My Education,

Health and Care Plan

(EHCP)



**This is my plan. It describes my strengths and special educational needs and the support that I will receive to help me to achieve my outcomes.**

****

Young Person’s name

**My personal details**

|  |  |
| --- | --- |
| **Name** |  |
| **Address** |  |
| **Mobile No.** |  | **Email address** |  |
| **Gender** |  | **Date of birth** |  |
| **LAC/Leaving Care** | Yes/No | **Authority**  |  |
| **First Language** |  |
| **Religion** |  |
| **Ethnicity** |  |

|  |
| --- |
| **Young Person’s Parent/s or Guardian/s (with parental responsibility)** |
|  | **Parent or Guardian 1** | **Parent or Guardian 2** |
| **Name** |  |  |
| **Address** **(only if different from above)** |  |  |
| **Telephone Number:** | **Landline** |  |  |
| **Mobile** |  |  |
| **Email Address** |  |  |

|  |  |
| --- | --- |
| **Primary area of need** |  |

**SECTION A:**

PHOTOGRAPH

Delete box if no photograph

**My views, interests and aspirations**

**All About Me**

This section has been completed by\*\*\*\*\*\* with help from \*\*\*\*\*\*.

|  |
| --- |
| **What’s important to me / What I want to achieve in my life**  |
|  |
| **These are the people that are important to me**  |
| **Name** | **Relationship to me** |
|  |  |
| **My interests and what I like to do** |
|  |
| **My strengths / What am I good at** |
|  |
| **What I find difficult** |
|  |
| **How to support me** |
|  |
| **How I would like to be included in making decisions** |
|  |

|  |
| --- |
| **[insert name]’s** **journey/story so far** |
| *Please review this section in the ‘All About Me’ and include/amend/add detail as you think necessary. Try to include a brief summary of main life events/background/history within this section*.  |

**SECTION B:**

|  |
| --- |
| **[insert name]’s** **special educational needs (SEN)** |
| This section has been informed by the advice listed in Section K of this EHCP. **Summary of special educational needs:** |

**Section C:**

|  |
| --- |
| **[insert name]’s health needs which relate to his/her SEN** |
| \*\*\* was seen by Dr \*\*\*, Associate Specialist Community Paediatrician, on [date] as part of the multi-disciplinary assessment (MDA). / education health and care needs assessment.\*\*\* is a physically healthy \*\*\* *or otherwise give advice of how health impacts in school, home and community.*  |
| **Any other health needs which are not related to SEN** |
|  |

**Section D:**

|  |
| --- |
| **[insert name]’s** **social care needs which relate to his/her SEN** |
| The Family Conversation identified…..The Early Help assessment identified….(If there is an Early Help Plan please list in section K) |
| **Other social care needs which are not linked to SEN or disability** |
| No other social care needs are currently identified through assessment or informal discussion with the family. |

**SECTION E: Long-Term Outcomes**

Long-Term Outcomes, these will enable young people to move towards their long term aspirations and prepare for adulthood:

* Higher education and/or employment
* Independent living
* Participating in society
* Being healthy in adult life

Outcomes should be **SMART** and categorised as specific to: Care, Health, Education or Training. They should also reflect any anticipated key changes; such as moving from compulsory education to further education or training.

|  |  |  |
| --- | --- | --- |
| **Long-Term Outcome 1** | **By when**  | **Care / Health / Education or Training** |
|  |  |  |
| **Steps to achieve this:**  |
|  |

|  |  |  |
| --- | --- | --- |
| **Long-Term Outcome 2** | **By when**  | **Care / Health / Education or Training** |
|  |  |  |
| **Steps to achieve this:** |
|  |

|  |  |  |
| --- | --- | --- |
| **Long-Term Outcome 3** | **By when**  | **Care / Health / Education or Training** |
|  |  |  |
| **Steps to achieve this:** |
|  |

|  |  |  |
| --- | --- | --- |
| **Long-Term Outcome 4** | **By when**  | **Care / Health / Education or Training** |
|  |  |  |
| **Steps to achieve this:** |
|  |

**Monitoring Progress**

In addition to the learning provider’s usual arrangements for reviewing progress and target setting for all, the following arrangements are necessary:

* The educational setting will work with [insert name] and parents/carers (where agreed) will agree short-term educational targets for [insert name] and incorporate them into his/her Person Centred Plan (PCP) within two months of the finalisation of the EHCP.
* The educational setting should convene termly meetings to review progress. This should be person centred and involve the young person and any family members and/or support workers/key people identified by the young person as well as other appropriate professionals. The Person Centred Plan should be reviewed, amended and agreed with the young person.

