Gloucestershire’s Joint Strategy for Children and Young People with Additional Needs, including Special Educational Needs & Disabilities (SEND)

2018-2021
"Hi, my name is Sam and this is my bus. Come aboard and meet all the people who help keep the wheels going round and round."

These are my parents and carers. They are really important because they help me to keep safe and learn what I will need to drive the bus on my own, one day. You could say they are my driving instructors.

These are my Teachers and people at school. They help me learn new things and help me plan for the future. They are like my route finder so I can get on the right road and don't get lost.

These are my G.P., Health Visitor, Dentist and School Nurse. They help to keep me well and to notice when I might need extra help. They are like my maintenance crew.

My bus can breakdown sometimes. This is when I need other people to help me. These people include Social workers, Police, Paramedics and Doctors. They hop onto the bus to help it get going again. They are like my breakdown service.

These are my friends and family. They help me to try new things, go to different places and learn about myself. I like them because they help me to have fun. They are like my on-board entertainment.

Sometimes there can be bumps along the road when I need extra help. There are lots of people that can help me depending on what I need. People like SENDCos, Advisory Teachers, Portage workers, Family support workers, Psychologists, Therapists, Caseworkers, Lead Professionals, Doctors and Nurses help and get other people on board. They are like specialists in a garage checking to see what will help me get over the bumps as smoothly as possible.

Whether you are on the bus every day or someone who pops on and off when needed; you are all important to me... So please work together. Thank you :-)

Children and Young People are our future 2018

NHS Gloucestershire Clinical Commissioning Group

GCC_2225  6.18
Children and Young People are our future

CONTENTS

1. INTRODUCTION AND STRATEGIC VISION 4
2. WHERE WE ARE NOW 4
3. WHAT HAS BEEN DONE SO FAR 8
   3.1 Joined up assessment and planning: 8
   3.2 Working with, and supporting, parent carers, children and young people 9
   3.3 Transitions 9
   3.4 Support 10
   3.5 Local Education 10
   3.6 Engagement with parents and carers in developing this strategy 10
4 WHERE ARE WE GOING NOW 12
   4.1 Our Delivery Priorities: 13
5.0 GOVERNANCE AND OVERSIGHT 19
Annex 1: Current Support 20
  HOLISTIC SERVICES 20
  EDUCATION SERVICES 21
  SOCIAL CARE SERVICES 22
  HEALTH SERVICES 23
Annex 2: Educational Duties 26
Annex 3: Social Care Duties 28
Annex 4: Health Duties 30
1. INTRODUCTION AND STRATEGIC VISION

Children and young people are our future.

Gloucestershire’s Joint Strategy for Children and Young People with Additional Needs, including Special Educational Needs and Disabilities (SEND) sets out the county’s vision to develop and provide services that achieve positive outcomes for children and young people with additional needs.

This strategy has been developed as a partnership with all stakeholders including parents and carers, schools and colleges, health and social care. It replaces the county’s SEND strategy taking into account the engagement with children and young people and their families through our work with the Parent Carer Forum and direct discussions with other parent carers and children and young people’s groups (through schools and youth groups).

All children can have additional needs at some time in their lives and may need support for a short period of time, or for longer. We use the term, additional needs, as an appropriate description of all children and young people in need of support. Crucially, we want all agencies working with children and young people to see the person first and not the category of additional need they may have. The most effective support will be that which builds on their strengths and enables them to become as independent as possible.

OUR STRATEGIC VISION

Services from across education, health and care enable growth and development so that each child can thrive and reach their potential to become an independent, healthy and happy adult.

2. WHERE WE ARE NOW

Gloucestershire’s Children, Young People and Families Partnership Framework provides an overarching strategic plan to drive good outcomes for all children and young people.

(Currently in draft awaiting approval)

When additional needs arise, it could be as a result of family circumstances, changes to living situations, cultural differences, health and medical concerns, disability, loss or bereavement. Circumstances such as these can have an impact on children’s care, learning, physical development, communication, social and emotional development and behaviour meaning they need additional help and support.

Most children are supported within their homes and communities and if needed through a range of early help and statutory support for the child and family. Children and young people need their families and services to work together to see them as children and young people first, understanding that all aspects of a child or young person’s life are important when assessing and planning the support they need – and keeping the individual at the heart of the system. This is the principle of our multi-agency early help pathway for children with additional needs.

http://www.glosfamiliesdirectory.org.uk/kb5/gloucs/glosfamilies/advice.page?id=_sCaAe_0PRU:
Children and young people with more complex needs and SEND are likely to need greater differentiation of services or support to ensure that their needs can be met, that they are able to make a level of progress appropriate to them and that, as much as possible, they have the same opportunities and experiences as their peers. For this group, the statutory Code of Practice for SEND (0-25) 2015 is in place. This defines a child or young person as having SEND where they have a significantly greater difficulty in learning than the majority of others of the same age, or a disability which prevents 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. The Children & Families Act 2014 has changed the way we respond to identifying and meeting the needs of children and young people (0-25 years) with SEND, recognising that:

- Needs cross a range of education, health and social care factors within the family and wider community; and therefore those supporting the child should not consider these in isolation;
- A multi-agency approach is often required and parents/carers and children & young people should be equal partners in this process - alongside a strengthened expectation that children and young people should also participate as fully as possible in decisions made about them

Turning 18 years old can also cause some anxiety for young people and their families as the services (and legislation) supporting them changes. Work needs to begin with children and their families at an early stage to plan for this transition – listening to their views, concerns and needs and being transparent about how the Care Act will apply to them.
Most children and young people in Gloucestershire do well. There is a strong school system and education attainment is above the average at Key Stage 2 and Key Stage 4. The majority of children and young people say they feel happy, satisfied and confident about the future.
However, despite this system of support, outcomes for some of the most vulnerable children and young people who have additional needs are persistently poor and the attainment gap between them and their peers is too wide. In 2017 only 41% of disadvantaged pupils achieved the expected standard or above for reading, writing and maths in Key Stage 2 (end of primary school) against 68% of other pupils and 20.6% of disadvantaged pupils achieved a strong pass (9-5) in both English and Maths at Key Stage 4 (end of secondary school) against 46.2% of other pupils.

