Portsmouth Children's Trust Children's Trust Plan 2016 - 2019



Special Educational Needs and Disability (SEND) Strategy:

A strategy to promote inclusion and improve outcomes for children and young people with SEND and their families

Priority 4

Version 6
Revised September 2017

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PART I: OVERVIEW

1. INTRODUCTION & VISION

The aim of the special educational needs and disability (SEND) strategy is to promote inclusion and improve the outcomes for Portsmouth children and young people aged 0-25 years with SEND and their families.

In order to improve outcomes, we aim to ensure that there are in place a range of high quality support services that contribute to removing the barriers to achievement for all Portsmouth children and young people, in particular those with special educational needs and disabilities. This includes enabling children and young people to lead healthy lives and achieve wellbeing; to benefit from education or training, with support, if necessary, to ensure that they can make progress in their learning; to build and maintain positive social and family relationships; to develop emotional resilience and make successful transitions to employment, higher education and independent living.

Principles underpinning the strategy:

- Inclusion of children and young people with SEND, with needs met locally wherever possible
- Co-production with children and young people and their parents and carers
- Joined-up multi-agency working across the local area
- Personalisation and person-centred approaches
- Early identification and support
- Holistic, multi-agency, co-ordinated outcomes-focused assessment and planning
- Key working and family-centred systems
- A skilled and confident multi-agency workforce
- Informed and empowered parents and young people
- More choice and control about the services received
- Joint planning for transitions, including a smooth transition to adult services
- Improved care pathways and clear lines of responsibility
- Equal access to services for children and young people with SEND
- High aspirations for children and young people with SEND to achieve the best possible outcomes

Legislation which underpins this strategy:

The delivery of support for children and young people with SEND and their families is underpinned by a number of key pieces of legislation, including:

- Children and Families Act 2014 and the SEN code of practice
- Children Act 1989 and 2004
- Care Act 2014

- Working Together to Safeguard Children 2015
- Children and Young Persons Act 2008
- Care Planning, Placement and Case Review (England) Regulations 2010
- Care Leavers (England) Regulations 2010
- Chronically Sick and Disabled Persons Act 1970
- Mental Capacity Act 2005
- National Health Service Act 2006
- Mental Health Act 2007
- Equality Act 2010
- NHS Mandate
- Public Health Outcomes Framework

The Children and Families Act 2014, introduced significant changes to the ways services are provided for children and young people aged 0 to 25 with SEND, and their families. Key changes include:

- Joint commissioning of services required across education, health and social care to meet the needs of children and young people with SEND.
- Publication of a 'local offer' of services available, as a 'one stop shop' for accessing information, as well as feeding into the commissioning cycle.
- Implementation of a multi-agency co-ordinated statutory assessment process to identify the education, health and care needs of children and young people aged 0 to 25 and the provision required to meet those needs.
- For the identified needs and provision to be set out in a statutory 'Education, Health and Care Plan' (EHCP), with a new duty on health to deliver the health element of the EHC Plan.
- For all those who have an EHCP in place, to have the option to request a 'Personal Budget' for delivery of identified aspects of the EHCP.
- Statutory protections currently available to school-age children with special educational needs, through a statement, will be extended from 0 to 25 years, where additional resources are required to enable access to education or training.
- Independent information and support will be available to parents and to young people about the services available to them and how to access support, where appropriate.
- The above new duties will apply to all education providers, schools academies, FE colleges, training providers etc.

In Portsmouth, we are working hard to successfully implement the reforms in compliance with the new SEN Code of Practice and in the spirit of the reforms. This includes planning for the transition from the current system to the new system by 2018.

Alongside the introduction of a new system for the delivery of SEND services across education, health and care, there are existing pressures on special educational provision within the city, including pressure on the places available to meet some areas of need, as well as pressure on the budget available to resource such provision. In addition, there are new initiatives which have an impact on the support available for children and young people with SEND.

National initiatives which have an impact on SEND include:

- Future in Mind https://www.gov.uk/government/publications/improving-mental-health-services-for-young-people
- Educational Excellence Everywhere white paper https://www.gov.uk/government/publications/educational-excellence-everywhere
- High needs funding reforms white paper
 https://consult.education.gov.uk/funding-policy-unit/high-needs-funding-reform
 2/supporting_documents/High%20needs%20funding%20reform%20%20gove rnment%20response%20and%20stage%202%20proposals.pdf
- Transferring Care Programme https://www.england.nhs.uk/learning-disabilities/care/
- Integrated Personalised Commissioning (demonstrator site for NHS England) https://www.england.nhs.uk/commissioning/ipc/
- Sustainability and Transformation Plan https://www.england.nhs.uk/stps/

Local initiatives which have an impact on SEND include:

- Stronger Futures
- Education Strategy
- Autism Strategy
- Portsmouth blueprint

The combined impact of these initiatives will bring about significant changes in the way that services are provided to children and young people with SEND. An aim of this strategy is to co-ordinate the implementation of these changes in order to improve outcomes for children and young people with SEND.

Key outcomes to be achieved

This strategy aims to achieve increased percentages of children and young people with SEND who are able to:

- 1. Be included within their local community,
- 2. Lead healthy lives and achieve wellbeing,
- 3. Learn and make progress,
- 4. Make and maintain positive relationships within their family and community
- 5. Participate in education and training post-16 and prepare for employment

2. STRATEGIC OVERVIEW

The aim of the special educational needs and disability (SEND) strategy is to promote inclusion and improve the outcomes for Portsmouth children and young people aged 0-25 years with SEND and their families.

There are six strands of the SEND Strategy:

Strand A: Promote good inclusive practice to improve

outcomes

Strand B: Successful implementation of the SEND reforms

Strand C: Effective joint commissioning to improve outcomes

Strand D: Co-production, embedded as a way of working with

children, young people and their parents and carers

Strand E: Early identification and early support for children

with SEND and their families

Strand F: Effective preparation for adulthood and smooth

transitions to adult services

Strand A: Promote good inclusive practice

Portsmouth currently identifies a higher percentage of children as requiring SEN Support and maintains a higher percentage of pupils with statements/EHCPs than the national average (3.1% compared to 2.8%). Portsmouth is currently experiencing:

- Increasing numbers of requests for statutory assessment,
- Increasing requests for element 3 funding as recommendations from annual reviews of statements/EHCPs.
- Increasing requests to place pupils in specialist provision,
- Increasing numbers of first tier tribunals as a result of managing these pressures.

The numbers of pupils being placed at independent or non-maintained special schools outside of Portsmouth has grown significantly since 2012. This is, in part, due to an increase in the numbers of looked after children (LAC) with statements being placed in foster or other care arrangements outside of the city, and where the LAs in which they are placed have no capacity in any maintained special educational provision suitable to meeting their needs. This has increased the pressure on the SEN budget drawn from the dedicated school grant (DSG).

Speech, language and communication needs (SLCN) and Autistic Spectrum Disorders (ASD) account for more than 40% of all PCC statements. Numbers of children with these areas of needs are increasing nationally, with growing sophistication in assessing and diagnosing these conditions contributing towards increased identification. Prevalence of Severe Learning Difficulties (SLD) and Visual Impairment (VI) are also growing while traditional identification of, for example Moderate Learning Difficulty (MLD), are falling. In addition the Children and Families Act 2014 (Section 100) places a duty on governors of schools and academies to make arrangements for supporting pupils at their school with medical conditions.

