

EHCP Example containing Health input only

This is not a complete example of an EHCP. It has been created to provide an example of the sort of health input that might be included in an EHCP around needs, outcomes and provision for a child with a particular health profile (there are other examples for children with different health profiles). The provision in this example is illustrative – it does not quantify provision as would normally be the case in a real EHCP. It deliberately excludes all the input that would be required around education / school and the whole of section A to focus on health.

Ben

9 years old, has autism and severe gut issues

Section B: The child or young person's strengths and special educational needs (SEN)



Strengths:

• Ben likes to do well and to achieve

Special educational needs:

• Ben's severe gut issues mean that when he has flare ups he is in pain, is unable to sleep and consequently is unable to concentrate or participate in learning

Communication and interaction:

Strengths:

Special educational needs:

 Ben is non-verbal. He needs to use Makaton or non-verbal communication to communicate

Social, emotional and mental health:

Strengths:

• Ben responds extremely positively to praise

Special educational needs:

• Ben is very attuned to sensitive to things happening around him in the home (and school) environment. If there are issues or tension in his environment it will very quickly manifest itself in his behaviour and levels of stress and anxiety

Sensory and/or physical:

Strengths:

Special educational needs:

 Ben has difficulty with core stability and muscle tone, which makes sitting and self-care tasks difficult for him (dressing himself, washing himself, going to the toilet, feeding)

Preparing f	or adult	hood (v	oung r	elgoec	aged	14+ onl	v)	:

Strengths:

Special educational needs:

Ben's support plan

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

Section E. Outcomes (by the end of Key Stage, or other to specify)	Section F. SEN provision		
Cognition and learning			
By end of primary school Ben will be able to say simple words such as "yes. "no" "Mum"	Speech and language therapy provision to work on expressive and receptive language using both sign		
, , , , , , , , , , , , , , , , , , , ,	language and vocalisation. (SaLT) Input on advice on oro-motor issues (SaLT)		
	Tailored programme within the curriculum to work intensively on Makaton signs, receptive instructions, vocalising, created by a specialist SaLT working together with Teachers. Delivered mainly by teachers (SaLT supporting teaching staff)		
Social, emotional and mental health			
By the end of primary school Ben will be fully toilet trained and able to manage without nappies By the end of primary school Ben's bowel flare ups will be under control such that he is able to concentrate and participate in learning for a full term	One-to-one support to help Ben with toilet training and manage taking him to the toilet regularly and helping him with pulling down his pants etc. (by school staff) OT input and advice to help Ben with learning to use the toilet and pull his trousers up and down ((by OT from health)		
By the end of primary school Ben will have the motor skills to wash and dress himself with some assistance	Ben will receive occupational therapy for his low muscle tone, hyperflexibility, severe fine and gross motor delay and lack of core strength. This is aimed at improving his self-care skills such as pulling up pants and trousers after the toilet. (occupational therapist from health)		

By the end of primary school Ben will be able to	Ben will receive a programme of input from a	
eat independently with oversight only for safety	speech and language therapist who will train staff	
reasons	at the school and also work with Ben on	
	assessment and techniques to improve his eating	
	(SaLT and OT from health)	

Section C. Health needs	Section G. Health provision
Ben's medical needs and diagnosis, include:	Provision of nappies for use at home (Community Health)
 bowel issues, special diet, laxatives, anti-acids, other medication 	Procedure on oesophagus planned at London
sleep issues and medication	teaching hospital. Elemental diet to be trialled
oesophagus investigation	during school holidays. (Hospital consultant at GOSH)
genetic tests	
	Hospital paediatrician is overseeing the various
	health investigations and referrals for treatment
	that Ben requires in various clinics and hospitals
	(hospital paediatrician at Kingston hospital)
	Consultant at Great Ormond Street Hospital is
	supporting Ben with prescribing nutritional
	supplements (Nutritional consultant at GOSH)

Section D. Care needs	Section H1. Care provision
Ben has difficulty with core stability and muscle tone, which makes sitting and self-care tasks difficult for him (dressing himself, washing himself, going to the toilet, feeding)	Provision of equipment needed at home to help Ben access and use the toilet (Social care OT) Provision of special toothbrush and cutlery to help Ben with self care and feeding (social care OT)
	Section H2. Care provision