

Somerset Health and Wellbeing Board

Report for 9 March 2017

Inspection of Local Area arrangements for children and young people with Special Educational Needs and / or Disabilities (SEND)

Lead Officer:
Sue Rogers, Deputy Director Education

Author: Julia Ridge – Head of Vulnerable Learners
Contact Details: jaridge@somerset.gov.uk 01823 356067

	Seen by:	Name	Date
Report Sign off	Relevant Senior Manager / Lead Office (Director Level)	Sue Rogers	1/3/17
	Cabinet Member / Portfolio Holder (if applicable)	Frances Nicholson	1/3/17
	Monitoring Officer (Somerset County Council)	Julian Gale (pp Jamie Jackson)	1/3/17
Summary:	<p>The SEND reforms were introduced within the 2014 Children and Families Act. The Act provides the statutory framework for the integration and personalisation of services for children and young people and requires health services in England to work closely alongside education and social care services to provide the right support for children and young people and their families.</p> <p>In 2016 the government introduced a new Ofsted and CQC inspection framework under which the statutory health, care and education partners in every local authority area will be inspected over the next four years.</p> <p>This paper outlines the progress made in our implementation of the reforms; provides an overview of the SEND inspection and the government's expectations of agencies as part of Health and Wellbeing Boards.</p>		
Recommendations:	<p>That the Board notes the inspection findings from other local areas' inspections to date, and discusses the implications and action required by agencies to prepare for inspection.</p>		
Reasons for Recommendations:	<ul style="list-style-type: none">• To ensure members of the Health and Wellbeing Board are fully aware of the outcomes for Somerset children and young people with SEND• of the government's expectations of agencies on the of Health and Wellbeing Boards in relation to the SEND reforms• and of individuals' likely involvement in the Local Area SEND inspection		

Links to Somerset Health and Wellbeing Strategy:	Prior to inspecting Somerset, the lead HMI will consider Somerset's Health and Wellbeing Strategy and our JSNA to evaluate how well the Local Area has evaluated the needs of 'vulnerable groups including disabled children and those with SEN' and whether our Strategy reflects those needs. (SEND Code of Practice chapter 3 – Working together across education, health and care for joint outcomes)
Financial, Legal and HR Implications:	N/A
Equalities Implications:	SEND Code of Practice is the statutory guidance for partners relating to legislation that includes the Equality Act 2010 and Special Educational Needs and Disability Regulations 2014.
Risk Assessment:	Although the SEND inspections do not result in a single judgement (e.g. Good or Requires Improvement) the inspection letters sent to the DCS and CCG chief are published and if inspectors find serious weaknesses these will be identified and Local Areas required to develop an action plan to address these.

1. Background

- 1.1.** 12,300 children and young people in Somerset are identified as having special educational needs and / or disability, and most of these will not require an Education Health and Care Plan (EHCP) as their needs can be assessed and met by their Early Years or school setting. For children with more complex needs, prior to the 2014 reforms special education needs were recorded in Statements of Educational Need and children's health or care needs were assessed separately. The SEND reforms require a single assessment and plan, an Education, Health and Care Plan, (EHCP) so that children's needs are assessed and met holistically, and their parents and carers only have to 'tell their story' once. Partners are expected to plan the services and expertise and to agree the range of local services and clear arrangements for making local requests. These services must be described in the Local Area's published Local Offer.
- 1.2.** The government's vision for children and young people with SEN and disabilities is the same as that for all children and young people; that they achieve well in their early years, at school and in college and that they find employment, lead happy and fulfilled lives and experience choice and control. Successful preparation for adult life is the overarching goal for all children and young people with SEND.

The SEND legislation requires health, social care and education to implement significant changes to our processes and to the way we work and provide services. The SEND reforms place a responsibility on local authorities and statutory partners to integrate services, to deliver support from birth to 25. The aim is to identify needs as early as possible, offering early support and making decisions with the full involvement of parent-carers, children and young people so that services deliver to outcomes which are shaped by the aspirations of the individual children/young people and their families.

The code has introduced new duties on early years, schools, academies, colleges, health and social care partners to work together to shape the Local

Offer through joint assessment, planning and commissioning of services. These expectations are in the context of the government's fiscal strategy which has serious implications for all public sector funding. These financial constraints add to the urgency to find creative and effective solutions through joint working, to ensure that resources are effectively targeted.

The Code of Practice clearly sets out the government's expectation that the Health and Wellbeing Board is a local area's lead strategic board, responsible for ensuring the JSNA is sufficiently robust to identify and plan for the needs of children and young people with SEND, and to oversee joint commissioning to meet those needs. In Somerset these arrangements are detailed in the children's & young people's plan.

The government's expectation is that the JSNA will inform joint commissioning arrangements by ensuring we fully understand the needs of our children and young people. The code requires us to have local governance arrangements in place to ensure clear accountability for commissioning services for children and young people with SEN and disabilities from birth to the age of 25. Partners are expected to consider how they will work to align support and agree the changes that joint commissioning will bring to the design of services.

