Appendix 1: SEND Strategy

TOWER HAMLETS SEND STRATEGY (2018 – 2023)

An inclusive approach to learning and support for children and young people with special educational needs and disabilities (SEND)

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1. Foreword

Welcome to our new Strategy for Children and Young People with Special Educational Needs and Disabilities (SEND).

There are around 8,000 children and young people in Tower Hamlets, between the ages of 2 and 25, who have SEND. We take seriously our joint responsibility to coordinate support, care and learning for these children and young people, so they are able to fulfil their ambitions and to thrive.

We are proud of the quality of the schools and early years provision in Tower Hamlets: Ofsted recognises how good the support and teaching for children and young people with SEND is. We know, however, there are things that we need to do better. As part of this, we are committed to working more closely with parents and carers of children and young people with SEND, who are usually the first to know when things are going well in their child's life, but also the first to know when things are not the way they should be.

The lead organisations for the SEND Strategy are the London Borough of Tower Hamlets' (LBTH) Children's Services and Tower Hamlets Clinical Commissioning Group (THCCG). We will set up a new SEND Strategy Board, which will be at the centre of a partnership that makes sure the commitments in this document are delivered. We will also communicate the successes and achievements to all residents of Tower Hamlets.

In developing the new strategy, we have consulted widely with parents and carers, with professionals working with children and young people with SEND and with the children themselves. Their views have informed the five priorities we set out for the next five years. These are:

- 1. Leading SEND
- 2. Timely identification and assessment
- 3. Better outcomes and pathways
- 4. Clear information and involvement
- 5. Moving on.

As strategic leaders, we are excited that there will be more opportunities for young people with SEND to take up supported employment through the Mayor's employment challenge and we expect the SEND Charter to become a visible sign of the commitment to providing quality care, support and education.

We look forward to joining all residents in Tower Hamlets in understanding and supporting those with SEND better and in considering how to play a part in the lives of these children and young people.

Signed:

Lead member for Children's Services
Lead member for Adults Services
Chair THCCG

2. Introduction

Purpose and Scope of the Strategy

This Strategy sets the direction for the next five years for children and young people with SEND in Tower Hamlets, aged from 0 to 25 years, and for their families. Our ambition is to establish a flexible and responsive SEND system (see: appendix 1). The Strategy focuses on children and young people's educational achievement and overall wellbeing, including the social care and health care support provided for them. Its implementation is led by the London Borough of Tower Hamlets (LBTH) and Tower Hamlets Clinical Commissioning Group (THCCG).

"In 2022, I will be 19. I will be doing things myself: I will be shopping and I will have money to spend." Student

Tower Hamlets has been without an overarching vision and joint strategic direction for SEND for some years. Through consultation we have been informed there is a need to establish visible, strategic leadership and accountability (see: Chapter 10) and to improve communication and transparency. As leaders of a renewed SEND system, we will improve the 'join-up' between provision and involve those with SEND, and their families, more in decision-making. At the heart of this shared direction is our vision:

Our vision is:

..... for all Tower Hamlets' children and young people with special educational needs and disabilities (SEND) to lead fulfilling lives and be as independent as possible, supported to learn, thrive and achieve by their families, services and local communities.

This vision is underpinned by our strategic principles. We will expect all services and schools in Tower Hamlets to both pledge their commitment to these principles and be able to demonstrate how they put these into practice, through the new SEND Charter. During the next five years, our ambition is also to extend the reach of the SEND Charter to involve commercial and leisure organisations as well. The SEND principles are:

- All services providing high-quality education and care.
- Education, health and social care services working well together, supported by voluntary and independent organisations, and sharing accurate information in the best interest of the child and their family.
- Children, young people and their parents and carers are helped to plan and make choices about their support as much as possible.
- Funding and support is allocated fairly and openly.
- Children and young people are helped to be as independent as possible.
- Additional needs are identified as early as possible and provision made available locally within supportive communities.

During the first year of the Strategy, the LBTH and THCCG will work with parent and carer groups and young people with SEND to develop the SEND Charter. We will then work with schools, early years

providers and other services to make a commitment to the Charter and display this as part of showing their support for children and young people with SEND and their families.

3. Children and young people with SEND: the national and local context

National policy and local guidance

National and local policy, plus research and evidence from across the country, provide the foundation for the Strategy, combined with our knowledge about the children and young people with SEND in Tower Hamlets. We considered these through a joint strategic needs assessment (LBTH 2018a) and an overview of the main policy, population and financial information are set out below. We also undertook two consultation exercises to both inform the Strategy (LBTH 2017b) and hear views on the draft strategy (LBTH 2018b).

Key messages from local people

• There should be strong and visible leadership of the SEND system in Tower Hamlets. The commitments in the strategy require effective leadership to ensure they are implemented.

"A clear strategic vision is required in order to ensure all children with SEND in Tower Hamlets receive equal support."

"For me it comes down to communication: who do I talk to about my child, who is in charge?"

The strategy "... seems positive and aspirational. There is much to be done to establish genuine joined up working across services."

• Parents and carers want to be involved. They want to build on their involvement in decisions about their own children and have their views sought and to be represented on decision-making groups.

"Young people should be involved in Strategy Board and both parents and young people should have support in understanding how things 'work'."

"Parents involvement in what they can use funding for and what their child should automatically be entitled to within the education system."

The SEND Charter "must be done with parents and young people involved."

Good information that is easily available. An easy to access 'Local Offer' site is an important
element, as is transparency by professionals supporting children and young people with SEND,
including on budgets.

"There needs to be more information regarding the SEND 'pathways' through the education system."

"More parent groups and clearer information on things available for specific children."

• Better planning for the future. To make the most of the resources available and to ensure there are school and college places and the staff to provide the education and care.

"How will we ensure that there are staff in place to support the increasing number of children with SEND and EHC plans?"

"We welcome more systematic assessment of SEND need and planning in advance for sufficient special school places."