Portsmouth mainstream schools are better resourced and enabled than ever to deliver inclusive practice and make provision for pupils with special educational needs & disabilities. Underpinning pedagogical approaches such as quality first teaching and the waves of SEN interventions are now well embedded in school culture to enable good teaching; since 2009, all school SENCOs have been required to achieve accreditation at MA level and be recognised as senior leaders within their schools; Portsmouth's SEN funding formula (in line with DfE guidance) now makes resources available to schools in order to make *up* to the first £6,000 of *additional* and different provision; the local authority commissions specialist teaching advice to mainstream schools and academies from the city's maintained and academy special schools which offers a broad menu of specialist teaching advice and training.

Pupils with SEN achieve better outcomes, in general, when educated in mainstream schools alongside mainstream pupils¹. The converse is only true for pupils who require specialist provision because they have significant or complex needs. However, more than half of Portsmouth's pupils with statements are educated in

¹ Inclusive education and students without special educational needs: (Nienke M. Ruijs, Ineke Van der Veen & Thea T.D. Peetsma, 2010)

special schools, resourced provisions or units. A local culture has grown among professionals and parents who have an overreliance and expectation of making pupils statements, seeking element 3 funding and to seek placements in resourced provisions, units and special schools.

The aim of this strategy is to improve services in order to increase inclusion and improve outcomes for children and young people with SEND, and their families. Every child and young person with SEND deserves to be included within their local community and to receive services locally wherever possible. In order to improve outcomes for children and young people with SEND in the city, we need to ensure that we are targeting the resources available in order to ensure that needs are met from ordinarily available provision where appropriate so that targeted and more specialist support can be provided for those who most need it.

Achieving a more inclusive ethos across education, health and care services across the city will require whole system change. There will need to be a change in expectations for professionals commissioning and providing universal, targeted and specialist services, as well as for services users including parents and carers. This strategy aims to develop a shared understanding across all of those groups and services about what makes good inclusive practice, and why it is important.

We will work with commissioners to promote inclusive practice and ensure that the eligibility criteria for services promotes inclusion and with providers to ensure that all services contribute to the shared outcomes of increased school attendance and reduced fixed period exclusions from school for children with SEND, by ensuring that there are clear pathways in place to resolve issues of managing inclusion particularly in relation to social emotional and mental health difficulties, alongside the Future in Mind work that is progressing.

We will build capacity within universal services through the provision of outreach, support and workforce development to increase the confidence and competence of practitioners in meeting the needs of children with SEND. We will celebrate and further promote good inclusive practice in the city through the annual Portsmouth Inclusion Conference.

The development of more inclusive practice within educational settings (schools, colleges and early years settings) will be overseen by the **Inclusion Group**.

Strand B: Successful implementation of the SEND reforms

The changes set out in Part 3 of the Children and Families Act came into force in September 2014. Successful implementation of the SEND Reforms will establish a more person- and family-centred system for identifying and assessing the needs of children and young people with SEND and a more co-ordinated approach to commissioning the provision to ensure that these needs are met effectively.

The co-production and maintenance of an up to date and comprehensive Local Offer of all services available to Portsmouth children and young people with SEND and their families across education, health, care and the voluntary sector, remains central to the successful implementation of the SEND Reforms. This 'one stop shop' of information about services and support available to families will need to continue to be developed to ensure that it provides the information families need, enables them to provide direct feedback about the offer of services available and feeds in to the SEND joint commissioning cycle.

The SEND Reforms focus on those children and young people who require SEN support as well as those who require additional resources via an Education Health and Care Plan. We will work to develop a shared understanding of what support can be provided from universal and targeted services via the publication and dissemination of an agreed 'Ordinarily Available Provision' suite of documents which set out what services are available to children and young people with SEND and their families across education, health, care and the voluntary sector, without the need for an Education Health and Care Plan. This work will be taken forward by the School Inclusion Group which will identify and implement the key factors required to develop more inclusive practice in mainstream schools across the city.

For those children and young people with the most complex needs, who require an Education health and care needs assessment and plan, we have implemented a coordinated, multi-agency, outcomes-focused assessment process, compliant with the new SEN Code of Practice. We will continue to refine this process, as a result of the feedback we receive from families e.g. from User Journey Mapping. We will continue to monitor and improve the quality of Education Health and Care Plans via termly audits.

We want to give more choice and control to families about the way in which they access the support they are entitled to such as targeted and statutory short breaks and home to school transport assistance. We will do this by expanding the use of personal budgets and direct payments for those entitled to access this support and implementing the use of pre-paid cards for direct payments.

We want families to be empowered to make best use of the resources available to them. In order to do this, parents and young people will continue to need access to independent information advice and support and we will ensure that effective and high quality IASS is available to families in Portsmouth.

The successful implementation of the SEND reforms self-assessment and implementation plan in Portsmouth is overseen by the **SEND Implementation Group.**

Strand C: Effective joint commissioning to improve outcomes

We want to have in place a genuinely co-produced and transparent joint commissioning plan for SEND in Portsmouth that sets out the priorities for commissioning and the resources available as well as the shared outcomes to be achieved.

The principles which will underpin this commissioning plan include:

Making effective use of data - including the SEND Children and Young People's strategic needs assessment (Part of the Joint Strategic Needs Assessment) to identify gaps in provision and ensure that services are commissioned to meet the identified need.

Ensuring a continuum of provision that promotes inclusion - eligibility criteria and access to all services for children and young people with SEND across education health and care should ensure that:

- children and young people's needs are met at the least restrictive level, wherever possible,
- needs are met locally, where appropriate and
- there is efficient and effective use of the resources available.

Co-production - all services are designed in partnership with service users as key stakeholders. Ongoing feedback from service users and stakeholders is sought proactively and this is used to inform ongoing commissioning priorities.

In working towards this, we have undertaken SEND reviews in the 4 key areas of special educational needs and disabilities:

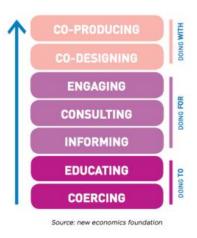
- Cognition and learning
- Communication and interaction
- Sensory and physical
- Social emotional and mental health

Priority actions within each area of SEND have been identified, and a number of actions have been undertaken already to progress this.

A stakeholder workshop has been held to start the process of co-producing the commissioning plan. The SEND Joint Commissioning Plan will be overseen by the **SEND 0-25 Joint Commissioning Steering Group.**

Strand D: Co-production, embedded as a way of working with children, young people and their parents and carers

Co-production is working in collaboration with service users, as equal partners in the strategic planning, design, review and (re-)commissioning of services.



'Co-production means delivering public services in an equal and reciprocal relationship between professionals, people using services, their families and their neighbours. Where activities are co-produced in this way, both services and neighbourhoods become far more effective agents of change.'

New economics foundation: The Challenge of Co-Production 2010

We want to embed co-production as the way of doing business in Portsmouth when planning and commissioning services for children and young people with SEND and their families because we believe that where services are co-designed with service-users they are more likely to meet needs effectively and they enable service users to have more choice and control over increasingly personalised solutions to achieve their identified outcomes

In Portsmouth we have a strong track record of partnership working with parents and carers, building on work highlighted within the Lamb enquiry report (2009). Parents and carers take part in decision-making (e.g. as trained members of the Inclusion Support Panel) and contribute to all subgroups of this strategy, including co-chairing the SEND Board. We want to build on this good practice to further embed co-production in all areas of working to support children and young people with SEND and their families.

