

**Report of the Executive Director Core Services
and the Executive Director People,
to the Overview and Scrutiny Committee (OSC)
on 17th October 2017**

**Special Educational Needs & Disability (SEND) Local Area Inspection and
Barnsley Self-Evaluation**

1.0 Purpose of the Report

- 1.1 The purpose of this report is to inform the Overview & Scrutiny Committee of the national arrangements for Special Educational Needs & Disability (SEND) Local Area Inspections, which are carried out jointly by the Office for Standards in Education, Children's Services and Skills (Ofsted) and the Care Quality Commission (CQC).
- 1.2 In addition, the report outlines the strengths and priorities for improvement in Barnsley, which have been identified as a result of self-evaluation of local arrangements in meeting responsibilities for children and young people with SEND.

2.0 Introduction and Background

- 2.1 The purpose of the Local Area Inspections is to evaluate how local areas are discharging their duties in relation to SEND. These duties are contained in the Children and Families Act 2014 and elaborated on in the statutory guidance, 'Special Educational Needs and Disability Code of Practice: 0-25 Years' (the Code of Practice). These duties came into force in September 2014.
- 2.2 Inspections of Local Area arrangements for SEND began in May 2016 and to date 39 local areas have been inspected. All local areas will be inspected at least once over a five-year period. The outcomes of the inspection are published in a letter which sets out strengths and priorities for improvement. Depending on the outcomes the local area may be required to provide a written statement setting out the actions that it will take to address priorities identified, and the timescales for taking that action. A written statement will be required in the event that inspectors identify concerns in relation to a failure of the local area to meet its duties under the Children and Families Act 2014, or in relation to illegal practices.
- 2.3 The Inspection Framework emphasises that Local Area Inspections evaluate the effectiveness of all relevant partners in the local area in fulfilling their responsibilities for SEND, not just the local authority. The inspection therefore evaluates the contribution and impact of the local authority, the Clinical Commissioning Group (CCG), Public Health, NHS England specialist services, early years settings, schools and further education providers. In the event that an action statement needs to be submitted following an inspection, the report will make clear which partner agencies are responsible for preparing and submitting the statement.
- 2.4 The inspection focuses on three broad areas:
- The effectiveness of the local area in **identifying** children and young people who have special educational needs and/or disabilities
 - The effectiveness of the local area in **assessing and meeting** the needs of children and young people who have special educational needs and/or disabilities
 - The effectiveness of the local area in **improving outcomes** for children and young people who have special educational needs and/or disabilities.

2.5 The inspectors will consider evidence particularly in relation to:

- The accuracy of the local area's self-evaluation
- The extent to which outcomes for children and young people are improving
- The efficiency of identification of special educational needs and disabilities, and the timeliness and usefulness of assessments
- How well local agencies and bodies co-ordinate their work to assess needs and provide support
- How well the local area engages with children and young people, and parents/carers, to inform strategic commissioning of services
- How well the local area involves individual children and young people, and parents/carers, in the process of assessing their individual needs
- How well the local area communicates with children, young people and their parents/carers to ensure they are clear about assessment processes and criteria for decisions
- The extent to which the local area gives due regard to its duties under the Equality Act 2010 to children and young people with special educational needs and/or disabilities

2.6 During the inspection, inspectors will visit providers such as childcare and education settings and specialist services. They will meet with elected members, key officers from health, education and social care, and seek the views of parents, carers and young people on their experience of services. They will also review a sample of children's and young people's casework.

3.0 Current Position – National Context

3.1 The Framework for SEND inspections is relatively new and there is no single clearly defined data-set that the local area is required to produce for inspection. The inspection also focuses on children and young people 0-25, so inspection reports cover a wide range of provision and services. These include universal, targeted and specialist services that children and parents come into contact with pre-birth and into adulthood. These features present some challenge in predicting the specific key lines of enquiry inspectors are likely to follow. However we can use learning from inspections in other areas and our knowledge of local issues and priorities, to anticipate what the inspection will cover.

