Special educational needs and disabilities (SEND) scoping event 6 June 2018

Summary

What are the main themes emerging from the drivers, scope and purpose of the joint strategic needs assessment (JSNA)?

Ofsted	Transitions	Early intervention & need	Resources & need	Service provision
Ofsted inspection and written statement of action. A new code of practice for SEND. Other statutory requirements.	Children and young people moving through the education system and the impact of other life events on their SEND provision, physical and mental health and wellbeing.	Not enough early intervention to prevent an escalation of need. Population, service and needs projections to understand the future picture of health and SEND need.	There are capacity issues, funding/budget restrictions and potentially a lack of service provision for some areas but not others. Even 'Doing more for less' may not be sustainable. How do we focus and target resources.	Moving from a reactive to a proactive approach. Measuring services with an appraisal of their value and benefits. What is on offer in the districts? What should the delivery model look like for our services?
Understanding	The JSNA process	Partnership working	Health	Engagement
Lack of understanding of the roles of different organisations and what partners do. This includes what they can offer and bring to the JSNA.	A statutory responsibility to provide a JSNA for SEND, requested by health and wellbeing board. Those leading it should be from all sectors and organisations, widening the remit from just education.	Improving partnership working, including sharing data, intelligence and information. This means working collaboratively and not in isolation A wealth of data which isn't working for commissioners and providers as well as it potentially could.	Not having the bigger picture – the need to look at health and its wider determinants, rather than a focus on education only. Improving the health and wellbeing of the population and address inequalities.	Opinions and experiences of children and young people, their families and other service providers. Understanding the SEND experience from their perspective. How to get parents and children and young people to engage with services.

What are the drivers?

- Ofsted inspection of Lancashire County Council's children's services getting where we need to be.
- A written statement of action from inspection.
- A new code of practice aspirations, lives, jobs and relationships.
- A lack of data/intelligence around children and young people (CYP) with SEND and the general population.
- Current set up of service provision (health and social care) links between the two not always apparent.
- A dwindling public sector, an increasing third sector presence, and budget restraints for the NHS means changes to health and social care provision.
- Sustainability and transformation plan health and care services built around the needs of local populations.
- Barriers to accessing services.
 - Need an accurate picture of what services (including support services) are available.
- What are the barriers to inclusion for young people and their families?
 - Attitudes of professionals/others; physical; economic; social; and health.
- Local authorities supporting families not a statutory role, but signposting and focus on supporting communities.
- Clusters of special educational needs (SEN) in different districts; are we focusing our activities in the wrong area?
- The wider determinants of health, including the public realm, education, community safety, community resilience, housing, etc.
- Support for parents/carers forums.
- Resource allocation special educational needs coordinators (SENCO) and SEND provision.
- Schools are not all equal in terms of funding and might not have funds to support SEN pupils due to the way the funding formula works.
- Working towards better outcomes for children and families <u>Delivering Better Outcomes Together</u>.
- A preventative approach to health and wellbeing (Chorley Council) focus on early years.
- Giving CYP the best start in life and doing our best to make sure people can lead the best lives they can.
- Health inequalities children and young people with a learning disability will die at a younger age.
- The children and young people with SEND will become adults, some who will also have additional needs in adulthood and may be intensive users of services.
- Moving young adults from being dependent on services to independence.

- Preventing people from becoming disabled and dependent:
 - o partnership/joined up working;
 - whole system approach so people get the best possible outcomes;
 - \circ understand how we can work towards this; and
 - o understand the current and future profile across Lancashire.
- Equity of health outcomes lack of joined up working between education, health and care services.
- Improving the quality of education, health and care plans.
- Investing in work with parents, supporting them to parent their children.
- What are the needs? There is a difference between 'want' and 'need'. Some groups may shout louder and therefore get more services/support. How to meet the needs of all.
- Equity across the county of outcomes proportionate universalism in service provision.
- Main drivers should be about supporting resource allocation in three ways: geographically; by type of service; and consistency of offer across the county.
- <u>Health integrated care system</u> (ICS) implementation using innovative approaches to deliver integrated health and social care services.
- Impact of technology and use of technology to help with the JSNA.
- Making assumptions and not understanding the root causes of non-engagement with services, by parents/carers.
- Addressing the needs of the parents and supporting them to support their children.
- Understanding the SEND experience from the perspective of CYP and their families and getting their feedback on services and provision.
- Strengthening commissioning arrangements.
- An increase in poor mental health in children, young people and adults.
- What services have to be commissioned for 0-25 year-olds?