 All of these should lead to better futures and opportunities for children with SEND as they become young adults:

"More should be done to create partnership with business to create opportunities for young people with SEND."

"We need to have high expectations, but also realistic expectations."

National policy

The Department for Education (DfE) leads the SEND system for England and defines the legislative, policy and funding arrangements. The DfE's vision is of "children and young people with SEND achieving well in their early years, at school and in college; finding employment; leading happy and fulfilled lives; and having choice and control over their support." (DfE 2015b).

The current arrangements for the education and care of children and young people with SEND are largely governed by the Children and Families Act (2014). Part 3 of this requires local authorities, schools and academies, early years providers and NHS bodies to pay regard to the regulations and to the statutory Code of Practice for SEND (DfE 2015a).

Duties in the Children and Families Act (2014) include:

- To work across the local authority and health to jointly commission services that deliver integrated support for children and young people with SEND aged 0-25, including arrangements that support personalisation and personal budgets.
- For the local authority to work with local partners, parents and young people to co-produce and publish a Local Offer of SEND services and to assist young people in finding employment, obtaining accommodation and participating in society.
- For the local authority to provide co-ordinated education, health and care needs assessments for children and young people aged 0 25 and issue education, health and care (EHC) plans.
- For NHS clinical commissioning groups (CCGs) to put in place mechanisms to ensure practitioners and clinicians can support the integrated EHC needs assessment process.

The Care Act (2014) sets out duties local authorities and CCGs must fulfil for children and young people with disabilities and their families, including direct payments and supporting transitions to adult care services.

The Government holds the local SEND system to account through Ofsted and the Care Quality Commission (CQC) who have been tasked to carry out evaluations of local areas in England and their support for children and young people with SEND. Inspection teams assess the effectiveness of the local organisations in identifying and meeting the needs of all children and young people with SEND from ages 0 to 25 (Ofsted 2016).

Local policy and guidelines

The following Tower Hamlets policies and strategies relate to this Strategy and have informed the development of the priorities:

- the Adult Autism Strategy (2017 22),
- the Health and Wellbeing Strategy (due for implementation),
- the Tower Hamlets Children and Families Plan 2016 2019
- joint commissioning plans,
- the Tower Hamlets Transformation Plan for Children and Young People's Mental Health and Wellbeing,
- the Adult Learning Disability Strategy (2017 2020).

A Tower Hamlets outcomes framework

To establish a shared focus between children and young people, their families, and the early years setting / schools / colleges and services that support them, an outcomes framework will be developed. The framework will serve as a 'golden thread' and link the elements of the local SEND system: from commissioning of services, through learning and care pathways and curriculum planning in schools /

college, to individual outcomes in EHC plans. Progress against these outcomes can then be monitored by the SEND Board.

The SEND Code of Practice (DfE 2015a) expects outcomes to be a central feature of a child or young person's EHC plan. In an EHC plan outcomes should be holistic (i.e. are shared between education, health and care), person-centred, last for a phase or stage, be about things that can be influenced, based on what is important to and for the child or young person (SE7 2015). By establishing a Tower Hamlets Outcomes Framework, services and families can be reassured there is sufficient breadth of provision in an individual's EHC plan and have confidence that the outcomes relate to learning programmes and the commissioning of services.

Informed by the outcomes tool commissioned by the DfE from Preparing for Adulthood (PfA 2015), the following five areas will form the basis of the Tower Hamlets Outcomes Framework:

- Keeping healthy and well.
- Skills for independence and living locally.
- Learning, employment and participation in local activities.
- Choices and having the right support
- Feeling respected and safe.

National and local prevalence

There are about 47,000 children and young people of school age in Tower Hamlets and about 1 in 6 of are identified as having SEND: a total of nearly 8,000 pupils (see: table 1). Tower Hamlets is one of London's fastest growing boroughs, with the population as a whole is expected to grow by 22 per cent by 2026. This is twice as fast as the London average and three times that of England as a whole. The school-age population is projected to grow even faster: by 28% during this same period and rising to 57,600 (LBTH 2016). As well as an additional 10,000 children attending schools and colleges, this growth could result in as many as 600 more children and young people who need to be supported through an EHC plan.

Table 1 Proportion of school pupils with SEND

	Total school / college population	Total with SEND	Total at SEN support	Total EHC plan or statement
England	8,669,080	1,244,253 (14.4%)	1,002,069 (11.6%)	242,184 (2.8%)
Inner London	517,000	81,779 (15.8%)	66,231 (12.8%)	15,548 (3.0%)
Tower Hamlets	46,679	7,897 (16.9%)	5,640 (12.1%)	2,257 (4.8%)

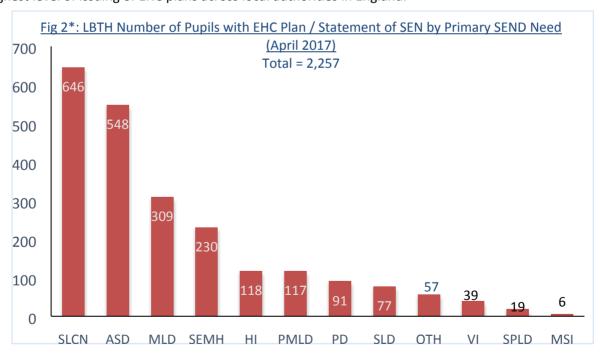
In England (see Fig 1) the most frequent primary need of children and young people assessed as requiring an EHC plan is autistic spectrum disorder (ASD) whilst for those at SEN support the largest groups are those with moderate learning difficulties (MLD) and speech, language and communication needs (SLCN), respectively. Professionals anticipate that, over time, the proportion of these with an EHC plan with MLD will reduce, as their needs are increasingly met at SEN support.