These joint working arrangements will be crucial for delivering current system transformation programmes for children and young people, including:

- Transforming Care Programme
- CAMHS Local Transformation Plans
- Local Area Sustainability and Transformation Plans
- New Care Models Programme Vanguard
- Meeting the ambitious targets for the increase in Personal Health Budgets or Integrated Personal Budgets.

This means challenging the historical way we have worked, becoming more flexible and creative in finding solutions that meet individual needs, giving families and young people control over what affects them, and working across organisational and service boundaries.

- 1.3.** Our vision is for **every** child and young person to have the greatest possible opportunity to be the best they can be, to be happy, and have choice and control over their life. To achieve this all Somerset partners agreed the guiding principles for developing a successful SEND system and defined our overarching vision, published in November 2016, as enabling Somerset's children and young people to have better education, health and emotional wellbeing outcomes. The strategy is available from: <https://www.somersetchoices.org.uk/family/information-and-advice/send-strategy-for-somerset/>

We have high aspirations for all our children and young people and want to ensure that we deliver the best outcomes for those with SEND within a framework of "Think Individuals, Think Families, Think Communities".

Our strategy sets out a clear direction for the future. In partnership with parent-carers, young people and partners across education, care and health we have identified five key outcomes for the next three years:

Outcome 1 – our families, children and young people report a positive

experience of our SEND systems and support, feel empowered and confident to engage and to make decisions.

Outcome 2 – timely and accurate assessment and identification of SEND across education, health and care services.

Outcome 3 – inclusive and equitable access to good quality local education.

Outcome 4 – smooth and effective transitions happen at key points for the child and young person.

Outcome 5 – creative partnership working delivers effective, fair and transparent systems and services.

- 1.4. Parent-carers and young people have engaged really well in this agenda, providing support and challenge, and they are very clear about what they want services to achieve.
- 1.5. We have several challenges to overcome to achieve these outcomes. We are experiencing significant financial pressures on budgets in education (Dedicated schools grant DSG) and across the health service and County Council.

We have also experienced some challenges in the implementation of the reforms especially in lower rates of compliance with statutory deadlines for processing new EHCPs and converting Statements of Educational Need to EHCPs.

There is a historical hybrid system of allocation of resources (statutory and non-statutory) which means that Somerset has one of the lowest percentage of statements or EHCPs in the country but a high level of identification of children and young people through the high needs funding system.

Key Somerset Facts

- 15.6% of Children and young people 0-25 identified with Special Educational Needs and Disabilities which is **slightly higher** than 14.8% nationally – total number 12,300
- Somerset's profile of needs differs from elsewhere – Social Emotional Mental Health needs higher, SLCN in secondary higher, autism and moderate learning difficulties below
- 1.6% have an Education Health and Care Plan compared with 2.8% nationally.
- too many children educated at some distance from home community
- **attendance of pupils** with SEN and at PRUs is the worst in SW – 69.1% miss 14 or more sessions (50.1% South West region)
- **gender difference** larger than national (Somerset: Boys 14.7% Girls 8.2%)
- 40-45% Education, Health and Care Plan requests are declined through lack of evidence of that schools have undertaken their own robust assessment and tried to meet needs through a graduated response.
- 79% of Somerset's young people aged 16-17 with SEN remain in education in training, down from 85% in 2014/15.
- the proportion of 19 year-olds with SEND qualified at level 3 has decreased.
- while level 2 qualifications amongst those without special needs has

increased above the national rate, the proportion of those with a Statement or EHC Plan achieving level 2 has decreased from 15% in 2012 to 8% in 2015.

- satisfaction survey reports **community inclusion** is below national standard

The key areas where Somerset's profile is different from the picture elsewhere are:

- social, emotional and mental health where Somerset shows a higher level of need than south west authorities and in England
- speech, language and communication needs rising in the high needs group
- a lower level of identified need for autistic spectrum disorder and moderate learning difficulties
- lower statement/EHC Plan rate with a high number of children/young people receiving high needs funding without a statement/EHC Plan

1.6. The Local Area SEND (Special Educational Needs and Disabilities)

Inspection framework was published in the Spring of 2016 with inspections starting in May 2016. It is a joint inspection by the Care Quality Commission (CQC) and OFSTED, covering the education, health and care of the 12,300 children with SEND in Somerset. The inspection framework tests the local area's response to individual needs by assessing how well it helps all children and young people who have special educational needs and/disabilities and how the impact of the work by the local area supports better outcomes for children and young people.

In order to do this, inspectors will examine evidence on how needs are identified, the provision made for those between 0 -25, and the impact of services and support on outcomes achieved. Appendix 1 explains the format of the inspection and identifies the range of information that inspectors will consider before they inspect Somerset. This includes published performance information, as well as our JSNA and Health and Wellbeing and SEND Strategies. Having done this, inspectors will form their hypothesis about how well Somerset partners work together to deliver the reforms, and test this during the inspection.

