



SPECIAL EDUCATIONAL NEEDS AND DISABILITY REFORMS

BRIEFING SEPTEMBER 2014

SEN STRATEGIC STEERING GROUP AND BOLTON PARENT CARER CONSORTIUM



Bolton Clinical Commissioning Group





Overview of the briefing

- Need for change
- Legislation underpinning the reforms
- Key points from the new SEND Code of Practice
- Education, Health and Care Plans
- Personal Budgets
- Local Offer
- Preparing for Adulthood
- Questions



A reminder: the case for change

The current system is not working for families and children:

- Young people with SEN do less well than their peers at school and college and are more likely to be out of education, training and employment at 18;
- Schools and colleges can focus too much on the SEN label rather than meeting the child's needs, and the current Statements/ Learning Difficulty Assessments do not focus on life outcomes;
- Too many families have to battle to find out what support is available and in getting the help they need from education, health and social care services; and
- When a young person leaves school for further education, they enter a very different system which does not carry forward the rights and protections that exist in the SEN system in schools.

Aims of the SEND Reforms.....

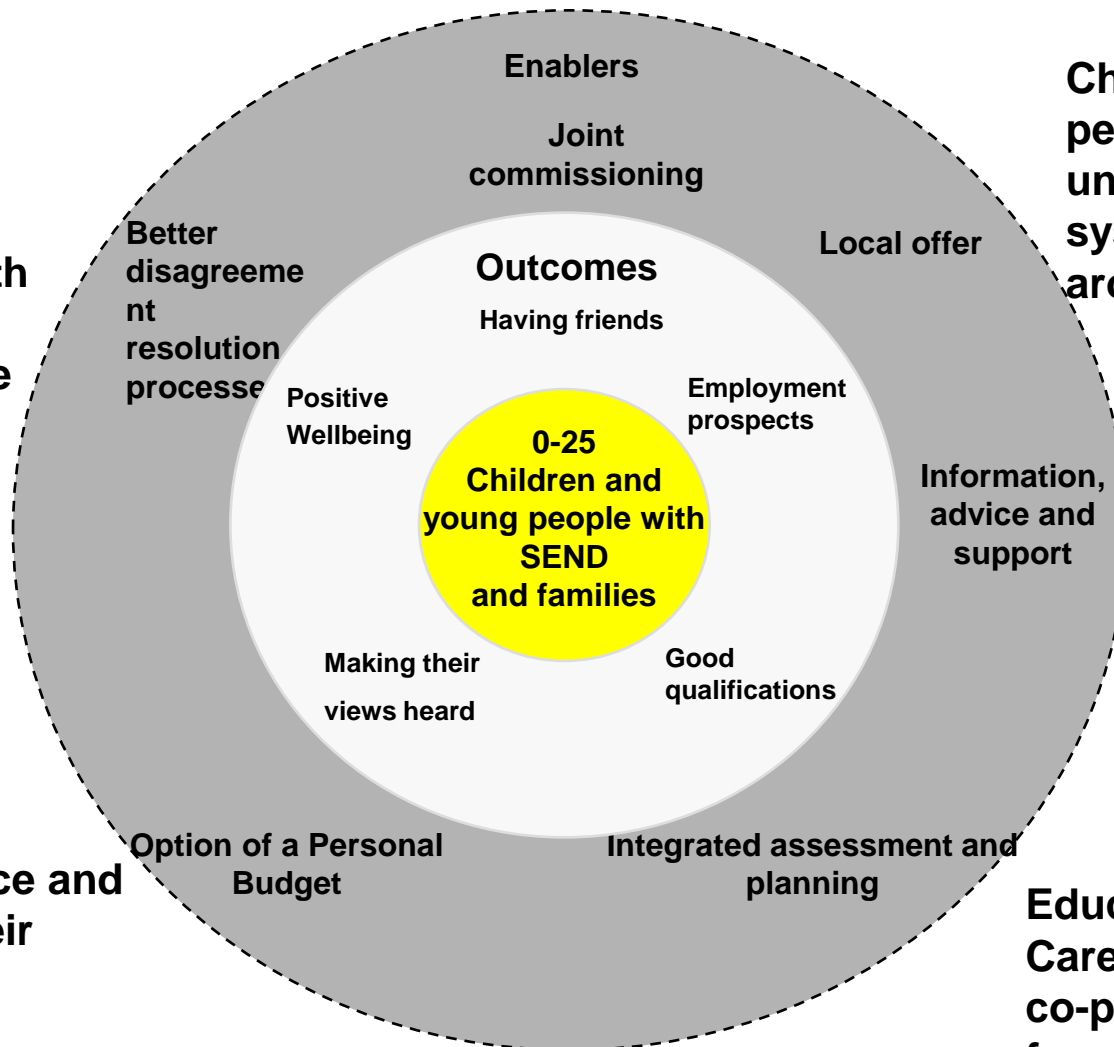
- ❖ Children's SEN are picked up early and support is routinely put in place quickly;
- ❖ Staff have the knowledge, understanding and skills to provide the right support for children and young people who have SEN or are disabled;
- ❖ Parents know what they can reasonably expect their local school, college, LA & local services to provide, without having to fight for it;
- ❖ Aspirations for children and young people are raised through an increased focus on life outcomes, including employment;
- ❖ For more complex needs, an integrated assessment and a single Education, Health and Care Plan are in place from birth to 25; and
- ❖ There is greater control for parents and young people over the services they and their family use.



The vision: Joined up support across education, health and care, from birth to 25

- Participation of children, their parents and young people in decision-making.
- Early identification of children and young people's needs and early intervention to support them.
- Greater choice and control for young people and parents over support.
- Collaboration between education, health and social care services to provide support.
- High quality provision to meet the needs of children and young people with SEN.
- Focus on inclusive practice and removing barriers to learning.
- Successful preparation for adulthood, including independent living and employment.

Where disagreements happen, they can be resolved early and amicably, with the option of a Tribunal for those that need it.



Children, young people and parents understand a joined up system, designed around their needs.

