

## Model Education, Health and Care Plan

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**‘James’ – A young person with multi-sensory impairment, aged seventeen**  
**March 2017 Edition**

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Contact:

Lindsey Jane Rousseau, NatSIP Facilitator

T: 07711 030711

E: [lindsey.rousseau@natsip.org.uk](mailto:lindsey.rousseau@natsip.org.uk)

W: [www.natsip.org.uk](http://www.natsip.org.uk)

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## **1. Purpose of this document**

The purpose of this document is to illustrate the **written** content of an Education, Health and Care (EHC) Plan for children and young people with a sensory impairment by following the requirements and the sections for a Plan as set out in the SEND Code of Practice, published in January 2015.

## **2. Intended audience**

This document is for:

- a. those who are responsible for coordinating the assessment and drafting of an EHC Plan and/or the key worker and professionals contributing to the assessment and plan.
- b. parents who would like to know what kind of information should be included in an EHC Plan to ensure it accurately identifies their child's needs and sets out how they will be met.

## **3. Recommended action:**

NatSIP recognises that local authorities will have their own format for their EHC Plans. NatSIP encourages local authorities to use the model Plans as:

- an aid to ensure any format they develop reflects the required content of EHC Plans.
- a check to ensure that Plans developed for individual children and young people with sensory impairment fully reflect the level of content suggested in the exemplars
- a way to ensure the EHC Plan is based on a thorough assessment of the child or young person as required by the SEND Code of Practice and as set out in Better assessments, better plans, better outcomes: a multi-disciplinary framework for the assessment of children and young people with sensory impairment, developed by NatSIP.<sup>1</sup>

## **4. Background**

NatSIP has been commissioned by the Department for Education to produce exemplar EHC Plans for children and young people with a sensory impairment. This model EHC Plan is based on the structure outlined in the SEND Code of Practice.<sup>2</sup> The boxed text in this model plan is taken from the guidance in the SEND Code of Practice regarding the required written content of each section of the Plan.

This model Plan is one of a series covering hearing impairment, vision impairment and multisensory impairment across different age groups. Other model Plans are available on the NatSIP website.

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<sup>1</sup> Available online at <https://www.natsip.org.uk/index.php/send-reforms>

<sup>2</sup> See <https://www.gov.uk/government/publications/send-code-of-practice-0-to-25>

## 5. EHC Plan Cover Sheet

### Education, Health and Care (EHC) Plan

This is EHC Plan No. 1 for *James Moore* (name of child)

Proposed Plan No 1 issued on:	
Date Plan 1 agreed:	
Date of review:	

#### Details of the child:

Name:	James Moore
Gender:	Male
Date of birth	12 August 20XX
Home address:	
Preferred language/communication method:	British Sign Language
Educational setting currently attended (if applicable)	Westway School (Special School for 11-19 year olds)

#### Child's Parents/Person Responsible

Name:	Mr Edward Moore Mrs Karen Moore
Relationship to child:	Father and mother
Home address (if different to above):	
Telephone number:	
Home language/communication method	English
Educational setting currently attended (if applicable)	ABC Nursery

The following people have contributed to this plan:

Name:	Role/position
Karen and Edward Moore	Parents
Brian Johnson	Teacher for Multi-Sensory Impaired
Stuart James	Educational Psychologist
Julie Anderson	Intervenor
Anne Sullivan	Audiologist
Rupesh Rai	Ophthalmologist
Renate Meyer	Community Paediatrician
Clive Drake	Head of School
Laura Eames	Specialist Children's Occupational Therapist
Kurt Vogel	Social Worker

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## 7. Plan Section A. Views, interests and aspirations – Getting to know James

The SEND Code of Practice states this section should also include details about play, health, schools, independence, friendships, further education and future plans including employment (if practical); how to communicate, child / young person's history.

There is no requirement in the SEND Code of Practice to produce a one-page summary. It may, however, be a useful way of presenting key information about the child/young person at a glance.

Hi! I am James	
<p><i>Photo of James to go here</i></p>	<p><b><i>What people like about me and what I like about myself</i></b></p> <p>I am very sociable and have a good sense of humour.</p> <p>I try very hard.</p> <p>I can concentrate for a long time on some tasks.</p>
<p><b><i>What is important to me</i></b></p> <p>My mum and dad, brothers, grandma and aunt.</p> <p>Being able to communicate with friends and adults.</p> <p>Using BSL.</p> <p>Being as independent as I can.</p> <p>My hearing aids and glasses (I don't like to go anywhere without them).</p> <p>Having friends like me.</p> <p>Being clean (I like to wash my hands a lot and have a shower and clean clothes every day).</p>	<p><b><i>How best to support me</i></b></p> <p>Sign clearly, standing in a good light (not in my eyes!) and give me time to respond.</p> <p>Warn me when things are changing.</p> <p>Don't creep up on me – I see you best when you're directly in front of me.</p> <p>Don't leave things lying around on the floor.</p> <p>Make sure I'm included and can keep up.</p>
<p>The information above was drawn up following discussion between James and his Intervenor</p>	

The SEND Code of Practice states that, if written in the first person, the plan should make clear whether the child or young person is being quoted directly, or if the views of parents or professionals are being represented.