The inspection lasts for five days, during which time inspectors will meet with key individuals and focus groups from across health, education and care. They will also talk to children and young people and their parents / carers, and visit a number of settings.

After the inspection OfSTED will publish an inspection report in the form of an inspection letter. This will outline the evidence that inspectors reviewed and provide a summary of key findings including strengths and areas requiring further development. In addition, reports may also include areas of significant concern that may, subject to determination by OFSTED, require a written statement to be submitted to identify how concerns will be remedied.

- 1.7.** As of 27th February 2017, twenty inspection letters had been published. Of these five Local Areas have been identified as having serious weaknesses: Hartlepool, Rochdale, Sefton, Suffolk, Surrey.

Typical areas for development relating to partners working together are:

- Governance and the strategic leadership of the SEND reforms have not been rigorous or effective in developing a coordinated, cross-service approach to identifying, assessing and meeting the needs of children and young people.
- There is too much variability in the effectiveness of different services' information systems and some professionals do not follow information-sharing protocols. This hinders strategic planning.
- The joint commissioning of support and services between education, health and care agencies is at an early stage of development and requires further improvement.
- Leaders have been too slow to set up joint commissioning between education, health and care.

The inspection letters show that CQC inspectors are particularly focusing on:

- The role and effectiveness of the Designated Medical Officer and the Designated Clinical Officer
- the role of Health Visitors around early identification of need and how well they work with GPs
- The timeliness of the two year old integrated check-up and whether this is multi-agency
- GPs' early diagnoses of need e.g. autism
- Access to community therapies (including waiting times)
- The capacity and effectiveness of community nurses
- The role and effectiveness of School Nurses
- Access to CAMHS (including waiting times)
- Health professionals involvement in determining the level of children's and young people's need and in planning the necessary support for them.
- The quality of information sharing in the co-production of EHC plans.

1.8. How we are evaluating our effectiveness

During the spring of 2016 Somerset developed a self-evaluation framework to help us analyse our effectiveness in delivering the SEND reforms. The self-evaluation framework is overseen by the chairs of the SEND Strategy board sub group.

Our key strengths are around our strategic engagement with parents, carers and children and young people, something that is being identified by inspectors as a weakness in many of the local areas inspected so far. We have achieved this through our support and good relationship with our Parent Carer Forum, and through developing and resourcing a young people's champions model and young people's forum, The Unstoppables.

However, compared to similar authorities, many of the measurable outcomes achieved by our children and young people with SEND are poor, and we still have a considerable number of areas for development, including developing our joint commissioning.

Local Area Tool

The Council for Disabled Children have developed a self-evaluation tool with CCGs and LAs . This pulls together in one place some key pieces of evidence

that the CCG and Local Authority will wish to assure itself on in terms of its progress in implementing the 2014 Children and Families Act reforms in relation to disabled children and young people and those with SEN.

The tool presents this information in an easily accessible “at a glance” RAG rating system to update the relevant Boards on progress in implementation. CQC and Ofsted will view completed audit tools as evidence demonstrating an active commitment to and interest in implementing the reforms.

Peer Review

Somerset has invited Gloucester Council to undertake a Peer review of our Local Area SEND provision. The review is planned for May 2017.

Key foci for the peer review:

- Do our parents and carers of children and young people who have special educational needs and/or disabilities have confidence in the local area’s leaders and services.
- Is there timely and accurate assessment of, and planning for, their children’s needs? How engaged are parents in the process?
- Are there high rates of appeal to first tier tribunal? What is the tribunal profile for the LA?
- How effective are the areas information management systems? How do they enable more effective and efficient provision?
- What is the provision in terms of DMO plus and how effective is it?
- What is the experience for Children and young people across the county in terms of health and therapeutic provision?
- How effective is the local offer?
- Have the absence and exclusion rates for children and young people who have special educational needs and/or disabilities been recognised by the local area as a priority for action?
- How effective is CAMHS in supporting the SEND agenda?
- How effectively do children and young people with SEND achieve in Somerset?
- How effective is the provision at post-16 and post-19?
- How effective is safeguarding in the local area? Do children and young people feel happy, safe and well cared for?

2. Options considered and reasons for rejecting them

2.1. N/A

3. Consultations undertaken

3.1. N/A

4. Financial, Legal, HR and Risk Implications

- 4.1. In the current economic climate, the financial pressure on public sector services is acute. In Somerset, we are required to set reduced budgets for many of our services over the next four years. Nevertheless, we recognise that within these financial constraints there is a genuine opportunity to be more efficient and increase effectiveness. To achieve this we must ensure that our provision targets the right children and young people at the right time.

5. Background papers

- 5.1. SEND code of Practice available from <https://www.gov.uk/topic/schools-colleges-childrens-services/special-educational-needs-disabilities>

Inspection framework and handbook available from:

<https://www.gov.uk/government/publications/local-area-send-inspection-framework>

<https://www.gov.uk/government/publications/local-area-send-inspection-guidance-for-inspectors>