

Richmond upon Thames SEND Futures Plan 2021/22 to 2025/26

March 2021

DRAFT UPDATE

(The SEND Futures Plan is Richmond's Dedicated Schools Grant Deficit Management Plan)



**achieving
for children**



*LONDON BOROUGH OF
RICHMOND UPON THAMES*



**South West London
Clinical Commissioning Group**

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Note:

- a. The financial model relating to the Dedicated Schools Grant (DSG) Deficit Management Plan will be at Annex 1 when finalised with the Department For Education.
- b. The SEND Futures Plan has a set of Key Performance Indicators (KPIs) that is monitored by the SEND Partnership Board using a quarterly dataset and performance dashboard. This dashboard will be updated to reflect this update. When completed it will be included as Annex 2. Some of these KPIs may change over time, for example when contractual arrangements with commissioned services are updated and improved.

1. Introduction

This transformation programme, our SEND Futures Plan, sets out how we, as the main providers and commissioners of services for children and young people with Special Educational Needs and Disabilities (SEND), will work with children, young people and their families to improve our services on a continuous basis, within the financial resources available to us. This plan is an updated version of the SEND Futures Plan originally agreed by the Council in [July 2019](#).

Some key differences between this version of the plan and the original are:

- a. Since July 2019, considerable progress has been made with increasing the quality of several aspects of Richmond’s SEND system, and in more fully implementing the SEND Reforms contained within the Children’s and Families Act 2014. This updated plan takes these changes into account, focuses on those areas that have not made as much progress and that require additional work, and sets new targets to maintain the momentum of improvement.
- b. The financial resources provided for SEND services by the Government remain insufficient to provide appropriate and effective support to children and young people with SEND in Richmond and for the Council to meet its statutory duties. Since July 2019 the overspend on Richmond’s Dedicated Schools Grant (DSG) has continued to grow. This new plan provides an update on the actions being taken to bring expenditure more in line with the resources available.
- c. The insightful and helpful recommendations made by the [“SEND Peer Challenge”](#) commissioned through the Local Government Association and carried out in September and October 2019 have informed the content of this updated plan. Similarly, matters relating to the [Local Government and Social Care Ombudsman Report](#) published in January 2020 and the resulting [action plan](#) finalised in November 2020, are also included. The plan represents therefore a single point of reference for what were previously three strands of work.
- d. Since the original Plan, Parliament’s Education Committee’s [Special educational needs and disabilities inquiry](#) and the National Audit Office’s report on [Support for pupils with special educational needs and disabilities in England](#) have been published. A national major review into support for children with special educational needs has also been undertaken (though not yet published). There is consensus that the changes required will take longer time to implement and that additional money needs to be provided by the government to local authorities for them to meet their statutory duties. For this reason the new plan adopts a five year horizon rather than the previous three, and discussions relating to funding continue with the Department for Education. Whilst the recent increases in Richmond’s High Needs Block allocations are extremely welcome, the allocation remains significantly below the actual cost of Richmond delivering its statutory duties.

2. Our Vision

A child or young person (up to the age of 25 years) has a Special Educational Need¹ or Disabilities (SEND) if they have a learning difficulty² or disability³ which calls for special educational provision to be made for him or her.

Richmond's vision is that:

Every child and young person with SEND belongs to a local, inclusive community that provides the education, health and social care support they need to develop their talents and skills, and that empowers them to live a happy and fulfilling life.

For this to be the case, their special educational needs and disabilities need to be identified at the earliest point, support put in place quickly, and their parents and carers kept well informed about the services available. The aspirations for children and young people can be raised through an increased focus on life outcomes, including employment and greater independence.

Our shared principles guide how we will make decisions and work to achieve our vision:

- **Co-production.** Children and young people and their parents or carers must be fully involved in decisions about their support and what they want to achieve. They must also be listened to and **engaged** in the design and delivery of strategies, services and the support provided to them. Children and young people have a right to say what they think, have their opinions taken into account and be involved in decisions and planning around their own lives. In the vast majority of cases parents and carers know their children better than anyone, and it is essential that their views and knowledge are incorporated in decisions being made about their child. Parents and carers must be kept well informed about the services that are available to their families.

¹ A pupil has a special educational need where their learning difficulty or disability calls for special educational provision, namely provision different from or additional to that ordinarily available to pupils of the same age

² A learning difficulty is when a person has a significantly greater difficulty in learning than the majority of others of the same age

³ A disability is when a person has a physical or mental impairment which has a long-term and substantial adverse effect on their ability to carry out normal day-to-day activities

- **Personalisation. Local provision** is expanded and improved so that children’s education, health and care needs can be met locally through high quality services that are focussed on achieving the best possible outcomes for children and young people with SEND, promoting their **independence** and supporting them to live their lives with confidence and resilience.
- **Integration.** The **whole system**, with education, social care and health services at the core, works together and with families to understand and respond to children and young people’s needs in a coherent way, with each partner contributing to robust assessments, plans and funding arrangements, and monitoring the impact of their services and support. There is a focus on working better together for children and young people with SEND who may also be vulnerable in other ways, including those who are looked after, missing education, excluded from school, or at risk of exploitation and criminal behaviour.
- **Quality.** Provision is high quality and delivered by well trained and supported professionals who work effectively together and use evidence to inform their work, **promote resilience** and achieve positive outcomes for children and young people with SEND; services that cannot demonstrate this positive impact are re-provided or re-commissioned.
- **Inclusion.** The community is supported to meet the needs of all children and young people by embracing diversity and **inclusion**, so that all children and young people with SEND have the same opportunity as their peers to play, learn and grow-up all together in their local community.

It is more crucial than ever that we all work closely together to make better use of our collective resources. We want families to experience the services they receive as genuinely joined up and sympathetic to their needs. Above all, we want every child and young person to have an experience that unlocks and nurtures talents, meets needs, and provides a solid foundation for a happy and fulfilling life.

Many children, young people, parents and carers have been involved in an ongoing conversation with us about the services they receive. Within the plan, there are examples of how the views they have shared with us have informed our priorities and actions. We want to continue that conversation, so that the plan evolves to reflect these views. We are committed to working with children and young people with SEND and their families in a transparent and honest way, to find creative and sustainable solutions so that we meet the needs of children and young people and respond collectively to the funding challenges we face.

This work has included the development of a multi-agency outcomes framework for supporting children and young people with SEND and their families in Richmond. Led by the CCG’s Designated Clinical Officer and AfC’s Associate Director for SEND and supported by the Council for Disabled Children, the six key outcomes are shown by the quotes below. As the framework is developed, it will help direct the work of all workstreams to make sure that services are all aligned in delivering the same shared vision.

Richmond's vision for children and young people with SEND includes them feeling that:

I am listened to and
people hear what I
have to say

I am safe, and my needs
are understood

I am as healthy as I can
be

I am as independent as
possible

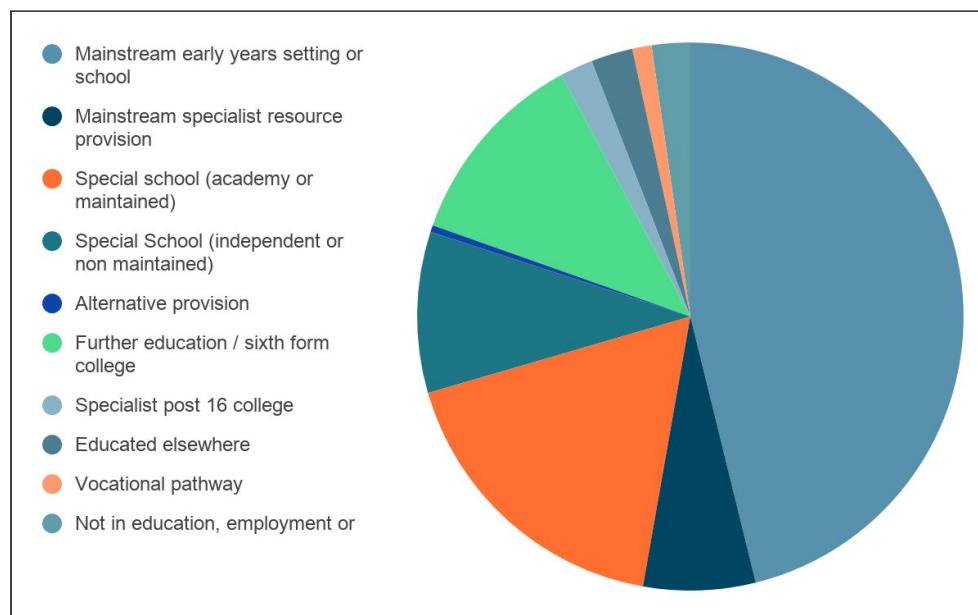
I am ambitious and
others are ambitious
for me

The people who love
and care for me are
supported

3. Special educational needs and disabilities in Richmond

Over 4,000 children and young people with special educational needs and disabilities live in or educated in the borough. About 1561 (January 2021) children and young people resident in Richmond have an Education, Health and Care plan (EHC plan) to describe the support that has been agreed is needed for their needs to be met. About 8% of these children and young people with EHC plans also receive support from children’s social care (a total of about 130, 36 being looked after, 24 having a child protection plan and 70 having a child in need plan). Just under 12% of children and young people at Richmond’s mainstream primary and secondary schools have SEND (8% of girls and 15% of boys), with about 2.7% having an EHC plan, and about 9% are registered for SEND Support. A disproportionately high number of young people supported by our Youth Offending Service have SEND.

The main presenting needs in Richmond’s EHC plans are: autistic spectrum conditions (34%), speech, language and communication needs (18%); and social, emotional and mental health needs (13%). Other needs include hearing impairment, moderate learning difficulty, multisensory impairment, physical disability, profound and multiple learning difficulty, severe learning difficulty, specific learning difficulty (such as Dyslexia) and visual impairment. Children and young people from Richmond with EHC plans receive their education or training in the following settings:



34 young people with EHC plans are completing apprenticeships, traineeships or supported internships.

The total number of EHC plans in Richmond increased by 35% between January 2016 and January 2020, a lower rate than for London and England, where over the same period growth was 51% and 52% respectively. During 2019 growth in Richmond was 9.2% vs 10.3% in Outer London and 10.2% in England. Over the twelve months to end November 2020, Richmond's rate of annual increase decreased to 3.5%.

The impact of the COVID pandemic on the severity of need relating to SEND remains uncertain. It is likely however that periods of disruption to the delivery of support interventions caused for example by the redeployment of NHS staff, increased absence from school due to periods of self isolation and the additional challenges that some learners with SEND face in accessing home learning may influence rates of progress. For those with an EHC plan, the annual review process will provide more information on this in the coming months. For those with and without an EHC plan, it is important that schools and colleges use the substantial amounts of "catch up premium" funding provided directly to them by the Department for Education to provide additional support to relevant learners. The impact of COVID on the content and number of requests for EHC needs assessments will also be monitored.

Many children and young people with SEND in Richmond achieve excellent outcomes and they and their families give feedback that they are happy with the support that they receive from education, health and social care services. We know from our regular conversations with children and young people that the majority are happy at their school and like the teachers and support staff who work with them. We also know that the portage, educational psychology and speech and language services are particularly valued by young people, parents, carers and professionals. Recent investments in early help support and new specialist places in mainstream schools have been welcomed. However we also know that too many families struggle to navigate a complex system and they can be frustrated at the time that assessments and provision can take to be put in place. Throughout this plan, we reaffirm our commitment to listening to, understanding and responding to the experiences that children, young people and families have of the local system; and to working together to make progress.

Children and young people with special educational needs and disabilities are supported by a huge range of individuals, service providers, commissioners and strategic planners, including their parents, families and wider communities; staff in nurseries, schools and colleges; volunteers and voluntary organisations who support, fund and run voluntary services, groups and leisure activities; as well as local public services: Richmond Council, Achieving for Children and organisations in the NHS, including: SouthWest London CCG; Hounslow and Richmond Community Healthcare NHS Trust; Central London Community Healthcare NHS Trust; Southwest London and St George's Mental Health NHS Trust; Kingston Hospital NHS Foundation Trust; Chelsea & Westminster NHS Foundation Trust; community pharmacies; and Richmond GPs.

4. Our financial context and ensuring value for money

The increasing number of children and young people with special educational needs, as well as the increasing complexity of those needs, has meant spending on SEND provision in Richmond has exceeded the grant from central government every year since 2012/13. Government has acknowledged that national funding for SEND is insufficient, and has provided additional funding for all local authorities. Whilst welcome, in Richmond's case the additional funding has made only a small impact on the difference between our income and expenditure.

Richmond's financial context must also be seen in the context of the COVID pandemic. The exact impact is not yet clear, but it is possible that demand for many statutory council services, including those that support SEND, will increase as a result. Although the Government has provided some additional funding in response to the increase in need from COVID already seen, it has not been sufficient, and there has been no additional funding for SEND. This may continue to be the case. The impact of COVID may make Richmond's financial position more challenging still.

