

# Developing Outcomes in Education, Health and Care Plans

This document has been developed by the Delivering Better Outcomes Together consortium<sup>i</sup>, as a resource to support the development of outcomes in Education Health and Care Plans (EHC plans).

It includes the following sections:

1. [Key things to consider when developing outcomes](#)
2. [What are aspirations, needs, outcomes and provision in relation to an EHC plan](#)
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# 1. Key things to consider when developing outcomes:

<p><b>Think about the GOLDEN THREAD:</b></p>	<p><b>Outcomes should be HOLISTIC:</b></p>	<p><b>Make outcomes SMART<sup>ii</sup>:</b></p>
<ul style="list-style-type: none"> <li>✓ There should be a golden thread directly through the aspirations, needs, outcomes and provision.</li> <li>✓ This can be achieved by thinking about outcomes as steps on the journey towards the aspirations.</li> </ul>	<ul style="list-style-type: none"> <li>✓ This will mean that often a multi-agency approach will be required to support the child or young person to achieve their outcomes.</li> <li>✓ The provision section should clearly set out what each agency is doing to achieve the outcome.</li> </ul>	<ul style="list-style-type: none"> <li>✓ If they're SMART, the purpose of the outcome will be clear, and everyone will know when the outcome should be achieved and when it has actually been achieved.</li> </ul>
<p><b>Outcomes must be PERSON-CENTRED:</b></p>	<p><b>OUTCOMES are NOT PROVISION:</b></p>	<p><b>Supported by CULTURAL CHANGE:</b></p>
<ul style="list-style-type: none"> <li>✓ They should be specific to the child or young person and expressed from a personal perspective, not a service one.</li> </ul>	<ul style="list-style-type: none"> <li>✓ Don't mix outcomes and provision. Provision is what must be provided to meet a child or young person's needs and enable the outcomes to be achieved.</li> </ul>	<ul style="list-style-type: none"> <li>✓ Changes in ways of working, relationships and different conversations are needed.</li> <li>✓ Provide advice, training and coaching that support the development of outcomes.</li> <li>✓ Develop guidance notes and tools that help staff develop clear, person-centred approaches which lead to positive outcomes.</li> <li>✓ Support the child or young person and their family to be central to the development of the outcome.</li> <li>✓ The outcome must be shared (by the child or young person, their family and professionals). To do this they need to be developed using a person-centred approach.</li> </ul>
<p><b>Make use of existing RESOURCES:</b></p>	<p><b>Outcomes should support ASPIRATIONS and set HIGH EXPECTATIONS.</b></p>	
<ul style="list-style-type: none"> <li>✓ Resources and materials should be shared to support the development of outcomes. Start with the SEND Code of Practice (chapter 9).</li> <li>✓ Make use of other resources developed nationally and locally (section 4 of this document highlights some examples).</li> </ul>	<ul style="list-style-type: none"> <li>✓ In order to develop aspirations for life children, young people and their families need opportunities to find out what is possible and what type of support would help them achieve their aspirations. This includes learning from young people and families about what has worked for them.</li> <li>✓ They should build on what is working well and address what is not working well.</li> </ul>	

## 2. What are aspirations, needs, outcomes and provision in relation to an EHC plan<sup>iii</sup>

<b>Aspirations</b> <b>(EHC Plan: Section A)</b>	<b>Needs</b> <b>(EHC Plan: Sections B, C &amp; D)</b>	<b>Outcomes</b> <b>(EHC plan: Section E)</b>	<b>Provision</b> <b>(EHC Plan: Sections F, G, H1 &amp; H2)</b>
<ul style="list-style-type: none"> <li>• Concerning hoped-for positive outcomes in life. (Wikipedia)</li> <li>• Aspirations for: paid employment; independent living; community participation (CoP page 164)</li> <li>• Long term aspirations are not outcomes in themselves... a local authority cannot be held accountable for the aspirations of a child or young person (CoP page 163)</li> <li>• Local Authorities must ensure that the EHC plan review at Year 9... includes a focus on preparing for adulthood... Planning must centre around the individual and explore the child or young person's aspirations and abilities, what they want to be able to do when they leave post-16 education or training, and the support they need to achieve their ambition (CoP page 125)</li> </ul>	<ul style="list-style-type: none"> <li>• A difference or gap - gives purpose and direction to behaviour (Maslow) "A gap that matters"</li> <li>• A child has special educational needs if they have a learning difficulty or disability, which calls for special educational provision to be made for him or her (CoP page 15)</li> <li>• EHC plans must specify the special educational provision to meet each of the child's special educational needs (CoP page 164)</li> <li>• EHC plans must also specify any health or social care needs a child has</li> </ul>	<ul style="list-style-type: none"> <li>• The benefit or difference made to an individual as a result of an intervention. It should be personal and not expressed from a service perspective (CoP page 163)</li> <li>• What is important to them, and for them (CoP page 163)</li> <li>• SMART: Specific, Measurable, Achievable, Realistic and Time Bound (CoP page 163)</li> <li>• Set out what needs to be achieved by the end of a phase or stage of education. Short term targets set outside the EHC plan (CoP page 164)</li> <li>• An outcome for a child of secondary age might be, for example, to make sufficient progress or achieve a qualification to enable him or her to attend a specific course at college (CoP page 163)</li> <li>• From Year 9 onwards, the nature of outcomes will reflect the need to ensure young people are focused on preparing for adulthood (employment, independent living, community participation and health and wellbeing (CoP page 163)</li> </ul>	<ul style="list-style-type: none"> <li>• Provision that is additional to or different from that made generally for other children of the same age (CoP page 16)</li> <li>• Detailed, specific and normally quantified, in terms of type, hours and frequency of support and level of expertise, including where this support is secured through a personal budget (CoP page 166)</li> <li>• The LA must set out in its Local Offer an authority wide description of the special educational, training, health and social care provision it expects to be available in its area (CoP page 68)</li> <li>• Schools must inform parents when they are making special educational provision for a child (CoP page 92)</li> </ul>

