

Peterborough Special Educational Needs Written Statement of Action

November 2019



Contents

70

Foreword	Page 3
Introduction	Page 4
Governance and accountability	Page 6
Written Statement of Action	Page 9

Foreword

Senior leaders across the Council, the Clinical Commissioning Group, Public Health and their partners welcome the inspection report which tested the progress of the local area in meeting the requirements of the 2014 SEND reforms, finding areas of both strength and weakness.

Areas of strength included the growing impact of the SENCo network, the strength of coproduction with parents and young adults and the increasing influence of young adults in strategy through initiatives like the 'Big Youth Shout Out'. Inspectors also identified areas of weakness and leaders are determined to address these within the resources available so that we do all that is possible to improve outcomes for children and young adults with special educational needs and disabilities (SEND). We are committed to working more effectively together to ensure that children, young adults and their families lead happy, healthy and fulfilled lives.

Our pledge to improve the life outcomes for children and young adults with SEND is expressed in our joint SEND strategy with Cambridgeshire - 'Special Educational Needs and Disabilities (SEND) is Everybody's Business'. We developed this strategy by listening carefully to what children and young adults with SEND and their families and carers told us about their experiences and views. We worked closely with families, children and young adults to produce this strategy and commit to the same level of participation and engagement to ensure the delivery of the delivery of the written statement of action below.

We have high aspirations for all our children and young adults and want to ensure they have the right support that is provided in the right place and at the right time so that they can thrive and be the best they can be. We will ensure that the written statement of action drives robust, sustainable and high-quality improvements in their lives and the lives of their families.

Councillor Lynne Ayres, Cabinet Member for Children's Services, Education, Skills and the University

Introduction

Between 10th June 2019 and 14th June 2019 Ofsted and the Care Quality Commission (CQC), conducted a SEND inspection of Peterborough local area to judge the effectiveness of the implementation of the Special Educational Needs and Disability (SEND) reforms in the Children and Families Act 2014 and to review the area's provision for children and young adults with SEND.

Three inspectors were involved: Heather Yaxley HMI, Deborah Mason, Ofsted and Paula Morgan, CQC. As part of their work the inspectors reviewed documentary and published evidence, the Local Offer website and information from a 'webinar' with parents/carers which took place in the week before the inspection. The inspectors carried out the on-site inspection over 5 days with formal verbal feedback provided on the fifth day. Inspectors spoke with children and young adults with disabilities and/or special educational needs (SEND), parents and carers, local authority and NHS officers. They visited a range of providers and spoke to leaders, staff and governors about how they were implementing the special educational needs reforms. Inspectors looked at a range of information about the performance of the local area, including the local area's self-evaluation. Inspectors met with leaders from the local area for health, social care and education. They reviewed performance data and evidence about the local offer and joint commissioning.

Findings

Ofsted and the CQC published the final report on 13th August 2019. The report indicates that the inspectors agreed that their findings chimed with Peterborough's own self evaluations and many areas of strength were identified. However, they identified significant weaknesses in the 5 areas set out below:

1. Joint planning, including commissioning, and intervention are not sufficiently well established to make sure that all agencies and services play an active role in meeting the requirements of 2014 disability and special educational needs reforms.
2. There is no quality assurance framework for the local area's work for children and young adults with SEND. Intended outcomes for children and young adults are not targeted, measured or evaluated well enough to inform leaders about the impact of the work to implement the reforms effectively.
3. The current arrangements for the DCO in relation to the implementation of the reforms do not allow the postholder to fulfil the obligations of the role sufficiently.

4. Early support is well embedded for children in early years, but does not follow through in all areas of the lives of children and young adults as they get older. It takes too long for children, young adults and families to get the support they need.
5. The provision for young adults aged 18 to 25 is not sufficiently developed to make sure that young adults have the full range of opportunities and support that they need as they move through into adulthood

As a result, the local area is required to produce a written statement of action (WSOA) by 15th November 2019. OFSTED will respond to the WSOA within 10 working days of receipt with an evaluation on whether the WSOA is fit for purpose. If required, a further 20 days is provided for resubmission of an amended version.

Response

The significant areas of weakness identified in the inspection report are addressed in this written statement of action (WSOA).

The written statement of action has been coproduced by the SEND partnership Group and refined by a smaller 'drafting' sub group of the partnership group and signed off by the SEND Executive Board.

The written statement of action will be shared widely through the Local Offer, networks, newsletters, conferences, partners and stakeholders including Peterborough Family Voice (our local Parent Carer Forum), and our SEND Independent Advice and Support Service.

The area is committed to involving children and young adults with SEND and their families in decisions about services for them. Coproduction is well embedded in local practices. Parents/carers have participated at all stages in the development of this written statement of action. Parents/carers will be involved in all working groups and we will also take every opportunity for children and young adults to be included in the improvement work.

The WSOA has five workstreams which mirror the five areas of weakness identified by the inspection. Each workstream is sponsored by a senior officer (AD equivalent level or above) from the LA or CCG. These senior officers are accountable for the delivery of actions within their workstream. The senior accountable officer (SAO) has an identified multi – agency delivery team of officers at manager level or above with whom they will ensure the delivery of the actions set out.