	2017/18	2018/19	2019/20
	£m	£m	£m
High Needs Block Income	25.1	25.6	26.0
High Needs Block Expenditure	(28.1)	(29.8)	(30.9)
Other DSG Block underspend	0.80	1.20	1.0
In year total	(2.2)	(3.0)	(3.9)
Carry in	(5.8)	(8.00)	(11.0)
Cumulative overspend	(8.00)	(11.0)	(14.8)

The overspend, which is forecast to continue to grow in the current financial year and beyond, is now so large in scale that it is impacting on the Council's overall financial stability. The relevant Government departments are in ongoing discussions about a potential national legislative solution to stop shortfalls in SEND funding impacting on other council services. Some progress has been made over the last twelve months with the Government introducing a strengthened position regarding the ring fencing of education funding and associated deficits as well as a clear message that councils should not be subsidising education

services from non DSG sources of funding without the permission of the Secretary of State for Education. It is important that all partners continue to do everything possible to make best use of the funding that is available.

The Council is committed to meeting its statutory duties with regard to SEND. It will also continue to invest in services and infrastructure that reduce the amount and cost of current and future demand for statutory services. The impact that the growing DSG deficit is having on the council's financial viability can not however be ignored and so all opportunities to minimise expenditure on high needs education services, and maximise funding allocated to high needs education services, must be considered.

The funding gap is being tackled in three ways:

- The Council is committed to continuing to provide cash flow to protect high needs services but will also be proactive in campaigning for a more equitable level of funding,
- We will invest in local services to ensure that they are both high quality and cost efficient,
- We will challenge ourselves to ensure that our systems are as efficient and effective as they can be.

Increasing the level of funding

The Council recognises that the financial pressure being experienced on high needs education is principally due to an underfunding of these services at a national level. It is in this context that the Council continues to be proactive in lobbying Government for fairer grant levels and a funding system that adequately reflects the level of need and local statutory duty.

The Council will consider the budget for all education services alongside partners each year. It is important that in considering the annual budget that partners explore options to re-prioritise money between local priorities (both SEND and non SEND) and increase the budget available for SEND in the context of a rising level of need that is not matched by equivalent funding increases.

Investment in our local services

As part of this plan, local partners intend to invest locally to ensure that we have sufficiently skilled local staff and a good local infrastructure to support pupils achieve their potential. This should in turn make the funding we have go further through improving the efficiency of our local processes, improving how we use our local resources and reducing dependence on the independent sector. Partners are committed to ensuring that as much money as possible is spent locally by

our partners. The very challenging financial context highlights the importance of investing only after robust analysis of the likely benefits. Investment decisions will be reviewed periodically. Areas where investment may be considered are:

- Building engagement in and support for the transformation agenda across all partners and communities
- Developing processes to include the voices of children and young people with SEND and their parents and carers
- Improving our commissioning capacity to improve the quality and value for money of SEND services, including through better information collection
- Strategies to maximise independence such as independent travel training
- Preventive / early intervention approaches that prevent needs from escalating
- Supporting mainstream nurseries, schools and colleges to improve their practice in identifying and supporting SEND are pre EHCP level

Improving efficiency

Whilst it is important that the Council continues to challenge the national funding system it is also vital that steps are taken locally to ensure that the funding we do have is aligned to need and that we are achieving maximum value for every penny that is spent. This plan recognises that there are different ways of delivering services and that broadly speaking through having a high quality local offer, that is aligned to need, we can support more pupils with the level of funding that is available. Over the past three years actual HNB expenditure has been about £5 million less than it would have been without the actions taken under the SEND Transformation Plan. This equates to a reduction in the average cost of an EHC plan of about 4% in each of these years. However, to achieve a sustainable financial situation in the DSG and in the Council's wider financial plan, reduction in forecast expenditure or increase in income must rapidly increase very significantly.

The Deficit Management Plan Financial Model in Annex 1 includes information to enable partners to understand the current and potential future (based on forecast numbers of EHC plans) levels of financial situation within the High Needs Block (HNB) of the Dedicated Schools Grant (DSG).

The progress against achieving improved value for money will be monitored alongside the service performance indicators as improvements in both will all indicate that the system value and efficiency is moving in a positive direction. The indicators will need to be viewed as a collective to form a well rounded assessment of direction of travel and will be an important factor in determining whether the elements of this plan that focus on improved efficiency are being achieved. The assessment of success will be against the measures in the SEND Partnership Board Performance Dashboard and the Department for Education Deficit Management Plan.

Activities

The Council must consider all opportunities to maximise value for money whilst still meeting the needs of children and young people with SEND. The Council may decide not to pursue certain opportunities, but everything must be considered in order to make its financial position as strong as possible.

	Opportunity	Workstream
1	Lobby Government for more funding and / or a review of the funding formula for Richmond	SEND Partnership Board
2	In conjunction with Schools Forum consider the reprioritisation of Government DSG funding to align with an assessment of the cost of delivering education to different groups of children	
3	Where possible, pay for services currently funded from the High Needs Block of the Dedicated Schools Grant instead from the Early Years and Schools Blocks	
4	In conjunction with Schools Forum annually review how accumulated school cash balances arising from unspent past DSG allocations could be used to improve the position, and whether local arrangements for the treatment of school surplus revenue balances are appropriate	
5	Review the commissioning of support agreed within EHC plans and at alternative provision. This includes reconsidering the value for money of current “top ups” and “banding levels” paid to academy and maintained schools, and the cost of provision at independent and non maintained special schools. Both direct and regional commissioning approaches are to be considered (and are already being used) so that the needs of children and young people are met at the lowest cost.	Joint Commissioning
6	Continue to reduce the use of independent and non maintained special school placements, by meeting the needs of children and young people with SEND in local maintained and academy schools and colleges, including through additional multi agency initiatives for young people aged 16 to 25 years.	
7	Maximise the proportion of specialist education places in Richmond taken up by Richmond children	
8	Annually review Service Level Agreements with specialist resource provisions, including how unfilled places are funded	
9	Annually review funding of special school places where above the published admissions number (PAN) to assess value for money	
10	Systematically review long term placements outside the borough to seek alternative and cheaper delivery methods, across education,	

	health and care, that meet the needs of the children and young people with SEND involved within their local community	
11	Annually review protocols determining contributions to SEND from Health, Social Care (Children's and Adults) and Public Health, and ensure that expenditure is shared fairly and according to the SEND Code of Practice	
12	Annually review the number and type of specialist places for SEND funded through the High Needs Block	Local Provision
13	Annually review the use and value for money of Targeted High Needs expenditure	
14	Annually review the value for money of all other commissioned services funded from the HNB	
15	Annually review the requirement for and value for money of all Education Welfare and other outreach services funded from the High Needs Block	
16	Consider the merger and / or co-location of teams, such as through the creation of a multi-agency 0 to 25 years SEND team, to improve user experience and realise financial efficiencies	
17	Increase access to vocational training schemes and employment based pathways so that more young people aged 16 to 25 years maximise their independence and have their needs met through support funded from outside the DSG	
18	Continue to improve early intervention and other strategies used to enable children's and young people's needs to continue to be met within mainstream schools and post 16 colleges without an EHCP / financial support from the HNB	Early Intervention
19	Annually review the calculation of notional SEN funding	
20	Annually review the requirement for and value for money of all Early Intervention and support services funded from the High Needs Block, including whether additional investment in support without an EHCP would reduce total expenditure	
21	Annually review the delivery model, including the number and type of places funded through the High Needs Block, for Alternative Provision	
22	Annually review the use and value for money of funding provided to mainstream schools for supporting children and young people with SEND who do not have an EHCP (ie from their notional SEN budget)	
23	Ensure that criteria for agreeing to assess and agreeing to issue an EHCP are in line with the SEND Code of Practice	Assessment and Planning
24	Ensure that criteria for ceasing an EHC plan at Annual Review are in accordance with the SEND Code of Practice	

25	Ensure that improvements to the timeliness and quality of EHC plans result in better evidence to demonstrate how, where applicable, children's and young people's needs can be met within local maintained and academy provision, thereby reducing the likelihood of costly tribunal directed placements or provision	
26	Ensure that the programme of annual EHCP reviews leads to a provision for children and young people with SEND that meets their needs and is at the same time more cost effective	

The underfunding by Government of high needs education services is a well-recognised and escalating national issue and is not unique to Richmond. The Local Government Association estimates that the national funding shortfall will be up to £1.6bn by 2021. We cannot assume however that the Government will solve this problem, and need to do everything possible to deliver a local solution.

5. How we will work together

Transforming our local offer requires change in all parts of the SEND system in the borough. As service commissioners and providers, we need to change how we work as well as developing our offer. We must foster the active engagement of all stakeholders, including children and young people, families, voluntary sector organisations and service-providers, so that we are better able to work in a collaborative way. We all sign up to the following values to help us to maximise our chance of success, diagnose where problems are likely to occur, and identify those areas where we should share our learning, assets and resources to achieve the best possible outcome for children and young people.

Lead	We will focus on the outcomes we need to achieve, rather than on the specific interests of our individual organisations. We will mobilise the whole of our organisations to deliver the changes needed to work collaboratively and transform services.
Align	We will prioritise the shared use of our financial resources so that we achieve the best deals and maximise value for money. We will align our processes to reduce duplication and create joined-up pathways that make sense to children and families.
Engage	We will actively collaborate to plan, design and deliver services and will jointly own and apply the decisions we make. We will use our professional networks to ensure all stakeholders have an equal voice in the transformation of services.
Invest	We will share the risks and benefits of transforming services, including investing resources now to secure longer-term rewards. We will invest in our workforce so that they have the capabilities needed to deliver quality and financially sustainable services.
Innovate	We will support and constructively challenge each other to generate new ideas and creative solutions to the challenges we face. We will evaluate the impact of our transformation and proactively share our learning and the opportunities it provides.

6. GOVERNANCE ARRANGEMENTS

To deliver the outcomes specified in the plan, robust governance arrangements are in place that seek full engagement from all partner organisations and promote constructive debate, scrutiny and challenge. The Richmond Health and Wellbeing Board strategically oversees the delivery of the plan as it is the forum where leaders from the local health and care system work together to improve the health and wellbeing of the local population.

To drive the progress of the plan, the SEND Partnership Board will continue to be chaired by Richmond Council's Director of Children's Services. The Partnership Board brings together senior leaders from the services responsible for delivering the activities in the plan; parent and carer representatives; headteachers; health and social care provider representatives; and voluntary sector organisations. Children and young people with special educational needs and disabilities contribute to the Board's work supported by a participation officer from Achieving for Children. The SEND Partnership Board is responsible for ensuring effective engagement from all stakeholders, including families, so that the detail of the plan is informed by their views and the likely impact of change.