What is the scope and purpose of the needs assessment, what are the questions it should answer?

- How can we identify and meet need early enough and therefore be in the right place? Where could we have intervened earlier?
- Data/intelligence needed by August 2018 to help shape the commissioning plan (as per Ofsted action plan).
- Who is accessing services and how easy is it access services?
- How can we change the old model of working so there is more flexibility in services?
- How to move from a needs-based service. Can't afford an ever-increasing 'need' model. Addressing these needs early to prevent them getting more complex.
- What are the societal factors that mean something is going wrong early on, eg attachment disorder
- What is the time frame between presentation of need and when the education, health and care (EHC) plan is put in place?
- Early diagnosis is ok for those with 'apparent' need, but not all CYP have apparent need.
- Can early support prevent complex needs developing (is there any literature supporting this?)
- What are the trends in terms of types of needs? Are there more children with complex needs? Can we provide the types of need and expenditure slide (as per the event presentation) for Lancashire and districts?
- Knowing our population.
- What about those missing from roll? If funding is devolved to schools then they have an incentive to put any funding into those off roll.
- How does SEN link with fostering and adoption?
- Government policy is that money is given for a specific purpose, so none left for 'soft' stuff that could take years to deliver.
- Health conditions could be a priority, with data/intelligence requested around cancer, diabetes, obesity and other long-term conditions (such as asthma) that can impact on a child's education and SEND.
- Is there a correlation between family size and SEND need?
- Is there a relationship between SEND and exclusions?
- Data/intelligence around healthy lifestyle behaviours, barriers to these.
- Hypotheses about what the issues are?
- What wider determinants particularly affect children and young people with SEND (does it vary by district?)
- How many children don't go to nursery so not seen/picked up with SEND until primary school?
- What best practice is there (in terms of using funding from pupil premium)? Use case studies/research
- Is there a correlation between financial input and outcomes? Particularly around 'pupil premium' and 'pupil premium plus' funding.

- Who are falling through the gaps? Can we identify the CYP who may be missing out on services and support?
- Unmet need who are undiagnosed or misdiagnosed?
- How do we ensure adequate school places which support the needs of the child/young person?
- Can we identify spikes and dips (of need, diagnosis etc) across different areas and compare with national and other statistics.
- Transforming care NHS England.
- Linking health and social care.
- How can we know what services we have and need (for future), for example short breaks, social care.
- How can we be more proactive rather than reactive?
- How do we incorporate a graduated response to needs early intervention and those people who do not meet criteria for diagnosis who are potentially dropping through the system? (see diagram at the end of this document).
- How do we feed in qualitative data from the voluntary, community and faith sectors (VCFS) who are dealing directly with clients and could potentially have a rich store of evaluations and experiences, which could impact the JSNA?
- What services/support provide the best value for money. Are the outcomes commensurate with input? Worth checking to see if "it's what we've always done" is still relevant/valid and provides good value.
- Understanding of the current provision, culture and outcomes.
- Gather the perceptions of what is and isn't working from service users/clients and learn lessons from the past.
- Can we compare independent special school provision with local authority provision, for example: respite, exclusions, youth offending rates, GCSE results and preparing for adulthood?
- Do we have a shared data system with partners? Accurate data input is also vital to make the data meaningful, valid and useable.
- Develop a true partnership of working between all services.
- What are the similarities and differences with adults who had a SEN diagnosis accessing social/care services, compared to the general adult population accessing social/care services who did not? Can this be compared to help focus SEN services?
- What is the picture for CYP who self-fund and don't feature in Lancashire's system for SEND provision? Focusing on accommodation, education, access to services, health etc.
- What is the picture for those children from gypsy, Romany, traveller backgrounds?
- What are the links with home schooling and SEND?
- Ensuring there is a connection with other transformation programmes.
- Where can we find evidence of best practice? What have other areas done, what is achievable in terms of outcomes?