The WSOA is separate from other existing action planning although there will inevitably be areas of overlap, particularly with the joint SEND action plan associated with the joint SEND strategy. The WSOA addresses areas specific to the weaknesses raised by the inspection and is intended to cover a period of approximately 18 months. The joint SEND strategy expresses the long-term ambitions of the joint area but it is anticipated that the areas of work covered by the WSOA will enhance work to implementation of the strategy.

Governance and accountability

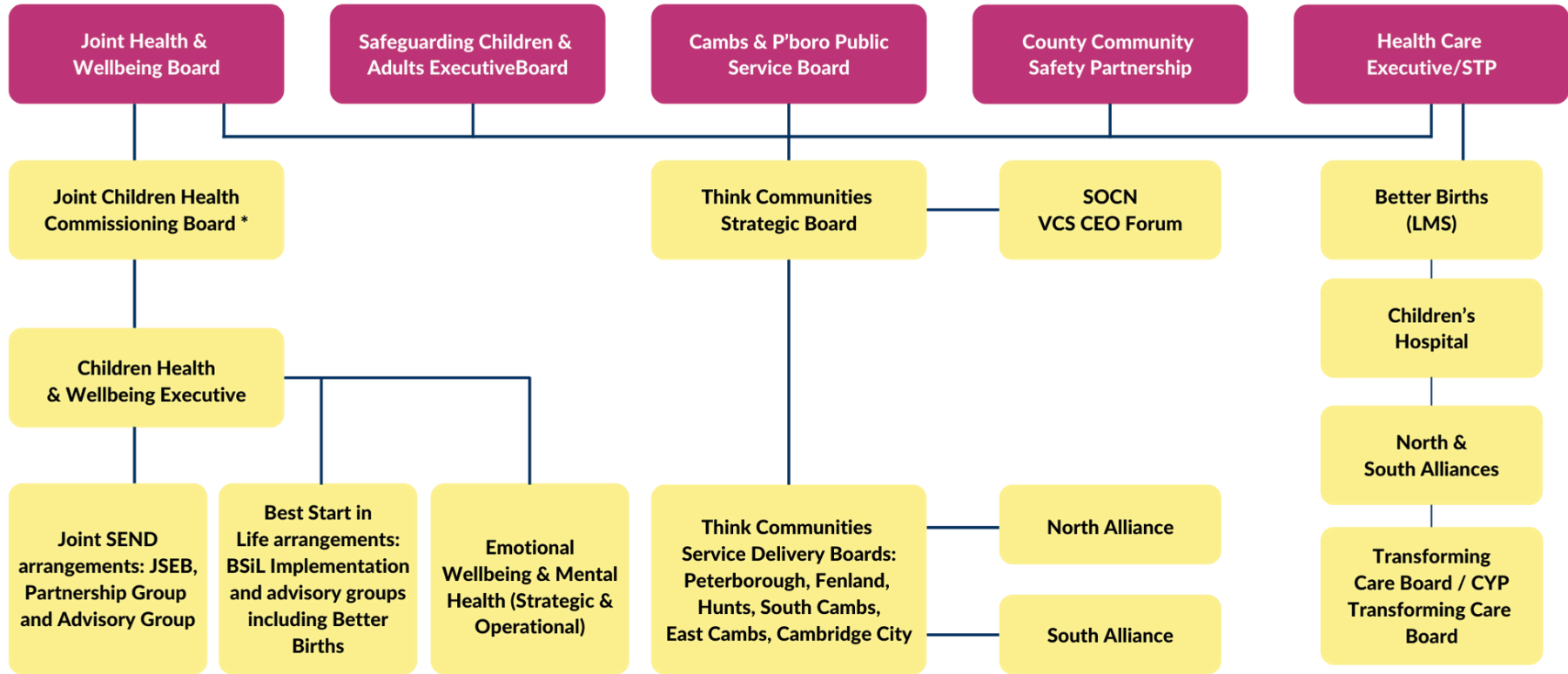
The Cambridgeshire and Peterborough Child Health and Well-Being Commissioning Board has responsibility for the commissioning of integrated services to support children and young adults, including those with SEND. The Commissioning Board is supported by the Child Health Executive Board, which comprises of commissioners and providers. These Boards report to the Health and Well-Being Board. Membership of the Executive includes Chief Officers from the Local Authority, Cambridgeshire and Peterborough Clinical Commissioning Group, Cambridgeshire Community Services, Cambridgeshire and Peterborough Foundation Trust, Health Watch, Local Hospitals, Public Health, Family Voice, Pin Point (parent/carer forums).

The SEND Executive Board reports into the Commissioning and Executive Boards. It is responsible for the development and delivery of the SEND Strategy and Plan. It will have oversight of the delivery of the written statement of action in Peterborough, escalating any areas of concern to the Commissioning or Executive Board, depending on the nature of the concern. The SEND Executive Board is supported by Peterborough and Cambridgeshire Partnership Groups who are responsible for driving delivery of the Strategy and Action Plan.

This governance structure is illustrated in the following diagram.

