

REPORT TO:	HEALTH & WELLBEING BOARD (CROYDON) 11 September 2013
AGENDA ITEM:	10
SUBJECT:	Reform of Services for Children and Young People with SEN and Disabilities
BOARD SPONSOR:	Paul Greenhalgh, Executive Director, Children, Families and Learning, Croydon Council
CORPORATE PRIORITY/POLICY CONTEXT:	
<p>This report addresses the corporate priority to secure ‘a good start in life for children and young people’ and the priority set out in the Children and Young People’s Plan for Croydon to improve outcomes for children and young people with learning difficulties and disabilities. The national policy driver is the SEN reform programme set out in the green paper ‘Support and Aspiration’ and translated into legislation in the Children and Families Bill currently before parliament.</p>	
FINANCIAL IMPACT:	
<p>There are no financial considerations within this report.</p>	

1. RECOMMENDATIONS

This report recommends that the health and wellbeing board:

- 1.1 notes the implications of the Children and Families Bill and the overview of current multi-agency working in Croydon to improve provision for children with disabilities;
- 1.2 agrees to supports the specific work necessary to implement the new legal requirements;
- 1.3 receives an update on progress in summer 2014 to check readiness for implementation of new statutory duties.

2. EXECUTIVE SUMMARY

- 2.1 This report informs the Health and Well-Being Board of a significant national policy reform which will change the approach to children with Special Educational Needs and Disability. The reform requires legislative changes, currently before parliament in the draft Children and Families Bill 2013, and new regulations, which are still being drafted. These will result in changes to both the Council’s and the Clinical Commissioning Group’s statutory duties, from September 2014. The report sets out the reasons for reform and the key changes proposed.

- 2.2 The focus of this report is on the new duty on the Local Authority services and health to collaborate. It sets out details of existing arrangements for multi-agency working and practice that can be built on to meet the new requirements.
- 2.3 It also details some of the challenges the changes pose, in particular staff capacity to shape and deliver a major service transformation and potential increased demand from extending support to young people through to age 25.

3. NEW APPROACH TO SPECIAL EDUCATIONAL NEEDS AND DISABILITY

Context

- 3.1 The Green Paper **Support and Aspiration: A new approach to special educational needs and disability** was published on 11 March 2011. At the same time a 4 month public consultation was launched and a series of national pathfinders commissioned to pilot key strands of the new approach. The government's response to this consultation entitled 'Support and Aspiration: a new approach to special educational needs and disability – Progress and next steps' published in May 2012 sets out the progress in taking forward the Green Paper reforms. This includes legislative reform to be enacted through the **Children and Families Bill**, which is expected to receive Royal Assent in the spring of 2014. Implementation of the reforms is expected to take place in stages from September 2014. A letter to members of the House of Lords from Lord Nash, Parliamentary Under Secretary of State for Schools following the second reading of the bill in July, provides helpful clarification of a number of issues raised during debate and confirms areas where the bill is currently being strengthened, including in relation to health provision.

Scope of provision

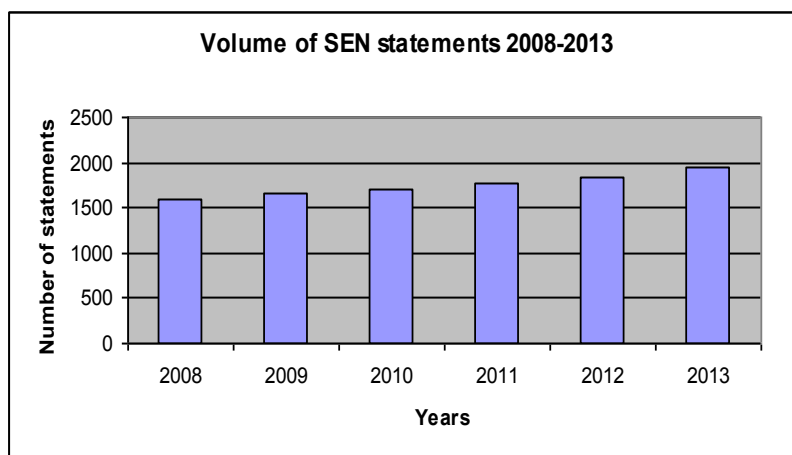
- 3.3 The reforms relate to children identified as having special educational needs (SEN). This is defined broadly as 'significantly greater difficulty in learning than the majority of others of the same age, or a disability which prevents or hinders a child or young person from making use of facilities of a kind generally provided for others the same age in schools, colleges and training providers'.
- 3.4 Concern has been expressed about the extent to which the reforms will apply to children with long term health needs or disabilities. The government case is that the majority of disabled children will be included, based on evidence from one study that approximately 75% of disabled children have SEN, and that others not covered by the provisions will be supported through action under the Equality Act

