

**Guidance and process for the completion
of the
Social Care Needs Report
for an EHC Assessment**

For social work staff, Norfolk Early Help Family Focus (NEHFF) and
EHCP Coordinators

February 2018

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1. Overview

The Children and Families Act 2014, the Care Act 2014, and the Special Educational Needs and Disability Regulations 2014 set out sweeping changes to the way children and young people 0-25 years with special education needs or disabilities (SEND) are supported.

The changes, known as the SEND reforms, are explained in the Special Educational Needs and Disabilities (SEND) Code of Practice 2015 and include:

- New multi-agency Education, Health and Care (EHC) Needs Assessments. The EHC Needs Assessment uses person-centred approaches to identify needs and desired outcomes for the child/young person and their family.
- EHC Needs Assessments determine whether a multi-agency Education, Health and Care (EHC) plan is required. Where EHC plans are required they replace existing Statement of Special Education Needs and Learning Disability Assessments (LDA).
- EHC plans operate alongside (but do not replace) other Plans such as; Child Protection Plans, Child In Need (CIN) Plans, Pathway Plans and Looked After Children (LAC) Plans. Each should inform the other.
- Where possible EHC planning and review meetings should run alongside other relevant meetings e.g. PEP and CIN meetings, each informing the other.

2. Process

1. Complete sections 1 – 10 of the 'Social Care Needs Report for EHC Needs Assessment' following sections 2-10 of this guidance document.
2. Discuss and share your 'Social Care Needs Report for EHC Assessment' with parent/carer and/or child/young person (CYP).
3. Give parent/carer or young person the information sharing leaflet: Consent – A guide for parents (incorporated within the 'Social Care Needs Report for EHC Assessment' template).
4. Ask parent/carer or young person to complete consent form: Agreement to share personal information (incorporated within the 'Social Care Needs Report for EHC Assessment' template).
5. Report writer completes 'Statement of practitioner' section of consent form.
6. Send to the EHCP Coordinator / relevant business support officer who has requested the report. **Report must be returned within 6 weeks of request.**
7. Send copy of whole social care report to parent/carer or young person.
8. **If the child/ YP is an open case, prioritise attending the EHC plan writing meeting.**

At the EHC plan writing meeting practitioners explore:

- What is important *to* and *for* CYP and their family?
- What's working and not working from a social care perspective?
- What needs to change to improve outcomes for CYP and their family?
- Outcomes: What would be the benefits of the change? (E.g. what will it do/give/make possible for CYP and their family?).

3. Status

- a. **If the CYP is open to Children's Services Social Care** (either as a Contact, Referral or open case) the allocated social worker will be contacted by the EHCP Coordinator or the relevant business support officer. The allocated social worker must complete the 'Social Care Needs Report for EHC Assessment' and return it within 6 weeks of the request to senopsupport@norfolk.gov.uk
- b. **If the CYP is open to the short breaks team as short breaks are being received** the allocated social worker and team manager will be contacted by the EHCP Coordinator or the relevant business support officer. The allocated social worker must complete the 'Social Care Needs Report for EHC Assessment' and return it within 6 weeks of request to senopsupport@norfolk.gov.uk
- c. **If the CYP is open to Children's Services Early Help** (Norfolk Early Help Family Focus) the allocated practitioner will be contacted by the EHCP Coordinator or the relevant business support officer. The allocated practitioner must complete the 'Social Care Needs Report for EHC Assessment' and return it within 6 weeks of request to senopsupport@norfolk.gov.uk
- d. **If the CYP was previously known to social care but is no longer open** the EHCP Coordinator or relevant business support officer must send the request for the report to mash@norfolk.gcsx.gov.uk. It must be marked clearly: 'Report for EHC Needs Assessment required'. A manager will decide who will complete the report. It is the expectation that the report will be completed **within 7 days of receipt of the request** and returned to senopsupport@norfolk.gov.uk
- e. **If the CYP was previously known to NEHFF but is no longer open** the EHCP Coordinator or relevant business support officer must send the request for the report to the Process Team in the locality that was previously responsible for the work. It must be marked clearly: 'Report for EHC Needs Assessment required'. A manager will decide who will complete the report. It is the expectation that the report will be completed **within 14 days of receipt of the request** and returned to senopsupport@norfolk.gov.uk
- f. If information held by social care / NEHFF about historical involvement remains **relevant** to the CYP's current education, health or care needs, desired outcomes or required education, health or care provision, the practitioner must consider whether it is **proportionate** to include it in the 'Social Care Needs Report for EHC Assessment'.