Whilst, through the Online Pupil Survey (published in January 2017), children across the county reported that they were experiencing less bullying than previous years and lead healthier lives there were increasing numbers who said that they are self-harming, were worried and often had trouble sleeping.

Gloucestershire has a higher rate of children excluded from school than the national average – in the 2016/17 academic year 0.15% of the school population in Gloucestershire (142 children) was permanently excluded from school compared to 0.10% nationally. Of particular concern is the rise in children of primary school age who are excluded from school and the number children and young people who are removed from school by their families to home educate as they feel a school cannot provide the support they need.

The number of children and young people identified by schools as having additional needs which require them to provide more support has reduced over the last three years (according to January school census returns - from 15,138 in 2014 to 13,835 in 2017) whilst there has been an increase in those children and young people with SEND who require an Education, Health & Care plan (EHCP) to provide enhanced support to meet their needs (from 2,496 to 3,044 in the same time period). The reason for this is unclear but suggests that more should be done early on to identify children and young people with lower level additional needs in an attempt to prevent these escalating.

There has been a rise in the number of children in care during 2016/17, or being subject to child protection plans; with complexity within home and education thought to be contributing factors. This follows a national trend of an overall increase in the rise of children in care across the country with a proportionately increased number having additional needs. Support for Children in Care is a priority and where this support is provided most children are making continued progress and have their views and wishes heard and included in planning with them through child in care reviews. Placement stability for most children with additional needs is good with care, education and health working together to support achieving outcomes and stability.

The number of children with complex needs has been increasing year on year (a report commissioned by the Council for Disabled Children & True Colours Trust reports over a 50% increase since 2004) and the needs they have are becoming more complex. Reasons for this include:

- Increased survival rates at birth of babies with complex needs/born prematurely;
- Increased Life-expectancy for life-limiting conditions;
- Increased survival of children post key trauma or illness

These groups of children have significant health and care with increasing having individualised packages of care through the continuing care framework and joint funding with social care.
For the complex health needs of these children to be met there are substantial training requirements for staff across schools and other settings – mainstream and special and respite providers. However the mechanism for providing and monitoring the training for these staff has undergone significant change with the responsibility being placed with school governors and the school nurse moving to a focus on health promotion rather than providing a clinical role.

There will always be a small number of children and young people where the complexity of their care, education and health needs will require specialist support outside of the county or in independent provision. However over the past two year this number has risen by 71% (from 34 to 60) and the cost of these placements has more than doubled. Successfully managed transitions back into the family community at the appropriate time remains a challenge for this group to ensure outcomes are maintained.

There has been huge success in these areas across the county over the past three years so the focus is now on ensuring these aims, and the vision and principles behind these, are fully embedded across all agencies and that the required culture change is achieved to make this successful - and to really make a difference to improving the lives of children and young people.

3. WHAT HAS BEEN DONE SO FAR

The joint Ofsted and CQC local area SEND inspection in June 2016 recognised the progress made within the local area to implement the SEND reforms and how the work across all agencies enabled the provision of high quality services for children and young people in Gloucestershire. The Ofsted Childrens Services inspection in February 2017 recognised the improvements to strengthen early-help services. In particular, progress has been made in the following areas:

3.1 Joined up assessment and planning:

- Implementation of a strong single assessment Graduated Pathway for Early Help and support for all children and young people with additional needs aligned to schools improving identification and support.
- Development and implementation of an integrated Education, Health & Care Plan planning process and information sharing across agencies to enable high quality child and family centered support.
- Increased identification of SEND, through holistic assessments in the early years.
- Further joined up assessment, planning and commissioning between social care and health for children with complex health and care needs.
3.2 Working with, and supporting, parent carers, children and young people:

- Increased involvement of parent carers and children and young people to enable their voice to be heard in all aspects of planning and delivery of the SEND reforms through formal forums and other engagement groups.

- Development of a comprehensive co-produced ‘Local Offer’ of health, education and care support services for families and a user friendly website including video’s of young people talking about their experiences.

- Routinely gathering of views of children prior to meetings and include in meetings as appropriate to ensure they are at the centre of any planning, including using technology to support this (MOMO Express).

- Promoting awareness of the GP support and health checks to ensure young people with a learning disability are offered easy read information, extra time and support at appointments and a free annual health check age 14 plus.

- Development of a social care team which focuses on understanding the needs of children with disabilities to provide better support through their journey with children’s services from early help to statutory services.

- Increased providers focus on promotion of inclusion and independence and created a range of short break provision to meet range of needs and interests and inclusivity.

3.3 Transitions:

- Introduction of transition planning to support children and young people to successfully move from one school to another.

- Development of the provision of information, advice, guidance and assessment to those transitioning to adult health and social care to enable young people and parents to be prepared for their onward journey into adulthood i.e. the Ready Steady Go Programme used in health services.