**SECTION F: SPECIAL EDUCATIONAL PROVISION**

The **special educational provision** required to meet [insert name]’s special educational needs.

[insert name] will be educated within a to be confirmed provision.

*All provision listed should be embedded within the daily curriculum, including structured and non-structured times. This should be in a combination of for example, language activities can be part of maths, literacy etc they do not always need to be standalone unless otherwise specified below.*

|  |
| --- |
| **Long-Term Outcome 1** (Section E) |
|  |
| **Provision** (Include any specific training, skills, qualifications required)*Additional strategies and information can be found in reports appended to this plan* |
| * *This must be detailed and specific.*
 |

|  |
| --- |
| **Long-Term Outcome 2** (Section E) |
|  |
| **Provision** (Include any specific training, skills, qualifications required) |
| * *This must be detailed and specific.*
 |

|  |
| --- |
| **Long-Term Outcome 3** (Section E) |
|  |
| **Provision** (Include any specific training, skills, qualifications required) |
| * *This must be detailed and specific.*
 |

|  |
| --- |
| **Long-Term Outcome 4** (Section E) |
|  |
| **Provision** (Include any specific training, skills, qualifications required)*Additional strategies and information can be found in reports appended to this plan**All provision listed should be embedded within the daily curriculum, including structured and non-structured times. This should be in a combination of for example, language activities can be part of maths, literacy etc they do not always need to be standalone unless otherwise specified below.* |
| * *This must be detailed and specific.*
 |

**SECTION G: HEALTH PROVISION**

**This needs to reflect the needs identified in Section C**

Any health provision reasonably required by the learning difficulties or disabilities which result in the young person having SEN

|  |  |
| --- | --- |
| **Outcome****Number**(Section E) | **Provision** (Include any specific training, skills, qualifications required) |
|  | \*\*remove if not appropriate\*\*Down Syndrome pupils over 14 should be included on the GP Learning Disability register:* X will be on the NHS GP Learning Disability Register
* X’s NHS GP will offer an annual health check to X. This will include both physical and mental health checks
 |
|  |  |

**SECTION H: SOCIAL CARE PROVISION**

**H1:** Any social care provision which must be made for a young person under 18 resulting from section 2 of the Chronically Sick and Disabled Persons Act 1970 (CSDPA).

|  |  |
| --- | --- |
| **Outcome****Number**(Section E) | **Provision** (Include any specific training, skills, qualifications required) |
|  | From the information gathered during the EHC assessment there are no identified unmet social care needs requiring provision under Section 2 of the CSDPA. If needs change an early review of the EHCP should be convened and/or a social work assessment can be requested. Please contact Shropshire’s Children’s Services on 0345 678 9021. |

**H2:** Any other social care provision reasonably required by the learning difficulties or disabilities which result in the young person having SEN. This will include any adult social care provision being provided to meet the needs of a young person under the Care Act 2014.

|  |  |
| --- | --- |
| **Outcome****Number**(Section E) | **Provision** (Include any specific training, skills, qualifications required) |
|  | From the information gathered during the EHC assessment there are no unmet social care needs that require provision as a result of having SEN. The SEND Local Offer provides information about activities for children and young people with SEN through our All In activity programme. The All In Programme is part of our Early Help service for children aged up to the age of 18 who live in Shropshire and have SEND and require additional support to access universal services.The Local Offer also provides information about social care short breaks, other sources of support and preparing for adulthood.Search Local Offer Shropshire: <http://shropshire.gov.uk/the-send-local-offer/> |

**SECTION I: PLACEMENT**

|  |  |
| --- | --- |
| **Name\*** |  |
| **Type** |  |

***\* Please note transport assistance will be granted to the nearest college/school, over 3 miles away from your registered home address that provides the desired course. All students must make an application and a parental contribution may apply.***

***For information regarding transport entitlement please refer to*** [***https://shropshire.gov.uk/media/20086/fst-application-guidance-notes-1.pdf***](https://shropshire.gov.uk/media/20086/fst-application-guidance-notes-1.pdf)

**SECTION J: PERSONAL BUDGET**

Provision in this plan eligible to be delivered through a personal budget: (Including arrangements for direct payments).

