

North Somerset Council

Report to the Children & Young People Policy & Scrutiny Panel

Date of Meeting: 11 March 2021

Subject of Report: SEND Action Plan Update

Town or Parish: All

Officer/Member Presenting: Sheila Smith, Director of Children's Services

Key Decision: No

Recommendations

Members of the panel are recommended to:

- i. Note the update on the SEND Action Plan and the initial response to the LGA recommendations
- ii. Consider the highlights and risks identified
- iii. Identify any responses necessary via the Chair of the Panel, who sits on the SEND Programme Board

1. Summary of Report

The attached paper provides the panel with an update of progress on the SEND action plan, which was provided at the June 2020 meeting. This paper notes specific actions and risks, and grades each area of work as green, amber or red based on the risk. Finally, the recommendations of the recent LGA Peer Review and feedback from the Department for Education and NHS England are considered in terms of our current plans.

2. Policy

In devising a strategy for the delivery and improvement of services it is important to note that the Department for Education and Ofsted expect coordination and strategic oversight of services at a 'local area' level, including collaboration between statutory and non-statutory partners to ensure that services are delivered coherently and effectively across the education, health and care landscape. While the Local Authority is the commissioner and in some cases the provider of many of these services, it also assumes the primary role in terms of maintaining the strategic oversight and coordination of the local partnership.

The Strategy & Action Plan, along with other partnership activity is monitored by the [SEND Programme Board](#). This is chaired by the Director of Children's Services, and includes in its membership both Cllr Gibbons, Executive Member for Children and Young People's Services, and Cllr Griggs, Chair of this Scrutiny Panel. A proposed review of the Board's Terms of Reference in March 2021 will ensure that its work aligns with the Children's Improvement Plan.

3. Details

The SEND Action Plan was agreed by partners across the local area in January 2020 alongside our first joint SEND Strategy and Co-production charter. The aim of the plan was to provide an overall strategic view of the programme of work required to:

- Bring together all remaining actions required to meet the issues raised in the Ofsted/CQC Local Joint Area Review (LJAR)
- Detail further actions required to ensure that outcomes are sustainable, and that the impact of our work on the lives of children and young people can be demonstrated

The plan had a horizon of two years, with a review to be undertaken by the SEND Programme Board in early 2021 as per the attached document. It should be noted that each area of work was expected to be subject to more detailed delivery planning, including development of timescales, by partners.

Highlights of the work undertaken since the update in June 2020 include:

- The reduction in the rate of 'refused assessments' (which are often the result of inappropriate referrals by partners) from 50% to 6%
- The agreement to jointly fund the Supportive Parents SENDIAS service and North Somerset Parent Carers Working Together forum with BNSSG CCG on a three-year agreement, providing some certainty and sustainability for these key services.
- The use of accurate projections and analysis to ensure that capacity in key services was improved and capital projects supported
- A range of capital projects are now at various stages of positive progress: a second site for Baytree School's expansion, a new Free School supporting children with Social, Emotional and Mental Health Needs (SEMH) and hubs at mainstream schools to support children with Autistic Spectrum Conditions.
- Additional investment in CAMHS and forthcoming expansion of Off The Record pre-CAMHS services into North Somerset
- Relationships with parents and carers are improving, with considerable progress made in delivering new guidance documents
- Our Inclusion Summit took place in November 2020 and renewed a commitment to inclusion and mutual support across mainstream and special schools

Risks noted include:

- There is continued pressure in terms of increased assessment requests, EHC plans and requests for places in specialist provision – projections show this increase is set to continue
- The rate of EHC assessments delivered within the 20-week statutory timescale is recovering, but still low (16%) following issues with Educational Psychology capacity
- A significant number of the 'refused assessments' which we receive result from partners being unable to access CAMHS mental health services for children with anxiety and EHCPs being seen as a 'last resort' by schools.
- While the equity of health provision across the BNSSG footprint is improving and clearer leadership around SEND health services is in place, there are further actions needed to agree how complex care packages are jointly commissioned.
- Waiting lists for Autism assessment are still too long despite improvement, with parents reporting little support whilst on the journey to diagnosis
- Parents' confidence in home to school transport arrangements remains low following challenges in September 2020

- There is still some way to go in ensuring that parents are engaged in all decisions about services, and in particular to engage children and young people in co-production. Plans for this work have been heavily impacted by Covid-19
- Further improvements in the use of technology to support the EHC system need to be progressed, including funding the online EHCP portal.

4. Consultation

No specific consultation has taken place regarding this update, however a comprehensive co-production charter underpins this work. It is the aim of all partners to ensure that Children and Young People also have a voice in decisions about SEND services – and this work will progress when Covid-19 restrictions are eased.

5. Financial Implications

There are no specific implications arising from the adoption of this strategy and action plan. However, individual projects within the plan may result in specific financial changes which will be detailed as required.

6. Legal powers and implications

SEND services are delivered primarily by Local Authorities and Clinical Commissioning Groups via powers arising from the Children & Families Act 2014, further detailed in the SEND Code of Practice which was most recently revised in May 2020.

7. Climate change and environmental implications

None

8. Risk management

None

9. Equality Implications

Services for children with SEND, their parents and carers support specific vulnerable groups within the community. The strategy and action plan includes actions to ensure equitable, needs-led access to support services across education, health and care.

10. Corporate Implications

The majority of the activity included within the action plan requires action by Children's Services, or by our partners in schools and NHS bodies. Some cross-directorate and corporate activity may be required to support individual actions such as those requiring capital programme management or impacting on the work of the Integrated Transport Unit.

