

# Westminster Health & Wellbeing Board

<b>Date:</b>	15 September 2016
<b>Classification:</b>	General Release
<b>Title:</b>	Children and Families Act Implementation and Preparation for Local Area Inspection
<b>Report of:</b>	Ian Heggs, Director for Education
<b>Wards Involved:</b>	All
<b>Policy Context:</b>	Following the implementation of the Children and Families Act in September 2014, the Special Educational Needs Service has been working in partnership with Children's and Adults' Social Care, Health partners, Parent Carer Forums and education settings to deliver the transformation needed to implement this legislation by April 2018.
<b>Financial Summary:</b>	No financial implications
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## 1. EXECUTIVE SUMMARY

- 1.1 Following the implementation of the Children and Families Act in September 2014, the Special Educational Needs Service has been working in partnership with Children's and Adults' Social Care, Health partners, Parent Carer Forums and education settings to deliver the transformation needed to implement this legislation by April 2018.
- 1.2 We are also preparing for an upcoming local area inspection by Ofsted and the Care Quality Commission, which will test the effectiveness of our delivery of the new legislation.

## 2 KEY MATTERS FOR THE BOARD

- 2.1 The Health and Wellbeing Board are requested to:

- Consider the actions that can be taken to reduce the time required to provide health advice to inform the 20-week assessment process for Education, Health and Care Plans
- Consider how pathways can be developed for the early identification of children aged 0-5 with SEND
- Consider how the local offer of health provision for young people aged 16-25 can be developed
- Consider the involvement of CCG leads in the joint planning for the Local Area Inspection of provision for 0-25 year olds with SEND.

### **3 IMPLEMENTING CHILDREN AND FAMILIES ACT CHANGE PROGRAMME**

- 3.1 The requirements of the Children and Families Act, which came into effect from 1 September 2014, represent some of the most significant changes to the way that services are delivered for young people with special educational needs (SEN) in the past 30 years.
- 3.2 The changes aim to improve cooperation between **all education, health and social care services** and introduce a person-centred approach to supporting children with special educational needs and disabilities and their families

#### **Education Health and Care Plans**

- 3.3 'Statements' of SEN have been replaced with a new outcome focused 'Education, Health and Care plan', which may be maintained by the Local Authority for an extended age range (from birth to 25).
- 3.4 The decision as to whether to issue an Education Health and Care Plan is made as part of a joint assessment process which considers the education, health and social care needs of the child or young person. If a plan is required, the full 20-week assessment process is undertaken to establish the outcomes that the child or young person will be working towards, the support that is required and the resources that will deliver this.
- 3.5 During the first full year of operation (January 2015 – December 2015), Westminster has processed 25 new Education Health and Care Plans. Of these, the national SEN2 data shows that only one or two (c.4%) were completed within 20 weeks, compared with 59.2% nationally.
- 3.6 Local authorities have to undertake 'transfer reviews' for all children and young people who currently have statements that were issued under the previous legislation. These reviews are undertaken to establish whether an EHC Plan should be issued under the new legislation and, if required, to agree the support and resources that are included in the new plan. It is expected that all children who have a statement of SEN will have an EHC Plan, unless the young person is no longer in education.

- 3.7 All transfer reviews have to be completed by April 2018 and, as of December 2015, Westminster had completed 1.1% of their total, compared with a national average of 18.2%. We are currently putting additional interim resource in place to ensure that future transfer reviews are completed in a timely fashion and to a high standard. This will be funded by Westminster City Council.
- 3.8 A key issue to be addressed jointly by the local authority and health partners is reducing the time taken by paediatricians to provide health advice for the 20-week EHC assessment process.

### **The Local Offer**

- 3.9 It is a statutory requirement for all Local Authorities to publish a 'Local Offer' that outlines the services that are available to children with Education, Health and Social Care needs.
- 3.10 The delivery of our offer for children aged 5-16 is generally going well and is of high quality. However, we have identified a need to improve our early identification pathways and the offer for children aged 0-5 (including the receipt and use of health notifications) and to increase our overall offer of provision for young people aged 16-25.

