

## REPORT TO CHILDREN'S SERVICES AND EDUCATION SCRUTINY BOARD

**12 March 2018**

<b>Subject:</b>	SEND Scrutiny Work Group Report
	Councillor Simon Hackett - Cabinet Member for Children's Services
	Executive Director of Children's Services – Jim Leivers
<b>Contribution towards Vision 2030:</b>	
<b>Contact Officer(s):</b>	<p>Councillor Caroline White  <a href="mailto:Caroline_white@cllr.sandwell.gov.uk">Caroline_white@cllr.sandwell.gov.uk</a></p> <p>Deborah Breedon, Scrutiny Officer  <a href="mailto:Deborah_breedon@sandwell.gov.uk">Deborah_breedon@sandwell.gov.uk</a></p>

### **DECISION RECOMMENDATIONS**

**That Children's Services and Education Scrutiny Board:**

1. Consider and note the report of the SEND Work Group;

To recommend to Cabinet that:

2. the Cabinet Member for Children's Services be requested to promote the importance of tier 1 and tier 2 services in Sandwell, and to recognise the value of supporting mental wellbeing in children and young people at an early stage to prevent progression to specialist tier 3 provision for mental health services.
3. the Cabinet Member for Children's Services be requested to encourage schools which receive the Special Educational Needs (SEN) Notional Budget funding to prioritise that funding for the benefit and wellbeing of children and young people with special educational needs.

## **1 PURPOSE OF THE REPORT**

- 1.1 To provide Board with a progress report and initial findings of the SEND Work Group.

## **2 IMPLICATIONS FOR SANDWELL'S VISION**

- 2.1 Sandwell Council and its partners are working together to focus on mental health and wellbeing provision for children and young people including the provision of education to enable our children to benefit from the best start in life and a high-quality education throughout their school careers with outstanding support from their teachers and families.
- 2.2 Sandwell Vision 2030 includes an aim to have a national reputation for getting things done, where local partners are focussed on what really matters in people's lives and communities.

## **3 BACKGROUND AND MAIN CONSIDERATIONS**

- 3.1 Delivery of Special Educational Needs and Disability (SEND) reforms was identified as an issue by the Children's Services and Education Scrutiny Board. On 25<sup>th</sup> July 2017 the Board resolved to include special educational needs as a topic in the Work Programme 2017-18.
- 3.2 A Work Group was established to find out more about relationship between SEND and CAMHS services, and of the progress made since an Ofsted and CCG Joint Local Area SEND Inspection 16<sup>th</sup> – 20<sup>th</sup> January 2017.
- 3.3 The SEND Work Group comprised of Councillors White (Vice-Chair), Allen, Horton, Rouf and Co-opted Members Reverend French and Mrs Majid.
- 3.4 The SEND Work Group visited Connor Road Education Centre on 24<sup>th</sup> January 2018 and met with CCG Commissioning Manager, the Health EHCP officer for Children and Adolescents Mental Health Services (CAMHS), the Principal Educational Psychologist and the SEN operations manager in Sandwell.
- 3.5 The Work Group met to gather evidence and background information relating to SEND provision in Sandwell as follows:
  - Sandwell Cabinet report - Local Area Special Educational Needs and Disabilities (SEND) Review – Statement of actions (Key Decision Ref. No. SMBC16145) (28<sup>th</sup> June 2017);

- Sandwell's Written Statement of Action (June 2017) and the review of the written statement of action (October 2017);
  - Educational Health Care Plan process.
- 3.6 Desk top research was completed to inform the work group about SEND and CAMHS and how the services work in partnership for the best outcomes of the children and young people.
- 3.7 Initial findings were reported to Board on 5 February 2018 highlighting the need to focus on Tier 1 and Tier 2 provision where the Council had involvement in delivery and commissioning of support services for children and young people.
- 3.8 Scrutiny Board requested that the SEND work group provide a report to highlight its findings and to provide evidence to demonstrate if and how tier 2 provision makes a difference to young people and has impact on tier 3 services.

## 4 THE CURRENT POSITION

### 4.1 Special Educational Needs (SEN)

- 4.1.1 If a child has a learning difficulty or a disability that makes it harder for them to learn than most children of their age, they may have special educational needs (SEN).
- 4.1.2 As many as one in five children may experience some kind of difficulty in learning at some point of their school life.
- 4.1.3 There is a period called 'graduated' assessment when the identification process starts and where a school or early years' setting has to put in place some provision. Depending on the 'need' and the remedy, there might not be a statutory special educational needs and disability SEND assessment. This can last for a long time and is called 'School SEN' stage.
- 4.1.4 DFE has developed a flowchart of the SEN stage which is shared at appendix 1.
- 4.1.5 If there is a Statutory SEND Assessment the Statutory Assessment has to be completed in 20 weeks. In Sandwell we have been achieving 100% completion in 20 weeks and the national average is only about 60%. Sandwell is amongst the best performing Local Authorities in England.