Does the benefit of sharing the information outweigh any negative consequences, particularly for the CYP?

If in any doubt, or there are any safeguarding issues, case specific legal advice should be sought. Practitioners need to take account of guidance in HM Government Information sharing: Advice for practitioners providing safeguarding services to children, young people, parents and carers (March 2015), which makes clear:

‘Whilst the Data Protection Act 1998 places duties on organisations and individuals to process personal information fairly and lawfully, it is not a barrier to sharing information where the failure to do so would result in a child or vulnerable adult being placed at risk of harm. Similarly, human rights concerns, such as respecting the right to a private and family life would not prevent sharing where there are real safeguarding concerns.

If the case has been open before and is no longer open to Children’s Services Social Care or NEHFF it is the expectation that the practitioner completing the report starts the report with:

“CYP’s name & DOB was previously known to social care and our involvement ceased on [DATE].

If needs or concerns are identified during the EHC Needs Assessment requiring a specialist Social Care response, a referral should be made via MASH.”

- g. **If the CYP is not known to social care** the EHCP Coordinator will not send the request for information to Children’s Social Care and write on the form ‘not previously known to social care’.

NB If at any time the EHCP Coordinator identifies needs or concerns (themselves or as a result of the assessment from other agencies) during the EHC Needs Assessment that require a specialist Social Care response, a referral should be made via MASH. *In this instance input into the EHC Needs Assessment will be expected from Social Care as laid out by the process above.

- h. If for any reason the information is not received in the expected timescales the EHCP Coordinator or the relevant business support officer is expected to escalate the matter to the locality Head of Social Work/Head of Service and Partnership in the first instance. If this does not resolve matters within a week it is expected that the matter is escalated to the relevant Head of Localities. If this matter is not resolved within 8 weeks of the initial request it is the expectation that the matter is escalated to the Assistant Director for Social Work and the Social Work Lead for CWD is also notified.

4. Has child or young person’s needs been assessed?

Provide details of the type of assessment, e.g. under Section 17 of the Children Act 1989. If the assessment is being completed write: ‘An assessment of [CYP’s name] needs is currently in progress’.

5. Is there a care plan in place?

Provide details of the type of care plan, e.g. Child In Need Plan, Child Protection Plan, Looked After Child Plan, Pathway Plan, Family Support Plan. If the care plan is

currently being formulated, write: *'Following an assessment of [CYP's name] a care plan is currently being developed.'*

6. Needs identified (Section D of EHC plan)

Needs relate to things that are **important to** (hopes and aspirations) and **important for** (health, safety, welfare) a CYP.

- Include details of needs identified during your assessment. Safeguarding concerns and early help needs have an impact on a CYP's education - give an overview of these needs/concerns, as appropriate (specific details do not need to be included). Information provided needs to be **relevant** and **proportionate** as outlined in (2b) of this guidance.
- For young people in or beyond Year 9, consider whether there are needs in Preparing for Adulthood or independent living e.g. support finding employment, housing and participation in society.
- Consider whether the information you are providing is relevant to the CYP's desired outcomes, their education and health needs, and any special education, health or care provision that may be required relating to these factors.
- Information will be provided by health and education practitioners about the needs and recommendations specific to these areas, so limit your information to social care elements of need.
- Do not refer to siblings or other family members by name.
- Avoid statements e.g. *'must attend school, health appointments'*, *'meet developmental milestones'* – these are universal expectations, not individual needs.
- Avoid statements e.g. *'referral needed to'* or *'assessment needed by'* – these are embedded solutions, not specific needs.

See **Appendix A** for example of completed 'Social Care Needs Report for EHC Assessment'.

7. Suggested Outcomes (Section E of EHC plan)

Before you begin...

- Identify aspirations – what motivates the CYP?
- Identify strengths – what can they do, what are they good at?
- Identify difficulties / needs – what's stopping them reaching their goals?

Writing the outcome...