- Development of an inclusive curriculum, providing bespoke timetables and support and covering aspects of preparing for the future/ adulthood – raising aspirations about future careers or pathways and assisting with mock interviews.
3.4 Support:

- Development of support for Special Educational Needs Coordinators (SENCo’s) and other staff through SENCoSpot resource base and SENCo cluster meetings to share good practice and key messages in supporting children
- Production of a concise and accessible SEND guidance handbook for schools, service users and partners to ensure equality and transparency of practice across services
- Establishment of a ‘Closing the Gap’ steering group across all relevant agencies to focus on improving progress for the most vulnerable learners
- Development of an early help service with allocated early help coordinators aligned to schools to support early help for children with additional needs

3.5 Local Education:

- Increased local special school and specialist mainstream provision for learners with SEND to respond to the needs of children and young people
- Placed and maintained fewer learners in out of county provision; improving their access to family, friends and community

An overview of current support provided across education, health and social care is provided at the end of this document (page 16 onwards).

3.6 Engagement with parents and carers in developing this strategy

Children, young people and their parent carers are at the centre of our planning, delivery and development of services across education, health and care. Therefore the success of these outcomes requires everyone working with, or on behalf of a child or young person, to work positively and collectively and we are committed to enabling co-production at all levels of involvement e.g. individually, organisationally and strategically.

We have an on-going and dynamic relationship with our Parent Carer Network, representing parents and carers across the county, and the Forum has been involved in the co-production of this strategy as well as helping us to jointly plan activities against the outcomes (with a recent focus on transitions between schools and post 16 pathways in particular). Our Ambassadors for children and young people help us to continually develop and improve how we gather the views of children and young people and feedback on services they receive.

In the spring of 2018 we talked specifically to parent carers and children and young people with additional needs about their experience of the support they had received and their views on the services they has come into contact with.
Children and young people were generally positive about their experiences as a whole but were clear about what they were good at and where they didn’t need help:

“It is important for me to be with a social group”

“It helps when work is demonstrated in pictures”

“I want choices”

“I like teachers to tell me my strong points”

“I would like to communicate myself without someone else nearby”

Parents and carers had mixed experiences. There was a common theme around the need to do more to bring all agencies together to plan for, and support, children and young people. When asked what helped their child, parents said:

“My child to be understood for who she is”

“Inclusion in his community”

“Being listened to and giving time and care”

“My child to be understood for who she is”

“Inclusion in his community”

“Person Centered... addressing all his complex needs”

“More cross communication between health and education, especially in early years”
4. WHERE ARE WE GOING NOW

We want young people with additional needs to experience the same opportunities to grow and learn as any other young person in the county.

This strategy builds on our current position of partnership working with a clear focus on improving the lives of children and young people through taking a more personalised approach in the commissioning and delivery of all services. This will enable the needs of all children and young people to be met, and those with additional needs (including those with SEND) to receive the right level of support in order that they are able to thrive; increasing or reducing support at the appropriate time as needs change.
### 4.1 Our Delivery Priorities:

**All stakeholders, including parents and carers, within Gloucestershire have committed to collaboratively achieve the following priorities of our strategy:**

1. A child or young person with additional needs will have their needs identified and met in a timely way;

2. Outcomes for children or young people with additional needs will be most effectively achieved by recognizing their needs as a whole and as part of their families, and integrating assessment and personalised care planning across education, health and social care;

3. Good outcomes for most children or young people with additional needs will be achieved in more universal settings where their needs can be met appropriately;

4. Children, young people and parents will be encouraged to be equal partners in developing plans, agreeing outcomes to be achieved and every effort made to seek their views to reflect the vital role parents/family play in supporting their child’s development;

5. Children, young people and parents will play a key role in co-producing and developing services across health, education and social care – particularly those specifically for children and young people with special educational needs and disabilities;

6. Children or young people with additional needs should be offered full access to a broad, balanced and relevant education, based on the National Curriculum and, for pre-school children, the Early Years Foundation Stage (EYFS) curriculum;

7. Transition arrangements between different phases of education or agencies working with children and young people are in place to ensure assessments, plans and reviews are co-produced and families know who is taking over the coordination of their child’s support;

8. Resources to support all children or young people with additional needs will be proportionate, fair, equitable and deliver best value;

9. Effective and efficient use of resources will guide decision making based on analysis of need, the allocation of those resources, and evaluation (including feedback and monitoring) evidence against agreed outcomes (the commissioning approach);

10. All agencies working with children, young people and young adults with additional needs will focus on helping them to prepare for adulthood – this will include support to prepare for higher education and/or employment; support to prepare for independent living, including exploring what decisions young people want to take for themselves; support in maintaining good health in adult life; support in participating in society, which includes support in developing and maintaining friendships and relationships.

All of this work will be underpinned by Gloucestershire’s commitment to taking an ACEs (Adverse Childhood Experience’s) aware approach to working with children and young people using restorative practice methods – so that practitioners work with children, young people and their families to fully understand where they are at the moment, and why, and what support (or challenge) may be needed to help them get to where they want to be in the future.
The following tables provide a high level overview of the key actions and aims required in order to achieve our priorities. Areas for improvement identified through the SEND local area inspection have been highlighted with an *.

Multi-agency actions will form the basis of strategic delivery through multi-agency forums and will be monitored by the Joint Additional Needs Management Board.