## James's strengths and challenges

### **The assessments and information gathered indicate that James has the following strengths:**

- He is sociable, friendly and keen to learn.
- He uses BSL to communicate and is increasingly confident when communicating with others.
- He has some good friends at school and is generally well-liked. He is keen to make more friends with needs similar to his own.
- He has achieved qualifications in Maths and English and is ambitious to achieve qualifications to help him find employment

### **The assessments and information gathered for this plan also indicate that James has the following challenges:**

- He has multi-sensory impairment (MSI), with a profound hearing loss in both ears, a vision impairment, balance difficulties and sensory processing issues. His MSI very significantly affects his communication, abilities to gather and learn from information and mobility.
- He has fine motor difficulties which affect his handwriting and sometimes the clarity of his signing.
- He is working well below the expected levels for his age in literacy and numeracy.
- His social and emotional development is affected by his MSI and consequent communication difficulties, and his behaviour can sometimes be challenging.
- He is at risk of social isolation.
- He finds change, especially major changes, very difficult.

## James's story to date

### **Give a brief case history/summary**

James has deafblindness/multi-sensory impairment (MSI), which means he has hearing and vision loss. He is now 17 and lives at home with his mother, father and two brothers. He wears digital hearing aids in both ears and also has glasses. His glasses are very important to him and he will not leave the house without them.

James is the eldest of three children. He was born 7 weeks prematurely. James has had profound deafness and vision impairment since birth. However, his hearing loss was not diagnosed until he was approximately two years old, and he was fitted with hearing aids shortly afterwards. James has learning difficulties and occasional behaviour issues. He was delayed in reaching his milestones and did not walk until he was 5 years old. James struggles to walk for long periods.

James has attended special schools since the age of four. He currently attends Westway Special School and would like to stay there until he moves into further education when he is 19. He would like to have friends like him who understand the challenges he faces because of his MSI. He likes to socialise with his friends, particularly playing snooker with them. He is keen to be as independent as possible in spite of his difficulties, but he also wants to remain close to his family.



## **How to communicate with James**

Signing is very important to James. It is his main way of communicating and uses British Sign Language (BSL). He has a full-time Intervenor at school who has BSL Level 3 and who supports James in accessing the curriculum and in social interaction.

Communication with James is easier and more effective if the communicator knows him well. James needs communication partners to stand directly in front of him in clear light, because of his vision impairment. They need to sign clearly and give him additional time to respond. His fine and gross motor difficulties affect his ability to produce some signs accurately.

James also uses a portable white board and black pen when communicating with non-signers, usually writing single words, although his handwriting and literacy difficulties limit the effectiveness of this.

He is friendly and keen to communicate but can easily become discouraged if he is not understood.

## **James's concerns, aspirations, views, interests for the future**

James is very sociable and has lots of interests and hobbies that he wants to be able to continue. These include: playing football, basketball and cricket with one of his brothers; playing on the Wii with both his brothers; spending time with his family (including his extended family) and friends; watching cartoons, snooker and funny films on TV. He also likes to go shopping. James has two close friends at school whom he sometimes sees at weekends, and he would like to be able to access more community leisure facilities.

He would like to be able to live independently one day, while still remaining in close contact with his family and friends. He doesn't know yet exactly what he would like to do when he leaves education but he does know that he would like to get a job.

He wants to be part of all planning regarding his support both now and in the future.

## **James's parents' views, concerns, aspirations**

James's parents are concerned about his vulnerability as a young man in the community, particularly as he is friendly with everyone he meets but does not fully understand the dangers that this might lead to.

They fear that other people may misinterpret some of his behaviours because they do not understand the implications of his deafblindness and poor proprioception (the ability to sense the position, location, orientation and movement of his body).

They have concerns about what will happen if his current, very supportive intervenor is unavailable.

They would like him to go on to further education and follow a Pathways to Progress course or similar course.

They are keen for him to become as independent as possible while remaining safe.

## 8. Plan Section B. James's special educational needs

**The assessments carried out and information gathered, provide the following more detailed information about James's needs.** *(Include how this compares with children of a similar age without sensory needs):*

James is a deaf-blind young man who finds it challenging to effectively access and use information from the environment, communicate with others and move around his environment.

### **Communication and interaction**

- James uses British Sign Language and gesture to communicate and is supported in school by an Intervenor with Level 3 BSL. However, his fine motor difficulties hamper his ability to produce clear signs. He sometimes uses a whiteboard with non-signing peers and adults, although this is restricted by his literacy levels and poor fine motor control. He mainly writes single words.
- His language development is significantly delayed, though his receptive language (understanding) is improving.
- He tends to respond with short comments (in BSL), but further questioning usually brings forth much more information. He does not show his actual level of knowledge without encouragement and prompting. He needs significantly more time than usual to process and respond to others' communication.
- He does not use speech, but vocalises to attract attention when needed. James's vision impairment makes it harder than usual for him to read speech patterns and facial expressions.
- He finds it much easier to communicate with people who know him well, and is easily discouraged if people do not understand him. If this happens he usually wants to communicate through his Intervenor rather than directly.
- In general conversation he will often repeat information back to confirm that he has understood and he is also beginning to ask questions of other people without being prompted, which is a huge step forward.