<u>Fig 1</u> Percentage of children and young people, nationally, by primary SEND need: at SEN support or with an EHC plan



Source: Schools census, January 2017

Fig 2 shows a breakdown, by primary need, of children and young people in Tower Hamlets with an EHC plan. The largest group of those with an EHC plan in Tower Hamlets is those with speech, language and communication needs (SLCN), at 28.6%, followed by those with autistic spectrum disorder (ASD), at 24.3%. Comparison with fig 1 indicates that the proportions of children with SLCN with an EHC plan in Tower Hamlets is out of step with the proportions seen nationally. Overall the proportion of pupils with an EHC plan has continued to increase since 2014 and, in 2017; as a result, Tower Hamlets has the second highest level of issuing of EHC plans across local authorities in England.



^{* -} see appendix 1 for abbreviations

Table 2: LBTH Number of Pupils at SEN Support in Tower Hamlet Schools (Jan 2017)

Primary need	Number of pupils	Percentage of those at SEN
	(total = 5,597)	support
Speech, language and communication	2,235	39.9%
Social, emotional and mental health	1,242	22.2%
Moderate learning difficulty	828	14.8%
Specific learning difficulty	571	10.2%
Other	191	3.4%
Non-specific	157	2.8%
Hearing impairment	137	2.4%
Autism spectrum disorder	89	1.6%
Physical disability	70	1.3%
Visual impairment	46	0.8%
Severe learning difficulty	14	0.3%
Multiple sensory impairment	10	0.2%
Profound and multiple learning difficulty	7	0.1%

Of children and young people identified at SEN support in Tower Hamlets (table 2), the largest group, again, is those with speech, language and communication needs (SLCN), at 39.9%, and then those with social, emotional and mental health needs (SEMH) who make up 22.2% of the total. Those at SEN support with SLCN are, again, significantly higher than the proportion recorded nationally (see fig 1).

More information about children with SEND in Tower Hamlets

Children and young people with SEND are a key vulnerable group. National evidence shows that nearly 30% of pupils eligible for free school meals have SEND, even though these children and young people comprise 14.4% of the school population. The reasons for a larger number of families living in poverty include the fact that there is a strong link between poverty and the underlying causes of certain SEND, whilst the extra support demands of bringing up a child with SEND are more likely to move a family into poverty (JRF 2016).

This Joseph Rowntree Foundation report also highlights the importance of education to help children and young people become as independent as possible. In Tower Hamlets children are well supported to learn and develop in our schools and nurseries, with, for example, a higher proportion of those at SEN support achieving expected learning by the end of year 6 and similar performance for those with an EHC plan (see table 3a). Similarly, pupils attain well in Tower Hamlets schools by the end of key stage 4 (see table 3b).

Table 3a. Pupils' attainment at the end of primary school (key stage 2). Tower Hamlets and England.

Category of pupil	Percentage achieving level 4 or above in reading, writing and mathematics		
	Tower Hamlets	England	
Without SEND	78%	70%	
Children at SEN support	31%	20%	
Children with a statement or EHC plan	8%	8%	

Table 3b. Pupils' attainment at the end of secondary school (key stage 4). Tower Hamlets and England.

Category of pupil	Average attainment 8 score Tower Hamlets 2017	Average attainment 8 score England 2017
Without identified SEND	49	46
SEN support	33	N/A
SEND (statement or EHC plan)	28	N/A

Source: Tower Hamlets SEND JSNA (2018a)

Whilst large numbers of children and young people are learning well at school, the number of those with SEND who are in vulnerable families and subject to children protection plans, is also relatively high. Table 4 shows that, although only 4.2% of children in the borough have an EHC plan, 21.3% of those with a child protection plan had one: children with a CPP are five times more likely to also have high levels of SEND than those in the general population (LBTH 2018a).

Table 4: Child protection plans (CPPs) issued for children with and those without EHC plans, Tower Hamlets (March2017).

Category of CPP	With EHC plan	With no EHC plan	Total
	(number, %)	(number, %)	
Neglect	35 (43%)	67 (22%)	102
Physical abuse	8 (10%)	63 (21%)	71
Sexual abuse	4 (5%)	11 (4%)	15
Emotional abuse	31 (38%)	149 (50%)	180
Multiple	3 (4%)	10 (3%)	13
Total	81	300	201
(% of total with CPP)	(21.3%)	(78.7%)	381

Source: Tower Hamlets SEND JSNA (2018a)

There are also 800 children and young people whose level of need has been assessed as needing short-break support from the Children with Disabilities Team and a further 145 young people between 18 and 25 in receipt of support from the Community Learning Difficulties Service. Although, between 40 and 50 of these young adults have been assessed to meet thresholds for supported accommodation, there are few units available within the Borough, so most are accommodated outside Tower Hamlets.

Local finance

The overall high needs funding block allocated to Tower Hamlets (from the DfE), in 2017-18, was about £46.08 million and we expect this to increase to £48.5 million for 2018-19. Over 90% of this is allocated to schools in the form of top-up payments for additional support for children and young people with an EHC plan. In recent years there has been a significant overspend on this budget.

Children's social care support for children and young people with disabilities invests £4.6 million per annum, through the provision of short breaks, respite and complex care packages.

TH CCG estimates it commissions over £2.1 million of health care for children and young people with an EHC plan or statement of SEN. There is further NHS support commissioned for those at SEN support that has yet to be quantified financially.

4. How we intend to develop our local SEND system

Priorities for the next 5 years

The strategic priorities for children and young people with SEND have been developed and tested as the result of a local review of SEND services (LBTH 2017a) and 'early engagement' discussions with parents and carers and children and young people, and with early years settings / schools / colleges and services (LBTH 2017b). Supported by system-wide leadership, energised partnerships and informed by good data, the priorities will ensure the Strategy achieves the local opportunities and support for these children and

We will maintain a focus on value for money and build stronger partnerships with parents and carers to increase the level of confidence in the Tower Hamlets SEND system.

young people to learn, receive the care they need and thrive.