<table>
<thead>
<tr>
<th>Priority</th>
<th>What we are going to achieve...</th>
<th>Due Date</th>
<th>Multi-Agency Action</th>
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<tbody>
<tr>
<td>1</td>
<td>A child or young person with additional needs will have their needs identified and met in a timely way.</td>
<td>July 2019</td>
<td>Further enhance multi-agency working, and a holistic response to needs, by developing a countywide SEND ethos within services underpinning this strategy.</td>
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<td>2</td>
<td>Outcomes for children or young people with additional needs will be most effectively achieved by recognizing their needs as a whole and as part of their families, and integrating assessment and personalised care planning across education, health and social care.</td>
<td>October 2019</td>
<td>Through the cross-agency SEND Quality Lead role, improve the quality of information, monitoring, and evaluation contained within Education, Health &amp; Care plans so that the right support is available for children and young people throughout the graduated approach and the full impact of the SEND reforms are embedded across all agencies.</td>
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<td>3</td>
<td>Good outcomes for most children or young people with additional needs will be achieved in more universal settings where their needs can be met appropriately.</td>
<td>April 2019</td>
<td>Co-produce a multi-agency participation strategy for parent carers and children and young people to ensure engagement is fully embedded at all levels across all services (new parent carer forum to be established by winter 2018).</td>
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<tr>
<td>4</td>
<td>Children, young people and parents will be encouraged to be equal partners in developing plans, agreeing outcomes to be achieved and every effort made to seek their views to reflect the vital role parents/family play in supporting their child's development.</td>
<td>October 2018</td>
<td>Through the high needs programme, review the education offer for children and young people with special educational needs and disabilities.</td>
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<td>5</td>
<td>Children, young people and parents will play a key role in co-producing and developing services across health, education and social care — particularly those specifically for children and young people with special educational needs and disabilities.</td>
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<td>6</td>
<td>Children or young people with additional needs should be offered full access to a broad, balanced and relevant education, based on the National Curriculum.</td>
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<td><strong>7</strong> Transition arrangements between different phases of education or agencies working with children and young people are in place to ensure assessments, plans and reviews are co-produced and families know who is taking over the coordination of their child's support</td>
<td>Improve timely communication and joint decision making through establishing a countywide children/adults transitions group</td>
<td>December 2018</td>
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<td><strong>8</strong> Resources to support all children or young people with additional needs will be proportionate, fair, equitable and deliver best value</td>
<td>Develop a Quality Framework focused on outcomes for children and young people to be embedded into a service’s quality assurance practices</td>
<td>April 2019</td>
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<td><strong>9</strong> Effective and efficient use of resources will guide decision making based on analysis of need, the allocation of those resources, and evaluation (including feedback and monitoring) evidence against agreed outcomes</td>
<td>Use the joint strategic needs analysis to develop sufficiency strategies guiding future provision for children with additional needs in the county (i.e. school place and children’s services planning)</td>
<td>January 2019</td>
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<td><strong>10</strong> All agencies working with children, young people and young adults with additional needs will focus on helping them to prepare for adulthood – this will include support to prepare for higher education and/or employment; support to prepare for independent living, including exploring what decisions young people want to take for themselves; support in maintaining good health in adult life; support in participating in society, which includes support in developing and maintaining friendships and relationships</td>
<td>Produce a transition roadmap for young people which encompasses milestones for all four outcome areas, including health, education and social care</td>
<td>March 2019</td>
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<td>Priority</td>
<td>Countywide commitment by 2021</td>
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<td><strong>1</strong></td>
<td><strong>What we are going to achieve…</strong></td>
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<tr>
<td>A child or young person with additional needs will have their needs identified and met in a timely way</td>
<td>Review early notification processes across, and between services, to identify and address any gaps (starting with Health Visitor notification process). Review and update information, advice and guidance for families and practitioners at, least annually (<a href="http://www.glosfamiliesdirectory.org.uk">www.glosfamiliesdirectory.org.uk</a>).*</td>
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<td><strong>2</strong></td>
<td><strong>Outcomes for children or young people with additional needs will be most effectively achieved by recognizing their needs as a whole and as part of their families, and integrating assessment and personalised care planning across education, health and social care</strong></td>
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<td>Roll-out effective locality based early help partnership work across the county to improve local assessment, planning, delivery and monitoring; starting in key target areas (informed by Gloucester City locality working pilot)*</td>
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<td>Develop a framework to ensure children with medical needs are appropriately supported within schools and other services*</td>
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<td>Facilitate learning events for practitioners focusing on education, health and care contributions to EHCPs, ensuring these are outcome focussed, evidenced and personalised to each child’s needs</td>
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<td><strong>3</strong></td>
<td><strong>Good outcomes for most children or young people with additional needs will be achieved in more universal settings where their needs can be met appropriately</strong></td>
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<td></td>
<td>Use the high needs strategy to develop support for children and young people, and their families in local communities</td>
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<td></td>
<td>Support children and young people to identify and access universal and targeted services in their area by providing professional advice and guidance which enables them to have an active and engaged life in their community</td>
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<td><strong>4</strong></td>
<td><strong>Children, young people and parents will be encouraged to be equal partners in developing plans, agreeing outcomes to be achieved and every effort made to seek their views to reflect the vital role parents/family play in supporting their child’s development</strong></td>
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<td>Promote opportunities to seek views of children and young people and their families through further embedding tools such as ‘My Life, My Plan One Page Profile’ and MOMO Express</td>
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<td>Work with schools to develop a plan to roll out Restorative Practice across the county to enhance relationships between children and young people and professionals (informed by pilot schools)</td>
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<td>Develop the Team Around the Child / Family (TAC/TAF) approach to ensure the child and family are at the centre of all we do and that their voices are heard*</td>
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<td><strong>Priority</strong></td>
<td><strong>Countywide commitment by 2021</strong></td>
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<td><strong>How can services do this…</strong></td>
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<td>Work with the Parent Carer Forum to increase participation of underrepresented and hard to reach families to ensure that their experiences inform service delivery</td>
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<td>Use engagement with children, young people and parents to seek feedback and comments on the local offer of local services and report annually through the local offer on what is being done to address issues raised*</td>
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<td>Develop a continuum of support and services crossing from universal to specialist that reflect the needs of children and young people in the county and supports them to achieve agreed learning outcomes*</td>
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<td>Develop a health resource allocation tool, aligned to social care, so that an indicative budget can be identified and individual needs of the child can be met in a personalised way*</td>
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<td>Review and update service specifications in response to the 2018 needs analysis of children and young people in the county including feedback and monitoring.</td>
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<td>Consider the ability to create health electronic records and care plans enabling shared access across agencies; making better use of data and improving local area intelligence</td>
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<td>Provide training and guidance to professionals to fully embed transition processes across all agencies which include education, health, care, employment and housing options and are based upon the aspirations of young people*</td>
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<td>Develop more interactive preparing for adulthood resources on the local offer based upon feedback from young people and share tools with professionals to support planning from age 13 at the latest*</td>
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5.0 GOVERNANCE AND OVERSIGHT

