



Statutory Education, Health & Care (EHC) Plan

Persons Name

Person's Plan

In accordance with the Children and Families Act 2014, the following statutory Education, Health & Care (EHC) Plan is made by Sheffield City Council ('the education authority') and the Sheffield Clinical Commissioning Group ('the health authority').

Persons Name

Person's Personal Details

First Name(s)

Address

Last Name

Contact Number(s)

Date of Birth

Setting / School / Post 16

Gender

Primary Need

Agencies Involved

UPN Number

NHS Number

Integrated Youth Support System ID

CareFirst ID

Parent/ Carer's Details

Name of Person with Parental Responsibility

Email

Address

Contact Number(s)

Plan Details

Date of Issue of Final Plan

Version Number

The date by which this plan will be reviewed

People who have contributed to and written this Education, Health and Care Plan are:

Name	Job Title	Address	Tel/ Email	How did they contribute? e.g. attend meeting	Report Attached?	Date of Report
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Persons Name

A. Person's and his/her parent's/carer's views, interests, aspirations and goals

Suggested prompts are:

Person Communicates by:

The Past (building a picture: birth, diagnosis and significant life events)...

The Present (important people in the person's life, current living situation, support needed, likes dislikes)...

The Future (aspirations for the future and support towards developing independence)...

B. Person's strengths and special educational needs

Communication and Interaction; Strengths:

Communication and Interaction; Special educational needs:

Cognition and Learning; Strengths:

Cognition and Learning; Special educational needs:

Social, Mental and Emotional Health; Strengths:

Social, Mental and Emotional Health; Special educational needs:

Sensory and/or Physical; Strengths:

Sensory and/or Physical; Special educational needs:

C. Person's strengths and health needs related to his/her SEN

Strengths:

Health needs:

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D. Person's Strengths and social care needs related to his/her SEN

Strengths:

Social care needs:

E. Outcomes

Num	By: (date or end of current educational phase)	Elizabeth will be able to:	Outcomes (short, medium and longer term)	Steps towards meeting the outcome	Review arrangements (date)	By whom	Progress Achieved
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F. Special Education provision

Num	The special educational provision (Insert special educational provision - what, how much, how often, where, when, with whom etc and how it will meet the outcomes. Ensure provision links to the needs in section B.)	By Whom, including funding source where appropriate (Resource, including people from the nursery/school/post 16 setting, delegated budget, (if relevant) plus top-up funding - element 3)
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G. Health provision reasonably required by the learning difficulties or disabilities which result in the person having SEN

Num	The health provision (Insert health provision - what, how much, how often, where, when, with whom etc and how it will meet the outcomes. Ensure provision links to the needs in section C.) If none, insert not appropriate.	By whom (and funding source where appropriate.) Resource, including people, name of health service - e.g. NHS Sheffield, CCG and if from normally commissioned health provision or from elsewhere.
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H1. Social Care Provision which must be made for a child / young person under 18 resulting from section 2 of the Chronically Sick & Disabled Persons Act 1970

Num	The social care provision (Insert social care provision - what, how much, how often, where, when, with whom etc and how it will meet the outcomes. Ensure provision links to the needs in section D). If none, insert not appropriate	By whom (and funding source where appropriate). Sheffield Social Care and if normally commissioned provision or other description
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Persons Name

H2. Social Care provision reasonably required by the learning difficulties and disabilities which result in the person having special educational needs

Num	The social care provision (Insert social care provision - what, how much, how often, where, when, with whom etc and how it will meet the outcomes. Ensure provision links to the needs in section D.) If none, insert not appropriate.	By whom (and funding source where appropriate). Sheffield Social Care and if normally commissioned provision or other description
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I. Education Placement

Insert name of Nursery/School/Post-16 Provision

Type of School e.g. A mainstream School or a Special School etc

J. Personal Budget

Provision in this plan that is eligible to be provided through a personal budget is:

Num	Provision (any provision that has been agreed in the assessment as eligible for a personal budget and where the parent/young person wishes to take up the offer).	Personal Budget Value (insert the total annual value of the personal budget, and the funding source, e.g. £xx from the short break budget).
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Total personal budget

K. Advice and Information

Source	If other selected as Source please specify	Evidence	Date
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Persons Name

Arrangements for Review

Arrangements for reviewing this plan will be coordinated by .

A review will take place within 12 months of

The following additional professionals are likely to be required at the next review (in addition to those who have already contributed to this plan).

The date by which this plan will be reviewed

The Plan Co-ordinator responsible for reviewing this plan will be

Sign-off

Signature on behalf of the Local Authority

Signature on behalf of the Health Authority

Signature on behalf of SEN Assessment and Placement team

Date of Issue of final plan