The five priority areas for children and young people with SEND are:

- 1. Leading SEND
- 2. Timely identification and assessment
- 3. Better outcomes and pathways
- 4. Clear information and involvement
- 5. Moving on.

"What do we want from the Council and NHS: keep us safe and help us to do as much as we can for ourselves."

Student

The details of each priority are set out in the next five chapters. For each, the case for the priority is summarised, followed by an overview of current activity and services and, then, changes to be implemented during the lifetime of the Strategy.

The progress within each priority will be evaluated annually, looking at what is working, what needs to continue to improve and what lessons have been learned. Each priority will be supported by detailed action planning which will be overseen by one of the proposed SEND sub-groups. Performance will be monitored by these groups and progress reported regularly to the strategic SEND accountability group (see: Chapter 10).

5. Priority 1: Leading SEND.

Why is this important and what people said?

National evidence shows that the areas where children and young people with SEND thrive and achieve well are ones with strong strategic leadership of SEND (Ofsted 2016). The active involvement of school / college headteachers and principals is particularly important. A SEND system consists of all services and provision across the local area (i.e. Tower Hamlets) for children and young people with SEND and their families. An effective SEND system is strongly led with a clear, shared vision, and constantly reviews its evidence and data in order to keep improving. It is held to account by other leaders and by parents / carers.

Professionals and parents / carers in Tower Hamlets identified many pockets of good practice, such as the 'outstanding' local special schools. They also identified inconsistencies, fragmentation and unclear direction. Headteachers and service managers reported there is a need for a clear vision across Tower Hamlets that all sign up to (LBTH 2017a). Parents / carers want to know who is leading and to be invited to be involved and have their say on future developments and change. Existing SEND arrangements are under pressure from increases in demand and parents / carers asked to have more of a voice about how SEND funding is used (LBTH 2017b).

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	What is being done		What is our focus for action?
•	LBTH and the NHS have largely been	•	Work is underway to streamline decision-making
	working in parallel to set the direction for		groups and invite more involvement by parents /
	services for children and young people with		carers. Oversight of this will be an important initial
	SEND and complex needs. Several decision-		focus for the SEND Strategy Board.
	making and operational groups run, but		
	there is little reporting on progress.		
•	Headteachers and early years managers	•	Work with headteachers to increase the level of their
	provide good leadership in schools and		involvement in the SEND system in Tower Hamlets. A
	early years settings, but have limited		first step will be for a group of headteachers to review
	involvement in the leadership of SEND		the use of 'high needs' funding.
	across Tower Hamlets. There is scope to		
	increase the sharing good practice between		
	schools and between early years settings.		
•	All Tower Hamlets special schools are good	•	Work across schools, with the Tower Hamlets
	or outstanding and most of the learning and		Education Partnership (THEP) and across early years,
	provision for children and young people		health and social care, to ensure the availability of
	with SEND in mainstream schools and in		excellent professional development and oversight of
	early years settings is good. There is a		the workforce supporting children and young people
	patchy understanding of current and future		with SEND.
	workforce needs across education, health		
	and social care.		
•	A lot of information is gathered about	•	To identify ways that LBTH and THCCG can improve
	children and young people with SEND and		the reliability of the data held and its availability to
	there are strategic arrangements for		professionals who are working with children with
	sharing information in the best interest of		SEND and their families. This includes trialling of a
	the child. However, this data and		system to project possible future demand for special
	information is too often in separate		school places.
	databases and limited use is made of it to		

tell us how we are doing and future needs that need to be planned for. In the first 12 months, what will we do? 1. Launch a new SEND strategic accountability group, that includes headteacher and parent and carer representation. We will have streamlined SEND groups and established reporting and accountability and consulted on our key performance indicators (KPIs). 2. Headteachers will have led a review of high needs funding. Changes will have begun that seek to achieve balanced SEND budgets by 2021. 3. Reviews will be underway of specific specialist education provision with the aim of ensuring sufficient capacity in Tower Hamlets based on current and future needs. 4. A data platform will have been commissioned to support robust modelling of future levels of SEND need, including alternative provision, and strategic leaders will have discussed planning and commissioning for future special school and alternative provision places. Development of a data dashboard will have commenced that captures and summarises key data 5. for all children and young people with SEND, including academic progress, exclusions and destinations at age 16 and 19. A profile of the core SEND workforce will start being developed and strengths and pressures for 6. future recruitment identified. What will we have changed by 2023? The strategic board receives reports about the core SEND-related budgets and facilitates equitable funding decisions and improved outcomes. The KPIs will have been achieved or are on-track to completion. There will be a sustainable number of school places for children and young people with an EHC plan and joint planning for the health and social care support to meet their needs. There will be greater diversity of options for students needing alternative provision and better outcomes. The workforce to educate and care for children and young people with SEND will be well 3. understood and effective responses have resulted in fewer occupations with recruitment pressures. Professional development will be available in early years, schools and colleges and across Tower Hamlets to ensure excellent education and care for children and young people with SEND. There will be good access for professionals to a data profile about outcomes and services for children and young people with SEND, underpinned by an information-sharing agreement signed by the NHS and LBTH. The data dashboard will inform leaders and the SEND Board where performance is good and where improvements are needed, across education, social care and health. How will we know if this is working? Local surveys of parents and carers of children with SEND will report that nearly all have received

All local special schools offer good or outstanding education and the number of places in special

The progress of all pupils with SEND in mainstream schools and early years settings is monitored and

information about who leads SEND and about our local KPIs.

provision has increased to meet needs.

- shows children and young people with SEND continuing to make good progress.
- All partners in the Strategy will be committed to the shared vision for children and young people with SEND
- Tower Hamlets' data will offer clear, reliable information about the progress towards outcomes being made by all children and young people with SEND.

6. Priority 2: Timely identification and assessment

eating disorder service and services for young

people with severe conduct disorder.

Across, education, health and social care that leads to earlier intervention

Why is this important and what people said?

