

# Developing outcomes for young people - towards best practice

An advice tool for professionals and parents involved in writing outcomes for education, health and care plans

## What is an outcome?

The SEND Code of Practice (2014) refers to an outcome as follows:

**“An outcome can be defined as the benefit or difference made to an individual as a result of an intervention.” (Section 9.66)**

Outcomes provide a new opportunity for everyone involved in contributing to new Education, Health and Care (EHC) Plans to plan realistic and appropriate steps needed to achieve longer-term aspirations. They can help to describe the specific things that a child or young person will need to do in the short and medium term in order to help them meet these aspirations.

This new approach to writing and devising outcomes is very different from the previous target system used when reviewing the former statements of special educational need, so it's important to ensure that everyone involved in contributing to these outcomes is aware of how to write and monitor good outcomes. We hope the information over the following pages will help to foster a culture for writing and maintaining appropriate outcomes across Kingston and Richmond. Outcomes are written **with** the child or young person and their family in equal partnership. The new approach places the child or young person at the centre and it is their aspirations and needs which drive the outcomes.

Although outcomes are not a description of provision or service, they should link closely with provision referenced in the EHC Plan. Outcomes are recorded in Section E of the EHC Plan and should link to identified needs (Sections B-D) and provision (Sections F-H of the plan). Sections F-H detail the provision required to support the agreed outcomes. These sections are designated for education, health and care respectively.

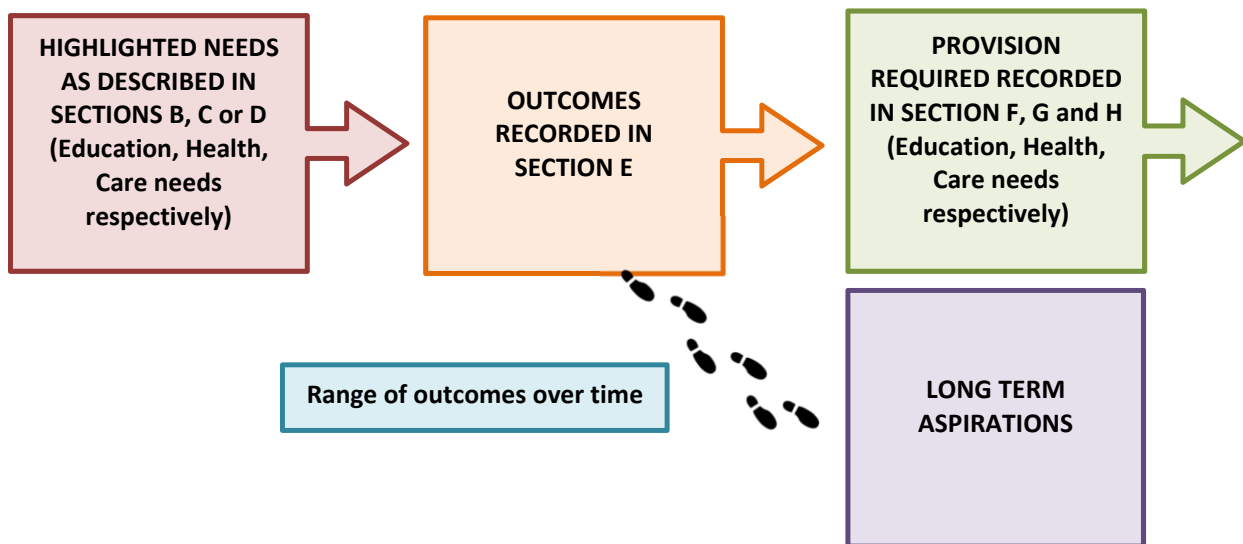
## What makes a good outcome?