### **Cognition and learning**

- James is a motivated and enthusiastic learner.
- James has limited reasoning ability owing to his delayed speech and language development.
- He has made progress in most areas of the curriculum but his attainment levels are still well below those expected for his age. At the end of Year 11 he gained Entry Level 1 in English and Entry Level 2 in Maths.
- He is developing basic literacy skills and is able to use them in a functional way to support his communication with others. His handwriting is improving and becoming more legible. He is also able to write some more complex sentences than before.
- He is largely dependent on an Intervenor (with BSL Level 3) to access the curriculum. He has worked with the same Intervenor for the past three years and finds it much more difficult to be supported by someone he knows less well.
- He can be easily distracted from his work as a result of his sensory integration difficulties.

### **Social, emotional and mental health**

- James is currently supported 1:1 full-time at school by an Intervenor who has BSL Level 3 and a detailed understanding of James's overall needs. If his Intervenor is absent, James can quickly become withdrawn and less willing to engage with activities.
- James finds change, especially major changes, very difficult to manage because his MSI limits the information he receives. He has worked with the same Intervenor for three years and is very anxious about losing her support.
- In the school setting James is growing in confidence and independence, and he has made some progress in managing his emotions when faced with frustration.
- James finds waiting difficult. He becomes anxious if situations are not clearly explained to him. He finds it really hard to understand the wait for activities/events to start, and he can get frustrated, especially if there is not enough information to help him understand. He can get confused and may begin to push people to get better information. If this happens, he then gets very upset if he realises he has hurt someone.
- He is a sociable young man but he is emotionally vulnerable and is at risk of social isolation because of his multi-sensory needs.
- He has significant sensory integration difficulties, causing sensory overload and fatigue, and affecting his ability to regulate his emotions.
- He always tries his best when faced with a new challenge.

### **Independence**

- Although James is making progress with his independence and self-help skills, he still requires supervision to ensure his safety and for aspects of his personal care.
- He attempts to be independent within the school environment and is motivated to become more independent, but he is not fully aware of potential dangers and due to his physical and social vulnerability he needs support to be independent within the wider community.
- He has recently been referred to the Habilitation Service for support with his independence and mobility and has been assessed at home. Further assessment at school is planned.

## **Sensory and physical needs**

### **Multi-sensory impairment (MSI)**

- James has deafblindness/MSI, with a profound bilateral hearing loss and complex vision impairments, as well as other sensory difficulties. He cannot use visual information to compensate for the effects of his hearing loss, or auditory information to compensate for the effects of his vision impairment. MSI causes complex needs in all areas, especially communication, information and mobility.
- People who are profoundly deaf use their peripheral vision (at the edges of their visual fields) to alert them of changes such as people approaching. James has significant visual field losses which prevent him from doing this effectively, especially on the left hand side. This means that he gets very little warning of things about to happen or people approaching him and will not be aware of people communicating with him from the side.
- James's mobility and safety are significantly affected by his MSI. He may not see obstacles on the floor ahead or to the left hand side; his distance vision is poor and he cannot use auditory cues from the environment or from others talking to him.
- James gets very little information from his environment, which means that he will take much longer to identify and respond to events or communication and sometimes will be unable to make sense of what is happening.
- James finds changes, especially major changes, very difficult because of the limited information he receives. New environments or activities take much longer than usual for him to absorb and understand. This makes any change extremely stressful for him.

### **Hearing**

- James has profound sensorineural hearing loss in both ears, which was not diagnosed until he was two years of age. It has been difficult to establish his precise hearing levels, but in January 2015 he indicated, by pointing to his ear, that he had detected low frequency sound (250Hz) in each ear at 110dBA.
- He does not respond to most environmental sounds but occasionally alerts to very loud, low-frequency sounds.
- He has two behind-the-ear hearing aids which he likes to wear although he is still unable to hear any spoken language.

### **Vision**

- When wearing his glasses, his distance visual acuity (measure of how well he can see) is 6/18. This means that he can see from 6 metres away something which people with no vision impairment could see from 18 metres away.
- Assessment of his near vision indicates that he reads best when text is 33 cm away in size 36 Comic Sans font.
- His visual fields are restricted, especially on the left side and in his lower visual field. In conjunction with his deafness, this means that he often gets very little warning of changes. His lower field loss means that, if an object is below waist height, he may not see it and could walk into it
- Clutter in pictures can be a distraction for him because of his poor visual acuity and can make it difficult to perceive detail.
- He has difficulty with depth perception which means that he may not see steps, or may think that a change on floor colour or surface is a step.
- He has recently been introduced to using a long cane with a roller ball tip and has responded very positively to this. He is able to negotiate his way safely along corridors without prompting from an adult and is much more confident when walking.

James' sensory impairments can cause sensory overload, fatigue and difficulties in regulating his emotions. At times this can lead to quite challenging behaviour.

**Physical**

- James has problems with balance, and frequently stumbles. It can take him some time to work out if he has hurt himself. He has a wide-based gait (feet wide apart when he walks) and significant sensory integration problems (difficulty making sense of all the different information coming to him through the senses). Combined with his sight difficulties, this makes it difficult for him to move safely around the environment.
- He has some fine motor difficulties which make it difficult for him to make precise movements with his hands and fingers, affecting his signing, handwriting and typing.

## 9. Plan Section C. James's health needs related and unrelated to SEN

The SEND Code of Practice states that an EHC Plan must specify any health needs identified through the EHC needs assessment which relate to the CYP's SEN.