3.2 The elements which feature in most or all inspections which have taken place to date include:

- The understanding of leaders locally of the needs of children and young people in their area; how they use and share this knowledge to commission the right services; how they know what progress is being made in meeting needs and how services make a difference to outcomes
- How well education, health and social care work together at a strategic planning and commissioning level
- The contribution of 0-19 Healthy Child Programmes, paediatric services, social care early years settings and schools to identifying and meeting needs, and how well different services share information on identified needs
- Transition arrangements for young people aged 16-25
- The quality of support provided by schools for children and young people identified as requiring SEN support, but not with an Education, Health and Care Plan (EHCP)
- Access to and the effectiveness of the local ASD (Autistic Spectrum Disorder) pathway
- Timely access to services such as Child & Adolescent Mental Health Services (CAMHS), Speech and Language Therapy, Occupational Therapy

- The percentage of EHCPs issued within the 20 week statutory timescale
- Arrangements for and quality of co-production with young people and parents at a strategic, operational and individual level
- Feedback from children, young people and parents on their experiences of systems, services and provision; the extent to which child and parent voice is evident in plans, systems, processes and provision
- Workforce development across all agencies in relation to SEND and the understanding of the workforce about their responsibilities in relation to SEND
- The quality of the Local Offer, how this is promoted, and the extent to which parents/carers and the workforce are aware of the Local Offer

3.3 In the local areas which have been required to submit a written statement of action following inspection, the issues identified requiring specific action are summarised below:

- Pace and planning in implementation of SEND reforms
- Strategic leadership and governance
- Poor joint commissioning arrangements
- Ineffective promotion and understanding of the local offer
- The capacity of mainstream schools to identify and meet needs of an increasing SEND population, particularly those with autism
- Low incidence of identification at SEN support stage in schools or settings, indicating lack of early identification
- Education outcomes for children at the SEN support stage
- Absences and exclusions for pupils with SEN in mainstream schools
- Poor progress of SEND pupils at key stages 2 and 4
- The timeliness of response to children, young people and their families in need of significant help and support, particularly those with autism
- The capacity of the Designated Medical Officer (DMO)/ Designated Clinical Officer (DCO) role
- The contribution of health providers to EHCPs
- Use of management information to provide an overview of Local Area effectiveness
- Lack of effective co-production with parents; poor communication with parents
- Quality of EHCPs
- Access to / waiting times for services such as audiology, speech and language therapy, CAMHS etc.

4.0 SEND Population in Barnsley

4.1 In January 2016, Barnsley's SEND population in a nursery or statutory school setting was 14.9% compared with 14.4% nationally. This includes:-

- children and young people who have a statutory EHCP or 'Statement of Special Educational Needs' (herein referred to as a 'Statement')
- children without a statutory plan but identified as having a special educational need and/or disability but the level of need can be supported without the need for a statutory plan This group is categorised as 'Special Educational Needs (SEN) Support'.

4.2 Across All English authorities, the proportion of pupils with Statements or EHCPs ranges from 0.3% to 4.5%. In Barnsley 3.8% of children and young people have an EHCP or a Statement compared to an average of 2.8% in All English authorities.

4.3 There are currently 3,771 children and young people identified as SEN Support in Barnsley primary and secondary schools. Across all English local authorities the

proportion of children and young people designated 'SEN support' ranges from 6.5% to 19.4%. In Barnsley 11.1% of children and young people are identified as 'SEN Support', compared to an average of 11.9% in All English authorities (*comparator data from the Department for Education [DfE] January 2016 School Census Special Needs & Disabilities in England SFR29/2016, which covers Nursery to Year 11*).