A good, person-centred outcome could be described as something that:

- develops and builds on something that is working well
- makes changes to things that are not working well helps a child or young person to make small steps towards future aspirations
- is ideally based on the ideas of a child or young person and articulated from a young person's perspective rather than a service perspective
- can be influenced or shaped by the actions of a young person (i.e. a child or young person owns the outcome and actively contributes towards its implementation)
- is SMART in the way it is written and intended (**S**pecific, **M**easurable, **A**chievable, **R**ealistic, **T**ime bound)

## Why do we use outcomes?

As well as providing opportunities to work towards longer-term aspirations, outcomes help to provide the link between identified needs and provision required as shown below:



The SEND Code of Practice explains the importance of agreeing a range of outcomes over varying timescales and across all areas of education, health and social care as appropriate. It is sensible to therefore agree outcomes to be achieved:

- within a 12 month period
- by the end of a Key Stage
- by the end of an education phase (i.e. end of primary phase before secondary phase)

A good starting point for planning outcomes is to look at the needs (Section B) of a child or young person.

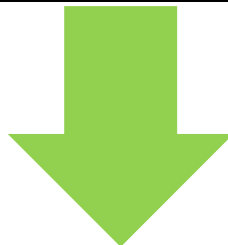
**Communication and interaction:**

**Strengths:** Jacob has a keen interest in reading and in particular enjoys reading his Doctor Who magazines and annuals. This particular topic of interest has provided an opportunity for find common interests with other pupils. He listens well to instructions given both in and outside class...

**Special educational needs:** Jacob has a diagnosis of High Functioning Autism, consistent with traits of Asperger’s Syndrome. He has difficulties with using expressive language and finds it difficult to interact appropriately with other students, particularly at break and playtimes...

Knowing that Jacob’s (current Year 2) main area of need revolves around social communication, it may be appropriate to prioritise outcomes relating to this particular need:

SEN (SECTION B)	OUTCOME (SECTION E)	PROVISION (SECTION F)
<p>Jacob is in Year 2 has significant difficulties with language, both in understanding what others say and in using speech himself.</p> <p>He needs to develop the use and understanding of spoken language.</p>	<p><b>By the end of Year 2, I will ask and answer more questions (once a lesson) when I talk to my friends and adults</b></p>	<p>A language programme delivered for a minimum of 15 minutes each day individually. The programme will be devised by a speech and language therapist (SaLT).</p>
	<p><b>By the beginning of Year 4, I will choose sensible activities every break and lunchtime so that I enjoy my playtimes with others</b></p>	<p>At least one weekly session will be taught by Jacob’s teacher. The remaining sessions will be delivered by a TA who has received training from the SaLT.</p>
	<p><b>By end of primary school, I will be able to start conversations with my friends and teachers, describing the things that matter to me.</b></p>	<p>The SaLT will monitor Jacob’s progress and review the programme once each term, which may include:</p> <ul style="list-style-type: none"> <li>• joint target setting with school staff</li> <li>• evaluation of programme with school staff and Jacob’s parents</li> <li>• demonstration of activities or strategies observation in class.</li> </ul>



**ASPIRATION**

To enjoy access to the mainstream curriculum into secondary and further education, being able to confidently express and understand language