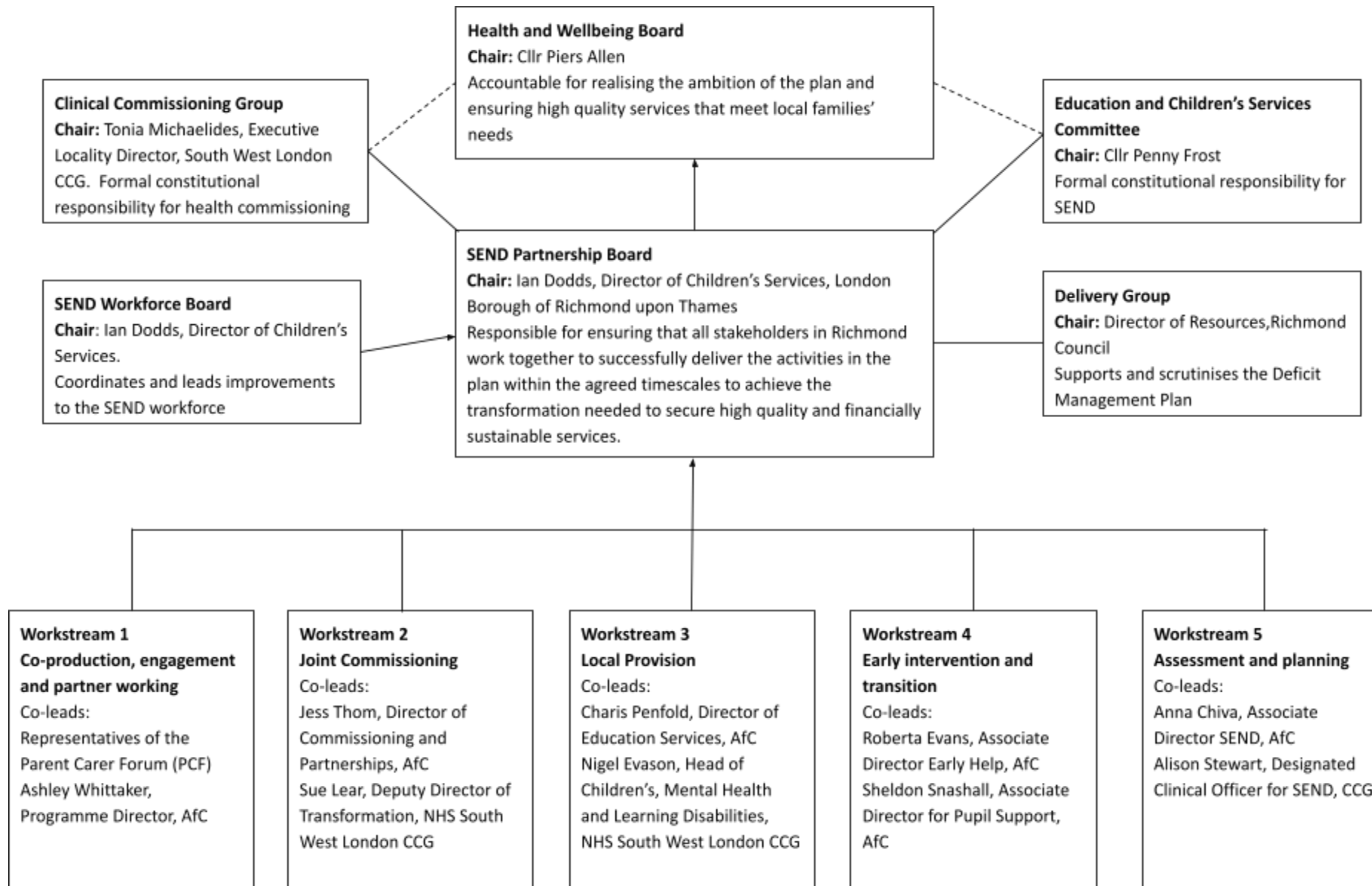
The SEND Partnership Board meets every two months and is accountable to the Health and Wellbeing Board (HWB) for the successful coordination and delivery of the plan. Individual partner organisations will remain subject to their own governance arrangements in relation to the activities allocated to them in the plan, particularly where these require policy changes. For the Council and Achieving for Children, this will be the Council's Education and Children's Services Committee (due to the importance and profile of the SEND agenda in Richmond it is a standing item at every meeting); for the Clinical Commissioning Group (CCG), this will be the CCG Governing Body.

Schools Forum has an important role to play in ensuring that all schools are engaged in delivering a sustainable financial SEND system in Richmond, and that value for money is maximised in Dedicated Schools Grant expenditure.

The activities in the plan are organised into five workstreams. Each workstream is jointly led by partners and reports to the SEND Partnership Board. Membership of each workstream varies and includes those with a contribution to make from those across the partnership with responsibilities for, or interest in, delivering transformation across the local SEND system.

Note that during the COVID pandemic certain aspects of the governance arrangements have not been fully delivered as for example the committee meeting schedule has been altered to reflect the urgency of the COVID response.

Governance diagram:



Within Achieving for Children, oversight of the SEND Transformation Plan is delivered by:

- Monthly meetings of the workstream leads
- Quarterly meetings of AfC's SEND Performance, Quality and Innovation Board, who consider the transformation and through SEND dataset and qualitative discussion across education, health and social care partners
- Quarterly meetings of the Delivery Group

The Clinical Commissioning Group Governing Body have agreed internal governance arrangements to ensure strategic oversight and operational delivery of the SEND Transformation Plan. These include:

- Training on the SEND Reforms for the CCG Governing Body / Borough Committee
- The appointment of a SEND Executive who is accountable for the SEND Reforms.
- A programme of internal progress reporting on the SEND Transformation Plan
- The Integrated Performance and Quality Committee considering progress on a six monthly basis
- The Governing Body / Borough Committee considering a SEND Annual Report annually
- The Finance Committee is responsible for approving financial resources to support statutory services.

The SEND Workforce Board was established autumn 2019. Chaired by the Director of Children's Services, and supported by AfC's Associate Director for Workforce, the Board's priorities are:

- to develop a coordinated approach to recruitment; there is an immediate opportunity to move this forward in a shared recruitment campaign for therapy staff following the funding investment made by the CCG.
- to review and improve the core training and development offer for professionals working with children with SEND, and coordinate the universal, targeted and specialist training offer

AfC, the CCG and Public Health have formed a joint commissioning strategy group that meets every two months to discuss operational matters on delivering the SEND Transformation Plan and the wider SEND Reforms. The group is chaired by the Director of Children's Services, with membership including the Executive Locality Director of the CCG and the Director of Public Health.

7. TRANSFORMING SEND SERVICES

Five workstreams are leading the work to deliver the plan. This section explains what the SEND Partnership Board and each workstream are doing and will do over future years to achieve the required improvements to the quality of services and operate within a sustainable budget.

Progress in delivering the transformation is tracked and summarised in a [highlight report and summary data dashboard](#) at every SEND Partnership Board. Where issues cannot be resolved by the SEND Partnership Board they can be escalated, if necessary and ultimately, to the Health and Wellbeing Board.

Engaging with children, young people, young adults and their families is essential in delivering the transformation. Engagement includes statutory consultation as well as co-production, the involvement of representative groups, and information sharing. Each workstream has specific participation and engagement activities showing how the impact of change on children, young people and families will be assessed, and seeking views to inform decision-making and prioritisation.

Themes spanning the transformation programme include:

1. Developing new approaches to early intervention so that children with SEND are supported to remain in mainstream schools.
2. Increasing the range & quality of local education, health and care provision for children and young with SEND.
3. Improving business insight and implementing more commercial approaches to the commissioning of SEND placements and support.
4. Engaging all stakeholders, including children and young people and parents and carers, in reforming the SEND system and changing attitudes and behaviours.
5. Promoting independence and strengthening transition for children and young people with SEND through school phases and into their adulthoods.

7.1 SEND PARTNERSHIP BOARD

Partnership Board Chair: Ian Dodds, Director of Children’s Services, Richmond Council

Board objectives

The SEND Partnership Board is responsible for ensuring that all stakeholders in Richmond work together to successfully deliver the activities in the plan within the agreed time-frames and achieve the transformation we need. This includes:

- Securing the contributions of all local partners to the delivery of the transformation plan, ensuring that SEND is everyone’s business, supported by visibility of leadership and strength of vision
- Keeping track of progress and understanding the impact that we are having on outcomes for children and young people, including the impact of work to develop participation, engagement and co-production with children, young people and their parents and carers
- Leading system-wide cultural change to upskill professionals (based on a pan system workforce strategy), generating a genuine shared sense of purpose, and facilitate new ways of working within and across all partner organisations
- Overseeing the joint development of partnership wide local strategies and policies to underpin a system with consistency of offer and quality across all schools and services
- Maintaining an accurate and honest self-evaluation of our SEND system to describe what is working well and what needs to improve
- Leading the development of shared local intelligence and insight to inform prioritisation, service planning and delivery across the partnership

The Partnership Board has met every two months since early 2019. The Board has [Terms of Reference](#) and notes of the meetings are [published on the Local Offer website](#).

Activities

Activity	Lead
Cultural change	
Deliver a strategy to equip colleagues across the partnership to contribute to the transformation of our local SEND system. This will include identifying the systems leadership, cultural change, behaviours and skills required and how these can be established	Director of Children’s Services
Implement a whole system communications strategy to support the delivery of the Plan.	Head of Communications and Marketing , AfC
A well informed and skilled child, young person, parent, carer and professional community	
Through the SEND Workforce Board oversee the whole system training and development programme	AD Workforce, AfC
Self evaluation and progress of transformation	
Maintain a self-evaluation of our SEND system to inform priorities for next phase of progress, building on past audits of health and social care provision using Council for Disabled Children’s audit tool	Programme Director, AfC
Partnership-wide strategies and policies	
Identify opportunities to improve SEND system through the wider work of the partnership, ensuring new strategies and policies reflect our ambitions for the community and services for SEND	Programme Director, AfC
Ensure regular engagement with schools at both Member and officer level to maximise shared ownership of the SEND agenda and to strengthen the role of Schools Forum, to include an expansion in the use of sub committees / working groups	Director for Education Services and Director of Finance, AfC
Intelligence and insight	
Establish processes to develop a shared local understanding of trends and predict future needs that is used to forecast and inform integrated service planning and delivery, including analysing gaps in the local SEND offer.	Director for Commissioning and Partnerships, AfC

Review tribunal outcomes on a regular basis to learn and improve practice and provision	AD SEND, AfC
Information	
Publish progress reports and up to date iterations of the Plan, including accessible versions to reflect the comments of children, young people and young adults on an annual basis.	Programme Director, AfC

7.2 WORKSTREAM 1: PARTICIPATION, ENGAGEMENT AND CO-PRODUCTION

Workstream Leads:

Representatives of the Parent carer Forum (PCF)

Ashley Whittaker, Programme Director, Achieving for Children

Children and young people tell us that:

- *Participation is getting everyone involved. Adults don't have the same viewpoint as children.*
- *It's frustrating if you don't know what the words mean and if they're too small you can't see them*
- *We should be involved because the decision directly impacts on children and young people*

Families tell us that:

- *The biggest barrier here is training for staff in identifying SEN and knowing where to access support*
- *We need to support children and families earlier on in their journey to save on the amount we spend on issues that will arise later if they are not guided properly.*
- *A more strategic and joined up approach with other local stakeholders, in particular the CCG, should be embraced.*

Work with families and children and young people includes:

- Regular meetings with members of the Parent Consortium and Parent Carer Forum steering group
- Involvement of children and young people in decision making and planning for example in the redesign of Section A of the EHC plan
- The co-production of a 1-day training course for workers by young people and the Participation Team called 'Young People's Voices - Personalisation and Participation'.
- Reviewing and improving the content and structure of the Local Offer website

Participation is the process by which children, young people, parents and carers influence decision-making, which brings about change in them, others, their services and their communities. Listening to and involving children and young people and their families who use services leads to the design and development of better, more relevant services. Examples of how children and young people are involved in improving the SEND system in Richmond are available [here](#), and parents and carers [here](#) and [here](#).

Engagement is the process of empowering people to recognise their right to and benefits of getting involved in decision-making and supporting them with the skills and tools to do so.

Co-production is involving people who use services in equal partnership at the earliest stages of service design, development and evaluation

All partners need to engage with children and young people with SEND and their parents and carers on decisions about their own support, and that offered across the wider system. This means that not only are their needs optimally met, but useful insights are obtained into how to improve services and outcomes. The CCG, Council and AfC are developing ways to harness views so that decisions about services are shaped by users' experiences, ambitions and expectations. Achieving parental confidence that services are as good as they can be is vital.

The Children and Families Act 2014 makes clear that at both an individual and systemwide level CCGs and local authorities must take into account:

- the views, wishes and feelings of the child or young person, and the child's parents
- the importance of the child or young person, and the child's parents, participating as fully as possible in decisions, and being provided with the information and support necessary to enable participation in those decisions

Clinical Commissioning Groups (CCGs) and local authorities must:

- ensure the child's parents or the young person are fully included in the EHC needs assessment process from the start, are fully aware of their opportunities to offer views and information, and are consulted about the content of the plan
- consult children with SEN or disabilities, and their parents and young people with SEN or disabilities when reviewing local SEN and social care provision
- consult them in developing and reviewing their Local Offer and make sure that children with SEND and their parents, and young people with SEND are provided with advice and information about matters relating to SEN and disability

Richmond is committed to ensuring a productive and positive relationship between parents and parent representatives, including through the official Parent Carer Forum. We are making progress with developing an effective and proactive partnership with families and their representatives so that we have a system of effective engagement and co-production and fully embed the SEND Reforms.

Workstream objectives

The co-production and engagement workstream brings together system leaders, family representatives and input from children and young people. The workstream will lead work to empower the partnership and the community to listen and respond to children, young people and families' views and wishes and work better together to support the best possible outcomes for all children and young people with SEND. The workstream will lead work on engagement and participation of children and young people, with all levels of need, and their families. This includes:

- Fostering productive, positive and trusting relationships between parents and carers and service commissioners and providers, including with the new Parent-Carer Forum, to enable co-production and to understand and evaluate the impact of our transformation activities.
- Review and develop our local approach to enabling and empowering children and young people to have their say in decisions about them and to shape services and strategies that impact on them
- Developing a local approach to provide more opportunities for all children, young people and families to participate in co-production and engagement activities, including families from black and minority ethnic communities, all socio economic groups, and families where parents have special needs and learning disabilities themselves
- Developing local mechanisms for all partners, including parents, carers and young people, and providers, including early years settings, schools and colleges to feedback on the effectiveness of provision, progress towards outcomes and their experience of the process
- Supporting the community to meet the needs of all children and young people by embracing diversity and **inclusion**, so that all children and young people with SEND have the same opportunity as their peers to play, learn and grow-up all together in their local community.