- An outcome is the **benefit** or **difference** made to a CYP as a result of an intervention. Test this by asking: what will it *'give'*, *'do for'* or *'make possible'* for the CYP?
- Don't mix outcomes with provision – provision is what must be provided to meet the CYP's needs so that the outcomes can be achieved.
- An outcome must be Specific, Measurable, Achievable, Realistic, Time bound (SMART). Vague outcomes make it difficult to track progress, leading to drift.
- Be specific about what you would like to see the CYP doing / achieving by a specific review date.

Test your outcome...

Good outcomes will do at least one of the following:

- Build on something that is working well.
- Change something that doesn't work well.
- Move the CYP towards their aspirations.

See **Appendix B** for examples of outcomes.

8. Provision (Section H of EHC plan)

H1 – Social Care provision **NEEDED** under Section 2 of the Chronically Sick and Disabled Persons Act 1970 (CSDPA).

- If a **'need'** can be met with the provision of the types of services listed in a-h below, the Local Authority must decide whether it is **'necessary'** for them to meet this need (the Local Authority can take into account the family's circumstances, including the situation of the parents and the needs of other children in the family).
- Once a CYP and their family have been assessed as **eligible** for support under the CSDPA the Local Authority has a specifically enforceable **duty to provide** them with services to meet their assessed 'need'.
- Services assessed as required under CSDPA must be provided by the Local Authority **regardless of resources**.
- The CYP must be under 18 years.
- Provision should be detailed, specific and quantifiable (e.g. type, hours, frequency of support and level of expertise).
- Do not include any support provided via Direct Payments – this goes under H2.

Services specified under CSDPA are:

- a. Practical assistance in the home (e.g. with personal care or eating);
- b. Provision or assistance in obtaining recreational and educational facilities at home and outside the home (e.g. after-school clubs, play schemes, non-residential short breaks);

- c. Assistance with travel to access facilities in the community;
- d. Help with special equipment and adaptations to the home;
- e. Facilitating the taking of holidays;
- f. Meals at home or elsewhere;
- g. Provision or assistance in obtaining a telephone and any special equipment necessary;
- h. Non-residential short breaks (included in H1 on the basis that the child and parent will benefit from short break).

Exceptions: Any provision listed in a-h above provided as short term support due to current circumstances e.g. short term school holiday support, support whilst a parent is unwell, support after a child has an operation etc. is provided under Section 17 of the Children Act 1989, and therefore should be written under H2.

H2 – other social care provision REASONABLY REQUIRED under the Children Act 1989 or the Care Act 2014.

- Provision reasonably required (which may have been identified through early help / universal services).
- Provision reasonably required identified in CIN, CP or LAC plans (but not included in H1). This could also include detail about frequency of social worker and Independent Reviewing Officer (IRO) visits, care plan reviews, core group meetings, and placement details (if relevant).
- Overnight short breaks and services provided to CYP under 18 years arising from their SEN but unrelated to a disability.
- Support delivered via Direct Payments (NB: Council for Disabled Children are still seeking clarity around this).
- The Adult Care and Support Plan for young people eligible for adult care support under the Care Act 2014 should be incorporated into Section H2.

NB: All provision in H1 and H2 must be agreed by Social Services and include the date when the provision will next be reviewed, or will cease.

NB: Where provision in H1 or H2 are jointly funded, provide details of funding arrangement.

9. Appendices

Consider whether it would be relevant or proportionate to share any other support plans for the CYP with the agreement of the family, for example:

- Moving and handling plan
- Behaviour management plan
- LAC care plan (following discussion with IRO)
- Short Break care plan
- Family Group Conference plan.

10. Report writer

- The Education High Needs SEND Service request advice and information from Social Care as part of the EHC process.
- Practitioners must provide their response **within six weeks of the request**, using the 'Social Care Needs Report for EHC Assessment' template.
- Practitioners must **prioritise attending EHC planning meetings** so they can contribute to the planning process.

11. Sharing your Report

- It will rarely be appropriate to share an entire assessment or care plan as they contain sensitive family information and history (as well as information about parents, siblings) not relevant to be shared for the purposes of EHC planning. Report writers must use professional discretion about the relevance and usefulness of information shared as outlined in (2b) and (5) of this guidance.
- Practitioners must use the 'Social Care Needs Report for EHC Assessment' template when providing information and advice as part of the EHC Needs Assessment process.
- Practitioners **MUST** discuss and share their Report with young person and / or parent / carer and gain written consent using the 'Agreement to Share Personal Information' template within the Report.
- When a CYP is in need of protection, consent to share information remains desirable but is not essential.
- Your completed Report will form an attachment to the EHC plan and therefore it is critical make the CYP and parent / carer aware of this.
- Practitioners must send their completed Report (in accordance with consent given by family) to the Education High Needs SEND Service **within six weeks of the request**.

