

Implementation of the Special Educational Needs and Disability (SEND) Reforms

Health and Wellbeing Board

Date: 12th October 2016

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| Author: | Director of Children's Services, Swindon Borough Council |
| Wards: | All |
| Locality Affected: | All |
| Parishes Affected: | All |

1. Purpose and Reasons

- 1.1 This report sets out to inform the committee of the new joint local area Special Educational Needs and Disability inspection under section 20 of the Children Act 2004.
- 1.2 From May 2016 all local areas in England will be subject to a joint inspection from Ofsted and the Care Quality Commission (CQC) to judge the effectiveness of the area in implementing the disability and special educational needs reforms as set out in the Children and Families Act 2014.

2. Recommendations

The Board is recommended to:

- 2.1 Note the arrangements for the forthcoming joint local area SEND inspection and monitor progress towards implementing our strategy to deliver better outcomes for children and young people with SEND in Swindon.

3. Detail

Background to the inspection

- 3.1 In April 2016 Ofsted and the Care Quality Commission published the framework for the inspection of local areas' effectiveness in identifying and meeting the needs of children and young people who have special educational needs and/or disabilities.
- 3.2 The inspection will review how local areas support these children and young people to achieve the best possible educational and other outcomes, such as being able to live independently, secure meaningful employment and be well prepared for their adult lives.
- 3.3 It is important to note that these inspections will evaluate how effectively the local area meets its responsibilities, and not just the local authority. This includes clinical commissioning groups (CCGs), public health, NHS England for specialist services, early year's settings, schools and further education providers.

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- 3.4 During the inspection, inspectors will visit a range of providers to gather evidence, including nurseries, schools, colleges and specialist services.
- 3.5 If inspectors become aware of concerns of a safeguarding or child protection nature, they will make additional enquiries to satisfy themselves that such matters are being dealt with appropriately. If they remain concerned, this could include inspectors referring individual cases to the local authority or an inspection of the individual service or provider in line with Ofsted or CQC's duties and powers.
- 3.6 The starting point for the inspection is the expectation that leaders for the local area should have an understanding of strengths and aspects that require development.
- 3.7 To support local areas, assess how well arrangements are working, and compare delivery across local areas, the Department for Education has produced a local area SEND report which presents the statistics on SEND for Swindon and provides the opportunity to compare our performance with other areas.

Our self-assessment

- 3.8 Detailed self-evaluation has been an on-going process based on the local authority readiness survey of 2014, and is included in our strategic plan to deliver better outcomes for children and young people with SEND in Swindon.
- 3.9 The clinical commissioning group (CCG) governing body oversees the joint arrangements for SEND and the contribution of health. The CCG have undertaken a detailed self-evaluation and will present this to the SEND Strategic Board in September 2016. The improvement plan for the CCG will be overseen by the Joint Commissioning Group (JCG), reporting to the Health and Well-being Board.
- 3.10 The inspection framework and therefore our self-evaluation is evaluated under three headings as identified below. The areas for development are monitored through the Quality Improvement sub-group of the SEND Strategic Board, reporting through JCG to the Health and Wellbeing board. Through regular reporting to the SEND Board improvements have already been identified in a number of areas. Our strengths and areas for development will be kept under regular review every month and amended as appropriate. The key strengths and current areas for development are as follows under each heading.

3.10.1 Our effectiveness in identification of children and young people who have special educational needs and/or disabilities

Strengths

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- Effective screening processes are in place to identify need in new-born infants
- Advisory teaching staff and educational psychologists help to ensure that children receive the support they need to be able to gain access to pre-school settings, nursery education and the Reception class in school.
- Practitioners who identify the need for additional support to help children access early-years settings can seek extra funding.
- The Special Education Needs Resource and Assessment Panel (SENRAP) contributes well to identifying and providing for the needs of young people who have special educational needs and/or disabilities.
- Assisted speech and language equipment provided to a child or young person travels with them to ensure access to the most appropriate equipment to support learning during their education and transition into adult life.
- The local area's 'early help' assessment process is a good example of joint working across the education, health and care workforce. Early help records are used effectively as part of the graduated response before a request is made for a statutory assessment of special educational needs.
- Integrated service delivery in early years has ensured timely and effective assessment of need. This helps to identify children who need referral to speech and language support and ensures that children receive in-depth assessment leading to early identification of their needs and health care.

Areas for development

- The percentage of pupils with a statement or EHC plan remains high at 3.8% compared to an average of 2.9% in all English unitary authorities. Plans are in place to understand why this figure remains so high and agree our strategic approach to reducing the % of pupils with a statement or EHC plan.
- Despite positive steps and recent improvements, there is still work to do to reduce the time that children and young people have to wait for their plan to be as short as possible and to meet the deadline for conversion statements to education, health and care plans by March 2019. In August 2016 we completed 84% of EHCP's within 20 weeks giving an average of 56% since January 2016. 44% of all conversions

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from statements to education, health and care plans have now been completed.