Activities

Activity	Lead
Lead on the development of the process for participation, engagement and co-production across all workstreams.	Programme Director AfC
Work with children and young people on a continual basis to audit and improve how they have their say and are involved in decisions about their own support; and the information available to them about processes. To include working with professionals to ensure that findings are listened to and result in improved professional practice.	SEND Participation Officer AfC
Work with families to audit engagement, participation and feedback mechanisms in place across the partnership to understand what is working well, what we are concerned about, identify gaps, and agree action plans.	Programme Director AfC
Establish a shared understanding of co-production and levels of participation and develop a local model that enables the engagement of as many families as possible, including proportional representation from all groups of SEND (with and without an EHC plan), in co-production and service planning, prioritising	Programme Director AfC
Establish local expectations on the type and quality of communications with children, young people and their families, and between partners, and practical support (eg toolkit) to support engagement, participation and engagement activities	Programme Director AfC
Develop, improve and promote the Local Offer website, so that more children, young people, parents, carers and professionals are aware of its value as a one-stop shop for local services. To include clear information of the CCG offer, including therapies and how these might be accessed within Richmond settings and schools at an early intervention stage as well as through EHC Plans in local schools	Head of Marketing and Communications AfC
Review and improve signposting, support materials and training available to children, young people, young adults, parents and carers to ensure appropriateness of language and accessibility. To include a full range of needs, ages, and pathways, access for parents / carers with their own additional needs, and voluntary sector provision.	AD Workforce AfC
Develop a comprehensive database of families with children, young people and young adults with SEND, spanning SEN Support and EHCP cohorts, so that all these families can be efficiently contacted to be both updated with relevant information and canvassed to provide opinions. To include development of the Disability Register	Head of Business Support & Digital Transformation AfC

Positively engage with parents and their representatives to scope and develop a local model which facilitates effective engagement in co-production and developments.	Programme Director AfC
Develop effective and proactive partnership with SENDIASS through monthly meetings, use of quarterly feedback to inform service improvement.	AD SEND AfC
Use of digital technology to broaden and deepen engagement,	Head of Business Support & Digital Transformation AfC
Expand the network of Participation Leads across multi agency teams, including for example the CCG Expert patient programme participation strategy	SEND Participation Officer AfC
Improve participation amongst vulnerable groups such as via the Children in Care Council and the Youth Offending Service	Programme Director AfC

Measuring the impact (these will be monitored in the SEND Partnership Board quarterly dataset):

Key Performance Indicator
% of children and young people who feel the information and advice they receive helps them to participate in the planning of provision to meet their needs
% of parents and carers who feel the information, support and advice they receive helps them to participate in the assessment of their child's need and the planning of provision to meet these needs
Number of service improvements that have been made as a result of child or young person feedback and suggestions each year
Number of service improvements that have been made as a result of parent or carer feedback and suggestions each year
Number of service developments and processes each year that have been co-produced with children and young people
Number of service developments and processes each year that have been co-produced with parents and carers
Total number of children and young people who give feedback and are engaged in the development of services, including both those with and without an EHCP
Total number of parents and carers who give feedback and are engaged in the development of services, including both those whose children have an EHCP and those who do not.
Number of children and young people from under-represented groups who give feedback and are engaged in the development of services
Number of parents and carers from under-represented groups who give feedback and are engaged in the development of services

7.3. WORKSTREAM 2: JOINT COMMISSIONING

Workstream Leads:

Jessica Thom, Director for Commissioning and Partnerships, Achieving for Children

Sue Lear, Deputy Director of Transformation, NHS South West London Clinical Commissioning Group

Children and young people tell us that:

- *Pupils do not like missing lessons to go to therapy sessions as it makes them feel different to others*
- *Pupils want the same therapist over a period of time so they can develop trust and tell their story once.*
- *They sometimes have to tell their story more than once because professionals don't share information with each other*

Families tell us that:

- *It sometimes takes too long to access therapy services, and provision in mainstream settings should be comparable to special schools*
- *Short breaks provision must include options to access providers within the borough*
- *They appreciate the flexibility and responsiveness of some services during the COVID pandemic*

Work with families and children and young people includes:

- Their involvement in the contractual arrangements for therapy provision
- Co-production of the new short breaks contract

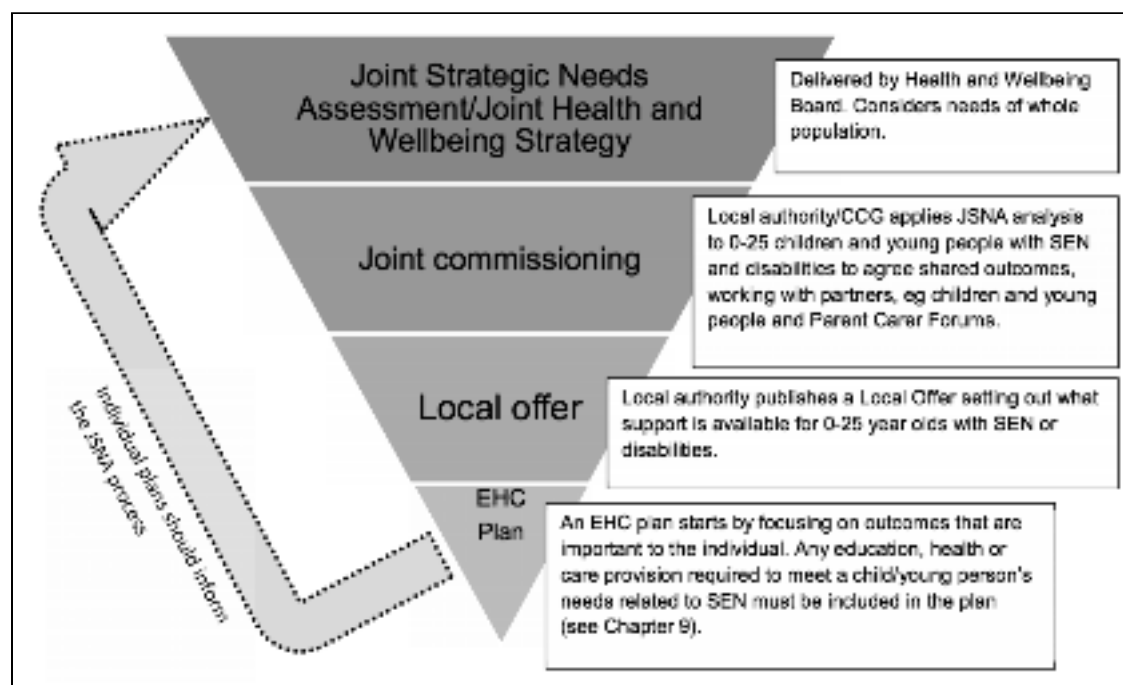
Local authorities and CCGs must ensure that individuals to whom the services are being, or may be, provided, are involved in planning commissioning arrangements, in the development and consideration of proposals for change, and in decisions affecting the operation of commissioning arrangements. Joint commissioning arrangements should enable partners to make best use of all the resources available in an area to improve outcomes for children and young people in the most efficient, effective, equitable and sustainable way.

Partners must agree how they will work together. They should aim to provide personalised, integrated support that delivers positive outcomes for children and young people, bringing together support across education, health and social care from early childhood through to adult life. This should plan for transition points such as between early years, school and college, between children's and adult social care services, or between paediatric and adult health services. Services must work together to promote children and young people's wellbeing and improve the quality of special educational provision. Richmond's

partnership must have arrangements in place to plan and commission education, health and social care services jointly for children and young people with SEN or disabilities.

Joint commissioning should be informed by a clear assessment of local needs. The Health and Wellbeing Board is required to develop Joint Strategic Needs Assessments and Joint Health and Wellbeing Strategies, to support prevention, identification, assessment and early intervention and a joined-up approach. Local authorities and CCGs can pool resources and delegate certain NHS and local authority health-related functions to the other partner(s) if it would lead to an improvement in the way those functions are exercised.

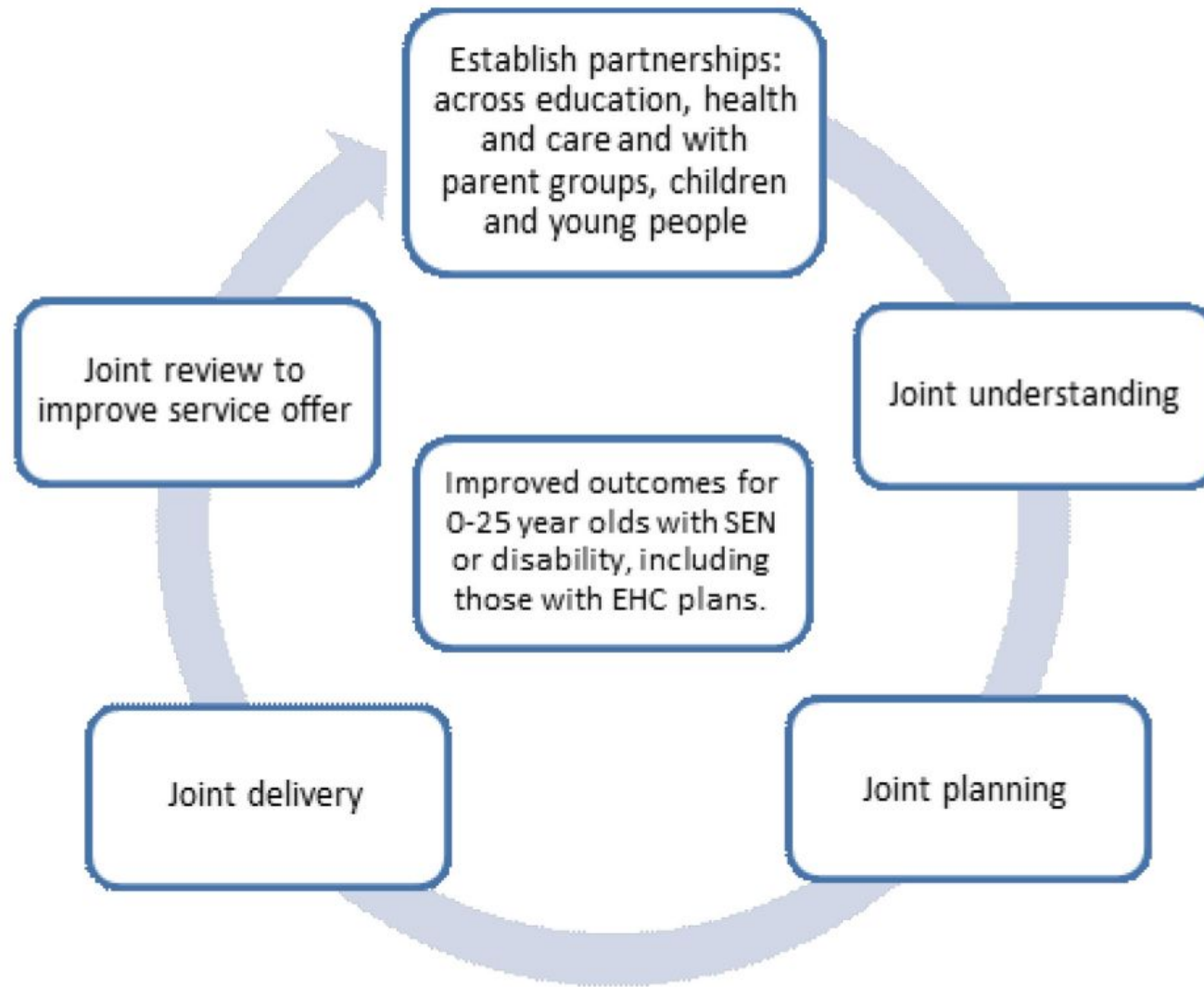
Joint commissioning arrangements must cover the services for 0-25 year old children and young people with SEN or disabilities, both with and without EHC plans. They must also include arrangements for securing EHC needs assessments, securing the education, health and care provision specified in EHC plans, and agreeing Personal Budgets. They must consider what advice and information is to be provided about education, health and care provision for those who have SEN or are disabled and by whom it is to be provided, and how complaints about education, health and social care provision can be made and are dealt with.



