



## Report to Children, Young People and Family Support Scrutiny & Policy Development Committee

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**Report of:** Dawn Walton, Director of Commissioning, Inclusion & Learning and Brian Hughes, Director of Commissioning and Performance and Deputy Accountable Officer, Sheffield CCG

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**Subject:** SEND & Inclusion update

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**Author of Report:** Tim Armstrong, Head of SEN (SCC), Joel Hardwick, Head of commissioning – Inclusion & Schools (SCC), Sapphire Johnson, Head of commissioning – Children, Young People and Maternity (SCCG)

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**Summary:**  
To provide scrutiny committee an update on the inclusion strategy development and commissioning intentions

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**Type of item:** The report author should tick the appropriate box

Reviewing of existing policy	
Informing the development of new policy	
Statutory consultation	
Performance / budget monitoring report	
Cabinet request for scrutiny	
Full Council request for scrutiny	
Call-in of Cabinet decision	
Briefing paper for the Scrutiny Committee	X
Other	

**The Scrutiny Committee is being asked to:**  
consider the proposals and provide' views, comments and recommendations

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**Background Papers:**

**Category of Report:** OPEN

# **Report of the Director of Commissioning, Inclusion & Learning** **– Inclusion strategy and commissioning**

## **1. Introduction**

To provide scrutiny committee an update on the development of the inclusion strategy in response to the local area SEND inspection, including the development of joint commissioning intentions

## **2. Main body of report, matters for consideration, etc**

The local area inspection of SEND was completed in November 2018. The inspection report identified 7 areas of significant weakness and required the development of a written statement of action in response. This was published earlier this year. Inspectors are due to return in October 2020.

The purpose of this report is to provide an update in regards to the development of the inclusion strategy and commissioning intentions.

### **2.1 Inclusion strategy development**

A formal consultation on the draft Inclusion Strategy has been taking place since 11th November 2019. This is due to end on 26<sup>th</sup> January 2020, just prior to this committee meeting. From the consultation responses to date we have been able to see the percentages of people who agreed or disagreed with various elements of the strategy and also to theme comments and identify parts of the strategy that could be written more clearly or focused differently. For example, common themes that have appeared include:

- Language and tone – too much jargon
- Lack of provision available
- How to make it a reality
- Timescales
- Role of schools and SENCO
- Early years

During the first four weeks of the consultation we listened to what people told us and re-drafted the strategy commitments in plain English. We re-issued these alongside the original draft strategy for further comment in December for the remainder of the consultation period. Final re-drafting of the strategy will take place w/c 27<sup>th</sup> January and early February once the consultation has closed.

The strategy continues to contain 5 commitment areas:

- Effective identification of needs with appropriate assessments across Education, Health and Care
- A wide range of services across Education, Health and Care that meet the needs of our young people (Provision)

- Smooth transition across Education, Health and Care at every stage of a young person's life, and particularly to adult life (Transition)
- Excellent communication and engagement between young people, families, education, health and care services including schools (Communication)
- Skilled leader and staff capabilities to deliver the services across Education, Health and Care (Workforce)

We continue to aim to take the strategy to Sheffield City Council cabinet in February 2020. The commitments used for consultation are appended to this report and copies of the updated commitments will be available to the committee on the day in agreement with the chair. This is due to the extension of the deadline to the consultation to enable time to ensure that all views have been incorporated.

## **2.2 Joint commissioning developments regarding SEND and Inclusion**

The inspection highlighted commissioning as one of the seven areas of weakness, specifically:

- *Weaknesses in commissioning arrangements to remove variability and improve consistency in meeting the education, health and care needs of children and young people aged zero to 25 with SEND*

In the approved Written Statement of Action, the Local Authority and the Clinical Commissioning Group committed to the following areas of focus to address this weakness:

- *Understand Needs: Develop a full and shared understanding of children and young people's education, health and care needs to inform commissioning planning and decisions, resulting in more effective SEND support*
- *Mapping Commissioning and Provision Requirements: Ensure a clear understanding of existing commissioning requirements for children and young people with SEND and how current commissioning arrangements align; identify where we have gaps and inconsistencies; and engage with children, young people and families for feedback as part of the commissioning cycle*
- *A Consistent & Improved Citywide Programme: Develop a joint local area commissioning programme for SEND support and a consistent approach to the way we commission services, to ensure the development of more effective support*

The draft Inclusion Strategy that is out for consultation as described above contains further strategic steer around the commissioning needs, most specifically under the commitment related to provision:

- *We will make provision and support easy to find and access*
- *We will give the right support for children and young people at all levels of need*

- *We will provide support as early as possible*
- *We will create sufficient high quality local provision that meets local need*
- *We will work together with services and schools to improve inclusion*

Overall level of needs and demand:

- Around 12,000 school-age pupils with identified SEND in Sheffield – fits the nationally expected level
- The more complex children with identified SEND have an Education, Health & Care Plan (EHCP) – in Sheffield 3,275 (October 2019) children and young people (0-25) have an EHCP – this has grown from 2,500 in January 2017 and at the last point of published data remained slightly lower than the national proportion (2.5% vs 2.9% nationally)
- The SEND code of practice has four areas of need: Cognition & Learning; Communication & Interaction; Social, Emotional & Mental Health (SEMH); and, Sensory & Physical – Sheffield follows nationally-recognised trends in seeing growing numbers of children with identified needs across communication & interaction and behavioural needs linked to SEMH
- Referrals to Child & Adolescent Mental Health Services (CAMHS) increased by 46% between 2018/19 and 2019/20.
- Developmental Language Disorder (DLD) affects 7% of the population (approx. 2 children in every class).
- 60% of pupils referred to Secondary Inclusion Panel in Sheffield in 2018-19 were found to have Speech, Language and Communication Needs (SLCN).
- 50% of pupils with SLCN have associated social, emotional and mental health needs.
- Over a quarter of the city's children with EHCPs are in two of Sheffield's 18 postal districts - S5 & S2

In order to deliver against these strategic steers and the current patterns of increasing need we must develop further our commissioning intentions and we must also reshape the system. We must create a system that is:

- Integrated: across education, health and care
- Graduated: from universal up to the offer for the most complex
- Preventative and flexible: around the family with a focus on causes
- Engaged: with individuals, families, and services
- Consistent & available: the offer is sufficient, consistent, clear and timely
- All-age: with seamless multi-agency transitions

Within this approach we have developed a shared vision of the integrated and graduated approach:

## SPECIALIST PROVISION: High level of need & complexity

Integrated Resources & Hubs, Special Schools, Hospice, Tier 3 and 4 CAMHS, tertiary specialist services, acute inpatients, Ryegate

## TARGETED SUPPORT: Crisis prevention

Fast-track assessment, alternative provision, and intervention to prevent escalation to specialist

## EARLY HELP: Pro-active & preventative

Tracking and review of vulnerable children (Vulnerable Learner Reviews) – General and Community Paediatrics, MAST, Primary Mental Health Workers

## UNIVERSAL PLUS: Integrated support at local level

Integrated locality support teams based around schools - Ed Psych, Community Therapies, 0-19 service, Community Nursing, Healthy Minds

## UNIVERSAL: Core city-wide offer

Successful inclusive nurseries and schools, 0-19 service, Primary Care/GPs, promotion of healthy lifestyle

We are seeking to develop a shared outcomes framework that follows from the Inclusion Strategy, once finalised and approved. The phrase in the strategy that every vulnerable learner in the city is “safe, settled and ready to learn” could be combined with some simple overall performance measures that we as a city, and every service within the city, could align around in our outcomes, commissioning intentions and monitoring.

Our commissioning intentions link to the above model as follows:

### Universal

Commissioning in this area is intended to support:

- Strategic leadership and a shared vision across providers/services
- Clarity, consistency and shared accountability of processes and tools including routes to flag and raise issues within the system
- Increased ability of mainstream education settings to be inclusive through training & support to embed inclusive practice and environments in the everyday offer

Some examples of current and developing commissions in this space:

- Education sector leadership for Inclusion & SEND: A leadership and delivery team to include Headteacher leads for inclusion gateway,

locality SEND funding, and inclusion, Inclusion & SEND School Improvement Partner, and five citywide SENCO roles.

- Community Nursing: Development of community nursing service, including health input into schools
- Consistent training, support, and toolkits for schools across the four areas of the SEND code of practice
- Trauma-informed schools and settings: Develop a shared understanding and core training offer to create a trauma-informed education system across the city

#### Integrated Support Offer: Universal Plus/Early Help/Targeted Support

Commissioning in this area is intended to support:

- Increased ability of mainstream education settings to be inclusive through early integrated identification and external support/funding for children with additional needs
- Pupils with additional needs in mainstream schools are safe, settled, and ready to learn
- Stabilising of the current increase in demand for specialist education and services
- Fast and appropriate support for pupils at points of crisis

Some examples of current and developing commissions in this space:

- Locality SEND Funding: Increase top up funding for SEND learners in mainstream schools from £2.1m per year to £3.4m. Using improved data through Sheffield Support Grid to enable consistent targeting of funding to pupils through localities.
- Increased and consistent external support offer to schools across the four areas of the SEND code of practice
- Mentoring Support: A support offer to create trusted, lasting relationship with vulnerable learners and their family, working with partners to ensure that delivery is consistent and tailored to each individual
- Family/ Parenting: Priority areas for 2020 development of the parenting offer are targeted support to families with SEND; Sleep; Parental Conflict; Support to schools

#### Specialist

Commissioning in this area is intended to support:

- Increased specialist provision closer to home
- Bespoke/person centred access to mainstream curriculum where appropriate
- Sufficient and successful special school places
- Greater clarity and outcomes focus on pupils accessing the independent sector
- Young people with SEND achieving their potential and moving on to fulfilled lives beyond education

Some examples of current and developing commissions in this space:

- Integrated Resources & Hubs: Grow from 200 to 270 places – growth in primary integrated resources places and secondary special-led hubs based in mainstream schools
- Special School Places: Increase existing capacity for secondary (focus on communication & interaction needs and Cognition & Learning), primary (focus on communication & interaction needs), alongside the development of two new special schools
- Post-16 health provision: Describe existing post-16 provision, identify and address gaps and develop clear and smooth transition pathways and processes between pre- and post-16 services
- Post-16 care offer: Develop more flexible packages to complement a 3 day education offer and support successful transition beyond education

### **2.3 CCG developments and responses**

The inspection and subsequent action plan identified a number of areas for improvement in relation to CCG commissioning (in addition to that described above) and health service provision. The following provides a brief update on progress against those actions:

#### *Strategic Oversight*

Governance arrangements and data flows have been significantly strengthened within the CCG, with regular SEND updates being received by Governing Body and its sub-committees such as Strategic Patient Engagement, Experience and Equality Committee. SEND is referenced in the CCG's draft commissioning priorities for 2020/21 and CCG representation has formed part of the core membership of the Inclusion Strategy Development Group.

The CCG has also increased its clinical oversight by appointing a Designated Clinical Officer (DCO), who is a registered children's nurse by background. The Designated role has been increased from what was previously a 2 day per week post up to 5 days per week.

#### *Service Specifications and Key Performance Indicators*

The CCG has established a rolling programme of service specification development to ensure that all commissions have robust descriptions and performance monitoring arrangements in place to support effective contract management processes. In some cases, where the need for service development and/or improvement is indicated, a full service review project has been initiated. This involves undertaking a more detailed and in-depth approach to the commissioning cycle of assessing need, reviewing existing service delivery, implementing new service delivery and then reviewing on an ongoing basis. This work has already been started for Speech and Language

Therapy, Occupational Therapy and Physiotherapy and further work is planned for next year.

#### *Health input into the Education Health and Care Plan (EHCP) process*

The CCG have commissioned 2 new posts into the SEND Statutory Assessment and Review Service (SENSARS) team – one administrative and one clinical. The clinical post will have a role in supporting the Designated Clinical Officer in coordinating, monitoring and quality assuring both the health information that goes into plans and also the delivery of the health provision as set out in the plans. This will help to strengthen quality assurance processes and ensure that the information contained within plans is sufficiently detailed, built around needs and contains the voice and aspirations of the child or young person. It will also ensure that provision detailed within plans is being appropriately delivered so that children and young people have their needs met.

The Designated Clinical Officer (DCO) now sits on a number of panels and decision making committees and can provide health advice, input and direct access where required to health services and processes. The DCO has also started a programme of training and development with health service staff to ensure they have the right knowledge and support to effectively contribute to the EHCP process.

#### *Priority Service Areas for Improvement*

Particular service delivery issues were highlighted with long waiting times for the Autism Assessment and Therapy Pathway (delivered at Ryegate Children's Centre), Child and Adolescent Mental Health Services (CAMHS) and Wheelchair and Specialist Seating Service.

Commissioning arrangements for the Autism pathway will transfer from NHS England to the CCG in April 2020. This will enable a local, more joined up approach to commissioning autism services in the city, working closely with education and social care. In anticipation of this, the CCG have already worked with the service provider to develop an action plan to reduce existing waiting times and look at future models of service delivery.

The CCG has recently commissioned a new service to provide training and support for sensory needs, which are often associated with autism spectrum conditions. This builds on the pilot project delivered in Locality C and will provide training for all schools and Special Educational Needs Coordinators (SENCOs), as well as support to make the education environment autism and sensory friendly and workshops for teenagers to help them manage their own sensory needs.



Referrals continue to increase for CAMHS and there is a large, ongoing programme of work to support the service and reduce waiting times. The CCG has invested additional funding into CAMHS and examples of actions the service provider is taking include recruiting additional staff, undertaking weekend clinics, undertaking telephone assessments and looking at new models of staffing and service delivery.

Considerable work has taken place with the team at Sheffield Teaching Hospitals to address issues in the Wheelchair and Specialist Seating Service. There is now a detailed service specification (in line with the national model service specification) and monthly performance monitoring arrangements in place. The % of children waiting <18wks for a wheelchair or specialist seating for was reported as 75.9% in September 19. However, there has been a general issue about data quality so the CCG is continuing to work with the provider to address this. We are still collectively aiming for 92% of children and young people to wait less than 18 weeks by April 2020.

#### *Joint Commissioning Arrangements with the Local Authority*

In addition to the work on commissioning set out above, there are several projects where progress has already been made in terms of a joint approach between the CCG and Local Authority, including:

- The CCG has contributed financially to the SEND engagement contract
- The CCG and LA have jointly funded and commissioned a project to update managing health needs in schools guidance and scope what future health delivery in schools should look be

Work has also commenced to align the CCG's 2020/21 commissioning intentions with Sheffield City Council 2020/21 plans across both adults and children's services. This will result in identification of which intentions align within the aims of Joint Commissioning Committee. The expectation is that this will result in a jointly owned commissioning plan for 2020/21.

### **3 What does this mean for the young people of Sheffield?**

Sheffield children will have a more fit for purpose system across Education, Health and Care to ensure that their additional needs are effectively met in a timely manner

### **4. Recommendation**

The committee is asked to consider the update on progress made

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