The Clinical Commissioning Group (CCG) may also choose to specify other health care needs not related to the SEN.

### Related to SEN

- Multi-sensory impairment (hearing and vision impairments and sensory integration difficulties) which mean that James has difficulties accessing the curriculum, gaining information from his environment, communicating and socialising. His sensory impairments are currently stable.

He has difficulties with fine and gross motor skills and problems with balance. Combined with his sensory difficulties, this means that he has limited mobility and independence skills.

## 10. Plan Section D. James's social care needs related and unrelated to SEN

The SEND Code of Practice states that the EHC Plan must specify any social care needs identified through the EHC needs assessment which relate to the child's SEN or which require provision for a child or young person under 18 under section 2 of the Chronically Sick and Disabled Act (CDSPA) 1970. The local authority may also choose to specify other social care needs not linked to CYP's SEN or disability but must have the consent of the child and their parents.

A transition assessment has recently been completed in order to inform the care part of James' EHC plan. This was undertaken by the habilitation officer/specialist MSI social care professional within the sensory team and has been informed by all involved professionals, including the children's occupational therapist with the children's disability team. The assessment followed the statutory guidance Care and Support for Deafblind Children and Adults Policy Guidance.

Given James' communication needs, James agreed to the help of an advocate with specialist skills in communication to help identify his well-being needs.

The assessment also considered James' parents, and their caring role within the assessment. The assessment was undertaken by a specialist social worker within the sensory team.

In view of James' age there will need to be a review in six months' time so that his needs can be assessed by the Adult Social Care Team under the Care Act 2014.

As a result of his multi-sensory impairment and physical difficulties, James has difficulties in the following areas:

### Participating fully in family life

- James needs help with most aspects of daily living. His parents are conscious of the fact, as James uses BSL as his main method of communication, they do not have the signing skills to help him in this regard or even to communicate fully with him in his preferred language. Members of the wider family also find it difficult to communicate with him. James sometimes feels that he is missing out at family gatherings because of this. His mobility difficulties and sensory impairments make it difficult or impossible for him to take part in some of the activities which his brothers and parents enjoy together such as table tennis and cycling.

**Accessing community activities**

- James is currently unable to access community activities such as youth clubs or swimming because he needs an Intervenor or other supporter in order to travel and to participate fully. His parents used to provide this support but he does not want them to do so any more.

**Developing socially and emotionally**

- James is at risk of social isolation because of his disabilities. He has two good friends from school but few others in his local community. He is very sociable and finds it hard when others don't make allowances for his difficulties, so that he often feels left behind in social gatherings. This has an impact on his self-esteem. As he gets older, he identifies himself increasingly with the Deaf community (people who communicate in BSL). He would like to have more contact with people of the same age who have similar difficulties.

**Becoming independent.**

- James is not quite fully independent in all aspects of self-care. He has difficulties with some fastenings on clothes due to his fine motor difficulties and needs reminding about some aspects of personal care (e.g. hand-washing) in order to maintain a good standard of hygiene.
- He can make simple snacks for himself but is unable to prepare a hot meal.
- He needs support to use public transport (getting on and off and recognising where to get off) and to be safe in the community.

## 11. Plan Section E. Desired outcomes for James

The SEND Code of Practice requires a range of outcomes over varying timescales covering education, health and care as appropriate plus steps towards achieving the outcomes (see table below for the steps). It advises against confusing outcomes with provision. It also requires the inclusion of forward plans for any change in a child or young person's life such as a change of school. For young people aged over 17, the EHC plan should identify clearly which outcomes are education and training outcomes.

### **The following are the desired outcomes for James:**

- a. By the end of Key Stage 5 (Year 13/14), James will be able to interact confidently with adults and peers using BSL in a range of settings, explaining his communication needs and using an interpreter when necessary.
- b. By the end of Key Stage 5, James will have attained further qualifications in Maths and English and completed award-bearing courses in life skills and preparation for work.
- c. By the end of Key Stage 5, James will know about several different types of work and be able to make an informed choice about his college course.
- d. By the end of Key Stage 5, James will be able to work effectively and confidently with a range of supporters with appropriate skills, and help new supporters to understand his needs.
- e. By the end of Key Stage 5, James will show measurable improvements in his confidence and abilities to anticipate and manage change.
- f. By the end of Key stage 5, James will show measurable improvement in his mobility and supported independence skills, including self-care skills, at home, in community activities and in the educational setting.
- g. By the end of Key Stage 5, James will be making maximum use of his hearing and vision and using appropriate compensatory strategies in order to participate in school and community activities.
- h. By the end of Key Stage 5, James will have developed strategies to help him cope with his sensory integration difficulties, so that his attention and focus are improved and there is a measurable improvement in his ability to regulate his emotions.
- i. By the end of Key Stage 5, James will have learnt strategies to help him cope with his balance and fine motor difficulties.
- j. James will make a smooth transition to further education, including at least three preparatory visits before July 20XX, so that by the end of December 20XX he is feeling settled in his new college.

### **Arrangements for monitoring and reviewing James's progress**

The school, in consultation with James, his parents and appropriate professionals, will set individual targets based on the steps toward the outcomes within 4 weeks of the issue of the EHC plan. The targets will be shared with his parents. James should be actively involved in setting the targets and monitoring his own progress towards them.

There must be close liaison between home, school and all professionals working with James so as to ensure consistency of approach and appropriate information sharing.