### 3. Illustrative examples of aspirations, needs, outcomes and provision for two children and two young people

#### Example 1: Amil

<b>Aspirations</b> (EHC Plan: Section A)	<b>Needs</b> (EHC Plan: Sections B, C & D)	<b>Outcomes</b> (EHC plan: Section E)	<b>Provision</b> (EHC Plan: Sections F, G, H1 & H2)
<ul style="list-style-type: none"> <li>• At age 11, Amil says that he wants to have more friends.</li> </ul>	<ul style="list-style-type: none"> <li>• Amil needs to develop his interpersonal skills.</li> <li>• Amil has difficulty communicating his feelings and can be verbally abusive when frustrated.</li> </ul>	<p>By the age of 14, Amil will:</p> <ul style="list-style-type: none"> <li>• Be able to work constructively on shared activities with two other students for 30 minutes without adult support.</li> <li>• Have a small group of friends who he plays with at break times and take part in school and after-school activities at least once a week.</li> <li>• Be able to choose a friend to attend his annual review and who will help him prepare for it.</li> </ul>	<p><b><u>SEN Provision</u></b></p> <ul style="list-style-type: none"> <li>• A daily, 15 minute, small group (up to three students) session focussing on turn taking games led by a teaching assistant.</li> <li>• The teacher will establish a circle of friends who have similar interests; they will play at break times and help him prepare for his annual reviews.</li> <li>• At the start of each half-term, Amil’s form teacher will discuss with him the range of extra-curricular activities available and encourage him to participate.</li> <li>• A dedicated session once a week, for 15 minutes, with a trusted adult as part of his anger management programme.</li> </ul>

## Example 2: Bob

Aspirations (EHC Plan: Section A)	Needs (EHC Plan: Sections B, C & D)	Outcomes (EHC plan: Section E)	Provision (EHC Plan: Sections F, G, H1 & H2)
<ul style="list-style-type: none"> <li>Bob (aged 8) wants to be better at reading and be able to “read stuff”.</li> </ul>	<ul style="list-style-type: none"> <li>Bob has significant literacy difficulties; in particular, a significant weakness of his phonic skills.</li> </ul>	<p>By the age of 11, Bob will be able to read a story he has written to a friend or to the class fluently.</p> <ul style="list-style-type: none"> <li>This story will include thirty 3-5 letter words with 2 and 3 consonant combinations.</li> </ul>	<p><b><u>SEN Provision</u></b></p> <ul style="list-style-type: none"> <li>A phonics programme, delivered in a small group, 4 times a week, for 30 minutes each time.</li> <li>Teacher to co-ordinate individual support from a teacher assistant to monitor progress at least every 5 minutes and provide prompts as needed.</li> <li>Teacher will identify what Bob is interested in and use this information to help him learn to read, such as reading materials based on his interests.</li> <li>Teacher to work with Bob’s family to develop a home reading programme.</li> </ul>

Think about the ‘Golden thread’ throughout



## Example 3: Rebekah

<b>Aspirations</b> (EHC Plan: Section A)	<b>Needs</b> (EHC Plan: Sections B, C & D)	<b>Outcomes</b> (EHC plan: Section E)	<b>Provision</b> (EHC Plan: Sections F, G, H1 & H2)
<ul style="list-style-type: none"> <li>• Rebekah (aged 17) wants to get a paid job in a hairdressers when she leaves education.</li> </ul>	<ul style="list-style-type: none"> <li>• Rebekah has severe learning disabilities, which affect all areas of her learning, including literacy and numeracy.</li> <li>• She has receptive and expressive communication difficulties and struggles to understand two sentence instructions. Strangers also find it difficult to understand what she is saying.</li> <li>• Rebekah has a left hemiplegia and has difficulty with fine motor skills.</li> </ul>	<p>By the time she is 18, Rebekah will:</p> <ul style="list-style-type: none"> <li>• Have had experience of work, including at a local hairdressers.</li> <li>• Be able to read everyday signs in the community and key words in the workplace.</li> </ul>	<p><b><u>SEN Provision</u></b></p> <ul style="list-style-type: none"> <li>• Supported internship programme which includes: independent travel training, functional literacy and numeracy and work experience at a local hairdressers.</li> <li>• An allocated job coach providing Rebekah with support and advice for a vocation profile, on the job training, and Access to Work.</li> <li>• Twice termly, a SALT will advise staff on a communication passport for Rebekah that will transfer with her to college.</li> </ul> <p><b><u>Health Provision</u></b></p> <ul style="list-style-type: none"> <li>• Once a term, the Occupational Therapist will advise the college, Rebekah and her family about how to manage her hemiplegia and increase her function.</li> </ul>

