Lancashire County Council

Children's Services Scrutiny Committee

Wednesday, 6th September, 2017 at 2.00 pm in Cabinet Room 'C' - The Duke of Lancaster Room, County Hall, Preston

Agenda

Part I (Open to Press and Public)

No. Item

1. Apologies

2. Disclosure of Pecuniary and Non-Pecuniary Interests

Members are asked to consider any Pecuniary and Non-Pecuniary Interests they may have to disclose to the meeting in relation to matters under consideration on the Agenda.

3.	Minutes from the meeting held on 26 July 2017	(Pages 1 - 4)
4.	Ofsted Monitoring Visit Update	(Pages 5 - 10)
5.	New SEND Service Pathway	(Pages 11 - 34)
6.	School Nursing	(Pages 35 - 42)
7	Children's Services Scrutiny Committee Work Plan	$(P_{2000}, 43 - 48)$

7. Children's Services Scrutiny Committee Work Plan (Pages 43 - 48) 2017/18

8. Urgent Business

An item of urgent business may only be considered under this heading where, by reason of special circumstances to be recorded in the Minutes, the Chair of the meeting is of the opinion that the item should be considered at the meeting as a matter of urgency. Wherever possible, the Chief Executive should be given advance warning of any Member's intention to raise a matter under this heading.



9. Date of the Next Meeting

The next meeting of the Children's Services Scrutiny Committee is due to be held on Wednesday 18 October, 2pm in Cabinet Room C, County Hall, Preston.

> I Young Director of Governance, Finance and Public Services

County Hall Preston

Lancashire County Council

Children's Services Scrutiny Committee

Minutes of the Meeting held on Wednesday, 26th July, 2017 at 2.00 pm in Cabinet Room 'C' - The Duke of Lancaster Room, County Hall, Preston

Present:

County Councillor Andrea Kay (Chair)

County Councillors

N HennessyD HowarthI BrownH KhanA CheethamJ RearS ClarkeD T SmithL CoxM TomlinsonA Gardiner

Co-opted members

Alison Taylor, Children's Partnership Board - Fylde, Wyre and Lancashire North Councillor Stella Brunskill, Children's Partnership Board - Hyndburn, Ribble Valley, Rossendale

Councillor Stella Brunskill permanently replaced Elaine Shinks on the Children Services Scrutiny Committee and County Councillor Stephen Clarke replaced County Councillor Joe Cooney for this meeting.

1. Apologies

Apologies were received from Debra Wilson, Children's Partnership Board, Chorley, South Ribble and West Lancs.

2. Disclosure of Pecuniary and Non-Pecuniary Interests

None were disclosed.

3. Constitution: Membership; Chair and Deputy Chair; and Terms of Reference of the Children's Services Scrutiny Committee

The Committee was presented with a report setting out the constitution, membership, chair and deputy chair and terms of reference of the Children's Services Scrutiny Committee for the municipal year 2017/18.

Resolved: That;

- i. The appointment of County Councillors Andrea Kay and Nikki Hennessy as Chair and Deputy Chair of the Committee for the remainder of the 2017/18 municipal year be noted.
- ii. The new Membership of the Committee following the County Council's Annual Meeting on 25 May 2017 be noted; and
- iii. The updated Terms of Reference of the Committee be noted.

4. Minutes from the meeting held on 1 March 2017

Resolved: That the minutes from the meeting held on the 1 March 2017 be confirmed as an accurate record and signed by the chair.

5. Lancashire Wellbeing, Prevention and Early Help Offer

The Chair welcomed Debbie Duffell, Head of Wellbeing, Prevention and Early Help, to the meeting.

Members were informed that the Wellbeing, Prevention and Early Help Service (WPEHS) brought together a number of former services that work with children, young people and families, including Children's Centres, Young People's Service, Prevention and Early Help and Lancashire's response to the national Troubled Families Unit Programme.

A range of areas were discussed by the Committee, including the service delivery model, integrated working principles and the referral pathways. Members noted that as the services only became operational from 1 April 2017, it would be beneficial to receive a further update on the service provision at a future meeting of the Committee.

Members were advised that in relation to working with GP's across Lancashire, the service had clustered the 12 Districts into 5 and each cluster had a locality manager making contact with the GPs.

With regards to the question around recruitment to the WPEHS, it was confirmed that there were capacities and vacancies across Lancashire which were currently being addressed.

Resolved: That;

- i. The report and comments be noted.
- ii. An update report be presented to the Committee at a future meeting.

6. Work Plan 2017/18

The work plan for the Children's Services Scrutiny Committee for the 2017/18 year was presented and included topics identified at the work planning workshop held on 21 June 2017.

Members discussed and confirmed the items and intended outcomes for the next meeting of the Committee.

Members were informed that the Lancashire Safeguarding Children Board (LSCB) Annual Report would be circulated for members to identify any areas they would like to come back to the Committee for further discussion.

Resolved: That;

- i. The report and comments be noted.
- ii. The topic(s) for the next scheduled meeting be confirmed; and
- iii. The information required for each topic to be considered at the next scheduled meeting be identified.

7. Urgent Business

There were no items of urgent business.

8. Date of the Next Meeting and Future Meeting Dates

The next meeting of the Scrutiny Committee will take place on Wednesday 6 September at 2:00pm in Cabinet Room C (The Duke of Lancaster Room) at the County Hall, Preston. Future meeting dates were noted.

> I Young Director of Governance, Finance and Public Services

County Hall Preston

Agenda Item 4

Children's Services Scrutiny Committee

Meeting to be held on Wednesday, 6 September 2017

Electoral Division affected: (All Divisions);

Ofsted Monitoring Visit Update

(Appendix 'A' refers)

Contact for further information: Samantha Parker, Tel: 01772538221, Democratic Services, sam.parker@lancashire.gov.uk

Executive Summary

The letter at 'Appendix A' summarises the findings from the monitoring visit to Lancashire's children's services which took place on 25 and 26 July 2017.

Recommendation

The Children's Services Scrutiny Committee are requested to note and comment on the report.

Background and Advice

In autumn 2015, Ofsted carried out an unannounced inspection of children's services in Lancashire. This was the local authority's first inspection under the single inspection framework, which came into place in 2014. It focused on the experiences and progress of children in need of help and protection, children looked after and care leavers. It also included looking at the effectiveness of services and arrangements to help these children, including adoption and fostering.

The inspection took place between 14 September and 8 October and involved 12 inspectors undertaking a range of activity. They spoke to staff at all levels, to children and young people, and to representatives of a number of partner organisations. Much of their work involved reviewing documents but they also observed a small amount of frontline practice and, overall, there was significantly more emphasis on frontline care than under the previous inspection regime.