- 4.4 In April 2017 the total SEND population (those with EHCPs, Statements or SEN Support, including post-16) was profiled across key stages of education stages as follows:

Category	Cohort	Number
Early Years	2,3 & 4 year olds <i>(please note that Primary figures also include some 4 year olds who have started in Reception)</i>	800
Primary	Reception to Year 6	2,972
Secondary	Year 7 to Year 11	1,294
Post 16	16 – 25	3,650

- 4.5 Requests for Statutory Assessments of Need and the number of EHCPs has significantly increased over a 3 year period which, in turn has placed a considerable pressure on resources and allocated funding.
- 4.6 In 2014 the authority was responsible for maintaining 1,216 Statements. By June 2017 this figure had increase to 1,726 Statements or EHCPs. Some of this increase is accounted for by the inclusion of 16-25 year olds and the transfer of Learning Disability Assessments (for 16+ year olds) to EHCPs, which authorities were required to do by December 2016. However a significant part of the increase is due to increased demand and new EHCPs issued. Between June and September 2017, for example, the number has increased by 59, to 1,785 Statements and EHCPs. Approximately 36 % of these young people are placed in specialist provision and 64% in mainstream schools or settings.
- 4.7 In June 2017 there were 105 pupils placed out of Borough in independent provision. Placements made for September 2017 increased this number to 136. Approximately 90 pupils are placed outside of Barnsley in other Local Authority mainstream and special schools or academies.
- 4.8 In mainstream primary schools the most prevalent special need identified is moderate learning difficulties, followed by speech, language and communication needs. The third most prevalent need is social, emotional and mental health.
- 4.9 In mainstream secondary schools the most prevalent need identified is also moderate learning difficulties, followed by social, emotional and mental health. The third most prevalent need is specific learning difficulties, though the percentage in Barnsley is significantly lower than the prevalence of specific learning difficulty nationally.
- 4.10 In special schools the most prevalent need identified is severe learning difficulty, with the second being autistic spectrum disorder. The third most prevalent need is social, emotional and mental health.

5.0 Barnsley Local Area Arrangements & Planning for Improvement

- 5.1 Since April 2015 a core set of improvement priorities for SEND were identified and agreed across the local area partnership, and within the Children Young People and Families' Trust. These are:

- Build capacity in mainstream schools and settings to meet special educational needs
 - Review specialist SEN places and provision that is currently commissioned and assess match to need
 - Develop a commissioning strategy and plan for specialist provision
 - Implement an action plan to ensure transfer of Statements to EHCPs by 2018
 - Improve efficiency of production of EHCPs to ensure children's needs are met promptly
 - Develop a participation plan to strengthen children and young people's, parents' and carers' participation, and co-production
 - Develop arrangements in relation to personalisation and personal budgets
- 5.2 A key element of the inspection is the local area's self-evaluation of the effectiveness of its local arrangements in meeting SEND responsibilities. The extent to which leaders have an understanding of strengths and priorities, and the accuracy of its self-evaluation is critical to the overall outcome of the inspection.
- 5.3 Since the introduction of SEND inspections, partners have worked to develop a self-evaluation form, intended to capture key information about SEND arrangements in Barnsley. Using learning from the first year of inspections we are currently refreshing the self-evaluation to improve the rigour of the evaluation of impact and effectiveness of local area arrangements. This will be followed by a refresh of the improvement planning for SEND, to ensure this reflects priority areas for development in the Self Evaluation document.