To gain a range of qualifications to be able to work and live independently

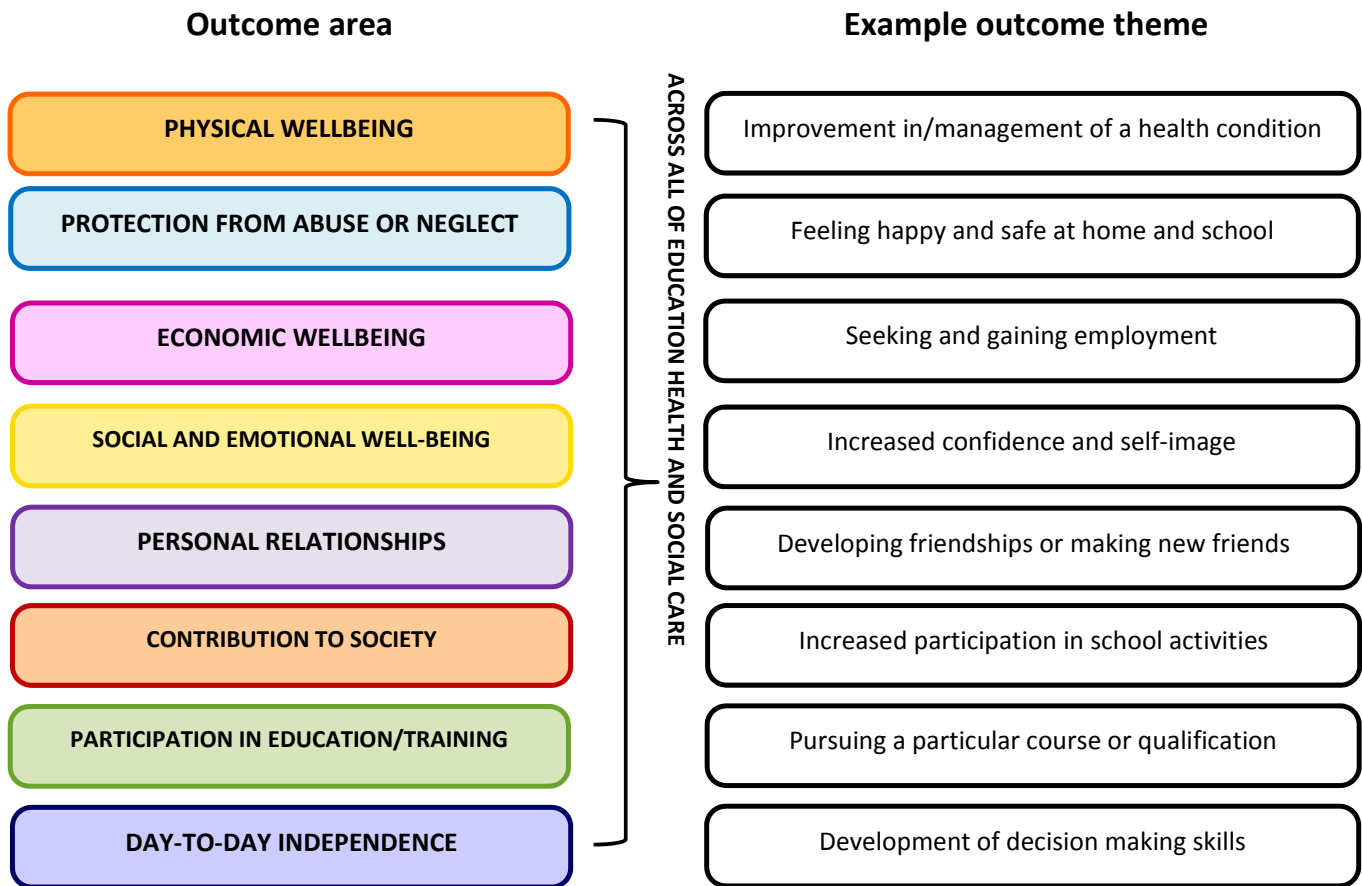
You'll notice that the three suggested SMART outcomes cover short, medium and longer term objectives and also link to Jacob's longer-term aspirations. Suitable outcomes which build upon the challenges Jacob faces can help to plan the most appropriate aspects of provision required to meet Jacob's needs.

The current AfC EHC plan template is flexible. The number of outcomes decided upon will depend very much on the needs of the child or young person at the centre of the plan, the time at which the plan has been written and how this relates to an overall time-plan of meeting long-term aspirations. In addition, aspects of the plan may change over time, including longer-term outcomes and aspirations depending on the changing needs of the young person.

### **What might be included within the scope of outcomes?**

Outcomes can be sought in areas relating to a child or young person's education, health or care needs. In addition, the government has stated that, from the age of 14, outcomes must focus on helping someone to prepare for adulthood, specifically, preparing for independent living, finding employment, and accommodation. This means that from Year 9 (age 14) the young person's views must be explicitly sought, that their 'voice' is clear. While these categories set a particular scope for outcomes to be considered under, it is important that families do not feel limited in the breadth of areas that outcomes can cover.

