

SEND Futures Plan Update

1. Introduction

An agreement has been reached between Kingston Council and the Department for Education which aims to address Kingston's Special Educational Needs and Disabilities (SEND) funding gap over the course of the next five years. The finance element of the agreement is covered in paragraph 8 below. The agreement highlights the importance of many aspects of the SEND Futures Plan including:

- Supporting mainstream schools to identify additional needs as early as possible, to provide appropriate support as soon as they can, and thereby reduce escalation in need as much as possible. This relates mainly to children and young people at SEN Support level (and prior to that) and has always been a key element of Workstream 4.
- Expanding local specialist provision to reduce the percentage of EHC plan placements in the independent special school sector. This relates to the increase in local specialist places over recent years and is part of Workstream 3. Despite the progress that has been made, Kingston still has twice as many placements in the independent special school sector as the national average. Improving and creating more local specialist provision has been consistently supported by local families.
- Improving our processes relating to the annual review of EHC plans is a key element of Workstream 5, and reforming the authority's post-16 offer, including the development of new provision, is a specific part of Workstream 3.
- Maximising value for money by improving commissioning practice is key to Workstream 2, as is the ongoing work to make sure that partners contribute to the cost of provision in line with their statutory duties.
- External scrutiny to support the improvement journey has always been welcomed, and will continue to be so.

The SEND Futures Plan is being updated and will return to the Council's Children and Adult Services Committee in June. The SEND Partnership Board dataset is being updated to reflect these updates.

2. Workstream 1: Co-production, engagement and participation

a. Children and Young People

- 24 members involved; 4 non-members; 89 direct work sessions held (1:1 /group), 1 young person supported to join his safeguarding meeting (children and young people across Kingston and Richmond)

i. Information

- Accessible version of KRYC's 'Climate Change Survey created and distributed
- HRCH developed accessible information (appointment letters, hearing clinic leaflet)
- Podcast planning meeting held with 3 young people to be recorded in the New Year

ii. Raising Awareness and Training

- Young people co-delivered 'Young People's Voices' Staff Training
- Workshop delivered at NDTi's National SEND Leadership Programme (70+ delegates) – 2 young people attended and presented (1 young person developed and delivered a presentation for the first time)

- Presentation on SEND Participation co-delivered with 1 young person to Social Care, Occupational Therapy Team
- Youth Offending Service received participation training
- iii. Consultation and feedback**
- Participation Members shared their views in focus groups about support and learning (with AD for SEND), Housing, Outcomes and Libraries
- 1 child was supported to write a letter of complaint
- Children and young people's views have been shared at the Therapies Oversight Group, ASC Strategy Group, RBK SEND Partnership Board, RBK Full Council Meeting and in training and presentations
- iv. Decision making and planning**
- 15 Recruits Crews; 18 young people; 36 candidates; 18 new staff (posts included Art Psychotherapist, Physiotherapist, PFA EHCP Coordinator, Social Care Occupational Therapist and Business Support Officer)
- Young people's SEND Health Group met with DCO & staff from Health Watch
- YP shared her mini-film about Communication at the RBK December Full Council Meeting and asked a question
- 2 young people are involved in the re-commissioning of Independent Advocacy Service
- v. Embedding Practice**
- Information, advice and guidance offered to wide range of teams and professionals, including Health Watch, Universal Participation, Warren Park / Action for Children, HRCH, ISCD and SEN
- 2 new Participation Leads appointed in the Fostering and Social Care Occupational Therapy teams
- Meeting held with Children Looked After Participation Officer about strengthening links between the Children in Care Council and children and young people who are looked after due to receiving overnight short breaks
- vi. What's changed / changing**
- The word 'vulnerabilities' has been removed from the outcomes framework following young people's feedback and replaced with 'needs' (young people said the word 'vulnerabilities' "weakens" them)
- DCO is following up issues raised by young people about specialist dentistry and reasonable adjustments within Covid restrictions
- Easy Info. Group have questioned the need for long, complicated, jargon-y job titles being used by professionals. As a result, HRCH Paediatric Audiologist is proposing naming himself the 'Ear Doctor'
- A child who did not feel listened to during a procedure will have his views taken seriously through his letter of complaint
- Children and young people's views are included in the Autism Strategy Action Plan
- Delegates attending training all made changes following the training, including the development of 'About Me Guides' at Hope House, the creation of a bespoke sticker assessment resource by a social worker in the Referral and Assessment team, and the expansion of 'goal-setting' tools in Occupational Therapy.
- Young people influenced the appointment of 18 new staff
- A young person was supported to understand, attend and contribute to his safeguarding meeting
- Children and young people in Kingston will receive more accessible information and letters from a range of health professionals including Community Paediatricians, Audiologists and Therapists
- 1 YP's Communication Film and question about Communication and information have been shared with RBK Council and via the live-stream
- Following discussions with the Chair of the AfC Board, a stronger link will be established between the Board and Participation Projects, to ensure cyp views are heard by and influence the work of the board

b. Parents and Carers

Huge thanks to parents and carers, including those involved in the Parent Carer Forum, for the time and effort they have contributed to supporting service improvement over recent months.

