

# **EHCP: Educational Health Care Plan**

**The Educational Healthcare Plan documents the additional educational resources required for children and young people with special educational needs.**

Not all children with special educational needs require an EHCP, this is only required if the child or young person's needs cannot be met through the allocation of universal local resources under the '**local offer**'. All schools should provide '**reasonable adjustments**' to support children with additional needs. They do this through the '**graduated response**' which means they gradually increase the support provided. There are 3 stages of the graduated response, initially additional support from the school themselves, then additional support with the advice or input of other agencies (**SEN Support**), then the EHCP which is the statutory assessment by a range of agencies. 10% of children and young people have Special educational needs but the majority of these have their needs met within their schools through extra resources under the local offer.

Health, education and social care all produce reports which go to identify the child or young person's needs which should be met within education, this may include those needs that need to be directly commissioned from health or social care. Collectively a resource package is agreed.

The lead service for co-ordinating EHCP is **SENAR (Special Education Needs Assessment and Review)**, they form the final EHCP.

The total length of time for the EHCP assessment process is 20 weeks. There is an appeal process for parents who are not happy with the result.

## **Who can have an EHCP?**

EHCPs are for children and young people 0-25 years.

## **How are EHCPs initiated?**

Nurseries and schools or parents/carers can apply for an EHCP if the child or young person is not making progress according to their potential. The school then needs to prove that they have carried out a **graduated approach** which means they have incrementally introduced additional support available in their **local offer** and that this is not enough to support the child.

## **What is our role as paediatricians?**

As a doctor you may be asked to complete a medical report to inform the EHCP process for a child you have previously seen in clinic or as part of an EHCP clinic.

EHCP reports are also completed by teachers, healthcare professionals, social care

The sections that are required to be completed by health are;

- Child or young person's medical background.
- **Health needs:** Child or young person's health needs
- **Health provision:** What health are offering on an ongoing basis or what health are doing
- **Health outcomes:** What difference the intervention will make

Each of these sections should have points that are linked.

## **Tips for completing reports**

- Avoid medical jargon and explain any medical terms that you need to use.
- Explain diagnosis in clear non-medical terms.
- Explain how the child's diagnosis and health needs affect them specifically.
- Do not include medication names or doses as these are likely to change frequently.
- Do not recommend any specific education provision

- Do not recommend any social care recommendations.
- If other professionals are involved such as Speech and language therapy or physiotherapy they will complete separate reports for the EHCP.

<p><b>Example:</b></p> <p>.....has difficulty with drooling. Drooling causes skin breakdown and potentially dehydration</p> <ol style="list-style-type: none"> <li>1. Health need – excessive drooling</li> <li>2. Health provision – therapeutic intervention with a drooling reducing medication</li> <li>3. Health outcome – reduction in the number of bib changes per day, maintenance of integrity of skin</li> </ol>	<p><b>Example:</b></p> <p>..... has a diagnosis of Trisomy 21, which is more commonly known as Down's syndrome. This is a genetic disorder caused by the presence of all or part of an extra copy of chromosome number 21. It is typically associated with issues of growth, low muscle tone, intellectual disability, vision and hearing problems. Some children can also have heart defects and bowel problems and need regular follow up with Paediatricians.</p>
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**References:**

Birmingham Council's Local Offer Online information: <https://localoffer.birmingham.gov.uk/>

Special educational needs and disability codes of practice:

[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/398815/SEND\\_Code\\_of\\_Practice\\_January\\_2015.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/398815/SEND_Code_of_Practice_January_2015.pdf)

SENDIASS (special educational needs and disabilities information service): <https://www.kids.org.uk/sendiaass>

Council for disabled children EHCP information: [https://councilfordisabledchildren.org.uk/help-resources/resources/education-health-and-care-plans-examples-good-practice?gclid=Cj0KCQiAhZT9BRDmARIsAN2E-J3Wc3W3IpmGFYw\\_jWeqtjhaziJkKAqcDdk96XsMia15BlmIWrk-1jgaAjPbEALw\\_wcB](https://councilfordisabledchildren.org.uk/help-resources/resources/education-health-and-care-plans-examples-good-practice?gclid=Cj0KCQiAhZT9BRDmARIsAN2E-J3Wc3W3IpmGFYw_jWeqtjhaziJkKAqcDdk96XsMia15BlmIWrk-1jgaAjPbEALw_wcB)