

York SEND EHCP Quality Assurance Framework Document

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York EHCP Quality Assurance Framework

A City for All – Building Brighter Futures

Our ambition in York is that every child and young person grows up feeling safe, known, and that they matter. This commitment sits at the heart of our Education, Health and Care Plan (EHCP) Quality Assurance (QA) Framework.

Our Vision

York's Inclusion and Belonging Strategy sets out our shared vision for a city that truly works for all children and young people. It is built on a clear ambition: **that every child and young person in York feels safe, is heard, and knows they matter.**

This framework reflects that vision and ensures that all EHCPs are developed, reviewed, and delivered to a consistently high standard across our partnership.

A Joined-Up Approach

This is a joint framework, developed and delivered across our education, health, and social care partnership, working closely with children, and young people. It reflects our collective responsibility to work together to achieve the best possible outcomes for children and young people with special educational needs and disabilities.

Our Practice Model

At the centre of our work is the child or young person. Our practice model guides how we support them, ensuring their voice is central and their outcomes drive all planning and decision-making.

Our work is underpinned by the principles of:

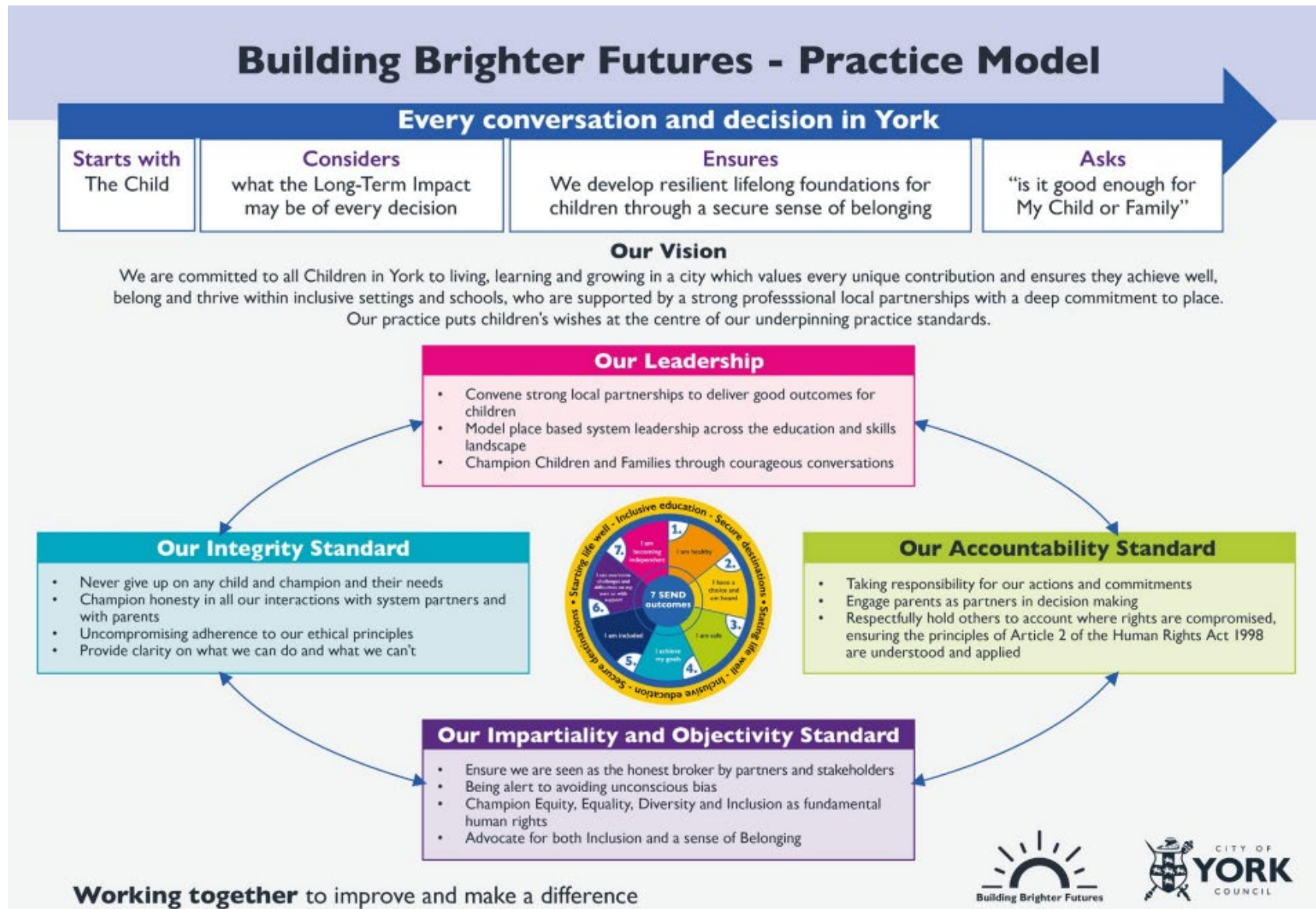
Leadership, integrity, accountability, impartiality, and objectivity.

