

Request for an Education, Health and Care Assessment

Please complete and submit electronically to sencasework@durham.gov.uk

Personal details (all fields MUST be completed)

Name of child/young person:	
Date of birth:	
Address of child/young person:	
Is this a protected address?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Is the child/young person looked after?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Is the child/young person adopted or subject to SGO or CAO?	
Name of parent/carer:	
Address if different to above:	
Parent/carer telephone number:	
Parent/carer email address (preferable):	
Current school:	

As well as this fully completed request form please also include:

The previous 2 reviewed SEN Support Plans and the current SEN Support Plan demonstrating all relevant and purposeful provision.	<input type="checkbox"/>
Up to date Costed Provision Map	<input type="checkbox"/>
Professional reports (within the last 3 years) that underpin current SEN and provision	<input type="checkbox"/>
Optional: My Story, individual timetable	<input type="checkbox"/>

Signed (referrer):		Date:	
Name of referrer:		Role of referrer:	
Signed: Head Teacher:		Date:	
Full name of Head Teacher:			

Yearly Academic Attainment			
Delete as appropriate	Current (xx/xx)	Previous Year (xx/xx)	Previous Year (xx/xx)
Read & Comp ages (if known)			
Reading (KS 1 – 2)			
Writing (KS 1 – 2)			
English (KS 3 – 5)			
Maths (All KS)			

Does the child/young person have any plans in place to support their needs?			
Individual Health Plan	Yes <input type="checkbox"/> No <input type="checkbox"/>	Intimate Care Plan	Yes <input type="checkbox"/> No <input type="checkbox"/>
Care Plan/PEP	Yes <input type="checkbox"/> No <input type="checkbox"/>	Personal Evacuation Plan	Yes <input type="checkbox"/> No <input type="checkbox"/>
Risk Management Plan	Yes <input type="checkbox"/> No <input type="checkbox"/>	Positive Handling	Yes <input type="checkbox"/> No <input type="checkbox"/>
Behaviour Management Plan	Yes <input type="checkbox"/> No <input type="checkbox"/>	Sensory Diet	Yes <input type="checkbox"/> No <input type="checkbox"/>
Other (please specify)	Yes <input type="checkbox"/> No <input type="checkbox"/>	Moving and Handling	Yes <input type="checkbox"/> No <input type="checkbox"/>

Attendance over last 3 years:	Current:	Previous year:	Previous year:
Details of fixed term, permanent exclusions or part time timetables, managed moves or alternative provision over the last 3 years			

Why is the school seeking an EHC assessment?

Information about the child
Tell us what you know about the child/YP:
Tell us about the child's/YP's strengths:

Overview of Educational Needs:
Chronology of referral/advice received and Impact.
Details of any Top Up funding the school is currently/has previously received for this child/YP
Overview of Health Needs
Overview of Care Needs

Needs:	Suggested Provision:	Frequency, Duration and Group Size:
Number specific SEN and corresponding provision		
Cognition and Learning: 1.	1a.	
Communication and interaction:		
Social Emotional and Mental Health:		
Physical and Sensory:		

Desired outcomes (usually longer term)
1.
2.
3.
4.
5.

Parent/Carer/Child/YP Views

If the child/yp can provide views verbally or by other means, please record their views. If not, please record the views of someone who can advocate for the child/yp e.g. parents, carers, social worker

What are the child's aspirations for now and the future?
Child's/YP's views: Now: Future:
Parent/carer views: Now: Future:
Things the child is good at, interested in or enjoys: ('My Story' could be attached in lieu)
Child's/ YP's views:
Parent/carer views:
Things that the child does not like or finds more difficult: My Story' could be attached in lieu)
Child's/ YP's views:
Parent/carer views:

As parents/carers what do you hope an EHCP Assessment will bring?

Privacy Notice

Durham County Council complies with all relevant statutory obligations. Personal information processed by the Council will be handled in accordance with the Council's privacy statement, which can be accessed here <http://www.durham.gov.uk/dataprivacy>

The SEND privacy notice provides more specific information on the data collected and how it is handled, a copy of which can be accessed here <http://www.durham.gov.uk/media/24795/Privacy-notice-special-educational-needs-support/pdf/PrivacyNotice-SpecialEducationalNeedsSupport.pdf>

If you have any concerns about how your data is handled, please contact either the Data Protection Officer at DPO@durham.gov.uk or the Information Commissioner's Office casework@ico.org.uk.

I/we agree to the request of an EHC assessment:		Date:	
--	--	--------------	--

**Signed:
(parent/carer):**

**Signed (young
person):**