The SEND Code of Practice (DfE 2015) expects the child's school / college / early years setting to have lead responsibility for identifying and assessing special education needs and disabilities (SEND). Initially this involves the school or early years setting working closely with the child, their parents / carers and other services to assess need and, if necessary, implement additional SEN support, which is continually evaluated. Where a child's needs are much higher and SEN support results in little progress, an application for an EHC needs assessment should be considered. The EHC needs assessment process and the coordination of EHC plans is the responsibility of the Council. LBTH should ensure that other assessments and reviews of the health or care of the child or young person are coordinated with the annual review of their EHC plan.

During consultation, parents / carers and schools described important improvements needing to be made to the EHC needs assessment processes in Tower Hamlets. Parents / carers said that communication should be much better throughout the process and many felt their views were not reflected, if their child had an EHC plan. Whilst invited to be involved in their child's annual review, they often found that updates and decisions were not reflected in revisions to the EHC plan. Parents / carers also wanted to reduce the number of times that they were asked for the same information about their child: for example, better information sharing with GPs so this information is on their child's health records (LBTH 2017a).

What is being done What is our focus for action? A SEND Review was completed which To monitor statutory SEND processes and ensure highlighted short-comings and under they are carried out efficiently. Work is underway resourcing in statutory SEND processes in the to continue to develop the capabilities of staff Council. This has been responded to with managing these processes and increase coadditional staffing and a restructure. production with parents / carers. There are separate assessment processes for Streamlining decision-making: families with a child with SEND seeking o relaunching the SEND Panel, support from social care and from health. o trialling an Integrated Funding Panel for joint There has been limited information sharing decisions about children and young people with between these teams and the SEN Section. complex SEND and health needs o clear referral routes and case informationsharing between these panels. Early years services have been restructured Embed the new arrangements that support and new arrangements in place to support children with SEND and additional needs settings to identify and address children's attending early years settings, together with a additional needs. A pathway for the screening process to evaluate the effectiveness of the 2of developmental progress by health visitors year check programme provided by health has been established. visitors. Following widespread consultation, the Securing good alignment between SEND and **CAMHS Transformation Plan commits new** mental health planning and commissioning. investment, including for a new community Stronger links that improve service and

outcomes, especially for young people diagnosed

with an eating disorder or conduct disorder.

- An autism spectrum disorder diagnostic assessment service (ASDAS) is established and provides high quality assessments.
- To improve timeliness of the autism diagnostic assessment process, by reviewing the pathway and efficiency of the service.

In the first 12 months, what will we do?

- 1. A renewed and robust process for EHC needs assessment will be established, which engages well with parents / carers and involves schools, together with early years, health and social care.
- 2. The developmental screening for 2 year olds will have been evaluated and the processes and criteria for SEND assessments for children aged 4 and under will have been streamlined.
- 3. Work will have started to test models of support and intervention for young people with SEND who also display challenging behaviours.
- 4. A review will have been completed on the pathways for assessing children and young people for autism and commissioning recommendations made to the strategic board to ensure appropriate waiting times.

What will we have changed by 2023?

- 1. We will have an established, robust, electronic system for administering EHC needs assessments and for monitoring and updating all EHC plans, through annual reviews.
 - 2. We will have quality assured and updated all EHC plans, including parent and carer views. This will include all EHC plans issues before 2017.
 - 3. We will have reduced duplication of assessment processes for parents / carers of children and young people with an EHC plan.
 - 4. Parents / carers will be routinely invited to feedback on the EHC needs assessment process and their child's annual review and a summary will be reported to the SEND Strategy Board.
 - 5. All early years settings will report having a good understanding of how to identify additional needs and the support that is available. Over 90% of two year olds will have attended developmental screening.
 - 6. Findings of a trial of local SEND assessment and resource clusters, involving the majority of schools in Tower Hamlets, will be reported to the SEND Board and wider roll-out planned.

How will we know if this is working?

- Ofsted / CQC area SEND inspection will give objective evaluation that there are robust EHC processes in place.
- The percentage of the school / early years population with an EHC plan will have reduced from the 2017 baseline (4.8%) to nearer the national average, presently 3.1%.
- At least 90% of EHC needs assessments will have been completed within 20 weeks.
- Autism diagnostic assessments will all be completed within 3 months of being placed on the waiting list.
- Increasingly positive feedback will be received from parents / carers about the experience of the needs assessment process and the wording of their child's EHC plan.

7. Priority 3: Better outcomes and pathways

Mapping education and care pathways for children and young people with SEND

Why is this important and what people said?

The commissioning of support and services for children and young people with SEND is led by the Council's Children's Services and by THCCG. Most of the funding for SEND goes to support over 2,200 children and young people with high needs (with an EHC plan). The SEND Code of Practice (DfE 2015a) and best practice from around the country highlight how the needs of children are met most effectively when commissioning and planning are undertaken jointly and underpinned by shared outcomes. Mapping care pathways is best practice across the NHS (PHE 2016), including for groups of children and young people with SEND conditions. Person-centred planning is extensively practiced in Tower Hamlets and provides an excellent way for the child and their parents / carers to be involved in their learning and care (LBTH 2015).

During consultations schools and parents and carers asked for a stronger focus on opportunities and skills for independence: there was agreement that a local outcomes framework would assist with achieving this. This could then underpin outcome-based commissioning decisions and help to shape learning programmes in early years settings, schools and colleges (LBTH 2017b). Parents and carers requested having more information about personal budgets and ways they could influence their child's budget being used to offer the best support. Parents and carers also commented that they would like pathway maps to help them to identify suitable services for their child (LBTH 2017b).

What is being done?

What is our focus for action?