- 4.1.6 The SEND Code of Practice provides guidance from the Department of Education to all schools and local authorities on how to carry out their responsibilities under the new arrangements. There is a guide specifically for parents around the new arrangements for children and young people with SEND.
- 4.1.7 In addition, the Council for Disabled Children has produced a series of leaflets for young people which explain the new SEND arrangements.
- 4.1.8 The SEND Code of Practice suggests that the more flexible and responsive a teacher's strategies are, the more likely it is that pupils with a range of learning needs will make adequate progress.
- 4.1.9 As soon as any difficulties are identified most children and young people with SEND will have their needs met by resources which are normally available in settings, schools and colleges. These could be in the form of additional staff support (e.g. classroom assistants), specialist equipment or different ways of teaching. The school may also seek advice from specialist educational advisory services such as Inclusion Support.
- 4.1.10 Every school in Sandwell has a teacher, the Special Educational Needs Co-ordinator (SENCO), who is responsible for co-ordinating support for pupils with SEN in their school.
- 4.1.11 Very occasionally, a child or young person will have a level or complexity of need that will require more resources than a setting, school or college can provide. In these cases, the school will ask for a Community Assessment Meeting (CAM) to be convened. At the CAM all parties (the child or young person, parents, school, other support agencies) will meet to look at the evidence and plan a way forward. This may result in the Local Authority deciding to start an assessment which could result in the issuing of an Education, Health and Care Plan (EHC Plan) which sets out in detail the resources needed and who should provide them. If an EHC Plan is issued it will be reviewed every year to ensure that the resources detailed in it are still appropriate to achieve the desired outcomes.

## 4.2 **Transition to Secondary School**

- 4.2.1 For children with SEND the transfer from primary school to secondary school can be difficult. Proper planning along with discussions and the sharing of information between schools is vital if the children are to be identified and supported effectively during and after the transfer. Inclusion Support has worked with schools in Sandwell to produce a suite of materials to support year 6 to year 7 transition. The SEND

Transition Plus materials are already in use in a number of schools in Sandwell and they will shortly be made available on the Local Authority Extranet to allow more schools to take advantage of the resources.

### **4.3 Education Health and Care Plans (EHCP)**

- 4.3.1 A legal document that describes a child or young person's special educational, health and social care needs. It explains the extra help that would be given to meet those needs and how that help would support the child or young person to achieve what they want in their life. A child or young person must have health and or social care needs that affect their education to be assessed, the Local Authority could refuse to assess if they did not think the individual required one. The Local Authority must decide whether to issue an EHCP once the assessment has taken place.
- 4.3.2 The community assessment panel consists of school teacher, educational psychologist, parents and health and social care representative. The panel looks at what support the school put in place and if the child requires additional support from EHCP. Should the panel determine the child needs additional support the EHCP is prepared. There is an appeal process if the parents were not satisfied that their child(ren) get enough support and no EHCP is put in place, parents cannot self-referral to the panel, it must be a referral from a Community Assessment Meeting (CAM).
- 4.3.3 The Community Assessment Meeting (CAM) consists of: school staff; staff from agencies that are involved with the family; an Educational and Child Psychologist; Inclusion Support staff and they must decide whether to request a SEND Statutory Assessment. If 'yes', this request is sent to the Local Authorities Assessment and Moderation Panel (AMP) who ascertain whether to carry out a Statutory Assessment or not. Once the Statutory Assessment is complete, the Local Authority's Provision Panel (APP) then considers the evidence and decides whether to issue a Note in Lieu of an Education Health and Care Plan or allocate additional resources (e.g. additional funding / a special school place / Focussed Provision place etc). If it is agreed to maintain an Education, Health and Care Plan (EHCP), a period of consultation is undertaken in order to ensure that the appropriate provision can be made. Parents can disagree and appeal the content of the Education, Health and Care Plan.
- 4.3.4 The 2017 Ofsted and CQC inspection had identified that 'Leaders recognised the need for multi-agency training regarding EHCPs. The quality of the reports from Health and particularly children's social care was often not good enough. Some reports referred to what they would

do for the child e.g. 'We will provide speech and language training', whereas the EHCP should refer to the child's special educational needs, the required provision, the required outcomes within an 'aspirational' outlook e.g. focussing on employment, independence, good health and social relationships.

- 4.3.5 The Clinical Commissioning Group (CCG) identified funding to be able to work with SEND officers to improve the quality of writing plans. A training programme for staff and managers in writing statutory SEND advice had commenced over a three-year programme for existing and new staff. Care Quality Commission (CQC) and Ofsted had indicated that they were interested in sharing the training as good practice.
- 4.3.6 A Lean approach had been adopted to review processes. The Statements SEN to EHCPs were on track there were about 80 statements remaining to be transferred by 31st March 2018. The SEND services are confident that this will be achieved.

#### **4.4 Child and Adolescent Mental Health Services (CAMHS)**

- 4.4.1 CAMHS are the NHS services that assesses and treats young people with complex emotional, behavioural or mental health problems.
- 4.4.2 CAMHS support covers depression, problems with food, self-harm, abuse, violence or anger, bipolar, schizophrenia and anxiety, to name a few.
- 4.4.3 There are local NHS CAMHS services around the UK, with teams made up of nurses, therapists, psychologists, support workers and social workers, as well as other professionals.
- 4.4.4 Sandwell Local Transformation Plan (LTP) has recently been refreshed as reported to Children's Services and Education Scrutiny Board on 5<sup>th</sup> February 2018. Sandwell and West Birmingham Clinical Commissioning Group worked with the Local Authority and third sector partners to develop the LTP Plan.
- 4.4.5 Sandwell's LTP 2017-18 refresh was submitted in October 2017, it was fully assured by NHS England in November and was approved by the CAMHS Board and the Health and Wellbeing Board. The document was published on the CCG website and on the Local Authorities 'Local Offer' website.
- 4.4.6 There was a misconception that all tiers of CAMHS were provided by the Clinical Commissioning Group (CCG), which was not the case. The four tiers of service are as follows:

- Tier 1 – Universal provision, supporting all young people’s emotional health and wellbeing and improving resilience. e.g. school nurses, teachers, youth workers, play leaders, support workers etc commissioned by all partners.
- Tier 2 – Low level intervention needed, emotional and behavioural issues (anger, anxiety, stress, some self-harm) none specialist. Multiple Voluntary Organisations commissioned by Local Authority e.g. Children’s Society, Black Country Women’s Aid, Kalidescope etc.
- Tier 3 – Specialist provision, diagnosed conditions. CCG commission from the Black Country Partnership Foundation Trust (BCPFT).
- Tier 4 – Very specialist and complex cases, requiring in-patient treatment. NHSE commissioned.

#### **4.5 Local Area Special Educational Needs and Disabilities (SEND) Review 2017 - Statement of actions**

- 4.5.1 Sandwell SEND provision is subject to Ofsted and CQC inspections. The recent SEND Ofsted and CCG inspection took place between 16<sup>th</sup> -20<sup>th</sup> January 2017. The inspection raised a number of significant concerns specifically highlighting failures of partner organisations to deliver adequate support and services to children with SEND. In particular services external to the council delivered through the Clinical Commissioning Group (CCG) and the Children’s Mental Health Service (CAMHS) were detailed for improvement.
- 4.5.2 The Local Area, including the Local Authority, had until April 2018 to fully implement the Special Educational Needs and Disabilities (SEND) reforms (2014 Children and Families Act). The purpose of the Cabinet report was to ensure that all Local Area agencies were fully sighted and engaged in the improvement process and that sufficient resource was identified to deliver the changes required in the upcoming 12 months.
- 4.5.3 The report to Cabinet on 22 March 2017 detailed the initial actions required in response to inspection outcomes. A further report to Cabinet on 14 June 2017 outlined the actions that had been taken and actions ongoing in order to address the key improvement issues.
- 4.5.4 The five areas of concern in the local area were:
- (1) The over-arching local area strategic leadership for SEND to hold agencies and people to account;
  - (2) Inadequacies in Children’s Social Care;
  - (3) Completion of Education, Health Care Plans (EHCPs) including the conversion of statements of special educational needs to

- Education Health and Care Plans;
- (4) Services to support Children and Adolescent Mental Health (CAMHS);
  - (5) Outcomes for children with SEND: academic, attendance, exclusions and paid employment.
- 4.5.5 The local area SEND partnership published Sandwell's Written Statement of Action in June 2017 detailing accountability structure, systems and structures and leadership.
- 4.5.6 The written statement of action was reviewed in October 2017. At the time the work group found that several actions had been completed and embedded. Robust monitoring was ongoing and progress was being made to deliver the actions in most of areas of concern.
- 4.5.7 The last Written Statement of Action review was carried out in December 2017 at which time all required reviews had been completed. The monitoring table of required outcomes, actions and monitoring process are attached at appendix 2. A further review from DfES was being finalised in 2018.

## **4.6 Working together**

- 4.6.1 CAMHS and the Local Authority work together to integrate provision and to promote the wellbeing of Children and young people who have special educational needs and/or disabilities.
- 4.6.2 It is importance for the Local Area SEND Partnership Board to have full consideration of a child's needs and to get everyone around the table. The multi-professional assessment process involved health input, health visitors and children's and adult's social care professionals, in addition to educational professional time which was a statutory service and resourced through High Needs Block (HNB) funding from Government, approximately £10,000 per child per assessment.
- 4.6.3 A Government funding formula would be used to allocate SEND funding to the school for SEN, the funding was not ringfenced. It was not known how much of the funding was used for SEN. It was clarified that the Government did not specify or ringfence how the money was used.
- 4.6.4 This school-based SEN funding (called 'The SEN Notional Budget) is allocated directly to schools who have the capacity to spend up to £6000 per child with SEN before a Statutory Assessment should be considered.

- 4.7.4 Most Sandwell Schools were using the SEN Notional Budget effectively, if they did not use it to help the child then that child's problems would probably grow. When a child was reviewed progress would be assessed and if the money was in place but no progress was found than a statutory assessment would be requested. Sometimes it would be found that a school had not implemented all the recommendations, but applied for additional funding; as EHCP funding was discretionary a Statutory Assessment could be refused. The Local Authority cannot insist that a school uses the SEN Notional Budget for SEN purposes and there are a few examples whereby schools do not spend the SEN Notional Budget on children with SEN.
- 4.7.5 Early intervention was considered the way forward to ensure a child has the support they need in place in school. Sandwell has reduced the number of exclusions considerably, with only 3 exclusions in 2017-18 (at the time of the scrutiny meeting). The cultural shift in Sandwell Primary schools and the PRUs in reducing the number of exclusions using 'BLISS' process has drawn interest from the regional group which has shown an interest in hearing more about the practices in Sandwell. Sandwell has sold the whole school approach for supporting positive mental health system under licence to over 50 Local Authorities – it will come back to us after 3 years to up-date the licence (The Whole School Wellbeing Charter Mark).
- 4.7.6 Exclusions can create mental health problems for young people, a range of illnesses fall under the banner mental health and it was important for people in contact with children and young people in their work to be aware of them. Courses were being developed through Therapeutic Mentoring scheme to understand the range and complexity of mental health conditions such as OCD. There were a range of initiatives from Public Health, a multi-agency approach to awareness training and a range of methods including online counselling and signposting to support on the website.