The letter at 'Appendix A' summarises the findings from the fifth monitoring visit since the local authority was judged inadequate in the autumn 2015.



Consultations

NA

Implications:

This item has the following implications, as indicated:

Risk management

There are no risk management implications arising from this item.

Local Government (Access to Information) Act 1985 List of Background Papers

Paper	Date	Contact/Tel
https://reports.ofsted.gov.uk /local-authorities/lancashire	November 2015	Ofsted

Reason for inclusion in Part II, if appropriate

NA

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24 August 2017



Amanda Hatton Director of Children's Social Care Lancashire County Hall Preston PR1 8XJ

Dear Amanda

Monitoring visit of Lancashire local authority children's services

This letter summarises the findings of the monitoring visit to Lancashire children's services on 25 and 26 July 2017. The visit was the fifth monitoring visit since the local authority was judged inadequate in May 2015. The inspectors were Susan Myers HMI, Paula Thomson Jones HMI and Shabana Abasi HMI.

The local authority is making some progress in improving services for its children and young people.

Areas covered by the visit

During the course of this visit, inspectors reviewed the progress made in the area of children looked after and care leavers, with a particular emphasis on the quality and timeliness of planning for permanence. A range of evidence was considered during the visit, including electronic case records, supervision files and notes, observation of social workers and senior practitioners and other information provided by staff and managers. In addition, we spoke to a range of staff, including managers, social workers, other practitioners and administrative staff. We also met with a group of care leavers.

Overview

The inspection in 2015 identified specific areas requiring improvement. This visit found that some progress has been made in a number of areas. You recognise that, while some progress has been made against your action plan, there is a considerable amount of work to do before you can be confident that children looked after and care leavers receive a good service.



Actions taken to support improvement include securing additional staffing, improving the quality of your audits and ensuring that compliance with basic standards of social work with children are met. There has been a strong focus on creating the right structure and culture to enable good practice to develop. Managers have worked hard to create this environment, and staff feel positive and well supported. There is now evidence that the new arrangements are beginning to support improvements in practice as well as compliance.

The quality of practice provided to children and their families remains too variable. For example, assessments lack thorough analysis of children's cultural and identity needs, and plans are not yet specific enough to ensure that progress can be measured. Adoption is not considered for all children, and permanency planning does not start quickly enough. There is more to do to ensure that managers and independent reviewing officers (IROs) are not overly dependent on self-reporting from social workers during audit activity. Managers have not yet developed robust systems to ensure that sufficient oversight of practice is provided at all levels in the organisation. Increased IRO capacity and the addition of advanced practitioners in social work teams have not yet addressed this shortfall, which was an issue at the time of the last monitoring visit.

Findings and evaluation of progress

For the vast majority of children looked after, statutory requirements are completed in a timely way. Visits to children are taking place regularly, and children are seen alone by their social workers. Most social workers know the children on their caseload well and have taken time to discover their wishes and feelings. However, for the majority of children, these positive relationships have not resulted in purposeful plans for children that lead to improved outcomes.

Some children experience too many changes of social worker. This means that they do not have the opportunity to build long-term, trusting relationships. Some children have a change of social worker every six months. Care leavers who met with inspectors said that they had grown tired of having to get to know so many new social workers.

Social work caseloads are mostly manageable, and staff feel well supported by their managers. However, workloads for some of the newly qualified social workers are too high, both in number and in complexity. This means that they do not have sufficient opportunity for continued learning and development of their social work skills. Some newly qualified workers are not receiving enough support, direction and challenge when they are undertaking complex assessments.

Supervision files and case records evidence that most staff receive regular supervision. Records since March 2017 are appropriately detailed and contain evidence of discussion about casework, regular training and social workers' development needs. Managers now provide challenge about compliance issues, and actions and directions are well recorded. However, timescales are not set and it is



sometimes difficult to see whether actions have been completed. Managers do not always provide sufficient challenge about the quality of assessments and plans.

Assessments and case summaries for children looked after are now updated regularly. The vast majority of children have been subject to re-assessment in the last six months to ensure that there is a current understanding of their needs. Although the quality of assessments remains too variable, several good pieces of work were seen by inspectors and no assessments were deemed to be inadequate. The justification for completing a re-assessment is not always clear, and staff are not routinely analysing information or looking in sufficient depth at some of the most important issues for children. Children's views are recorded, but social workers do not always describe children's lived experiences in assessments and case notes. Stronger practice is evident in teams that have more stable and experienced staff.

All children looked after have a written care plan, and some staff have received training in the importance of purposeful planning for children. However, almost all care plans sampled lacked specific, measurable outcomes against which progress can be monitored effectively. Furthermore, care plans do not sufficiently reflect the assessment of children's changing needs. For example, a young person who is almost 18 years old, and is supported by the special educational needs and disabilities team, does not have an up-to-date pathway plan that reflects a coherent agreed plan for their transition. This is in spite of two years of discussion.

Reviews take place regularly and IROs speak with children prior to review meetings. Children are increasingly more involved in their reviews, both through attending in person and writing part of their own review notes. However, reviews fail to challenge any drift or delay in children's plans. Reviews are not routinely used to ask critical questions about the decisions made about children, or to consider their future needs.

Many staff are unclear about how and where decisions about children looked after are made. Staff are unsure about which individual managers or different panels and groups are responsible for making decisions about plans for children. They are unclear whether reviews, for example, are meetings in which decisions are made or are meetings that simply record the decisions. Some staff are unsure about which cases are considered at permanency panel and which are not. Informal systems have been adopted across different teams, which adds to the problem of inconsistency. Crucial decisions for children, such as achieving permanence, or being separated from brothers and sisters, are agreed by individual team managers. However, the rationale for these decisions is not clearly recorded on children's files.

For most children, permanence is not considered soon enough. Many children achieve permanence by staying in their short-term foster placements for several years, without robust assessment of need or evaluation of options. Although these children are often described as being settled and happy by their social workers, these placements have not been considered carefully and deliberately enough to ensure that they are the right placements to meet the children's current and future needs.



Special guardianship orders (SGO) are not routinely promoted as a way of achieving permanence for children in long-term foster care. SGOs are not regularly discussed with foster carers during statutory visits.

Inspectors saw a number of cases during the visit in which cultural needs, family history and identity needs had not been well considered for children who had drifted into permanence with their foster carers without appropriate consideration of matching. It is unclear how short-term foster placements are converted and formally agreed as long-term placements. Life story work is not routinely completed with children who are in long-term foster placements.