The diagram below suggests a non-exhaustive list of possible outcome areas with some examples of outcome themes:



## What is the best way to word outcomes?

Writing and wording outcomes isn't a science, but there are some good starting points. Keep in mind all the time that outcomes really are the filling of the EHC Plan sandwich, linking a young person's needs and the provision and aspirations sections of the plan. In addition, all outcomes should be SMART in nature.

<b><u>S</u>pecific</b>	Is the target explicit and does it include the appropriate amount of detail?
<b><u>M</u>easurable</b>	Can the target be measured or quantified?
<b><u>A</u>ttainable</b>	Can the target be easily influenced by the young person?
<b><u>R</u>ealistic</b>	Is the target appropriate given ability, age, context etc...?
<b><u>T</u>ime-bound</b>	Is there a time frame attached to the target?

The questions provided alongside each prompt of the above SMART target structure can help colleagues to refine and improve outcomes as they are formed. Planning outcomes before a meeting takes place will help to steer conversation during the meeting. Ideally these should reflect co-collaborative practice so might be generated and shared in the run-up to the meeting between parents, the young person and school. Many schools across Kingston and Richmond are beginning to use structure to planning and writing outcomes as follows:

**“By the end of** Year 10, **I will** have improved my reading skills **so that** I can enjoy reading more and understand information in lessons when things are written down.”

Each section of the above outcome ensures that the outcome closely maps the SMART agenda:

- **‘By the end of...’** ensures the target is time bound and can be changed to reflect end of term, year, phase as necessary for each outcome generated.
- **‘I will...’** identifies a skill to be improved and relates to what the young person actually wants to do or change.
- **‘...so that...’** explains why a target is being set (should relate to an identified need or difficulty).

Some professionals may decide to record outcomes on service-based documents, making them more specific to the context. For example, the example of the above outcome might suit everyone involved for the purposes of an EHC Plan, but a school might require something more specific to share with teaching and support staff:

“By the end of Year 10, Jessica will have improved her reading skills (reading age of 12.0) so that she will enjoy reading more and access more information in lessons when things are written down in lessons with a high-literacy content.”

The sentiment remains the same in this outcome but might be better understood in a different format for school target documents to be used between staff. Education, health and social care professionals should decide if they wish to record the outcomes in service-centred documents following an EHC Plan transfer or review meeting, being careful not to change the meaning of the agreed outcomes.

### **Are there any dos and don'ts?**

Yes - although it can be tricky trying to get the right style of writing in when forming outcomes, there are a few things to bear in mind.

- Only write in the first person if the words and language used are formed by the young person themselves. If changes need to be made to the wording of the outcomes for any reason, these should ideally be referenced (perhaps show the refined language in a different colour, as long as this is agreed by the young person).
- Try to ensure that each of the student's special educational, health or social care needs are addressed through an individual outcome and that these cover a range of timescales.
- Always check and review the targets against SMART criteria once they have been drafted.
- Aim to use the views of the young person or family as recorded in Section A of the EHC Plan to ensure that the most important opinions are taken into consideration when planning outcomes.

## How do we develop person-centred outcomes?

So as to ensure that outcomes link between needs and overall aspirations, it's important to develop them through three planning stages:

### Agree

- Do we know what the child's or young person's future aspirations are?
- Do we know about the things that matter to the young person? Do we know what a good day and bad day look like?
- Do we know what is working well at the moment and what is not working well?
- Has the child or young person expressed this themselves, or has someone else expressed this on their behalf (and if required, with their permission)?
- How will agree to show the difference between views from the young person and views from others (i.e. difference between things that are important for or to me).

### Adapt

- Do we know how to address the current challenges? Do we know how to overcome these challenges?
- Do we have ideas for possible outcomes? Can we test them to see if they are good outcomes?
- Do we know what the barriers to achieving these outcomes might be?
- How has the child or young person contributed to this discussion?