Workstream Objectives

The Joint Commissioning workstream will deliver a well informed and strategic joint commissioning approach for Richmond, with forensic financial awareness. It will focus on developing the partnership's approach to commissioning together to ensure that our local services are able to meet the needs of children and young people with special educational needs. The workstream will lead work to leverage improvements in service quality and maximise value for money from our shared resources through commissioning. The process of designing and commissioning services will be done with children and young people and their families from the earliest stage. It will draw on shared local intelligence to inform commissioning priorities and activities. This workstream will:

- Develop principles and processes that enable commissioning activities to better respond to local need and be strongly focussed on outcomes for children and young people, including developing our local intelligence and considering how different funding models may offer incentives to drive improvements in the quality and efficiency of provision
- Work together and with children, young people and their parents to understand the performance of commissioned services for children and young people with special educational needs and disabilities and the outcomes that they support; and identify priorities to transform services
- Review resourcing allocations across the partnership to understand the contributions required of each partner to meet the needs of children and young people with Education, Health and Care Plans, including jointly funded places for those with complex needs and in out of borough and residential placements
- Work with children, young people and their families, and the leads of Workstream 3, to develop a high quality local therapy offer
- Identify opportunities to work in commissioning consortiums or other partnership arrangements with other areas to leverage cost savings
- Improve commissioning of placements including building quality assurance mechanisms into its contract management to securing better value for money



Activity	Lead
Agree and implement a new SEND Joint Commissioning Strategy	Director of Commissioning and Partnerships AfC Head of Children's, Mental Health & Learning Disabilities CCG
Ensure that statutory responsibilities regarding engagement between the Council and Clinical Commissioning Group (CCG) and other partners as identified in the Code of Practice (January 2015) (CoP), including joint commissioning to ensure that there are sufficient services to meet the needs of the local area, as set out in the CoP, are met.	Director of Commissioning and Partnerships AfC
Coordinate contributions from across the partnership to the Joint Strategic Needs Assessment so that the needs of children and young people with special educational needs are robustly included and understood across the partnership	Director of Public Health LBR
Work with children, young people and their families to complete a stocktake of commissioned services to understand their performance and the outcomes that they support.	Director of Commissioning and Partnerships AfC
Review resourcing allocations across the partnership for provision to support children and young people with EHCPs and work together to develop funding arrangements to secure financially sustainable services, for: <ul style="list-style-type: none"> ● provision and placements for children with complex needs; ● out of borough and residential placements, including transition to local services when young people are at home, or return home after their placement ends 	Director of Commissioning and Partnerships AfC
Develop and establish shared principles and priorities for joint commissioning across the SEND partnership	Director of Children's Services LBR
Commission in consultation with children, young people, parents/carers and professionals, a new therapies offer, including training to deliver the new therapies model, with the role of parents and carers being integral to this. The new model should be sufficient in capacity to deliver support at an early intervention / SEN Support stage in addition for those with an EHC plan.	Director of Commissioning and Partnerships AfC

Commission in consultation with children, young people, parents/carers and professionals, a new short breaks offer	
Scope opportunities, develop business cases and implement plans to work with other areas to commission on a larger scale, driving service improvements and leverage maximum cost savings in SEND services	Director of Commissioning and Partnerships AfC
Review contract management processes to ensure that they provide effective quality assurance of SEND placements and derive maximum value for money for all funding organisations in the SEND partnership	Head of Commissioning AfC
Complete contract reviews with all current independent and non-maintained special school providers, mainstream and special schools in receipt of top-up funding, to achieve cost reductions.	Head of Commissioning AfC
Develops and implements, with the CCG, a set of agreed protocols for the partnership delivery, including funding, of Health inputs which are universal, targeted and specialist in order to support the wellbeing, educational development and pathways to adulthood 0-25. These protocols to include the early intervention in therapies incorporating training and support for the children's workforce to embed elements of speech and language therapy, occupational therapy and physiotherapy within the whole-day curriculum rather than just extraction and small group work, thus building early resilience and independence	Director of Commissioning and Partnerships AfC
Health commissioned services demonstrate improved outcomes for children, young people with SEND and compliance with reforms	DCO SEND CCG
Undertake joint planning and provision, including pooled budgets and personal budgets, with the CCG and other partners, including mainstream and special schools and academies, in order to provide educational options, including the provision of therapies, that are attractive and accessible for parents/carers and children and young people	Director of Commissioning and Partnerships AfC
Ensures that through the use of comprehensive, coordinated and reliable data combined with high quality assessments and EHC Plan writing and market intelligence, AfC is able to make strategic decisions regarding the provision needed to meet the SEND needs in the Local Area.	Head of Intelligence and Improvement AfC
Establish a process whereby the levels and types of needs in EHC plans are collated, compared to current provision so that gaps can be identified and findings used to inform a more strategic approach to joint commissioning.	Head of SEND Service, AfC
Undertake mapping survey of Richmond GPs to collate primary care SEND issues	DCO SEND CCG
Work with GP Lead for people with learning disabilities regarding uptake of annual health check	DCO SEND CCG

Ensure that there is sufficient Speech, Language and Communication and other therapies available to support children and young people at early intervention (SEND Support) stages as well as for those with EHC Plans. This therapy support to provide training for teachers and support workers in schools and settings as well as working directly with the children and young people themselves.	Head of Children's, Mental Health & Learning Disabilities CCG
Ensures that its operational procedures secure transitions through post-16 to adulthood. It is expected that pathways to adulthood are planned for 'from earliest years', and this should be reflected in EHC Plan annual reviews. Develop the transition pathway from children 's health services into adult health services	AD SEND AfC & DCO SEND CCG
Review and update the joint commissioning arrangements for SEND Section 75 Agreement with the London Borough of Richmond Upon Thames	Director of Commissioning and Partnerships AfC
Review CCG SEND commissioned service specifications and provider contracts to ensure internal quality assurance processes and pathway in place to meet statutory requirements of EHC needs assessments	Head of Children's, Mental Health & Learning Disabilities CCG
Continue to develop a sustainable home to school transport service with a focus on a revised alternative travel strategy to include the upscaling of independent travel training, parent pay and collection point initiatives.	Head of Home to School Travel

Measuring the impact (these will be monitored in the SEND Partnership Board quarterly dataset):

Key Performance Indicator
Number of children and young people involved in the joint commissioning cycle increases
Number of parents and carers involved in the joint commissioning cycle increases
% of children and young people reporting accessibility and timeliness of support is good or better
% of parents and carers reporting accessibility and timeliness of support is good or better
% of children and young people reporting the quality of commissioned services is good or better

% of parents and carers reporting the quality of commissioned services is good or better
There is evidence that the new SEND Joint Commissioning Strategy and governance is implemented and being followed
The number of new or revised joint commissioning arrangements put in place increases
The number of children and young people accessing occupational therapy, physiotherapy speech and language therapy increases
Waiting times for early years therapy interventions are in line with NICE guidelines
% of children and young people waiting more than 4 weeks for first speech and language appointment
% of children and young people waiting more than 16 weeks for first speech and language appointment
% of children and young people waiting more than 18 weeks from referral to start of occupational therapy
% of children and young people waiting more than 18 weeks from referral to start of physiotherapy
Waiting times for neurodevelopmental diagnostic services and the resultant pathway reduce to inline with NICE guidelines
Number of children and young people accessing CAMHS Tier 2 (Emotional Health Service) mental health support increases
% of children and young people seen within 8 weeks target from choice assessment to treatment for CAMHS Tier 2 services
% of children and young people assessed within 8 weeks of referral to CAMHS Tier 3
The number of agreed personal budgets / direct payment packages increases to inline with the national average
Financial contributions from Health are in line with statutory responsibilities
Financial contributions from Adult Social Care are in line with statutory responsibilities
Financial contributions from Children's Social Care are in line with statutory responsibilities
The number of EHC plans with shared partner contributions agreed at the Joint Agency Panel is inline with statutory responsibility

NB KPIs relating to therapy provision are currently under review due to contract negotiations as part of service recommissioning

7.4. WORKSTREAM 3: LOCAL PROVISION

Workstream Leads:

Charis Penfold, Director of Education Services, Achieving for Children

Nigel Evason, Head of Children's, Mental Health & Learning Disabilities, Clinical Commissioning Group

Children and young people tell us that:

- *Being able to walk to school is good*
- *Doing work experience is helpful in gaining skills for adult life*
- *Being treated differently by other children can make them feel anxious*

Families tell us that:

- *They would like their children to attend a school within the local community, with sufficiently skilled staff including in mainstream settings.*
- *Having different support services in one place makes things much easier*
- *They worry about what will happen when their children leave school*

Work with families and children and young people includes:

- Co-producing, with the education provider, the community outreach from, and community activities at, the new ASD free school planned for Moor Lane
- Reviewing and expanding the range of resources and tools to support emotional wellbeing and strengthen resilience
- Development of pathways for 16 to 25 years

Local provision has been expanded and improved significantly over the past two years.

Specialist school places

Specialist school places have increased considerably in recent years. Strathmore and Clarendon special schools have both expanded, a new special school (Capella House) has opened, and specialist resource provisions have expanded and opened. The new Special Free School specialising social, emotional and mental health needs will include a focus on outreach into local mainstream schools

Pathways for young people aged 16 to 25 years

The Next Steps programme is working with growing numbers of children and young people in Years 10 and 11 to proactively plan their pathways after school and, alongside the Annual Review process, help plan pathways into adulthood. The Preparing for Adulthood / transition from school to post 16 pathways and services is a key focus and AfC and the CCG staff are working with local provider organisations (such as Richmond College) and colleagues in Adult Social Care to improve the value for money and outcomes of our 16-25 local offer. An example of this work, including the impact of a project group chaired by the Director of Adult Social Care and Public Health, can be seen in Adult Social Services, Health and Housing Committee papers [here](#). Numbers of young people accessing local Post 16 provision and traineeships, internships or apprenticeships are increasing and the local offer being expanded. An example of this is the launch in Richmond of the [Mencap Supported Internship](#) programme in September 2021. Not only will this help young people develop their independence and employability skills, but it will also reduce expenditure from the HNB of the DSG.

Therapy provision

A comprehensive and detailed [review of therapy provision for speech and language, occupational and physiotherapy](#) has been completed and a future model agreed. This involved strong partnership working between AfC, the CCG and partners to accurately assess current and future needs, understand current funding models and contributions, and prioritise which aspects of the preferred 'Balanced Model' are taken forward. Funding for the early years offer was agreed by the Schools Forum and work is beginning to move forward in this area. Greater CCG investment has also been agreed in principle over a 3 year period. Further work is needed to secure the additional education funding to develop services for those aged 5 to 25 years.

Emotional wellbeing and mental health support

A cluster of schools in Richmond are part of the government trailblazer initiative for Mental Health Support Teams in Schools. This provides a whole school approach and early intervention for children, young people and their families to mental health support. This initiative includes Strathmore special school working alongside primary and secondary mainstream schools. We have also been successful in a Wave 4 Trailblazer bid which we expect to further increase local capacity and expertise at universal level for schools, families and pupils

Workstream objectives

The local provision workstream will lead the continued development of capacity and quality in local education, health and social care services for children with SEND so that the needs of as many children and young people as possible are met in their local communities, reducing our reliance on schools outside the borough and on higher-cost provision in independent and non-maintained special schools. Where possible, opportunities for integration of education, health and care multi agency support across all ages 0 to 25 years, including the potential development of co-location and multi agency hubs.

There are four main areas of work:

- developing **specialist education places** in Richmond that are the first choice of children, young people and families, including expanding local specialist resource provisions and opening a new special school for social, emotional and mental health needs
- Supporting children and young people in their **preparation for adulthood** by planning for transition to adult life from Year 9, and making sure that local provision is sufficient to meet their needs. This includes planning for their health, where they will live, their relationships, control of their finances, how they will participate in the community and achieve greater independence and is structured around the four pillars of [Preparing for Adulthood](#):
 - further and higher education and/or employment – including exploring different employment options
 - independent living – providing choice and control over their accommodation and living arrangements, including supported living
 - participating in society – including having friends and supportive relationships, and participating in, and contributing to, the local community
 - being as healthy as possible in adult life

This joint work across AfC, Adult Social Care and Housing and Health Services will continue to improve the local offer for those aged 16 to 25 and beyond.

- establishing a high quality **local therapy offer** that supports children and young people to make good progress towards their goals and maximise their opportunities for inclusion and independence, including at 16 to 25 years
- establishing a fully integrated model for supporting children and young people with **emotional wellbeing and mental health** needs which includes universal support in schools, early years settings and colleges and progresses through to specialist intervention, with specific focus for more vulnerable groups eg CYP with disabilities and known to YOS. The “Start Well” section of the [Richmond Health and Care Plan](#), highlights the need to improve the mental wellbeing and resilience of our children and young people and the opportunities that children and young people with special educational needs and disabilities are given to flourish and be independent.