## **4.8 Summary of findings**

- 4.8.1 The report contains evidence gathered by the work group and officers to give a snap shot of SEND and CAMHS provision and how the services work in partnership for the best outcomes of the children and young people.
- 4.8.2 Initial findings were reported to Board on 5 February 2018. The Vice-Chair (Chair of the work group) highlighted that the work group had a better understanding of the issues and would provide a summary of findings which have been captured in a table below:

Summary of Findings	Issue	Finding / Comments
Ofsted and the CQC Inspection	To ensure that progress was being made and resources were in place to address the concerns raised during 16-20 January 2017 inspection. Many actions were progressing well but there were some concerns in the October review about the increase in numbers of SEN children and conversion of the EHCP statements.	Actions had been completed, training was taking place and many actions were embedded.
Statutory SEND Assessment	If there is a Statutory SEND Assessment the Statutory Assessment has to be completed in 20 weeks. In Sandwell we have been achieving 100% completion in 20 weeks and the national average is only about 60%.	Sandwell is amongst the best performing Local Authorities in England.
Information about SEN	Advice and guidance leaflets are available for schools, parents and young people. There is support there if people affected by SEN know where to go.	Promote information about SEN and ensure officers and staff at schools know how to signpost people.
Tiers of CAMHS provision	<p>There are four tiers of Children and adolescent mental health provision. In the current CAMHS provision all tiers were in demand, in Sandwell one in five young people had an emotional issue and it was suggested that many more in the community were not getting the support they needed.</p> <p>Children and young people struggle with socialisation and conflicts in and out of school, alongside other factors that impact on them and their family such as:</p> <ul style="list-style-type: none"> <li>o Poverty</li> <li>o Education</li> <li>o Lack of community based facilities for youth</li> <li>o Divorce rate</li> <li>o Parents at work</li> </ul> <p>Ofsted inspections of schools now include questions relating to emotional health and wellbeing of children and young people.</p>	<p>Local Authority currently commission provision. The contract expires in 2020.</p> <p>Evidence is being gathered to demonstrate the value of tier 2 provision.</p> <p>The Board recognised the value of supporting mental health and wellbeing in children and young people at an early stage to prevent progression to tier 3 provision for mental health services.</p>

<p>Tier 1</p>	<p>Tier 1 – Universal provision, supporting all young people’s emotional health and wellbeing and improving resilience. e.g. school nurses, teachers, youth workers, play leaders, support workers etc commissioned by all partners. Young people call the service BEAM which was commissioned by the Local Authority. The BEAM service works with children and young people 5-18 years.</p> <p>At the time of this review Public Health had 66 schools engaged in tier 1 provision (The Local Authority’s Charter Mark) and Inclusion Support Services were actively working with schools to promote tier 1 provision. The demand was greater than the capacity to deliver. Increased provision at tier 1 could avoid issues elevating to tier 2.</p>	<p>Need to encourage schools to priorities SEN funding for the benefit and wellbeing of children with special educational needs and that Tier 1 provision should be increased to work with young people earlier.</p>
<p>Tier 2</p>	<p>Tier 2 – Low level Intervention needed, emotional &amp; behavioural issues (anger, anxiety, stress, some self-harm) none specialist. Multiple Voluntary Organisations commissioned by Local Authority e.g. Children’s Society, Black Country Women’s Aid, Kalidescope etc.</p> <p>Current tier 2 service is commissioned by the Council – contracts were issued in February 2017 for three years.</p> <p>The point of access for tier 2 services has telephone number ‘0121 569 2611’ and from that first point of contact children and young people are signposted to the relevant support. There was also a referral process to follow and any parent with concerns could speak to schools or other professionals for details. Once a referral had been made there was a promise to make contact within 5 days.</p> <p>Tier 2 services include open access drop in sessions where children and young people can turn up and talk to someone and a digital online facility ‘Kooth.com’. Many young people access mediated chat rooms and self-help sections via Kooth.com. The approach has modernised the old</p>	<p>The council need to be more sighted on the area of CAMHS that they have commissioned (Tier 2). The Council was trying to put measures in place, but there was no requirement to provide tier 2 services.</p> <p>The Tier 2 provision was making a positive impact locally. The numbers of referrals to tier 3 specialist services are reducing as children’s needs are being met before issues escalate.</p>