Notes of the monthly meetings between the Council and the CCG and the Parent Consortium including the Parent Care Forum can be found [here on the Local Offer website](#). Recent deep dive topics have included SEN Support and education health and care needs assessments and annual reviews. A survey of families conducted by the Parent Carer Forum and [discussed at the December meeting can be found here](#).

Also of note is the relaunch of the borough's Disability Register, now rebranded as the Special Educational Needs and Disabilities Register. All families with a child on SEN Support or with an EHC plan have been individually written to via email or post and invited to sign up. The application is much improved on the previous process, and allows easy access to the new Disability Awareness Card which will be promoted amongst local businesses and service providers. More information is available [here on the Local Offer website](#).

This mailshot included flyers advertising the Parent Carer Forum, and linked to their Facebook page (facebook.com/RBKSendPCF) and [new website](#).

3. Workstream 2: Joint Commissioning

a. Recent achievements and progress

- i. Recruitment phase and induction for new recruits within Speech and Language and Occupational therapy has been completed with agency staff used where recruitment has not been successful.
- ii. The Therapies Oversight Group (TOG) is well established and leading the integrated therapies services, this group has members from: AFC, South West London CCG, Your Healthcare, schools, parents and children and young people representation.
- iii. The new joint service specs are being drafted for implementation on 1st April 2021
- iv. Year 2 investment funding priorities have been agreed by TOG and the CCG
- v. Joint commissioner (SWLCCG & AfC) with a dedicated day for SEND to start in March 2021
- vi. [Consultation on short breaks](#) launched on March 23rd and running to 17th May

b. Concerns

- i. Recruitment remains an issue, with some posts filled with agency staff
- ii. COVID-19 impact has meant a reduction in service offer and delays with progressing the integrated service model
- iii. Complexity of the spot purchasing history and moving to a integrated spot purchasing agreement

c. Priorities for the next three months

- i. Agree the service specifications and KPI's for April implementation
- ii. Begin the year 2 priorities (recruitment etc.)
- iii. Agree the spot purchasing arrangements
- iv. Complete consultation on short breaks

4. Workstream 3: Local provision

a. Therapies

- i. Therapies phase 1 completed - appointment of OT and SaLT staff.
- ii. There is a new Specialist Support SEND Team to support parents pre and post diagnosis. Two practitioners cover Kingston (and two cover Richmond) spanning all services from Early Years and upwards. The four practitioners are integrating well, attending forums, panels and meetings to introduce themselves. Their role is to help parents navigate through the local offer and SEND services across AfC and Health, pre and post diagnosis. They are bringing cases to Resilience Networks and problem solving panels.
- iii. Schools have been written to asking for SLA to support phase 2 and input for SEN support
- iv. Therapy providers are starting to standardise processes in line with moves towards an Integrated Care System.

b. Emotional wellbeing and mental health

- i. The Mental Health Support Teams expansion has continued. The Wave 1 cluster is led by Tolworth Girls School. Practitioners working in these teams are known as Educational Wellbeing Practitioners. The Wave 2 cluster launched in January 2021, led by Richard Challenor. Two thirds of secondary schools are now part of clusters and half of primary schools. Work includes early intervention and staff wellbeing.
- ii. Review and analysis of current provision at each tier is progressing, this includes universal mental health teams in schools, tier 2 emotional health service, tier 3 CAMHS through to tier 4 specialist provision. Next steps will outline service gaps linked to waiting times and referrals.
- iii. Links to IThrive established through South West London St Georges so that borough wide activity and cluster development can be progressed

c. Local Places

- i. Collaboration with the new Social Emotional and Mental Health Free School Provider - Ambitious About Autism. Moor Lane site plans progressing
- ii. Malden Oaks SEMH provision increased by 6 places at KS4 and 8 at KS5 to meet increased demand
- iii. Optimistic for additional ESFA SEND capital allocations in March/April
- iv. New Dysart primary provision planned for September to meet increased demand
- v. Alexandra Primary - KS2 SRP building work agreed for September
- vi. Kingston 16-25 campus plan is developing across AfC and Adults' and with Orchard Hill Academy Trust. Business case submitted.