Author:

Mike Newman
Strategy & Policy Development Manager
Children's Services

Appendices:

SEND Action Plan Review (attached)

Background Papers:

- [Children & Families Act, 2014](#)
- [SEND Code of Practice 2015 \[revised May 2020\]](#)
- [North Somerset Local Area Written Statement of Action \[October 2018\]](#)

North Somerset Local Area – SEND Programme Board Action Plan – Version 2

Progress Review – February 2021

Part 1 – Review of SEND Action Plan (Originally adopted in January 2020)

Area 1 - Identifying Needs				
What we will do?	How we will do it?	Who will lead delivery?	How will we monitor success?	Highlights & Issues
<p>1.1 We will ensure that sufficient SEND Officer and Education Psychology resource is made available to provide advice and support to schools and to enable timely EHCP assessments, enabling improved identification of children with SEND and assuring consistent access to high quality professional reports</p> <p><i>[Ref: Identification and EHCP assessments, MI report Autumn 2019 p3, para 1-6]</i></p>	<ul style="list-style-type: none"> We will use SEND MI and projections to identify future requirements and build a case for investment We will explore opportunities for investment in technology and process efficiencies (<i>such as those in 4.1 below</i>) to release SEND team resource for operational tasks. We will investigate options for resourcing and commissioning EP services to meet in-year shortfall We will renegotiate the position with SSE to secure sufficient resource in future years We will monitor local rates of identification and assessment against national and regional benchmarks in order to inform our strategic approach 	<p>Wendy Packer, NSC</p> <p>-</p> <p>Head of Education Partnerships – TBA</p>	<ul style="list-style-type: none"> Sustained compliance with 20-week EHCP timescales despite capacity challenges Monitoring of waiting times, rate of assessment requests and assessment outcomes in regular SEND MI reporting 	<ul style="list-style-type: none"> ECHP projection model has proved accurate and informed demand and expected service needs EP requirements analysed and provision increased for 2020/21. 20-week performance beginning to recover post-EP shortage and associated Covid delays – but remains low at 16% (was 100% in 2019/20) LGA noted improved quality of more recently completed EHC assessments and plans Longer waiting times encourage parents to

					seek private medical and education reports – these are costly, and can result in disputes later in the process and potentially tribunals. Monitoring of this will need to be undertaken jointly by NSC and BNSSG.
1.2	<p>We will reduce the time spent awaiting diagnosis on the autism pathway and will ensure that parents receive appropriate jointly commissioned support before and after diagnosis</p> <p><i>[Ref: ASD/SLCN need and SCAMP, MI report Autumn 2019 p5, para 10-11 & Written Statement of Action, ASW2]]</i></p>	<ul style="list-style-type: none"> • We will ensure that the commissioned pathway provides a responsive service where possible, recognising that more complex diagnoses require a longer period of assessment • We will provide clear, accessible guidance to be published on the Local Offer website to enable parents to better understand the process and timescales involved in autism diagnosis. • We will investigate the possibility for joint commissioning of support services before and after diagnosis for young people and parents/carers eg. ASCEND 	Rachel Anthwal, BNSSG – Mike Newman, NSC	<ul style="list-style-type: none"> • Monitoring of waiting times, referral rates and outcomes in regular SEND MI reporting • Evidence of delivery of practical advice and guidance to parents who are on the autism diagnosis pathway 	<ul style="list-style-type: none"> • SCAMP pathway waiting list reduced significantly, but process is still taking longer than expected. • Resources/programmes to support parents while on the pathway not currently in place – likely to require joint commissioning activity between CCG and NSC. • Significant parent feedback that they assumed a diagnosis was required to access short breaks and some early help support – comms and policies altered to make it clear this is not the case, and reinforced by elected members at 'meet the councillors' events.
1.3	We will ensure that our Designated Clinical Officer (DCO) role has the capacity to be the key health point of contact and fully integrated into the	<ul style="list-style-type: none"> • We will use SEND MI and projections to anticipate demand and plan DCO provision accordingly 	Jo Kapp, BNSSG	<ul style="list-style-type: none"> • Sustained compliance with 20-week EHCP timescales despite capacity challenges 	<ul style="list-style-type: none"> • Shared DCO in place and providing high quality of advice for EHCPs

	<p>Education, Health and Care assessment, planning and support process bearing in mind the expected growth in demand for assessments and associated, advice and guidance</p> <p><i>[Ref: Identification and EHCP assessments, MI report Autumn 2019 p3, para 1-6 & Written Statement of Action, ASW4.1]</i></p>	<ul style="list-style-type: none"> • We will regularly evaluate the quality of advice provided, including the accessibility of language to non-professionals, clarity of support proposed and use of SMART outcomes. • We will reduce the impact of incomplete or inadequate advice on 'refusal to assess' figures 		<ul style="list-style-type: none"> • Monitoring of 'refusal to assess' figures and analysis of reasons via regular SEND MI reporting 	<ul style="list-style-type: none"> • ADCO roles to begin operating shortly to further add capacity. • LGA note improvement in quality of recent EHC assessments and Plans. • Refusal to assess figure reduced very considerably (94% of requests led to assessment in 2020/21, vs c. 50% at time of LJAR). Analysis has indicated that 40% of remaining refusals resulted from inappropriate referrals where CAMHS services weren't available.
1.4	<p>We will address the issues around joint therapy provision in North Somerset including the responsibility and funding for the increasing rates of assessments required for EHCP purposes e.g. Speech & Language and Occupational Therapy</p>	<ul style="list-style-type: none"> • We will use the opportunity presented by the change in provider of Specialist Children's Health Services to clarify the scope of services currently commissioned. • We will review the level of resource currently deployed by North Somerset Council in purchasing individual specialist assessments, and where appropriate and cost-effective, divert this to jointly commission the Specialist Children's Health Services provider to deliver these services where appropriate. 	<p>Rachel Anthwal, BNSSG - Wendy Packer, NSC</p>	<ul style="list-style-type: none"> • Sustained compliance with 20-week EHCP timescales despite capacity challenges • Evidence of clear processes and responsibilities for specialist assessments • Reduction in cost of provision of specialist assessments via improved aligned and joint planning and commissioning 	<ul style="list-style-type: none"> • While transfer of contract has seen improvement in service and increased parents' satisfaction, the scope of services is still not fully clear, with some issues needing case-by-case resolution. • We have reviewed the cost of outsourced assessments used to expedite assessments but not yet been able to determine how these relate to the CCG's commissioned service