Extending choice and control over their support.

Education Health and Care plan is holistic, co-produced and focused on outcomes.



Legislation to support this vision

- The Children and Families Act 2014
- The Special Educational Needs and Disability Code of Practice: 0-25 years
(This replaces the current Code of Practice, the Learning Difficulties Assessment guidance and the DfE's Inclusive Schooling guidance)



The Children and Families Act

- On 13th March 2014 the Children and Families Bill became the Children and Families Act.
- This Act takes forward the Coalition Government's commitments to improve services for vulnerable children and underpins wider reforms.
- The Act focuses on:
 - adoption & looked after children,
 - family justice
 - **special educational needs**
 - childcare sector
 - the role of the children's commissioner
 - statutory rights to leave and pay



Code of Practice (2014)


From 1st September 2014 the following will have to have regard to the new Code of Practice:

- Schools
- Academies
- Colleges
- Early years settings
- Local authorities
- Pupil Referral Units
- Pre and post-16 Independent Specialist Providers (ISPs) Health Bodies including NHS Commissioning Boards, clinical commissioning groups, NHS trusts, NHS foundation trusts and Local Health Boards.



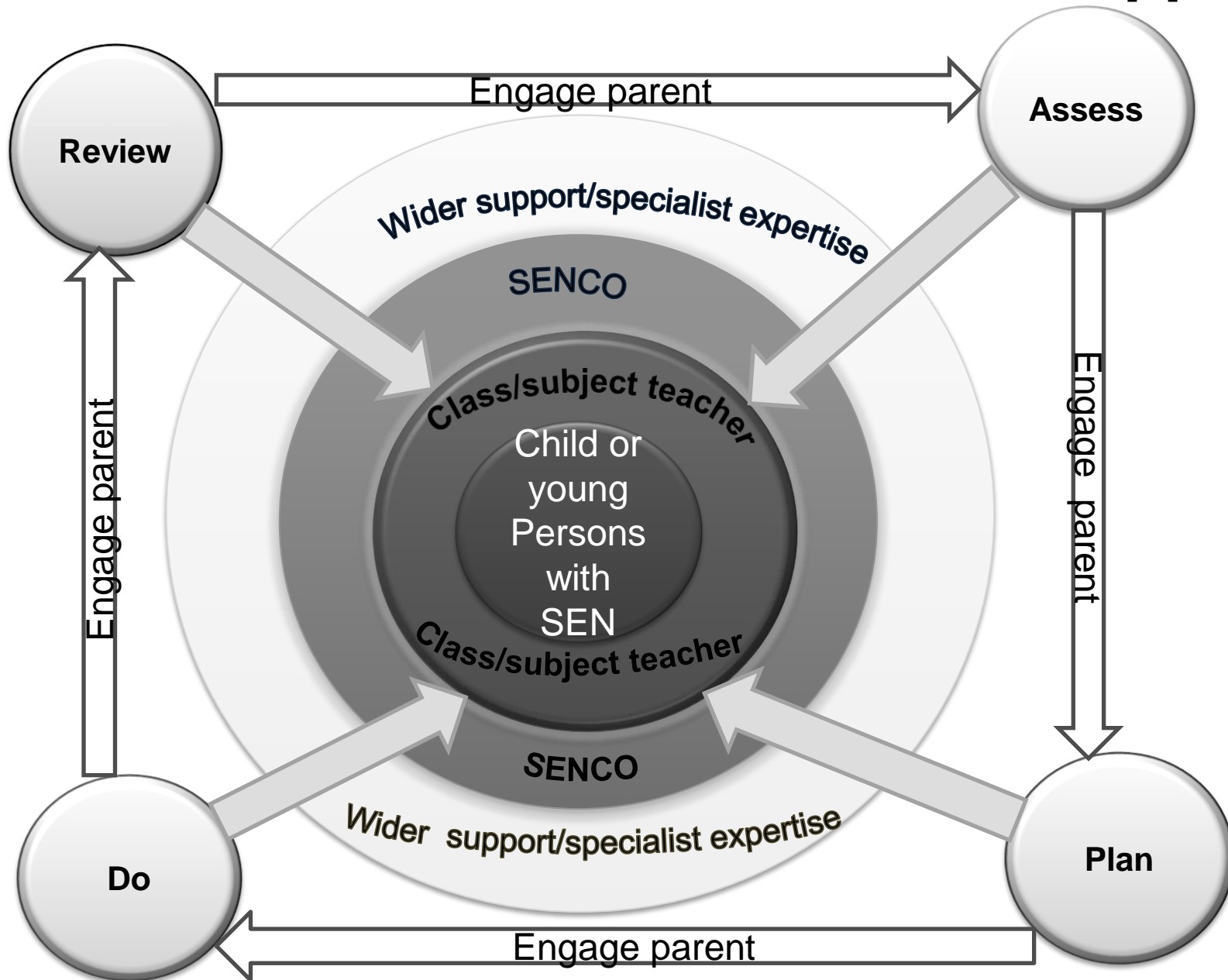
SEND Code of Practice: Key elements/changes

- 0-25 age range
- Requirement to ensure that parents, children and young people are fully involved in decision making and reviewing provision
- Requirement to jointly plan and commission services to ensure close co-operation between education, health and social care.
- FE sector required to have regard to the Code when carrying out their duties in relation to young people with SEN

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- For those with more complex needs Education, Health and Care Plans (EHCP) will replace statements of Special Educational Need and Learning Difficulty Assessments
 - Offering families the option of a personal budget
 - A much greater focus on preparing young people who have SEN for adulthood.
 - Need to publish a Local Offer outlining what provision is available for children and young people who have SEN.