The embedding of co-production with young people and parents and carers as a way of working in Portsmouth will be overseen by the **Co-production Group.**

Strand E: Early identification and early support for children with SEND and their families

Early identification is essential to ensure good outcomes, but without early intervention it can result in labelling and a within-child model of thinking where problems are seen to be the result of within-child factors and therefore not able to change.

In Portsmouth we see SEND as the result of the interaction between the child and their environment. We believe that all children can make progress, with the right environmental factors in place. We want to ensure that assessments are undertaken and services provided on the basis of need, rather than a label or diagnosis. We are therefore keen to promote a needs-led process of assessment and planning for children and young people with SEND across all services.

For young children, it is often health professionals, from universal services who are first involved with families when difficulties are identified. We want to ensure that all practitioners are working to an agreed set of principles of key-working, needs-led assessment and collaboration to ensure that the families of very young children who are experiencing SEND have the best possible experience of receiving support from the necessary services to ensure that needs are assessed and support put in place at the earliest opportunity.

Ensuring that effective early identification and support is co-ordinated in Portsmouth will be overseen by the **SEND Early Intervention and Support Group**.

Strand F: Effective preparation for adulthood and smooth transitions to adult services

Ultimately, young people with SEND want what all young people want, to live healthy, independent lives and have positive relationships within their family and community. Our expectation is that young people with SEND will engage in education and training in order to prepare for employment to be able to live independently.

We have high aspirations for all our young people and want to ensure that there are services and support in place to enable them to achieve their own personal goals in relationship to the four PfA outcomes. We aim to work with young people with SEND post-16 to empower them to access the support that is available in order to achieve their potential.

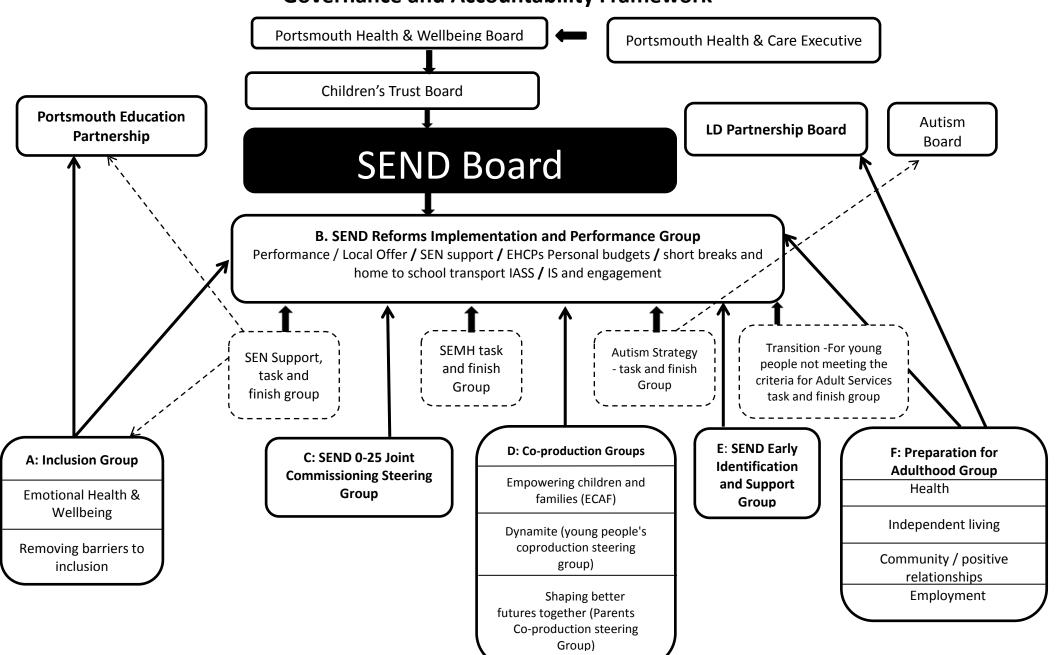
Ensuring that all young people with SEND are able to achieve a smooth and successful transition to adulthood is overseen by the **Preparing for Adulthood Group**. This group also reports to the Learning Difficulties and Disability Partnership Board.

The work of Preparing for Adulthood group has a focus on the achievement of 3 outcomes:

- To be assured that the Education, Health and Care planning process identifies and works towards the realisation of PfA outcomes for the those in transition.
- To be assured that the Education, Health and Care planning process supports commissioning including for people with autism.
- To be assured that processes enable effective transition for people into and following on from post-16 education and training.

The PfA group is working closely with post -16 providers to support the development of their provision and improve collaboration with other services in order to deliver PfA outcomes. This includes a clear focus on inclusion, independence and progression to employment.

Special Educational Needs and Disability (SEND) Strategy: Governance and Accountability Framework



PART II: THE STRATEGY

Here we outline the main workstrands of the strategy, provide the long-term plan, a summary of the current position and the next steps to be taken in 2017/18.

STRAND A: PROMOTE GOOD INCLUSIVE PRACTICE

The Long-Term Plan

For Portsmouth to be a leading example of good, inclusive practice, with the vast majority of children and young people with SEND able to have their needs identified early and met within what is 'ordinarily available' (universal and targeted services) across education, health and care. Staff are confident to meet the needs of the majority of children with SEND. Where additional support is required, this is accessed in a timely way and is of a high quality so that needs are met and outcomes improve.

Priorities for this strand of work

- A1. Removing barriers to inclusion
- A2. Well-being and resilience
- A3. Build capacity and develop the workforce

What we achieved in 2015-16

- Established an annual conference to share and celebrate good practice
- Revised the service level agreement for the provision of outreach services
- Developed an 'Ordinarily Available Provision' document for school SENCos

What we have achieved in 2016-17

- Developed the Ordinarily Available Provision suite of documents
- Developed a shared understanding of how we monitor 'good progress' for those on SEN Support
- Developed an offer of school SEN support to promote good inclusive practice
- Monitored the impact of the outreach service in building capacity within mainstream schools
- Delivered the annual Inclusion Conference
- Developed the well-being and resilience strategy

What we will deliver in 2017-18

To remove barriers to inclusion by:

 Mapping the resources available to education providers to support children and young people with SEND

- Monitoring the progress and educational outcomes for pupils receiving SEN Support
- Mapping the Alternative Provision offer and monitoring the impact of Alternative Provision

Implement the emotional well-being and resilience strategy, including:

- Provide a central source of information about social, emotional and mental health (SEMH)
- Improve communication between agencies and education providers supporting children and young people with SEMH needs
- Provide training on SEMH for education professionals
- Make self-help and peer support available for children, young people and their families
- Improve access to specialist services for children and young people with SEMH needs

Monitored via

Inclusion Group

Chair: Nys Hardingham

Removing barriers to inclusion subgroup

Chair: Neil Stevenson

Emotional health and well-being subgroup

Chair: Sarah Christopher

STRAND B: SUCCESSFUL IMPLEMENTATION OF THE SEND REFORMS

The Long-Term Plan

For Portsmouth to have successfully implemented the SEND reforms, as outlined in part 3 of the Children and Families Act 2014 (often described as a 10 year whole system change programme). Ultimately this will be independently tested via the Ofsted/CQC SEND inspections process.

