

# Securing good quality social care advice for education, health and care (EHC) plans

**Council for Disabled Children**



### About This Document

The purpose of this document is to support local authorities (LAs) to set up processes that facilitate getting good social care advice. Social care teams need to have this in place to be able to adequately respond and contribute to good quality education, health and care (EHC) plans that meet both the letter and the spirit of the Children and Families Act 2014.

At the core of the Children and Families Act is the coordination and integration of support for children and young people with special educational needs to improve their outcomes. This includes their life outside of school and social inclusion.

This guide is for social care teams, disabled children's teams and Special Educational Needs and Disability (SEND) teams, particularly those responsible for EHC needs assessments and planning.

It should be read alongside:

- "Identifying the social care needs of disabled children and young people and those with SEN as part of EHC Need Assessments"
- "The role of social care in implementing the Children and Families Act 2014"
- "Producing good quality health care advice for Education, Health and Care plans"

This document is made up of three parts:

- Part 1 provides an overview of some overarching principles.
- Part 2 highlights social care statutory duties, timelines and practice tips for setting up processes for securing good social care advice.
- Part 3 shares recommendations on how to use templates to secure good social care advice.

Appendix A provides a template to support requesting (i) and responding (ii) to requests for information and advice relating to social care.

Appendix B is a completed template with a social care case example.

### Using this document

This document provides examples for discussion and is not advocating any particular approach to meeting individual needs.

### Our appreciation

We would like to thank everyone who has contributed through participation in our Regional Social Care Workshops, submitting materials, sharing challenges and commenting on drafts during the development of this document.

In order to secure good quality social care advice in EHC need assessments and planning, the following key practices need to be embedded in the process throughout.

#### Clear thresholds for social care intervention:

- The Local Threshold document is clear on which children require statutory social care intervention, and there is a clear pathway for support for children who do not require statutory social care intervention as part of EHC needs assessments and planning.
- It must not become a two-tier system whereby those going through the EHC process become fast-tracked for social care assessment. It is important that decisions on thresholds are consistent regardless of circumstances of referral.
- There must be a process in place to seek further advice should the request from statutory social care be returned indicating that the child is not known and there is no evidence that a social care assessment is required. The EHC coordinator must seek further social care advice from those who know the child well, which should start with their family and the child themselves but may also include early help practitioners and other involved professionals such as SENCOs, teachers and providers of universal services. (For more information see our briefing on 'Identifying the social care needs of disabled children and those with SEN').
- The LA's threshold document is clear in terms of who is eligible for support under the Chronically Sick and Disabled Person's Act 1970 (CSDPA). This should also be explained in the Local Offer.

#### Professionals communicate well with families about information that will be shared and with whom:

- In line with the Section 19 principles of the Children and Families Act 2014, children, young people and their families are fully involved in evidence gathering, information sharing and decision making processes.
- There needs to be a consent form that is clear about the information that is being requested from social care. This should include information on the assessment process and information sharing to ensure informed consent.
- Further consent is sought from the family by the practitioner submitting the social care advice. The family should be aware of the information which is being shared.
- Regular communication with the family is clear about what information is being shared and with whom. This includes a process to address if the family do not agree with information shared by social care.

#### Processes are in place to moderate the quality of social care advice and provide feedback to writers:

- There is a quality assurance process in place to ensure the variety of social care advice received is relevant and proportionate in the EHC planning process. This might be overseen by a senior practitioner or manager within social care.
- LAs have a system to ensure appropriate social care sign off of the EHC plan, to include review of Section D, H1 and H2, or have delegated this responsibility accordingly.

**Pre-request for EHC needs assessment**

Information and evidence may be gathered to support the request for an EHC needs assessment.

Section 19 principles underpin the entire process ensuring that children, young people and families are fully involved throughout.

The 20 week process starts on receipt of the request for an assessment.

**EHC coordinators lead on completing the request for advice template.**

**Decision to Assess**

The LA has **6 weeks to consider the request** for an EHC needs assessment and make a decision whether or not to assess.

When the LA decides it will carry out the assessment, it **must request social care advice and information**.

This should include advice and information on:

- Identified social care needs which relate to SEN, the child or young person's aspirations and relevant outcomes.
- SEN, health or care provision that may be required in light of their needs.