2010, social care provision under the 1989 Children Act or the draft Care Bill (young people 19-25).

Cohort of children in Croydon with SEN or disabilities

3.5 The 2009/10 Croydon JSNA profiled the needs of children and young people in the borough with SEN and disabilities. It found that 1.3% of the child population was registered as disabled, most commonly for communication disorders including autistic spectrum disorders. It cited a research project undertaken in 2008 by the Thomas Coram research unit, which identified the prevalence nationally of severe and complex disability within the child population as 1.2%, equating to about 1,000 children and young people in Croydon. This includes severe learning and physical disability, autism, challenging behaviour or a serious, chronic health condition. This cohort is known to be increasing in number and a further needs assessment will be undertaken this year for the Children and Families Partnership to estimate growth trends and associated needs for different groups within the cohort.

3.6 Croydon currently has 1,951 pupils with statements of SEN. This represents 2.4% of the school population, below the national average of 2.8% and the London average of 2.7%. This number is increasing by 4 - 5% per year with an overall increase of 23% over the last 5 years. The largest rise in comparison to the previous year is for the current year at 5.63%, which includes a rise in the number of pupils moving into the borough after the start of the school year with statements determined by other local authorities. These rates of increase are not surprising given the growth in the child population and increasing levels of deprivation within the population in Croydon.



3.7 The most predominant types of need are Autistic Spectrum Disorder (29%), Moderate Learning Difficulties (20%) and Behavioural, Emotional and Social Difficulties (15%). The majority of pupils with statements of SEN are educated in mainstream schools.

- 3.8 Children with complex SEN or disabilities may receive support from a range of agencies from early years through to adult life. This includes therapeutic interventions and other medical support as well as broader family support from social workers to address the challenges of managing complex needs in the home environment.

What is the case for change at a national level?

- 3.9 The Green Paper 2011 argues that nationally the current system is not working for families and children and identifies the following concerns:
- Too many children with SEN have their needs picked up late;
 - 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.

What are the national changes designed to achieve?

- 3.10 The Green Paper sets out a vision of a system in which:
- Children's special educational needs 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 wherever they are;
 - Parents know what they can reasonably expect their local school, local college, local authority and local services to provide, without them having to fight for it;
 - For more complex needs, an integrated assessment and a single Education, Health and Care Plan from birth to 25; and
 - There is greater control for parents over the services they and their family use;
 - Aspirations for children and young people are raised through an increased focus on life outcomes.
- 3.11 The following extract from a fact sheet published in June by the Children and Families Bill team summarises progress on the key elements of reform as the bill progresses to its committee stage:
- Replacing statements and learning difficulties assessments with a

new birth to 25 Education, Health and Care Plan, extending rights and protections to young people in further education and training and offering families **personal budgets** so that they have more control; over the support they need;

- Improving cooperation between all the services that support children and their families and particularly **requiring local authorities and health authorities to work together**;
- Requiring local authorities to **involve children, young people and parents** in reviewing and developing provision for those with special educational needs and to publish a '**local offer**' of support.