A Joint Additional Needs Management Board and Joint Additional Needs Development Group have been established to ensure effective multi-agency input across the county into developing and delivering this strategy.

The Development Group provides a forum for representatives across all agencies working with children and young people to share good practice, find more effective ways of working and to identify gaps in information or services.

The Management Board is responsible for overseeing the contribution of education, health and social care to ensure that outcomes are improved for all children and young people with additional needs – this includes overseeing progress against specific service’s actions, identifying and removing barriers to effective multi-agency working (including early intervention) and ensuring that any change in needs of children and young people is reflected in the support or services provided.

**Governance Structure:**

- **Gloucestershire Clinical Commissioning Group (GCCG) Executive Team**
  - Chair: Accountable Officer

- **Gloucestershire County Council (GCC) Children Services Senior Leadership Team**
  - Chair: Director of Children’s Services

- **Joint Additional Needs (JAN) Management Board**
  - Chair: Head of Services for Children with Additional Needs

- **Joint Additional Needs (JAN) Development Group**
  - Chair: Quality & Engagement Manager

**JAN Development Group Membership**
- DMO/DCO for SEND
- Schools and Colleges
- Employment
- Parent Carers
- Family Information Service

**JAN Management Board Membership**
- Head of Services for Children with Additional Needs (Education Lead)
- Senior Commissioning Manager (Health Lead)
- Strategic Lead for Early Help (Children’s Services Leads)
- Head of Service for Integrated Adult Social Care
- Quality & Engagement Manager (Participation Lead)
- (Parent Carer)
Annex 1: Current Support

HOLISTIC SERVICES

Individual needs must be assessed and reasonable adjustments made, or support given, by services and settings to ensure that children and young people with additional needs have the same level of access and opportunity to achieve the same outcomes as their peers. There must be a proportionate response from individual or multiple services working together to meet identified needs.

For some children and young people their needs will require support at a statutory level, such as a statutory social care plan or through the process of an Education, Health & Care Plan (EHCP) which will indicate the level of provision needed to help the individual achieve the necessary outcomes detailed within their plan.

For many other children and young people it will be possible for agencies, working together where necessary, to meet their needs at a lower level of intervention through the Graduated Pathway of Early Help and Support through the following key areas:

- Improving information and advice and ensuring Early Help Information is made robust and accessible through the Glos Families Directory;
- Develop a single early help pathway for all children with additional needs;
- Early Help Partnerships will develop and manage ‘request for support’ systems to avoid escalation of problems to specialist services;
- Provide an enabling function for universal services from District led Early Help Partnerships;
- District led Early Help Partnerships will offer advice and targeted support to universal providers to prevent families problems getting worse.

We know that for children and young people with an EHC plan, the best outcomes are not purely achieved by the plan itself, but by people successfully working together through a Team Around the Child or Team Around the Family approach. This approach allows all those working with a child, young person or family to act as a team; sharing knowledge and experience, finding creative solutions to meet needs, reviewing progress and ensuring clear and consistent communication with families. This can be replicated for other children and young people with additional needs to help them achieve better outcomes.

There are a wide range of services which fall within the definition of early help, many of which are offered by voluntary and community groups. Some services are specifically commissioned to identify needs early on and/or provide interventions including children’s centres, community health services, support for domestic abuse victims and some youth support services. Families First Plus Teams coordinate multi-agency allocation groups in each locality and undertake direct work with families. Community social workers and Early Help Co-ordinators within these teams offer advice, consultation and support to partners working with families. All such services are included on the Local Offer.

Advice and information on early help is available through the Council’s Family Information Service, the GlosFamilies Directory and Local Offer (www.glosfamiliesdirectory.org.uk). Professional advice also includes the 2gether NHS Trust children & young people service CYPS (our local CAMHS) helpline.
EDUCATION SERVICES

Every child or young person has a right to receive full-time education. This must be appropriate to their age, ability, aptitude and any special educational needs but is typically seen as receiving between 21-25 hours of education for 38 weeks of the year.

Education providers have a vital role in identifying a child’s or young person’s additional needs and ensuring that these are responded to effectively. Schools are increasingly taking on responsibilities for attendance and behaviour support and are making a wide range of support available within school. There is a strong alignment with support for pupils with special educational needs as highlighted in this strategy but there is a wider multi-agency approach to ensure that all needs are understood holistically and can be supported by the right partners.

Indication that a child or young person may have additional needs could include changes to their:

- ability to learn or educational progress
- integration/socialisation with their peers
- attendance issues or exclusion incidents
- general behaviour and compliance

These changes may be observed within the school/college, by family members or by others working with the child or young person, or their family.

The number of children and young people receiving SEN support within schools/colleges (without a statutory EHC plan) is relatively low compared to the wide spectrum of need presented by children and young people within education settings. Therefore we need to focus on all children and young people with additional needs, using the Graduated Pathway of Early Help and Support – this includes those with SEND; but is not limited to this group.