The school must ensure that an Annual review is undertaken within 12 months of the issue of the agreed plan and annually thereafter. James, his parents and all professionals working with him should be invited and asked to contribute to the review.

The local authority will arrange for the annual monitoring of the plan.



**Planning for James's transfer to further education**

James is due to leave Westway in July 20XX and hopes to go to a further education college after that.

The school's transitions co-ordinator will assist James and his parents in arranging for them to visit possible colleges and consider the different courses an offer, so that by the end of December 20XX, an application can be made to the chosen college.

Once a college has been identified and a place offered, James will need opportunities to visit the new college before the end of the Summer term 20XX to meet staff, especially his new support staff, and familiarise himself with the building and facilities. He will need mobility training around his new environment.

## 12. Plan Section F. The special educational provision required by James

The SEND Code of Practice states: provision MUST be detailed and specific and normally be quantified (e.g. in terms of the type, hours and frequency of support and level of expertise) including where this support is secured through a personal budget. Provision MUST be specified for every need specified in Section B. It should be clear how the provision will support the outcomes. There should be clarity as to how advice and information gathered has informed the provision. The plan should specify: any appropriate facilities and equipment, staffing arrangements and curriculum; any modifications to the application of the National Curriculum; any appropriate exclusions from the application of the National Curriculum, in detail, and the provision which it is proposed to substitute for any such exclusions in order to maintain a broad and balanced curriculum; where residential accommodation is appropriate; arrangements for setting shorter term targets and monitoring progress; where there is a personal budget, the details for this. Should also identify arrangements for the setting of shorter term targets by the educational setting. Note: where provision made by social care or health services educates or trains a young person (e.g. speech and language therapy), it must appear in this section.

The following table identifies the steps and the special educational provision required to meet James's special educational needs set out in section B and to ensure the outcomes identified in Section E are achieved (see sections G, H1 and H2 for any required health and social care provision).

a. Outcome - By the end of Key Stage 5, James will be able to interact confidently with adults and peers using BSL in a range of settings, explaining his communication needs and using an interpreter when necessary.			
	Section E	Section F	
	Steps towards achieving outcomes	Special educational provision	Who will be responsible?
a1	James will become confident in telling others how best to communicate with him	Practise explaining his needs, finding a form of words he is comfortable with. James to be helped to make a printed card explaining his needs, for when he is not comfortable explaining through sign	School staff (Intervenor)
a2	James will develop greater confidence and perseverance in social situations	Attendance for one term at a weekly social skills group lasting 40 minutes, led by a speech and language therapy assistant under the guidance of a speech and language therapist. School staff alert for opportunities for James to practise social communication (e.g. meeting visitors) Praise and encouragement from staff when James perseveres with communication.	SALT and SALT assistant  School staff

a.	<b>Outcome - By the end of Key Stage 5, James will be able to interact confidently with adults and peers using BSL in a range of settings, explaining his communication needs and using an interpreter when necessary.</b>		
	<b>Section E</b>	<b>Section F</b>	
	<b>Steps towards achieving outcomes</b>	<b>Special educational provision</b>	<b>Who will be responsible?</b>
a3	James will learn how and when to use an interpreter.	Support to distinguish between not wanting to persevere with an interaction and needing an interpreter because the other person cannot sign. Opportunities to practise using an interpreter rather withdrawing from the interaction.	School staff (Intervenor) with support from SALT

<b>b.</b>	<b>Outcome - By the end of Key Stage 5, James will have attained further qualifications in Maths and English and completed award-bearing courses in life skills and preparation for work.</b>		
	<b>Section E</b>	<b>Section F</b>	
	<b>Steps towards achieving outcomes</b>	<b>Special educational provision</b>	<b>Who will be responsible?</b>
<b>b1</b>	James will work towards Entry Level 2 in English and Entry Level 3 in Maths.	<ul style="list-style-type: none"> <li>• Small group teaching with full-time 1:1 support from an Intervenor with BSL Level 3 and oversight by a qualified teacher of MSI students.</li> <li>• James to be seated directly facing the teacher, on the left hand side of the group, in clear light with his back to the window/light source.</li> <li>• Opportunities to pre-learn vocabulary and concepts and to practise new activities when appropriate.</li> <li>• All written materials presented in size 36 Comic Sans font, with good contrast and no pictures behind the print.</li> <li>• Additional time given for verbal (signed) or written responses with encouragement to expand responses if necessary.</li> <li>• Alternative recording methods may be needed to accommodate James's fine motor difficulties.</li> <li>• Specific support in small-group discussions – only one speaker at a time; speakers to face James when signing; James's attention directed towards new speakers; checks that he is keeping up with the discussion; pauses when needed.</li> <li>• Frequent breaks to prevent visual fatigue and sensory overload</li> </ul>	School staff with support from qualified teacher of MSI

<b>b.</b>	<b>Outcome - By the end of Key Stage 5, James will have attained further qualifications in Maths and English and completed award-bearing courses in life skills and preparation for work.</b>		
	<b>Section E</b>	<b>Section F</b>	
	<b>Steps towards achieving outcomes</b>	<b>Special educational provision</b>	<b>Who will be responsible?</b>
<b>b2</b>	James will complete award-bearing courses in Life Skills and Preparation for Work	<ul style="list-style-type: none"> <li>• Appropriate courses chosen to meet James's needs and abilities</li> <li>• Provision as above</li> </ul>	School staff School staff with support from Teacher of MSI