The SEND Strategy (alongside its sister strategy 'Stronger Futures') makes up the children's element of the Portsmouth 'Blueprint' for health and care in the city, which sets the ambition to more strongly integrate public service spending across the local public service system.

Priorities for this strand of work

- B1. Local Offer
- B2. SEN Support
- B3. EHC assessments and plans
- B4. Personal budgets, short breaks and home to school travel assistance
- B5. Independent advice and support and engagement

What we achieved in 2015-16

Good progress has been made in implementing the SEND Reforms to date. Portsmouth are compliant with all new statutory duties.

A self-assessment has been undertaken and an implementation plan is in place.

What we achieved in 2016/17

- Further developed the Local Offer
- Maintained the high quality of our EHCPs
- Improved the % of EHCPs completed within statutory timescales to 98%
- Increased the number of Personal Budgets included within EHCPs
- Published the revised Short Breaks statement and eligibility criteria
- Increased the number of direct payments in place
- Commissioned Portsmouth IASS
- Continued parent and young people's engagement work, including coffee mornings and pizza evenings delivered by PPV and Dynamite

What we will deliver in 2017-18

- Develop a shared understanding of Ordinarily Available Provision and the threshold for requesting an EHC needs assessment
- Improve outcomes for children and young people on SEN Support
- Improve quality and timeliness of EHC evidence/statutory advice
- Maintain quality and timeliness of EHCPs
- Further develop the Local Offer in response to feedback from young people
- Recommission targeted short break offer
- Increase the number of personal budgets and direct payments included within EHCPs
- Monitor progress and improve outcomes for children and young people with SEND from vulnerable groups
- Improve the experience of transition for children and young people with SEND and their families
- Co-produce all EHCPs with children, young people and parents/.carers
- Enable children and young people with SEND and their parents/carers to contribute to strategic decision-making about local provision
- Maintain strong leadership and lines of accountability for the SEND Strategy
- Joint plan and commission provision for children and young people with the most complex needs who require jointly funded packages of support
- Continue to improve services by learning from complaints and tribunal cases

This group will take on the role of monitoring the performance indicators across the whole SEND Strategy, prior to quarterly performance being reported to the SEND Baord.

Monitored via

SEND Implementation and Performance Group Chair: Julia Katherine

STRAND C: EFFECTIVE JOINT COMMISSIONING TO IMPROVE OUTCOMES

The Long-Term Plan

Education, health and care work together to carry out an annual joint strategic needs assessment of the needs of children and young people aged 0-25 with SEND and their families as part of the Joint Strategic Needs Assessment. This data is used to identify gaps in provision and to agree priorities for commissioning with service users. The joint commissioning plan is co-produced with children and young people with SEND and their parents and carers.

Priorities for this strand of work

- C1. Cognition and learning
- C2. Sensory and physical
- C3. Communication and interaction
- C4. Social emotional and mental health

What we achieved in 2015-16

An initial joint strategic needs assessment for 0-25s with SEND has been carried out.

Reviews have been carried out in each of the 4 areas of need and action plans have been developed based on the recommendations of each:

- Sensory and Physical
- Cognition and Learning
- Communication and Interaction
- Social Emotional and Mental Health

What we have achieved in 2016-17

- SEND Needs Assessment has been completed
- Joint Commissioning Plan has been agreed across the CCG, local authority, Schools, Solent and Portsmouth Parent Voice.

Specific achievements include:

Sensory and Physical

• Reviewed the wheelchair service - following feedback re: waiting times

Cognition and learning

- Re-designated Cliffdale and Redwood Park as special schools for children with complex needs and autism
- Began phased remodelling of the accommodation at Cliffdale and Redwood Park in order to enable these schools to provide effectively for children with more complex needs and autism

Communication and interaction

- Established a new Inclusion Centre for secondary aged pupils with communication and interaction needs (including autism) at Trafalgar school
- Established new Inclusion Centres for primary pupils with communication and interaction needs (including speech and language difficulties and autism) at Devonshire Infants and Portsdown Primary schools.

Social emotional and mental health difficulties

- Re-defined the AP and SEN pathways for children with SEMH
- Developed new SLAs with The Harbour School and Flying Bull for the provision of SEMH support to children and young people within the city
- Included Future in Mind developments within joint commissioning plan

What we will deliver in 2017-18

- SEND needs assessment to be refreshed
- SEND Strategic Review to be carried out to inform future commissioning
- SEMH mapping and stock-take to be carried out
- Complete CAMHs needs assessment and new CAMHs specification
- Children and young people's Autism strategy to be developed
- Provider to be identified for new special free school for children and young people with Autism
- Integrated Personalised Commissioning to test out methodology for delivering Personal Health Budgets for children

Monitored via

SEND 0-25 Joint Commissioning Steering Group

Chair: Hayden Ginns

STRAND D: CO-PRODUCTION, EMBEDDED AS A WAY OF WORKING WITH CHILDREN, YOUNG PEOPLE AND THEIR PARENTS AND CARERS

The Long-Term Plan

For Co-production with children and young people with SEND and their parents and carers to become embedded as a way of working both at the strategic level and at an individual case work level.

Priorities for this strand of work

- D1. Co-production with parents and carers
- D2. Co-production with young people

What we achieved in 2015-16

A Parents and Carers Co-production group is established and has completed key tasks including designing the Local Offer website.

There is a parent/carer co-chair of the SEND Board and parent/carer reps on all subgroups of the SEND Strategy

A Young people's Co-production group is established 'Dynamite' and has completed tasks including a young people's survey 'The Big Bang'.

What we achieved in 2016-17

- Dynamite coproduced 2nd annual survey which reached over 100 young people
- Established of a Young Inspectors programme 12 trained Young Inspectors are regularly visiting a range of services and submitting reports
- Training delivered by young people to 25 professionals across agencies
- Widened parent/carer engagement activity to include parents of children on SEN Support and recruited 13 SEN Champions in mainstream schools
- Appreciation awards have been presented to around 30 professionals
- Recruited and trained new parent/carer reps on the Inclusion Support Panel

What we will deliver in 2017-18

 Incorporate ECAF into the SEND Strategy governance and accountability structure, with the parent/carer co-production group and Dynamite (young people's co-production group) reporting to ECAF, which in turn reports to the SEND Board

- Re-purpose and refresh the terms of reference of the parent/carer coproduction group (renamed Shaping Better Futures Together) to take on a more strategic role
- Embed coproduction across the city e.g. via Top Tips for professionals, Coproduction pledge, celebration events and a Coproduction Conference
- Continue to develop the Social Emotional and Mental Health (SEMH)/Future in Mind (FiM) work in partnership with the FiM Coproduction group
- Continue Young Inspectors programme
- Co-produce information for Parents/Carers and Young People including:
 - Easy read SEND Strategy
 - Transition guide for parents/carers
 - Enuresis & Encoporesis pathway
 - Parenting Offer

Monitored via

Empowering Children and Families (ECAF) Chair: Lynne Rigby and Richard Souter

Shaping Better Futures Together

Chair: Kara Jewell

Dynamite Core Group Chair: Joe McLeish

STRAND E: EARLY IDENTIFICATION AND EARLY SUPPORT FOR CHILDREN WITH SEND AND THEIR FAMILIES

The Long-Term Plan

For children's needs to be identified and support put in place at the earliest opportunity.