## Example 4: Laura

<b>Aspirations</b> (EHC Plan: Section A)	<b>Needs</b> (EHC Plan: Sections B, C & D)	<b>Outcomes</b> (EHC plan: Section E)	<b>Provision</b> (EHC Plan: Sections F, G, H1 & H2)
<ul style="list-style-type: none"> <li>• Laura (aged 16) wants to be as fit and healthy as she can be.</li> </ul>	<ul style="list-style-type: none"> <li>• Laura has a metabolic disorder which leads to weight gain.</li> <li>• She has a severe learning disability, which affects her ability to learn new tasks, including independent living skills.</li> </ul>	<p>By the end of year 13, Laura will be:</p> <ul style="list-style-type: none"> <li>• Eating three balanced meals a day.</li> <li>• Able to write a shopping list and go shopping, with support, to buy healthy options.</li> <li>• Taking exercise at least three times a week (walking, swimming and going to the gym).</li> <li>• Able to use her health plan to remind her about her medicines, her diet and exercise.</li> <li>• Attending regular health checks on her own, with her GP or nurse, to review her health plan. Laura will attend these appointments without her mum.</li> </ul>	<p><b><u>SEN Provision</u></b></p> <ul style="list-style-type: none"> <li>• Two year personalised study programme which includes opportunities to learn about healthy eating, the importance of exercise and being aware of health needs.</li> </ul> <p><b><u>Health Provision</u></b></p> <ul style="list-style-type: none"> <li>• Physiotherapist and Speech and Language Therapist to provide termly advice on Laura’s study programme, which includes the dietary and exercise advice that is safe and appropriate for Laura.</li> <li>• Community nurse to liaise with GP to arrange annual health check and develop a health action plan. This includes how Laura communicates and how health professionals need to communicate with her.</li> </ul>

## 4.Resources to use and refer to:

Resource	Where to find it
SEND Code of Practice (in particular chapter 9)	<a href="https://www.gov.uk/government/publications/send-code-of-practice-0-to-25">https://www.gov.uk/government/publications/send-code-of-practice-0-to-25</a>
SEND Pathfinder Information Pack , 0 – 25 Coordinated Assessment Process and EHC Plan Pack (section 3)	<a href="http://www.sendpathfinder.co.uk/coordinated-assessment-process">http://www.sendpathfinder.co.uk/coordinated-assessment-process</a>
EHC Outcomes Pyramid, Council for Disabled Children	<a href="http://www.councilfordisabledchildren.org.uk/media/724423/ehc-pyramid.pdf">http://www.councilfordisabledchildren.org.uk/media/724423/ehc-pyramid.pdf</a>
Online training, Council for Disabled Children	<a href="http://training.councilfordisabledchildren.org.uk/course/view.php?id=7">http://training.councilfordisabledchildren.org.uk/course/view.php?id=7</a>
Portsmouth’s ‘Evidence Writers Pack’ to support the development of outcome focused advice for EHC plans	<a href="http://www.sendpathfinder.co.uk/coordinated-assessment-process">http://www.sendpathfinder.co.uk/coordinated-assessment-process</a> Appendix 1
SE7’s ‘Thinking about writing good outcomes’ to support the development of outcome focused EHC plans	<a href="http://www.sendpathfinder.co.uk/coordinated-assessment-process">http://www.sendpathfinder.co.uk/coordinated-assessment-process</a> Appendix 4 and 5
Portsmouth Person Centred Annual Review forms and guide	<a href="http://www.sendpathfinder.co.uk/coordinated-assessment-process">http://www.sendpathfinder.co.uk/coordinated-assessment-process</a> Appendix 3
A Step by Step Guide to EHC Plans, Council for Disabled Children	<a href="http://www.councilfordisabledchildren.org.uk/resources/a-step-by-step-guide-to-ehc-plans">http://www.councilfordisabledchildren.org.uk/resources/a-step-by-step-guide-to-ehc-plans</a>

<sup>i</sup> The Delivering Better Outcomes Together consortium includes [Mott MacDonald](#), the [Council for Disabled Children](#) and the [National Development Team for Inclusion](#).

<sup>ii</sup> ‘Outcomes in EHC plans should be SMART (specific, measurable, achievable, realistic, time-bound). See the section on ‘Outcomes’ (paragraph 9.64 onwards) for detailed guidance on outcomes’. [SEND code of practice: 0 to 25 years](#), 9.61

<sup>iii</sup> Descriptions paraphrase the SEND code of practice rather than being direct quotes. [SEND code of practice: 0 to 25 years](#)