***The Joint Children Health Commissioning Board feeds into the CCG Boards, LA Committees and Health Executive/STP where appropriate.**

NB: a children 0-25 with complex needs (including tier 4) group has recently been established to discuss the Tier 4 list and ensure plans are in place for discharge and agree funding, address and resolve areas of contention between the LA and health, update on the work developing provision for children with disabilities, consider any MOJ young people who will need provision. This group will feed into the Children Health & Wellbeing Executive.



Full and thorough consideration has been given to the way in which each of the workstreams will be managed. Having considered carefully all of the options a deliberate decision has been made to give responsibility to senior accountable officers for ensuring that work progresses. Each senior accountable officer has a multi-agency team with whom they will deliver the workstream. The emphasis has been deliberately placed upon impacts and outcomes and the need to work together in partnership to get the job done. The senior accountable officer will be responsible for ensuring the collation of progress reports to the SEND Executive Board. This approach is designed to promote the importance of the SEND agenda across all partners and provide strong leadership to ensure responsibility across all partners for delivery – everyone is actively ‘at the table’. The senior responsible officer will oversee the allocation of tasks within each workstream and it is anticipated that these responsibilities may sometimes be joint across agencies and/or will alter as work progresses.

The use of a BRAG rating has been agreed to provide an at a glance summary of progress. Some of the actions set out have already been completed since the inspection.

The ratings are as follows:

Blue – complete

Green – on track

Amber – behind schedule

Red – not started/risk

A column has been added to identify the resource implications of actions as follows:

AR – Additional resource is or may be required

ER – Actions covered by existing resource

Written Statement of Action

Workstream 1: Joint planning and commissioning including intervention

Senior Accountable sponsor: Wendi Ogle-Welbourn DCS & Chair of the Child Health & Wellbeing Commissioning and Executive Boards

Delivery partners: Child Health Commissioning & Executive Board Members, Family Voice (parent-carer forum) representative, Sheelagh Sullivan (Head of SEN and Inclusion Services), Graham Puckering (Head of 0 – 25 Service), Jackie Cozens (Local Offer Lead), Jo Dickson (Communications), Toni Bailey (Assistant Director SEND), Tom Barden (Business Intelligence), Siobhan Weaver (Designated Clinical Officer)

Significant area of weakness that needs to be addressed:

Ofsted and CQC said: “Joint planning, including commissioning, and intervention are not sufficiently well established to make sure that all agencies and services play an active role in meeting the requirements of 2014 disability and special educational needs reforms.”

Outcomes (what we intend to achieve)	Ref	Implementation (Actions - what are we going to do)	Resource Required	Key milestones (Action tracker)	Deadline	BRAG + date
1.1 There is a clear and ambitious joint commissioning strategy, including effective service delivery arrangements, for children and young adults (0 – 25) with SEND that ensures: <ul style="list-style-type: none"> all services play an active role in meeting the requirements of the SEND reforms issues raised at inspection are prioritised Impact	1.1a	Coproduce a joint SEND commissioning strategy that will : <ul style="list-style-type: none"> be based on identified needs build on a gap analysis monitor delivery of commissioned services sets priorities for improvement and puts in place an action plan to rectify any deficit in provision 	ER	Needs assessment initiated and agreed by the Joint Child Health Commissioning Board (JCHCB)	Nov 2019	Nov 2019
				Baseline of needs identified by families is recorded	Jan 2020	
				Mapping existing resources against needs and identify gaps in meeting needs	April 2020	
				SEND commissioning strategy in place that ensures robust monitoring of commissioned services	June 2020	
				Commissioning of evidence based interventions within existing resource envelope to close gaps	June 2020 to	

<ul style="list-style-type: none"> • Services are commissioned / delivered to meet identified agreed needs leading to children and young adults getting access to appropriate provision • Evidence of children, young adults and families co-producing strategy ensuring that the views of all are heard and acted upon • Improved cross agency commissioning arrangements ensure all services and agencies play an active role in addressing the requirements of the SEND reforms 				with procurement and delivery of services secured	April 2021	
<p>Impact</p> <ul style="list-style-type: none"> • Young adults and families have positive experiences of services commissioned to meet their needs 	1.1b	Establish and undertake an annual 'Family Voice' Survey to seek families views on how well their needs have been met by commissioned services	ER	Establish and record the baseline of family views from implementation of the commissioning strategy	June 2020	
			ER	First Family Voice survey one year on shows improvement in how well they think their needs have been met through commissioned services	July 2021	

Impact <ul style="list-style-type: none"> Underperformance challenged and addressed leading to improved services for young adults and families Priorities outlined to increase family and user confidence in services 	1.1c	Develop a data set (using the council for disabled children's framework) to evidence performance of services against the SEND strategy and Plan. Monitor the data set at the SEND Executive Board, celebrating good performance and challenging underperformance and agreeing actions to address.	ER	Agreed cross agency data set in place	Feb 2020	
				Benchmark of priorities from children and families collated	Feb 2020	
				Quarterly reports to SEND Executive for monitoring performance from April 2020 show progress towards achieving the outcomes in the strategy and feed into commissioning process (1.2)	April 2020	
1.2 Outcome: Commissioning issues raised at inspection are prioritised and gaps closed Impact <ul style="list-style-type: none"> All services across health, education and social care have knowledge of access to equipment services so that equipment is provided efficiently. Families and young adults report to professionals, each time the 	1.2	Develop a local area jointly commissioned (Peterborough and Cambridgeshire) equipment provision service for children and young adults with SEN & Disabilities	AR	Mapping of current arrangements for assessment and provision of all equipment including medical technology	Nov 2019	
				Review and gap analysis complete and presented to JCHCB	Jan 2020	
				Proposed integrated equipment service proposal presented to JCHB with commissioning recommendations taken to JCB and COT	April 2020	
				Implementation and mobilisation and service in place	Oct 2020	