|  |  |  |
| --- | --- | --- |
| **Type**Direct Payment/ Notional Arrangement/ 3rd Party Arrangement | **Detail of Support** How will the personal budget be used? What will it purchase? Detail needs and outcome the personal budget will contribute to. | **Source**Education/ Health/ Social Care |
|  |  |  |

**Education Health Care Plan Agreement:**

|  |  |
| --- | --- |
| **EHCP review schedule** | The Statutory Annual Review will take place within 12 months of the date from when the plan was first issued. Subsequent Annual Reviews should take place within 12 months of that date. |

|  |  |  |  |
| --- | --- | --- | --- |
| **Date original EHCP issued** | **Date current EHCP issued** | **Version Number** | **Reason for amendment (including section/s):** |
|  |  |  |  |

|  |  |  |
| --- | --- | --- |
| **Name of duly authorised officer** | **Designation** | **Signature** |
| Karen Levell  | Service Manager – SEND and Inclusion  |  |

**SECTION K: ADVICE AND INFORMATION**

|  |  |  |  |
| --- | --- | --- | --- |
| **Advice**  | **Name, Job Title, Service**  | **Advice Attached** | **Date of Advice** |
| All About Me/Us | Mr \*, Parents | Yes | 00/00/2020 |
| Medical Questionnaire | Mr \*, Parents  | Yes | 00/00/2020 |
| Preparing for Adulthood Document  |  | Yes | 00/00/2020 |
| Education Report | Mrs \*, Headteacher, \* Primary School  | Yes | 00/00/2020 |
| Person Centred Plan | Senco, \* Primary School  | Yes | 00/00/2020 |
| Health Report  | Dr \*, Consultant Paediatrician, Shropshire Community Health Trust | Yes | 00/00/2020 |
| Health Report | Dr \*,  | Yes | 00/00/2020 |
| Educational Psychology Report | Dr \*, Educational Psychologist, Educational Psychology Service  | Yes | 00/00/2020 |
| Social Care Advice |  | Yes | 00/00/2020 |
| Early Help  | Webstar / Early Help  | Yes | 00/00/2020 |
| Family Conversation  |  | Yes | 00/00/2020 |

**ANY OTHER INFORMATION** – (This is not part of the statutory EHC Plan)

This may include any provision that will support the young person to achieve outcomes so that they can become as independent as possible and be involved in their local community.

|  |
| --- |
| *Insert information on what parents can do at home to support their child to meet the outcomes.* **Kooth** provide an anonymous 24-hour online service offering peer support, self-help and have trained counsellors to talk to. Anyone aged 11-25, living in Shropshire and Telford & Wrekin, can register to access this service and you don’t need to be referred or have an appointment. Whilst the website is available 24 hours, there will be someone to talk to online at the following times: 12:00 to 22:00 (Monday to Friday) and 18:00 to 22:00 (Saturday, Sunday and Bank Holidays). https://kooth.com/ **BEAM** is an emotional health and well-being service for children and young people across Shropshire to deliver health promotion, prevention and early help support as well as working with young people to aid transition/sign posting to other services or resources. Drop in sessions are available in Shrewsbury, Wellington and Ludlow. You don’t need to be referred or have an appointment, just turn up. For more information visit the [website](https://www.childrenssociety.org.uk/beam/shropshire) or you can email at AskBeam@childrenssociety.org.uk *Please delete if the child/young person does not have ASD/Autistic traits*[Autism West Midlands](https://shropshire.gov.uk/the-send-local-offer/family-support/autism-west-midlands-awm/) (AWM) offer a range of free support services to families and carers of children and young people who live in Shropshire who have autism or autistic traits.  Support services include individual advice and support, regular training webinars and a number of [events and support groups](https://autismwestmidlands.org.uk/events/). The [SEND Local Offer](http://shropshire.gov.uk/the-send-local-offer/) has a directory with [SEND activities & things to do](http://search3.openobjects.com/kb5/shropshire/fid/family_results.action?familychannel=2506) for children and young people with SEND. It includes lots of information & resources on family support, parent support groups, Early Help, Early Years, education, health, Social Care, transport, financial support, Preparing for Adulthood and lots more. Please like/follow the local offer on [Facebook](https://www.facebook.com/sclocaloffer/) & [Twitter](https://twitter.com/LocalOfferShrop) for all the latest information, news & local clubs/events! Thank you 😊 |