Activites

Activity	Lead
Our community	
Work with children, young people and families to understand how inclusive our community assets and universal services, such as our libraries, parks, and mainstream youth services are; whether reasonable adjustments are made and staff training provided	Programme Director AfC
Work with children and young people, families, service providers and voluntary sector groups to develop the local post-diagnosis support offer	DCO SEND CCG
Develop a marketing campaign for the SEND local offer to include the high quality of local SEND provision in mainstream schools, specialist resource provisions and special schools, to include the provider of the new Free School at Moor Lane	Head of Marketing and Communications AfC
Specialist school places	
Produce a revised School Place Planning Strategy which identifies the numbers and types of early years, school and post-16 SEND places needed and makes recommendations for how and where these should be provided.	AD School Place Planning AfC
Increase the number of specialist resource provision places to reflect the needs identified in the School Place Planning Strategy, and develop the multi-agency offer such as therapies, in line with the increase	AD School Place Planning AfC
Monitor all Special School, specialist resource provision uptake of places across all phases to ensure that provision is matched to need	AD SEND AfC
Gather information and case studies including from previous Tribunal cases and the experience of headteachers from mainstream and special schools. On the basis of this data to identify a development programme, including a business case for developing the provision in mainstream and special schools within the borough, to deliver savings against more expensive independent and out-of-borough placements.	AD SEND AfC
Redirect top-up funding to provide all schools with specialist therapeutic consultations so that they can modify and improve their school spaces and environments for learners with SEMH needs, enabling a reduction in funding for EHCPs for these students.	AD SEND AfC

Work with The Beckmead Trust to help them to develop an outstanding SEMH special school within the borough.	AD School Place Planning AfC
Pathways for young people aged 16 to 25	
Consider and implement more proactive pathway planning for young people with SEND from Year 9 to include access to health provision	AD SEND AfC DCO SEND CCG
Develop local employment and volunteering opportunities for young people with SEND, and increase the numbers of young people with post-16 EHCPs on vocational pathways, including apprenticeships, traineeships and supported internships to support them in their transition into employment. Identify and work with partners to fill any gaps in provision, including growing the number of supported internships. Provide support into employment including where applicable working with Richmond Adult Education. Further develop outreach provision to build relationships with young people furthest away from engagement to support their progress into further education or vocational pathways.	Head of Education Business Partnerships and Vocational Pathways, AfC
Continue to provide the Next Steps programme of information, advice and guidance on Post 16 pathways to learners with SEND and other vulnerable groups from Year 10 upwards.	14-25 Manager, AfC
Improve the tracking of young people aged 18 and over who are NEET, or at risk of becoming NEET, to ensure they have timely access to appropriate education and training.	14-25 Manager, AfC
Therapy provision	
Develop, commission and/or provide an improved local therapies offer based on the findings of the needs assessment and gap analysis	Head of Children's, Mental Health & Learning Disabilities CCG Director of Commissioning and Partnerships AfC AD SEND AfC DCO SEND CCG AD Health AfC
Recruitment of skill mix / experienced therapy staff	
Training programmes for providers, schools & early years providers and families, embedding the Balanced Model / Framework across the system	
Development of new Service Specifications, KPIs and outcome measures across all 3 Therapy services, and a joint monitoring framework with AfC / CCGs	
Completion of funding and financial S75 agreements / pooled budgets	

Consolidation of equipment arrangements / budgets to ensure equity / timeliness in access.	
Emotional wellbeing and mental health	
Develop our understanding of need and services to improve the emotional and mental wellbeing and resilience of children and young people. To include training for staff and parents on better supporting mental health needs.	Head of Children's, Mental Health & Learning Disabilities CCG
Complete business case for IThrive model across AfC and CCG partners. Work with CCG to establish funding model to develop IThrive, establish working group	Head of Children's, Mental Health & Learning Disabilities CCG
Complete a review with the CCG of mental health support for children with disabilities. Use the review to plan and implement a sustainable model for this vulnerable group. Develop the dynamic support register for CYP with ASD and / or LD who are at risk of placement breakdown / hospitalisation	Head of Children's, Mental Health & Learning Disabilities CCG DCO SEND CCG
Further develop Mental Health Support Teams in schools to widen this support to more schools including staff training	AD for Emotional Health AfC
Work with key partners to complete an under 5s needs analysis to scope out the development of an under-fives CAMHS service	Head of Children's, Mental Health & Learning Disabilities CCG
Establish a digital youth project steering group to review and expand the range of resources and tools to support emotional wellbeing and strengthen resilience	
Complete a review of the current neurodevelopment assessment pathway for 0-5 year olds by April 2020, ensuring that by 2021 the recommendations of the review are being implemented	

Measuring the impact (these will be monitored in the SEND Partnership Board quarterly dataset):

Key Performance Indicators
% of new pre 16 EHC plan placements in independent and non maintained special school sector
% of new post 16 EHC plan placements in independent and non maintained special school sector
% of total pre 16 EHC plan placements in independent and non maintained special school sector
% of total post 16 EHC plan placements in independent and non maintained special school sector
New specialist pre 16 school places created
New specialist pre 16 places filled
Specialist Resource Provision vacancy rate
% of young people with EHCPs (post-16) who are supported in further education
% of young people with EHCPs (post-16) who are in vocational pathways destinations
% of young people with EHCPs (16 and 17 years) who are not in education, employment or training (NEET)
% of young people with SEN Support (16 and 17 years) who are not in education, employment or training (NEET)
% of Year 10, 13, 14 and above EHC plan and non SEND vulnerable learners completing Next Steps interviews
% of Year 11 EHCP and non SEND vulnerable learners completing Next Steps interviews
% of 19 year olds qualified to L2 is above statistical neighbour average at both SEN Support and EHC plan level
% of 19 year olds qualified to L3 is above statistical neighbour average at both SEN Support and EHC plan level

NB KPIs relating to therapy provision and emotional wellbeing and mental health are shown in Workstream 2

7.5. WORKSTREAM 4: EARLY INTERVENTION AND TRANSITION

Workstream Lead:

Roberta Evans, Associate Director Early Help, Achieving for Children

Sheldon Snashall, Associate Director for Pupil Support, Achieving for Children

Children and young people tell us that:

- *Moving from primary to secondary school can be scary*
- *Some teachers in school are better at understanding the way that they like to learn than others*
- *As they become older, the amount of support they receive tends to reduce and it's harder to know who to ask for help*

Families tell us that:

- *Early intervention cannot take the place of statutory provision and to be successful, early intervention initiatives must be resourced*
- *Early intervention initiatives should build on local expertise and include developing strong partnerships with the community and voluntary sector*
- *Transition planning must be done early to make sure the new placement setting is properly equipped to receive their new starter*

Work with families and children and young includes:

- The development of mechanisms to better capture the voice of, and communicate with those with SEND both with and without an EHC plan
- Using their opinions and experiences to inform the workforce development programme and parent and carers training courses
- The development and use of 'about me' information, produced by the child or young person and adult professionals, at all panels
- Co-producing a programme to support the transition to secondary school for all children with SEND.

If a child or young person has a special educational need or disability, the earlier in their life this can be identified, assessed and the necessary support put in place, the better. This identification could happen as early as during pregnancy, but may not happen until much later, for example during adolescence. In addition, what happens early in life, starting from conception, affects health and wellbeing later in life. Prevention is critical in ensuring that all children and young people can fulfil their potential.

The objective of the early intervention and transition workstream is to support families and all agencies including education providers, to where possible prevent additional needs occurring, and where they do arise, to be competent and confident in supporting children and young people with SEND, from the early years to

post-16. This will mean that children and young people will have the best possible experiences and their needs are met early without the need for an EHC plan. This requires teamwork across all relevant agencies and the development of a strength and capability focused approach to SEND rather than a deficit-focused model.

Workstream Objectives

a. First 1000 Days

Healthy physical, emotional and social development during the first 1,000 days of life :

- supports secure relationships between young children and their carers
- lays young children's foundations for lifelong mental and physical health
- means young children feel safe and secure, ready to play, explore and learn
- leaves young children ready to achieve and learn at school
- enables young children to manage their emotions and behaviours
- gives young children the skills to form trusting and caring relationships

The first 1,000 days provides the opportunity for first stage intervention with families to provide support to parents and children so that their needs can be met at the earliest stage and prevent poorer outcomes in later childhood, adolescence and adulthood. Special Educational Needs and Disabilities can be identified and supported at the earliest opportunity, and in some cases prevented. It offers the opportunity to prevent children, young people and adults from requiring support from statutory children's social care and health services by working in a truly early interventionist and preventative way. The First 1000 days initiative is a collaboration between Achieving for Children, health commissioners and providers, and other organisations including the voluntary sector. It is developing a proactive and reflective model of support for the first 1,000 days of life that helps to develop healthy physical, emotional and social development.

b. Early Years onwards

The majority of children and young people with SEN or disabilities will have their needs met within local mainstream early years' settings, schools or colleges, without the need for an EHC plan. Education providers are provided with funding for this purpose. A graduated approach to understanding the child or young person's needs and removing their barriers to learning is used - the "Assess, Plan, Do, Review" cycle⁴.

High quality teaching that is differentiated and personalised will meet the individual needs of the majority of children and young people. Schools and colleges must use their best endeavours to ensure that such provision is made for those who need it. Special educational provision is underpinned by high quality teaching and "is compromised by anything less"⁵.

Moving from nursery to primary school, and from there on to secondary school and to college can cause additional challenges for children and young people with SEND. Well planned transitions between phases of education is key to preventing needs from increasing.

An example of early intervention in action

Social Communication Intensive Packages (SCIPs) are inclusive and preventative packages of support provided to pupils in their local mainstream school. The package consists of allocated additional adult (Teaching Assistant, TA) time, outreach advice/support from a member of the outreach team (consisting of professionals with experience in working with children who have social communication needs/ASD) and termly training/networking sessions for the allocated TA and class teacher.

Children are identified in their nursery year as having social communication needs/ASD and the support provided over three terms. Typically 75% of children go on to have their needs met in primary school under SEN Support and without an EHC plan. Reviews of the scheme show that:

- *Parents noted increased confidence, improved social/communication skills and that their children were calmer/having less 'meltdowns' - therefore accessing the teaching/learning in the classroom environment.*
- *Schools commented on how helpful outreach advice was to ensure support/strategies were successful, improving confidence of staff to meet the children's needs and the progress made by the pupils. Feedback from training sessions was very positive.*
- *A key part of the package is in upskilling school staff to meet the needs of these pupils through ongoing support and training and providing this early so that the 'right' things are in place from the start.*

⁴ [SEN Support and Threshold Guidance](#)

⁵ Special educational needs and disability code of practice: 0 to 25 years, Department for Education and Department of Health 2015, para.1.24

Activities

A well informed and skilled professional and parent / carer community	
Review and improve the local programme, including that delivered by the voluntary sector, to upskill parents and carers to better support their children and young people.	AD for Workforce AfC
Improve the provision of, and signposting to, pre and post diagnosis support and work to improve family resilience to reduce the use of special school residential placements.	Programme Director AfC
Upskill the workforce to better understand the needs of children and young people with SEND, including, very importantly those at SEN support and those not yet on SEN support, and the strategies they can use to provide support at the earliest stage so that their needs are met within mainstream settings wherever possible. To include highlighting the fact that improved practice in whole school support for pupils and students with SEND also results in better outcomes for pupils and students without any identified SEND. To include reinforcement of expectations of Quality First Teaching, the “Assess, Plan, Do, Review” Cycle and the local “SEND Threshold Guidance” and Early Intervention Panel (at both Early Years and school phase) protocol. Establish and facilitate the systematic collection of evidence to inform the design of training support for professionals. To include peer-to-peer inclusion audits, review of assessment of need (e.g. dyslexia) practice to ensure needs are being identified early, swiftly and accurately, the use of intelligence gathered from the Educational Inclusion Support Service and the Early Intervention panel and feedback from parents, carers, children and young people.	AD for Workforce AfC & AD for Pupil Support AfC
Providing advice and support to parents, carers, teachers and other professionals to promote inclusion and support resilience and independence to achieve positive transitions between school key stages and phases, and into post-16 education or training, and to adulthood. To include the promotion of best practice relating to building positive relationships between pupils and students with SEND and those without, so that mainstream inclusion also means social inclusion.	AD Pupil Support, AfC
Highlight and make more widespread use of the excellent best practice that does already exist within Richmond, so that this expertise becomes increasingly universal within all our early years, school and college settings. To include universal use of a strength and capability focused approach to SEND.	AD Pupil Support, AfC
Monitor and work to improve the quality of education provision in schools, to enable them to more effectively meet the needs of more children within early intervention and SEND Support, thereby enabling more children to become effective independent and resilient learners, and reducing the need for higher cost interventions and EHC Plans. Confirm with all mainstream schools a consistent learning experience for children with SEND at each of the levels of High-Quality / Quality First Teaching, SEND Support and thresholds for EHC Plan application, including the delivery of the assess, plan, do , review cycle.	AD Pupil Support and Lead School Improvement Advisor SEND, AfC

Work in partnership with schools, Teaching School Alliances and the AfC workforce development team to coordinate the provision of high-quality continuous professional development relating to SEND, including maximising school engagement with SENCO networks.	Lead School Improvement Advisor SEND, AfC
Work to focus schools on the presenting issues of the child, particularly in the area of ASD, SLCN and SEMH and target interventions on the underlying causes of needs and behaviours rather than the behaviour itself, thus enabling an increasing number of children and young people to be successful in their learning and social inclusion within a mainstream school setting.	Lead School Improvement Advisor SEND, AfC
Early Intervention	
To ensure that the content of the Golden Binder is current, is in line with the SEND Code of Practice and fully reflects the Richmond and AfC policy and practice guidelines.	SEND Service Manager AfC
Support and challenge mainstream schools on their SEND provision, practice and outcomes at both a whole school and individual pupil level, to make it as high quality as it can be, and at least meet the SEND Code of Practice. This is to include the quality of support plans for pupils at SEN Support level (which should be co-constructed with parents and carers and reviewed with them termly / according to the SEND Code of Practice), the role of their SEND Governor, the position of the SENCO in the leadership of the school (and their qualifications), the content of their annually refreshed SEN Information Report (e.g. that it is co-produced with parents and carers, compliant with the Code of Practice and inline with local policies) and accessibility plan, and the use of the school budget, particularly their Notional SEN funding, to assess impact and value for money.	Lead School Improvement Advisor SEND, AfC
Developing effective links and working relationships with targeted and universal services so that families have access to support that builds on their strengths and promotes resilience and independence, and that those agencies involved work in a coordinated and joined up way. For example the education inclusion teams to join up with Strengthening Families/ family support workers team to work with identified individuals at the Primary phase.	AD Pupil Support, AfC
Strengthen the SEND Support and specialist outreach offer in Richmond with an expanded team comprising advisory teachers (e.g. ASD specialists), specialist behaviour support outreach and Child Wellbeing Practitioner expertise	AD Pupil Support, AfC
Developing a consistent approach to positive social emotional relationships between young people, parents and professionals by adopting the Nurture UK approach across all schools and multi agency teams in Richmond.	