	<i>[Ref: Written Statement of Action, ASW2 & 6]</i>				<p>due to the scope issue above.</p> <ul style="list-style-type: none"> Review of commissioned SALT & OT services ongoing – following Covid-related delays and transfer to new community health provider.
1.5	We will support all schools to use their resources to the best effect in supporting children with additional needs, maintaining access to mainstream school wherever appropriate, and ensuring that schools use our Graduated Response effectively.	<ul style="list-style-type: none"> We will promote the Graduated Response and offer training to all schools on their responsibilities We will review the top-up funding policy and process to ensure it remains equitable, supportive and adequate to meet needs in mainstream schools. We will engage with the Strategic Schools Forum to ensure a collective approach to supporting children with SEND is aligned with funding priorities We will support parents to understand, engage with and challenge schools to ensure that needs are identified and met appropriately We will reduce the impact of poor quality or premature referrals, and of incomplete or inadequate advice, on 'refusal to assess' figures 	Anthony Webster, NSC - Head of Education Partnerships – TBA	<ul style="list-style-type: none"> Monitoring of the use and impact of top-up funding on outcomes, attendance and attainment Monitoring of refusal to assess figures and reasons via regular SEND MI reporting 	<ul style="list-style-type: none"> Inclusion summit held in November 2020 – clear commitment to shared way forward, and impacts in terms of joint work on exclusions becoming apparent. Inappropriate EHCP requests from schools reducing as evidenced by reduced refusal to assess (see 1.3 above) though lack of CAMHS support remains a key issue. Guidance issued to schools on graduated response. Co-produced guidance also designed for parents and young people and regarded as excellent practice by DfE advisor. SENDIAS service using CDC funding to trial a post supporting parents of children with SEND in mainstream schools

	<i>[Ref: Identification and EHCP assessments, MI report Autumn 2019 p3, para 1-6 & Written Statement of Action, ASW5]</i>				<p>to ensure their needs are met without escalating to EHC plan. Opportunity for NSC and BNSSG to joint fund this in 2022 if trial proves effective.</p> <ul style="list-style-type: none"> Recruitment of key posts (Head of Education Partnerships, SEN High Needs Officer) critical to progress – both now underway
Area2 - Meeting Needs					
What we will do?		How we will do it?	Who will lead?	How will we monitor success?	Highlights & Issues
2.1	<p>We will improve access and reduce waiting times for treatment in Specialist CAMHS</p> <p><i>[Ref: SEMH needs and CAMHS, MI report Autumn 2019 p5, para 8-9 & Written Statement of Action, ASW4.2]</i></p>	<ul style="list-style-type: none"> We will introduce an electronic patient record system to provide accurate patient and service metrics e.g. referral volumes and waiting times, and to improve the sharing of reports and information between professionals We will ensure commissioned mental health services provide a quality and timely service by embedding best practice across BNSSG area, prioritising staffing challenges, and improving communication with young people and their families We will further develop and maintain clear links between our Specialist CAMHS service, and other local services and voluntary sector partners 	Jackie Shortman – Rachel Anthwal, BNSSG	<ul style="list-style-type: none"> Monitoring of waiting times, referral volumes and proportion of cases accepted via regular SEND MI reporting Monitoring of performance of Urgent Care team Evidence of development of local multi-agency offer of support via Future in Mind group Evidence of clear, appropriately differentiated materials to support parents, carers and young people at point of transition 	<ul style="list-style-type: none"> CAMHS quality of service and waiting times remain a key concern – anxiety and unmet MH needs account for 40% of inappropriate EHC requests. Concern that post-Covid demand will overwhelm services. Urgent care team in place and active. Off the Record 'pre-CAMHS' early intervention service to begin operating in NSC

		<ul style="list-style-type: none"> • We will improve urgent access to care via a dedicated team, providing rapid responses to CYP at high risk of harm • We will develop pathways and resources to support parents, carers and young people who are facing a transition from children's to adults' mental health services 			<ul style="list-style-type: none"> • CAMHS electronic patient record system in place enabling improved understanding of waiting times and pressures. • Bid for MHSTs in schools submitted by BNSSG with NSC support.
2.2	<p>We will ensure equitable and timely access to high quality specialist therapies, providing a clear pathway and service offer and meeting NICE guidelines in terms of delivery time.</p> <p><i>[Ref: Written Statement of Action, ASW2.12]</i></p>	<ul style="list-style-type: none"> • We will ensure that the transition to a new provider of specialist children's health services runs smoothly, and that parents and carers are fully informed and reassured regarding change. • We will continue to monitor demand and waiting times to ensure that the service is meeting local needs. • We will ensure that the Local Offer reflects changes in provision, access and clear pathways of support for all therapies 	Rachel Anthwal, BNSSG	<ul style="list-style-type: none"> • Monitoring of referral rates, waiting times and service performance in regular SEND MI reporting • Evidence of engagement of parents, carers and children in managing change to new provider 	<ul style="list-style-type: none"> • Waiting times for therapies generally improved. • Transfer to new provider has been relatively smooth and welcomed by most parents. Use of online appointments has been very successful during Covid-19 • Sirona Care & Health have agreed to sign the Co-production Charter, committing them to working with parents. • Local Offer updated, with commitment from Sirona to maintain information. • Positive parent response at NSPCWT 'meet the health commissioner' event