The majority of children and young people with additional needs are supported in mainstream settings, learning alongside their peers in their local community. However, Gloucestershire has a number of special schools/settings to meet the needs of those children and young people whose SEND needs require a more specialised environment. We know that children and young people have a range of needs which do not always fit neatly into either mainstream or specialist education settings so creating a range of provision which reflects the whole spectrum of need is a focus for development. This development will look to ensure the right school places and provision available at the right time for the right pupils.

Historically there have also been lower levels of identified additional needs (and therefore support or provision) at the school support level which is early intervention, non-statutory level. This gap in identification is starting to close more quickly in Gloucestershire than the national picture but there is still more work to be done. Recognising that all needs impacting on a child, young person or family should be identified as early as possible and addressed as part of a graduated approach is vital to preventing needs from escalating. This should be done in partnership with the family, supported by an identified lead professional and the identified agencies to ensure that a child or young person’s needs can be assessed and met more holistically. This approach will enable outcomes to be achieved and sustained.

Duties on councils, early years providers, schools and colleges is outlined in Appendix 1.
SOCIAL CARE SERVICES

The council’s social care and its partners help children and young people achieve the best outcomes possible. This is delivered through the Graduated Pathway of Early Help and Support and through the Early Help Offer within the disabled children and young people’s service when a greater level of support may be required. This includes statutory support when this may be needed - and Appendix 2 details the role of the council where a child or young person has been assessed as having social care needs in relation to their SEN or disabilities.

The disabled children and young people’s service offers Early Help assessments and support as well as statutory assessments and support through the 1989 Children’s Act, Chronically Sick and Disabled Persons Act 1970 and the Care Act 2014. Support can be provided through information, advice and guidance, signposting to other services such as Enablement, Carers Assessments and support, Employment at transition age and/or personal budgets - all working within the principles of the Building Better Lives policy.

The aim of the disabled children and young people’s service is to provide support through childhood and also preparation for adulthood through information, advice and guidance which promotes an effective transition for young people to minimise the frequency of “telling the story”. This includes providing a joined up service and to ensure support remains in place from Children’s Services until the Care Act assessment can be concluded and decisions made in relation to provision of support to meet eligible assessed needs. Social care provide support and services to children who have statutory plans and make every effort to join up these processes and work in partnership with the Independent Reviewing Officers (IRO’s), Virtual School and Care Leaving Services to enable needs to be met.

The disabled children and young people’s service will have the key role in linking with SEN colleagues and partners within health to support a young person prepare for adulthood and support through transition. Some young people may receive support from Social Care teams outside of this team and the disabled children and young people’s service is available to provide advice and guidance on transition.

Young people with SEN or disabilities turning 18 may become eligible for adult social care services, regardless of whether they have an EHC plan or whether they have been receiving services from children’s social care. The Care Act 2014 and the associated regulations and guidance set out the requirements on local authorities when young people are approaching, or turn, 18 and are likely to require an assessment for adult care and support.
**HEALTH SERVICES**

NHS Gloucestershire Clinical Commissioning Group CCG is a clinically led membership organisation (although GP practices are commissioned directly by NHS England, all 81 GP practices in Gloucestershire are members) responsible for commissioning local NHS services to meet the needs of local people. Currently the provider organisations commissioned to provide these services are:

- Gloucestershire Care Services NHS Trust;
- Gloucestershire Hospitals NHS Foundation Trust;
- 2gether NHS Foundation Trust

There are contracts and service specifications between the CCG and the provider organisations to ensure the services deliver in line with the expected outcomes from each service specification. The CCG routinely monitors the delivery of each service against their specification to ensure quality of delivery and value for money. Whilst providing services for the whole population, including children, the provider organisations work jointly with education and social care to ensure a holistic approach to meeting any additional needs.

In response to the new SEND Code of Practice (2015), which emerged from the Children and Families Act 2014, the CCG has developed a model for the delivery of the Health requirements. This model consists of 4 SEND representatives, one from each NHS Trust and one from the CCG, acting as the Designated Medical Officer (DMO) or Designated Clinical Officer (DCO). The benefit of this is that there is one direct link to each of the health service areas which makes development and working together far more effective and DCOs/DMOs support clinicians across the services to engage with the EHCP process and contribute to assessments and plans.

Gloucestershire Care Services (GCS) NHS Trust provides community health services including health visiting, school nursing, the children in care nursing service and the children’s therapy services. Gloucestershire Care Services (GCS) works with partner agencies to help children and young people achieve the best outcomes possible.

The Health Visiting and School Nursing service are part of the GCS Public Health Nursing service. These services are universal services available to all children and families in Gloucestershire. There are screening programmes at specific ages in both services to help identify if children may have additional health needs that may impact on their educational needs. There are specific members of the health visiting team whose role is to work with children and families who are known to have additional needs. There is also special school nursing team who work closely with the special educational needs schools to ensure that health needs are being met to ensure that the children’s education is not negatively impacted.

The Speech and Language Therapy, Occupational Therapy and Physiotherapy are part of the therapy services for GCS. Therapists are involved if a child has been referred into the service and assessed to require ongoing support to address the highlighted health issue identified. Therapist will provide advice, training and support to teaching and support staff or other professional as appropriate, to facilitate children and young people accessing their education provision. Some of the special education needs schools have therapy services based on site and are able to see children in the education setting.
The Children’s Community Nursing Team (CCNT) delivers community-based nursing services to children and young people with specific medical conditions requiring nursing treatment. For children with complex health issues this can be for Gastrostomy management, nasogastric care, assessment of care needs for provision of complex care packages and intravenous medication. The CCNT is a countywide service for children and young people up to the age of 18 who have a designated consultant paediatrician managing their on-going care. The CCNT provide care in a variety of settings, including schools. In delivering their services the CCNT aim to cause as little disruption to a child’s education as possible.