- There is thorough, but separate, commissioning in place in children's social care and in health. In education, there is individualised personal procurement. An overall joint commissioning agreement has been signed by LBTH and THCCG.
- Taking steps to implement more joint commissioning locally and start to jointly commission speech and language therapy services. To have better alignment with related areas of commissioning, such as child and adolescent mental health.
- THCCG and LBTH are partners in an integrated personalised commissioning (IPC) programme, which is trialling work on personal budgets.
- Starting to provide a breakdown of the resources and funding as part of new EHC plans. Starting to offer integrated personal budgets to children, young people and their parents and carers (NHS 2017).
- Individual children and young people's progress in their learning and the impact of care they receive, is monitored through reviewing EHC plans. These annual reviews adopt recommended, person-centred planning approaches.
- Conducting initial research for an outcomes framework for children and young people with SEND, including how a framework applies to EHC plans and early years / school / college learning programmes.
- Care support is provided to many children with SEND and their families:
 - short breaks are supported for nearly 800 children and young people with disabilities;
 - over 300 care packages for children, many with complex needs, are commissioned
- Researching outcome-based commissioning that better links commissioning and care packages with support for education, as set out in individual EHC plans.

	b	etween health and social care.		
•	struc your plan	and education services are mostly ctured for certain groups of children and ng people and their individualised goals and s. Some mental health pathways have been ewed and strengthened.	 To start to develop a Tower Hamlets approach to mapping pathways of support and learning for 'typical' groups of children and young people with SEND. 	
In	In the first 12 months, what will we do?			
	1.	Joint commissioning agreements for children and young people with SEND will have been signed by the Council and THCCG.		
	2.	An assessment of options for a commissioning framework for independent placements of children and young people with SEND will have been carried out.		
	, and the second		<u> </u>	

What will we have changed by 2023?

4.

agreed plans for rolling out personal budgets.

1. All independent placements for children and young people with SEND will be commissioned using a procurement framework, which will be linked to reciprocal arrangements with local boroughs.

We will have agreed a joint programme for integrated personal budgets and widely communicated this across the Tower Hamlets; to parents / carers and to professionals. The strategic board will have

The first 'life course' pathways will have been mapped: for children and young people with severe and complex learning difficulties or for those with autism, and will have involved parents and carers.

A joint outcomes framework for children and young people with SEND will start being developed.

- 2. All commissioning for children and young people with SEND will be underpinned by the outcomes framework and the performance of services reported to the strategic board against these outcomes.
- 3. Personal budgets and direct payments will be widely taken up and all EHC plans will include a resource breakdown against the provision and outcomes for the child or young person.
- 4. The outcomes framework for SEND will be central to planning and reporting on care and education, including to the strategic board, utilising systematically collected data.
- 5. There will be 'life course' pathway maps for all main SEND groups, from age 0 to 25, that have been co-designed with parents and young people. The strategic board will use the pathways to consider service gaps or over provision.

How will we know if this is working?

- Parents and carers will have been involved in the mapping and design of 'life course' pathways and feedback where these have been helpful to them.
- Case examples of children and young people's improved outcomes as a result of better commissioning.
- The large majority of parents and carers will feedback that they understand personal budgets and case studies of how they are used will have been widely disseminated.
- Independent placements will be better managed and the progress of children and young people routinely monitored as a result of the joint procurement framework.

8. Priority 4: Clear information and involvement

Increasing participation and better communication with parents and carers and children and young people with SEND.

"We are bombarded with information and often told what we should be doing.

How do we find the right

Why is this important and what people said?

There is a strong emphasis in the SEND Code of Practice (DfE 2015) on involving parents and carers wherever possible in planning and organising the support for their child. It also expects good access to up-to-date information about SEND, through the Local Offer. Evidence tells us that children benefit and thrive when they are part of a resilient family (AYPH 2015). Provision of short breaks and other respite is an important support for families with one or more children with SEND. By working in close partnership with families, services help to ensure that children and young people with SEND remain safe and can be supported to be as independent as possible within their communities.

Parents and carers told us during consultation that they want to be involved in decisions about services and are waiting to be invited. Young people and parents and carers also told us that, too often, they found it difficult to identify the most relevant services and information for them (LBTH 2017b). More information about local mediation support was identified as being needed. A number said that they had experienced some local people, and even a few NHS and Council staff, being unsympathetic to their child's needs. They want more information presented visually or through video, as well as in written form (LBTH 2017b).

What is being done?		What is our focus for action?	
•	Person-centred planning is widely adopted locally and support is provided for schools and early years settings to embed these approaches and actively involve parents and carers.	Better systems to ensure pupils' progress towards their EHC plan's outcomes, as reported during annual reviews, are systematically recorded by the Council and understood by parents and carers.	
•	The Local Offer website has been improved and has a wide range of information about local services on it. We ensure service information is reviewed and updated at least annually.	Ensuring parents and carers know about and access the Local Offer site. Having effective opportunities for parents and carers to provide their feedback about the local SEND system and the Local Offer website.	
•	Access to personal advice and support is provided to parents and carers who have a child with SEND through the Parents Advisory Centre (PAC) who work with about 600 families a year. About 700 young people with learning difficulties or disabilities are involved with youth providers and access positive activities that enrich their lives.	To ensure there are increasing opportunities for parents and carers to meet together and give their views about the changes to SEND across Tower Hamlets. Implement more effective mediation arrangements for parents and carers.	
•	The communication and involvement around SEND is largely focused on separate professional	To improve linking between professional networks, across education, health and care	