- Identify what a 'gold standard' service would look like.
- Is there evidence to suggest delivery models should differ in localities and how do we target resources?

Who are the stakeholders?

These are not presented in any order of importance

- Young people with SEND and adults who have previously had a SEND diagnosis
- Health commissioners including clinical commissioning groups (CCGs) and commissioning support unit (CSU)
- SEN parent forums
- School forums
- Head teachers, school leaders, SENCO
- SEND providers and commissioners
- Pupil Tracker Team at Lancashire County Council
- Children and young people and their families (service users)
- Youth offending teams
- Health services (including public health and acute hospital trusts)
- CAMHS/emotional health services
- GPs involved with learning disabilities work
- Enhanced services clinical commissioning groups
- Overnight respite services
- Housing
- Education
- Police, fire and ambulance
- Voluntary, community and faith sector
- District councils/border authorities
- Occupational health/therapy
- Children's services
- Educational psychologists
- JSNA leads

Note: people aren't often involved due to time/work constraints therefore have to be selective and decided 'what is in it for me?' particularly if there are no expenses offered or limited funding available from the partner to implement findings/priorities.

What decisions will this JSNA influence?

- Inform discussions with providers and schools.
- The local offer.
- <u>Portage</u> and early intervention.
- Effective service planning and service commissioning.
- Supporting the SEND provision across partnership organisations.
- Planning between social and emotional mental health.
- Planning for adult social care: how likely is it that the children and young people with SEND today become the adult social care users of the future.

What outcomes should there be?

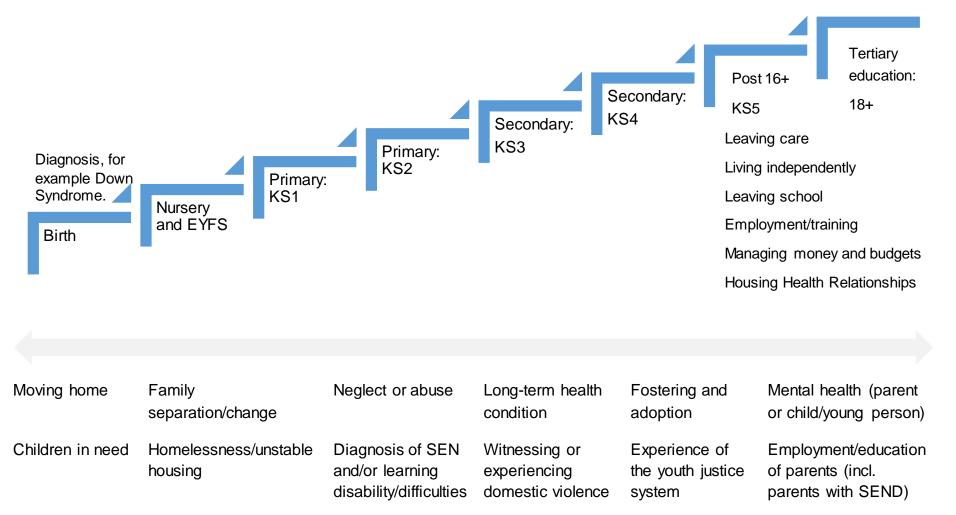
- 1. A piece of work that is fit for purpose and can contribute to Lancashire's SEND local offer, with clear aims and objectives.
- 2. An understanding of organisational roles for SEND, with improved collaboration between partnership organisations.
 - Clinical commissioning groups (CCGs), GPs, voluntary, community and faith sector (VCFS), commissioning support unit (CSU) and others in the Lancashire SEND partnership
- 3. An agreed data/information sharing agreement between partners.
- 4. Mapping of existing local partnership pathways, from diagnosis and across transition points (for reference).
- 5. Planning ahead for needs, including population projections.
- 6. Appropriate promotion of the 'local offer' (a quick win).
- 7. A system to measure improvement of outcomes (including timescales for individuals and the general population).
- 8. Increased involvement and engagement of stakeholders including:
 - Parent/carer forums
 - <u>POWAR</u>