2.3	<p>We will deliver a comprehensive, coordinated short-breaks offer, working across sectors and neighbouring areas to ensure a rich, varied and valued range of support is available to families.</p> <p><i>[Ref: Written Statement of Action, ASW6.7, Local Offer – You Said We Did Issues 1-3]</i></p>	<ul style="list-style-type: none"> • We will meet regularly as a group of providers and commissioners across the statutory and voluntary sectors to plan and coordinate the short breaks offer • We will agree a strategy for promoting activities to parents to ensure choice and transparency in bookings • We will work with neighbouring Local Areas to ensure that parents living near boundaries can access appropriate local opportunities • We will use the new electronic Disabled Children's Register to target information to those most likely to benefit from short break opportunities 	Gail Smith, NSC	<ul style="list-style-type: none"> • Number of short break activities advertised via Local Offer calendar function • Parent/carer and CYP feedback on range of short breaks available and activities attended • Reciprocal arrangements in place with Bristol, B&NES and Somerset local areas for cross-boundary access 	<ul style="list-style-type: none"> • Considerable Covid-related impacts on this work as many facilities have closed, however cross-LA work continues. • Increased participation of parents/carers in short breaks offer • Trial of alternative plans, eg. DCT hiring soft-play centre for exclusive use. • Electronic DCR in place and in use. • Emerging need for a secure play area in WSM noted and supported by elected members.
2.4	<p>We will develop robust plans for the expected increase in need for SEND support including new school places, specialist resource bases and support for mainstream schools on the principle that local schools are the best place for the majority of children with SEND to be educated.</p> <p><i>[Ref: Sufficiency of school places, MI report Autumn 2019 p4, para 7 &</i></p>	<ul style="list-style-type: none"> • We will challenge and support mainstream schools to identify students with additional needs and to deliver appropriate support to them • We will provide a post responsible for monitoring and reporting on the use of top-up funding, collecting best practice and ensuring equality of access to support • We will use improved projections and financial models to support the business case for additional schools, extensions to current schools and new resource bases 	Sally Varley, NSC - Wendy Packer, NSC	<ul style="list-style-type: none"> • SEN places will be part of the regularly reviewed Education Commissioning Strategy • Top-up funding usage and sufficiency will be reported to the SEND Programme Board • Plans and bids for additional provision will be robust, evidence-based and compelling • Evidence that all partners engage in capital projects to 	<ul style="list-style-type: none"> • New Education Commissioning Strategy includes detailed projections and plans for SEND need. • Top Up Funding benchmarking role now advertised. • Key capital projects progressing (SEMH free school, Baytree second site, ASD hubs) • Effective work with schools to share

	<i>Alternative Provision p6 para 16, Written Statement of Action ASW2.6 & 8.5]</i>	<ul style="list-style-type: none"> We will work across the partnership to design and deliver solutions which co-locate and co-deliver services, providing easier access for parents, carers and children, and providing opportunities to develop links between schools and communities. 		deliver genuinely shared facilities which support children and their families.	<p>expertise in place via Inclusion Panels.</p> <ul style="list-style-type: none"> Health engagement in capital projects has been poor – but improvements seen in recent engagement.
--	--	--	--	--	---

Area 3 – Ensuring Outcomes

<i>What we will do?</i>		<i>How we will do it?</i>	<i>Who will lead?</i>	<i>How will we monitor success?</i>	<i>Highlights & Issues</i>
3.1	<p>We will complete testing of the Joint Outcomes in North Somerset (JOINS) framework and ensure that it is embedded in service delivery across the whole Local Area partnership.</p> <p><i>[Ref: Written Statement of Action, ASW 6.4]</i></p>	<ul style="list-style-type: none"> We will complete the soft-launch and testing of JOINS framework through the Education, Health and care assessment and Planning process and Annual Reviews We will expect contributors and advice providers to the EHCP process eg. Specialist Children's Health Services to use the JOINS framework from April 2020 We will develop outcome monitoring tools to provide intelligence which will inform service planning and commissioning 	<p>Anthony Webster, NSC</p> <p>- Rachel Anthwal, BNSSG</p>	<ul style="list-style-type: none"> Reporting to SEND Programme Board on progress of soft-launch and testing Parents/Carers and CYP comments on their outcomes in Annual Reviews and EHCP feedback Evidence of SMART outcomes in EHCPs and Annual Review documents 	<ul style="list-style-type: none"> JOINS Framework published and testing planned. Covid delays impacted wider tests. Early small-scale tests proved effective. NSC designed outcome model largely adopted across BNSSG footprint. Online Training designed for wider children's workforce. Delivery to commence shortly.
3.2	<p>We will use the EHCP Quality Assurance process to ensure that plans are consistently of a high quality, enabling parents, carers and children to hold a clear picture of how, when and where</p>	<ul style="list-style-type: none"> We will bring our multi-agency QA process fully into use, regularly sampling EHC plans and reviewing the quality of advice given, provision of 	<p>Anthony Webster, NSC</p> <p>- Liz Jarvis, DCO</p> <p>-</p>	<ul style="list-style-type: none"> Evidence of QA activity routinely recorded, including lessons learned 	<ul style="list-style-type: none"> QA Framework approved in January 2020