limit resid	works and parents and carers groups. There is ed perception of the views of the majority of dents of Tower Hamlets, except where ative experiences are reported by parents and rs.	services, and between parent and carer groups.	
and	sport assistance is provided to many children young people with SEND to access their cation at school or college.	To ensure travel needs are considered in the early stages when planning support for children and young people with SEND. Considering how transport costs should feature in EHC plans.	
In the fi	rst 12 months, what will we do?		
1.	The new SEND Charter will have been developed strategy for children and young people with S	ped and consulted upon and a communications SEND and their families developed.	
2.	Consistent and clear links between the Local college sites and other key service providers v	Offer website and the SEND pages on all school / will have been established.	
3.	A baseline will have been established of views about schools, early years, LBTH services and health services across Tower Hamlets, through surveys of parent and carers and of young people with SEND.		
4.	The Parents Advice Centre will oversee a growing network of parent and carer support groups, including good links to SEND decision-making groups and with groups hosted by special schools.		
5.	Arrangements for dealing with complaints about SEND and offering mediation will be coordinated across the NHS and LBTH.		
6.	Information about the new Strategy and vision for children and young people with SEND will have been communicated to all residents in Tower Hamlets.		
What w	ill we have changed by 2023?		
1.	The SEND Charter will be widely known and all schools and colleges, and health and care settings, will have committed themselves to the Charter.		
2.	The Local Offer website will be a central feature of effective communication with parents and carers across Tower Hamlets. A good range of media, including SMS, social media and video-sharing will be used to engage users of the Local Offer site.		
3.	There will be access to training and online information for parents and carers linked to all of the 'life course' pathways. Parent and carer volunteers will regularly carry out 'mystery shopper' activities to help to maintain improvements in services.		
4.	Residents of Tower Hamlets will report better informed views about children and young people with SEND. Fewer negative experiences will be reported by parents and carers during their dealings with LBTH and NHS staff.		
5.	There will be fewer complaints from parents and carers about SEND and a low level of cases that are heard at Tribunal.		
6.	Parents and carers will be represented throughout the SEND system, including on the strategic board and at decision-making Panels.		

How will we know if this is working?

- Parents and carers views are represented on all appropriate SEND groups and there is regular two-way communication with the key groups across Tower Hamlets.
- There is a high level of feedback from parents and carers about the Local Offer site. There is good satisfaction reported by parents and carers and young people about the information about SEND that they can access.
- Feedback from parents and carers about the SEND Charter will be that it is helpful to achieving the support they need for their child with SEND.
- Local resident surveys will identify greater knowledge about children and young people with SEND.
- Parent and carers, trained as 'mystery shoppers', will report improvements in access to information and mediation via health, education and social care staff.

9. Priority 5: Moving on

helping children and young people to start and leave school and services well.

"I want to be independent when I'm older; have help to get a job or do work experience." Student

Why is this important and what people said?

Children and young people with SEND are among our most vulnerable citizens and many of them find the changes they experience as they grow-up difficult. It is vital that services and schools / colleges / early years settings communicate as well as possible with children and young people with SEND and their family when important changes are coming up. When moving school, all records and plans should be transferred effectively to the new school or college and key staff should be well briefed (DfE 2015). The SEND Code of Practice (DfE 2015) sees the years from age 14 to 19 as particularly important in planning opportunities to fulfil the young people's ambitions for adult life and to prepare for independence and future major changes. During consultation, we were told by young people that they want the opportunities to be independent, to be safe and to enjoy time with family and friends, including in parks and leisure facilities (LBTH 2017b). A number of parents told of their fears for their child beyond the age of 19 and difficulties ensuring timely assessments for adult services. Strong views were expressed, by parents and carers and professionals, that there needs to be a greater focus on independent living and having the skills and work experience opportunities so young people can fulfil their ambitions (LBTH 2017b).

What is being done	What is our focus for action?	
A restructure of the early years services has taken place. Additional capacity for health visitors has been commissioned and integrated teams have started work at identified children's centres.	To successfully embed integrated working in children's centres, monitor increases in the recruitment of health visitors and monitor increases in uptake two year old health reviews.	
 There is some planning for transition to adult support services for most young people with an EHC plan. However, consultation has identified that improvement is needed to the consistency and timeliness of assessments. 	To review current systems for carrying out assessments for adult health and social care services and set out plans to ensure all these take place early enough and are linked to the young person's ambitions and outcomes as set out in their EHC plan.	
Post-16 education for young people with SEND is provided at school sixth forms and further education (FE) colleges. There are a limited number of supported employment and internship opportunities available in Tower Hamlets. There is a limited picture of future needs and how to plan to meet these across Tower Hamlets, particularly for those aged over 18 with complex needs.	Exploring ways to audit the post-16 options and pathways for young people with SEND and identify the data kept about the future destinations of young people with SEND.	

To make better connections across Children's The need for more local supported housing places has been identified, as part of Services, schools, colleges and housing to improve developing the Adults with Learning Disabilities joint planning to meet future needs. Strategy, and a business case has been developed for a property to provide 6 new places. There are local strategies for adults with autism Exploring how the needs of young people with and with learning disabilities and these will SEND are best reflected and coordinated between increase joint working across health and LBTH. this strategy and other strategies for adults with disabilities and across the groups that oversee their implementation. In the first 12 months, what will we do? 1. Multi-professional teams will have been jointly commissioned to work through most children's centres and extend the number of families being reached and accessing developmental screening. 2. The Preparation for Adulthood Steering Group will have been launched and it will have started to improve planning and coordination for transitions to adult services for young people with SEND. 3. An audit of post-16 destinations and achievements of Tower Hamlets young people with SEND will have been carried out. A report will have been presented to the strategic board. 4. Planning will have started for a "Mayor's Challenge": to increase the number of supported internships, apprenticeships and work experience places offered by employers in Tower Hamlets. 5. Funding will have been secured for at least one new supported housing project for young adults with high levels of learning disability. 6. Parents and carers will have been consulted about the support and advice they need as they prepare for their child becoming an adult. 7. All young people with complex SEND will be identified to primary care and adult health services and the local college will have access to health advice to ensure up-to-date health planning is in place for students with an EHC plan. What will we have changed by 2023? 1. Young children's level of development will continue to improve and there will be almost total coverage of developmental screening for two year olds. 2. There will be clear and well-understood pathways into training and work experience and towards independent adulthood, for young people with SEND from age 14. This will include timely assessment for adult services for all identified young people. 3. The successful "Mayor's Challenge" will have more than trebled the number of supported internships and supported apprenticeships taken up by Tower Hamlets residents. 4. A clear offer of information and training for parents and carers of young people with SEND will be available via the Local Offer website, to help them prepare for their child becoming an adult. 5. There will be at least 30 additional, supported housing units on stream and available for young

adults in Tower Hamlets.