***Note:** until April 2018 this system and the 'old' system will be running in parallel

The reform vision: A whole school approach

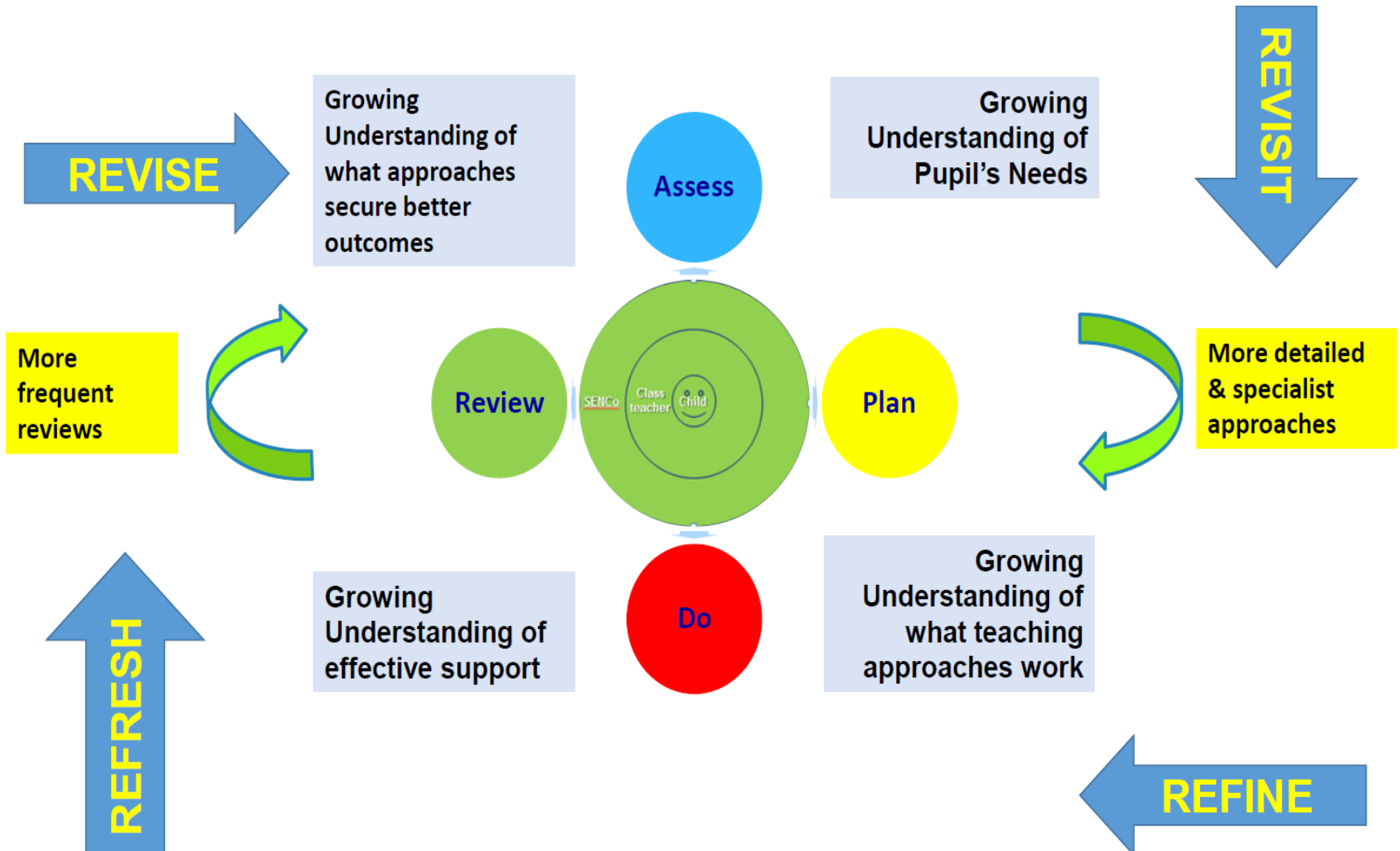


What will this mean for settings, schools and colleges?

- 'SEN Support' will replace 'school action' and 'school action plus'
- Produce and publish online a School SEN Information Report
- Schools must inform parents when pupils receive SEN support, involve them in planning and reviews of progress and meet with them at least 3 times each year
- There is no requirement for schools to use Individual Education Plans (IEP's). Schools will however be expected to determine their own approach to record keeping that clearly evidences provision, progress, a focus on outcomes and the monitoring and evaluation of SEN support.

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- Settings, schools and colleges will have to admit a child/young person, where the school/college is named in an EHC plan
 - Appoint a suitably qualified or experienced member of staff as SENCO (National Award)
 - Make arrangements to support pupils with medical condition and schools must have regard to statutory guidance supporting pupils at school with medical conditions. This can be found on the DfE website
 - Develop processes and procedures for ensuring children, young people and parents are engaged in decision making and planning
 - Utilise a graduated approach; an assess, plan, do, review cycle through which earlier decisions and actions are revisited, refined and revised with a growing understanding of the pupil's needs.

THE GRADUATED RESPONSE





Effective Whole School Provision is characterised by:

- high aspirations for the achievement of all pupils
- good teaching and learning for all pupils
- provision based on careful analysis of need, close monitoring of each individual's progress and a shared perception of desired outcomes
- evaluation of the effectiveness of provision at all levels in helping to improve opportunities and progress
- swift changes to provision, in and by individual providers and local areas, as a result of evaluating achievement and well-being


What will this mean for those working in Health?

- Where there is provision which has been agreed in the health element of an Education, Health and Care plan health commissioners **must** put arrangements in place to secure that provision (Health provision that educates or trains a child/young person will usually be treated as an educational need).
- Identify a Designated Health Officer
- Health advice to contribute to the Education, Health and Care needs assessment will be collated into a single report reflecting the views of all health services involved with the child/young person.
- From September 2014 families may chose to take may continuing health care payments as direct payments.

What will this mean for those working in Social Care?


Where a child or young person has been assessed as having social care needs (for example direct payments for short break care) in relation to their SEN/D social care teams:

- **Must** secure social care provision under the Chronically Sick and Disabled Persons Act (CDSPA, 1970) which has been assessed as being necessary to support a child or young person's SEN and which is specified in their Education, Health and Care plan.
- **Should** provide educational institutions with a contact for social care advice on children and young people with SEN/D.