This **must be returned within 6 weeks** of receipt of the request.

**Completed request for advice template sent to social care single point of access (e.g. MASH team).**

**Assessment and Evidence gathering**

An EHC plan must contain details of the child or young person's social care needs which are related to SEND. This goes in Section D of the EHC plan.

This information needs to be gathered by week 12 at the latest to allow time for it to be incorporated into the draft plan.

This means that the latest it should be requested is week 6.

If a new statutory social care assessment is needed, the social worker needs to be aware that the information and advice required for the EHC assessment must be returned **within 6 weeks of the receipt of the request**.

**Where there is an allocated SW they should complete the advice and information into the response template.**

**Drafting and agreeing the plan**

The EHC plan must specify social care provision which must be made either under CSDPA 1970 (H1) or CA 1989 (H2).

It may also include social care provision not linked to the child or young person's SEND.

This must be signed off by week 14 to ensure the draft plan can be issued by week 16 at the latest.

By week 16 the draft EHC plan should be shared with the child, young person and their family to have 15 calendar days to allow them to comment and request to name a school or college in their plan.

**The final plan must be issued by week 20.**

**Advice that informs an EHC plan must be quality assured by a SW or someone with responsibility for social care.**

The information already gathered about the child's aspirations and person-centred planning can be shared alongside the request for advice and is used to support the completion of the request for social care advice template (part 3 - Appendix A part 1).

**Request for information and advice in relation to social care**  
(Part 3 - Appendix A part 1)

Completing the template provides social care practitioners with information about what is already known about the child's aspirations and needs. This should include sharing Section A and any other relevant information submitted as part of the request.

**Social Care assessments as part of EHC planning**

A decision may need to be taken as to whether a social care assessment is required based on the information gathered so far.

This process should be built into the multi-agency decision making process and may include having a social worker or social care practitioner involved in the panel decision during week 1-6.

This decision should be made as early as possible in the process to ensure timely identification of needs.

**The social care practitioner who receives the request for advice identifies the right pathway for the family e.g. Early Help, Local Offer.**

**Response to request for advice**  
(Part 3 - Appendix A part 2)

The professionals who know the child and family best should provide the social care information and advice. Where a child is known to statutory services this would be an allocated social worker (SW) or a lead professional where there is involvement from Early Help.

When a child **is or has been known** to statutory social care services, there may be detailed information shared as part of the advice which may not necessarily be included in the plan. Practitioners need to be mindful that information submitted as part of the advice will remain in the appendix of the EHC plan. Judgement will be needed on a case by case basis about what is relevant and proportionate to share.

When a child is **not known** to statutory social care services, the advice and information will need to be requested from other professionals who know the family well such as SENCOs, Keyworkers, or universal providers, if needs are met through the Local Offer (LO).

**On receipt of a response template which states 'not known' the EHC coordinator should resend the request to other professionals.**

**Provision drafted and plan agreed**

The identified decision maker is responsible for signing off on Social Care aspects of the EHC plan including deciding if provision identified through universal services or the LO is proportionate and sufficient to meet identified needs, as well as signing off the provision listed in H1 and H2. They also confirm the outcomes identified are appropriately aligned with any social care plans.

There is a process in place to ensure when a child is looked after or subject to a CIN or CP plan, the relevant social care provision is listed appropriately in H1 or H2. This may include frequency of SW and IRO visits, frequency of care plan reviews, and PEPs.

The provision is specific to the child and will continue until the relevant plan is reviewed or an amendment is made based on an appropriate needs assessment.

Where the LO is identified as suitable to meet the needs of the child or young person, the specific provision should be identified. This should be clearly explained to the family and documented.



## Part 3: Using the templates to secure social care information and advice

### Collecting social care information and advice

Local areas need to establish clarity about how the social care advice will be brought together to inform a draft plan.

Some areas may choose to use one advice template across education, health and social care. Others may choose to have a specific social care request and advice template. Here we offer an example of a social care specific template for requesting information and advice and for submitting a response.

See APPENDIX A for request and response templates.

### Who should provide the information and advice and what should happen next?

The response template (Appendix Aii) should be completed by someone who knows the child and family well. This will vary depending on the circumstances of the child, young person and their family.

