What is Provision in an EHC Plan?

In an EHC Plan there are 3 sections (F, G and H) which explain ‘provision’ - the recommended support and strategies which aim to help the child or young people make progress in their learning and become confident, independent individuals.

There should be recommended provision for each of the child’s needs outlined in sections B, C and D and it should be clear how the provision will help the child achieve the outcomes in section E of the EHC Plan.

The provision in section F of the EHC Plan is especially important. This is the support needed to help the child to learn and a Local Authority has the legal duty to ensure that the special educational provision specified in section F is secured.

The Children and Families Act says:

*Health care provision or social care provision which educates or trains a child or young person is to be treated as special educational provision.*

Section 21 (5)

This includes therapies such as speech and language therapy, occupational therapy or physiotherapy or the services provided by CAMHS (Child Adolescent Mental Health Service) which are needed for education or training purposes. These should be in section F.

The LA might arrange that these are delivered by the local health care partner but if they are not able to do so, the legal duty remains with the LA to arrange these services – possibly from an independent therapist.

The SEND code of practice says that the provision in section F:

*must* be detailed and specific and should normally be quantified, for example, in terms of the type, hours and frequency of support and level of expertise.

Section 9.69

This is partly so that every teacher, assistant, therapist and others working with the child knows precisely what they should be doing to help him or her. Also, if it is not specific, it is hard to measure whether it has been achieved and whether it has made a difference to a child’s life. It may be difficult to check it is happening and to enforce it.
What is Provision in an EHC Plan?

**Provision which is not specific:** Molly would benefit from access to therapy throughout the year.

What does this mean? Every week throughout the year? Once a term throughout the year? Different people working with Molly might interpret this differently. Who will provide this therapy? It would also be impossible to enforce this through a court.

**Provision which is specific:** Molly will receive 45 minutes direct 1:1 speech and language therapy once a week from a qualified therapist.

The therapist knows exactly how often he/she will work with Molly and for how long. It will be easy to check whether this is happening and to enforce it if it is not. It will also be easier to assess the impact.

**Provision which is not specific:** Ben will have weekly support with developing friendships.

What form will this support take? Who will provide it? Does ‘weekly’ mean once a week? If it is a social skills programme which will help Ben, how long will each session last for?

**Provision which is specific:** Ben will attend a nurture group for one hour, three times a week, delivered by a Teaching Assistant.

Examples of ‘woolly’ wording which is not specific:

‘access to’ ‘as required/ as needed’ ‘opportunities for’ ‘adults’ ‘support with’ ‘(child) will decide…’

The SEND Code says that health and social care provision in sections G and H also ‘should be detailed and specific’ (9.69). If you feel that some provision in your child’s plan is not clear and specific, talk first to the Family Services Coordinator who is responsible for the plan.

When a child is beyond year 9, the EHC plan **must** include ‘provision to assist the child or young person in preparation for adulthood and independent living.’ SEND Regulation 12 (3)