Adoption is not routinely considered for all children who would benefit from it. Inspectors saw a number of very young children who were not being progressed for adoption, and there was no clear rationale for this. There is evidence of stronger practice for relinquished babies who are swiftly placed with foster to adopt families and progressed through adoption processes in a timely way.

Improvements that have been achieved in other parts of the service have not been realised in the SEND team, which has not been as engaged as other teams in auditing and other quality assurance activities. This means that the quality of assessments and care planning for children who have complex needs is not as strong as it is for other children looked after. For example, a child who has complex needs and has been allocated to the SEND team has not had a re-assessment of his needs since 2015.

I am copying this letter to the Department for Education. This letter will be published on the Ofsted website.

Yours sincerely

Susan Myers

Her Majesty's Inspector

Children's Services Scrutiny Committee

Meeting to be held on Wednesday, 6 September 2017

Electoral Division affected: (All Divisions);

New SEND Service Pathway

(Appendices 'A', 'B' and 'C' refer)

Contact for further information:

David Graham, 01524 581200, Special Educational Needs and Disability Service <u>david.graham@lancashire.gov.uk</u>

Executive Summary

The Special Educational Needs and Disability (SEND) Service are co-producing with parents, carers, children and young people and partner agencies a clear articulation of the support available for children, young people and adults in Lancashire with SEND from 0 to 25 years of age. The information supporting this pathway can be found on the Lancashire Local Offer website.

Appendix 'A' – Lancashire SEND graduated response diagram Appendix 'B' – Guidance notes for SEN information report Appendix 'C' – SEND update article 2016

Recommendation

The report is presented for information and comment as appropriate.

Background and Advice

The Special Educational Needs and Disability (SEND) Service are co-producing with parents, carers, children and young people and partner agencies a clear articulation of the support available for children, young people and adults in Lancashire with SEND from 0 to 25 years of age. The information supporting this pathway can be found on the Lancashire Local Offer website.

The legislative framework can be found within the Children and Families Act 2014 and detailed guidance within the SEND Code of Practice.

The reforms aim to bring together local health services (clinical commissioning groups) and local authorities to integrate services across the 0-25 age range, and now include <u>Education, Health and Care (EHC) plans</u>, intended for those with additional needs that cannot be met solely through <u>SEN support plans</u> provided by their educational establishment.

The key principles behind the reforms are:



- outcomes improving progress for children and young people with SEND;
- integration a joint approach across all agencies; and
- involvement full involvement of young people, parents and carers.

The EHC plan replaces the old statements of special needs, incorporating assessment and planning, and offering a more joined up and outcome-focused approach. Those children who have statements are to be transferred over to EHC plans, either at an annual review, or at a key transition point such as moving from primary to secondary education.

As part of the reforms Lancashire County Council is also required to have a Local Offer which provides parents/carers and young people with SEND and/or disabilities information as to what education, health, care and other services are available in their local area across the 0-25 year age range. This also includes childcare provision which is suitable for disabled children and those with SEND.

The local offer will also cover universal services such as GPs, targeted services and specialist services for more long-term support.

Level 1

Support offered via universal services (Level1) is provided where an additional need has been identified which requires support to maintain the inclusion and development of the child, young people or adult.

Level 2

Support offered at Level 2 provides support that is targeted and may be the result of assessment by agencies and provided from within their delegated budgets / resources. This will include GP's, Public Health, NHS England, Early Years Providers, Schools and FE Colleges, local community groups / charities, local councils and Lancashire County Council Children and Adult Services.

Level 3

Access to Level 3 support will be provided following the use of the Common Assessment Framework (CAF) with a co-ordinated assessment led by a Lead Professional in consultation with the child, young adult and their family / carers and all agencies involved.

If appropriate a referral can be made to the SEND Service for a Statutory Integrated Assessment which may lead to an Education Health and Care Plan which would provide additional resources from Schools High Needs Block.

Level 4

Children with needs that are complex, severe or life threatening and where there may be safeguarding concerns will require a multi-agency response.

Consultations

N/A

Implications:

This item has the following implications, as indicated:

Risk management

There are no risk management implications arising from this item.

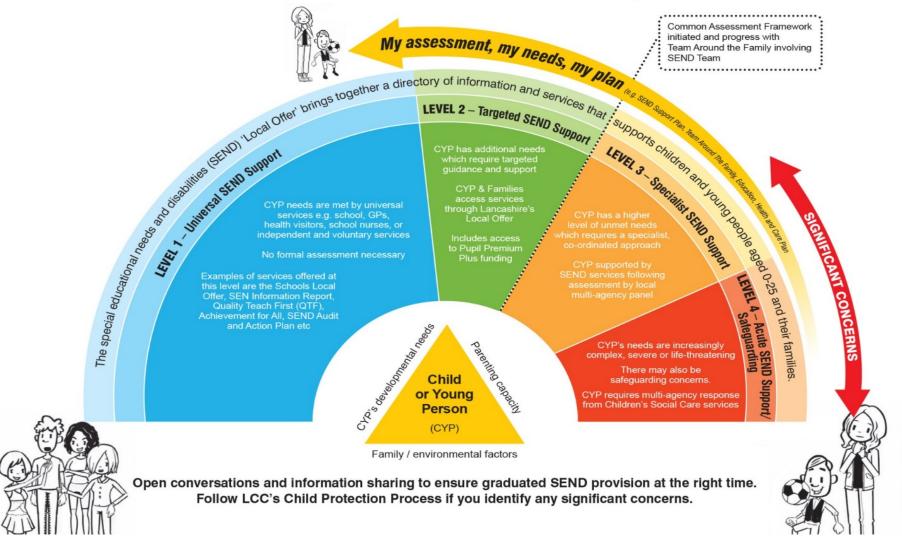
Local Government (Access to Information) Act 1985 List of Background Papers

Paper Date Contact/Tel N/A

Reason for inclusion in Part II, if appropriate

N/A

Lancashire SEND Graduated Response



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Guidance notes for SEN Information Report

Version 1 January 2017

Appendix 'B'



www.lancashire.gov.uk

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Overview

All educational providers from Child Minders to Further Education Colleges have a statutory duty under the SEND Code of Practice (CoP) to have arrangements in place to support children and young people with SEND. This support starts with the approach to the early identification of needs, through to the support that is provided at each of the steps through the Graduated Response to pupils with SEN Support. This collection of information is commonly known as the Providers Local Offer, and this should link to the Local Authorities Local Offer, <u>http://www.lancashire.gov.uk/children-education-families/special-educational-needs-and-disabilities.aspx</u>, as well as the Local Authorities Local Offer linking back to establishment. This information should be regularly reviewed and updated, in partnership with other local education providers, children and young people, parent/carers and the Local Authority.

