Insert picture here

**Education, Health and Care Plan for**

**<Known as> <Surname>**

|  |  |
| --- | --- |
| **Address** |  |
| **Contact phone number** |  |
| **Date of birth** |  |
| **Country of birth** |  |
| **Educational setting** |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Gender** |  | **Ethnicity** |  |
| **Religion** |  | **Language** |  |

|  |  |
| --- | --- |
| **Is this child or young person  looked after?** |  |
| **Full Care Order, Interim Care Order  or Section 20** |  |
| **Does this child or young person  have a child protection plan?** |  |
| **Name of social worker** |  |
| **Social worker contact details** |  |
| **Lead Professional** |  |

|  |  |  |
| --- | --- | --- |
| **Name of parents or carers** |  |  |
| **Parental responsibility?** |  |  |
| **Addresses** |  |  |
| **Preferred contact** |  |  |
| **Other contact details** |  |  |

|  |  |
| --- | --- |
| **Document reference** | **Date** |
|  |  |

# *The EHCP Golden Thread*

# 

*For detailed information on how to complete this form please refer to the Golden Binder on the Local Offer* <https://www.afclocaloffer.org.uk/uploads/afclocaloffer/document/file/383/05_GOLDEN_BINDER_Detailed_EHCP_Form_Guide_v2_311016.pdf>

# Section A:

# The views, interests and aspirations of the child and their parents, or of the young person

*For ease of use Section A is available as a separate form, which can be given to the parent or young person at the beginning of the process (there are 2 versions of the form – either may be used).*

*The two versions of the section A template can be downloaded from the Local Offer or using this link:*

*Standard version:* [*https://www.afclocaloffer.org.uk/uploads/afclocaloffer/document/file/176/EHC-A1\_EHCP\_Template\_Section\_A\_-\_v2\_311016.docx*](https://www.afclocaloffer.org.uk/uploads/afclocaloffer/document/file/176/EHC-A1_EHCP_Template_Section_A_-_v2_311016.docx)

*Accessible version for young people:* [*https://www.afclocaloffer.org.uk/uploads/afclocaloffer/document/file/178/EHC-A2\_EHCP\_Template\_Section\_A\_-\_YP\_s\_version\_V2\_311016.docx*](https://www.afclocaloffer.org.uk/uploads/afclocaloffer/document/file/178/EHC-A2_EHCP_Template_Section_A_-_YP_s_version_V2_311016.docx)

*Once it has been completed by the child, young person or family Section A must be copied and pasted into this document (either as a word document or a scan of a handwritten section A). If a wiki is used rather than a form the wiki should be referenced here.*

*Section A must be included within an EHCP. Section A describes the aspirations, which are the start of the “golden thread” that should run through the plan and underpin the remaining sections B-K.*

**Insert Section A – ‘My views, interests and aspirations’ here**

# Section B: Summary of <Known as>’s strengths and special educational needs (SEN):

|  |
| --- |
| **Overview** |
|  |

|  |
| --- |
| **Further or Higher Education and/or Employment (also Training / Apprenticeships etc.)** |
| Strengths: |
| Special educational needs: |

|  |
| --- |
| **Independence and Independent Living** |
| Strengths: |
| Special educational needs: |

|  |
| --- |
| **Community and Friendships** |
| Strengths: |
| Special educational needs: |

|  |
| --- |
| **Maintaining Good Health** |
| Strengths: |
| Special educational needs: |

**Sections C – I: <Known as>’s Support Plan**

Each identified special educational need in Section B requires a provision necessary to achieve the outcome.

|  |
| --- |
| **Briefly describe how the Outcomes documented in this section link to the Aspirations described in Section A** |
|  |

|  |  |  |
| --- | --- | --- |
| Section E. Preparing for Adulthood Outcomes (by the end of Key Stage, or other to specify) | Section F. SEN provision | By whom |
| Further or Higher Education and / or Employment |  |  |
| Independence and Independent Living |  |  |
| Community and Friendships |  |  |
| Maintaining good Health |  |  |

*Note: Needs defined in Section B to Provision defined here (section F) should be linked by using reference numbers. For more detailed information refer to the guidance in the Golden Binder*

|  |  |  |
| --- | --- | --- |
| Section C. Health needs | Section G. Health provision | By whom |
|  |  |  |
|  |  |  |

|  |  |  |
| --- | --- | --- |
| **Section D. Care needs** | **Section H1. Care provision relating to CSDPA (under 18s only)** | **By whom** |
|  |  |  |
|  | **Section H2. Other Social Care provision** | **By whom** |
|  | *Information for the family on support for* ***<Known as>****’s social needs can be found at:* [*https://www.afclocaloffer.org.uk/*](https://www.afclocaloffer.org.uk/) |  |

|  |  |  |
| --- | --- | --- |
| **Level of funding to meet needs identified in plan (complete either early years or mainstream)**  **(not relevant for special schools or specialist provision such as a unit)** | | |
| **For a mainstream setting** | **Delegated funding (£)** |  |
| **Top up (£)** |  |
| **For an early years setting** | **Amount (£)** |  |

|  |  |
| --- | --- |
| Section I. Placement and type of provision |  |

|  |  |  |
| --- | --- | --- |
| Section J. Personal budget - including arrangements for direct payments | | |
| This section provides information on any personal budget that will be used to secure provision in the EHC Plan and to meet the outcomes detailed in the plan | | |
| **Has the family made a request for a personal budget?** | **Yes :** | **No:** |

|  |  |  |  |
| --- | --- | --- | --- |
| **Provision and outcomes** | **Provider** | **Type** | **Annual amount** |
|  |  |  |  |
|  |  |  |  |
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|  |  |  |  |
|  |  |  |  |
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|  |  |
| --- | --- |
| **Total personal budget** |  |

|  |  |
| --- | --- |
| **The amount of personal budget to be taken as a direct payment** |  |

**To be read alongside the Direct Payment Contract Agreement.**

|  |  |  |
| --- | --- | --- |
| Section K. Appendices – advice and information gathered during the production of this plan | | |
| **Source** |  | **Evidence** |
|  |  | |
|  |  | |
|  |  | |
|  |  | |
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|  |
| --- |
| Arrangements for review |
|  |

|  |
| --- |
| Next key transition points |
|  |

|  |  |
| --- | --- |
| **Date of draft plan** |  |
| **Date of final plan** |  |
| **Final plan signed on behalf of AfC by** |  |