6.0 Areas of Strength

- 6.1 From the evaluation to date, the following areas of strength have been identified:-
- 6.2 **Leadership & Governance** - There are clear partnership governance and accountability arrangements in place through the Children, Young People's and Families Trust. The Trust is the local partnership that brings together organisations responsible for providing services for children, young people and families in the borough, such as the Council, NHS organisations, Education establishments and the Police. The local authority and its partners have identified and agreed SEND arrangements as a key local area priority. Delivery of services and arrangement to identify and meet SEND related needs are monitored by the Trust, as well as by scrutiny groups and lead members. A multi-agency SEND strategy and operations group is in place to drive agreed action plans.
- 6.3 **Joint Commissioning** - Barnsley Children, Young People's and Families Trust has joint commissioning arrangements in place which are facilitated by the Trust Executive Commissioning Group. The Trust reports to the Barnsley Health and Wellbeing Board. Services jointly commissioned include: Speech and Language Therapy, CAMHS, Occupational and Physiotherapy, and Children's Continuing Care.
- 6.4 **Early Years Provision** – 96% of childcare and early years providers are rated good or outstanding by Ofsted. There is strong engagement of the sector in workforce development activity related to SEND and a good level of support is provided to the early years sector to meet their responsibilities. It is a requirement within local funding agreements for early years provision that providers refresh their Special Educational Needs Co-ordinator (SENCO) training at least every three years. SENCOs are responsible for co-ordinating additional support for pupils with SEN and liaising with their parents/carers, teachers and other professionals who are involved with them.
- 6.5 **EHCPs Issued Within Statutory Timescales** - The percentage of EHCPs issued within the 20 week statutory timescale is currently in line with national percentages

(approximately 65%). This has improved from a very low base when less than a third were issued within timescales. The authority is also on track to meet the Department for Education's (DfE) deadline of 1st April 2018 for transferring all old style Statements to EHCPs.

- 6.6 Virtual School for Looked After Children (LAC)** - The Virtual school for LAC has effective arrangements in place for tracking and supporting improved provision and outcomes for LAC with special educational needs. Bespoke provision is commissioned as appropriate to ensure children remain in education and make progress in their learning. There is also a good level of challenge to education providers and partners to ensure Personal Education Plans (PEPs) include appropriately ambitious targets and suitable provision to meet children's needs.
- 6.7 Development of Partnership Working Across Agencies** - There are effective working relationships between key partners e.g. via the CCG Designated Clinical Officer (DCO) role and the Barnsley Alliance schools' partnership. The establishment of the SEND strategy group has increased the role of schools in planning for improvements in SEND arrangements and there is increased focus on SEND in headteacher and school partnership meetings. There are emerging models of integrated service delivery, for example Learning Disability Nurses deployed alongside the Disabled Children's Team, Speech and Language Therapy (SALT) provision in schools and joint delivery of Health, Education and Social care programmes through Family Centres, and a 0-25 Early Help model.
- 6.8 Roll-out of Prevention and Early Intervention Programmes for Mental Health** - In response to growing identification of emotional and mental health needs and increasing demand on specialist services, two programmes are being successfully rolled out in primary and secondary schools to give children and young people, and their families, earlier access to support. Mindspace (formerly 4:Thought) works across secondary mainstream schools. Mindspace is commissioned by the CCG as part of the local Future in Mind Transformation plan, but is school-led. It has a single point of access with the CAMHS service, enabling both step-up from Mindspace to CAMHS or stepdown from CAMHS to Mindspace. Approximately 200 young people and 63 parents accessed the service. For primary-aged children the focus has been on implementing a resilience model, through the THRIVE (Threat, Harm, Risk, Investigation, Vulnerability and Engagement) programme, led by Public Health. The aim of the programme is to improve social and emotional health and resilience through a whole-school approach. To date 28 schools have accessed training with a further two phases of training planned.
- 6.9 Information and Advice Services for Parents/Carers** - SENDIASS (the Special Educational Needs & Disability Information, Advice and Support Service) provides, on behalf of the local authority, independent advice and advocacy services to parents and carers of children and young people aged 0-25 in relation to SEND issues. The service supports parents through the statutory EHCP process, in meetings with schools and services and in advocating for children, parents and carers to ensure they are involved in decisions about how their needs are met. Parents/carers express a high level of confidence in the service and the quality of support provided. Universal advice and signposting to services is provided through the Families Information Service (FIS) and the Family Services Directory, giving families a single point of access to information about services. FIS also supports families' access to short breaks provision and can provide tailored support for families with a child or young person with SEND.