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- Must undertake reviews of children and young people with Education, Health and Care plans where there are social care needs.
 - Where possible align social care assessments with Education, Health and Care needs assessments.
 - Must continue to provide children's social care services until adult provision has started or a decision is made that, following an assessment, a young person does not meet the eligibility criteria for adult social care.

What will this mean for parents and families?

- Specific decision making rights about Education, Health and Care plans are given directly to young people once they reach the end of compulsory school age (the end of the academic year in which they turn 16 years). These include requesting an assessment, making representations about the content of a plan, requesting a particular institution to be named, requesting a direct payment and appealing to the Tribunal.
- Opportunities to participate in discussions and decisions about individual support (Annual Reviews **MUST** be undertaken in partnership with child and their parent or young person) and local provision.
- Greater choice and control over support.

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- Parents knowing what they can reasonably expect their local school, college, local authority and local services to provide.
 - Local authorities have a duty to provide information, advice and support on SEN to children and young people directly, as well as to parents; this has been extended to include children and young people with disabilities (even if they don't have SEN) and their parents.



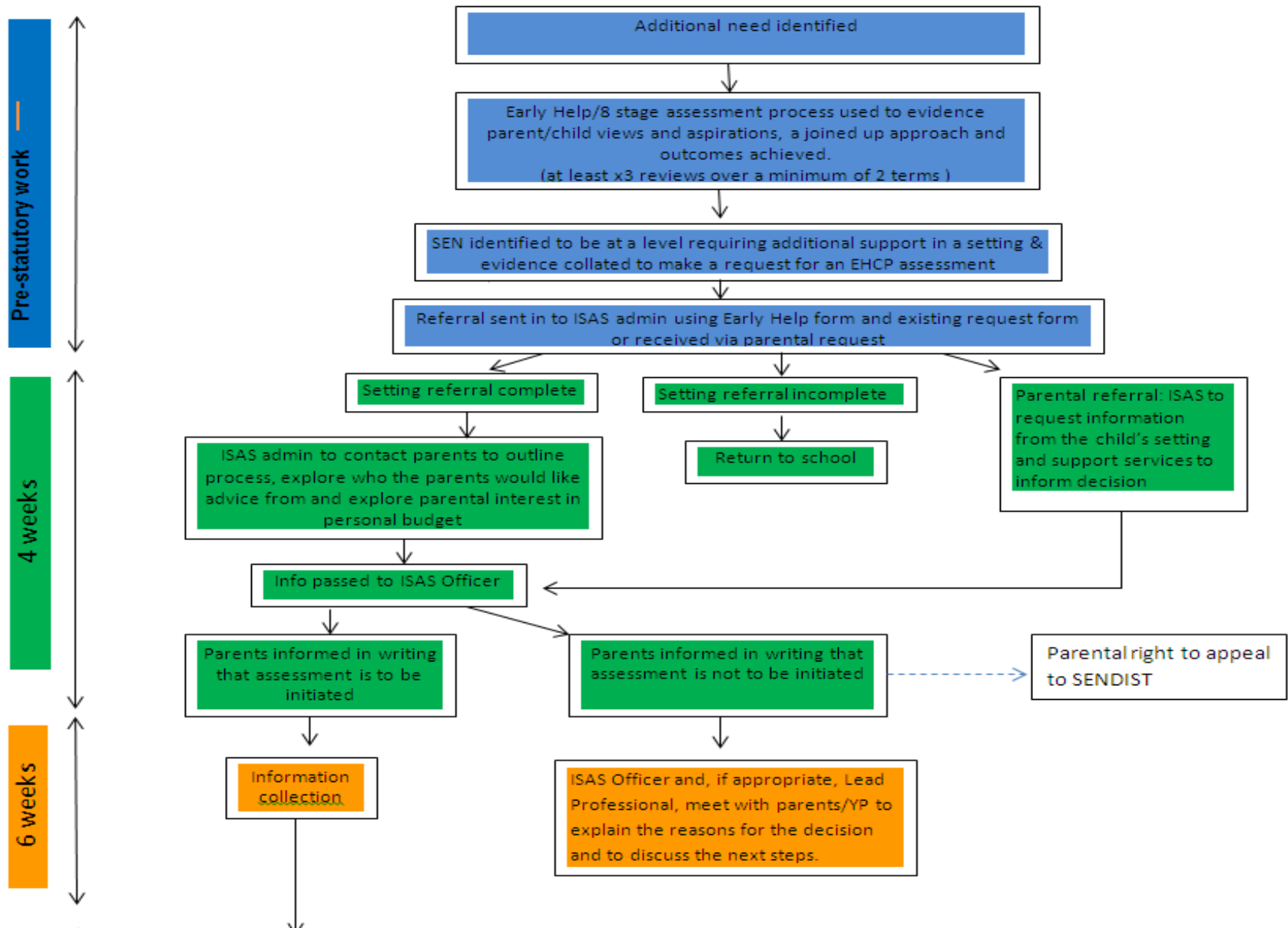
Education, Health and Care Plans (EHC plans)