	<p>support will be delivered, what outcomes it is planned to contribute to and how they can influence its delivery.</p> <p><i>[Ref: Written Statement of Action, ASW5.12, 5.16 & 6.4]</i></p>	<p>SMART outcomes and clarity of specified provision.</p> <ul style="list-style-type: none"> • We will develop guidance and deliver training across the Local Area to improve the quality of plans, sharing best practice and setting local standards. • We will use the JOINS outcomes framework to provide clear expectations for how support should be specified and how outcomes should be evaluated. • We will ensure that all EHC plans and Annual Reviews reflect parents, carers and children's voices and that these are central to the process of determining how support is provided. 	Su Schofield, NSC	<ul style="list-style-type: none"> • Evidence of parent, carer and child's voice clearly recorded in all EHCPs and Annual Reviews • Evidence that support detailed in plans is measurable and clear, expressed in language which is accessible to all. • Overview of QA activity, key areas for improvement and development regularly delivered to the SEND Programme Board. 	<ul style="list-style-type: none"> • Training offer designed, awaiting delivery to wider workforce. • Delays to roll-out of outcomes framework (see 3.1)
3.3	<p>We will improve our oversight of educational outcomes for children and young people with SEND, enabling us to identify where improvement is needed and to provide targeted support and challenge.</p> <p><i>[Ref: Written Statement of Action, ASW8.1]</i></p>	<ul style="list-style-type: none"> • We will appoint an Education Lead to provide oversight and accountability, and to further develop relationships with mainstream and special schools to enable mutual challenge and support across settings • We will embed the JOINS work to include SMART education outcomes by training SENCOs • We will offer support and challenge to early years providers, schools and other settings via Education Lead 	Head of Education Partnerships – TBA	<ul style="list-style-type: none"> • Monitoring of education outcomes in regular SEND MI reporting • Evidence that children and young people are achieving education-focused SMART outcomes. 	<ul style="list-style-type: none"> • Considerable Covid impact – MI resource diverted to Vulnerable Student tracking, and delays to the joint outcomes framework roll-out. • Recruitment of Head of Education Partnerships role remains critical to influencing and building relationships with schools
3.4	<p>We will ensure that students with SEND who are educated at home, in residential placements, alternative provision or who are excluded from school are monitored, reviewed and offered timely support to return to suitable local education wherever possible.</p>	<ul style="list-style-type: none"> • We will reduce the number of children with SEND who are temporarily or permanently excluded from school via continued development of our joint inclusion panels. 	Wendy Packer, NSC - Head of Education Partnerships – TBA	<ul style="list-style-type: none"> • Monitoring of exclusions, home education and alternative provision in regular SEND MI reporting 	<ul style="list-style-type: none"> • Impacts of Inclusion Summit beginning to show in school approach to exclusions. • Significant work undertaken during

	<p>[Ref: Written Statement of Action, ASW8 & MI report Autumn 2019 p6-7, para 18, 20, 21]</p>	<ul style="list-style-type: none"> We will share the expertise in our new specialist hubs and SEMH school to support children and young people in remaining in their current school placement, rather than moving to alternative provision. We will monitor and review mainstream schools' performance in supporting children with additional needs, providing support and challenge to maintain their mainstream school place wherever possible. We will monitor the small population of children educated at home in North Somerset to understand the reasons parents elect to do so, and to respond to areas of concern around sufficiency of local school places. 		<ul style="list-style-type: none"> Monitoring of progress, attainment and attendance for the identified cohort of students Evidence of reduced exclusions, successful panel processes and reduced incidence of Elective Home Education 	<p>Covid to track Vulnerable Pupils attendance – recognised by DfE as robust.</p> <ul style="list-style-type: none"> EHE increasing – in part driven by Covid. Being monitored carefully in light of national spotlight on 'off-rolling' of SEND pupils by mainstream schools. Recruitment of Head of Education Partnerships role remains critical to influencing and building relationships with schools
3.5	<p>We will provide an updated Transitions protocol and pathway, clearly explaining what support is available for 'preparation for adulthood', what specialist support can be provided for young people with more complex needs and the thresholds for these services. This will be developed in co-production with parents, carers and young people</p>	<ul style="list-style-type: none"> We will complete the implementation of the specialist transitions team in Adult Social Care, which will support SEND and DCT in planning for the most complex children who are likely to need adult social care services post-18 and will deliver statutory Care Act assessments when these children reach adulthood. We will develop information, advice and guidance resources for parents and young people who do not meet Care Act thresholds to ensure they are aware of sources of support and guidance on transition 	<p>Christian Sweeney, NSC - Martin Hawketts, NSC - Jo Kapp, BNSSG</p>	<ul style="list-style-type: none"> Evidence of a process of early identification of young people likely to need adult social care services at age 18 Monitoring of Adult Social Care Transitions Team caseloads and waiting times via regular SEND MI reporting Publication of an updated Transitions protocol developed in co-production. 	<ul style="list-style-type: none"> Early ID process co-designed by parents, carers, adults and children's services. New Adult Transitions Team in place from Sep 2020, staffed and functioning – but largely moved to manage massive Covid-related demand in Adult Services. Caseload monitoring in place – but paused due to Covid impact