We measure the impact of our work through what matters most to children and young people:

1. **I am healthy**
2. **I have choice and I am heard**
3. **I am safe**
4. **I achieve my goals**
5. **I am included**
6. **I can overcome challenges and difficulties**
7. **I am becoming independent**

These outcomes form the foundation of our EHCP QA Framework and ensure that all plans are meaningful, person-centred, and focused on improving outcomes.





Purpose of the York EHCP QA Framework

York is committed to improving outcomes for children and young people with SEND. The EHCP QA Framework ensures plans are person centred, consistent and legally compliant, supporting high quality decision making and building trust with families across education, health and care.

The framework supports York's wider SEND improvement work by strengthening co production, improving multi agency practice, and raising the quality of annual reviews, transitions and Preparation for Adulthood planning, ensuring annual reviews clearly evidence the impact of the EHCP on CYP outcomes and progress.

It provides a shared understanding of "what good looks like" and supports teams to write clear, evidence based EHCPs focused on meaningful outcomes, consistent practice and continual improvement.

York's EHCP Quality Standards

1. **Impactful annual reviews** – Reviews clearly evidence progress, capture the voice of CYP and families, and demonstrate the impact of the EHCP.
2. **Person centred and aspiration led** – Clear links between aspirations, needs, outcomes and provision.
3. **Voice driven and co-produced** – Views, wishes and feelings shape decisions and support.
4. **Clear and accessible** – Plain, family-friendly language throughout.
5. **SMART outcomes** – Specific, measurable outcomes linked to aspirations.
6. **Specific needs and precise provision** – Clear needs with detailed, quantified support.
7. **Strong partnership and continuous improvement** – Joined-up working, timely reviews and Preparation for Adulthood from Year 9 onwards.

What Good Looks Like for Families

This QA Framework has been co-produced with partners, families and children and young people. It sets out how we understand and improve quality across the Education, Health and Care (EHC) needs assessment process, EHCPs and annual reviews. It reflects a shared commitment to timely, high-quality and person-centred practice, informed by learning, data and family feedback.

The framework is grounded in families lived experiences of what makes an EHCP effective. These insights shape our quality standards and inform continuous improvement across education, health and care.

1. Children's Voices at the Centre

Families tell us good practice means:

- Children and young people are supported to understand and contribute to their EHCP
- Their views are reflected throughout the plan, not confined to one section
- Information is shared in accessible ways, with clear summaries
- Annual reviews are well planned, with time and support to prepare
- Preparation for Adulthood aspirations and future pathways are clearly included

2. Partnership with Families

Families value:

- Genuine collaboration and feeling listened to
- Early sharing of draft plans, with time for meaningful discussion
- Joined-up working across caseworkers, schools, professionals and families
- Clear, timely and respectful communication
- Support to understand processes without needing specialist knowledge

3. Clear, Useful and Honest Information

Good practice includes:

- Clear, plain language EHCPs that explain provision in practical terms
- Up-to-date information on services involved
- Simple explanations of processes, timelines and next steps
- Clear routes for contact, questions and support

4. Support That Works in Practice

Families want support that:

- Is consistent, reliable and stable over time
- Keeps children and young people safe and included
- Is well coordinated across education and health
- Is delivered by staff who understand the EHCP
- Focuses on real wellbeing, progress and outcomes

Quality assurance improved performance

Our approach to quality assurance is based on a continuous cycle of activity, designed to improve performance over time, and consequently, the experiences of children and young people with SEND and their families. This includes:

- Set practice standards establishing clear standards for practice in SEND that set out what 'good' looks like and expectations of professionals.
- Undertaking quality assurance performance activity and analysing what we have learned.
- Identify actions to ensure that learning is impactful.
- Collaborate with colleagues to ensure that learning is translated into improved practice.
- Seek evidence that practice continues to improve.
- Ensuring that the impact of the agreed changes on practice is tracked prior to the quality assurance cycle starting again.