### **Co-production**

- 3.11 Co-production is a key aspect of the new legislation and it is the responsibility of the local authority to ensure that the views of parents and young people are included in any strategic planning and decision making.
- 3.12 We are committed to this approach and the development of the SEN Service has been predicated on this model. We have worked closely with the local Parent Representative Group, Westminster Parent Partnership Group, in order to provide opportunities for parents to actively inform the development of services for children with special educational needs and disabilities. including the development of a Parent Reference Group, which was set up in April 2014.
- 3.13 Our practice when assessing young people and drafting their Education Health and Care Plans has been designed to incorporate an individualised co-production approach. This includes the scheduling of 'drafting meetings' whereby parents, carers and young people come together with key workers to discuss the outcomes that they would like to achieve and the best means by which these can be achieved within the local offer.

### **Joint Commissioning**

- 3.14 A Commissioning Strategy is being developed as part of a joint commissioning project with Children with Disabilities Services, Health and Adult Social Care, which includes plans for areas such as Speech and Language Therapy and Occupational Therapy. For more details on this, please see Appendix 1.

## **Transition to Adulthood**

- 3.15 The extension of some Education Health and Care Plans to the age of 25 means that there is a need for local authorities to quantify the number of young people in a local area who are approaching transition at 16 and at 19 years of age and will qualify for an Education Health and Care Plan and, on the basis of this demand, will need to develop the education, health and social care local offer to support the transition to adulthood, including planning for young people's employment and independence in or near their local community. See Appendix 2 for more details regarding this.

## **4 PREPARING FOR THE LOCAL AREA INSPECTION OF PROVISION FOR 0-25 YEAR OLDS WITH SEND**

- 4.1 Following the implementation of the Children and Families Act, the Department for Education has requested that Ofsted and the CQC inspect local areas on their effectiveness in fulfilling their new duties. The inspections are resourced by additional funding provided specifically for the purpose and are part of the DfE's broader national accountability framework.
- 4.2 The inspection is **not** an inspection of individual providers or settings but rather makes a judgment on how well education, health and social care services work together as a 'local area', to improve outcomes for children and young people aged 0 – 25 years with a special educational need and/or disability. As such it incorporates a wide range of stakeholders including early years settings, schools & colleges, community and specialist health services, the Disabled Children's Team and third sector organisations.
- 4.3 Furthermore, it is not just an inspection of the provision for young people with EHC Plans, but will encompass the offer for young people with broader needs for SEN support – including the impact of Early Intervention Provision in the local area.
- 4.4 The current arrangements are that an inspection team of three inspectors (1x Ofsted, 1x CQC and 1x Local Authority Peer) will be on site for five days. There will be a five-day notice period for an inspection, with the following arrangements for an announcement:
- The lead HMI will normally contact the local authority's director of children's services (DCS) by telephone to announce the inspection. This notification call will normally take place between 9am and 10am. The lead HMI will make arrangements to speak with the director's nominated officer for the inspection as soon as possible in order to make the necessary arrangements for the inspection. The nominated officer should be the single point of contact for the lead HMI. Together, they will manage the coordination of the inspection.
  - Once the lead HMI has contacted the local authority, the CQC inspector will contact the chief executive(s) of the clinical commissioning groups (CCG) to inform them of the inspection and to make necessary arrangements for the local health services' contribution to the inspection.

- 4.5 The inspection will not result in a graded judgement. Instead, the local area will receive a narrative report of what is working well and what needs to improve. This report will name specific organisations, such as the LA, the CCGs and other local stakeholders if necessary.
- 4.6 The focus of the inspection is threefold:
1. How effectively does the local area identify children and young people who are disabled and/or have special educational needs?
  2. How effectively does the local area assess, plan for and meet the needs of these children?
  3. What is the evidence that services are having a positive impact on improving outcomes for these children and young people and helping them making a successful transition to adult life?
- 4.7 These judgements are to be made about the performance of the local area since the implementation of the reforms in September 2014.
- 4.8 We are currently in a five-year cycle of inspections, and the expectations on the progress that local areas will have made will increase between 2016 and 2021. The table below sets out how the DfE propose to measure success at a national level:

	Positive experience of the SEND system for children, young people and their families	Positive outcomes for children, young people and their families	Effective preparation for adulthood
What does success look like?	<ul style="list-style-type: none"> <li>- Parents, children and young people get right support at right time; feel that they are listened to and in control</li> <li>- Planned and well-managed transition at key points</li> <li>- A joined-up, transparent and accountable system</li> </ul>	<ul style="list-style-type: none"> <li>- Improved progression and attainment at all ages</li> <li>- Clear and appropriate expectations and aspirations leading to fulfilled lives</li> <li>- More resilient families</li> </ul>	<ul style="list-style-type: none"> <li>- Increased employment</li> <li>- Choice and control over living arrangements / Independent living</li> <li>- Participation in the community</li> <li>- Health outcomes based on need and aspiration</li> </ul>
Examples of data and intelligence	<ul style="list-style-type: none"> <li>- SEN appeals and outcomes</li> <li>- Education, Health and Care Plans (EHCPs) completed on time</li> <li>- Local authority and parent survey data</li> <li>- Children and young people's Personal Outcomes Evaluation Tool (POET) pilot</li> <li>- Feedback from Independent Supporters</li> </ul>	<ul style="list-style-type: none"> <li>- Attainment data</li> <li>- Outcomes for looked after children</li> <li>- Destinations after Key Stage 4 &amp; Key Stage 5</li> <li>- School absence and exclusion rates</li> </ul>	<ul style="list-style-type: none"> <li>- Employment status for adults with learning difficulties and disabilities (LDD)</li> <li>- Accommodation status for adults with LDD</li> </ul>
When do we expect to see an impact?	<b>Short/medium term:</b> From Sept 2014 to Sept 2017	<b>Medium/long term:</b> 3 to 5 years' time	<b>Fully emerge:</b> 5 to 10 years' time

4.9 Inspectors will start the inspection expecting that the local area has a good understanding of how effective it is, including of any aspects of its responsibilities that require further development.

4.10 Inspectors will test out the evidence that the local area uses in its **self-evaluation of how effectively it meets its responsibilities**. Inspectors will report where evidence collected during the inspection supports the area's own evaluation, and where this is not the case. They will also report on where the local area does not have a good enough understanding of its effectiveness in identifying needs, and in meeting these needs and improving outcomes.

### Local preparation

4.11 Work is underway to prepare for the SEND Local Area inspection including:

- The establishment of a SEND Quality Assurance Board to oversee the local implementation of the Children and Families Act, and planning for inspection. The Board includes representation from service managers and commissioners

across children's and adults Health and social care, Head teachers and parent representatives.

- An analysis of the risk of an early inspection of the local area based on current performance against key indicators set out by Ofsted/CQC: results of previous inspections, educational and other outcomes for children and young people with SEN, rates of attendance and exclusion, success in meeting statutory timescales for assessment and level of appeal to tribunals.
- Assurance of key datasets about children and young people with SEN or a disability and defining clear procedures and responsibilities during the inspection process.

4.12 The priority over the coming months is to build our understanding of the strengths and areas for improvement in services for children with special educational needs and/or disabilities:

- Producing a summary self-evaluation of effectiveness and ensuing action plan for each borough. We will consult on this with key stakeholders including parents' groups, schools and health partners.
- Working with parents and carers to review how well current arrangements support their meaningful involvement in decisions about local services as set out in the Children and Families Act.

4.13 A dedicated project manager is in place (working within the wider Children and Families Act Implementation Programme) to manage the preparation for the inspection.

4.14 Preparation is proceeding on the assumption that all three boroughs will be inspected at the same time (to be confirmed) and that we will need to plan on this basis, whilst ensuring that we maintain a focus on the particular strengths and weaknesses in each borough.

## **5 RECOMMENDATION(S)**

5.1 It is recommended that members of the Health and Wellbeing Board consider the contents of this paper, particularly with regards to how their organisation can contribute to (or is effected by) the implementation of the Children and Families Act and the Local Area Inspection.

## **6 EQUALITY IMPLICATIONS**

6.1 As this report is for information only, there are no equality implications to be considered at this stage.

## **7 LEGAL IMPLICATIONS**

7.1 As this report is for information only, there are no legal implications to be considered at this stage.

## **8 FINANCIAL AND RESOURCES IMPLICATIONS**

- 8.1 As this report is for information only, there are no financial and resources implications to be considered at this stage.