Where a child is currently known to statutory Social Care, has an allocated social worker and either a specialist short breaks plan, Child in Need (CIN) plan, Child Protection (CP) plan or Looked After Child (LAC) plan, this form should be completed by the allocated social worker based on:

- Any information in current specialist short breaks plan, CIN, CP or LAC plans relevant to the child's SEN;
- Information provided in the 'request for advice' received from the EHC co-ordinator;
- Information gathered through engagement with the child, young person and their family.

Where a child has been known to statutory social care services in the past, has had an allocated social worker and either a specialist short breaks plan, CIN plan, CP plan or LAC plan, the response form should be completed by the previously allocated social worker, if possible, or by another social worker who can access the records. Any information shared needs to be agreed with the family as part of the initial informed consent request in the EHC needs assessment.

Where a child is not known to statutory social care, checks should be completed to find out whether the child or young person currently has or has previously had involvement from the Early Help team, and if so the request for advice should be sent to the lead professional. They should complete the form using information already known by the Early Help team, the information shared with the request and through engagement with the child, young person and their family.

Where a child is not previously known to statutory social care or engaged with Early Help services, the practitioner who receives the request for advice should use the information within it to make a judgement, based on local thresholds, on whether an assessment from either is needed:

- Where it appears needs are currently being met through universal provision and the Local Offer, this should be detailed in the response form and sent back to the EHC co-ordinator, who should then follow up with those universal providers who know the family well, to ensure they have the opportunity to input into section D of the EHC plan. The involved providers should be invited to the EHC planning meeting.
- Where there is evidence that there may be unmet social care needs the request for advice could inform a referral for an Early Help assessment, in line with local thresholds. Where this happens the EHC co-ordinator should be notified and put in contact with the Early Help lead professional to ensure they are able to input into sections D and H2 as appropriate in the EHC plan. The lead professional should be invited to attend the EHC planning meeting, even where the assessment is not yet completed.
- Where there are challenges for the family and increasing concerns in line with local thresholds, the request for advice could inform a referral for an assessment under the Children Act 1989. Where this happens the EHC co-ordinator should be notified and put in contact with the social worker allocated to the case to ensure they are able to input into sections D and H (1&2 as appropriate) of the EHC plan. The social worker should be invited to attend the EHC planning meeting, even where the assessment is not yet completed.

### Signing off social care input in EHC plans

- The EHC plan needs to be signed off by the LA's statutory social care services. This also includes reviewing any social care information and advice that is included in Sections D, E, H1 and H2. LAs need to make arrangements for appropriate social care decision makers to sign off the plan or delegate this responsibility appropriately.



**(i) Request for advice and information relating to Social Care**

This form should be completed by the EHC Co-ordinator and sent along with the request for advice. It should be based on:

- Evidence and information provided as part of the EHC needs assessment request and decision to assess process;
- Additional information gathered through conversations with the child or young person and their family and friends, early years providers, schools, colleges, post-16 providers, universal providers and anyone else the family suggests.

**Child and family information summary**

Child's name	
Date of birth	
Date of decision to proceed with EHC needs assessment	

<b>Aspirations and outcomes</b>	
<i>(This section should include all aspirations and outcomes from Section A, whether or not they are perceived to relate to social care)</i>	
<b>Aspirations</b>	<b>Draft outcomes, if already identified</b>

What is important to the child or young person?	
What do they do outside of school? E.g. see friends, attend groups, clubs or activities. What are their hobbies or interests? Where do they go to do these things?	

Do they face any challenges or barriers accessing these activities?	
What is going well for the child and their family?	
What support do they receive from family, friends, community members and other professionals?	
What do the child and family find difficult, challenging or stressful? What is not working well?	
Any additional information that you consider to be relevant.	

Completed by:	Name: Job title: Contact details:
Date request sent:	
Date advice is due: Within 6 weeks	
<b>Date, time and location of planning meeting:</b>	Relevant social care practitioner to attend.

Optional appendices: consent form for information sharing and Section A

**(ii) EHC needs assessment: Advice and information relating to Social Care**

Child's name	
Date of birth	
Who has parental responsibility?	