	<p>appointment system and takes the stigma and worry away from appointments and one on one sessions.</p> <p>The new approaches in tier 2 were being shared by providers in primary and secondary schools through integrational participation. The tier 2 provision is making a positive impact locally. The Numbers of referrals to tier 3 specialist services are reducing as children's needs are being met before issues escalate.</p> <p>The Tier 2 Local Authority commissioned CAMHS service requires sustainability, and a commitment from the Local Authority to continue to fund after the current contract expires.</p> <p>Welcome the Single Point of Access established in Sandwell, for all children and young people's referrals to tier 2 and 3 services. The telephone number is 0121 569 2611.</p>	<p>The BEAM service will transfer to the Sandwell Children's Trust on 1st April 2018 along with the funding for the service. The contract for tier 2 services ends in 2020, the service could continue if adequate resources were identified by the Sandwell Children's Trust.</p> <p>Need to promote the single point of access number in Sandwell</p>
<p>Pre-school provision 0-5 year olds</p>	<p>Sandwell had funded early years work. The SEND and paediatrician team worked with 0-5 year olds. It was considered wrong to diagnose 0-2 year olds as having mental health issues as some tantrums were considered to be part of toddler stages. Some young children were being assessed and some diagnosed early however it was recognised that it was hard to determine if children were having developmental issues or frustration because they were unable to communicate. Speech and therapy session screening would determine the position.</p> <p>It would be better to assess a child when moving towards school age. There was an example given at Portsmouth where several children had been thought to be showing developmental difficulties but had made progress and moved back into normal range within a few months.</p>	<p>Early diagnosis and intervention ensure the children and parents get the support they need.</p>

<p>Green Paper Transforming children and young people's mental health provision</p>	<p>Transforming children and young people's mental health provision: a green paper is currently out for consultation until 2 March 2018. Although massively useful to look at children and young people's mental health many of the actions coming from the green paper would not come into effect until 2022 at the earliest.</p>	<p>Monitor development of the Green Paper post consultation.</p>
<p>Virtual mental health lead</p>	<p>Best practice at Lewisham Council was shared in relation to the green paper – a 'Virtual Mental Health Lead' who would attach to schools.</p>	<p>It was hard to see where a virtual mental health lead would sit in the current mental health offer, as a more wholistic approach was taken.</p>
<p>Looked after children</p>	<p>There were often difficult factors to take into consideration when considering looked after children, such as if a child's mental health was the reason they were looked after or if being a looked after child had contributed to their mental health.</p> <p>There was a disparity between the age of Local Authority responsibility for looked after children (25 years) and the age for LAC access to CAMHS services (18 years). At the age of 18 years young people were no longer treated under paediatric services and there would be a cost implication for equivalent adult mental health care.</p> <p>It was confirmed that the eligibility criteria for CAMHS services varies across the Country. In Sandwell eligibility age is 18 years in other areas this would be 16 years and a few areas were trying out provision up to 25 years.</p>	<p>Birmingham City Council had commissioned later years work 18 -25 years</p>

Partnership Working	The Children's and Wellbeing Emotional Health Group had been re-formed to consider and move forward the whole Emotional Health and Wellbeing (EHWB) agenda, including transformation of specialist CAMHS services.	Continue building partnership working.
Transformation of the BCPFT to 'Transforming Care Together'	<p>The management of change and transformation of the Black Country Partnership Foundation Trust to merge into a larger Trust had an adverse impact on the Trusts commitment to the SEND agenda, management of change, attendance of the Children and Adolescent Mental Health (CAMHS) Board and the staff changes had a further impact.</p> <p>Three organisations: Birmingham Community Healthcare NHS Foundation Trust (BCHC); Black Country Partnership NHS Foundation Trust (BCP); Dudley and Walsall Mental Health Partnership NHS Trust (DWMH) will integrate into one organisation, subject to approval by our regulator, NHS Improvement. The partnership is called Transforming Care Together (TCT). Transforming Care Together should have huge benefits for Mental Health Services across the area. The CAMHS service will have greater resource available 24/7 across the region, with the expertise pooled specialists and practitioners will be able to learn from each other</p> <p>The West Midlands Combined Authority carried out a commission on Mental Health Services. The WMCA Overview and Scrutiny Board was pleased to be able to participate in the work of the Mental Health Commission. The recommendations set out in 'Thrive' give great potential for delivering significant improvement to lives of people across the region.</p>	<p>Following the Ofsted/CQC report CAMHS and partners have engaged with training and meetings to work through the actions on the written statement of action.</p> <p>Monitor the progress of Transforming Care Together.</p>
Transforming children and young people's mental health provision: a green paper	<p>Open consultation on 'Transforming children and young people's mental health provision: a green paper'. Published 4 December 2017</p> <p>From: Department of Health and Social Care and Department for Education</p> <p>Summary - This green paper sets out the ambition that children and young people who need help for their mental health are able to get it when they need it. This consultation closes at midday on 2 March 2018.</p>	Need to monitor outcomes of the Green Paper consultation

## **5 CONSULTATION (CUSTOMERS AND OTHER STAKEHOLDERS)**

- 5.1 The Authority fully engages with partners, schools and other stakeholders to implement improvements in the written statement of actions and to deliver the Special Educational Needs and Disabilities (SEND) reforms (2014 Children and Families Act) by April 2018.

## **6 ALTERNATIVE Options**

- 6.1 The report highlights and supports a number of alternative options to deliver and strengthen the SEND agenda in Sandwell.

## **7 STRATEGIC RESOURCE IMPLICATIONS**

- 7.1 The DfE provided financial resource to assist Local Area in delivering the SEND reforms. The Cabinet on 22 March 2017 approved additional funding of up to £249,000 to complete the transfer of all statemented pupils to EHCPs to meet timelines a temporary dedicated transfer team was required.
- 7.2 The Local Authority Commissioned Tier 1 and 2 CAMHS Services in Sandwell. Statutory functions transfer to the Sandwell Children's Trust in April 2018, universal services will remain with the Authority.
- 7.3 The current commissioned services contract will end in 2020.