Mainstream schools and academics, maintained nursery schools, 16 to 19 academics, alternative provision academies and Pupil Referral Units, also have a statutory duty to annually publish their SEN Information Report.

Lancashire County Council would encourage all educational providers to produce and publish a SEN Information Report, as this is recognised by the Department for Education (DfE) and OFSTED as good practice.

Guidance for Completion

This guidance reflects the statutory guidance from the DfE in the CoP, and pulls on good practice from the national Association of Special Educational Needs (NASEN). The statutory requirements are detailed in the CoP 6.79 - 6.83. Lancashire County Council would encourage all educational providers to use the following template to produce their SEN Information Report.

SCHOOL NAME

SEN Information Report Date

Name of the Special Educational Needs/Disabilities Coordinator:

Contact details:

The kinds of SEND we provided for.

You should make clear whether you are a mainstream setting or whether you are a special school setting.

Given details of the kinds of special educational needs for which you can make provision.

If a mainstream setting then your statement of inclusion or relevant sections of your admissions policy can be added here.

How does the school know if children/young people need extra help and what should I do if I think my child/young person has special educational needs?

How do you identify children/young people with special educational needs and disabilities (SEND)?

How do you decide when a child/young person is having difficulties in accessing learning? Give details of any tests, assessment tools, monitoring, tracking that you use to support identification of difficulties and so on, and how they are used. How is a child/young person's progress towards their targets and outcomes reviewed?

What are the roles of the Class Teacher, Nursery Nurse, Room Manager, SENCO, Disability Manager, SEN team, Inclusion Teacher or Team, Family Support Worker, etc. in this?

What additional support is offered to the family in relation to accessing education? What links with outside agencies and particularly how you use this support and works in partnership with other agencies.

If a child/young person or their parent/carer thinks they have a special educational need, who do they discuss this with in your establishment?

What arrangements does the school make for consulting with children/young people with special educational needs and disabilities about - and involving them in - their education?

How do you inform children and young people that you think they have a special educational need?

How are children and young people able to contribute their views, in relation to their aspirations & goals, the provision for them and how they can best be supported?

How are children and young people informed of the progress you think they are making? And how do you gather their view of the progress they are making?

What are your expectations and view on engaging children and young people in both operational and strategic decision making? How do you make this happen?

How are children and young people supported to ensure that their voice is heard?

What arrangements does the school make for consulting with the parents & carers of children/young people with special educational needs and disabilities and involving them in – their child's/young people's education?

How do you inform the parents and carers of children and young people that you think they have a special educational need?

How are the parents and carers of children and young people able to contribute their views, in relation to their aspirations & goals for their child/young person, the provision for them and how they can best be supported?

How are the parents and carers of children and young people informed of the progress you think they are making? And how do you gather their view of the progress they are making?

What are your expectations and view on engaging with the parents and carers of children and young people in both operational and strategic decision making? How do you make this happen?

How are the parents and carers of children and young people supported to ensure that their voice is heard?

This should cover the general arrangements for involvement and consultation with parents, such as parents' evenings, new parents' visits, headteacher open mornings and parent learning sessions, as well as the additional opportunities available for parents and carers of children/young people with additional needs including the opportunity to discuss their children's progress with key staff.

How will the curriculum be matched to my child/young person's needs?

How does the school approach the identification of need and the matching of those needs to appropriate provision?

What is your approach to differentiation and what are the skills that school staff have to support this specifically around special educational needs?

How does this help the child/young person with special educational needs to make progress? For example, how does an individual education plan, pupil passport/profile, a learning and observation journal impact the learning?

Explain the different roles that your staff have in supporting children/young people with special educational needs.

How accessible is the school environment?

Include here general information about the school's accessibility. Are the buildings fully wheelchair accessible? Have there been improvements in the auditory and visual environment? Are there disabled changing and toilet facilities? Does the school have disabled parking bays?

What reasonable adjustments can be made around the buildings limitations?

What equipment and facilities that are routinely provided? How will equipment and facilities be secured to support children/young people with special educational needs that are additional to and different from those already provided? Add information about the way that families are included and how the school works with other services to secure this provision and how advice is secured and applied.

How are the school resources allocated and matched to children/young people's special educational needs and disabilities?

How is the decision made about the type and quantity of support my child/young person receives?

How are resources needed for children/young people with special educational needs allocated?

How are decisions made about additional resources made?

Who is involved and their role in the decision-making process?

How is support for children/young people with special educational needs allocated?

How are decisions made about additional support made?

Who is involved and their role in the decision-making process?

How are decisions, resources and support on access arrangements that can be made available for public examinations?

How are parents involved in this process?

How will both you and I know how my child/young person is doing and how will you help me to support their learning?

How do you know how well children/young people with special educational needs are doing?

How do you communicate this to the child/young person and their parents/carers?

How does the child/young person and their parents/carers know how much progress that their child/young person should be making?

What opportunities are there for regular contact with parents/carers about things that have happened at your organisation, such as a home-school book?

How do you explain how learning is planned and delivered and how parents/carers help to support this at home?

What training have the staff supporting children/young people with SEND had or may they have?

What specialist services or expertise are available at or accessed by the school?

Outline your approach to the training and development of staff to enable them to support children/young people with special educational needs.

Explain how you would prepare for a child/young person coming who had needs that they have not previously supported.

Say whether you have specialist staff working and what their qualifications are.

Explain what other services the school accesses, including health, therapy and social care services. Include any specialist organisations that provide support, such as those related to mental health. This should also include recent and future planned training and disability awareness relating to education and the well-being of the child or young person.

Identify particular strengths in relation to your inclusion and overall statements.

How will the school prepare and support my child/young person to join the school, transfer to a new school or the next stage of education and life?

What are your arrangements for transition for children/young people with special educational needs and how do you work with other education settings to transfer information?

Who is responsible for providing support through this?

What are the timescales involved?

What support do you have for any tasters, transition days, work experience or out-of-school activities?

How are the Preparing for Adulthood Outcomes and Aspirations discussed and captured? This is a statutory duty from Year 9 onwards, but recognised good practice for all ages.

How will my child/young person be included in activities outside the classroom, including school trips?

What extracurricular activities does the school run?

How are these made available for children and young people with special educational needs? Make clear how you assist the children/young people to do so.