12. Further advice and support

If you require further advice or guidance about completing your Report, or advice and information about the SEND reforms or EHC planning, please go to the Local Offer website www.norfolk.gov.uk/send.

All the information about EHC needs assessments and plans can be found in the Support in learning section.

Document Owner: Hayley Griffin **Date:** Feb 2018. **Review due:** Feb 2019.

Appendix A: COMPLETED EXAMPLE

Social Care Needs Report for EHC Assessment

1. Child or young person's details	
C/YP Name	Jay Wellesley
Date of Birth	01/01/04
Address	81 Motorway Drive
Who has PR? (if child under 18 years)	Janice & John Wellesley (mother and father)

2. Status – mark 'X' as appropriate			
	Open referral, or Open case	Previously known to service	Not known to service
Norfolk Early Help and Family Focus		Date closed:	
Children's Services Social Care	X	Date closed:	
Family Support Plan		Date closed: 22/04/11	
Children & Young People with Disabilities OT & Rehabilitation Service		Date closed:	

3. Has child or young person's needs been assessed?	
Type of assessment	Child & Families Assessment
Date assessment completed	10/02/17
Next assessment due	August 2017

4. Is there a care plan in place?	
Type of care plan	Child in Need Plan
Date of last review	23/05/17
Date of next review	23/08/17

5. Needs identified (Section D of EHC plan)
What social care needs have been identified as a result of an assessment?

- You **must** follow advice in *Guidance Note 5*.

Jay receives a package of support from the Children With Disabilities team. This has been in place since Jay was 10. A Child In Need Review meeting was held in May 2017 to update Jay's support plan and a Child & Families Assessment was completed in February 2018 recommending an increase in his support because Jay's anxiety had increased and he was becoming more socially isolated.

Jay was having frequent anxiety attacks and would bang his head with his fists or on walls.

Jay enjoys attending his local drama group, but has recently started to need significant preparation before the group to help him manage his anxiety. The family had to spend a lot of time encouraging and preparing Jay to attend which impacted on the time they could spend with his sisters; this became even more difficult to manage during school holidays as the lack of structure in Jay's day can make his behaviour more difficult to manage.

Jay requires a structured approach to social situations outside of school in order to reduce his anxiety. Travelling on public transportation is difficult for Jay as the crowds and unpredictable setting can heighten his anxiety. He needs to develop greater self-confidence in unfamiliar settings or with unfamiliar people.

Jay requires support with his personal care needs

6. Suggested Outcomes (Section E of EHC plan)

What are the intended outcomes for the child or young person?

- Outcomes must be Specific, Measurable, Achievable, Realistic, Timed (SMART)
- Outcomes must be linked to the child or young person's aspirations or needs
- You **must** follow advice in *Guidance Note 6*.

1. Jay has at least two friends whom he sees outside of school times, and Jay reports being more confident in developing and maintaining friendships.

2. Jay auditions for a role in his drama group's yearly public performance in October 2017.

3. Jay will tell people who are unfamiliar to him what he needs and wants, and he will use a range of strategies to remain calm in unfamiliar environments.

4. Jay uses public transport at least once per week.

7. Provision (Section H of EHC plan)

- You **must** follow advice in *Guidance Note 7*.