<b>c.</b>	<b>By the end of Key Stage 5, James will know about several different types of work and be able to make an informed choice about his college course.</b>		
	<b>Section E</b>	<b>Section F</b>	
	<b>Steps towards achieving outcomes</b>	<b>Special educational provision</b>	<b>Who will be responsible?</b>
<b>c1</b>	James will undertake supported work experience within school	<ul style="list-style-type: none"> <li>• Work experience (in office, with site staff, with PE teacher) chosen in discussion with James. Staff involved fully aware of his needs.</li> <li>• 1:1 support throughout placement from Intervenor, with overt support reducing over time.</li> <li>• Daily discussions with James throughout placement, checking his understanding and reactions and answering his questions.</li> </ul>	School staff
<b>c2</b>	James will undertake supported work experience in a local setting.	<ul style="list-style-type: none"> <li>• Work experience placement chosen in discussion with James. Placement fully aware of his needs.</li> <li>• Visual resources made and used before start of placement, to familiarise James with environment, people and activities.</li> <li>• 1:1 support throughout placement from Intervenor, with overt support reducing over time.</li> <li>• Daily discussions with James throughout placement, checking his understanding and reactions and answering his questions.</li> </ul>	School staff School staff (Intervenor) with guidance from Teacher of MSI School staff (Intervenor)

<b>c.</b>	<b>By the end of Key Stage 5, James will know about several different types of work and be able to make an informed choice about his college course.</b>		
	<b>Section E</b>	<b>Section F</b>	
	<b>Steps towards achieving outcomes</b>	<b>Special educational provision</b>	<b>Who will be responsible?</b>
<b>c3</b>	James will learn about the skills and responsibilities attached to different jobs.	<ul style="list-style-type: none"> <li>• Support to evaluate work experience and discussion with peers about their work experience. Specific support for small group discussion – see a.1 above.</li> <li>• 1:1 support to evaluate James's own skills and difficulties in terms of job requirements.</li> <li>• Further information from Preparation for Work course (see a.2)</li> </ul>	School staff

<b>d.</b>	<b>By the end of Key Stage 5 James will be able to work effectively and confidently with a range of supporters with appropriate skills, and help new supporters to understand his needs.</b>		
	<b>Section E</b>	<b>Section F</b>	
	<b>Steps towards achieving outcomes</b>	<b>Special educational provision</b>	<b>Who will be responsible?</b>
<b>d1</b>	James will develop a Personal Profile detailing his primary support needs	<ul style="list-style-type: none"> <li>James to be helped to identify what specific support he finds most helpful in different settings</li> <li>With support, to design and make a Personal Profile detailing the support he needs.</li> </ul>	Intervenor and Teacher of MSI
<b>d2</b>	James will develop confidence in working with less familiar supporters	<ul style="list-style-type: none"> <li>Opportunities to work with less familiar, then unfamiliar, supporters for short periods, using his Personal Profile to give both James and his supporter more confidence.</li> <li>Opportunities to work with less familiar or unfamiliar supporters for longer periods, with James encouraged to give more information about his needs.</li> </ul>	School staff



<b>e.</b>	<b>By the end of Key Stage 5 James will show measurable improvements in his confidence and abilities to anticipate and manage change.</b>		
	<b>Section E</b>	<b>Section F</b>	
	<b>Steps towards achieving outcomes</b>	<b>Special educational provision</b>	<b>Who will be responsible?</b>
<b>e1</b>	James will develop strategies to anticipate planned changes	<ul style="list-style-type: none"> <li>• Develop and use visual calendar to support anticipation and discussion of planned changes.</li> <li>• Ongoing support to discuss the changes involved in transition to adulthood and how James can best manage these.</li> </ul>	Intervenor with support from Teacher for MSI
<b>e2</b>	James will develop his ability and confidence to manage changes	<ul style="list-style-type: none"> <li>• Support to prepare appropriately for changes given James's needs – e.g. mobility tuition in new environments.</li> <li>• Individual and small group discussion of changes and how to manage them, using problem solving, discussion of emotional responses and role play – led by specialist teaching assistant under direction of educational psychologist. 30 minutes each week for one term.</li> <li>• Opportunities to experience unexpected changes in 'safe' settings such as improvisation work in drama lessons.</li> <li>• Practise in managing small unexpected changes engineered by school staff, with support to develop appropriate responses and discussion afterwards of James's feelings and actions.</li> <li>• Support to keep a record of strategies for managing both the practical aspects of changes and the emotions they evoke, to which James can refer for guidance.</li> </ul>	<p>Habilitation Officer, Teacher for MSI</p> <p>Specialist TA under guidance of educational psychologist</p> <p>School staff</p> <p>School staff (Intervenor)</p>