7.0 Areas for Development & Key Lines of Enquiry

7.1 From the evaluation to date, the following areas for development and key lines of enquiry have been identified:-

7.2 **Improving the Education Progress of Children and Young People with SEND** - In early years and primary the gaps between pupils with SEND in Barnsley and pupils with SEND nationally are broadly similar to the gaps between non-SEND Barnsley pupils and their peers nationally, though 2016 phonics outcomes showed a wider gap.

At Key Stage 4 the gap between SEND and non-SEND pupils achieving the 5 A* to C benchmark widened in 2016. Only 11% of SEND pupils in Barnsley achieved the basic (A*-C in English and mathematics) compared with 23% nationally. However, while pupils with a Statement or EHCP performed broadly in line with their peers nationally, the gap for pupils on SEN Support was significant. Fewer than 12% of Barnsley SEN Support pupils achieved the basics compared with 27% of their peers nationally.

7.3 **Building the Capacity of Mainstream Schools and Settings to Identify Needs Earlier and Provide Effective Support at the SEN Support Stage** - Outcomes for pupils at SEN support stage indicate a need to improve schools' capacity to meet these pupils' needs. The high percentage of pupils with a Statement or EHCP in Barnsley, and the growing demand for EHCP assessments is also a potential indication of the need for better support, earlier intervention and a more graduated response to children's needs, to prevent escalation to an EHCP and increasingly specialist provision.

7.4 **Reducing Exclusions and Improving School Attendance of Children and Young People with SEND** - Pupils with SEN are more likely to be excluded from school than their non-SEN peers. In Barnsley the data indicates a particular issue in relation to pupils on SEN support. National data (2014-15) for SEN support pupils indicated a slight increase in rates for at least one fixed term exclusion to 5.6%. In Barnsley the increase was greater, to 8.5%. Data for 2015/16 shows a rise to 11%.

7.5 **Developing Co-production and Effective Participation of Young People, Parents and Carers in Shaping and Improving Local Arrangements** - There is currently no Parent-Carers Forum in Barnsley or an agreed delivery model for parent/carer engagement. A number of parent support group meetings have been attended, and events organised to get feedback from parents and carers, including the annual SEND information day; SEND Talkabouts; and a recent SEND conference. Sessions have also been held for parents/carers and young people to get feedback on the Local Offer website and options for its redesign. It is clear that current arrangements and resources for facilitating parent/carer and young people's participation are not satisfactory. Options for resourcing and developing a new model, supported by partner organisations, are under discussion, and parents/carers will be invited to participate in commissioning any new arrangements.

7.6 **Improving Data Sharing Across Partners so that Needs are Identified and Met at the Earliest Opportunity** - Effective data sharing is essential to early identification of needs; timely access to the right support and for forecasting and planning to meet future needs. Data sharing systems across services do not always currently support speedy and efficient sharing. This will improve during 2017-18 with improved access across health and local authority data.

7.7 **Develop More Coherent and Co-ordinated Planning for Transition for 16-25 Year Olds** - Transition to post 16 education provision and across services for young people with SEND, and for their families can be complex, not least because transition points or ages

between 16 and 25 vary according to the services involved. Feedback suggests it can be challenging for young people and families in terms of negotiating the system; engaging with multiple services; actively participating in decision-making; and securing the right support and provision to enable them to achieve independence and progress to the right education, training or employment.