### Action

- Have we agreed SMART outcomes which vary in timescales and encompass areas of education, health and/or social care?
- Do we know how we are going to implement the outcomes?
- Do we know how we will review the outcomes?
- Does the child or young person agree?

Templates (Appendix 2 and 3) can be used at each stage to help record any conversations between children, young people, their families and professionals, then test each of these outcomes before these are recorded in the agreed EHC plan.



## Are there any model examples of outcomes?

SEND – Communication and interaction		
EHC NEED (SECTIONS B,C & D)	OUTCOME (SECTION E)	PROVISION (SECTIONS F, G & H)
James has a diagnosis of asperger's syndrome. He has difficulties understanding language and needs additional help and guidance with social interaction skills, attention control and flexible thinking. James has difficulties relating to changes and at these times, he demonstrates increased levels of anxiety. Needs to be reminded to put hand up in class - can be over anxious and call out.	By the end of Year 8, I will put up my hand in class once a lesson so that I can be confident in sharing my ideas and improve my social skills when working with others.	Weekly social skills session (One hour a week)
	By the end of Key Stage 3, I will move from one lesson to the next without support so that I can become more confident about moving around the school independently.	Access to a learning support mentor to meet with every morning
		Access to break and lunchtime haven in Learning support base
		10 hours support a week

SEND – Physical and sensory		
EHC NEED (SECTIONS B,C & D)	OUTCOME (SECTION E)	PROVISION (SECTIONS F, G & H)
Samuel suffers from severe visual impairment. Unfortunately, the operations to his right eye have been unsuccessful which left him no vision at all in his right eye and significant visual Impairment in his left eye. Samuel also suffers from nystagmus in his left eye, causing an involuntary rapid movement of the eyeball, resulting in blurring of what is seen. His vision will be further reduced when he is tired, under stress and also in an unfamiliar environment.	By the end of Key Stage 2, I will choose the best equipment to help me access work in lessons (from a range of resources), including reading resources, so that I can be more independent in class.	Provision of iPad and/or laptop in lessons with a high literacy content for word processed work.
	By the end of Year 5, I will track text more accurately (up to 20 words a minute), making use of my iPad to assist with text speak-back so that I can read more challenging and longer texts.	15 hours support a week with full support in all physical and practical curriculum areas.
		Enlarged copies for all work and assessments
		Termly presentation to staff about needs
		Termly visit from HI advisory teacher
		Access to reading aid or voice recorder for all assessment work

SEND – Cognition and learning		
EHC NEED (SECTIONS B,C & D)	OUTCOME (SECTION E)	PROVISION (SECTIONS F, G & H)
Katie has severe dyslexia and therefore struggles with literacy and lacks the ability to retain information. She struggles with remembering sequences of instructions. She is a sensitive girl but rarely shows emotion. She feels intimidated by bigger groups. She doesn't want to stand out as being different or people knowing that she has difficulty with literacy-based activities. She will need differentiated work in any lesson involving a high-literacy content. She lacks organisation and is best seated at the front of the class.	By the end of Year 10, I will communicate my ideas using ICT, improving my touch typing skills, in all lessons and assessments so that my work can be understood more easily.	Exam access arrangements (25% extra time and withdrawn to a smaller examinations rooms)  Use of word processor in class  Use of coloured overlays and reading rulers in lessons  One bi-weekly session with SpLD teacher on literacy programme (four hours a half term).
	By the end of Key Stage 4, I will improve my handwriting and pencil control so that I can complete short, every-day writing tasks (shopping lists, notes) so that I am not worried about what others might think of me and my English difficulties at college.	