Learning from Practice and Quality Assurance

In York, learning from practice is central to our commitment to continuous improvement. Our Quality Assurance Framework sets out how we monitor, evaluate and reflect on practice to ensure children are safe, families are effectively supported, standards are upheld, and positive outcomes are achieved.

Quality assurance goes beyond auditing. It focuses on how information, data and feedback are used to strengthen practice, understand impact and drive improvement. Our QA tools and data provide a robust understanding of quality, helping us identify strengths and areas for development through:

- Listening to children, young people, families and professionals
- Reflective practice, appreciative inquiry and free narrative
- Monitoring and analysing performance data
- Co-production with families, professionals and settings
- Learning from audits and focused practice conversations

Our QA activity draws on both qualitative and quantitative information and may focus on whole-service themes, specific cohorts or targeted areas of practice.



Responsibility for Quality Assurance

Quality assurance is a shared responsibility across the local area partnership, including education, health and social care, with support from Parent Carer Forum (PCF) York and York SENDIASS. All levels of the system play a role, from individual professionals to senior leaders.

Individual Responsibilities

All professionals contributing to EHC needs assessments, EHCPs and annual reviews are responsible for the quality of their work. This includes:

- Working in line with agreed practice guidance and the SEND legislative framework
- Seeking support and training where standards are not being met
- Responding to feedback and making sustained improvements

The SEND Quality Assurance Officer supports reflection, professional curiosity and consistency across SEND teams. This includes structured practice learning conversations, sharing good practice and escalating concerns where needed.

Managers' Responsibilities

Managers are responsible for ensuring staff understand what quality practice looks like and are supported to improve. This includes:

- Monitoring quality and tracking the impact of improvement actions
- Ensuring quality checks are in place, including draft EHCP review
- Using supervision, performance management and team learning to address quality
- Providing training where needed

Health and Social Care Responsibilities

Health and Social Care managers ensure timely, high-quality advice in line with agreed standards. The Designated Clinical Officer and Designated Social Care Officer play a key role in monitoring and assuring quality.

Statutory Requirements

All plans must comply with the Children and Families Act (2014) and SEND Code of Practice (2015). Plans must:

- Clearly state whether they are draft, proposed or final
- Include local authority agreement where required
- Complete all statutory sections, explaining where needs are not identified
- Meet statutory timescales

Plans must reflect the core principles of the legislation, with children, young people and families central to decision-making. Strengths, needs and aspirations must be clear, support coordinated across education, health and care, and responsibilities for provision explicit.

Framework for completing the Audits

Quality Assurance toolkit

Activity	Description	Occurrence
Everyday activity	Daily practice includes peer QA support, with EHCP writers and casework officers using agreed guideline documents to ensure consistency and quality in plans, as well as undertaking quality assurance of annual reviews to evidence the impact of the EHCP on CYP outcomes and progress.	Daily
Single agency dip sample	SEN team managers to dip sample twelve plans a month including annual reviews.	Monthly
Single Agency Audit	Four audits per month in each of the following teams: • Social care hub – led by DSCO. • Health audit – led by DCO. • Educational Psychology (EP) Service – led by a Senior EP	Quarterly

Activity	Description	Occurrence
Multi-agency thematic Audit of EHC plans	Aimed to ensure that EHCPs impact on a CYP's outcomes, these are intensive, focused, multi-agency 'deep dive' into a small number of CYP's EHCP and appendices with an agreed hypothesis to investigate.	Half termly
Quality Assurance of EHCP	Aimed to evaluate the City's EHCPs for compliance and quality, 30 plans are quality assured, in pairs, against an agreed framework. An agreed action plan is formulated following the evaluation with any identified areas of concern re-evaluated in subsequent QAs.	Termly

