



Working Procedures
CEO
School Visit & EHCP Information for Schools/Parents/Carers

## SCHOOL VISIT & EHCP PROCESS — INFORMATION FOR SCHOOLS, PARENTS & CARERS

F4YP conducts school visits to gather relevant information for all young people to assess whether our setting can safely and positively meet the needs of the YP, and how we put the right support in place across our setting. It is also an opportunity to get to know YP before attending, as well as for them to meet a friendly face and understand our service.

### 1) What is a school visit?

A short, planned meeting at school where an F4YP staff member meets the YP (ideally 1:1), talks with school staff, and agrees practical strategies for our clubs.

#### What we do

- Introduce our team and explain to YP about F4YP: our service, values and expectations.
- Meet the YP to understand strengths, interests and what helps.
- Discuss support needs, routines, communication, and any health/safety considerations.
- Draft or update an F4YP Pastoral Support Plan (PSP) and, where needed, a risk assessment.
- Note any previous positive handling incidents (e.g., Team-Teach) or behaviours that may inform risk assessments and staffing adjustments.
- Agree how we will communicate with home and school.

#### Who attends

F4YP staff and school staff. Parent/carer may be contacted separately to contribute to the PSP and to share background and any previous behaviours.

#### When

Usually before a YP starts with us or when needs change.

### 2) Observations

We may need to conduct a school observation to see the YP across a few contexts (e.g., transitions, group activities, free play) and understand how they respond and what helps the YP join in and stay safe. Observations are short, respectful, and focused on solutions, to ensure they can be successful in accessing our settings.

### 3) When a YP has an EHCP

We will request the most recent EHCP and capture a summary for our staff. We focus on:

- **Key needs and what works** (visuals/communication aids, sensory breaks, de-escalation, prompts).
- **Communication** (speech, signs, or communication device/book) and how we should model language.
- **Support level** (e.g. 1:1 during transitions, we consider what this means for our setting).
- **Health/medical** needs (care plans, rescue medication) and any manual handling.
- **Independence** (toileting, eating/drinking, transitions).
- **Environment** (noise/crowding, need for regulation space).

### 4) Possible outcomes

After the school visit, EHCP review and any observations, we agree one of the following:

- **Proceed with support** — we can meet needs with reasonable adjustments.
- **Time-bound trial** — we set clear conditions (e.g., shorter sessions, smaller group, specific days, extra quiet space) and a review date.
- **Needs currently too high** — see Section 5 below; we will explain why and discuss alternatives.

For all outcomes we share a brief summary with parents/carers and school.

### 5) When needs may be too high for F4YP

We will always try to implement reasonable adjustments. For safety, dignity and quality of support, some needs require specialist provision that we do not provide. Indicators include:

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- 1. Intimate care**
  - The young person requires assistance with toileting/changing and cannot manage this independently.
- 2. Communication support not available**
  - The YP is non-verbal without an accessible communication system (e.g., no communication aids provided) or staff are not yet trained to use it, leading to distress or risk.
- 3. Staffing intensity**
  - The YP requires constant 1:1 (or higher) throughout sessions to remain safe/engaged in core activity. As a funded service, we do not provide this level of support.
- 4. Clinical/medical procedures outside our training/equipment/insurance**
  - Examples: enteral (PEG) feeding, suctioning, oxygen administration, certain rescue medications without a current protocol and trained staff.
- 5. Unmanageable risk profile**
  - Persistent targeted aggression, absconding, serious property damage, or weaponisation of objects where risk cannot be reduced to an acceptable level with available strategies and staffing.

**If any apply:**

- We will discuss with parents/carers and school to explain our decision and the evidence.
- We will explore alternatives (e.g., specialist short-break providers, different days/groups).
- We will be happy to review if circumstances change.

**6) ASC vs Holiday Club — some key differences we consider**

- **ASC:** shorter sessions, end-of-school fatigue, transitions, quiet space availability, activity suitability based on likes/dislikes of YP as well as YP needs, venue
- **HC:** longer days, structure, age groups, busier lunch/break space, transitions, activity suitability based on likes/dislikes of YP as well as YP needs, venue, outdoor activities and trips.

**7) What we ask from schools and families**

- Latest EHCP and any care/behaviour plans; contact details for key professionals and agencies involved with the YP.
- **Continued Open communication** about changes that may affect YP (e.g. medication, seizures, behaviours, significant routine changes/ changes in the home) and any other support/services currently working with the YP.
- **Medication/equipment** needed for participation (e.g., communication aids, inhalers) — clearly labelled.

**8) Data protection & information handling**

We collect and store information in line with F4YP sign-up consents and policies.