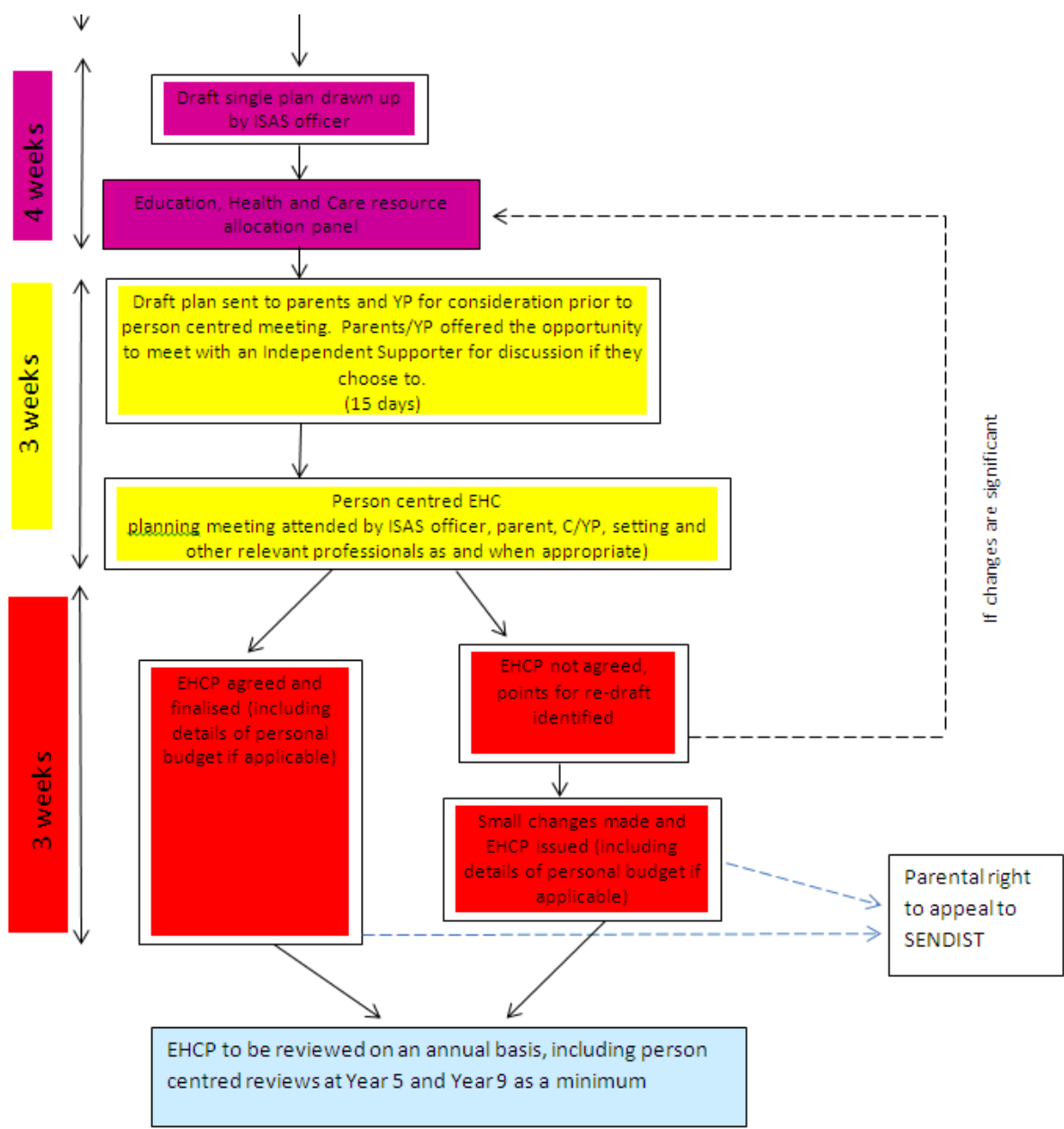
- **Who are they for?**
 - ❖ Children and young people aged 0-25 years with more complex needs (when SEN provision can not reasonably be provided from the resources normally available to mainstream settings)
- **What are they?**
 - ❖ Co-ordinated assessments and plans to meet the SEN of a child or young person.
 - ❖ The final step of a graduated response
 - ❖ They will replace Statements of SEN and Learning Difficulty Assessments (LDAs)

Statement v EHC plan

STATEMENT	EDUCATION, HEALTH AND CARE PLAN
Takes 26 weeks to complete	Takes 20 weeks to complete
Only considers educational needs	Considers needs across education, health and care
Focussed on provision	Focussed on aspirations, outcomes and provision
Tend to be retrospective in nature	Forward looking always planning for transition to the next stage of education
Resources provided to school to make the required provision	More scope to use resources flexibly
No option for a personal budget/direct payment	Option of a personal budget/direct payment to enable more choice and control over the support received

EDUCATION, HEALTH AND CARE ASSESSEMENT FRAMEWORK





ACRONYMS	
EHCP:	Education, Health & Care Plan
SEN:	Special Educational Need
ISAS:	Inclusion & Statutory Assessment Service
SENDIST:	Special educational Needs and Disability Tribunal
C/YP:	Child/Young Person



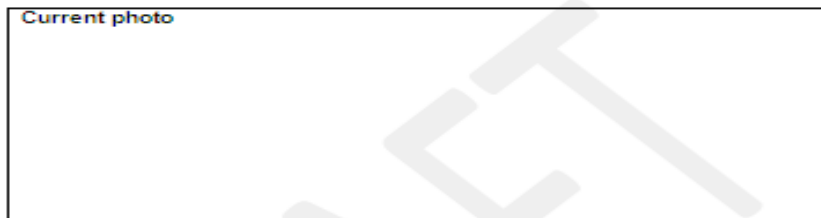
The Bolton Education, Health and Care plan

- No national template (but sections to be included outlined in code of practice)
- Drawn from the work of the pathfinders
- These can be found at:
www.bolton.gov.uk/send

PROPOSED

Education, Health and Care Plan for

Current photo

A large rectangular box intended for a current photo of the child. A large, light grey 'DRAFT' watermark is visible across the page, partially overlapping this box.

Date Plan finalised XXXXX

To be reviewed on or before XXXX

Review and Update Record

Date of Review	Changes made	Responsible Officer

This information should **not** be shared by professionals with anyone other than the people who have contributed to this assessment without **asking the child/young person or family first**. The family have the right to share it with whoever they wish.