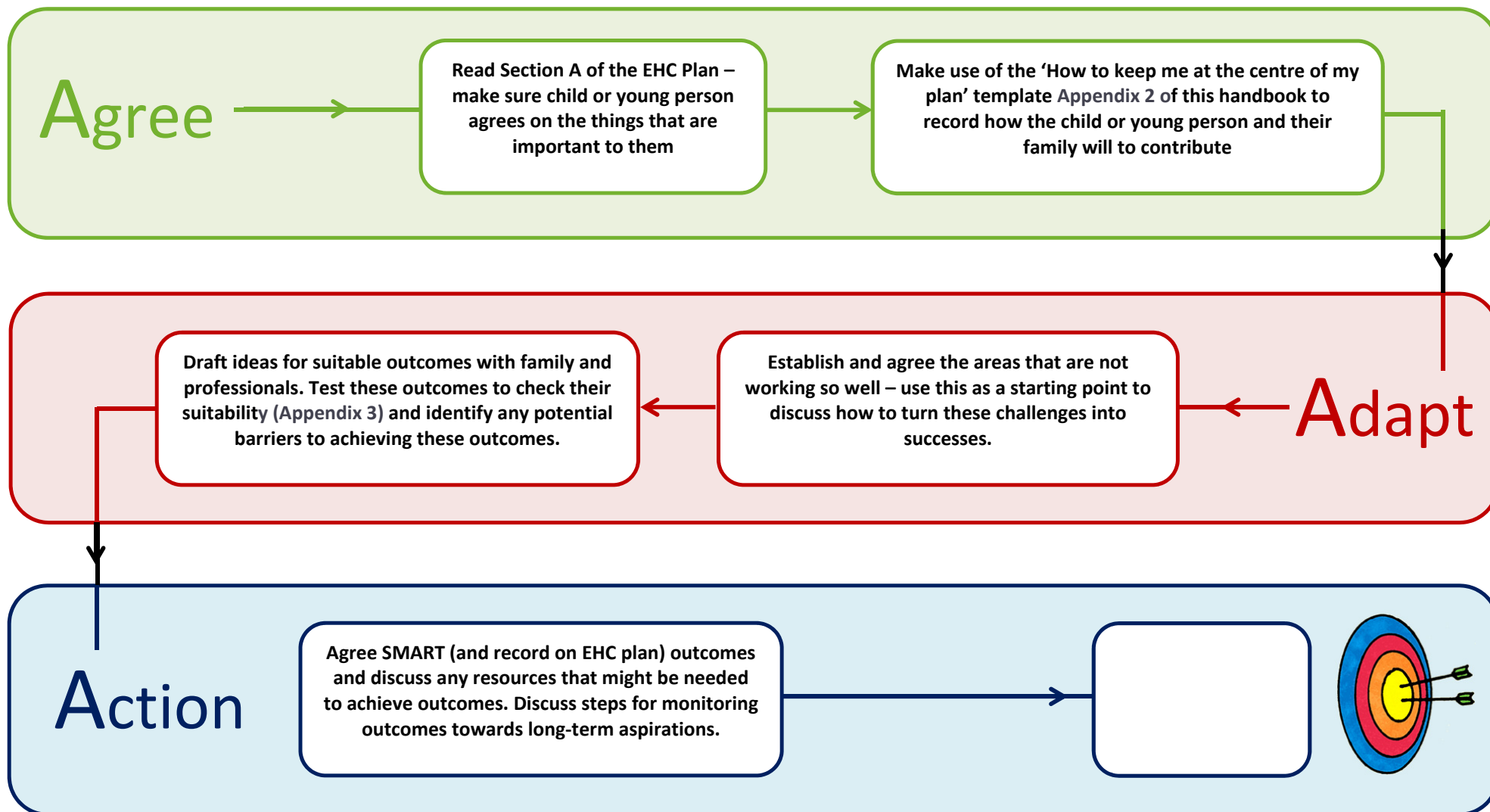
SEND – Social, emotional and mental health		
EHC NEED (SECTIONS B,C & D)	OUTCOME (SECTION E)	PROVISION (SECTIONS F, G & H)
Slow progress, especially in literacy-related areas. Concerns revolve around Tyler's emotional wellbeing and his motivation to engage with learning. Tyler's behaviour in lessons is not always appropriate and he finds it difficult to communicate his feelings in an appropriate way (shouting, swearing, physical). Vulnerable. Mum is supportive of the school but does not always reinforce expectations at home. Tyler has a major organisational need and will need support with this. He should be encouraged to attend homework club daily.	By the end of Year 5, I will know and use different strategies to help me calm down (with support if needed) every lesson so that I can start tasks without being angry or frustrated.	TA support in during mornings (15 hours a week)  Group Literacy Support  One weekly session of Read Write Inc. phonics catch-up
	By the end of Key Stage 2, I will be quicker at calming down and talking things through with an adult so that can enjoy a fresh start when I move to secondary school.	