equipment is provided, that they are satisfied with the timeliness of the service						
Impact <ul style="list-style-type: none"> Service delivery provided in line with NICE guidance and national recommendations so that children and young adults are provided with an adequate supply of products 	1.2b	Review the pathway for provision of continence products	ER	Review of referral, assessment and products pathway complete	Dec 2019	
				Publication of the revised pathway on the Local Offer website	May 2020	
Impact <ul style="list-style-type: none"> SEND children and young adults access to OT and Physiotherapy Services improved in line with agreed key performance indicators (see 4.3) 	1.2c	Complete the joint commissioning of the OT and Physiotherapy service Integration and Transformation Plan to ensure improved access to OT services	AR	OT Integration and transformation plan in place	April 2020	
				Joint service specification for OT created	Dec 2020	
				Balanced Model© implemented through series of facilitated workshops	Dec 2020	
Impact <ul style="list-style-type: none"> Children and young adults who require services from Community Nursing will benefit from services that provide care up to the age of 18 years 	1.2d	Complete a review of Children's Community Nursing Services to identify provision required to meet nursing needs of children with complex health up to the age of 18 years	ER	Complete review and implement recommendations	Oct 2020	
1.3 An ambitious SEND strategy and action plan (developed jointly with Cambridgeshire) will be in place and the commitment of all partners will	1.3	Formally launch the joint Peterborough/Cambs SEND strategy, Pledge and associated action plan in partnership with parent /carer forums.	ER	SEND communications group established to coproduce and implement a communication strategy	Sept 2019	Sept 2019
				Formal launch of joint SEND strategy and Pledge	Jan 2020	

<p>be evidenced by their sign up to the 'SEND pledge'</p> <p>Impact:</p> <ul style="list-style-type: none"> Families and professionals say that the SEND strategy and Pledge are making a difference in services for SEND, in line with the 2014 Reforms Feedback from the Peterborough community shows that they are aware of the SEND strategy and vision that "SEND is Everybody's Business" 		<p>Set up a SEND communications group to formulate and implement a communication strategy that:</p> <ul style="list-style-type: none"> supports the implementation of the Strategy, the Pledge and action plan, includes a clear plan for seeking feedback on how they are making an impact 		Communications strategy and action plan agreed by SEND Executive Board	Jan 2020	
				Action plan progress monitored at bi-monthly SEND Executive Board	From Feb 2020	
				SEND pledge is circulated to all services involved in delivery to children and young adults with SEND and signed up to by 85% of those circulated	April 2020	
				One year on review of the impact of the Pledge shows clear evidence of commitment and action by key service delivery partners	April 2021	
<p>1.4 Children, young adults, families and professionals know where to go for help and information</p> <p>Impact</p> <ul style="list-style-type: none"> Surveys carried out by Family Voice (having established a baseline) show that families report improvement in knowing how to access services for children and young adults with SEND and the timescales involved 	1.4a	<p>Improve and raise awareness of the Local Offer working with Family voice to:</p> <ul style="list-style-type: none"> Create a Parent Participation page on the Local Offer Information on the Local Offer reviewed and extended to include a new page to describe Short Breaks Redesign the Local Offer postcards with contact details Co-produce a guide to panel decision making 	ER	Parent participation page in place	Oct 2019	Oct 2019
				Short breaks information page included	Oct 2019	Oct 2019
				Establish baseline of parent views from Family Voice survey about parental satisfaction regarding service info on the local offer	Dec 2019	
				Postcards redesigned	Dec 2019	
				Agree a system to ensure that information about services on the Local Offer is kept up to date	Jan 2020	

leading to greater levels of satisfaction	<ul style="list-style-type: none"> • Improve the descriptions of the health information including a description of pathways and timescales • Establish a SEND newsletter for parents, schools and professionals • Develop a suite of SEND factsheets, including revised information about and promotion of Personal Budgets and Personal Health budgets 	Health services access arrangements published on the Local Offer	Jan 2020	
		Increasing use of the parent participation page over time as evidenced in reports to Executive Board	From Feb 2020	
		Guide to panels produced	Feb 2020	
		Suite of health information updated	March 2020	
		Suite of SEND fact sheets and SEND newsletter published	Sept 2020	

Workstream 2: SEND Quality Assurance

Senior Accountable sponsor: Jon Lewis/Alison Bennett

Delivery partners: Toni Bailey (AD SEND), SEND quality assurance officer (appointment pending), Siobhan Weaver (DCO), Graham Puckering (Head of 0 – 25 service), Sheelagh Sullivan (Head of SEN and Inclusion Services), Senior officer from attendance team (appointment pending), Family Voice representative, Helen Whyman (Senior Public Health Information Analyst), Tom Barden (Business intelligence), Chris Stronberg (Head of IT), Jess Conway (Peterborough SENCo)

Significant area of weakness that needs to be addressed:

Ofsted and CQC said: “There is no quality assurance framework for the local area’s work for children and young people with SEND. Intended outcomes for children and young adults are not targeted, measured or evaluated well enough to inform leaders about the impact of the work to implement the reforms effectively.”