3.12 These proposed changes sit alongside wider reforms in Health and Social Care, the introduction of 2 year old progress checks supported by a government aspiration for increasing the numbers of health visitors and radical reform of school funding.

How are agencies in Croydon working together to prepare for implementing the national reforms?

3.13 Multi-agency collaboration in the borough to improve outcomes for children and young people with learning difficulties and disabilities is well developed. The Children and Families Partnership has had a strategic focus on improving opportunities and outcomes for children and young people with SEN and disabilities since summer 2011 and is addressing the following local priorities:

- Implement expansion of local education provision, supporting **local schools to become more inclusive** and improve outcomes
- Build on multi-agency decision-making for support packages to develop **single health, care and education plans**
- Complete **multi-agency LDD strategy** to strengthen joint delivery of commissioning and provision development
- Further strengthen **transition to adulthood**

3.14 A multi-agency partnership group with a work plan covering all the key themes of the Green Paper reports regularly on progress to the Children and Families Partnership Board. One of its key achievements has been to strengthen links with parent groups in the borough and to engage more systematically with representative groups of children and young people to gain a better understanding of how local families experience the system operating locally.

3.15 A governance structure for overseeing the implementation of national reforms was established in summer 2013. An **SEN Reform Board** chaired by the Council's Director for Learning and Inclusion and with strategic representation from all the key agencies and from parents and voluntary organisations is accountable for a range of work streams, which seek to prepare for implementation ahead of the publication of new regulations and guidance expected early in 2014:

- Development of Croydon's local offer;
- Development of the single assessment process and education, health and care plan 0-25;
- Improving arrangements for transition at age19;
- Options for personal budgets.

Each of these work streams has an identified lead and a multi-agency project group to develop detailed proposals. A project manager has been appointed to support the change process.

- 3.16 The Local Offer project group has designed a series of engagement opportunities with young people and parents to understand more about how and where information needs to be made available to ensure it is accessible and useful to guide the choices families are required to make. A number of engagement sessions held over the summer have begun to build a picture of how families access information and support.
- 3.17 The group is building an overview through different agency perspectives of what is currently available to meet the needs of children and families and how successfully these different elements of provision work together. This will be tested with parents and young people to gain a better understanding of their experience to inform the changes that need to be made in the future.

What is in place already?

- 3.18 A number of current developments in the borough contribute to meeting the new requirements.
- 3.19 The following areas of work are contributing to developing and defining a **Local Offer for Croydon**:
- Joint commissioning of Speech and Language therapies – Clinical Commissioning Group and Council – for April 2014;
 - Re-commissioning of short breaks provision for children with disabilities to broaden the offer and make more flexible use of the available resource;
 - The proposed creation of a team to work across children's and adult services to support families where young people are exhibiting challenging behaviour in their home environment;
 - £35.5 million capital investment agreed by the council's Cabinet in July 2012 to increase the number of specialist local education places and expand the range of provision, including new SEN resource bases in mainstream schools (more detail on progress on implementing this is given in paragraphs 3.28 – 3.30);
 - Conversations with schools and colleges on the provision they make through their delegated funds and the descriptors of provision to underpin this (as outlined in paragraph 3.18);
 - Leading the establishment of a consortium of South London

boroughs to jointly commission independent school placements to achieve better value for money.