Developing effective models that focus on the early identification and specific intervention through clear links and working relationships with multi agency professionals via joint panels and pathways of support.	
Establishing ever greater inclusivity in our Local Offer through the creation of innovative pathways for children and young people who are finding mainstream provision difficult to access, at both primary and secondary school, with embedded QA systems in place.	
Improving school attendance by embedding the Emotionally Related School Avoidance ⁶ toolkit across all schools, multi agency teams, and the parent and carer community.	
Transitions	
Produce and share information for parents / carers about how to support transitions, of children and young people on both SEN Support and with EHCPs, and what support to expect from early years, schools and colleges.	Head of Marketing and Communications, AfC
Review transition practice (pathway planning, information sharing, staff briefing / training etc) at all early years, schools and colleges, for both SEN Support and EHCPs, to identify best practice and share widely to support improvements where gaps exist.	AD Pupil Support, AfC
Supporting young adults to have a smooth and well-planned transition from children's services to adult social care and health services. Build on the existing transitions protocol between children's services and adult services to develop a preparing for adulthood strategy that promotes independence from the earliest stage and informs the design and delivery of services by all organisations in the SEND partnership.	AD SEND AfC & DCO SEND CCG
Establish and implement a process, as part of the preparing for adulthood strategy, to review all EHCPs at Year 11, to determine whether a young person's needs would be better supported post-18 by a managed case transfer to adult social care services; and to ensure that young people experience a planned and smooth transition between children's and adult mental health services	AD SEND AfC

⁶ [Emotionally Related School Avoidance \(ERSA\)](#)

Measuring the impact (these will be monitored in the SEND Partnership Board quarterly dataset):

Key Performance Indicators
% of two-year-old health visitor checks completed (and of these using the ages and stages questionnaire)
% of families being supported by social care services are also working with their local children's centre
Early Years and Foundation Stage profiles show improvements compared to to the previous year (NB subject to change to statutory reporting)
Proportion (%) of pupils in Richmond schools who are in receipt of SEN Support.
% of children and young people with SEND and without an EHCP that feel included and listened to in the planning of their support
% of children and young people with SEND and without an EHCP that are confident that the support they receive will help them make good progress
% of parents and carers of children and young people with SEND and without an EHCP that feel included and listened to in the planning of their child's support including where appropriate in the assess, plan, do review cycle
% of parents and carers of children and young people with SEND and without an EHCP that are confident that the support their child receives will help them make good progress
% children and young people discussed at panels who have provided 'about me' documentation.
% of Key Stage 2 and 3 children attending alternative provision successfully reintegrated into mainstream school
% of children and young people reviewed by the Education Inclusion Service who are supported to remain in mainstream primary / secondary education.
% of children and young people with an EHC plan in Years 7 and 8 who did not have an EHC plan in Years 5 and 6
% of fixed term and permanent exclusions that relate to a child or young person with SEND
% of young people who are not in education, employment or training is below the Outer London and national average

Reduction in the number of those receiving medical tuition or persistence absence for emotional health / anxiety related reasons

Academic progress and attainment scores from Key Stage 1 to 4 for SEN Support cohorts are above Outer London average

% annual increase in total EHC plans is lower than the national average

Total EHC plans as a % of total 2 to 18 year olds is below the national average

% of pupils with LBR EHCPs supported in mainstream Early Years settings and schools is above Outer London average

7.6. WORKSTREAM 5: ASSESSMENT AND PLANNING

Workstream Leads:

Anna Chiva, Associate Director Special Educational Needs, Achieving for Children

Alison Stewart, Designated Clinical Officer for SEND, Clinical Commissioning Group

Children and young people tell us that:

- *They don't always know the content of their plan*
- *Support about how to have good relationship with other children and young people their age is important*
- *Many would like to have more help in how to become more independent*

Families tell us that:

- *Statutory reports are sometimes not circulated sufficiently in advance of an annual review making an informed discussion more difficult*
- *They would like their EHC plan coordinator to attend their Review of Assessment Summary meeting if possible*
- *A named lead professional to coordinate provision for a child with an EHCP would be helpful*

Work with families and children and young includes:

- improving the inclusion of feedback from children, young people, parents and carers in the multi agency EHC plan quality assurance process
- children and young people helping to improve the accessibility of written communications to families for example through the Easy Read guide to the EHC plan process
- children and young people helping to improve elements of the statutory process for example their design of a new version of Section A of the EHC plan
- The co-production, with children, young people, parents and carers, of a new EHC plan outcomes framework for Richmond

Significant progress has been made in this workstream. A permanent Designated Clinical Officer has been appointed by the CCG, and following an audit of SEND practice in social care, a Designated Social Care Officer for SEND has been appointed to lead implementation of the SEND Reforms across our social care services. A multi agency EHC plan quality assurance process is now established (with child, young person, parent and carers voice to be added in summer 2020) and a feedback loop to inform the whole system workforce development strategy agreed (via the PQI and SEND Workforce Boards). Although recent performance has been negatively impacted by COVID, in 2019/20 96.3% of EHCPs were issued within 20 weeks of the initial request for assessment (up from 82.9% in 2018/19), compared to an England average of 60.4%. Family feedback is now collected in a systematic way.

Workstream objectives

The objective of the assessment and planning workstream is to drive improvements in the quality of EHC plans and the annual review process. This includes:

- improving the process for the development of EHCPs, ensuring that plans are completed within statutory timescales to a consistently high standard, promote resilience and independence, include the views of the child or young person and their parents or carer and are based on detailed and well-evidenced assessments by all professionals. Make the statutory process a person-centred, strengths based, outcomes focused one.
- establishing a robust framework for the annual review of EHCPs so that statutory expectations are met, children and young people are fully engaged and the process is inclusive of all stakeholders. There is a thorough review of the outcomes and continuing needs of each child or young person and the provision supports children and young people to make good educational progress and promotes resilience and independence
- establishing effective quality assurance mechanisms for EHCPs that are inclusive of all organisations and professionals contributing to the EHCP in line with the SEND Code of Practice (2014)

Activities

A well informed and skilled professional and parent / carer community	
Continue to form and deliver training programmes for all existing and new education, health and social care staff based on skills audit of staff. To include training on process and writing high quality EHCPs (including outcomes and specificity), the annual review process, and all responsibilities under the Children and Families Act.	AD for Workforce AfC
Review current information materials, such as the Golden Binder, and make changes as necessary. To include an explanation of who to expect at an annual review meeting, for example when the SEN caseworker would / would not be expected to attend.	SEND Service Manager AfC
Implement local procedures to ensure that all communication from parents and carers of children with SEND is acknowledged within five working days and receives a response within ten working days, and consider ways to engage and communicate with parents of children with SEND outside of the formal assessment, planning and review process;	SEND Service Manager AfC
EHC plans	

Develop an outcomes framework that influences the content of an EHC plan, and the way that services are commissioned to deliver the specified support	AD SEND & SEND Service Manager AfC & DCO SEND CCG
Ensure that decisions on whether or not to assess and / or issue a EHC plan are taken according to the SEN Code of Practice. Local authority benchmarking data is used as part of the analysis about whether the rates of assessment and issuance are reasonable for a borough like Richmond. Support plans and documentation must be formatted to give a seamless document progression and clear record from early support to the issuing of the plan, and a robust evidence trail to fully support decisions made to either issue or not issue an EHC Plan and a placement must be kept.	SEND Service Manager AfC
Ensure that EHC plans are processed within the statutory timeframe and that every plan meets statutory requirements under the 2014 Children and Families Act. All plans should be focused on education and training, health and care outcomes that will enable children and young people to progress in their learning and be well prepared for adulthood. EHC plans can also include wider outcomes such as positive social relationships and emotional resilience and stability (though EHC plans will only be maintained so long as outcomes relating to education and training are unmet, and provision required to meet them is <i>additional to</i> and <i>different from</i> that which is ordinarily available). Outcomes should always enable children and young people to move towards the long-term aspirations of employment or higher education, independent living and community participation.	SEND Service Manager AfC
Ensure appropriate professional support and adequate resources are in place so that assessments and reports are prepared in a timely way to support the EHC Plan process. Review the system for allocating casework to EHCP Coordinators to determine whether better casework consistency could be achieved.	AD SEND AfC & DCO SEND CCG
Strengthen the application of statutory processes for welcoming children with EHCPs transferring into Richmond upon Thames from another local authority	SEND Service Manager AfC
Ensure that the use of personal budgets is considered, including for access to therapies and personal health budgets including for Continuing Care.	AD SEND & SEND Service Manager AfC & DCO SEND CCG
Quality assurance processes are embedded and used to drive service improvement	AD SEND & SEND Service Manager AfC & DCO SEND CCG
The CCG works with AfC and the Council to be compliant in exercising its statutory responsibility for partnership working to support the needs of children with SEND at all levels of need including shared funding between CCG and health providers	Director for Commissioning and Partnerships, AfC

and with education, children's and adults social care	
A review of the existing proformas against alternative models is undertaken and in partnership with schools and stakeholders a borough-wide format agreed. To include considerations of existing software options used elsewhere in England to enable schools to use a consistent electronic format which will allow for version control and conversion to an EHC Plan where necessary.	AD SEND & SEND Service Manager AfC
Ensure that the use of digital technology is embraced to improve the efficiency and effectiveness of the EHC plan process, and that the SEND data system delivers the necessary strategic reports and a full data commentary on individual cases including financial information. Issue case recording standards to ensure that all casework, including communication with children, young people, parents and carers, is appropriately stored on the electronic case recording system and is complete, accurate and accessible.	Head of Business Support and Digital Transformation, Head of IT and Systems and SEND Service Manager, AfC
Annual Reviews	
To ensure that annual reviews and subsequent amendments for EHC plans are completed effectively and in line with the statutory duties of the 2014 Children and Families Act. Ensure that all EHC Plans are reviewed annually by the named education and/or training provider in partnership with AfC, and that the EHC Coordinator attends the review meeting where there is a significant change in needs, intervention, funding or placement, or where the school and/or parent think it otherwise desirable.	SEND Service Manager AfC
Improve the timeliness of consultations with colleges and other post-16 providers for young people at the Year 11 or post-16 phase transfer stage; this includes establishing processes to monitor responses so that all young people have timely access to suitable education, employment and training.	AD SEND
All annual reviews should include clear evidence that interventions have a positive impact upon mitigating the barriers to learning experienced by the child or young person and thereby result in an overall reduction in total inputs over time and a larger number of cases in the EHC Plan being ceased and support being provided, if necessary, by SEN Support.	SEND Service Manager AfC
A review of the current cohort of children should be used to determine whether interventions can be reduced and whether opportunities exist for bringing children back into in-house, in-borough, provision.	AD SEND AFC & DCO SEND CCG
Improve the functionality of the SEN case management system so that the annual review cycle is better supported to facilitate a more proactive approach and ensure that the use of digital technology is embraced to improve the efficiency and	Head of Business Support and Digital Transformation, Head of

effectiveness of the process .	IT and Systems and SEND Service Manager, AfC
Review Tribunal outcomes on a quarterly basis to learn and improve practice and provision	AD SEND AFC