In the Public Health Nursing and therapy services, if any issues or developmental problems require further investigation or support then options are explored with parents, this may include the Graduated Pathway of Early Help and Support, the Early Help Offer as part of the Early Help Partnerships or a referral to a partner health agency.

All GCS children’s services engage with the Education and Health Care plan processes and contribute towards the analysis of assessment for these plans. They also use the Ready, Steady, Go approach to transition young people into adult services. This transition process starts when the young person is over 11 years old and has a long-term condition. Ready, Steady, Go aims to help the young person gain the confidence, knowledge and skills required to manage their condition.

Community paediatricians, maternity services and acute paediatric care are provided by the Gloucestershire Hospitals NHS Foundation Trust.

The Hospital Trust provides specialist assessment through the inpatient and outpatient facilities, starting the journey of support for children through maternity services, or from birth or the newborn intensive care unit. It also provides emergency services and specialist day surgery. The different hospital specialist teams liaise and work with all professionals involved in the care of the child/CYP using the graduated pathway of support, aiming to support the best possible health and wellbeing outcomes.

The Hospital teams support the transition of those children with complex and long term health conditions, from children’s (paediatric) to adult specialist services, supported by the tools of the Ready Steady Go programme.

Health professionals work alongside tall other agencies to contribute and build PFA objectives for each child, assisting young people and (when relevant) their carers to progress to managing their health conditions confidently within adult health services, and alongside their daily occupations.
2gether NHS Trust provides specialist mental health and learning disability support to the people of Gloucestershire. The Child & Adolescent Mental Health (CAMHs) service, known as the Children and Young Peoples’ Services (CYPS) is managed by the 2gether NHS Foundation Trust and supports children and young people up to the age of 18, including those with additional needs. The Community Learning Disability Teams (CLDT) work with people with a learning disability from the age of 18 and works closely with CYPS to ensure a smooth transition for young people to adulthood and adult services.

The service also delivers an adapted Ready Steady Go programme for young people with additional needs including an easy read transition pack offering the following information:

- LD hospital liaison nurse information
- LD GP register information
- Annual health checks 14yrs plus information
- Hospital passports

Further information relating to statutory duties for health professionals can be found in Appendix 3.
Annex 2: Educational Duties

As a county, we have focused upon supporting the creation a strong school system and this has been successful. Pupil attainment in Gloucestershire is above the national average and Ofsted judgments rank our schools as among the best in the south west - over 96% of primary aged pupils and over 90% of secondary aged pupils attend good or outstanding schools.

Education provision across the county is made up of:

- Over 600 early years setting – the highest private, voluntary and independent sector of any local authority area in England
- 246 primary schools – of which 37 are stand alone academies, and 5 sponsored and one primary free school
- 39 secondary schools – of which 27 are stand alone academies and 6 are sponsored
- 12 special schools – 3 of which are sponsored academies
- 4 colleges
- 5 alternative provision schools of which one is a free school and one is the Hospital Education Service
- 25 independent mainstream schools and 4 independent special schools
- There are currently 10 Multi Academy Trusts (MATs) in the county.

Gloucestershire County Council:

General responsibilities are set out within the Education Act 1996 and relate to ensuring there is sufficient provision to provide children and young people with appropriate education and ensuring all children of compulsory school age are able to receive suitable education (especially those who have health needs or have been excluded from school).

More specific statutory responsibilities for children with special educational needs are defined within the Children and Families Act 2014 and facilitated through the SEN Code of Practice:

- keep arrangements for special educational provision under review and ensure that learners are educated in mainstream schools and settings;
- ensure that teachers are aware of the importance of identification of learners with special educational needs in maintained nursery schools and settings and other early years settings;
- identify and make a statutory assessment of those learners for whom they are responsible who have special educational needs and disability and for whom the council may need to determine the necessary provision;
- ensure that Education Health and Care plans are reviewed annually;
- monitor provision for learners with special educational needs and disability and the implementation of the SEND Code of Practice in schools and settings;
- Be responsible for both the commissioning of provision and funding of additional support for learners and young people with special educational needs (SEND) from 0-25 years.
**Governing Bodies, Management Committees or Proprietors of Schools, Academies, Colleges & Other Education Settings:**

The Children and Families Act 2014, SEN Code of Practice and *Working Together to Safeguard Children March 2015* also places many responsibilities for the education of children and young people on providers themselves:

- take all reasonable steps to ensure that the necessary provision is made for any pupil who has special educational needs – and that those needs are made known to all who are likely to teach them;
- ensure that teachers in the school are aware of the importance of identifying and providing for those learners who have SEN - consulting the council and the governing bodies of other schools and settings, when necessary or desirable in the interests of coordinated special educational provision in the area as a whole
- ensure that a pupil with special educational needs and disability joins in the activities of the school together with learners who do not have special educational needs, so far as is reasonably practical and compatible with the learner receiving the special educational provision which their learning needs call for, the efficient education of the learners with whom they are educated and the efficient use of resources
- ensure the health / medical needs of their pupils are meet as per the guidance *(Supporting pupils at school with medical conditions, DfE, December 2015)*
- meet requirements of safeguarding and promoting the welfare of pupils – also having regard to statutory guidance *Keeping Children Safe in Education (2015)*, which provides guidance as to how they should fulfil their duties in respect of safeguarding and promoting the welfare of children in their care