<b>Social care</b>		
<b>EHC NEED (SECTIONS B,C &amp; D)</b>	<b>OUTCOME (SECTION E)</b>	<b>PROVISION (SECTIONS F, G &amp; H)</b>
	To be completed	

<b>Health</b>		
<b>EHC NEED (SECTIONS B,C &amp; D)</b>	<b>OUTCOME (SECTION E)</b>	<b>PROVISION (SECTIONS F, G &amp; H)</b>
Occupational therapy	By the end of six months, I will be able to jump up and down on the trampoline 10 times without adult support so that I am better able to manage sensory input and can focus on activities in the classroom	Occupational therapy programme Support in school
Occupational therapy	By the end of four months I will be able to balance on a wobble board for four seconds without adult support within three months so that I can begin to participate in PE lessons	Occupational therapy programme Support in school
Occupational therapy	By the end of 12 weeks I will be able to use my right hand to hold the paper steady whilst I am writing so that I am able to participate in producing written work without support	Occupational therapy programme Support in school
Physiotherapy	By the end of 12 weeks I will be able to walk to lunch unaided on a daily basis in school so that I can participate in lunchtime routines	Physiotherapy programme Support in school
Physiotherapy	By the end of the school year I will have maintained xx range of movement in xx joint so that I am able to maintain my participation in sitting on the floor at carpet time	Physiotherapy programme Support in school
Physiotherapy	By the end of three months I will be able to walk across the pool independently in a hydrotherapy session so that I can use my walker on land to get between classes without my chair	Physiotherapy programme Support in school

Nursing	My epilepsy will be managed by those around me according to the care plan so that I feel safe to attend school	Nursing
Nursing	Over the next three months I will have been fed comfortably and successfully through gastrostomy feeds so that I receive the nutrition and hydration I require and achieve an appropriate weight	Nursing
Nursing	I will be able to perform the clean intermittent catheterisation independently so that I can attend residential school trips next year and maintain my privacy and dignity as I move through school years	Nursing
Audiology	I will become independent in looking after my hearing aids, understanding what settings I need to use depending on the environment so that I can access all areas of the curriculum independently	Audiology Hearing Support Services
Pain	I will be able to express when I have pain in a way which is understood by those around me so that I am comfortable and able to access the curriculum in school	Paediatrics Speech and language therapy School
Mobility	I will be able to move around school with support in a suitable wheelchair for my needs so that I can access all curriculum areas	Wheelchair Services
Postural management	I will be supported to sit in a safe and supported way and with the appropriate equipment so that I can maintain good health and participate in all curriculum areas comfortably	Orthotics Physiotherapy Wheelchair services

## Appendix 1 - Planning suitable outcomes



## Appendix 2a – Pupil templates

**Which parts of section A are the most important to me?**

**Which parts of section A are the most important for me?**

**What will my SMART outcomes do for me and/or give me?**

**What will my SMART outcomes make possible for me?**

**How will I know when I have succeeded?**

## Appendix 2b

What makes a good day for me?



In school...

At home...

Somewhere else...

What makes a bad day for me?



In school...

At home...

Somewhere else...

## Appendix 3 – SMART reference

“By the end of Year 9, I will be able to talk with friends and adults (and start conversations) so that I can be understood well and communicate my ideas clearly.”

<b><u>S</u>pecific</b>	Is the target explicit and does it include the appropriate amount of detail?
<b><u>M</u>easurable</b>	Can the target be measured or quantified?
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