For families to experience the involvement of various professionals in assessment and providing support as a joined up and co-ordinated process.

Priorities for this strand of work

- E1. Early identification and assessment
- E2. Early support to improve outcomes
- E3. Workforce development

What we achieved in 2015-16

There is an effective Early Years Panel in place whereby health and education professionals share information and jointly plan to ensure that the needs of young children and SEND are identified and met.

What we have achieved in 2016-17

- Robust multi-agency Early Years Panel in place to co-ordinate assessments and track progress of 0-4 year olds with SEND to ensure that needs are identified and panned for prior to starting school
- The Early Years Panel has taken on the allocation of the Inclusion Fund
- Re-established the Early Years SENCo network meetings
- Early Years settings are making EHC requests with support from EYATs
- Developed training offer for early years practitioners

What we will deliver in 2017-18

- Revise the Early Years pathway, ensuring that there is a co-ordinated process that enables early identification of needs and effective sharing of information between agencies to plan and implement timely support
- Review the Early Years Panel process to ensure that information is shared effectively across agencies and is used to inform commissioning priorities
- Ensure that 'key working is in place for families, where appropriate
- Strengthen the links with the Prevention and Early Help service

Monitored via

SEND Early Intervention and Support Group Chair: Carol Stevens

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STRAND F: EFFECTIVE PREPARATION FOR ADULTHOOD AND SMOOTH TRANSITIONS TO ADULT SERVICES

The Long-Term Plan

For all young people with SEND to have a clear plan in place that identified outcomes and resources to enable a smooth transition to adulthood, able to access the support they are entitled to in order to achieve their identified outcomes.

Priorities for this strand of work

To ensure that each young person has a plan in place which they 'own' and which identifies clear outcomes and actions relating to each of the PfA outcomes i.e.

- Health
- Independent Living
- Positive relationships/community
- Employment

To develop a range of services and support that will help young people achieve these outcomes

To have a clear pathway in place for 14 to 25 years olds with SEND

What we achieved in 2015-16

- Rolled out person-centred approaches to all young people with SEND
- Worked with colleges to develop supported internship programmes

What we have achieved in 2016-17

- Extended the provision of supported internships
- Ensured that clear transition pathways are in place so that young people do not 'fall through the net' when they reach 18.
- Developed tools and guidance to ensure that PfA reviews are focused and effective
- Carry out pilot of 'Ready Steady Go' health transition programme with schools
- Review the role of the Child Autism Co-ordinator

What we will deliver in 2017-18

 Ensure that the education health and care planning process identifies and works towards the realisation of PfA outcomes for those in transition

- Explore good practice relating to the PfA outcomes and benchmark against local practice
- Develop tools to support the PfA outcomes
- Devise method of collating information from PfA outcomes in EHCPs to inform commissioning
- Ensure there are clear pathways for assessment and support for people with Autism
- Ensure that processes enable effective transition for people into and following on from college, including supporting the Partners in Policymaking project

Monitored via

Preparing for Adulthood Group

Chair: Mark Stables

PART III: DELIVERY

The next section includes the detailed delivery plans for each of the workstrands of the strategy for 2016/17 and 2017/18. Monitoring arrangements are via each of the Subgroups of the SEND Board, with quarterly reports from each of the subgroups to the SEND Board.

2017/2018 Delivery Plans (Below)

Childrens Emotional health and wellbeing (Page 29 - 34)

Removing Barriers to Inclusion (Page 35 - 38)

SEND Reforms Implementation Plan (Page 39 - 46)

Joint Commissioning Plan (Page 47 - 63)

Early Identification plan (Page 64 - 65)

PFA Sub group Action Plan (Page 66 - 74)

Appendices

Appendix I: Performance Framework (Page 75 - 118)

DELIVERY PLAN (September 2017 - September 2018) - Emotional Health and Wellbeing

1. To improve access to specialist services including direct work with young people and advice and training and consultation for professionals

Areas to develop:

- a) Review the current CAMHs offer to schools
- b) Develop a traded offer of additional support to schools and colleges
- c) Develop a Quality Assurance Framework for selecting private and voluntary sector
- d) Increase School awareness of current services, thresholds and professional advice available

Recommendations	Expected impact	Actions	Lead	By When	Evidence
1a) Review the current CAMHs offer to schools and colleges	An analysis of the existing offer will inform commissioning and increase equity across education settings	Review the impact of current school clinics and CAMHS' capacity to provide ongoing or additional clinics. All secondary schools have equitable access.	Stuart McDowell	Dec 2017	Findings of review fed back to Inclusion Group
		Review the offer for primary schools			
1b) Develop an offer of additional support to schools and colleges including traded services	Settings will be able to access support form reliable sources. Central commissioning and the option to pool budgets will provide better value.	Identify the central resources available to support or subsidise the offer. Involve all current providers eg EPS, MABS, CAMHS, U Matter. Use an analysis of the survey monkey results to inform the new offer	Stuart McDowell/ Sarah Christopher	February 2018	PEP, local offer and traded services websites
1c) To map the existing training offer to schools from different providers And provide a collaborative approach	Use the findings from mapping and analysis of the Survey Monkey results (Summer 17) to develop a coordinated approach to a	Work with partners, including CAMHS, EPS, TSA and MABs to provide a coherent overview of training available for the academic year	Sarah Christopher	March 2018	Training brochure and information on websites.

to planning ongoing training	training programme for 18/19.				
1d) Increase School awareness of current services, thresholds and professional advice available	Education settings will be clear about what services are available, how to access them and the criteria for referral.	Information about services and regular updates are sent to all settings via the wellbeing leads. Feedback from networks, including SENCO, Primary Behaviour and Pastoral Strategic leads and lead links are used to inform updates, information and training	Sarah Christopher	Nov 2017	Service information documents are in settings and online, There is an increase in te number of appropriate referrals to specialist services.

2. To provide a central source of information

Areas to include:

- a) An SEMH section on the PEP website
- b) Access to online SEMH advice and resources for parents/carers and young people
- c) The role of the named wellbeing leads

Recommendations	Expected impact – how will this improve outcomes?	Actions	Lead agency Lead officer	By When	Evidence
2a) Develop an SEMH section on the PEP website.	Education settings have access to a one stop shop for information relating to SEMH.	Provide a clear structure to the SEMH pages on the pep website Provide links to all relevant local and national services, resources and information Keep all information under regular review	Sarah Christopher	Jan 2018	Website
2b) Develop access to online SEMH advice and resources for parents/carers and young people	Parents/ Carers, Children and young people have access to a one stop shop for information relating to SEMH	Review the current information on the Local Offer in relation to SEMH. Review the information on the PEP website Provide dedicated pages for parents/ carers and young people.	Barbara McDougall and Joe McLeish	July 2018	PEP Web pages and link to Wessex Healthier together website.
2c) Develop the role of named wellbeing leads	Information shared with education settings gets to the right people in a timely fashion. Settings know who they can contact for advice and support.	Collect and collate names of wellbeing leads from all education settings. Review these annually. Establish clear means of communication with leads via regular newsletters.	Sarah Christopher	Dec 2017	Central list of named leads

DELIVERY PLAN	(September 2017	 September 2018) - 	Removing Barriers to Inclusion

	Make named leads aware they can contact CAMHs SPA, or Sarah Christopher		

3. To provide access self-help and peer support for children, young people and parents/ carers.

Areas to include:

- a) Anti- Bullying
 b) Peer mentoring
 c) Parenting offer
 d) PSHE curriculum
 e) Restorative approaches are developed across all education settings in Portsmouth

Recommendations	Expected impact – how will this improve outcomes?	Actions	Lead agency Lead officer	By When	Evidence
4a) To refresh the Anti-	Bullying is addressed	Review Resource pack to reflect	Sarah	Nov	Resource Pack
Bullying guidance and	effectively in all settings	changes to guidance, legislation	Christopher	2017	
resource pack for schools		and services			
		Publish pack including discrete sections on different types of bullying			
		Produce guidance for schools on supporting young people who		March	
		identify as Trans		2018	
4b) Peer Mentoring is used	There is a sustainable	Develop a Training the Trainers	December	March	Case studies
to provide support to	programme of Peer	programme for Peer Mentoring	2018	2018	
children and young people	Mentoring which provides				
	direct support in schools	Provide networking opportunities			
	and colleges.	city wide for peer mentors and			
		staff who supervise peer		Sept	
		mentors		2018	

4c) Link with Early Help to align the parenting offer with the schools wellbeing and resilience strategy. Review the "parenting offer" and the support that is available to parents	Parents access non-judgemental support in relation to their child's mental health and behavioural needs. Schools are able to support parents in accessing support and advice.	Establish and Maintain links with the parenting pathway, behavioural support and the early help offer to provide coordinated information to schools.	Sarah Christopher with Early Help		Early help and parenting offer on PEP website, local offer and links of schools websites.
4d) Curriculum approaches including PSHE develop wellbeing and promote resilience	Children and young people have a range of opportunities, cross- curricular and through PSHE to learn about and discuss wellbeing	Information and resources from the PSHE association and Public Health England are shared with schools. Ascertain the support school require from the PSHE development offer to assist in recruitment to this post.	Sam Belfrage	July 2018	Links on website and in EHWB Newsletter.
4e) Restorative approaches are developed across all education settings in Portsmouth	Education settings have a good level of awareness of restorative practices and use restorative approaches	Evaluate the impact of trailblazer restorative schools Use the Restorative Schools Network and PEP website to share case studies and good practice Extend the invite to the restorative schools network to all schools (all schools to be involved by September 2019)	Sarah Christopher and Matt Hutton	May 2018	Reports to the Restorative Practice Group and Restorative Schools Network

DELIVERY PLAN (April 2017 - March 2019) - Removing Barriers to Inclusion

- 1. To develop a shared understanding of what we mean by successful inclusion and seek the support of key stakeholders and leaders across the city in working towards Portsmouth becoming an inclusive city.
- 2. To understand the resources that are available to mainstream schools, colleges and early years settings to support children and young people with SEND

Areas to develop:

- e) Map the existing offer of external support for schools, colleges and early years settings.
- f) Provide guidance for schools, colleges and early years settings in identifying SEND
- g) Refresh the Ordinarily Available Provision documents for schools, colleges and early years settings.

Decemmendations	Evented impost	A ations	Lood	Dv When	Cuidence
Recommendations	Expected impact	Actions	Lead	By When	Evidence
2a) Map the existing offer of external support for schools, colleges and early year's settings	Education providers will be clear about the external support available, including from health	Clear information for schools, colleges and early years settings will be published on the local offer and the PEP websites	Sarah Christopher	Jan 2018	Web page links to Local Offer and PEP websites
2b) Clarify threshold for identification of SEN support (using profile and need) and to provide guidance for schools, colleges and early years settings in identifying SEND	SENCos will be consistent in the way they identify pupils for SEN support and will be clear about thresholds for requesting EHC needs assessments	Guidance documents will be refreshed and published on the local offer with input from SENCos	Sarah Christopher	March 2018	Link to Local Offer web page
2c) Refresh the Ordinarily Available Provision (OAP) documents for schools,	Parents will be clear about what SEN Support can be provided by schools, colleges and early years from notional SEN funding.	Schools will sign up to a minimum standard of OAP. Document to be published on the Local Offer	Sarah Christopher	Sept 2018	Link to Local Offer web page

colleges and early years			
settings			

3. To monitor the progress and educational outcomes for pupils receiving SEN Support

Areas to develop:

- d) To build a range of criteria that measure the progress, attainment and outcomes of pupils on SEN support.
- e) Progress, attainment and wider outcomes for pupils receiving SEN support to be monitored by the Inclusion Group in order to identify ways to improve outcomes.

Recommendations	Expected impact – how will this improve outcomes?	Actions	Lead	By When	Evidence
3a) To build a range of criteria that measure the progress, attainment and outcomes of pupils on SEN support	There will be clarity about performance in the city in comparison to national data and analysis of nature of cohort and inconsistencies across schools.	Criteria to be identified to enable regular reporting to inclusion group	Sarah Christopher	Jan 2018	Data report to come to the Inclusion Group
3b) Progress, attainment and wider outcomes for pupils receiving SEN support to be monitored by the Inclusion Group in order to identify ways to improve outcomes	Close monitoring will enable analysis of barriers to performance and identification of actions to be taken to address these and improve outcomes	Regular report to be provided to the Inclusion Group. Further actions may be identified in the light of this analysis e.g. actions to address the barriers experienced by particular groups or cohorts	Sarah Christopher	March 2018	Data report to come to the Inclusion Group

3c) Identify wider	A set of measure that		
measures of inclusion e.g.	Portsmouth schools sign		
Parental satisfaction -	up to.		

4. To map the alternative provision offer and monitor the impact of Alternative Provision

Areas to include:

- a) To map the range of Alternative Provision commissioned by schools, internal and external
- b) To monitor the impact of Alternative Provision. Including reintegration and educational outcomes.

Recommendations	Expected impact – how will this improve outcomes?	Actions	Lead agency Lead officer	By When	Evidence
4a) To map the range of Alternative Provision commissioned by schools - internal and external	Education providers will be clear about the range of Alternative Provision available. There will be a consistent approach to identifying which pupils require Alternative Provision, and in establishing quality and intended outcomes	Alternative Provision document to be published on the Local Offer website	Neil Stevenson	Jan 2018	Link to webpage

4b) To monitor the impact of	Monitoring outcomes of	A regular report will be provided to	Neil	March	Report presented to the inclusion group
Alternative Provision, including reintegration and educational	Alternative Provision will lead to improved quality	the Inclusion Group to include use of Alternative Provision and	Stevenson	2018	
outcomes	and outcomes, including	outcomes, including reintegration.			
	re-integration				
	appropriateness of				
	allocation and waiting list				
	prioritisation (KS4)				

SEND REFORMS IMPLEMENTATION PLAN (April 2016 – March 2018)

How effectively do we identify disabled children and young people and those who have special educational needs in Portsmouth

- 1. Early intervention/SEN Support (success criteria)
- a) There is a shared understanding of 'ordinarily available provision'
- b) There is a shared understanding of the threshold for requesting an education health and care needs assessment
- c) Children and young people receiving SEN Support make good progress, including at points of transition
- d) Children and young people with SEND from vulnerable groups make good progress