- 7.8 **Improving Access and Waiting Times for Support Services** - Although improving, waiting times for CAMHS treatment are still too long. For SALT, performance in relation to waiting times is good, but parents have expressed concern about how the service is delivered, which is described as the 'episodes of care' model. This means that children can be discharged after a period of time although the child may continue to need additional support with speech and language.
- 7.9 **Develop Quality Assurance Framework to Monitor and Improve the Quality of EHCPs** - Significant improvements have been made in relation to the timeliness in the issuing of EHCPs and the rate of transfer from old style Statements to EHCPs. The next priority is to ensure plans are consistently of the right quality to support improvement in outcomes for children. A quality assurance and audit system will be developed with a particular focus on the quality of partner contribution to the assessment and planning process; the extent to which the voice of the child and parent/carer is evident and evidence of co-production; the views of the child, young person, parent or carer on the EHCP process; and the extent to which the plan supports improved outcomes.
- 7.10 **Develop Quality Assurance and Performance Management Across Partnership Services and Provision to Improve How We Can Evidence Impact on Improving Outcomes** - Partners currently have good oversight of service performance in terms of demand; timely access to and engagement with services, and levels of activity. Individual services will hold data and evidence on the impact of their services on improving outcomes for children, young people and families. An area for development is to improve how we can systematically evaluate and evidence how local area arrangements are contributing to improving outcomes, using a range of both quantitative and qualitative data.

8.0 Invited Witnesses

8.1 The following witnesses have been invited to today's meeting:

- Rachel Dickinson, Executive Director, People Directorate, BMBC
- Margaret Libreri, Service Director, Education, Early Start and Prevention, People Directorate, BMBC
- Richard Lynch, Head of Service, Commissioning, Governance & Partnerships, People Directorate, BMBC
- Sue Day, Interim Service and Strategy Manager, Assessment and Referral Service, People Directorate, BMBC
- Liz Gibson, Virtual Headteacher for Looked After Children, People Directorate, BMBC
- Karen O'Brien, Designated Clinical Officer for SEND, Barnsley CCG
- Cllr Margaret Bruff, Cabinet Spokesperson - People (Safeguarding)
- Cllr Tim Cheetham, Cabinet Spokesperson – People (Achieving Potential)

9.0 Possible Areas for Investigation

9.1 Members may wish to ask questions around the following areas:

- How confident are you that we are identifying children and young people with SEND in a timely way?
- How well do we meet the needs of these children, young people and their carers and how do we know that?
- How do you use intelligence and trends to drive improvement and plan for future demand on service providers?
- To what extent is there good practice in relation to ensuring the voice of the child and their parents/carers is evident in assessments and plans?
- Which area for improvement if addressed would have the greatest impact and why?
- If the inspection was to happen now, what do you think the outcomes would be and why?
- What is being done in terms of supporting schools to alleviate pressure points from the increasing number of SEND children and young people and how does this apply to academies?
- What are the pressure points in terms of health services, particularly in relation to the capacity of the Designated Medical Officer, the Designated Clinical Officer and Educational Psychologists?
- How robust are performance management frameworks and data sharing protocols across all organisations?
- What is in place to support young people with SEND when they leave secondary education?
- Is there a particular group of children and young people with SEND who are not as well served as they may be?
- How can Members directly influence their local education settings and school governing bodies to improve SEND provision?

10.0 Background Papers and Useful Links

- Government SEND Documentation:
<https://www.gov.uk/topic/schools-colleges-childrens-services/special-educational-needs-disabilities>
- SEND: Supporting Local and National Accountability:
https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/416347/Accountability_Publication.pdf
- SEN Statistics:
<https://www.gov.uk/government/collections/statistics-special-educational-needs-sen>

11.0 Glossary

ASD - Autistic Spectrum Disorder
CAMHS - Child and Adolescent Mental Health Services
CCG - Clinical Commissioning Group
CQC - Care Quality Commission
DCO - Designated Clinical Officer
DfE - Department for Education
DMO - Designated Medical Officer
EHCP - Education Health and Care Plan
FIS - Families Information Service
Ofsted - Office for Standards in Education, Children's Services and Skills
LAC - Looked After Children
PEP – Personal Education Plan
SALT - Speech and Language Therapy
SENCO - Special Educational Needs Co-ordinator
SEND - Special Educational Needs and Disability
SENDIASS - Special Educational Needs & Disability Information, Advice and Support Service

12.0 Officer Contact

- Anna Marshall, Scrutiny Officer (01226 775794)
- Margaret Libreri, Service Director, Education, Early Start and Prevention (01226 773211)

9th October 2017