How are children/young people and their parents/carers involved in planning for any activities or trips, and about the support that is provided?

What support and arrangements do you have in place during lunchtimes and breaks and at the beginning and end of the school day.

What support will there be for my child/young person's overall well-being?

What is your pastoral, medical and social support available for children with special educational needs and disabilities?

How do you manage the administration of medicines and provision of personal care?

How do you support behaviour, avoiding exclusions and increasing attendance?

How do you ensure the safety of the children/young people with special educational needs? Do you specifically report on issues of bullying specifically against children/young people with special educational needs? How do you prevent bullying of children/young people with special educational needs?

How do children/young people with special educational needs contribute to all parts of your organisations life, including school councils, Class Reps, or roles of responsibility?

How do you evaluate the effectiveness of the provision made for children and young people with special educational needs?

What reports on the outcomes of children/young people with special educational needs do you create?

Are the view of children/young people with special educational needs sought?

Are the view of parent/cares of children/young people with special educational needs sought?

Who are these various reports presented to? How is this information scrutinised? How are improvements identified and actioned?

How do you involve other bodies, including health and social services, local authority support services and voluntary organisations, in meeting the needs of children/young people with SEND and in supporting their families?

What other professionals and organisations provide support to children/young people with special educational needs at your organisation?

How is this accessed? How often?

What services do you access around health, therapy and social core services?

What arrangements do you make in relation to the treatment of complaints from children/young people and their parents/carers with special educational needs concerning your provision made?

Outline who should be the first point of contact if a child/young person wishes to discuss something about their special educational need, and your general approach to resolving concerns. Explain how you communicate with children/young people and the measures employed to ensure that concerns are addressed.

Outline who should be the first point of contact if a parent/carer wishes to discuss something about their child/young person, and your general approach to resolving concerns. Explain how you communicate with parents/carers and the measures employed to ensure that concerns are addressed.

Outline your formal complaints policy and where information about this can be found.

Where can I find the contact details of support services for the parents of children/young people with SEND?

Outline how you seek to signpost children/young people and their parents/carers with special education needs to organisations and services that can provide additional support.

Where can I find information on where the local authority's local offer is published?

Our Local Offer - Insert link to your establishments Local Offer

Lancashire County Councils Local Offer - <u>http://www.lancashire.gov.uk/send</u>

Appendix 'C'

Children and young people: Special educational needs and disability (SEND) 2016



www.lancashire.gov.uk

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Afzal Patel, performance management officer, Lancashire County Council Christian Ayers, performance officer, Lancashire County Council Donna Gadsby, JSNA research officer, Lancashire County Council

September 2016

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1. Overview

A child or young person has special educational needs (SEN) if he or she has a learning difficulty or disability which requires special education provision.¹

As part of a range of SEND (special educational needs and disability) reforms, education, health and care (EHC) plans were introduced in September 2014. They aim to improve outcomes for children and young people by providing a more joined up approach across different agencies and encouraging parents/carers and young people to be fully involved in decisions around their own support.

The figures for Lancashire-12 indicate that over 5,000 young people have a statement or EHC plan (January 2016), a small decrease from the previous year. These figures vary, depending on school setting type, with more primary school pupils having SEN support, compared to secondary school pupils.

There were 420 new statements/EHC plans issued in Lancashire-12 (January 2016).

2. SEND reforms

The SEND reforms set out in the Children and Families Act 2014 supersede the 2001 code of practice (DfES 2001b). The reforms aim to bring together local health services (clinical commissioning groups) and local authorities to integrate services across the 0-25 age range, and now include <u>education, health and care (EHC) plans</u>, intended for those with additional needs that cannot be met solely through <u>SEN</u> <u>support plans</u> provided by their educational establishment.

The key principles behind the reforms are:

- outcomes improving progress for children and young people with SEND;
- integration a joint approach across all agencies; and
- involvement full involvement of young people, parents and carers.

The EHC plan replaces the old statements of special needs, incorporating assessment and planning, and offering a more joined up and outcome-focused approach. Those children who have statements are to be transferred over to EHC plans, either at an annual review, or at a key transition point such as moving from primary to secondary education.

As part of the reforms Lancashire County Council is now required to have a <u>local</u> <u>offer</u>, which provides parents/carers and young people with SEN and/or disabilities information as to what education, health, care and other services are available in their local area across the 0-25 year age range. This also includes childcare provision which is suitable for disabled children and those with SEN.

¹ This is defined as when a child or young person has significantly greater difficulty in learning than the majority of their peers of the same age. It also includes disability which prevents or hinders them from making use of educational facilities of a kind generally provided for their peers of the same age in schools maintained by the county council.

The local offer will also cover universal services such as GPs, targeted services and specialist services for more long-term support.

3. SEN statements and EHC plans

While the reforms have led to an increased service caseload and an increase in the number of assessments, the authority is on target to complete all transfers of young people from statements of SEN or learning difficulty assessments by the national deadline of April 2018.

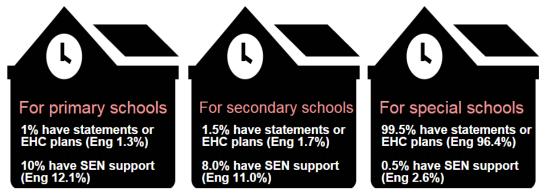
The most recent figures for Lancashire-12 indicate that the authority is rated as 'good' for transfer from SEN statements to EHC plan provision.

3.1 Key figures for Lancashire-12 (year to Jan 16)

- The percentage of children with statements or EHC plans is 2.9% (England 2.8%), equating to just over 5,200 young people aged 0-25 years, a decrease from 3.1% in January 2015 (Eng 2.8%).
- 9.1% have SEN support (Eng 11.6%), a decrease from 10.5% in 2015.
- 410 children and young people had a new EHC plan, while 10 new statements were issued.
- 275 statements/EHC plans were discontinued, due to the end of compulsory education.