## **8 LEGAL AND GOVERNANCE CONSIDERATIONS**

- 8.1 Primary legislation:
- Education Act 1996
  - Learning and Skills Act 2000
  - Children and Families Act 2014
- 8.2 The Council has a general duty under the Children and families Act 2014. By 1 April 2018, local authorities must have transferred all children and young people with statements of SEN to the new SEN and disability system who meet the criteria for an EHC plan.
- 8.3 Local authorities must have conducted a Transfer Review - that is an EHC needs assessment in accordance with The Special Educational Needs and Disability Regulations 2014. During the transition period (1 September 2014 to 1 April 2018), local authorities had to comply with the 1996 SEN framework. This includes:
- Part IV of the Education Act 1996 (including Schedules 26 and 27) – referred to in this document as the '1996 Act';
  - The Education (Special Educational Needs) (England) (Consolidation) Regulations 2001;

- the Special Educational Needs Code of Practice, 2001 (referred to in this document as the ‘2001 Code’); and
- Inclusive Schooling: children with special educational needs, 2001. as applicable, in relation to children and young people with statements of SEN.

## **9 EQUALITY IMPACT ASSESSMENT**

- 9.1 An equality impact assessment relating to the Improvement Actions for Local Area SEND was completed 19 April 2017. Improving arrangements for Children and Young People with SEND will receive the appropriate provision in a timely manner resulting in improved quality of life.

## **10 DATA PROTECTION IMPACT ASSESSMENT**

- 10.1 There will be a migration of data and information from the SEND team to the Children’s Trust in relation to Tier 3 and 4 CAMHS.

## **11 CRIME AND DISORDER AND RISK ASSESSMENT**

- 11.1 There are no direct crime and disorder implications arising from this report.

## **12 SUSTAINABILITY OF PROPOSALS**

- 12.1 There are no direct sustainability implications arising from this report.

## **13 HEALTH AND WELLBEING IMPLICATIONS (INCLUDING SOCIAL VALUE)**

- 13.1 The SEND provision in Sandwell aims to improve outcomes for vulnerable children and families and to ensure children with educational needs are supported and benefit from the best possible start in life.

## **14 IMPACT ON ANY COUNCIL MANAGED PROPERTY OR LAND**

- 14.1 There is no direct impact on land or council managed property arising from this report.

## **15 CONCLUSIONS AND SUMMARY OF REASONS FOR THE RECOMMENDATIONS**

- 15.1 The Work Group has considered the initial findings from the evidence gathered and made some conclusions, as follows:

- There is good progress being made in relation to the ‘written statement of action’ from the Ofsted/CCG Inspection in 2017. All

actions are complete and becoming embedded into the service.

- Partners are starting to work together and engage in processes relating to SEND.
- There is a need to promote the importance of tier 1 and tier 2 services in Sandwell and to recognise the value of supporting mental wellbeing in children and young people at an early stage to prevent progression to specialist tier 3 provision for mental health services.
- The Education Health Care Plan EHCP process has been clarified and reviewed by the work group, there is some progress and partners are working together, engaging in training and the quality and number of EHCP statements conversion are improving.
- The single point of access telephone number in Sandwell is a good development and should be promoted.
- Need to monitor outcomes of the Green Paper consultation.
- Continue to monitor the development of Transforming Care Together.

## **16 BACKGROUND PAPERS**

16.1 Special educational needs and disability: managing the September 2014 changes to the system Advice for local authorities and their partners Fourth edition: October 2016