Additional quality assurance activity

Level	Quality Assurance Activity	Reporting	Frequency
Team or service	Management quality assurance of individual teamwork	Individual supervisions, identifying key areas of strength and development reporting back to EHC quality group	Monthly
SEND EHC audits	Single team audits Multi agency audits themed audits	EHC quality group	Half termly
Ambition and Assurance Board	All SEND audit activity undertaken in previous months	Statutory performance data timeliness of EHC plans Summary of audit themes	Quarterly
SEND and Alternative Provision Board	All SEND audit activity undertaken in previous months	Statutory performance data timeliness of EHC plans Summary of audit themes	Half termly

Alongside routine audit activity, York undertakes quality assurance through a range of local area approaches to understand effectiveness and drive improvement.

SEND Self-Evaluation (SEF)

The local area partnership completes a SEND Self-Evaluation twice a year. This assesses the impact of local area arrangements on children, young people and families and informs continuous improvement. Findings contribute to SEND inspection activity and are discussed with Ofsted through Annual Engagement Meetings focused on local area arrangements.

Performance Data and Evaluation

Across the partnership, performance data and dashboards are used to understand demand, workflow, quality and timeliness. Data is reviewed at team, partnership board and strategic levels and takes an outcomes-based approach, asking:

- What was it like for you?
- Did we make a difference?

This supports evaluation of what is working well and where improvement is needed.

Governance

Audit and quality assurance activity is overseen through SEND improvement groups. Monitoring reports to the EHC Plan Quality Group, the SEND and AP Board and the Ambition and Assurance Board on a half-termly basis.

Complaints and Compliments

Complaints and compliments are analysed as part of quality assurance activity to identify themes and strengthen understanding of family experience. Regular reports are provided by the Complaints Team and reviewed within the Education and Skills Directorate to agree improvement actions. Positive feedback is also used to recognise good practice and celebrate impact and outcomes for children and young people.

What Words and Terms Mean (glossary)

Aspiration: Something a child or young person wants for their future, or something their family hopes they will achieve.

Aspirational: Ambitious and focused on what is possible for the child or young person.

Framework: A document that explains how we work and what we expect.

Holistic: Looking at the whole child or young person, not just one part of their life.

Local Authority (LA): The local council responsible for education, health and care planning.

Outcomes: Goals a child or young person is working towards, based on their needs, interests, wishes and ambitions.

Person-centred: Focused on the child or young person, their voice, their strengths and what matters to them.

Provision: The support, help or intervention a child or young person needs.

Quality Assurance (QA): Checking that the quality of EHCPs and reviews is consistent and meets our standards.

Ambition and Assurance Board: York's strategic group that oversees SEND improvement; checks progress and ensures accountability across the system.

SEND and Alternative Provision Partnership: A multi-agency group bringing together education, health, social care and partners to improve support for children and young people with SEND.

Multi-agency: Different services and professionals working together to support a child or young person.

Single-agency: Work carried out by one service alone (for example, education, health or social care) when the responsibility sits with that service.

What the Letters Stand For

EHC: Education, Health and Care

EHCP: Education, Health and Care Plan

PFA: Preparation for adulthood

PCF: Parent carer forum

SEND: Special Educational Needs and Disability

SENDIASS: Special Educational Needs and Disabilities Information, Advice and Support Service

SMART: Specific, Measurable, Achievable, Realistic, Time-bound

Appendix 1: EHCP Quality Review Tool

EHCP Dip-Sample Quality Review Tool

Audit question	Yes	No	Partially
Voice: Does the plan clearly and meaningfully reflect the child or young person's voice throughout?			
Needs: Do the identified needs form a clear, complete and coherent picture across education, health and care?			
Outcomes: Do the outcomes make sense in relation to the needs, and do they set clear, measurable expectations for progress?			
Provision: Does the provision fully and specifically address the outcomes and needs, showing what will be delivered, how often, by whom and in what setting?			