	[Ref: Written Statement of Action, ASW3.4-3.6]	<ul style="list-style-type: none"> We will provide a comprehensive guide to Preparing for Adulthood, including information covering the breadth of services including education, social care, physical and mental health. 			<ul style="list-style-type: none"> Resources on preparing for adulthood reviewed and expanded in Local Offer. Joint work with college, health and young people to improve this underway. Resumption of work on early ID of needs and new protocol
Area 4 - Enabling Actions					
What we will do?		How we will do it?	Who will lead?	How will we monitor success?	Highlights & Issues
4.1	<p>We will improve processes, modernise communications and utilise technology to reduce the burdens on parents of children with SEND and to ensure they can focus on their child's needs as a priority.</p> <p>[Ref: Written Statement of Action, ASW1.8-1.13]</p>	<ul style="list-style-type: none"> We will build the business case for an electronic ECHP and Annual Review management system which increases transparency and supports parents' involvement We will embed the 'tell it once' approach around transition points, reducing the need for parents to repeat basic information and background when moving between services We will deliver accessible versions of our guidance, policies and procedures, targeted at a variety of audiences and developed via co-production and engagement. We will make our Local Offer a 'one stop shop' for advice, guidance, documentation, policies and plans. 	Mike Newman, NSC	<ul style="list-style-type: none"> Successful case made for investment in EHCP system, with agreement to begin procurement Parents reporting reduced barriers to finding information, advice and services from all partners in the Local Area Availability of child friendly 'easy read' and parent-focused 'two-side-guide' versions of all key policies and procedures 	<ul style="list-style-type: none"> Analysis of EHCP Portal needs and current market undertaken Jan 2020 – agreed funding for this is critical to progress Parent and young person focused guidance on main SEND policy and practice co-produced and published. SENDIAS service report a reduction in calls relating to parents struggling to get access to our services/advice and guidance.
4.2	We will improve and develop our Local Offer, ensuring that it reflects the range and scope of services available in the area, provides effective and accurate advice and guidance, and informs	<ul style="list-style-type: none"> We will engage further with parents, carers and particularly young people as we progress with a review of the design, 	Mike Newman, NSC - Gill Hinton, NSC	<ul style="list-style-type: none"> Monitoring of trends in access to LO website in regular SEND MI reporting 	<ul style="list-style-type: none"> Joint user experience review of Local Offer undertaken in partnership with

	<p>commissioners of potential area where service development is needed.</p> <p><i>[Ref: Written Statement of Action, ASW1.8, 1.9]</i></p>	<p>appearance and function of the Local Offer website</p> <ul style="list-style-type: none"> • We will work closely with CCG and Health Provider partners to ensure that locally relevant Health related content is developed to replace generic NHSE syndicated information. • We will ensure that the database of services is updated regularly, particularly focusing on development of a reliable 'what's on' calendar of support and activities. • We will consider the potential for commissioning day-to-day updating and quality assurance of the Local Offer to be provided by a voluntary sector partner. 		<ul style="list-style-type: none"> • Evidence of improved and co-produced parent- and child-facing design which is appealing, engaging and reflects local needs and views • Evidence of increased Health input into Local Offer content 	<p>BNSSG and Mace & Menter Ltd in Summer 2020, with recommendations for improvement/business case.</p> <ul style="list-style-type: none"> • Increased CCG input into content underway – noted by LGA that BNSSG do not wholly own their information, but this is clearly changing • Work scheduled to take place with BNSSG to integrate their social prescribing information system with Local Offer. • Monitoring of usage regularly undertaken and reported on. Notably, Local Offer used to provide key, time-critical information on closures of provision and accessibility of services during Covid.
4.3	<p>We will ensure access to safe and secure transport for all students with SEND, particularly assuring equity for students continuing their education after the age of 16</p>	<ul style="list-style-type: none"> • We will monitor the quality of transport provision, particularly focusing on reducing incidents and journey times. • We will deliver a new Post-16 Transport Policy via open, transparent co-production with parents, carers and young people 	<p>Carl Nicholson, NSC</p>	<ul style="list-style-type: none"> • Policy agreed, published and in operation • Review of user experiences during September admission round • Monitoring of incident frequency and journey 	<ul style="list-style-type: none"> • Extremely poor parent/carers feedback from September 2020 admission round. • Improved communications critical – issue recognised by CLT and Executive. Recovery plan in place

	<i>[Ref: Written Statement of Action, ASW3.8]</i>	<ul style="list-style-type: none"> We will work closely with Weston College to ensure transport arrangements are fit for purpose, promote inclusion and support learning outcomes 		times in regular SEND MI reporting	<ul style="list-style-type: none"> to improve service and restore links to SEND team. Mission system not yet able to provide reporting on journey times for MI reports
4.4	<p>We will develop and improve local approaches to Joint Commissioning, delivering identified actions in our plan and considering key areas where further joint activity would enhance or strengthen the local offer.</p> <p><i>[Ref: Written Statement of Action, ASW6.1-6.2]</i></p>	<ul style="list-style-type: none"> We will seek an equitable and fair process for apportioning costs and agreeing complex individual packages of care via our local CHC process. We will use the opportunity arising from the transfer of Specialist Children's Health Services to a new provider, to review the link between services where the Local Authority and CCG commission similar services (eg. Occupational Therapy, Speech and Language) We will consider opportunities to jointly fund our local Parent Carer Forum in recognition of their growing involvement in strategic planning and the increasing demand for their support from parents and carers 	<p>Helena Fuller, BNSSG</p> <p>- Alison Stone, NSC</p>	<ul style="list-style-type: none"> Regular reporting to SEND Programme Board of progress in delivering Joint Commissioning Plan Evidence of equitable joint approaches where individual and complex packages are commissioned 	<ul style="list-style-type: none"> SEND Joint Commissioning and Service Alignment plan published January 2020 Joint commissioning of parent carer forum and SENDIAS service in place Panel processes for complex packages under review – CHC process remains unresolved and is a critical issue. SEND needs to be incorporated into Children's Sufficiency Strategy in Feb 2021 Review of commissioned SALT & OT services ongoing – following Covid-related delays and transfer to new community health provider.
4.5	We will continue to develop and embed co-production in all service developments, reviews and commissioning projects via	<ul style="list-style-type: none"> All plans developed to further actions in this document will include a clear statement on how the activity will be co- 	Mike Newman, NSC	<ul style="list-style-type: none"> Evidence of co-production in commissioning, recruitment, service 	<ul style="list-style-type: none"> Co-production charter signed by all key partners and published in January 2020