6. At least 75% of young adults with SEND attend for annual health check with their GP and all those with complex needs have an up-to-date healthcare plan.

How will we know if this is working?

- The proportion of young children identified as reaching the early years expected level of development will have increased from a 2017 baseline.
- The arrangements for children and young people with SEND to support their transfer to and from school and transitions into adulthood will receive positive feedback from most.
- There will be an increasing number of young adults with SEND in employment and supported internships and apprenticeships in Tower Hamlets.
- The majority of young people aged 19 and over, with an EHC plan, will be living in Tower Hamlets.
- All young people over 18 will have an annual health check and up-to-date healthcare plan, if required.

10. Making it all happen

Governance and accountability of the renewed SEND system

The London Borough of Tower Hamlets (LBTH) and Tower Hamlets Clinical Commissioning Group (THCCG) are committed to working ever more closely together under the umbrella of Tower Hamlets Together (THT). THT is all about health and social care organisations working more closely together to improve the health and wellbeing of all people living in Tower Hamlets (www.towerhamletstogether.com). Children and young people with SEND are one of the key workstreams that falls under THT's "Born

"I want to know who I should speak to if things aren't working for my child." Parent.

Well, Growing Well" priority. THT is committed to the vision for children and young people with SEND and to providing the leadership to establish a local SEND system. Its governance and decision-making bodies will be responsible for implementing the commitments set out in the SEND Strategy and will ensure greater involvement from parents and carers and young people.

THT is in the middle of designing and consulting upon its governance structures and finalising how the programmes that it oversees will be coordinated and delivered. This means that detailed, governance arrangements for SEND cannot yet be described but the new structures will be in place before the end of 2018.

Set out below are the commitments that will lie at the heart of the accountability arrangements for the new SEND system in Tower Hamlets:

- Responsibility for the SEND Strategy will lie with a strategic board whose responsibility will include monitoring progress made against the commitments in the strategy.
- The strategic board will include representation of key stakeholders in the SEND system, this will include headteachers and parent and carer representatives.
- There will be clear reporting and accountability from SEND operational groups and decisionmaking panels to the strategic board.
- Lines of reporting and communication with other related boards and forums will be clearly described in terms of reference. These will include: the Health and Wellbeing Board, the Joint Commissioning Executive, Schools Forum and the Complex Adults Board.
- A set of SEND key performance indicators (KPIs) will be agreed with the strategic board and the format for summary, quarterly reports to be submitted from each of the operational groups.

It is anticipated that there will be five operational groups that will report to the new strategic board about progress against the commitments in the SEND Strategy. These are:

- The SEND Panel
- Integrated Funding Panel
- The SEND Improvement Group
- Preparing for Adulthood Steering Group
- SEND Operational Working Group

All will undergo a review of terms of reference to demarcate specific SEND Strategy actions and commitments that they will be responsible for progressing. Each will report, quarterly, to the strategic board. All, bar the Preparing for Adulthood Steering Group, are already convened in Tower Hamlets. The Preparing for Adulthood Steering Group will be led jointly by the local authority's Adult Services and Children's Services, and will focus on transitions for young people between the ages of 14 and 25 and on

supporting the best possible adulthood for young people with SEND, including oversight of the Mayor's Challenge.

Good communication and information are important for the success of the SEND Strategy and we will continue to develop the Tower Hamlets Local Offer site as the main information hub for parents and carers and young people. We will increase the involvement of parents and carers through direct support for local parent and carer groups and through better connections between groups, such as with those groups taking place in special schools, specialist early years settings and at New City College London (Poplar). There will be parent and carer representation on all the SEND operational groups.

Appendix 1

Key SEND definitions

1. <u>Special educational needs and disabilities (SEND)</u> - A child or young person who has a learning difficulty or disability which calls for special educational provision to be made for him or her (DfE 2015a).

A child or young person of compulsory school age has a learning difficulty or disability if he or she:

- has a significantly greater difficulty in learning than the majority of others of the same age, or
- has a disability which prevents or hinders him or her from making use of facilities of a kind generally provided for others of the same age in mainstream schools or mainstream post-16 institutions.
- 2. <u>SEN support</u> Most children and young people with SEND will be helped by their early years setting / school / college 'at SEN support', by implementing reasonable adjustments to remove barriers to learning and through putting evaluated, special educational needs (SEN) provision in place.
- 3. <u>Education, health and care plan (EHC plan)</u> those children and young people with high levels of SEND should be referred for a statutory education, health and care needs assessment. If assessed as having SEND that requires adjustments beyond the resources of a mainstream school / college / early years setting, an EHC plan is issued. The plan's purpose is to secure the best possible outcomes for the child or young person, coordinating support across education, health and social care.

As a result of the DfE's SEND Code of Practice (DfE 2015a), EHC plans replaced Statements of SEN.

- 4. <u>SEND system</u> All the arrangements and organisations that support and deliver the entitlement to education, health care and social care for children and young people identified as having SEND, including up to age 25 for those with an EHC plan.
- 5. <u>Commissioning</u> all the activities involved in assessing and forecasting needs, linking investment to agreed desired outcomes, planning the nature, range and quality of future services and working in partnership to put these in place.

Categories of SEND need and their abbreviations:

 Autism spectrum disorder (ASD) (or autism spectrum condition - ASC)

Hearing impairment (HI)

Moderate learning difficulty (MLD)

Multi-sensory impairment (MSI)

Physical disability (PD)

Profound & multiple learning difficulty (PMLD)

• Social, emotional and mental health (SEMH)

Severe learning difficulty (SLD)

Specific learning difficulty (SPLD)

Speech, language and communication needs (SLCN)

Visual impairment (VI)

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