Outcomes (what we intend to achieve)	Ref	Implementation (Actions - what are we going to do)	Resource Required	Key milestones (Action tracker)	Deadline	BRAG + date
2.1 At a strategic level, key decision makers know how well the local area is improving outcomes for children and young adults with SEND and where improvements are required Impact <ul style="list-style-type: none"> Reports to and minutes from the SEND Executive Board provide assured evidence of the outcomes for children, young adults and their families from March 2020 	2.1	Coproduce a local area quality assurance framework that will include; <ul style="list-style-type: none"> collating existing quality assurance arrangements setting up the system for monitoring quality of provision and outcomes for children and young adults in independent settings setting up a process for tracking the achievement of the outcomes that matter (see SEND strategy) for children and young adults with an EHCP 	AR	Quality assurance post agreed	Sept 2019	Aug 2019
				Quality assurance post holder in place	Feb 2020	
				Current QA arrangements collated	Feb 2020	
				QA framework in place	March 2020	

		<ul style="list-style-type: none"> agreeing a quality assurance mechanism for testing satisfaction of children and young adults that services they receive are specific to their needs 		Monthly reports to the SEND partnership group are used to track progress	March 2020	
2.2 All delivery partners understand their responsibilities concerning EHCPs (particularly annual reviews) and annual review processes and timelines conform to statutory expectations Impact <ul style="list-style-type: none"> Feedback regarding annual review processes increases and the majority (over 80%) of parent/carers/young people who engage express satisfaction with all aspects of the EHCP process, including the quality and accuracy of advices from all partners Timeliness of new EHC needs assessments remains high (over 85%) and the majority of decisions regarding annual 	2.2a	<p>We will improve the quality and timeliness of the EHC needs assessment and review process by:</p> <ul style="list-style-type: none"> Production of a targeted recovery plan to address annual review backlog Implementation of new EHCP processing system Use of the new QA post to further develop the multi-agency EHCP audit group – to include new arrangements to audit the timeliness and quality of multi-agency information and advice to the process that build upon the baselines already established Review of feedback arrangements to include annual reviews and new ways of engaging with families in receipt of new EHCPs New IT system for implementing the statutory process operational 	ER	Targeted annual review recovery plan produced	Nov 2019-	Nov 2019
				Newly received requests for assessment and annual reviews are logged on to the new system	Dec 2019	Nov 2019
				Audit arrangements reviewed and revised plans in place with the support of the new QA post	March 2020	
				Feedback arrangements reviewed and all new arrangements in place	March 2020	
				Data migration to new IT system complete and system fully operational, including reporting facilities	March 2020	
				Rolling multi-agency training programme agreed and implementation started	April 2020	

<p>reviews are made within timelines (over 90%)</p>		<ul style="list-style-type: none"> • A rolling programme of training and support around the EHC needs assessment and review process is agreed and implemented with the cooperation and contribution of all partners • Reports to SEND Executive Board are produced by the QA post informed by data and feedback from services and families 		<p>Comprehensive reports to SEND Executive Board including both quantitative and qualitative data in place</p>	<p>April 2020</p>	
<p>Impact</p> <ul style="list-style-type: none"> • Sufficient capacity within the local authority to improve timeliness and quality of EHCPs impacting on quality of provision for children and young adults with EHCP's due to quicker delivery of agreed plans / reviews 	<p>2.2b</p>	<p>New posts agreed to support statutory responsibilities around EHCPs within the LA, schools and settings and health partners</p>	<p>AR</p>	<p>New posts agreed by SEND Executive Board</p>	<p>Dec 2019</p>	
<p>2.3 Outcomes for children and young adults in out of area placements match the quality and expectation of what was commissioned</p> <p>Impact</p>	<p>2.3</p>	<p>Robust contract monitoring arrangements are developed, agreed and implemented with all partners, including the use of regional arrangements</p>	<p>ER</p>	<p>Contract and monitoring arrangements in place</p>	<p>Feb 2020</p>	
				<p>First highlight report provided to Board to include data about the extent and use of out of area placements, building upon baseline data already available</p>	<p>Feb 2020</p>	

<ul style="list-style-type: none"> Leaders know what is happening from highlight reports to Board of the progress of children and young adults with an EHCP that show that out of area placements deliver commissioned outcomes for children and young adults 						
<p>2.4 There are processes in place to increase leaders understanding about the extent of part time placements in schools for children and young adults with SEND</p> <p>Impact</p> <ul style="list-style-type: none"> The Local Authority is clear about extent of part time placements in schools for children and young adults at SEN support and EHCPs Reduction in use of part time timetable provisions by 30% by July 2021 	2.4	<p>Establish a system for monitoring the use of part time placements for children and young adults with SEND</p> <p>Produce and present revised guidance regarding use of part time tables to schools and settings</p>	ER	<p>Guidance developed and presented to schools</p> <p>Baseline numbers on part time timetables collated for children and young adults with an EHCP</p> <p>System established for monitoring use of part time placements</p> <p>First highlight report to Board</p> <p>LA partners agree with providers a focus on reducing part time table provisions by 30%</p>	<p>Sept 2019</p> <p>Feb 2020</p> <p>Feb 2020</p> <p>July 2020</p> <p>July 2020</p>	<p>Sept 2019</p>

