure that the young person is actively involved in preparing and reviewing their action plan and in monitoring their own progress.

Example Action Plan

Short term outcome	Description of provision which will be delivered by the setting Child Forename	How often and how long? (Quantify)	Who will provide the help?	How will this be measured / reviewed?
<p>Long term outcome – Communication and Interaction Example: X will build positive relationships with others by interacting more effectively and appropriately with his peers and adults</p>				
<p>Short term outcome</p> <ul style="list-style-type: none"> • To interact appropriately with 2 peers and increase to 4 peers 2 afternoons per week • To interact appropriately with 2 key adults in the classroom daily • To interact appropriately with peers and adults outside of the classroom during outdoor play twice a week 	<ul style="list-style-type: none"> • Use modelling and other visuals to develop X's social communication skills and support development of friendships between him and his classmates • Regular paired/ small group tasks with an adult to model and rehearse and apply social communication skills • 1:1 Emotional Literacy Intervention once a week • A group session of Lego Therapy once a week in a small group with same peers 	<ul style="list-style-type: none"> • 1 term, 15 mins twice daily • 6 weeks, 20 mins, 3x per week • 8 week programme for 1 hour per week • 1 term for 1 hour per week and then will review 	<ul style="list-style-type: none"> • School staff (Teacher/ TA/ supervisory staff to model at every opportunity) • TA level 2 • HLTA • TA level 2 	<ul style="list-style-type: none"> • Impact measuring-observational log and record of incidents. • Record and observation of the sessions measuring number of appropriate exchanges • Assessment and review of impact • Assessment and review of impact

When setting outcomes consider the following:

The Golden Thread



Ensure that outcomes are not school curriculum targets. e.g.

To learn the 5x, 10x times tables

To read and write the first 100 high frequency words

To use subject, verb, object to write three sentences

How well did I use the Outcome Sequence?

- Did I discover what matters to the young person, who is important in their life and the places that matter to them? Did I explore aspirations if this was appropriate?
- Have I fully understood what is working and not working about the young person's life now, from their perspective?
- Am I clear about the positive change that the young person wants to see in their life (either changing something that is not working or moving towards an aspiration)?
- Have I described this change in terms of a specific outcome or outcomes?
- Have I checked the outcome(s) against the following:
 - Can we measure it? Do we know the starting point?
 - Is it achievable?
 - Does it keep or build on what is working?
 - Does it change what is not working?
 - Does it move the young person closer to their positive change/aspiration?
 - Where there is an assessed need, does the outcome meet it?
 - Is it written in everyday language, and not expressed from a service perspective?
 - Is there a solution embedded in the outcome?

Am I confident that I involved the young person in decision making as much as I could?

SECTION F: Special Educational Provision

This section is **LEGALLY ENFORCEABLE**. Provision must be specified for each need identified in Section B. The type, hours, frequency and level of expertise of support needs to be included as well as any equipment, facilities and staffing arrangements. It should also include whether any modifications have been made to the curriculum, whether any exclusions or substitutions have been made to the curriculum/course and any residential provision. Health or social care provision that educates should be included in this section e.g. Speech and Language Therapy.

For nursery children with support:

- **Support to the equivalent of additional teaching assistant support for a minimum of *5 hours per week. One hour of this support will be provided by the Early Years Assessment and Intervention Team (EYAIT).**

For mainstream children:

- **Support to the equivalent of additional teaching assistant level 3 support for a minimum of XX hours per week. The support may be provided flexibly using a range of teacher, teaching assistant, small group and 1:1 sessions to support XX.**

For ARMS / Special School children:

- **A higher than average teacher: pupil ratio to facilitate individual and small group work.**
- **Teachers who have an understanding of pupils with (...insert primary need)**
- Insert additional provision which is being provided as a result of having a Plan.
- Clear arrangements for working in partnership with parents/carers and ensuring that they have any necessary support, guidance and information to participate in their education.
- Different learning materials as required by their action plan.

Section B - Special Educational Needs

- Difficulty understanding social rules
- Misses instructions
- Lack of self-help skills, not yet toilet trained
- Becomes overwhelmed by sensory stimuli
- Difficulty managing transitions and changes to routine

Section F - Special Educational Provision

- Social skills group, use of social stories
- All learning to be reinforced and repeated
- Checking back that child has understood
- Individual Toileting programme adult support to change
- Quiet space within school
- OT to provide programme of sensory activities
- Visual timetable
- Advance warning of any changes

When setting outcomes consider the following:

How well did I use the Support Sequence?

Did I start by exploring what the young person has tried already, and what ideas they have?

- **Yourself**

Did I consider with the young person how they can build on their strengths, assets and qualities? Did I explore what else the young person could do to improve their knowledge, skills or confidence?