- Despite the clinical commissioning group recognising the need to undertake a review of children's health services, Swindon is struggling to meet the demand for referrals and diagnosis for autistic spectrum disorders (ASD). This has been prioritised by the CCG and waiting times have reduced.

3.10.2 Our effectiveness in assessing and meeting the needs of children and young people who have special educational needs and/or disabilities

Strengths

- Parents, carers and children and young people are involved in regular reviews. Co-produced plans mean that children are at the heart of the education, health and care plans.
- Access to high quality health services is well established within specialist resourced provision and special schools.
- Some good examples exist of joined-up working both within health teams and other partners. For example, the multi-agency unit based at Uplands learning campus.
- The existence of joint multi-disciplinary health clinics at the Saltway centre assist families understanding of roles and responsibilities and reduced duplication.

Areas for development

- Although the annual review process is sound if a re-referral is required, this can mean that needs are met too slowly. The policy, which outlines what happens when health appointments are missed, requires review to ensure greater flexibility when dealing with vulnerable children and parents.
- Staff changes and illness within teams' means that children and young people's needs are not met quickly enough. Changes to staffing arrangements are being explored to reduce the impact on children and families.
- Parents, carers and young people are not sufficiently aware of the role they could play in helping to shape the local offer and the mechanisms to do so. Providers and parent carer groups have a greater role to play

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in using the local offer as a medium to share information to access specialist services used by the local area.

- The local offer is not easy to navigate for some families. Some parents continue to be unaware of its purpose.
- Leaders from education, health and social care do not yet have an agreed strategy for sharing expertise and training staff to benefit children and young people who have special educational needs and/or disabilities. This limits the capacity of leaders to evaluate the impact of this work on pupils' outcomes.
- A single pathway to develop provision, particularly for young people aged 19-25 is still in development.

3.10.3 Our effectiveness in improving outcomes for children and young people who have special educational needs and/or disabilities

Strengths

- The impact and visibility of staff in specially commissioned named roles, in education and health, are having a significant positive effect on the progress of the special educational needs and disability reforms. Formal networking across education, health and social care has increased since 2014.
- The proportion of schools in the area that are good or better has risen in the last three years.
- The proportion of children and young people placed out of area as a result of their special educational needs and/or disability has reduced in the last three years.
- The % of children and young people with special educational needs and/or a disability who are permanently excluded from school remains below the national average.
- Most staff in education, health and social care accessed training on the special educational needs and disability reforms and understand their roles in implementing these reforms.
- Individual providers are aware of their responsibility to monitor children and young people's progress in a range of outcomes. Increasing numbers of children in the early year's foundation stage are meeting their developmental targets.

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- Robust checks are in place to monitor the pupils who are home educated, who have medical needs and are educated in hospital.

Areas for development

- Pathways for 19-25 year olds, to support young people into adulthood require further development. Transition is a strategic priority for the local authority and plans are in place to improve outcomes for young people as they prepare for adulthood.
- The progress of pupils who have statements or education, health and care plans and for those receiving support for special educational needs and/or disabilities is insufficient. In particular, the progress of pupils from key stage 2 to the end of key stage 4 continues to be below national levels for pupils compared with all pupils in English and mathematics.

Fixed term exclusions for children and young people with special educational needs and/or disabilities remain unacceptably high.

4. Alternative Options

- 4.1 There are no alternative options as all local areas will be inspected at least once during a five-year period.

5. Implications, Diversity Impact Assessment and Risk Management

Financial and Procurement Implications

- 5.1 There are no financial or procurement implications arising as a result of this report.

Legal and Human Rights Implications

- 5.2 There are no legal and human rights implications arising as a result of this report.

All Other Implications (including Staff, Sustainability, Health, Rural, Crime and Disorder)

- 5.3 There are no other direct implications arising as a result of this report.

Diversity Impact Assessment

- 5.4 No Diversity Impact Assessment is required at this stage. Any DIA that is required will be identified at the appropriate stage.

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Risk Management

- 5.5 No risk management issues have been identified at this stage, any risk management issues will be identified at the appropriate time when a topic is under review by the Scrutiny Committee and if it makes any recommendations.

6. Consultees

- 6.1 The Board Director, Resources (Section 151 Officer) and Director of Law and Democratic Services (Monitoring Officer) are consulted in respect of all reports.

7. Background Papers

- 7.1 The framework for the inspection of local areas' effectiveness in identifying and meeting the needs of children and young people who have special educational needs and/or disabilities.
- 7.2 DfE Local Area SEND Report - http://lginform.local.gov.uk/reports/view/send-research/local-area-send-report?mod-area=E06000030&mod-group=ADASSRegions_SouthWestern&modify-report=Apply.

8. Appendices

- 8.1 None.