Workstream 3: Role and arrangements for the DCO
Senior Accountable sponsor: Marek Zamborski
Delivery partners: Karlene Allen (Head of Children and Maternity services Commissioning and Transformation, CPCCG), FV representative, Siobhan Weaver (DCO), Ali Mayern (SEND Health Co-Ordinator, CPCCG), Alison Hanson (Head of Service Speech and Language Therapy, CCS NHST), Lorraine Cuff (Head of CAMHs Neurodevelopment Team, CPfT), members of the SEND Health Advisory Group (C&P)
Significant area of weakness that needs to be addressed: Ofsted and CQC said: “The current arrangements for the DCO in relation to the implementation of the reforms do not allow the postholder to fulfil the obligations of the role sufficiently. ”

Outcomes (what we intend to achieve)	Ref	Implementation (Actions - what are we going to do)	Resource Required	Key milestones (Action tracker)	Deadline	BRAG + date
3.1 The arrangements in place for the Designated Clinical Officer (DCO) role ensure that the system fulfils the objectives of the SEND reforms. Impact <ul style="list-style-type: none"> DCO is able to fulfil the priorities set out in the WSoA and the 1st year priorities of the SEND Strategic Action Plan, measured through milestone target dates (reviewed at the SEND Partnership Group) with quarterly and annual reports to the CPCCG COT on progress of SEND. 	3.1	Develop and present a costed options appraisal to CPCCG Chief Operating Team (COT) which details the need to improve the current arrangements and capacity of the DCO role within and Children’s Complex Cases service.	AR	Options appraisal for DCO capacity and recommendations presented to COT	Oct 2019	Oct 2019
				Interim arrangements to relieve immediate pressure on DCO with medium term planning for increased resource into service development	Oct 2019	Oct 2019
				Financial agreement for additional resource requirements to increase the capacity of the DCO arrangements	Nov 2019	
				Recruitment processes commenced	Dec 2019	

				Develop a detailed SEND reporting mechanism for COT (1/4 update and annual reporting)	Dec 2019	
				Additional capacity in the Children' Complex Cases team to support the CCG DCO role established	March 2020	
<p>3.2 Health professionals play an active and equal part in the EHC needs assessment, preparation of EHC plans and review and removal of EHCP's.</p> <p>Impact</p> <ul style="list-style-type: none"> Children and young adults will have their health needs, provision and desired outcomes, which are consistent with current professional knowledge, detailed in their EHCP. These will be measured through EHCP audit processes (see 2.3 e) and the 6 monthly 'deep dive' EHCP audits for children and young adults with complex health needs. Feedback from children, families and schools/FE colleges will indicate that they have had a good experience where healthcare professionals have jointly planned their child or young person's EHCP 	3.2	<p>Develop and implement the "Improving the effectiveness of joint working and planning of health partners, within EHC Plans" Quality Improvement Initiative project.</p> <p>This QI project will:</p> <ul style="list-style-type: none"> Test the established EHCP processes, including the health advice template and training offered, against a new approach to facilitate the physical and mental health sectors to think more joined-up and person-centred for children and young adults (0-25 years) with SEND Provide individual health services with targeted, facilitated workshops which promote ownership and change of practices to engage with the EHC planning requirements relevant to their own service delivery methods. 	ER	Review and enhance the terms of reference of the SEND Health operational working group to include the role of SEND Health Critical Friends	Nov 2019	
				Use data from audits to identify up to 4 health teams that would benefit from targeted facilitation in the 1 st phase of the project	Nov 2019	
				Develop initial workshop session and test with critical friends	Dec 2019	
				Baseline established for each service using the SEND self-assessment tool	Jan 2020	
				Develop the role and facilitation skills of the SEND Health Champions to support delivery of the QI project	Feb 2020	
				Engage with SENCo network to develop feedback mechanism from schools for their experience of health	Feb 2020	

<ul style="list-style-type: none"> Maintain the compliance of timescales for the EHCP initial request processes measured through monthly data from the CCG EHCP single point of access. 		<ul style="list-style-type: none"> Create SEND Health ‘Critical Friends’ to work alongside providers who will facilitate ways of working that effectively implement the requirements of EHC planning Create a set of local good practice examples from stories, data and intelligence gathered by critical friends to inform future facilitation sessions. Introduce measurements of progress with a SEND self-assessment tool for health provider services. Develop a process for DCO to monitor and agree final EHC plans. 		involvement in EHC planning processes		
<p>3.3 There is an increase in the uptake of learning disability annual health assessments for 14 – 25 year olds</p> <p>Impact</p> <ul style="list-style-type: none"> Increase from 39% to 50% of uptake by the least likely to attend group (14 – 17 year olds) by April 2021 Increase to 75% from 55% of 14 – 25 year olds attend their annual health check by April 2021 	3.3	DCO, with the PfA Health group will facilitate learning disability annual health check workshops to create an action plan for the local area in order to increase the number of young adults aged 14 – 25 who attend their LD AHC	ER	EHCP audit for post 14 years shows that the annual health check has been discussed at the annual review meeting. First report May 2020	May 2020	
				Establish a baseline from feedback from young adults that they know what an annual health check is and how to get one	May 2020	