<b>Is the child or young person known to statutory Social Care or Early Help?</b>					
Early Help		Children's Social Care		Adults' Social Care	
Contact details for lead professional or social worker:					

<b>Has there been an assessment of the child and family?</b>					
Early Help		Child and family (SW assessment)		Care Act	
Other, please specify:					

<b>Does the child or young person have a current plan?</b>										
Early Help		CIN		CP		LAC (s17, s20 or 31)		Short Breaks plan		Care and Support plan
Other, please specify:										

**Social Care Information and Advice**

<p><b>Section D: Social care needs</b></p> <p>Including social care needs which relate to their SEND as well as social care needs that are not linked to the child's SEND but may be relevant.</p> <p>Please specify which needs were identified as a result of an assessment</p>

<p><b>Section E: Outcomes sought for the child or young person</b></p> <p>Outcomes should be SMART, linked to the child's aspirations, joined up across health, education and social care.</p>

Section H1:	Section H2:	By whom, by when?
Please provide detail of provision under the CSDPA s2 related to outcomes as defined above	Please provide detail of other social care provision related to outcomes as defined above	Please specify who is responsible for arranging the provision, how often it takes place, where it takes place, how long for?
Is the child or young person receiving a personal budget?		
Authorisation of the provision by:		
Date:		

<b>Appendices provided with advice:</b>

Advice completed by	
Name:	
Job title:	
Organisation:	
Date returned to EHC Co-ordinator:	
Attendance at EHC planning meeting	Yes / No

\*This report has been explained to the family and they have consented to the sharing of this information.

**Name of person who provided consent:**

**(i) Request for advice and information relating to Social Care**

This form should be completed by the EHC Co-ordinator and sent along with the request for advice. It should be based on:

- Evidence and information provided as part of the EHC needs assessment referral and decision to assess process;
- Additional information gathered through conversations with the child or young person and their family and friends, early years providers, schools, colleges, post-16 providers, universal providers and anyone else the family suggests;

**Child and family information summary**

Child's name	Sarah Jones
Date of birth	13/10/2003
Date of decision to proceed with EHC needs assessment	15/02/2017

Aspirations and outcomes <i>(This section should include all aspirations and outcomes from Section A whether or not they are perceived to relate to social care)</i>	
Aspirations	Draft outcomes, if already identified
Sarah wants to work in the music industry or in a local shop.	
Sarah wants to live with friends once she finishes college.	

What is important to the child or young person?	It is important to Sarah that she is allowed to be as independent as possible. She doesn't want to always have her parents with her when she goes out in the community.  Sarah wants to have a group of friends, she wants to feel part of a group.
What do they do outside of school? E.g. see friends, attend groups, clubs or activities.	Sarah used to spend some time on her estate unsupervised however this recently changed after some of her peers got in trouble with the police. Sarah's parents are worried about who she is spending time with and Sarah herself was surprised when her friends got into trouble.  Sarah has started to attend a local youth scheme since there was trouble with the police.

What are their hobbies or interests?	Sarah Loves music. She loves to listen to YouTube and make videos of cover songs. Sarah has a really lovely voice.
Where do they go to do these things?	Sarah enjoys her music courses at school and says this is the only time she doesn't feel different at school. Sarah is in a DSP for most of her school day, however she attends mainstream music lessons.
Do they face any challenges or barriers accessing these activities?	Sarah admits that she does not always know when people are trying to take advantage of her. She wants so badly to make friends, that she can put herself in unsafe circumstances.  Sarah has learning difficulties and ASD. These together make it hard for Sarah to understand social cues and expectations.  Since the problems with the police on the estate, Sarah doesn't feel comfortable going out on her own and doesn't always want her parents with her.
What is going well for the child and their family?	Sarah has an open relationship with her parents. They are able to talk openly about some of the risks in the community and make plans together to avoid these. Sarah's parents support her in her independent skills development and want her to be as independent as possible.  Sarah attends school regularly and enjoys this.
What support do they receive from family, friends, community members and other professionals?	Sarah has an older sister, who has moved out of the home and goes to University. During school breaks, she comes home and enjoys spending time with Sarah.  The local youth club provides good support to Sarah. They understand the local risks in the community and are working with Sarah to build up her independence.  The ASD Outreach service have supported Sarah with social stories to help her better understand safe and unsafe friendships. These are reinforced at home, school and youth club.  Both parents report feeling supported by their family and friends networks.
What do the child and family find difficult, challenging or stressful? What is not working well?	The problems on the estate with Sarah's peers was worrying. It was a surprise to Sarah's parents about how vulnerable she is. Since then they have supported Sarah to access the youth scheme and they know feel more confident about Sarah's social opportunities.
Any additional information that you consider to be relevant.	