Audit question	Yes	No	Partially
Preparation for adulthood/ Transition: Does the plan clearly identify and support the young person's preparing for adulthood and transition needs, including aspirations and support relating to employment, independent living, community participation and health?			
Accessibility: Is the plan accessible, well-organised and easy to understand, with clear language, correct grammar, consistent layout and appropriate accessible formats?			

Appendix 2: Multi- agency audit tool

Audit question	(1-5)	Strengths	Development
Section A: To what extent does Section A clearly show the child or young person's own views, interests, and aspirations, along with their parent/ carer's perspective, in a way that is personal, specific and accurately reflects their lived experience?			
Section B: To what extent does Section B provide a clear, complete and balanced description of the child or young person's strengths and needs across all relevant areas of development, with needs clearly linked to the provision required in Section F?			
Section C: To what extent does Section C clearly and accurately describe the child or young person's health SEND needs, including how these needs affect their daily life and functionality of learning?			
Section D: To what extent does Section D clearly and accurately describe the child or young person's social care needs, including how these needs affect their daily life and wellbeing?			

Audit question	(1-5)	Strengths	Development
Section E: To what extent does Section E set out clear, specific and measurable outcomes that reflect the child or young person's needs and aspirations?			
Section F: To what extent does Section F clearly describe the specific support required including what will be provided, how often, by whom, and in what setting and show a clear link to the needs identified in Sections B, C and D?			
PFA: To what extent does the PFA section clearly identify and support the young person's preparing for adulthood needs across employment, independent living, community participation and health?			
Section G: To what extent does Section G clearly set out the health provision required, including what will be provided, how often, by whom, and in what setting, and does it link clearly to the health needs in Section C?			

Audit question	(1-5)	Strengths	Development
Section H1: To what extent does Section H1 clearly and specifically set out the social care provision required under the Chronically Sick and Disabled Persons Act 1970, including what will be provided, how often, by whom and in what setting, and is this provision clearly linked to the needs identified in Section D?			
Section H2: To what extent does Section H2 clearly describe the non-educational social care provision required, including what will be provided, how often, by whom, and in what setting, and does it link clearly to the needs identified in Section D?			
Section I: To what extent does Section I clearly name the educational setting that will meet the child or young person's needs, and is this placement appropriate and consistent with the provision set out in the plan?			
Section J: To what extent does Section J clearly set out the personal budget arrangements, including what it covers, how it will be used, and how it links to the provision in the plan?			

Audit question	(1-5)	Strengths	Development
Section K: To what extent does Section K clearly list all the advice and reports used to create the EHCP, including accurate titles, authors and dates, and is the information complete, relevant and easy to follow?			

Appendix 3: Quality Assurance Scale (1–5)

A clear, developmental framework for evaluating EHCP quality

5: Strong

High-quality work that fully meets expectations. Information is clear, specific and well-evidenced, with strong links between needs, outcomes and provision. Only minor refinements would enhance it further.

4: Secure

Good quality with many strong elements. The section is mostly clear, coherent and well-connected, though a few areas would benefit from greater detail or precision.

3: Developing

Some strengths are evident, but there are noticeable gaps. Key information is present but may be unclear, overly broad or weakly linked to needs, outcomes or provision. Further development is required.

2: Emerging

Significant improvement is needed. Important elements are missing, unclear or poorly connected. The section does not yet meet expected standards for clarity, specificity or the golden thread.

1: Not Evident

The required information is largely absent or unusable. The section does not reflect statutory expectations and does not yet support effective planning.

Our Approach

This scoring scale is designed to support learning, reflection and continuous improvement. This model will help identify what is working well and what can be strengthened. By using this framework consistently, we ensure every child or young person receives a high-quality, meaningful EHCP that clearly reflects their needs, aspirations and the support required.

Appendix 4: Guidance – Writing High-Quality EHCPs

This guidance is based on the SEND Code of Practice (2015) and reflects York's approach to producing clear, person-centred and legally robust Education, Health and Care Plans.