3.2 Key figures by school type

Statements/EHC plans and SEN support vary by school type and the figures to January 2016 for Lancashire-12 compared to England (across primary, secondary and special schools) show:



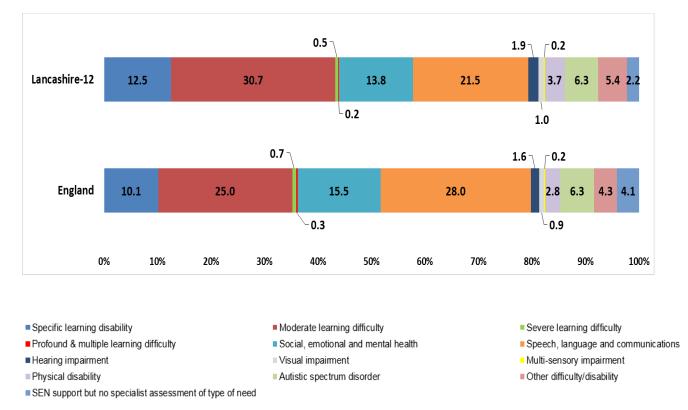
Across all school types 12.0% of pupils have special educational needs (Eng 14.4%)

Source: Special educational needs in England, January 2016

3.3 SEN by need and educational establishment

The charts below shows the percentage of pupils with special educational needs by their main type of need, this is across primary and secondary education establishments.

Chart 1: Primary school pupils with special educational needs by their primary type of need, annual figures January 2016.



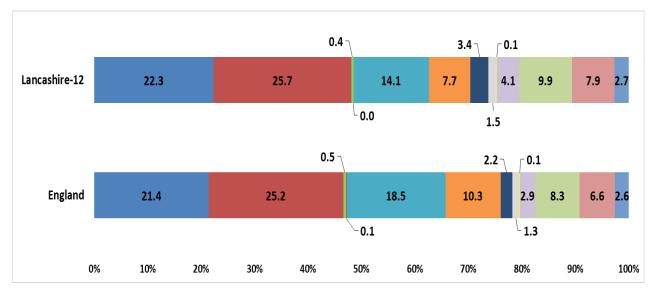


Chart 2: Secondary school pupils with special educational needs by their primary type of need, annual figures January 2016.

3.4 Special educational need category by district

The chart below shows the district breakdown by SEN category for children who have SEN support, statements and EHC plans (to January 2016).

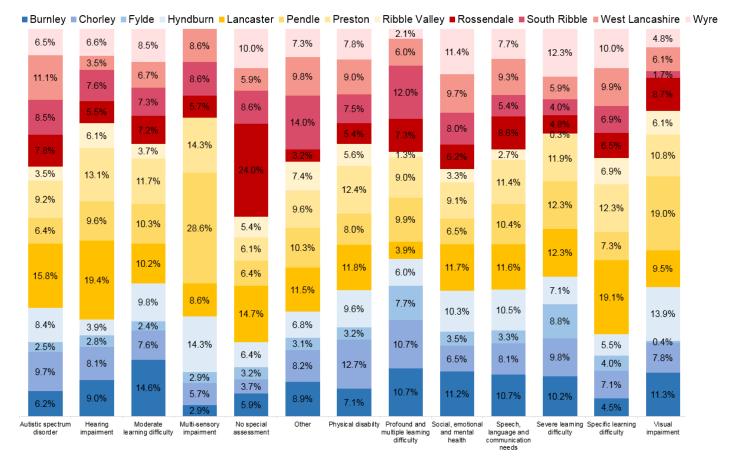


Chart 3: breakdown of SEN by category for districts, January 2016

Source: Department for Education school census 2015/2016.

3.5 Attainment levels for SEN/EHC plan pupils

Overall pupils with SEN/EHC plans in Lancashire-12 perform well when compared to the national, regional and statistical neighbour rates. Further analysis shows:

- For 2014/15, 17% of pupils achieved level 4+ at key stage 2 in reading, writing and maths, higher than the national (16%), regional (15%) and statistical neighbour (15.7%) averages, rating Lancashire-12 as 'good' for this indicator.
- At GCSE level, 14.3% (71 out of 498 pupils) achieved five A* to C grades, including English and maths; this is higher than the national (8.8%), regional (8.7%) and statistical neighbour (8.4%) figures and places the authority as 'outstanding' for this indicator.
- The authority is ranked as 'good' for the percentage of young people with a SEND not in employment, education or training (NEET).

4. Data and other downloads

Information from the school census on pupils with special educational needs and SEN provision in schools.

2016_Local_authority_tables.xlsx (XLSX 320 KB)

Statistics and analysis on statements of special educational needs (SEN) and education, health and care (EHC) plans in England.

SEN EHC plans SFR17-2016_Main_Tables.xlsx (XLSX 314 KB)

5. Related websites

SEND reforms: <u>http://www.careersadviceforparents.org/2015/01/special-educational-needs-SEND-reforms.html</u>

National statistics: special educational needs (SEN) https://www.gov.uk/government/collections/statistics-special-educational-needs-sen

Children's Services Scrutiny Committee

Meeting to be held on Wednesday, 6 September 2017

Electoral Division affected: (All Divisions);

School Nursing

Contact for further information: David Graham, (01524) 581200, Special Educational Needs and Disability Service David.graham@lancashire.gov.uk

Executive Summary

Since 1 September 2014 School governing bodies are required to make arrangements to support pupils at school with medical conditions. The aim is to ensure that all children with medical conditions, in terms of both physical and mental health, are properly supported in school so that they can play a full and active role in school life, remain healthy and achieve their academic potential. Public Health Nursing provision made by Lancashire County Council and Specialist School Nursing which is a joint responsibility between CCG's and NHS England provide additional support to schools in respect of this.

Recommendation

The report is presented for information and comment as appropriate.

Background and Advice

Introduction

There are two separate types of school nurses, specialist school nursing support which is provided by Clinical Commissioning Groups' (GP'S) and public health nursing which is the responsibility of Lancashire County Council.

Specialist School Nursing

Commissioning clinical support for children with additional health needs or long-term conditions and disabilities, clinical support for enuresis or incontinence lies with NHS England and clinical commissioning groups, to ensure co-ordinated support.

Clinical commissioning groups (CCGs) were created following the Health and Social Care Act in 2012, and replaced Primary Care Trusts on 1 April 2013. CCGs are clinically-led statutory NHS bodies responsible for the planning and commissioning of health care services for their local area. There are 6 CCGs across the Lancashire County Council (Lancashire-12) area. All GP practices belong to a CCG, but groups also include other health professionals, such as nurses.



CCGs commission most of the hospital and community NHS services in the local areas for which they are responsible. Commissioning involves deciding what services are needed, and ensuring that they are provided. Commissioning is about getting the best possible health outcomes for the local population, by assessing local needs, deciding priorities and strategies, and then buying services on behalf of the population from providers such as hospitals, clinics, community health bodies, etc. CCGs are responsible for the health of their entire population.