d. 16 to 25 Years

- i. Regarding those not in education, employment and training (NEET) or at risk of being so, new strategic and operational groups have been established to identify potential young people who may be NEET, especially those with EHC plans. These young people will be linked to initiatives such as AfC's Positive Directions and Head 2 Work programmes as well as a range of initiatives delivered by external providers.
- ii. Next steps interviews completed for Y11 young people with EHC plans and who are SEN Support (remotely)
- iii. Strategic discussions continue between adult and children's adult services. Governance and the establishment of a Transitions Board are currently being discussed.

- iv. Links with Maximising Independence Board established

e. Concerns

- i. Delay in Free School building programmes, likely delay of schools opening and subsequent need for temporary provision to meet need until schools open
- ii. Schools' commitment to SLA to fund SaLT for SEN support is not confirmed
- iii. Current health data gaps to give Mental Health overview of current provision
- iv. Challenge of finding a suitable site for the proposed 16-25 campus

f. Priorities for next 3 months

- i. Agree SLA with schools for SaLT provision so that phase 2 planning can begin
- ii. Finalise Mental Health review of current provision
- iii. Initial meeting IThrive to establish wider provision and progress to next step
- iv. Agree business case for Post 16 campus and establish project group across Council, AfC and health teams

5. Workstream 4: Early intervention and planning

a. Recent impact and progress

- i. Roberta Evans, Associate Director Early Help, has joined Sheldon Snashell, Associate Director of Pupil Support, as co-lead of this workstream. Roberta brings excellent knowledge and experience and in addition to providing a valuable link into related social services will lead on the First 1001 days initiative.
- ii. Working group has been established across schools, health and other professionals to look at a Quality First Teaching Charter with a shared philosophy for inclusive practice. There is a core group and 4 sub groups:
 - 1. Quality First Teaching
 - 2. Training
 - 3. Menu of Assessments
 - 4. Interventions: an assessment and screening audit has been completed alongside an audit for wave 2 and 3 interventions to see what schools use and how effective they are. The core group will meet once these audits have been completed to discuss next steps.
- iii. Early Help Resilience Networks
 - 1. Networks held across both boroughs for the three age groups (0-4, 5-10, 11+) in January and February. Range of needs have been presented and all have been sign posted to local services / organisation
 - 2. Excellent feedback received from those observing and presenting - in regard to the range of options available and the chairing of the networks
 - 3. Presentations given to designated safeguarding leads, head teacher forum and sustainable communities (Kingston)

b. Areas where progress has been slower than hoped

- i. Intermittent nature of school has impacted on the success of Emotionally related School Avoidance (ERSA) but plans are in place to regain the momentum we had in the Autumn Term through presenting on it at the SENCO forum's.
- ii. Increasing number of pupils potentially not accessing school for 15 days [cumulatively or consecutively]. A guidance document has been completed to share with schools and external professionals to ensure we are adopting a consistent approach.

- iii. First 1001 days delayed due sickness / changes in leadership. Have developed summary of services across Children's Centres and identified programme to focus specialist provision for babies (Video Interactive Guidance). Still in developing phase.

c. Priorities for next three months

- i. Agreeing a draft Quality First Teaching Inclusion Charter document in place
- ii. A transition protocol in place for 6-7 and post 16 to help guide schools with the transition process
- iii. Embedding of Emotionally Related School Avoidance (ERSA) processes within schools
- iv. Reviewing early impact of resilience networks
- v. More formally launch First 1001 days initiative with marketable "product".

Workstream 5: Assessment and planning

a. Recent impact and progress

- i. Regular multi agency training sessions, e.g. including SENCOs, on developing holistic outcomes over the next year have been agreed. This will support discussions across the system to ensure a shared understanding of the concept of holistic outcomes and how these are developed. Agreement across agencies for staff to complete Council for Disabled Children online training module on developing holistic outcomes.
- ii. Designated Clinical Officer (DCO) has been meeting with therapy providers on mechanisms for QA of advice and deep dive by professional groups.
- iii. Increased links with Health Visiting and School Nursing , DCO SEND update to Health Visiting and School Nursing discussions with Kingston Your Healthcare. This will include consideration of take up of mandatory checks.
- iv. DCO reporting on SEND through CCG Borough Committees
- v. Process around EHC needs assessments has been developed, and consultation has taken place around advice template for health and social care providers. This is now being merged into wider discussions around process and long term move to digitisation. SEND Team attending a meeting with DCO and Health providers in March to further share information on these improvements.
- vi. Bimonthly quality assurance meetings continue with participation from across the system. Balance needed between widening participation to upskill more staff and consistency of judgement between meetings.
- vii. A further workshop on high level outcomes based commissioning framework took place in March to embed this within the implementation of the therapies review. We have previously agreed the overarching high level outcomes in consultation across the system with the Parent Carer Forum and Children and Young People:

- 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"

The next step is to consider how to embed this within service specifications and agreed outcome measures for therapies.

- viii. Work continues related to timeliness of advice as part of EHCNA . February data reflects increase in timeliness however further work is required to triangulate the information as reported through the synergy system and provider database. This timeliness data reflects receipt of advice within the 6 week statutory time frame

Service	Oct 2020	Nov 2020	Dec 2020	Jan 2021	Feb 2021
Paediatrics(AfC)	72% n= 25	75% n= 4	100% n=10	100% n= 11	75% n= 8
Occupational Therapy (AfC)	57% n= 14	100% n= 1	100% n= 6	100% n=2	67% n=9
Speech and Language Therapy (YHC)	67% n= 12	50% n= 2	88% n= 8	33% n= 3	82% n= 11
Physiotherapy (AFC)	73% n= 11	100% n= 2	100% n= 8	100% n= 1	100% n= 6
Social Care	8% n=12	14% n= 7	38% n=8	82%n=11	92% n= 12

- ix. Personal budgets and Continuing Care: Work continues to develop this offer with agreement across South West London for the Continuing Care process for children and young people. Ongoing discussions are happening on an individual basis around support for children and young people who do not meet the threshold for Continuing Care.
- x. Annual reviews: Discussion has started around local practice and participation in annual review , noting the obligation on health partners to “cooperate” and ensuring transparent expectation of attendance / contribution of written reports particularly in the context of change of need and recommendation around changes in provision.
- xi. Tribunal outcomes: Monthly multi agency tribunals panel established to consider appeals in process and learning from past appeals. DCO developing process for tribunal management with CCG and providers particularly related to appeals under the National Trial(Single Route of Redress) . Tribunals Officer and DCO presenting this at the next National Trial event hosted by Mott MacDonald.

b. Areas where progress has been slower than hoped

- i. The review of the golden binder has been slower than hoped due to competing priorities within AfC (many thanks to the parents who have been giving up their time to hello with this).
- ii. Integrating developments in Personal Budgets across AfC and the CCG have taken longer than hoped.

c. Priorities for next three months

- i. Developing and delivering training on Holistic Outcomes across the system

- ii. Ensuring links between service specific QA processes for EHCNA and wider bimonthly QA and ensuring the learning from this activity improves quality.
- iii. Process changes related to EHCNA , linked to move towards digitisation and including introduction of reviewed advice templates.
- iv. Annual review process and participation.
- v. DCO to introduce “health drop in “ sessions for EHCP coordinators developing plans for CYPwith complex health / medical conditions .
- vi. Implementation of tribunals panel and process.

d. Number of education, health and care plan

- i. The total number of Education Health and Care plans maintained by Kingston on 22 March 2021 stood at 1431. This was an increase of 92 over the previous twelve months, or just under 7%. The latest national data for the increase in Education Health and Care plans is for calendar year 2019 when the number of plans increased by 10.2% in England and 10.3% across Outer London boroughs.

8. Finance update

On 19th March Kingston Council announced an agreement with the Department for Education had been secured which aimed to address Kingston’s Special Educational Needs and Disabilities (SEND) funding gap over the course of the next five years. A total of £27 million will be paid, and a £3 million advance received by the council in 2018 will now not have to be repaid. The council will receive £9 million of the money this financial year, along with the £3 million debt write off, totalling a £12 million benefit this year. Additional payments are subject to the Council continuing to make good progress with its SEND Futures Plan. The full details of the agreement can be viewed here on the [Department for Education website](#).

Excluding the new arrangements in this agreement, the High Needs Block overspend in 2020/21 is forecast to be approximately £6.8m, with the Dedicated Schools Grant (DSG) overall due to overspend by £5.7 million. When added to the cumulative overspend from previous years this will take the cumulative overspend in the DSG to £25m at the start of the next financial year.

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