	<p>the work of the Engagement and Participation officer.</p> <p><i>[Ref: Written Statement of Action, ASW7]</i></p>	<p>produced with parents, carers, children and young people, in order to embed the aims and values agreed in our Co-Production Charter.</p> <ul style="list-style-type: none"> • We will ensure that parents, carers, children and young people are engaged and involved throughout plans, projects and reviews - from the outset, through planning and delivery to review and reflection. • We will seek to move the temporary arrangements for the Engagement & Participation post to a permanent footing, on the basis this involves no additional funding outside current budgets and has shown very positive impact. • We will develop opportunities for young people to be directly involved in meetings which make decisions about services they use, including the SEND Programme Board • We will continue to ensure that our SENDIAS service is jointly funded to provide independent advice and guidance, and to represent parents interests in planning and oversight of the Local Area's performance • We will consider opportunities to jointly fund our local Parent Carer Forum in recognition of their growing involvement in strategic planning and the increasing demand for their support from parents and carers 		<p>review and strategic planning across the Local Area.</p> <ul style="list-style-type: none"> • Children and Young people's voices present in all plans, strategies and reports • Evidence of direct involvement of young people in key boards, project groups and meetings 	<ul style="list-style-type: none"> • Covid impact has delayed plans for direct engagement with CYP, though some work has been undertaken (eg. co-production of young person centred guidance in 4.1) • Strategic and project groups currently meeting virtually and on reduced frequencies – work to integrate child/young person voices paused during Covid. • Joint commissioning of SENDIAS service agreed with BNSSG on three-year basis • Joint grant funding of NSPCWT agreed with BNSSG on three-year basis, securing sustainability of the forum
--	---	---	--	--	--

Part 2 – Commentary on LGA Recommendations (from Draft report – December 2020)

Governance and leadership	
a)	<p>Refocus and streamline governance structures to drive improvement at pace and provide clear leadership of the SEND agenda by partners across the local area</p> <ul style="list-style-type: none"> • Link between SEND governance and Children's Improvement Board agreed in principle, and to be established • Partnership working – especially with schools, health providers and parent/carers – is strong as evidenced by commitment to the board. • CCG commitment to partnership governance can be variable and disparate. Assurances given to LGA that new structures/appointments in CCG would resolve this. • Changes in Children's Services leadership team from Feb 2021 will further strengthen this area of work.
b)	<p>Review the membership of the SEND Programme Board and refocus as an improvement board, including consideration of a smaller group of decision makers to drive change, and clarify the relationship with the Children's Improvement Board</p> <ul style="list-style-type: none"> • Decision taken to ensure that the current SEND Programme Board reports to the new Children's Improvement Board from March 2021 • Proposal to retitle the SEND 'Improvement' or 'Partnership' board to be considered at next meeting. • Board membership remains effective at bringing together collaborative partnership, and is the only strategic forum where Education, Health and Care representatives regularly meet – change would be considered retrograde step by members if not managed carefully. • Consideration of potential smaller 'Executive' group to be put to board at next meeting to drive activity between bi-monthly meetings
c)	<p>All partners should make better use of performance information and comparative data to acquire insight and understanding to drive improvement actions. The self-evaluation should be reworked to reflect this insight, progress against objectives and inform a review of the SEND Strategy and action plan</p> <ul style="list-style-type: none"> • SEND Performance and MI reports and analysis were being provided to the Board on an agreed cycle from Autumn 2019. DfE and LGA both commented that they were of high quality and provided valuable analysis • Impact of improved SEND MI evident in planning for increased demand, supporting successful capital bids and responding to Education Psychology shortages, etc. • SEND MI Cycle was paused as resources were required for Vulnerable Pupil Tracking and DfE REACT data during Covid – to resume from March 2021 • However, health data remains incomplete, sporadic and delayed – long sign-off process means it reaches the board very late. CAMHS data should become available now from new patient record system. Information on therapies not of high quality, and significantly poorer than that provided to Bristol and South Gloucestershire <i>[this also noted regularly by NHSEI advisor during monitoring visits]</i> • SEND Strategy published in January 2020 – Next Annual Self Evaluation (Summer 2021) will be based on review of Strategy & Action plan as recommended,

Capacity

d) The CCG should ensure that the appropriate level of funding for services in North Somerset is provided, reflecting that in other local authority areas covered by the CCG

- LGA note that this was acknowledged by all partners, but that the CCG dispute believe this refers to an historic situation.
- The LGA report stresses the importance of an equitable service model across the CCG footprint – and this is something NSC officers continue to challenge when disparities arise.
- Additional funding has been provided from NHSEI via CCG for CAMHS improvement, work to reduce waiting lists etc.
- Processes for determining contribution to complex packages remain inconsistent – BNSSG wide model proposed for future use.
- Lack of coherent Health MI (See C above) makes judgement of funding equity challenging
- Dispute between CCG and three LAs regarding CHC funding continues despite external intervention

e) All partners should ensure they have sufficient capacity in place to drive the SEND agenda, with the appropriate skills, experience, focus and seniority and consider how to address this when reviewing structures and responsibilities

f) The Council should recruit to the post of Head of Education Partnerships as a priority