**Early Years and Childcare:**

Early years providers have a duty under section 40 of the Childcare Act 2006 to comply with the welfare requirements of the Early Years Foundation Stage. Providers should ensure that:

- staff complete safeguarding training that enables them to recognise signs of potential abuse and neglect
- there is a practitioner who is designated to take lead responsibility for safeguarding children within each early years setting and who should liaise with local statutory children’s services agencies as appropriate. This lead should also complete child protection training
Annex 3: Social Care Duties

Children’s social care

Where a child or young person has been assessed as having social care needs in relation to their SEN or disabilities, social care teams:

- must secure social care provision under the Chronically Sick and Disabled Persons Act (CSDPA) 1970 which has been assessed as being necessary to support a child or young person’s SEN and which is specified in their EHC plan
- should provide early years providers, schools and colleges with a contact for social care advice on children and young people with SEN and disabilities
- must undertake reviews of children and young people with EHC plans where there are social care needs
- should make sure that for looked after children and care leavers the arrangements for assessing and meeting their needs across education, health and social care are co-ordinated effectively within the process of care and pathway planning, in order to avoid duplication and delay, to include in particular liaising with the Virtual School Head (VSH) for Children in Care

Where children or young people with SEN or disabilities also have a child in need or child protection plan, the social worker within the SEN team should ensure the statutory timescales for social care assessments are met and any assessments are aligned with EHC needs assessments wherever possible.

Adult social care

Children’s services must not be discontinued simply because a young person has reached their 18th birthday. There must be effective transition from children’s to adult social care services where this is needed. For those already receiving support from children’s services, the Care Act makes it clear that local authorities must continue to provide children’s services until adult provision has started or a decision is made that the young person’s needs do not meet the eligibility criteria for adult care and support following an assessment.

Local authorities and their partners must co-operate in the provision of adult care and support in promoting the individual’s wellbeing and local authorities must:

- promote the integration of adult care and support and health services
- arrange the provision of preventative resources that can be accessed by those who require support but who do not have eligible needs (under the Care Act 2014).
- ensure a diverse and high quality range of services to meet assessed care and support needs

Local authorities must provide information and advice on the range of services available. They should include in their Local Offer relevant information and advice on local provision and how to receive an assessment for transition to adult care and support.
The transition from children’s to adult services needs to be well managed and should take place at a time that is appropriate for the individual. This is particularly important where young people’s assessed needs do not meet eligibility criteria for adult services.

Local authorities and their partners should work together to ensure effective and well supported transition arrangements are in place; that assessment and review processes for both Care plans and EHC plans are aligned; that there is effective integration with health services, and that there is a good range of universal provision for inclusion in the Local Offer. Young people and their families should not be expected to repeatedly provide duplicate information to different services, or to attend numerous reviews, or receive support that is not co-ordinated and joined up. There should be clear and joined-up decision-making processes and lines of accountability for considering when the transition to adult services should take place and ensuring that children’s services continue to be in place for as long as required.

Local authorities should consider ways of supporting carers. Parent carers have often had to give up paid work after their child leaves full time education. Loss of paid employment can have a significant impact on the carer’s wellbeing and self-esteem as well as a significant impact on the family’s financial circumstances. Taking a whole family approach to care and support planning that sets out a ‘five-day offer’ for a young person and support for a carer to manage an increased caring role (which ideally allows them to stay in paid work if they wish to do so) can help families manage the transition and save money by avoiding costly out-of-area placements.

Support for carers includes any support assessed as being reasonably required by the learning difficulties and disabilities which result in the child or young person having SEN. It can include any services assessed under an early help assessment and/or under Section 17 or Section 47 of the Children Act 1989 or eligible needs identified by assessments under adult care provisions. It can also include services for parents and carers which will support the child’s outcomes, such as mental health support.
Annex 4: Health Duties

The NHS constitution works to the following principles:

- The NHS provides a comprehensive service, available to all
- Access to NHS services is based on clinical need, not an individual’s ability to pay
- The NHS aspires to the highest standards of excellence and professionalism
- The patient will be at the heart of everything the NHS does
- The NHS works across organisational boundaries
- The NHS is committed to providing best value for taxpayers’ money
- The NHS is accountable to the public, communities and patients that it serves

Under the terms of the Children and Families Act 2014 and Code of Practice, the NHS National Framework for Children’s Continuing Care 2016, the Children Act 2004 and Future In Mind Programme, the following duties apply:

NHS Commissioners (including CCGs) must cooperate with LAs to:

- Develop joint commissioning arrangements (both for EHC Plans and strategic commissioning)
- Work in partnership within decision making panels regarding provision and funding for individual children
- Commission integrated and personalised services that can meet the needs of the population
- Contribute to the continuing development of the Local Offer
- Secure sufficient provision to meet identified needs from the Joint Strategic Needs Assessment
- Commission Designated Clinical Officers/ Designated Medical Officers to ensure accurate and relevant contributions to support children with additional needs
- Agree outcomes to be achieved and how these will be monitored

NHS Providers, clinicians and practitioners will:

- Support early identification of need through the Public Health Nursing Service, including Health Visitor 2 year developmental check and the Healthy Child Programme HCP
- Notify the local authority of actual and potential additional needs Initiate and contribute to the Graduated Pathway of Early Help and Support to ensure best outcomes for the child
- Respond to requests for health advice / assessment as part of the statutory EHCP process within the required time limits
- Ensure healthcare provision is available to meet identified needs in both non-statutory and statutory plans To contribute to the monitoring of the child’s progress from interventions and to the regular review of plans
- Review and refresh service contribution to the Local Offer using feedback from children, young people and parents to inform developments.