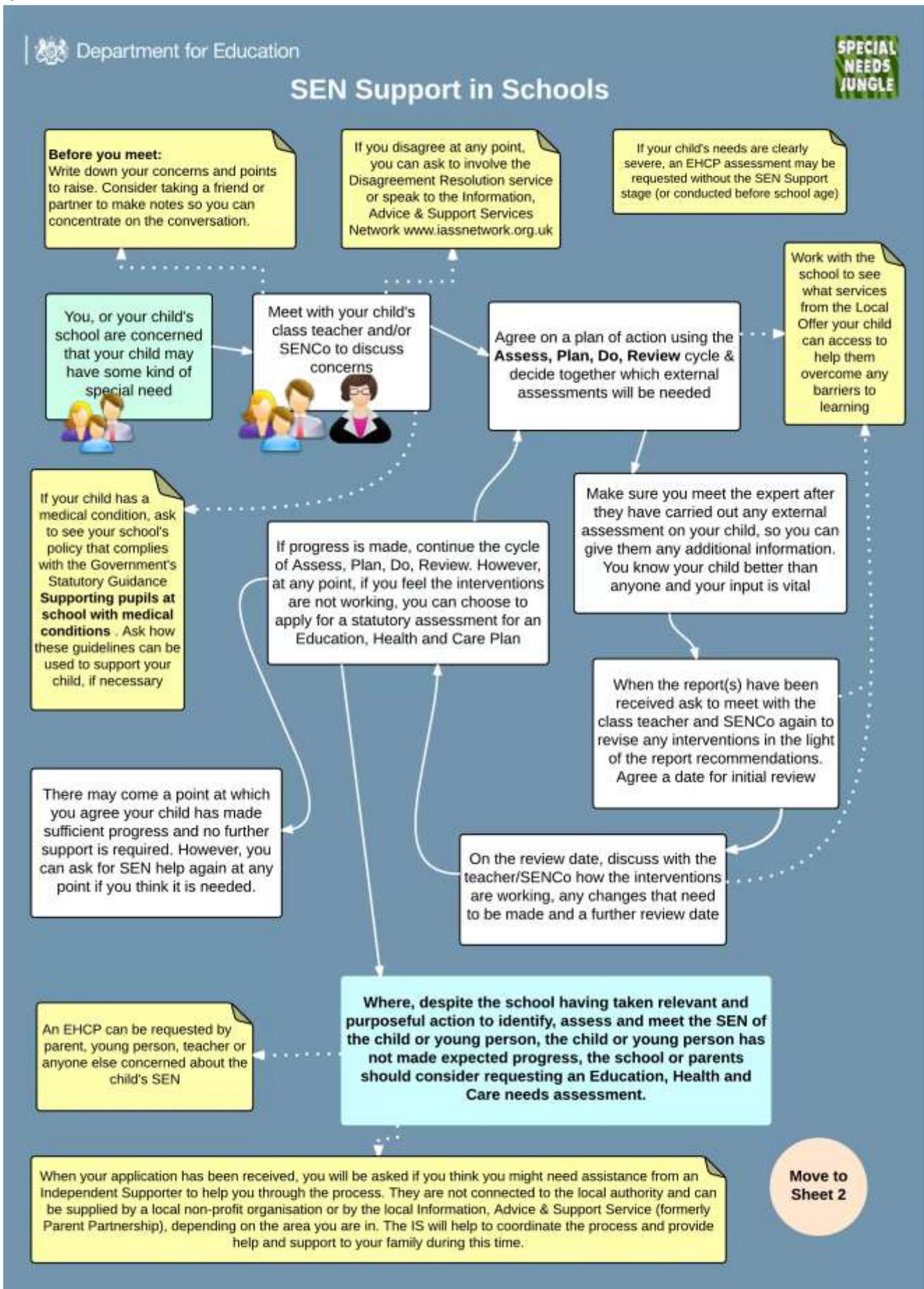
## **17 APPENDICES:**

17.1 DFE SEN flowchart



**Surjit Tour**  
**Director – Monitoring Officer**

V



5. Local Area Outcomes for Children and Young People (Refer to separate document Annex 1 'Outcomes 2020')					Progress (BRAG)			
<p>Appendix 2The local area is required to produce and submit a written statement of action to Ofsted that explains how it will tackle the following areas of significant weakness:  Paragraph 5 p.9  <i>outcomes for children and young people who have special educational needs and/or disabilities in terms of increasing academic progress, reducing absence and exclusions and increasing the proportion of young people who enter paid employment.</i></p>					Blue: completed and embedded Green: completed Amber: Progressing Red: little or no progress			
5.1 Ofsted/CQC Main Finding		Despite improvements, children and young people's needs are still not identified accurately enough. Some schools do not identify needs precisely and some do not record accurately. As a result, Sandwell has a much higher proportion of pupils identified as having moderate difficulties than the English average and recorded proportion of pupils with ASD is smaller than national average. PLEASE REFER TO SEPARATE SHEET FOR 2020 ASPIRATIONAL ATTAINMENT TARGETS			Monitoring Dates			
Required Outcome	Actions	Lead	Date	Evidence / Impact	May-17	Jul-17	Oct-17	Dec-17
a. Reduce over-identification of MLD in schools so proportion is more in-line with national	To undertake a strategic analysis of the identification of SEN in all schools and determine which schools are "over identifying" SEN. The results will then inform an effective intervention with identified schools as well as authority wide re-training.	SEND Adviser(s)	Apr-17	Identified sources of 'over identification' of SEN in schools and monitor schools levels of identification. % reduction in the identification of MLD by July 2018	Amber	Green	Green	Blue
b. All schools to receive a revised updated SEND handbook.	A development workshop for all Specialist Support Services to produce a revised handbook to use and distribute in schools. Specialist Support Services demonstrate use of the document to assist schools	SEND Adviser / Kevin Rowland	Sep-17	Increase accuracy of identification as evidenced in schools census data compare to national by July 18		Green	Green	Blue
c. Schools implement a clear criteria to distinguish between SEND and underachievement	To reassert Identification guidance as part of SENCO cluster groups. Schools to be sent updated information and offered training on identification. School SENCOs will be provided with training to more effectively differentiate between developmental delays and learning impairment	SEND Adviser	Dec-17	% reduction in the identification of SEN support pupils as evidenced in July 2018 SEN statistical release.		Green	Green	Green