- Head of Education Partnerships recruitment is critical to develop and maintain relationships, and to provide support and challenge to mainstream schools – formal consultation commenced 17th February 2021 – recruitment process expected to begin in March 2021.
- Additional funding for SEND Team has supported capacity improvements, including specific officers to support timely annual reviews.
- Concern that cultural and skills disparity in teams are creating a sense that capacity is insufficient. Plans being developed to review processes to make better use of placement resources, improve use of ICT systems, provide parents/carers with online EHC applications etc. are likely to have greater effect than additional recruitment
- Further planning around structure to follow recruitment of Head of Education Partnerships, which will be informed by LGA view regarding appropriate spans of control and remits.

g) The Council and CCG should consider the potential benefits of a specialist school nursing leadership role with the remit for school age children with complex and additional health needs, regardless of their setting, and identify if this can be resourced

- National funding guidance from NHS and PHE is at variance on the funding of such posts. Further work between NSC Public Health and BNSSG will need to be undertaken to identify resources
- If funding is available, this would be an area where joint commissioning would be very appropriate
- Any solution needs to take into account the situation at Baytree School, where the school budget currently funds specialist nursing staff due to the high number of children with complex health needs attending.

Partnership working and engagement

- h) Health partners and the Council should work together to meet their shared responsibility for the Local Offer and ensure that comprehensive and timely information about services is readily available to children, young people and families
- Joint user experience review work with BNSSG undertaken (see 4.2 above) – this will provide actions and a business case for development of young person focused content and front-end, and structural changes to improve usability
 - Improved content from Health Providers now in place, with regular refresh/review underway with Sirona and AWP. Joint work to align information across Mental Health directory, and with the new Family Wellbeing (Early Help) offer.
 - Project being scoped to link our Local Offer with the CCGs social prescribing platform
- i) Health partners and the Council should establish a participative approach with children, young people, parents and carers in both service development and delivery, whereby their early involvement is the default position as the basis for genuine co-production
- Co-production charter was agreed and signed by all partners in January 2020 – opportunities to put this into practice have been limited by Covid
 - Parent/Carer Forum and SENDIAS have been involved in both recruitment and commissioning activity in LA.
 - CCG engagement improving – including ‘meet the commissioners’ session which was welcomed and appreciated
 - Direct work with children and young people challenging in current school/college context – however co-production of child/YP focused resources was very well received by DfE and used as regional exemplar
 - SENDIAS and PCF are now both joint commissioned by both the LA and the CCG, making the situation equitable with that in neighbouring LAs. This is on a three-year basis offering stability and sustainability to both organisations.
- j) Relationships with and between schools need to be further strengthened and they should be challenged to build confidence and capacity in mainstream provision to meet the needs of children and young people with SEND
- Inclusion Summit was delivered during the LGA review ‘visit’
 - Impacts now being seen across the system – positive feedback at Children’s Improvement Board and EEPB
 - Secondary Inclusion Panel working very effectively: tools such as dual placements for Y11s preventing exclusions at critical points in children’s school life. Primary Panel growing in confidence and effectiveness with support.
 - Head of Education Partnerships recruitment is now critical to further develop and maintain relationships, and to provide support and challenge to mainstream schools in meeting SEND needs.
- k) The council should monitor the implementation and impact of the plans to reduce out of area placements to ensure these realise the projected budget savings
- Children’s Sufficiency Strategy, including Market Position Statement in draft currently, likely delivered early March 2021 – will inform further planning in this area including commissioning of SEND placements
 - Review of commissioning functions will follow other realignments – this will bring more structure to commissioning processes for children’s services, and will enable a greater focus on placement quality, stability and value for money.
 - Audit West engaged to deliver review of the effectiveness of processes for commissioning high-cost placements for both SEND and children in care. Scope to be agreed in Feb 2021 for April 2021 audit activity.

Effectiveness of EHCPs

l) Establish and meet clear expectations around the nature and timescales for responses to enquiries and the EHCP process and encourage parents to liaise with officers for progress updates

- Timescales for EHCP process improving follow very poor performance due to Educational Psychology shortage and Covid impacts
- DCO and new ADCO roles providing consistent, high quality health responses to requests for response
- Parent and Young Person focused guidance on EHCPs, support in schools, annual reviews and tribunals has been co-produced
- Increased staffing in SEND team has resulted in parents having more access to advice – however parents are keen to have access via an online EHCP solution which allows them to contribute and enquire at times when they are free to do so rather than during working hours.
- Market testing and scoping for this solution has taken place – funding decision awaited.
- Joint Outcomes Framework (JOINS) is ready for wider testing and will further improve the quality and clarity of EHCPs for parents. Challenge in embedding is cultural and organisational – may require variation to contacts with Health providers

m) Ensure that councillors have access to appropriate advice and support when meeting parents and carers

- Members have disputed the wording of this finding – they consider the support they receive from officers to be appropriate and constructive.
- They wished to note that their engagement with parent/carers is at the request of the independent forum and they welcome this opportunity.
- Members work hard to avoid child-specific individual issues being raised in public fora to protect privacy and will endeavour to ensure these queries are directed appropriately.

n) Embed the recently established quality assurance procedures around EHCPs across the partnership and use this to achieve further improvement in the quality and impact of those plans

- QA process designed and agreed by partners as noted by LGA
- Process in operation in SEND team, using addendum to weekly SEND panels as an opportunity for multi-agency 'deep dive' into themes identified in EHCPs.
- Challenge in embedding is cultural and organisational – a more rigorous approach to QA may require changes to practice and variation to contacts with Health providers
- Plan is to regularly report back to SEND Programme Board with QA findings for support/challenge/direction.