Completed by:	Name: Jerry Francis Job title: EHC Co-ordinator Contact details:
Date request sent:	18/02/2017
Date advice is due: Within 6 weeks	31/03/2017
<b>Date, time and location of planning meeting:</b>	Relevant social care practitioner to attend.

**(ii) EHC needs assessment: Advice and information relating to Social Care**

Child's name	Sarah Jones
Date of birth	13/10/2003
Who has parental responsibility?	Mr David Jones and Mrs Leah Jones

**Is the child or young person known to statutory Social Care or Early Help?**

Early Help	X	Children's Social Care		Adult's Social Care	
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**Contact details for lead professional or social worker :**  
Early Help assessment completed by Mark Hines, Keyworker, when Sarah registered for the Youth Hub

**Has there been an assessment of the child and family?**

Early Help		Child and family (SW assessment)		Care Act	
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Other, please specify

**Does the child or young person have a current plan?**

Early Help		CIN		CP		LAC (s17, s20 or 31)		Short break plan		Care and Support plan	
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Other, please specify:  
No formal plan in place

**Social Care Information and Advice**

**Section D: Social care needs**

Including social care needs which relate to their SEND as well as social care needs that are not linked to the child's SEND but may be relevant

Please specify which needs were identified as a result of an assessment

**Sarah finds it difficult to maintain friendships as she cannot easily recognise social cues. This means that Sarah can be socially isolated outside of the structure of the school day.**

**In the community, Sarah can be vulnerable to negative peer influence. Due to Sarah's Autism, Sarah cannot always recognise when people are trying to take advantage of her which can put her at risk.**

**Section E: Outcomes sought for the child or young person**

Outcomes should be SMART, linked to the child's aspirations, joined up across health, education and social care.

Sarah will initiate a conversation with a peer at least once per week during afterschool club without any adult prompts by the end of term.

Sarah will engage in a shared project or activity with 2 peers each week at the youth scheme with minimal adult guidance by the end of the year.

Section H1:	Section H2	By whom, by when?
Please provide detail of provision under the CSDPA s2 related to outcomes as defined above	Please provide detail of other social care provision related to outcomes as defined above	Please specify who is responsible for arranging the provision, how often it takes place, where it takes place and how long for?
	Sarah attends the HUB Youth Club on Tuesdays and Thursdays for 2 hours after school.	The provision is based at Sarah's local youth hub, they run different groups throughout the week, including sessions for young people with ASD on Tuesdays and Thursdays.  The club runs 38 weeks per year during term time. Sarah can access up to 2 sessions a week as part of the Local Offer.  Sarah's Keyworker is Mark Hines who liaises with Mr and Mrs Jones regarding registration and provision.
Is the child or young person receiving a personal budget?		
Authorisation of the provision by:	Mark Hines, Keyworker	
Date:	March 3, 2017	

**Appendices provided with advice:**

N/A

Advice completed by	
Name:	Mark Hines
Job title:	Keyworker,
Organisation:	The HUB Youth Scheme
Date returned to EHC Co-ordinator:	March 3 <sup>rd</sup> , 2017





## About the Council for Disabled Children

The Council for Disabled Children (CDC) is the umbrella body for the disabled children's sector in England, with links to the other UK nations. CDC works to influence national policy that impacts upon disabled children and children with Special Educational Needs (SEN) and their families. The CDC Council is made up of a variety of professional, voluntary and statutory organisations, including disabled young people and parent representatives. CDC's broad based membership and extensive networks of contacts provide a unique overview of current issues. It also enables us to promote collaborative and partnership working among organisations.

CDC hosts the following networks and projects:

- IASS Network
- Independent Support
- Making Ourselves Heard
- Special Educational Consortium
- Transition Information Network



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