Contents

Section A:	All about me Photo Personal details (name, address etc)
	My Story: Health and background My achievements to date What I would like to achieve in the future Who/what is important to me How to communicate with me Circle of support
Section B:	Details of XXX's Special Educational Needs <ul style="list-style-type: none">• Cognition and Learning• Communication and Interaction• Social, Mental and Emotional health• Sensory, Physical, Medical
Section C:	Details of XXX's Health Needs
Section D:	Details of XXX's Social Care Needs
Section E:	Special Educational Needs Outcomes
Section F:	Special Educational Provision
Section G:	Health Provision
Section H1:	Social Care Provision which must be made for a child / young person under 18 resulting from Section 2 of the Chronically Sick and Disabled Persons Act 1970.
Section H2;	Social Care Provision reasonably required by the learning difficulties and disabilities which result in XXX having special educational needs.
Section I:	Named educational provision Timescale for review
Section J:	Resources required to meet XXX's Special Educational Needs Details of personal budget (if appropriate)
Section K:	Appendices

Report	Who has written the report	Date of report

SECTION A: ALL ABOUT ME



Full name of child or young person:	
Known as:	
Date of birth:	
Education UPN or NHS Number:	
Address including post code:	
Parent/Carer's names (indicate parental responsibility)	
Home phone:	
Mobile:	
e-mail:	
School/college/other setting: (include address)	

My Story (background to include health and schooling)

Health and Development (including diagnosis and background):

I

What are my achievements/What do I do well?

What are my aspirations/ what do I want for the future?

CYP views:

Parental views:

What's important to me (now and in the future) (This might include learning, training, communication, care, health, relationships, employment, independent living, housing, community, leisure, travel, inclusion etc)

CYP views:

Parental views:



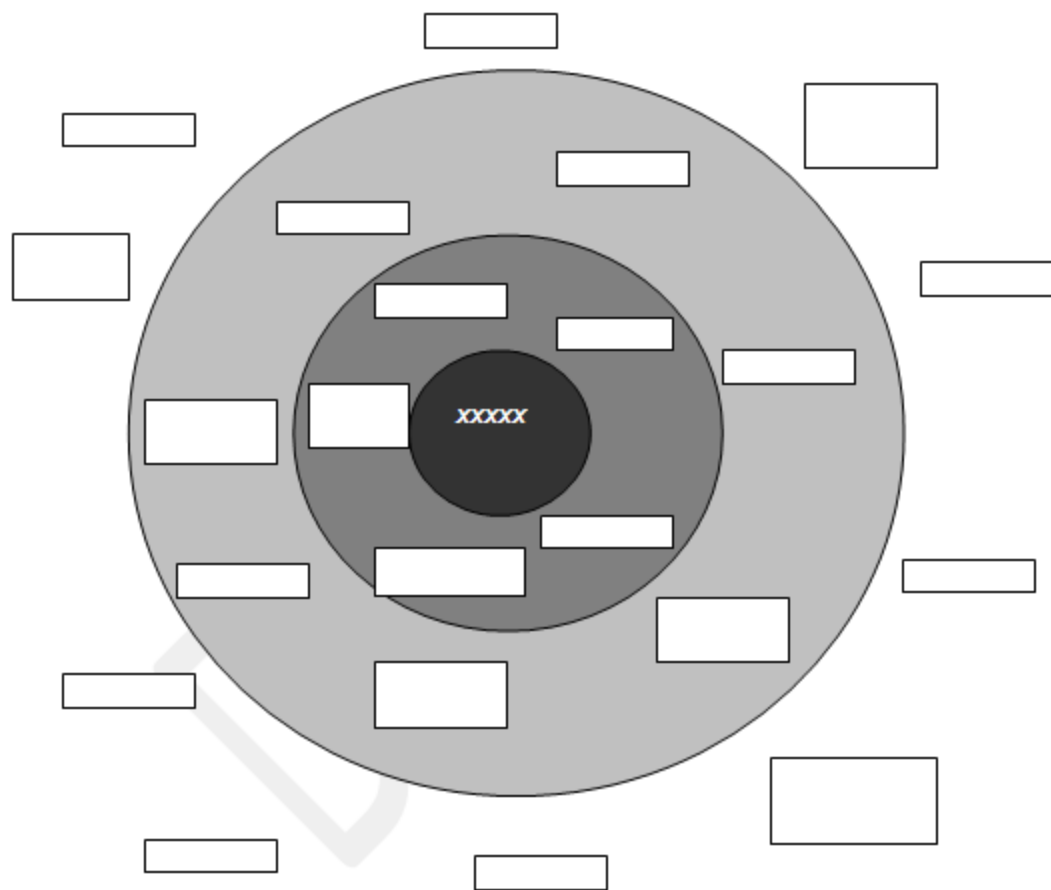
How best to support me (think about: How I prefer to communicate – when I do it means....What I need to help me make decisions? How I learn best? How to present information and choice. Things I am interested in

CYP views:

Parental views:

PEOPLE WHO SUPPORT ME

(to include a description of the role of this person and the support that they provide)



SECTION B: DETAILS OF XXX'S EDUCATIONAL NEEDS

Cognition and Learning

Strengths

Special Educational Needs

Communication and Interaction

Strengths

Special Educational Needs

Social, Mental and Emotional Health

Strengths

Special Educational Needs

Sensory, Physical and /or Medical

Strengths

Special Educational Needs

SECTION C: DETAILS OF XXX'S HEALTH NEEDS

Strengths

Health Needs

SECTION D: DETAILS OF XXX'S SOCIAL CARE NEEDS



Strengths

Social Care Needs

SECTION F – SPECIAL EDUCATIONAL PROVISION

This is what XXX needs to support him	How often will this happen?	Who will provide this support

SECTION G – HEALTH PROVISION

This is what XXX needs to support him	How often will this happen?	Who will provide this support

SECTION H1 – Social Care Provision which must be made for a child / young person under 18 resulting from section 2 of the Chronically Sick and Disabled Persons Act 1970

This is what XX needs to support him	How often will this happen?	Who will provide this support

**SECTION H2 – Social Care Provision reasonably required by the learning difficulties and disabilities which result in XX having special educational needs.**

This is what XXXXX needs to support him	How often will this happen?	Who will provide this support

SECTION I: EDUCATION PLACEMENT



Type of Setting	Name of School
Timescale when this plan will be reviewed	

SECTION J: RESOURCES TO MEET MY NEEDS:

Agreed Education Resources: (these are any resources that the Educational Services have agreed to make available as a top-up to the provision that the school is making from its delegated budget)

Description of resources	Funding

Agreed Social Care Resources: (these are any resources that the Children's Social Care have agreed to make available e.g. aids and adaptations, domiciliary care)

Description of resources	Funding

Agreed Health Resources: (these are any resources that the Health Services have agreed to make available e.g. equipment or therapy services)

Description of resources	Funding

Voluntary Sector



Description of resources	Funding (if applicable)

Family/Community Resource

Description of resources	Funding (if applicable)

Direct Payment agreed with family/young person

Signed:

Designation:

Date:


Signed:

Designation: Parent/Carer/Young Person (delete as necessary)

Date:


Transfer from Statements and LDAs to an EHC plan

- Children and young people who have a statement or receive provision in further education as a result of a LDA will be transferred to the new system gradually:
 - young people in further education with an **LDA** will transfer to the new system by 1 September 2016; and
 - children and young people with a **statement** will transfer by 1 April 2018.
- To ensure that support continues for these children and young people, the legislation relating to statements and LDAs will remain in force during the transition period.

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- The legal test of when a child/young person requires an EHC plan remains the same as that for a Statement and therefore it is expected that all of those who currently have Statements/LDA's will be transferred to the new system.
 - In Bolton we have planned for the transfer process to be carried out via a Person Centred Annual Review meeting at the end of a Key Stage.
 - This will stagger the conversion process across the given time frame and ensure that the conversions are carried out at an appropriate and meaningful time for each child/young person.

Personal Budgets

- A personal budget is the total cost of the provision required to meet the special educational needs of a child or young person.
- Four mechanisms for the delivery of a personal budget offer parents/young people more choice and control over provision:
 - ❖ **Direct Payments** – where individuals receive the funding directly in order to contract, purchase and manage services to provide the support specified in the EHC plan themselves
 - ❖ **An arrangement/notional budget** – where the Local Authority, school or college hold the funds and commission the support specified in the EHC plan
 - ❖ **Third party arrangements** – where direct payments are paid to and managed by an individual or organisation on behalf of the child's parent's of the young person
 - ❖ **A combination of the above**

- 
- Options regarding the management of a personal budget, and the preferred method for receiving this, will be discussed with parents/young people during an Education, Health and Care needs assessment and during a transfer review. Direct payments/third party agreements can also be requested during an Annual Review of an EHC plan.
 - Direct payments and third party arrangements are optional
 - Direct payments and third party arrangements can include funding from education, health and social care (separate payments during 2014-2015)

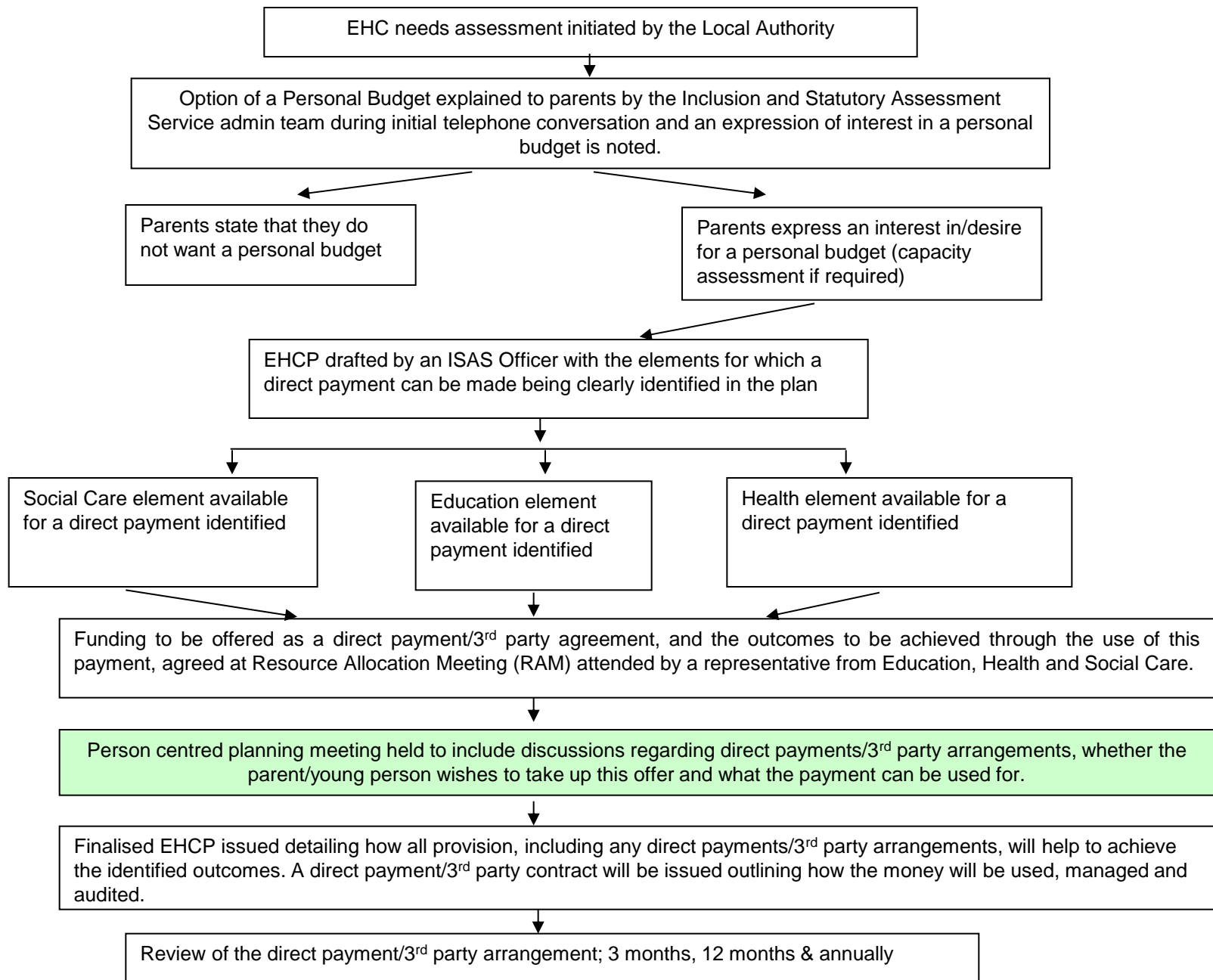
What funding will be available to take as a direct payment/3rd party arrangement ?

