

APPENDIX 1

Provision Template

«FORENAME» «SURNAME» «BASE NAME»

NC Year Gp	«NCY»		
Where is the safest place for your child?	«Where_is_the_safest_place_for_the_child»		
Has school spoken to parent/carer to agree this plan?			
«Was_this_discussed_with_parent_YN»			
Have the views of ch/yp been sought			
«Was_this_discussed_with_child_or_young_p»			
What will the provision look like Initially? (May June 2020)			
Home:			
<i>A description of the distance learning resources offered to families(with an emphasis on provision as set out in the EHCP)</i>			
«F15»			
School:			
<i>Which elements of the EHCP can the school safely offer onsite as part of this agreement</i>			
«F16»			
Any Health or Social Care provision that requires flagging to services			
Health (scale 1-5 where 5 is high and 1 is low, 0 for none)			
«F17»			
Care (scale 1-5 where 5 is high and 1 is low, 0 for none)			
«F18»			
FROM APRIL 2020	<input type="checkbox"/>		<input type="checkbox"/>
They do not need irreplaceable care or health provision		They are able to follow hygiene and social distancing practices at home	
The services they most need can be moved from their educational setting into their home		Due to their health vulnerabilities, they are safer in the more stringent social distancing environment of their home	
Their parents can meet their needs full-time		Needs can be safely met at home	

In relation to Section F of the EHCP what reasonable endeavours are planned to be able to deliver (where possible).	
EHCP Provision	Reasonable Endeavour description of provision

In relation to Section G (Health provision) what reasonable endeavours are planned to be able to deliver (where possible)	
EHCP Provision	Reasonable Endeavour description of provision

In relation to Section H1/H2 (Social Care provision) what reasonable endeavours are planned to be able to deliver (where possible)	
EHCP Provision	Reasonable Endeavour description of provision

Date this plan was discussed with Parent/Carer	
Date this plan was discussed with Child/Young Person	
Person completing this form and date of completion	

Signed **Dated:**
Insert name and designation of decision taker