CCG's commission:

Lancashire Care NHS

NHS Foundation Trust

Special Needs School Nursing Service:

The special needs school nursing service exists to provide skilled evidence based care to all special needs children and their families in the special school settings, providing support for the parents, carers and school staff in meeting the health needs of children with complex needs

- Providing holistic care for all children with special needs registered to a special school
- Supporting special school staff by providing appropriate training around specific nursing needs and tasks.
- Working in partnership with other agencies statutory, private and voluntary sectors in order to meet the complex health needs of children registered to a special school and their families throughout East Lancs.
- To promote social inclusion with children at special school for families that through disability find themselves disadvantaged.
- Acting as key worker for children registered at special school and their families
- To identify those children who are at risk of being harmed either physically or emotionally and act accordingly in line with child protection policy.
- To contribute to the Common Assessment Framework and Team around the Child process to ensure that children's additional and safeguarding needs are fully identified and communicated. To identify those children who are at risk of being harmed either physically or emotionally and act accordingly in line with child protection policy.
- To contribute to the Common Assessment Framework and Team around the Child process to ensure that children's additional and safeguarding needs are fully identified and communicated

How to access the service:

All Children Attending One Of The 12 Special Needs Schools Will Have Access To The Special Needs School Nursing Service. There is no referral process.

Care pathways include:

- Entry into school
- Assessment
- Care planning
- Review
- Condition specific
- Discharge /Transition Planning

Where the service is provided:

The service is provided in the special needs schools as listed below;

- Pendle Community High School and College Oxford Road, Nelson
- Pendle View Primary Gibfield Road, Colne
- Ridgewood Community High School Eastern Avenue, Burnley
- Hollygrove School Barden Lane, Burnley
- White Ash Thwaites Road, Oswaldtwistle
- Broadfield Fielding Lane, Oswaldtwistle
- Newfield Blackburn
- Sir Tom Finney Blackpool Road, Preston
- Acorns Blackpool Road, Preston
- Coppice Ash Grove, Bamber Bridge
- Mayfield- Gloucester Road, Chorley

and

NHS

Blackpool Teaching Hospitals NHS Foundation Trust

Fylde and Wyre Areas

Pear Tree School

Red Marsh School

Whitegate Drive HC

Blackpool Victoria Hospital

Lancaster Areas Bleasdale School

Loynes School

Ryelands School

Lancashire County Council is responsible for:

Universal School Nursing & Public Health Nursing

5-19 Years Universal School Nursing

The School Nurse Service will offer the 4-5-6 core framework of the Healthy Child Programme (HCP) to the school aged population of children (5-19 years) and their families in Lancashire, with public health nursing support for young people with SEND up to 25 years.

The Service will provide a named School Nurse to all educational establishments within the Lancashire 12 districts and will also provide a HCP offer to children and young people who are not educated in mainstream provision, those children missing education, or those educated at home.

The Service will be led by School Nurses and supported by skill mix teams for all children, young people and families. School Nurses have caseload responsibility.

The Service will ensure expert advice and support is available locally, in a variety of formats, including face to face contact, provision of school health drop-ins and use of innovative digital technology means. It will be provided by appropriately qualified staff to enable children and young people and families to sustain a secure environment which supports emotional resilience and good physical and mental health.

The Service will offer the 5 health reviews for school aged children in order to provide further assessment, provide targeted support or provide early intervention to address need and improve outcomes. The Service will:

- Review child health at entry into reception.
- Review child health at year 6 (identifying transition support for secondary school).
- Review child health at mid teen (transition to adolescence).
- Provide an offered review for young people aged 16 years with identified need or those who are receiving universal plus or partnership plus support or those young people who require support in regards to health needs at sixth form, college, further education training or apprenticeships.
- Provide a review and support for those young people who require support to ensure smooth transition to any health or social adult services.
- Immunisation status will be checked at health reviews and immunisation uptake promoted.

The Service is required to provide strategic public health support to Lancashire schools to promote settings based approaches which improve the health and wellbeing of the school population. The successful Service will be required to provide school level health reports based from either the year 6 or year 9 health questionnaires. These reports will be anonymised to a population data level, which is summarised for each individual school. The Service will work with LCC in order to use the LCC secure platform that generates health questionnaires and produces anonymised summary reports. The Service is expected to have a policy in place to undertake this process within all local schools, and this will include consent, information governance processes and operating processes. The School Nurse will provide individual guidance to schools that reflects the individual school profile that is produced to promote and support the Healthy School and Healthy Settings principles and approaches.

The Service will promote health and development by focusing upon the six high impact areas for 5-19 year olds.

The Service will ensure universal provision supports promotion of resilience and emotional wellbeing for school aged years:

The Service will integrate emotional health and wellbeing questions within universal reviews and assessments to ensure early identification of those in need.

It will provide further holistic assessment as individually indicated, provide universal plus support, use

strengths and difficulty approaches, building resilience, evidenced based family centred support- as individually indicated and signpost to specialist services as necessary.

The Service will ensure universal provision supports promotion of reducing risky behaviours for school aged years:

- School Nurses will include early identification of risk taking behaviours within health review questionnaires and assessment
- The School Nurse Service will provide related health promotion, information, advice and action planning, on an individual level and necessary guidance to schools will be included in school profiling as indicated.
- The School Nurse Service will contribute to an increase in smoking cessation rates in children and young people it works with by providing early intervention advice/brief intervention and actively referring to the Lancashire Tobacco and Nicotine Addiction Treatment Service.
- The school nursing Services will be aware of local support services for signposting and providing further individual support.

The Service will ensure universal provision supports promotion of improving lifestyles for school aged years:

- School Nurses will include early identification of lifestyle issues within health review questionnaires and assessment.
- The School Nurse Service will provide related health promotion and healthy lifestyle information, advice and action planning, on an individual level and within guidance, regarding individual school profiling as indicated.
- The School Nurse Service will promote uptake of the National Child Measurement Programme (NCMP) and undertake the delivery according to National Guidance. It will promote referrals to local Active Lifestyle and Healthy Weight services (ALHW) for children identified as overweight or obese.
- The School Nurse Service will promote Change 4 life resources to communities, families and schools.

The Service will ensure universal provision supports promotion of maximising learning and achievement for school aged years:

- Handovers for reception aged children that are receiving universal plus, or partnership plus support from the health visiting Service will be handed over to the School Nurse Service when most appropriate for individual family needs and when transition into school can be seamless.
- The school nursing Service will offer all parents/carers of reception aged children a health needs questionnaires in order to identify families that require early intervention.
- The School Nurse Service will build resilience in young people by promotion of self-care, health literacy and prevention of illness and accidents.
- The School Nurse Service will triage 5-19 years children's and young people's accident and emergency attendance, and arrange follow-up as required or as requested. The Service will include pro-active follow-up of children attending A&E where the child is a Children in Need (CIN) or on a Child Protection Plan (CPP), are a Looked after Child or Care Leaver, or those who have had 3 or more attendances at an Emergency Department or Urgent Care Centre in a 12 month period, as a minimum.