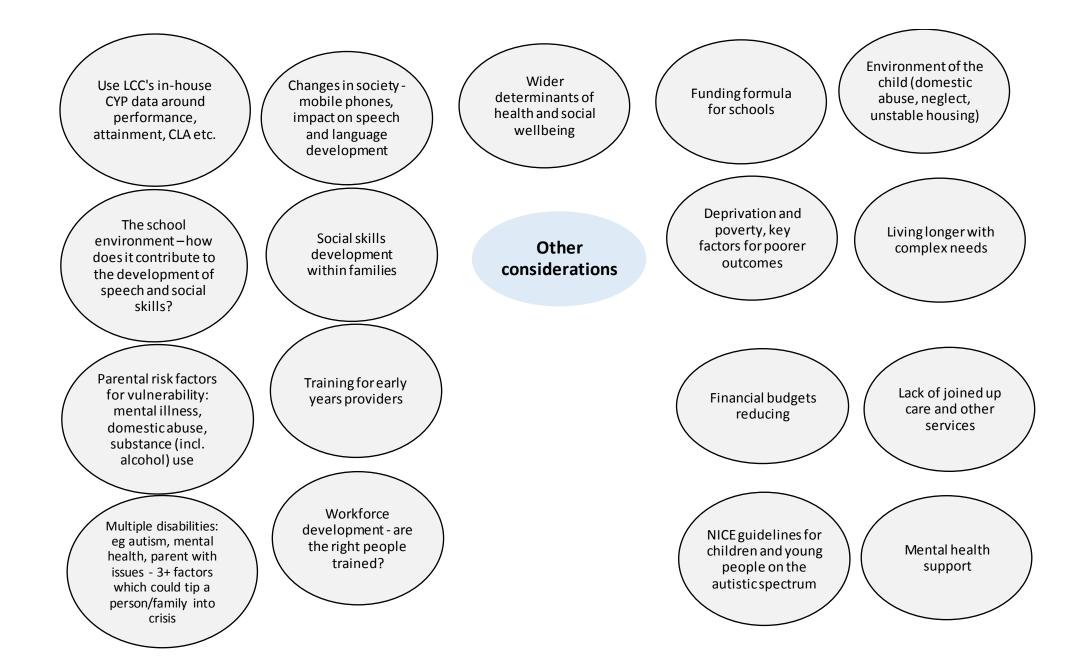
What outputs should there be?

- If a report is provided, it needs to be of a size that is manageable to allow it to be updated annually. It should also have:
 - o intelligence that is clear, concise and well presented; and
 - o has a consideration for the wider audience, for example ensuring the terminology used is clearly explained.
- If using dashboards, these need to be straightforward and simple to understand. The SEND dashboard example was felt to be poorly presented, hard to understand and difficult to use with too much information on each page.
- Provide a skills and education profile for the different age groups, along with other demographics, with comparators with statistical neighbours, Lancashire County Council and districts 'hard' data.
- Information from families and various forums (qualitative data).
- Links to <u>Public Health Profiles</u>, which provide a range of data around school-age children indicators such as school readiness.
- Infographics with key headlines/summaries that can be presented to partners, such as schools.
- Webpage content needs to be clear and concise and the presentation improved (<u>SEND</u> local offer).
- Maps showing SEND provision and residence of young people with SEND (see maps provided in the workshop as examples). Also, including respite and other care could provide a better picture.
- A central database with easy access to a wide-range of data.
- Mapping with children in need (CIN), free school meals (FSM) and SEN would provide a useful overview of actual numbers.
- An output (as part of a dashboard or other) which identifies out of area placements (out of county and out of area).
- Data and figures showing how many children are on waiting lists for services, are there targets, are they being met/exceeded?

Other considerations/wider determinants

The transition points in education are linear between the early years foundation stage (EYFS) and the five key stages (KS). Other changes (outlined below) can have an impact on a child's life, health and wellbeing and these can occur at any age. These are all potentially trigger points for SEN or other consequences, such as poor mental or physical health. There may be many other factors that can influence a child's development and progression and not all are captured here.





Lancashire SEND Graduated Response