Formatting

- Calibri, size 12 (in line with York EHCP template formatting)
- Single line spacing
- Text justified
- Child or young person's name and date of birth in the header and footer

Section A: Views and Personal Information

- Use a consistent tense throughout
- If someone supported the child or young person to share their views, explain who and how
- Include the child or young person's story, what matters to them, their achievements and the people who are important in their life
- Consider how the child or young person would feel reading this

- Ensure the section is balanced, strengths-based and written in accessible language

Section B: Strengths and Needs

- Read all advice carefully and place information in the correct section
- Break long statements into strengths and needs where appropriate
- Group similar needs together (e.g., communication, sensory, emotional regulation)
- Avoid jargon and unexplained acronyms
- Do not list diagnoses without explaining their impact on the child or young person

Strengths

- Describe what the child or young person can already do
- Include attainment levels or EY/P16 equivalents
- Include relevant developmental information such as independence and self-help skills
- Recognise individual strengths, including neurodivergent strengths
- Ensure strengths are meaningful and relevant

Needs

- Needs must be clear, specific and not repeated
- Do not include provision in this section
- Needs must relate to the child or young person's SEND
- Consider whether behaviours are difficulties for the child or for the adults around them
- Avoid judgemental or speculative language
- Use factual, descriptive wording

Section C: Health Needs

- Include only health needs that are not educational
- Anything that educates, trains or supports learning belongs in Section F

Section D: Social Care Needs

- Social care needs can be identified by any professional, not only social workers

Section E: Outcomes

- Write outcomes in clear, everyday language

- Outcomes must be achievable, measurable and linked to aspirations and needs
- Make it clear how progress will be recognised
- Long-term outcomes should include a “so that...”
- Medium-term outcomes must be specific and measurable • Outcomes must be realistic and meaningful to the child or young person
- Do not set outcomes that aim to change neurodivergent traits

Section F: Special Educational Provision

- Avoid vague terms such as “access to” or “opportunities for”
- Be specific about what support means and what it involves, Provision shouldn’t limit the CYP ability to develop and progress
- Provide provision for every need listed in Section B
- Quantify interventions (frequency, duration, who delivers them)
- If flexibility is required, explain why and when it applies

Section G: Health Provision

- Include only health provision that is not educational

- Provide provision for every identified health need
- Use universal services wording if no health needs are identified

Section H1 & H2: Social Care Provision

- Provide provision for every identified social care need
- If no needs are identified, use standard wording: H1: “No additional social care provision under section 2 of the Chronically Sick and Disabled Persons Act 1970 has been identified. This section will be updated if future needs are identified.” H2: “No social care provision has been identified at this time. This section will be updated if future needs are identified.”

Section I: Placement

- Do not name a setting in a draft plan
- For EOTAS or EHE, leave Section I blank and describe arrangements in Section F

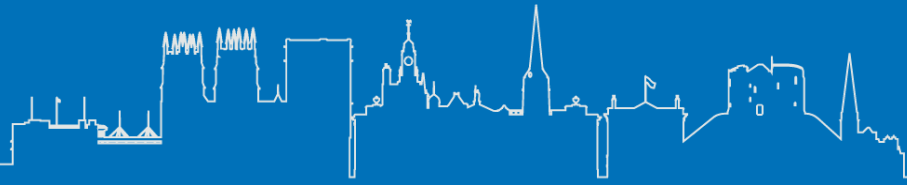
Section J: Personal Budget

- Complete all Yes/No questions
- Link personal budget requests to needs (Section B), provision (Section F) and outcomes (Section E)

Section K: Advice and Information

- Use full names and job titles
- Do not leave any boxes empty

This framework will be reviewed annually.



Alternative formats

To ask for reasonable adjustments or this document in an alternative language or format such as large print, braille, audio, Easy Read or BSL you can:

Email us at: **cycaccessteam@york.gov.uk**

Call us: **01904 551550** and customer services will pass your request onto the Access Team.

Use our BSL Video Relay Service:

www.york.gov.uk/BSLInterpretingService

Select 'Switchboard' from the menu.

We can also translate into the following languages:

我們也用您們的語言提供這個信息 (Cantonese)

এই তথ্য আপনার নিজের ভাষায় দেয়া যেতে পারে। (Bengali)

Ta informacja może być dostarczona w twoim (Polish)
własnym języku.

Bu bilgiyi kendi dilinizde almanız mümkündür. (Turkish)

یہ معلومات آپ کی اپنی زبان (بولی) میں بھی مہیا کی جاسکتی ہیں۔ (Urdu)