Measuring the impact (these will be monitored in the SEND Partnership Board quarterly dataset):

Key performance Indicators
% of requests where an EHC needs assessment was declined
% of needs assessments where an EHC Plan was issued
% of children and young people with a new EHCP pleased with their involvement agreeing the plan and who think it will help them make good progress
% of parents and carers who are satisfied with their involvement in agreeing their child's EHCP and with the end result
% of education settings indicating confidence in the assessment process and the quality of final EHC plans
% of health submissions to EHC assessments of good or better quality within the 6 weeks mandatory timeline
% of social care submissions to EHC assessments of good or better quality within the 6 weeks mandatory timeline
% of EHC Plans completed within the statutory timescale (20 weeks)
% of children and young people indicating meaningful involvement in their Annual Review
% of parents and carers indicating satisfaction and confidence in the Annual Review process
% of education settings indicating confidence in Annual Review process
% of professional contributions to Annual Reviews prepared and distributed within statutory timescales

Number of annual reviews attended by AfC
% of annual review decisions made within 4 weeks of review meeting
% of drafted amended EHC Plans issued within 8 weeks of the annual review decision
% of final amended EHC Plans issued within 8 weeks of the draft amended EHC Plan
% of annual reviews of EHC Plans held within the statutory timescale (12 months)
% of amendments arising from annual reviews are made and final, revised EHC plans completed within timescale
% of EHC Plans (new) assessed to be good or better
% of EHC Plans (amended) assessed to be good or better
% of professionals who understand their responsibilities under the 2014 Children and Families Act, and are confident and competent in fulfilling statutory duties for EHC assessments and annual reviews and their responsibilities under the SEND Code of Practice
% of open casework where there has been a complaint about the EHCP process
% of SEND appeal cases that are resolved at mediation stage
% of parental appeals to the SEND Tribunal agreed in favour of the local authority
% of parental appeals to the SEND Tribunal where LA has reached agreement with LA due to new evidence
% of parental appeals to the SEND Tribunal agreed in favour of the parents

8. RISK REGISTER

Risks	Impact	Strategy	Actions	Risk Score
Partnership Board				
Lack of partner engagement and shared ownership of the plan with resultant lack of investment	There is no or limited traction in delivering the system change and behaviours that are necessary to transform services and achieve better outcomes for children and young people with SEND within the financial resources available.	Mitigate	Provide strong leadership of the SEND Partnership Board. Maintain current engagement from all key partner agencies to the vision, shared values and key activities. Obtain support from the Health and Wellbeing Board. Maintain current schedule of regular meetings and reporting to share progress and achievements.	High
Ineffective governance of the SEND Partnership Board and workstreams.	There is a lack of focus and pace in delivering activities, and drift and delay in decision making. There is duplication and mixed messaging from partnership boards and other organisations working in this arena, including the Health and Wellbeing Board, SEND Partnership Board Schools Forum.	Mitigate	Strengthen governance structures that are all clearly understood and adhered to by all stakeholders. Ensure there is effective stakeholder representation on the SEND Partnership Board and five workstreams. Deliver a detailed communications plan.	Low
Lack of capacity and capability to drive and deliver transformation.	Key activities in the plan cannot be delivered within the timescales necessary. Partner organisations, parents and carers lose faith in their ability to achieve system change.	Mitigate	Sufficient resources from all partner organisations are allocated to deliver the activities in the plan. There is strong senior leadership of the five workstreams. There is a programme to upskill the workforce to deliver the plan. Additional resources and expertise are sourced externally where this is required.	High
Lack of agreement on how DSG funding is shared between different blocks.	There is a significant financial gap in the plan which will need to be met from other activities.	Mitigate	Build consensus across the whole system for how DSG funding should be shared. Continue discussions with the Department for Education on the national DSG funding formula. Contingency plans are established to	High

			allocate the funding shortfall to other actions within the plan.	
The impact of the COVID pandemic	The delivery of SEND services and progress of children and young people with SEND are impacted by a range of consequences including the redeployment of staff, increased absence from school and challenges of engaging with home learning.	Mitigate	Frequent communications between agencies, providers and families to identify and respond to related matters as quickly as possible. For those with an EHC plan, the annual review process will provide more information. It is important that schools and colleges use the substantial amounts of “catch up premium” funding provided directly to them by the Department for Education to provide additional support to relevant learners. The impact of COVID on the content and number of requests for EHC needs assessments will also be monitored.	High
Workstream 1: Participation , Engagement and Co-production				
Inability to secure an effective and engaged parent-carer forum (PCF) that is able to work collaboratively in the SEND partnership.	The voices and opinions of parents and carers do not inform strategic decision-making. Implementation of the plan is not successful as parents are not informed, aware or signed up to the system change required.	Mitigate	Develop ways to incentivise and reward parents and carers to be involved. PCF membership of the SEND Partnership Forum and workstreams.	Moderate
Workstream 2: Joint Commissioning				
Inability to recruit and retain professionals with commercial and contract management expertise	There is insufficient capacity or skill in the placement commissioning to negotiate and manage contracts with providers that reduce costs.	Mitigate	Job profiles, salary levels and the recruitment process attract good candidates with commercial expertise and experience. There is an effective induction, development and support package available to all professionals involved	Moderate
Commercial negotiations with SEND providers are	Placement costs are not reduced, meaning that additional savings have to be found from other areas of the plan.	Mitigate	There is an effective induction, development and support package available to all professionals involved in placement brokerage. Expertise in commercial	Moderate

unproductive.			contract management is secured from the Council or brought in from an external consultant on a risk and reward basis.	
Workstream 3: Local Provision				
Support from schools for the local SEND provision plan is not consistent or sufficient to create the additional school places required.	There are insufficient local special school places to meet the needs identified in the SEND provision plan, making the Council more reliant on maintained and special schools outside the borough and on non-maintained and independent school provision	Mitigate	There is effective engagement and communication with schools through existing networks to agree the local provision plan. Proposals are based on a detailed analysis of local needs. Good consultation with schools and other stakeholders leads to strong proposals and well managed plans to develop new provision.	Low
Local therapy provision is unable to be delivered to meet the identified needs of children with disabilities.	Children's therapeutic needs cannot be met locally leading to placements in more specialist school provision and at a higher cost.	Mitigate	The recommendations of the therapy review are implemented asap, and sufficient funding and resources secured.	Moderate
Parents and carers do not accept that local mainstream schools, specialist resource provisions and special schools are able to meet their child's assessed needs.	There is an increase in the number of disputed EHCPs and appeals to the First-Tier SEND Tribunal on the basis of parental preference. The workload for SEND professionals is increased and there is a potential for the tribunal to direct that the local authority makes alternative and higher cost provision.	Mitigate	There is a clear strategy to promote the resources and facilities available in local provision and the outcomes they achieve for children and young people with SEND. The quality of local provision is actively promoted by all practitioners in their relationships with parents and through their professional networks.	Moderate
Workstream 4: Early Interventions and Transitions				
School professionals do not support inclusion and early	Children and young people with SEND cannot be supported within mainstream schools or specialist resource provisions, meaning that they have to be	Mitigate	There is effective engagement and communication with professionals through the SENCO and headteacher networks. There is an effective learning, development	Moderate

intervention, or there is inconsistent support across schools.	transferred to special schools or non-maintained and independent schools at a higher cost.		and support offer to schools to support inclusive practice. The shape of the offer is informed by learning from EHCP assessments, tribunals and other feedback.	
Inability to recruit and retain professionals who are able to provide expert outreach support to schools and providers.	There is insufficient capacity, skill and expertise within the inclusion service to support schools with targeted interventions.	Mitigate	Job profiles, salary levels and the recruitment process attract good candidates with inclusion expertise and experience. Flexible working arrangements are available including secondments from schools. There is an effective induction, development and support package available to all professionals involved in targeted interventions.	Moderate
Transition arrangements between children's services and adult social care services are not implemented.	Young adults with SEND do not receive the support they need in a timely way from the appropriate services. Ineffective transition and working arrangements between children's services and adult social care lead to fragmentation and build higher costs into the system.	Mitigate	The preparing for adulthood strategy, transitions protocol and inclusion in the Council's Maximising Independence transformation programme facilitates early consideration and planning for young people's transition. Funding responsibilities are made clear within the protocol and are agreed in each individual case.	Moderate

Workstream 5: Assessment and Planning

Inability to recruit and retain experienced professionals within the SEND service, including educational psychologists, case workers and annual review officers.	There is insufficient capacity, skill and expertise within the SEND service to drive up the quality of EHCPs and maximise the benefit of the annual EHCP review process.	Mitigate	Job profiles, salary levels and the recruitment process attract good candidates with SEND expertise and experience. Flexible working arrangements are available, including secondments from schools. There is an effective induction, development and support package available to all SEND professionals.	High
Annual EHCP reviews and updates to plans following quality assurance require	There is insufficient capacity within the SEND service to make required changes to EHCPs. Proposed changes to plans result in parental challenge, disputed EHCPs and appeals to the	Mitigate	The management structure and staffing of the SEND service is regularly reviewed to ensure sufficient capacity. There is a priority programme for annual EHCP reviews and quality assurance and this is well	High

substantial changes to plans.	SEND tribunal, which may result in higher cost provision.		coordinated and managed by specific senior staff. There is engagement with parents and carers. Assessments and plans are well evidenced by all contributing professionals.	
Annual EHCP reviews do not reduce the costs of individual plans to an affordable funding level that meets the child's or young person's needs.	Proposed changes to plans result in increased parental challenge, disputed EHCPs and appeals to the SEND tribunal, which may result in higher cost provision	Mitigate	Annual EHCP reviews and quality assurance are well coordinated and managed. There is engagement with parents and carers. Assessments and plans are well evidenced by all contributing professionals.	High
The SEND service does not have the systems, processes and support it needs to drive up the quality of EHCP assessments and plans.	The quality of EHCP assessments and plans does not improve at the required pace. EHCPs do not robustly and sufficiently evidence how and where children's and young people's education, health and care needs can be met. This may result in increased parental challenge, disputed EHCPs and appeals to the SEND tribunal, which may result in higher cost provision.	Mitigate	There is a priority programme for annual EHCP reviews and quality assurance.	High

9. GLOSSARY

AD	Associate Director	A senior role in Achieving for Children, reporting to a Director level post.
AfC	Achieving for Children	A community interest company (a not-for-profit social enterprise) created in 2014 by the Royal Borough of Kingston and the London Borough of Richmond to provide their children's services. In August 2017, the Royal Borough of Windsor and Maidenhead became a co-owner of AfC, and AfC now delivers children's services across all three boroughs.
CAMHS	Child and Adolescent Mental Health Services	CAMHS is the name for the NHS services that assess and treat young people with emotional, behavioural or mental health difficulties.
CCG	Clinical Commissioning Group	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
CLA	Child(ren) looked after	A child who is in the care of the local authority. They may be in a foster family, with other family members or in residential care
CYP	Children and young people	The children and young people being considered
DCO	Designated Clinical Officer	The statutory post within a Clinical Commissioning Group responsible for ensuring the implementation and delivery of health aspects of the SEND Reforms / Children's and Families Act.
DCS	Director of Children's Service	The statutory post within a local authority responsible for providing relevant and responsive children's services as required by legislation.
DSG	Dedicated Schools Grant	A ring-fenced government grant used to fund individual school budgets in maintained schools, academies and free schools.
EHCP	Education, health and care plan	A plan that details the education, health and social care support provided to a child with special educational needs or disabilities
HNB	High needs block	The budget within the dedicated schools grant that is used to fund support for children with special educational needs and disabilities

NEET	Not in Education, Employment or Training	A young person who is not in the education system and who is not working or being trained for work
PCF	Parent Carer Forum	A constituted group of parents and carers of children with disabilities who work with the local authority and other providers to ensure that the services they provide meet the needs of children with disabilities and their families.
PfA	Preparing for adulthood	The support provided to children and young people with special educational needs and disabilities that helps them to develop their independence and the life skills they need as adults.
SCIP	Social Communication Intensive Packages	Inclusive and preventative packages of support provided to children identified in their nursery year as having social communication needs/ASD in their mainstream setting
SEMH	Social, emotional and mental health needs	A type of special educational need in which children have severe problems in managing their emotions and behaviours.
SEND	Special educational needs and disability	A learning difficulty or disability that requires special education provision to be made for a child or young person.
SRP	Specialist resource provision(s)	Teaching and learning support within a mainstream school that provides support to children with special educational needs and disabilities.

10. ANNEX 1: Deficit Management Plan Financial Model (to follow)

11. ANNEX 2: Performance Dashboard / Key Performance Indicators (to follow)