Objectives	Expected impact – how will this improve outcomes?	Actions	Lead officer	By Whe n	Evidence	Evaluation (updated quarterly)
1 a) There is a shared understanding of 'ordinarily available provision'	A shared understanding across schools colleges, early years setting, parents and young people of what constitutes 'ordinarily available provision' to ensure consistency in meeting children and young people's needs.	Review and update the 'Ordinarily Available Provision' documents in partnership with schools and other providers. Publish and publicise summary version on Local Offer Website	Sarah Christopher	Jan 2018	Add link to document published on the local offer website www.portsmouthlo caloffer.org	
1 b) There is a shared understanding of the threshold for requesting an education health and care needs assessment	Professionals are able to make consistent judgements about whether to request an education health and care needs assessment or when needs can be met within available resources.	Guidance documents are updated in partnership with SENCos and other professionals. Documents are published and publicised on the local offer.	Karen Spencer	Jan 2018	Add link to document published on the local offer website www.portsmouthlo caloffer.org	
1 c) Children and young people receiving SEN Support make good progress, including at points of transition	Children and young people will make good progress, when compared to the same group nationally.	SEN Support Task and Finish Group to develop an offer of support to schools to develop their practice in relation to pupils on SEN Support.	Sarah Christopher	March 2018	Add link to published offer of support on PEP website when available	
1d) Children with SEN from vulnerable groups make good educational progress	The educational progress of children with SEN from the following vulnerable groups is monitored: • Looked after children/care leavers • CIN/CPP • Educated out of area • EHE • Medical Tuition	Support is put in place to enable children and young people to make progress. An annual report is presented to Director of Children, Families and Education management team meeting and PCSB.	Julia Katherine/ Debbie Price	Dec 2017	Annual report presented to Director of Children, Families and Education management team meeting and PCSB.	

	Children of Service Personnel Children known to YOT	
Position statement	This is an area where further development is needed. Children and young people in Portsmouth do not make sufficient progressing to the same group nationally. There is a lack of consistency in the identification of those requiring SEN Support and the whom an EHC needs assessment is required. There is further work to do to strengthen the early intervention for children with SE early help work of the newly formed Prevention and Early Help service.	nose for

How effectively do we meet the needs and improve the outcomes of disabled children and young people and those who have special educational needs in Portsmouth?

2. Quality and timeliness of EHCPs (success criteria)

- a) Professional education, health and care advice is provided within statutory timescales and is of good quality
- b) EHC needs assessments are co-ordinated and completed within statutory timescales
- c) EHCPs are of good quality

Objectives	Expected impact – how will this improve outcomes?	Actions	Lead officer	By Whe n	Evidence	Evaluation (updated quarterly)
2 a) Professional education, health and care advice is provided within statutory timescales and is of good quality	Professionals provide reports that are outcomes focused and are able to be used to write good quality EHC Plans.	Training is provided for education, health and social care professionals to improve the quality of evidence provided. Monitoring and oversight processes are in place to ensure that advice is provided within statutory timescales.	Neil Smith (health) Michael Henning- Pugh (social care) Liz Robinson (education)	Jan 2018	Case studies Training pack embedded.	EHCP Writing workshop.pptx
2 b) EHC needs assessments are co-ordinated and completed within statutory timescales	Plans completed within statutory timescales will ensure that support is put in place at the earliest opportunity.	Review of process of co-ordinating EHC needs assessments to ensure that it remains as streamlined as possible.	Karen Spencer	Jan 2018	SEN2 data	
2 c) EHCPs are of good quality	High quality EHCPs mean that children and young people can receive the right support to enable them to improve outcomes.	A termly audit of EHCPs seeks to monitor the improving quality and ensure that learning takes place to provide a framework of continual improvement.	Karen Spencer / Liz Robinson	Mar 2018	Termly audit reports	
Position statement	This is an area of strength. The vast majority of new EHC assessments and transfers are completed to a high standard and within statutory timescales.					

How effectively do we meet the needs and improve the outcomes of disabled children and young people and those who have special educational needs in Portsmouth?

- 3. Local Offer, short breaks and personal budgets (success criteria)
- a) The local offer is well publicised and kept under review to ensure that it continues to provide families and professionals with the information they need.
- b) Targeted and specialist short break care in Portsmouth is effective in meeting children and young people's needs
- c) Personal budgets in Portsmouth are effective in meeting children and young people's needs

Objectives	Expected impact – how will this improve outcomes?	Actions	Lead officer	By When	Evidence	Evaluation (updated quarterly)
3 a) The local offer website is well publicised and kept under review to ensure that it continues to provide families and professionals with the information they need.	An effective local offer website ensures that families have the information they ned to make informed decisions and to access the support they need.	Monitor the effectiveness of the local offer website monthly using a 'mystery shopper' approach and incorporate feedback and improvements in the annual report. Review Local Offer Early Years information.	Jane James	Sep 2017 March 2018	Link to local offer website annual report	Annual Report 2017 - Final 31082017.docx
To continue to promote the Local Offer and to check the effectiveness of this. (Commons Team)		rears information.		2016		
3 b) Targeted and specialist short break care in Portsmouth is effective in meeting children and young people's needs	Short breaks provide respite for families with a child with significant special educational needs and disabilities.	Targeted short break offer to be re-tendered in co-production with families.	Michael Henning- Pugh	Apr 2018	Link to targeted short break offer on the local offer website	

3 c) Personal budgets in Portsmouth are effective in meeting children and young people's needs	Personal budgets and direct payments enable families to have more choice and control about the way they access support.	Increasing numbers of personal budgets and direct payments to be included in EHCPs, as each EHCP is coproduced or reviewed via the Annual Review process.	Michael Henning- Pugh	Jan 2018	SEN2 data	
Position statement	This is an area of strength. Our loc some support is accessed as direct p paid cards) and to ensure that short be	payments. We are continuing to wo	ork with families	to increas	e the take up of persor	

How effectively do we work in partnership with children and young people and their families to improve the outcomes for those with special educational needs and disabilities in Portsmouth?

4. Co-production (success criteria)

- a) Children and young people contribute to their assessment
- b) Parents and carers contribute to their assessment
- c) Children and young people and their parents and carers participate in decision making about local provision (strategic)

Objectives	Expected impact – how will this improve outcomes?	Actions	Lead officer	By Whe n	Evidence	Evaluation (updated quarterly)
4 a) Children and young people contribute to their assessment.	All children and young people contribute meaningfully to their EHCP needs assessment.	All children and young people are invited to contribute to their assessment at various stages throughout the process. 'This is me' contributions received as part of the assessment and review processes will be monitored.	Karen Spencer	Mar 2018	Collation of contributions received.	
		Dynamite survey to seek children and young people's views	Joe McLeish	Mar 2018	Survey results	

4 b) Parents and carers	All parents and carers contribute	All parents and carers are invited to	Karen	Jul	Collation of	
contribute to their assessment	meaningfully to their	contribute to their son/daughter's	Spencer	2018	contributions	
	son/daughter's EHC needs	assessment at various stages			received.	
	assessment.	throughout the process. Parental				
		contributions received as part of the				
		assessment and review processes will				
		be monitored.	Barbara	Jul	Survey results	
			McDouga	2018		
4 -> 01 11 1	D	Survey to seek Parent/carer views				
4 c) Children and young people	Partnership working to improve outcomes is more effective where	All children and young people and	Karen	Jan 2018	Person Centred	
and their parents and carers participate in decision making	families are involved in decision-	their parents/carers are invited to a	Spencer	2010	reviews -	
about local provision (strategic)	making	person centred coproduction meeting			guidance for	
		to coproduce their plan and to renew			SENCos	
		this annually with the education				
		provider.	l			
		Training for parent/carer	Karen	Jan		
		representatives is provided in order to	Spencer	2018		
		enable them to contribute to the			Updated ISP	
		Inclusion Support Panel.			Guidance /	
		moración capporer anon			Training	
Decition statement	This is an area of strongth Darts	mouth has a strong history of narty archin	Morleina Mila	noronto	/oarara and aaniisa	oro Co production
Position statement		mouth has a strong history of partnership their parents/carers is becoming the way				
		sments. A coproduction celebration event				
	made so far in the area.					