Section H1:	Section H2:	Start, review and end dates:	How is support, intervention or provision delivered?
What support, interventions or provisions are being provided (or	What other support, interventions or provisions are being provided (or funded)	1. When did support, intervention, or provision start?	1. Who is delivering it?

funded) by your service under s2 of the CSDPA to achieve the outcomes detailed in (6) above.	by your service under the Children Act 1989 or Care Act 2014 to achieve the outcomes detailed in (6) above?	2. When will support, intervention, or provision next be reviewed, or cease?	2. When/where does it take place? 3. For how long? 4. How often?
Support worker to help Jay attend his drama group.		Social Services agreed Direct Provision funding of a support worker on 01/02/17. Next review in August 2017. Review can be requested sooner if Jay or his family's needs change.	Core Assets provide support for 4 hours per week. Support worker travels with Jay on public transport to and from drama group, and waits for Jay at the group. Parents will schedule the 4 hours per week support directly with the Core Assets.
	Personal Assistant (PA) to take Jay out into the community to enjoy activities and broaden his social networks.	Social Services agreed Direct Payments funding for a PA on 01/02/17. Next review in August 2017. Review can be requested sooner if Jay or his family's needs change.	Parents use Direct Payments to employ a PA 4 hours per week. Each week PA takes Jay to local events and activities that will broaden his social networks.
	Advice and guidance for Jay and his family to use Social Stories, Now and Next, Visual Timetables etc. to help prepare and	Jay and his family are being supported to use tools; progress will be reviewed at Child In Need	Social worker liaising with school about tools they are currently using with Jay.

	reassure Jay for unfamiliar settings or people so he is less anxious.	meeting in August 2017.	Social worker explaining and exploring tools with family during home visits.
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8. Appendices

If relevant detail any additional plans you will be submitting with your Report, e.g.

- Moving and handling plan
- Behaviour Management plan
- LAC care plan
- Short Break care plan

9. Report Writer

- Please read *Guidance Note 9* when completing this section.

Name:	Jackie Smith		
Job Title:	Social Worker		
Team Name:	Children & Young People with Disabilities 0-15 team		
Telephone:	0800 123 456		
Email:			
Date this report was requested:	02/06/17	Date report returned to EHCP Co-ordinator (must be within 6 wks):	25/06/17
Requester name:			
Have you been invited to the EHC Plan Writing meeting? (Yes / No)	Yes	Will you be attending EHC Plan Writing meeting? (Yes / No)	Yes

10. Sharing your report

- When child is in need of protection, consent to share information remains desirable but is not essential.
- In ALL other circumstances consent must be gained before sharing report.
- Reports must be provided within six weeks of request.
- You **must** follow advice in *Guidance Note 10*.

Parent / carer	Has Report has been discussed and shared with parent / carer? YES
	Has parent / carer consented to report being shared? YES

Child / young person	Has Report been shared with child / young person? YES If not, state reason: N/A
	Has child / young person has consented to report being shared? YES
Education High Needs SEND Service	Once consent has been given to share this report please forward report and any appendices to the EHCP Co-ordinator (see <i>Guidance Note 10</i> for details).

Appendix B - The 'golden thread' toward outcomes

Aspiration	Need	Outcome	Provision
Jon wants to be able to play in the garden with his family and friends.	Garden is not wheelchair accessible due to steps so Jon ends up staying indoors a lot.	Jon feels fully involved in family life, and enjoys family BBQs because he can move around the garden in his wheelchair independently.	Adaptations to garden to allow wheelchair access. Groundworks to garden due to begin in October 2017.
Jane wants to have her own flat when she leaves college.	Jane doesn't have the skills needed to be able to live away from family home.	When Jane is about 19 she will be living in accommodation that suits her needs and preferences. She will have the support she needs to feel happy and safe.	Social Services agreed funding for Jane to attend a 14 week Life Skills training programme at Willow Park beginning June 2017.
Jack wants to have friends to play with.	Jack is struggling to maintain friendships because he becomes aggressive when feeling anxious, frustrated or emotionally overwhelmed.	Jack will recognise when his feelings of frustration, fear, anxiety and anger are increasing and will be using tools and strategies to manage these feelings. If Jack begins to feel overwhelmed he will alert others, so he can be supported.	A Positive Behaviour Plan details the provision.
Janice would like to travel into town to go shopping on her own.	Janice relies on her mother to take her into town because she is anxious about going on the bus.	Janice will be using public transport independently at least once a month, for example, to enjoy shopping trips.	Travel Training by July 2017
Jordan's parents want to feel energised to meet the care needs of all their children.	Parents are exhausted by their caring responsibilities due to Jordan's complex needs. They struggle to spend quality 1:1 time with the other children because of this.	Parents will have periods of respite whilst Jordan is at Lavender House, to recharge their energies and spend quality 1:1 time with Jordan's siblings.	20 nights per year at Lavender House respite residential home.