<b>f.</b>	<b>By the end of Key stage 5, James will show measurable improvement in his mobility and supported independence skills, including self-care skills, at home, in community activities and in the educational setting.</b>		
	<b>Section E</b>	<b>Section F</b>	
	<b>Steps towards achieving outcomes</b>	<b>Special educational provision</b>	<b>Who will be responsible?</b>
<b>f1</b>	James will develop better mobility and independence skills at home and school.	<ul style="list-style-type: none"> <li>• Completion of assessment of James's mobility and independence skills by Habilitation Officer</li> <li>• Daily 15-minute orientation and mobility programme, devised by the Habilitation Officer and reviewed half-termly, carried out by James's Intervenor. A similar programme carried out by his family at home.</li> <li>• Advice from the Habilitation Officer for all staff working with James on strategies to promote his independence throughout the curriculum.</li> <li>• Training for James and advice for staff and his family on supporting his use of his long cane.</li> </ul>	<p>Habilitation Officer</p> <p>School staff (Intervenor) and family with support from Habilitation Officer</p>
<b>f2</b>	James will increase his independence in community settings.	<ul style="list-style-type: none"> <li>• Specific orientation and mobility training for James in new environments such as his work experience placement, carried out by the Habilitation Officer</li> <li>• Travel training on public transport, adapted for James's deafblindness and very limited access to environmental information, and allowing that he may need support to get on and off transport.</li> <li>• Weekly training in mobility and independence in James's local community, e.g. going from home to the local shop and buying crisps. Programme devised and overviewed by Habilitation Officer and carried out by Communicator Guide funded by Social Services.</li> </ul>	<p>Habilitation Officer</p> <p>Communicator Guide supported by Habilitation Officer</p>
<b>f3</b>	James will be able to identify and communicate his support needs in different settings and for different activities.	<ul style="list-style-type: none"> <li>• See outcome d. above.</li> </ul>	

<b>g.</b>	<b>By the end of Key Stage 5, James will be making maximum use of his hearing and vision and using appropriate compensatory strategies in order to participate in school and community activities.</b>		
	<b>Section E</b>	<b>Section F</b>	
	<b>Steps towards achieving outcomes</b>	<b>Special educational provision</b>	<b>Who will be responsible?</b>
<b>g1</b>	James's sensory function and strategies will be assessed regularly.	<ul style="list-style-type: none"> <li>Ongoing assessment (at least half-termly) by Teacher for MSI of James's sensory function and compensatory strategies, directly and/or through discussion with James and school staff.</li> </ul>	Teacher for MSI
<b>g2</b>	James will be supported to develop the best possible sensory function and strategies.	<ul style="list-style-type: none"> <li>Advice provided for Intervenor and for all staff working with James on how best to support him and promote his learning and independence.</li> <li>Collaborative working by Teacher for MSI, Habilitation Officer, specialist occupational therapist and other specialists involved with James to ensure holistic approach to meeting his needs, at school and in the community.</li> </ul>	<p>School staff, Teacher for MSI</p> <p>Specialists involved in James's care</p>

<b>h.</b>	<b>By the end of Key Stage 5, James will have developed strategies to help him cope with his sensory integration difficulties, so that his attention and focus are improved and there is a measurable improvement in his ability to regulate his emotions.</b>		
	<b>Section E</b>	<b>Section F</b>	
	<b>Steps towards achieving outcomes</b>	<b>Special educational provision</b>	<b>Who will be responsible?</b>
<b>h1</b>	James will learn to recognise when he is becoming very anxious or stressed and take steps to reduce his anxiety	<ul style="list-style-type: none"> <li>Daily programme of sensory diet activities devised by an occupational therapist specialising in sensory processing disorder – James to choose and initiate an appropriate activity with support when needed.</li> </ul>	Specialist occupational therapist, school staff
<b>h2</b>	James will develop and use strategies to help him cope with his sensory integration difficulties	<ul style="list-style-type: none"> <li>Awareness training on sensory processing disorder for all staff working with James.</li> <li>Advice from the specialist occupational therapist for all staff working with James on strategies to use with him throughout the curriculum.</li> <li>'Time out' card for James to use when he needs a break from the class activity.</li> <li>A positive behaviour management programme drawn up by the school's Behaviour Lead with advice from the occupational therapist and implemented by all staff.</li> </ul>	<p>Specialist occupational therapist, school staff</p> <p>Specialist occupational therapist, Behaviour Lead, school staff</p>

<b>i.</b>	<b>By the end of Key Stage 5, James will have learnt strategies to help him cope with his balance and fine motor difficulties.</b>		
	<b>Section E</b>	<b>Section F</b>	
	<b>Steps towards achieving outcomes</b>	<b>Special educational provision</b>	<b>Who will be responsible?</b>
<b>i1</b>	James will use strategies to help him cope with his balance and fine motor difficulties	<ul style="list-style-type: none"> <li>• Programme of appropriate strategies devised by specialist occupational therapist and reviewed at least termly. James to be reminded to use strategies when appropriate.</li> </ul>	Specialist occupational therapist, school staff