- 3.20 Delivering a sustainable, affordable local offer will be challenging in the context of the growth in the school population, the increase in the number of statements of SEN and the resulting rising demand for specialist provision.
- 3.21 Progress on developing a **single assessment process and plan** is in the early stages and is the area most dependent on detailed national guidance and regulations, which are not expected until later this month and will be subject to consultation before a final version is published in April 2014. Implementation will be staged over 3 years from September 2014. We have, however, established a multi-agency support and resource panel to enhance planning and decision-making for children and young people with the most complex needs requiring high levels of resource. Our focus is currently on early years children progressing into school and on planning for transition into adulthood, the latter supported by a focussed review of current ways of working across children's and adult services. Again a multi-agency working group is meeting to plan in detail for implementation and will be piloting a Croydon version of the single plan in Spring 2014, based on learning from the Pathfinders.
- 3.22 Croydon already offers families **personal budgets** for personal care for children with disabilities and as one of a range of travel assistance options. Both of these offers provide greater choice and flexibility for parents and are relatively straight-forward to administer. The evaluation of the Personal Health Budgets pilot (published October 2012) found that personal health budgets made improvements to quality of life and were cost-effective.

What are the key implications for health and associated risks?

- 3.23 The national reform programme strengthens the role of health in relation to children and young people with SEN or disabilities and builds on existing collaboration. There will be a new duty for local authorities and health commissioners to collaborate. This will require the Local Authority and the Clinical Commissioning Group to work together to:
- Assess the education, health and care needs of local children and young people with SEN;
 - Offer joined up advice, information and responses to families;
 - Agree the full range of provision reasonably required by children and young people with SEN;
 - Agree joint commissioning arrangements;
 - Publish information about services including who provides and how to access (Local Offer);

- Secure health care provision specified in Education, Health and Care plans;
- Establish a clear complaints procedure relating to education, health and care provision and assessments;
- Keep arrangements under review.

3.24 While the existing multi-agency arrangements including the SEN Reform Board and the project groups reporting to it (as outlined in paragraph 3.15) provide the structure for working through these new arrangements, each agency needs to invest staff time on a regular basis over the next 12 months to develop a detailed implementation plan with ongoing resourcing. This will then need to be agreed by both the Council and the CCG through their separate governance arrangements.

3.25 A benefit from a commissioning perspective of the SEN reforms and the new duties which underpin them is the clear picture of needs that the holistic approach to assessment and support planning will provide. It will enable both the Council and the CCG to plan resourcing more effectively. There are, however, very significant risks in terms of capacity to engage in the assessment and planning process and the additional resource implications of extending entitlement to age 25. There will also be more interdependencies in the system requiring robust protocols for agreeing joint resourcing.

3.26 Health and Well Being Boards will have a critical role in overseeing strategic needs assessments and developing joint strategies to meet locally identified needs.

4. CONSULTATION

4.1 The SEN Reform Board is developing a stakeholder engagement plan and has undertaken some engagement activities with parents / carers and young people over the summer (see paragraphs 3.16 - 3.17).

4.2 A consultation on the new Code of Practice to underpin the provisions of the Children and Families Bill will be conducted nationally from late September 2013.

5. SERVICE INTEGRATION

5.1 The report identifies new duties on the Local Authority and the Croydon Clinical Commissioning Group to collaborate. The structures and mechanisms for collaboration will be determined through the work programmes outlined in this report.

6. FINANCIAL AND RISK ASSESSMENT CONSIDERATIONS

6.1 There are no quantifiable financial considerations or risks arising directly

from this report. Future resource pressures have been highlighted in paragraph 3.25.

7. LEGAL CONSIDERATIONS

- 7.1 There are no legal implications arising from this report
- 7.2 (Approved by: J Harris Baker, head of social care and education law on behalf of the Council Solicitor & Director of Democratic & Legal Services)

8. HUMAN RESOURCES IMPACT

- 8.1 There is no specific human resources impact arising from this report
- 8.2 (Approved by: Atia Williams, HR Business Partner, on behalf of the Director of Workforce, Equality & Community Relations)

9. EQUALITIES IMPACT

- 9.1 An equalities impact assessment has been commenced and will be updated as consultation progresses.

10. ENVIRONMENTAL IMPACT

- 10.1 There is no specific environmental impact arising from this report

11. CRIME AND DISORDER REDUCTION IMPACT

- 11.1 There is no specific crime and disorder impact arising from this report

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BACKGROUND DOCUMENTS : None