**If you have any queries about this Report or wish to inspect any of the  
Background Papers, please contact:**

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## Appendix 1

### 1 JOINT COMMISSIONING STRATEGY

- 1.1 A Commissioning Strategy is being developed as part of a joint commissioning project with Children with Disabilities Services, Health and Adult Social Care. The work to develop the SEN strand of this strategy has been supported by the Management Consultancy, Ernst and Young.
- 1.2 The work to develop the SEN Commissioning Strategy was driven by data analysis, qualitative discussion and feedback from the service and the outputs of previous and/or existing projects and reviews.
- 1.3 Delivery of this work was split into three strands:
  - Initial high level assessment of key service areas
  - Analysis of current and projected future demand for services
  - Development of a commissioning strategy to identify opportunities in response to the identified demands
- 1.4 The analysis undertaken by Ernst and Young for the SEN Service highlighted the following key priority areas for focus across, Westminster, Hammersmith and Fulham and Kensington and Chelsea around demographics, the type of needs and cost of provision:
  - The proportion of the SEN cohort at secondary age will increase over five years. The number of 11-15 year olds will grow by 18% by 2020
  - Autistic Spectrum Disorder is the primary need for 29% of all current statements / EHCP and demand for this support will remain high
  - Speech, Language & Communications Needs in Three Boroughs is double the national proportion of statements / EHCPs
  - Independent and non-maintained school provision outside of the local area costs 3.5 times more than state funded local provision
- 1.5 On the basis of these key priority areas, opportunities are being developed on the basis of the following priority areas:
  - Increased demand
  - A wider age range
  - Autism spectrum disorder needs
  - Speech Language and Communication needs
  - High cost places
- 1.6 We are currently finalising the plans for taking these opportunities forward jointly with colleagues in Health and Adult Social Care. The identified priority areas to be addressed are as follows:
  - Therapies (Speech and Language Therapy, and Occupational Therapy)

- Early Identification Pathways
- Personal Budgets
- SEN Outreach
- Externally commissioned short breaks
- Residential placements

## Appendix 2

### 1 TRANSITION TO ADULTHOOD

- 1.1 The extension of some Education Health and Care Plans to the age of 25 means that there is a need for local authorities to quantify the number of young people in a local area who are approaching transition at 16 and at 19 years of age and will qualify for an Education Health and Care Plan and, on the basis of this demand, will need to develop the education, health and social care local offer to support the transition to adulthood, including planning for young people's employment and independence in or near their local community.

#### **Planning for adulthood**

- 1.2 In order to ensure that the Special Educational Needs Service, the Children with Disabilities Service and Adult Social Care are working together in order to develop robust transition plans for all young people age 14 and above, a Young Person's Tracking Meeting has been established. The meeting will review cases across Westminster as well as Hammersmith and Fulham and Kensington and Chelsea. The key activities the group are as follows:

- To identify all young people who are aged 13-25 years old and may be eligible for adult's services
- To identify what services young people may be requiring and to identify gaps in service provision and ensure that these are considered in strategic planning
- To ensure that the health needs of young people in transition are planned for and ensure they have a Health Action Plan, or Continuing Healthcare assessments, as appropriate.
- To ensure that young people get advice and or support from an appropriate resource
- To establish eligibility for specialist adult services in line with the Care Act 2015

#### **Developing local employment opportunities for young people with special educational needs and disabilities**

- 1.3 An internal working group has been established across Children's Services, Adult Social Care and Public Health to agree Terms of Reference and key milestones for a Supported Employment Provider (SEP) Network.
- 1.4 Membership of the SEP Network will include parent/carers, Schools, Colleges, Supported Employment Providers, Job Centre Plus, Housing, Economic Development, Volunteer Centre and Education Business Partnership and first meeting to take place at end of July 2016.
- 1.5 Four key priorities for the SEP Network will be;

- Developing a 'Supported Employment Pathway' on the Local Offer (who to go to get support in looking for a job, benefits advice whilst working and job coaching support). This work will be developed with young people and their families.
- Finalising the Supported Employment Strategy across Education, Health and Adult Social Care
- Developing data systems and recording processes for all education and training providers which enable us to give a meaningful and accurate picture of numbers of young people with SEND into employment and of our improvement year on year
- Jointly develop performance indicators for all providers involved in the supported employment pathway so we can continue to improve our Local Offer for young people with SEND and their families

#### 1.6 Progress to date;

- We have a new provider - Alexandra College (based in Camden, providing a regional offer) which provides an education pathway for young people with more complex needs to support the development of skills for independence and enabling access to opportunities for supported employment whenever possible.
- Queensmill, a special school in Hammersmith for children with autism, will be extending its recent 19-25 years education pilot offer from September 2016. This will be delivered at Options Day Centre and will jointly develop their work experience and internship model to benefit both young people with complex autism and the adults utilising the Day Centre.