<b>j.</b>	<b>James will make a smooth transition to further education, including at least three preparatory visits before July 2019, so that by the end of December 2019 he is feeling settled in his new college.</b>		
	<b>Section E</b>	<b>Section F</b>	
	<b>Steps towards achieving outcomes</b>	<b>Special educational provision</b>	<b>Who will be responsible?</b>
<b>j1</b>	James will choose a course which meets his complex needs and supports his aspirations.	<ul style="list-style-type: none"> <li>School transitions co-ordinator and Teacher for MSI will provide information and support regarding different courses and colleges.</li> </ul>	School Transitions Co-ordinator Teacher for MSI
<b>j2</b>	James will be prepared for the new environment and programme	<ul style="list-style-type: none"> <li>Habilitation Officer to accompany James on at least one preparatory visit to identify mobility issues and appropriate strategies and provide training for James.</li> <li>James to be helped to make record of preparatory visits, including photos of people, places and activities, to support him in anticipating the move.</li> <li>College to provide information on James's course so that he can talk through his questions and reactions with a trusted adult.</li> </ul>	Habilitation Officer  School staff  College staff
<b>j3</b>	James's supporters at college will be familiar with his support needs before his course starts	<ul style="list-style-type: none"> <li>College staff to visit James in school and discuss his support needs with James and school staff.</li> <li>Habilitation Officer, MSI teacher and specialist occupational therapist to provide guidance to college staff regarding James's needs.</li> <li>If possible, James to spend time at college before courses start so that he can become familiar with the building</li> <li>Resources for induction sessions to be prepared in advance in accordance with section b.1 above.</li> </ul>	College staff, school staff  Habilitation Officer Teacher for MSI Specialist Occupational Therapist College staff

### 13. Plan Section G. Health provision related and unrelated to SEN

SEND Code of Practice requirement: Provision should be detailed and specific and normally quantified including who will provide it. It must be clear how it will support the achievement of outcomes, including the health needs to be met and the outcomes to be achieved through provision secured through a personal (health) budget; clarity as to how advice and information gathered has informed the provision specified. Health provision may include specialist support and therapies, including medical treatments and delivery of medications, nursing support, specialist equipment and continence supplies. The local authority and CCG may also choose to specify other health care provision reasonably required by the child or young person which is not linked to their health or disabilities.

#### **Related to SEND**

##### **Provision to support outcome g**

##### **Audiology**

James will continue to be supported by the local audiology service, to maintain his hearing aids and replace ear moulds when necessary.

##### **Ophthalmology**

James's glasses are prescribed by a local optometrist. He was discharged by the local Paediatric Ophthalmology Department three years ago as his visual condition remained stable. He will continue to visit the optometrist annually and will seek re-referral to Ophthalmology if his vision causes further concern.

##### **Unrelated to SEND**

None identified.

**14. Plan Section H1. Social care provision required under Section 2 of the Chronically Sick and Disabled Persons Act (CSDPA) 1970.**

SEND Code of Practice requirements: Social care provision should be detailed and specific and should normally be quantified, for example, in terms of the type of support and who will provide it (including where this is to be secured through a social care direct payment). It must specify all services assessed as being needed for a disabled child or young person under 18, under section 2 of the CSDPA. It may include services to be provided for the parent carers of disabled children, following an assessment of their needs under sections 17ZD-17ZF of the Children Act 1989. It should be clear how the provision will support the achievement of outcomes.

**To support outcomes e and f:**

1. James is supported to attend and participate in social activities where there are other deaf young BSL users (see X Section F). This will require:
  - A guide communicator to support James with travel training to access the local community. A programme has been devised by the Habilitation worker.
  - An Intervenor with BSL Level 3 to support James' participation in weekly social activities for up to 5 hours per week.
2. James requires additional specialist assistive technology (community aids and adaptations) to ensure he can remain at home safely and independently. A portable pager system will be provided to promote his safety and security at home. This can be taken with him if he moves into student/other accommodation to support his independence. This equipment will be funded by Children's Social Care.



**15. Plan Section H2. Any other social care provision required by James**

SEND Code of Practice: Social care provision may include provision identified through early help, children in need assessments and safeguarding assessments or adult social care assessments, but MUST only include services not provided under section 2 of the CSDPA. Social care provision will include any adult social care provision to meet eligible needs for young people over 18 (set out in the adult care and support plan). When 18, care provision specified in the EHC Plan will be provided by adult services. Local authority may also choose to include other social care provision which is not linked to their learning difficulties or disabilities, such as child in need or child protection plans.

None identified

**16. Plan Section I. Name and type of placement for James**

James will attend the following type of educational setting:  
[This information must only appear in the final plan]

**17. Plan Section J. Personal budget arrangements for James**

If there is a personal budget, the details of how the personal budget will support particular outcomes; the provision it will be used for including any flexibility in its usage and the arrangements for any direct payments for education, health and social care.

James does not want to access a personal budget for any of the provision outlined in this plan.

The table below is an example of a possible way of recording the details required if a personal budget is being accessed.

Outcome step	What is being funded?	Annual cost	Funding agency	Comments (Note if all or part required as a personal budget)

## 18. Plan Signatures

Signed: \_\_\_\_\_ (Lead Officer)

Date: \_\_\_\_\_

Signed: \_\_\_\_\_ (Parent/Carer)

Date: \_\_\_\_\_

## 19. Plan Section K. Advice and information received for James's assessment

SEND Code of Practice: The advice and information gathered during the EHC needs assessment MUST be attached (in appendices). There should be a list of this advice, who provided it and when it was provided.

Agency (If appropriate)	Role/Position	Written by	Date of report	Comments
	Parents	Mr & Mrs Moore		
	Child	James Moore		
Education	Teacher for MSI	Brian Johnson		
Education	Educational Psychologist	Stuart James		
Education	Intervenor	Julie Anderson		
Social Care	Social Worker	Kurt Vogel		
Health	Paediatrician	Renate Meyer		
Health	Specialist Occupational Psychologist	Jon Anderson		

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