The Service will ensure universal provision supports complex and additional health and wellbeing needs for school aged years:

• School Nurses will support schools with their responsibility to ensure health care plans are in

place for children and young people with medical needs at school, ensuring primary and secondary prevention ensures child health outcomes are improved and they get the most out of the educational provision.

- School Nurses will provide training to schools that supports a schools ability to adopt a care plan into the school setting.
- The School Nurse will provide an advisory role to school regarding health matters, medicine management and health promotion.
- The 5-19 Service will provide enhanced 'Public Health Nursing' secondary prevention support for children and families identified as SEND or with physical or learning difficulties, disabilities, emotional or behavioural difficulties. The service will be required to ensure service provision responds to service requests as part of assessment or their contribution to EHC plans - either new or review assessments. This will follow the local pathway, timelines and uphold the national SEND reforms. Contributions to plans will remain outcome focussed. With parental consent any health care plans will be linked into the education health care plans.
- The School nursing Services are expected to have partnership working arrangements with schools, Special Educational Needs Coordinators (SENCO's), community children's nursing services, paediatric services, specialist school nursing services, and paediatric services from tertiary centres in order to improve children's health outcomes and embed primary prevention into existing care packages.
- The service will provide Tier 1 continence information and advice for nocturnal enuresis and constipation. This may include providing information and advice on toileting, diet, fluids, and rewards. If further assessment or treatment is required or needs are identified, referral will be offered/ arranged to local specialised services, general practitioners or paediatricians.

The Service will ensure universal provision supports seamless transition and preparation for adulthood:

- The service will work with partners to deliver targeted drop-ins in schools, colleges and neighbourhood centres to make sure young people have access to confidential health information and support.
- The service will use social media to deliver health messages, promote services and offer accessible confidential advice that is acceptable to the young people using them, for example, a texting health advice service.
- The service will ensure young people are aware and confident in how to access health services in their community
- The service will ensure the service achieves the standards of "You're Welcome" quality criteria.
- The service will provide any necessary support for young people who will move from children's to adults' services, promoting seamless transitions with partner health and social care practitioners.

Consultations

N/A

Implications:

This item has the following implications, as indicated:

Risk management

There are no risk management implications arising from this item.

Date

Local Government (Access to Information) Act 1985 List of Background Papers

Paper

Contact/Tel

N/A

Reason for inclusion in Part II, if appropriate

N/A

Children's Services Scrutiny Committee

Meeting to be held on Wednesday, 6 September 2017

Electoral Division affected: None;

Children's Services Scrutiny Committee Work Plan 2017/18

(Appendix 'A' refers)

Contact for further information: Samantha Parker, Tel: 01772 538221, Democratic Services, sam.parker@lancashire.gov.uk

Executive Summary

The Plan at Appendix 'A' is the work plan for the Children's Services Scrutiny Committee for the 2017/18 municipal year.

The topics included were identified at the work planning workshop held on 21 June 2017.

Recommendation

The Children's Services Scrutiny Committee is asked to:

- i. Note and comment on the report;
- ii. Confirm the topic(s) and intended outcomes to be considered at the next scheduled meeting.

Background and Advice

A statement of the work to be undertaken and considered by the Children's Services Scrutiny Committee for the remainder of the 2017/18 municipal year is set out at Appendix A. The work plan is presented to each meeting for information.

The Committee is asked to confirm the topic(s) to be considered at the next scheduled meeting on 18 October 2017. The Committee is also asked to make suggestions on the intended outcomes from the report.

Consultations

NA



Implications:

This item has the following implications, as indicated:

Risk management

NA

Local Government (Access to Information) Act 1985 List of Background Papers

Date

Contact/Tel

NA

Reason for inclusion in Part II, if appropriate

NA

Children's Services Scrutiny Committee – Work Plan 2017/18

	Date to Committee	Report	Lead Officers	Outline reasons for scrutiny/scrutiny method
	26 July 2017	Wellbeing, Prevention and Early Help Service (WPEHs) – Overview	Debbie Duffell	Overview of WPEHs offers in particular – the early offer and universal services accessibility - identification of any gaps in provision around the Continuum of Need, CAF, children's centres, partnership and integrated working challenges, CAMHS, MASH
	6 September 2017	New SEND Pathway	David Graham	Overview of changes /referral process/journey of a child/case studies/transition timescales and managing parents expectations
		Medicine management in schools	David Graham	Reviewing the impact of withdrawing School nurses from special schools
Page		Ofsted feedback	Amanda Hatton	Following monitoring visit in July
e 45				
Ο̈́Ι	18 October 2017	Homelessness of young people	Tracy Poole-Nandy	District level data – who do we pay? Who do we work with? What's the accommodation offer? And links with CAMHS
		Tracking of Care Leavers	Audrey Swann	Overview of new process
		Youth Accommodation for LAC	Tracy Poole-Nandy	Care leavers and accommodation issues – what's the offer? Is it up to standard?
	6 December 2017	Children in secure accommodation – out of area	Sally Allen/David Hynes	Exit strategies and update on Audit exercise National picture – placing child nearer to families
		Children's social worker	Amanda Hatton/Tracy	Update on the ongoing challenges

Produced: July 2017

Children's Services Scrutiny Committee – Work Plan 2017/18

Date to Committee	Report	Lead Officers	Outline reasons for scrutiny/scrutiny method
	recruitment and retention challenges (strategy and support)	Poole-Nandy	
	Buildings and accommodation for social workers	Tracy Poole-Nandy	Overcrowding, access to IT equipment and lack of desk space for social workers
31 January 2018	New models of delivery (overspend on children's social care)	Amanda Hatton Neil Kissock	Overview of New Models of Delivery in response to overspend on Children's Services
	Budget proposals	Neil Kissock	Budget Proposals from Susie Charles – Cabinet Member for Children, Young People and Schools
14 March 2018	Criteria for EHCP and the role of Local Moderating Panels	David Graham	Overview of the criteria and the role of Local Moderating Panels
	EHCP progress update	David Graham	Update on progressing with conversions
11 April 2018	Children's Partnership Boards	Clare Platt	Review of the Boards effectiveness and their future
22 May 2018	tbc		

Children's Services Scrutiny Committee – Work Plan 2017/18

Potential topics for the Committee:

• LSCB annual report

Produced: July 2017

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