

Education, Health and Care Plan

For 0-13 year olds

Insert photo of child or young
person here


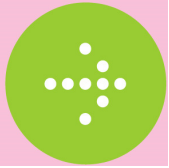
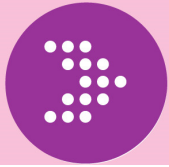

Name:

[Name:]

[1]



My profile

 <p>What people like and admire about me</p>	
 <p>What is important to me</p>	
 <p>What is important for me</p>	
 <p>How to best support me</p>	

[Name:]



[2]

[Date]

PERSONAL DETAILS

Name:	Date of Original EHC Plan:	
	Date of Amended EHC Plan:	
Gender:	Date of birth:	
Address:	Parents or person(s) with parental responsibility:	
Preferred mode of contact:	Contact telephone / email:	
Ethnicity:	Home Language:	
EHC Co-ordinator:		
Contact details:		
EHC Plan Facilitator:		

Section A: The views, interests and aspirations of the child or young person and their parents

 <p>My views, interests and aspirations</p>	
 <p>My Strengths</p>	
 <p>What is working for me</p>	
 <p>What is not working for me</p>	
 <p>My parent or carer's views and aspirations</p>	

[Name:]

[4]

[Date]

Section B: The child's or young person's identified special educational needs

 <p>Educational</p>	
 <p>Communication</p>	
 <p>Personal, social and emotional</p>	
 <p>Physical, medical and sensory</p>	
 <p>Self –help and independence</p>	

Section B: The child's or young person's identified special educational needs



Summary	
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Section C: The child's or young person's health needs which are related to their special educational needs



Section D: The child or young person's social care needs which are related to their special educational needs

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Sections E and F: Outcomes and provision

SECTION E	SECTION F				SECTION E
Outcomes	What help do I need to achieve this?	Who will provide this help for me?	How will they help me?	When and how often will this happen?	How will we know when this outcome has been achieved?
<p>Educational</p>  <p>I will be able to</p> <ol style="list-style-type: none"> 1. 2. 3. 					
<p>Communication</p>  <p>I will be able to</p> <ol style="list-style-type: none"> 1. 2. 3. 					

Sections E and F: Outcomes and provision

SECTION E	SECTION F				SECTION E
Outcomes	What help do I need to achieve this?	Who will provide this help for me?	How will they help me?	When and how often will this happen?	How will we know when this outcome has been achieved?
<p>Personal, social and emotional</p>  <p>I will be able to</p> <ol style="list-style-type: none"> 1. 2. 3. 					
<p>Physical, medical and sensory</p>  <p>I will be able to</p> <ol style="list-style-type: none"> 1. 2. 3. 					

Sections E and F: Outcomes and provision

SECTION E	SECTION F				SECTION E
Outcomes	What help do I need to achieve this?	Who will provide this help for me?	How will they help me?	When and how often will this happen?	How will we know when this outcome has been achieved?
<p>Self –help and independence</p>  <p>I will be able to</p> <ol style="list-style-type: none"> 1. 2. 3. 					

Section G: Any health provision reasonably required by the learning difficulties or disabilities which result in the child or young person having special educational needs

The Health provision	Provided/funded by:

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

The social care provision	Provided/funded by:

Section H2: Any other social care provision reasonably required by the learning difficulties or disabilities which result in the child or young person having SEN. This will include any adult social care provision being provided to meet a young person's eligible needs (through a statutory care and support plan) under the Care Act 2014.

Social care provision	Provided/funded by:

Section I: Placement

Name and type of nursery/school:	
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Section J: Personal Budget (including arrangements for direct payments)

Provision eligible for a personal budget	Details	Value	Nominal Budget or Direct Payment?
Social Care		£	
Health		£	
Education		£	
Total Personal Budget		£	

Agencies that have signed up to this Education, Health and Care Plan			
	Name	Signature	Date
Local Authority duly authorised Officer - Education			
Lead – Social Care			
Lead - Health			

[Name:]

[13]

[Date]

Section K: The advice and information gathered during the EHC needs assessment

A list of the contributors, advice and information gathered should be added here, with the full copies of advice and information appended to this plan.

Name	Role/position	Contribution	Report attached (date)