5.2 Ofsted/CQC Main Finding		To increase the academic progress of children and young people who have special educational needs.				May-17	Jul-17	Oct-17	Dec-17
Required Outcome	Actions	Lead	Date	Evidence / Impact					
a. To close the gap in the rates of progress for pupils with SEND with all pupils nationally and all pupils in Sandwell	To disseminate key development points from Local Area Ofsted Inspection with schools via Head teacher Partnership Meeting and SENCo Cluster group meetings.	Director of Education, Learning and Employment and SEND Adviser	April 17	% increase in the progress of children with SEND as compared to the National Stats for ALL children. An incremental programme to be re-evaluated in 2020.					
b. To close the gap in the rates of progress for pupils with SEND with all pupils nationally and all pupils in Sandwell	To address accurate assessment and improving rates of progress of pupils with SEND at SENCo conference.	SEND Adviser	Jul 17	% increase in the progress of children with SEND as compared to the National Stats for ALL children. An incremental programme to be re-evaluated in 2020.					
c. To close the gap in the rates of progress for pupils with SEND with all pupils nationally and all pupils in Sandwell	To discuss rates of progress of pupils with SEND with individual Head teachers during School Improvement Adviser Autumn 2017 and Spring 2018 visits .	School Improvement Advisers	Sep-17	Targeted support for each 'priority' school to increase the rate of progress for children with SEND. An incremental programme to be re-evaluated in 2020.					

c. To close the gap in the rates of progress for pupils with SEND with all pupils nationally and all pupils in Sandwell	Inclusion Support to develop and pilot Advanced Inclusive Teaching training programme in selected schools and measure impact.	School Improvement Advisers	Dec-17	Evidence of pilot implementation and teacher assessments of improved practice and pupil progress 2020.				
d. To close the gap in the rates of progress for pupils with SEND with all pupils nationally and all pupils in Sandwell	To establish primary and secondary best practice sharing events through SENCo networks: showcasing strategies to support differentiated quality first teaching and specific evidence based intervention interventions: Autumn Term 2017	SEND Adviser and Specialist Support Services	Apr-18	% increase in the progress of children with SEND as compared to the National Stats for ALL children. An incremental programme to be re-evaluated in 2020.				
d. To reduce the difference in the rates of progress for pupils with SEND with all pupils nationally and all pupils in Sandwell	To design and introduce 'The Readiness for SEND Intervention Framework' for Secondary School to ensure that a school can provide appropriate and effective interventions for young people with SEND.	Specialist Learning Support Service	Jan-18	% of school completing the RfSIF and increasing the rate of progress of young people with SEND within each school.				
e. To close the gap in the rates of progress for pupils with SEND with all pupils nationally and all pupils in Sandwell	To pilot revised Sandwell SEND Quality mark in schools using school self evaluation and peer reviewers. Quality Mark to be revised by July 2017 Pilots to commence October 2018	SEND Adviser and Learning Support Advisory Teachers	Apr 18	% of school completing the Quality Mark and increasing the rate of progress of children with SEND within each school.				

<b>5.3 Ofsted/CQC Main Finding</b>		<b>To reduce or the number of fixed term and permeant exclusions received by children and young people with SEND</b>						
Required Outcome	Actions	Lead	Date	Evidence / Impact	May-17	Jul-17	Oct-17	Dec-17
a. To close the gap between the number of fixed term and permanent exclusions received by students with SEND compared with all pupils nationally and all pupils in Sandwell	Leadership for exclusions (Pex and Fxd Term) will provide schools with written guidance on exclusions in relation to SEN. This will include monitoring and strategies.	Manager for Reintegration and Exclusions	Jul-17	% reduction in the numbers of students with SEND receiving fixed term and permanent exclusions as evidenced by national datasets.				
<b>5.4 Ofsted/CQC Main Finding</b>		<b>To reduce the levels of absence for children and young people with SEND</b>						
Required Outcome	Actions	Lead	Date	Evidence / Impact	May-17	Jul-17	Oct-17	Dec-17
To close the gap between the levels of absence and persistent absence for pupils with SEND with all pupils nationally and all pupils within Sandwell	Leadership for attendance will provide schools with written guidance in relation to targets for SEND children and attendance monitoring and intervention	Manager for Prosecutions and Attendance	Jun-17	% reduction in absence and persistent absence for students with SEND				

5.5 Ofsted/CQC Main Finding	To increase the proportion of young people with SEND in paid employment							
Required Outcome	Actions	Lead	Date	Evidence / Impact	May-17	Jul-17	Oct-17	Dec-17
a To broaden the availability of supported internships within Sandwell	To increase the number of education providers. To increase the number of students participating in supported internships	Senior Manager - Disability Employment	Jan-18	% increase in participants % increase in education providers % increase in paid employment outcomes				
b. To participate in the pathfinder pilots following the Maynard Review for Apprenticeships.	To develop apprenticeships for people with learning disabilities/difficulties with an Education Health Care Plan. Pilot initiative.	Senior Manager - Disability Employment	Sep-17	% increase in number of young people with SEND accessing apprenticeships.				
c. To improve the availability of supported employment for young people with SEND	To develop pathways into employment for young people with SEND through the council's Supported Employment team and external partners (i.e. DWP).	Senior Manager - Disability Employment	Sep-18	% increase in referrals to the council's Supported Employment team. % increase in numbers of young people with SEND in paid employment				

## **Glossary of terms**

AMP	Local Authority Assessment and Modernisation Panel
BCPFT	Black Country Partnership Foundation Trust
CAM	Community Assessment Meeting
CAMHS	Children and adolescents Mental Health Service
CCG	Clinical Commissioning Group
CQC	Care Quality Commission
EHCP	Education Health Care Plan
LDP	Local Authority Provision Panel
SEN	Special Education Needs
SENCO	Special Educational Needs Coordinating Officer
SEND	Special Education Needs and Disability