Workstream 4: Getting support early

Senior Accountable sponsor: Raj Lakshman (Consultant in Public Health Medicine/Karen Moody (Head of Prevention and Early Help Services)

Delivery partners:), Karen Hingston (Head of Early Years), Kathryn Goose (Mental Health Commissioner), Lorraine Cuff (Head of CAMHS Neurodevelopment, CPfT), Joanne Carr (CPfT), Family Voice representative, Siobhan Weaver (DCO), Sarah Bernard (Manager Early Years Specialist Service, including Portage)

Significant area of weakness that needs to be addressed:

Ofsted and CQC said: “Early support is well embedded for children in early years, but does not follow through in all areas of the lives of children and young people as they get older. It takes too long for children, young adults and families to get the support they need.”

Outcomes (what we intend to achieve)	Ref	Implementation (Actions - what are we going to do)	Resource Required	Key milestones (Action tracker)	Deadline	BRAG + date
4.1 The principles of Early Support are effectively embedded for children and young adults as they get older in line with the SEND Code of Practice Impact <ul style="list-style-type: none"> Fewer part time timetables and increased access to reception for children with SEND due to better 	4.1a	Extend the opportunity to stay on or be accepted onto the Early Support pathway for children up to the end of Reception	ER	Targeted training, advice and support provided for early years and reception staff	August 2020	
		Undertake survey, in partnership with Family Voice, to establish baseline data to track the immediate and future impact of the change in approach		Support for children to the end of Reception and their families in place	Sept 2020	
				Survey and evaluation of extended offer to inform further roll out completed	July 2021	

<p>understanding and available support</p> <ul style="list-style-type: none"> Families report in the Family Voice annual survey a better transition experience for their child from early years settings to reception For the first time the Healthy Child and BSiL programmes have a sharper focus on children and young adults with SEND 	4.1b	<p>Support for SEND is clearly set out in Best Start in Life (BSiL) and Healthy Child Programme (0 – 19) to:</p> <ul style="list-style-type: none"> improve identification of need improve coordination of support for SEND across children and young adults' services and identify KPIs in order to measure progress towards improving outcomes 	ER	<p>Clear reference to SEND is within the Every Contact Counts work stream of Best Start in Life to ensure a well skilled workforce trained to identify needs to support early identification, and consistent messages across all services embedding the 'SEND is everybody's business' ethos</p>	March 2020	
				<p>Evaluation framework developed for the BSiL programme</p>	March 2020	
<p>4.2 Children and young adults with SEND are identified early to ensure they can access the holistic range of help they need in a timely manner</p> <p>Impact</p> <ul style="list-style-type: none"> Feedback in Early Help reports shows that children / young adults with SEND and parents and carers of children with SEND understand how to access Early 	4.2	<p>Review access to support via Early Help and other routes to identify potential blockages or delays to include:</p> <ul style="list-style-type: none"> review of available information review of multiagency pathways and access to support establish processes for collecting and evaluating data for children and young adults with SEND receiving Early Help 	ER	<p>A review of all professionals and parent / carer information leaflets on Early Help pathways to support</p>	April 2020	
				<p>Implementation of a multi-agency review panel in Early Help for all requests for support to ensure children / young adults with SEND receive support in a timely manner</p>	April 2020	

Help support and demonstrate success in navigating towards required support				Baseline of child / young person and parent/carer views on clarity of pathways to access support; provision of support and timeliness of support established	April 2020	
				Baseline of numbers of children and young adults with SEND in receipt of Early Help recorded	April 2020	
4.3 Children and young adults with SEND have access to health services, in particular mental health services in a timely manner Impact <ul style="list-style-type: none"> Access targets are clearly defined and measured which allow timely interventions for children and young adults 	4.3a	Co-Produce a set of SEND Key Performance Indicators across health services to introduce a common approach to measuring performance in SEND which includes reference to equitable waiting time targets for children with SEND.	ER	Initial contractual proposals to providers based on initial evaluation	Dec 2019	
				Finalise initial set of KPIS by March 2020 – contractual round	March 2020	
				Monitor KPIS via monthly contract meetings – ongoing in 2020	Ongoing from March 2020	
				Providers collect data	April 2020	
				Review and calibration of KPIS	Dec 2020	
				Adjustments and business as usual performance mgt	April 2021	
Impact <ul style="list-style-type: none"> Agreed access targets from mental health services are met so that children and young adults are supported by mental health services that identify needs early 	4.3b	Implement the CPFT Children’s Mental Health remedial action plan (NHSE/I) so that children and young adults who require assessment and treatment from NHS mental health services will have access to these services within nationally agreed targets.	ER	2 weekly remedial action plan meetings to monitor progress of reduction in waiting times are set up	Jan 2020	
				Joint action learning events agreed between CAMHS services and the SENCO	Aug 2020	