- This will change year on year as commissioning arrangements are reviewed
- In 2014-2015 it will include:
 - ❖ **Education:** element 3 funding (high needs top up funding)
 - ❖ **Health:** A personal health budget following eligibility for continuing health care.
 - ❖ **Social Care:** Direct payments to meet the eligible social care needs of children, young adults and their carers.
- Any provision to be delivered via a direct payment in an educational institution must be agreed by that institution
- Services already commissioned by the LA/CCG will not, initially, be available as a direct payment as this could destabilise local services

Education	Health	Care
<ul style="list-style-type: none"> • Mainstream or special school/college places • PRU places • 2,3 & 4 year old Nursery Places • Resourced/Specialist Nursery Places • ISP places (19-25 yrs) • Training Providers • Out of School Care • Element 1 & 2 Funding • Children’s Centre services • Transport • Behaviour Support • Ladywood Outreach • Sensory Support • Education Psychology • Parenting Support • Connexions Services • SNUFFs Volunteers • Pupil Premium • Parent Partnership • Youth Services 	<ul style="list-style-type: none"> • Health Visiting • Primary Care (GPs) • School Nursing • CAMHS & Adult Mental Health Services • Children’s and Adult’s Learning Disability Service • Audiology Service • Children’s Community Nursing • Physiotherapy • Occupational Therapy • Nutrition and Dietetics • Speech and Language Service • Consultant Paediatrician Support • Family Nurse Partnership • District Nursing (18 years+) • Dental Services • Orthotics • Ophthalmics • Podiatry • Wheelchair Services • Prescription charges 	<ul style="list-style-type: none"> • Local Youth Clubs • Childcare • Social and Leisure (Bridges) • 5-19 After School and Youth Saturday Club • Residential Short Break Care • Family Based Short Break Care • Family Support Short Break Care • Family Support Domiciliary Care • Children and Adults with Disabilities – Social Work • Adult In-House Day Care • Adult In-House Short-Term Breaks • Block Contracted Adult Short-Term Breaks • 5-19 Play is for All services • Family support for deaf and hearing impaired children • Transport • Home Start Services

Provision proposed to be available for a direct payment in 2014-2015

EDUCATION	HEALTH	SOCIAL CARE
<ul style="list-style-type: none">• Some specialist equipment (e.g. laptop, specialist software etc)• Sensory Integration• Specialist Dyslexia Teacher Support• Counselling• Educational Psychology; therapeutic support• Teaching Assistant Support• Brokerage Support (not yet in place)	<ul style="list-style-type: none">• Continuing Health Care Packages for Children• Continuing Health Care Packages for Adults• Sensory Integration• Counselling• Brokerage Support (not yet in place)	<ul style="list-style-type: none">• Personal Assistants• Home Care for Children• Adult Private Day Care• Adult Short-Term Residential Care• Private domiciliary support via agency• Social and Leisure activities/out of School Activities• Transport if to access a specific activity• Brokerage (not yet in place)





The Local Offer

- Two key purposes:
 - ❖ To provide clear, comprehensive, accessible and up to date information about the available provision and how to access it
 - ❖ To make provision more responsive to local needs and aspirations by directly involving disabled children and those with SEN and, their parents, and disabled young people and those with SEN, and service providers in its development and review



Where can I find the Local Offer website?

The Bolton Local Offer website can currently be found at:

- www.localdirectory.bolton.gov.uk/send.aspx



What if I do not have access to the internet?

- The idea of training community ambassadors is currently being explored.

This would mean that people working in community buildings such as children's centres, the One Stop Shop, leisure centres, libraries etc. would be aware of the SEND Reforms and able to locate and pass on appropriate information.



School SEN Information Report

- To be completed by each school
- Links from the Local Offer website to the SEN Information Report for each school.
- This will contain information such as:
 - school processes for identifying and assessing SEN
 - processes for consulting with parents and young people
 - arrangements for reviewing progress
 - expertise and training of the staff in relation to SEN
- This will enable comparisons between schools



Preparing for Adulthood

- Annual Reviews from year 9 onwards must now focus on preparing for adulthood:
 - employment
 - independent living
 - participation in society



Preparing for Adulthood pathway

- The Post 16 task and finish group have been developing a pathway that will hopefully bring forward and therefore smooth the transition process for those leaving Year 11 and those leaving college provision (i.e. those in Y12-14).
- Work will be done to embed this during the course of this academic year.

Further work

- Work undertaken by the task and finish group this year will focus on:
 - Developing pathways for the different strands; independent living, employment etc.
 - Ensuring the information on the Local Offer website adequately reflects post 16 options as they become available e.g. supported internships, traineeships, apprenticeships etc
 - Planning for transition between LA children services, adult health and social care services and/or Bolton CCG.
 - Publishing a Post 16 guide for parents and carers

Summary

- A number of significant changes will be introduced from 1st September 2014. These include:
 - Need to ensure that children, young people and families are kept at the heart of the process and involved in decision making
 - Publishing of a Local Offer (SEN Information report for schools)
 - Replacing Statements/LDA's with Education, health and Care plans
 - Need to offer option of direct payments to increase choice and control for families
 - Need to jointly commission services



However.....

- We are all learning together and it is unlikely that at this point all professionals will be familiar with all aspects of the SEND Reforms.
- The next 12 months will be a steep learning curve for all as we face issues for the first time and work through them together, but this will help us to create a better system for SEND in the long term.



Questions

- Please write questions on a post it note and stick the on the wall.
- We will then produce a FAQ document on the Local Offer website answering these questions.



Thank you for listening