- **Technology**

Did I investigate whether there are any apps or technology that could help?

- **Equipment and Adaptations**

Did I review whether there are any products or equipment that could help? Did I see whether there are any physical changes that could be made to the young person's home or environment that could help?

- **Family, Friends and Neighbours**

Did I explore whether there is anything that the young person's family, friends or neighbours could help with?

- **Community**

Did I investigate whether there are places, groups or events happening in the young person's community that could help? Did I consider online communities too?

- **Services or Setting**

For young people

Did I review what the school or college could do to help and what is available in the local offer?

For adults

Did I consider whether there are any general health or social services that could help and what is available through universal services?

- **Support**

For young people

Did I explore whether additional specialist support could help?

Support for adults

Did I consider how to organise support that could help? Did I review whether there is anything an existing provider could do or do differently?

Did we consider personal budgets?

Am I confident that I involved the young person in decision making as much as I could?

Provision is NOT Lexia/ Nessy/ Talkboost or anything that is included within the whole school SEN support differentiation.

See the SEN Support guidance document for further information linked to SEN Support

<https://educationgateway.org/send-support-guidance/>

SECTION C: Health needs related to SEN

This section should include any diagnoses or sensory / physical / mental health issues which result from the young person's SEN or medical condition.

- Angus cannot take any food or drink by mouth. He is PEG fed.
- Chantelle has epilepsy. She mainly has seizures at night but they can occur during the school day. After a seizure she is very tired and needs to rest.
- In common with many children with Down Syndrome, Abigail has a lowered immune system and gets frequent respiratory infections. She may miss more school than average, particularly during the winter months.

SECTION G: Health Provision

Provision must be specified for each need identified in Section C. This section needs to include the type of support, who will provide it and how the provision will support the outcomes. If necessary, an Individual Health Care Plan should be included as well as medical treatments, details about the delivery of medication, occupational therapy, physiotherapy, nursing support and equipment, wheelchairs, continence supplies and specialist services commissioned centrally. It's important for the EHC plan to give a full picture of the young person, including any health needs that may affect them in school. If the young person already has an individual healthcare plan, that should be incorporated into section G or cross-referenced e.g Emergency Asthma Care Plan.

- **Example:** Carly will attend the paediatric diabetes clinic every six months. Before she starts school, the specialist diabetes nurse will deliver two training sessions to school staff.

SECTION D: Social Care Needs

Section D contains any social care needs related to the young person's special educational needs or disability. These will be things that relate to life in the community and at home, for example: isolation, lack of social opportunities, behaviour impacting on family life. If there has been a [social care assessment](#) then this information should be included. Otherwise, there may be evidence from the school or community organisations.

- Joseph is not able to take part in social activities with other teenagers or go out on his own. He currently relies on his parents to take him out and provide support
- Amira's challenging behaviour has a severe impact on her family. The family finds it hard to do activities together and her two younger siblings miss out.

Section H

- H is divided into two subsections. H1 is social care provision provided for children under 18 under 2 of the Chronically Sick and Disabled Persons Act 1970. Section H is particularly important where young people require support in order to achieve as much independence as possible in adulthood. Some young adults may have a mixed package of educational and social care support. This is a rather old fashioned list, but in essence covers everything except residential short breaks, for example:
- Help in the home.
- Help for a holiday.
- Leisure facilities.

Section H1: applies to YP under the age of 18

Provision must be specified for each need identified in Section D. This section needs to include the type of support, who will provide it and how the provision will support the outcomes. It should give details of services such as personal assistance at home, help to access recreational or educational facilities at home and outside of the home, travel to and from these facilities, adaptations to the home, help to take holidays, provision of meals at home or outside of the home and help to obtain specialist equipment. It should also include services provided for «Child_Forename1» parents.

SECTION: H2

This section needs to include any social care provision identified from CAF, Child in Need or safeguarding assessments which are not outlined in Section H1. For **under 18s** this could include **residential short breaks** and for **over 18s any adult social care provision in their care and support plan**.

SECTION I

- Section I names the school or other institution your child attends. Draft plans DO NOT contain the name of the setting.
- In a final plan, section I will contain the type and name of the school or college, for example: John attends Cedars Academy, which is a specialist academy.

SECTION J: Personal budgets

When the local authority informs you that they will be issuing an EHC plan, parents/carers have the right to ask for a personal budget to be prepared.

Personal budgets may relate to education, health or social care or a combination.

For more information see our detailed factsheet on personal budgets. (www.contact.org.uk).

SECTION K: Reports gathered as part of the assessment process.

The reports are the information and advice gathered from different people as part of the EHC needs assessment. They should be at the back of the plan and listed in Section K. This is **NEVER** added to annually.