<p>and provide information advice and support that improves outcomes for them</p> <ul style="list-style-type: none"> • Parents/carers report improvement from 2019/2020 baseline that they are listened to and given consistent advice 		Redesign workstreams to achieve routine and urgent appointments in a timely manner		network to promote the graduated response within the emotional health and wellbeing pathway delivered across services		
				Children will be assessed within 18 weeks from referral for routine appointments	April 2020	
				Children will be assessed within 12 weeks from referral for routine appointments	April 2021	
				Workstreams are redesigned	April 2021	
	4.3c	Understand the population of children and young adults with a mental health need including a specific focus on children and young adults with SEND.	ER	Update and refresh the NHS Mental Health Local Transformation Plan	Dec 2019	
		Undertake baseline assessment of parental awareness in regard to mental health services		Complete a Mental Health Needs assessment to identify whole population needs and how SEND is highlighted in the mental health Local Transformation Plans key lines of enquiry	March 2020	
		Develop information delivery for parents / carers to outline graduated response to Mental Health support		Focus groups with Children and Young adults to develop outcomes	July 2020	
				Use NHSE Key Lines of Enquiry (KLoE's) with focus on sections relevant for SEND to create an action plan	Sept 2020	

Workstream 5: Provision and opportunities for young adults aged 18 - 25

Senior Accountable sponsor: Debbie McQuade

Delivery partners: Graham Puckering (Head of 0-25 Service), Elizabeth Sullivan Ash (Post 16 Lead SENI Services), Matt Oliver (Service Manager Community and Interventions for Targeted Youth Support Service), Family Voice, Special school and College representative x 2 tbc, Siobhan Weaver DCO

Significant area of weakness that needs to be addressed:

Ofsted and CQC said: “The provision for young people aged 18 to 25 is not sufficiently developed to make sure that young people have the full range of opportunities and support that they need as they move through into adulthood.”

Outcomes (what we intend to achieve)	Ref	Implementation (Actions - what are we going to do)	Resource Required	Key milestones (Action tracker)	Deadline	BRAG + date
5.1 There is clarity about the range and availability of opportunities across the local area for 16 – 25 year olds with SEND Impact <ul style="list-style-type: none"> Surveys conducted through the local offer and young adults’ groups show that young adults and their families say that the 	5.1a	Review the local offer to ensure: a) that there is clarity for young adults and their families about what support is available from health, social care and education b) any gaps are identified c) that there is a clear education offer d) that transition pathways across each service from children’s to adult services are clearly described	ER	Gaps in information on the Local offer are identified	Feb 2020	
				Gaps in the information about (c,d,e and f) are closed	Sept 2020	

Local Offer provides them with the information they need to access opportunities and the services available		e) that support and opportunities for 19 – 25 year olds are well represented f) that there are clear descriptions of the range of options for activity across 5 days for young adults Post 16 with an EHCP g) conduct survey focussing on effectiveness of the local offer		First survey of views of young adults on additional information reported on the Local Offer	Sept 2020	
Impact <ul style="list-style-type: none"> Coordinated and streamlined approach to developing opportunities leading to more young adults accessing support to lead independent lives Young adults experience more holistic 5 day planning across all services and in the community 	5.1b	Integrate all strategic work across the Preparation for Adulthood (PfA) arena to: <ul style="list-style-type: none"> Establish one steering group Endorse existing workstreams and identify gaps Identify agreed outcomes for all activity Ensure integrated partnership working in every workstream so that all offers are holistic Explore and trial a transitions post in at least one local special school in partnership with local colleges	ER	New PfA steering group in place and overarching action plan agreed	Feb 2020	
				All agreed PfA workstreams established	April 2020	
			AR	Plans for transition officer role explored and agreed with potential trial implementation from Sept 2020	April 2020	
5.2 In order to address one of the specific areas of weakness identified during the inspection a priority focus will be to ensure that: Health services transition arrangements for 16-25 year olds with the most complex health needs are person centred and organised well	5.2a	Transition Arrangements (movement from children to adult services) for each provider service are clear through: <ul style="list-style-type: none"> Review of the CCG improvement plan to ensure this area is addressed Production and implementation of a transitions protocol for all services provided through CCG 	ER	Review the 2017 Improvement Plan for CCG provider services	Nov 2019	Nov 2019
				Ensure all current transition pathways are detailed on the local Offer	January 2020	
				Strategic transitions protocol coproduced with CCG and providers	June 2020	
				All new transition protocols implemented	April 2021	

Impact <ul style="list-style-type: none"> Children and young adults experience clear and person centred transition arrangements between children's and adults health services 		for children and young adults with SEND				
	5.2b	Develop the role of the Mental Health Transitions worker to support children and young adults with complex Mental Health and SEND to transition into adult services	AR	SEND training required for Mental Health Transition worker identified and delivered	March 2020	
				Data collected and presented to SEND Executive Board to support understanding of the number of children with mental health needs and SEND being supported by the service and successfully transitioning to adult health services	July 2020	