How do we evaluate the effectiveness of our local area arrangements to identify disabled children and young people and those who have special educational needs; and to meet their needs and improve their outcomes?

5. Governance, accountability and joint working (success criteria)

- a) Effective strategic leadership and governance is in place
 b) Joint commissioning arrangements are in place for education, health and care services
 c) Processes are in place to identify and address areas for development

Objectives	Expected impact – how will this improve outcomes?	Actions	Lead officer	By Whe n	Evidence	Evaluation (updated quarterly)
5 a) Effective strategic leadership and governance is in place	Strong leadership and clear lines of accountability for the SEND Strategy will ensure that progress is made towards improving outcomes for children, young people and their families.	Refreshed SEND Strategy to be endorsed by the Children's Trust Board and Health and Wellbeing Board	Julia Katherine	Nov 2017	Link to refreshed SEND Strategy published on line	
5 b) Joint commissioning arrangements are in place for education, health and care services.	Commissioners work together effectively to assess the needs of 0-25 year olds with SEND and to jointly commission services and provision to meet their needs.	A strategic management plan is in place. A shared database is in place for the children and young people known to the High Support Needs Panel. This is used to monitor and review the provision and outcomes for this group of children, young people and their families. An annual report is taken to the Director of Children, Families and Education management team to update on outcomes for this group.	Andrea Havey/ Debbie Price/ Julia Katherine	Dec 2017	Report to DMT in Oct 2017.	

5 c) Processes are in place to identify and address areas for development	Where areas for development are identified and acted on by managers, there will be a cycle of continual improvement in the services and support provided to service users.	An annual report is provided of issues arising from tribunals, complaints and other sources of service user feedback in order to inform service improvement. This is reported to the Director of Children, Families and Education Management group. Refresh commissioning Plan. Needs assessment -latest performance information	Julia Katherine Hayden Ginns	Mar 2018	Annual Report	
Position statement	This is an area of strength. Rob both at the individual child and you commissioning strategy is in place	ung person level and the strategic				

Special Educational Needs and Disabilities (SEND) Joint Commissioning Plan

April 2017
Version 3



Delivery Plan Only

The SEND Joint Commissioning Plan has been agreed by the SEND Board.

This Version contains ONLY the Delivery Plan (Section D) and is used by the SEND Commissioning Steering Group to monitor progress across the wide range of Commissioning Projects and Programmes in place.

D1. Cognition and learning

Our Ambition:

- To enable children with cognition and learning difficulties to be educated mainstream settings wherever possible, ensuring that Special Schools are focussed on those with the most complex needs.
- To enable children with complex cognition and learning difficulties to be educated within the city wherever possible
- To ensure multi-disciplinary support is in place to support the successful inclusion of children in mainstream education.

SEND Strategy Link:

Strand A: Promote good inclusive practice to improve outcomes

Strand C: Effective joint commissioning to improve outcomes

Commissioning Project/Programme	Leads	Completion By	Key Milestones	Progress
1.1 Cliffdale and Redwood Park special schools to be re-designated and remodelled to enable them to effectively educate children with complex learning difficulties and autism. To ensure all parents are engaged and communicated to about the changes.	Julia Katherine (PCC)	Sept 2018	 Redesignation of Redwood Park - complete Admission criteria and banding description updated - Apr 17 - Underway Redesignation of Cliffdale - July 17 - Underway 	Green
1.2 To ensure the SLA and service spec for the outreach offer provided by Special Schools to support mainstream schools to meet the needs of those with cognition and learning needs.	Julia Katherine (PCC)	Sept 2017	 Current outreach offer presented to PEP Inclusion Group Feedback from schools Revised service specification - Sep 17 	Green

D2. Communication and interaction (including speech, language and communication needs and autism)

Our Ambition:

- To enable children with communication and interaction needs to be educated in Portsmouth and in mainstream settings, wherever possible
- To ensure multi-disciplinary support is in place to support the inclusion of children in mainstream education
- To ensure speech and language services and pathway meets statutory requirements and supports the inclusion agenda
- To ensure autism pathway meets statutory requirements, supports the inclusion agenda and enables young people with autism to make a successful transition to adulthood

SEND Strategy Link:

Strand A: Promote good inclusive practice to improve outcomes

Strand C: Effective joint commissioning to improve outcomes

Commissioning Project/Programme	Lead	Completion By	Key Milestones	Progress
2.1. A new 6-place Inclusion Centre (additionally resourced provision) to be opened at Trafalgar School in September 2016 for 11-16 year olds with an EHC plan for communication and interaction difficulties, specialising in autism spectrum conditions.	Julia Katherine (PCC)	Sept 2016	COMPLETE	COMPLETE
2.2. A new 9-place Inclusion Centre (additionally resourced provision) to be opened at Devonshire Infant School in September 2017 for 4-7 year olds with an EHC plan for communication and interaction difficulties, specialising in speech, language and communication needs.	Julia Katherine (PCC)	Sept 2017	 Updated admission criteria Mar 17 Special ISP meeting to be held to allocate places - Apr 17 Placements begin - Sep 17 	Green

2.3 A new 9-place Inclusion Centre (additionally resourced provision) to be opened at Portsdown Primary School in September 2017 for 4-11 year olds with an EHC plan for communication and interaction difficulties, specialising in speech, language and communication needs.	Julia Katherine (PCC)	Sept 2017	 Updated admission criteria Mar 17 Special ISP meeting to be held to allocate places - Apr 17 Placements begin - Sep 17 	Green
2.4 Joint review of the health and education offer and outcomes for the children in each of the five Inclusion Centres to ensure it is meeting the needs and statutory requirements.	Lois Pendlebury (Solent NHS) Julia Katherine (PCC)		Joint visits to schools by education and Solent - Summer term Clear description of current health offer and gaps - May 2017 Proposal to SEND Commissioning Steering Group - May 2017	Green
2.5 Complete an Autism Strategy and revised autism pathway for young people age 0 - 25	TBC	Dec 2017	Meeting on 17 th May to discuss	Red
2.6 To review the impact of the Autism Co-ordinator role	Andrea Havey (CCG)	July 2017	1. Report from Solent NHS Trust to be submitted to ICS by beginning August 2017 2. Evaluate pilot project with Solent NHS Trust and present a business case to CSC if additional funding required to	Green

	continue Autism Navigator	
	post.	

D3. Sensory and physical

Our Ambition:

- To enable children with sensory and physical needs to be educated wherever possible in mainstream settings.
- To ensure multi-disciplinary support is in place to support the inclusion of children in mainstream education
- To ensure there are minimal waiting times for key pieces of equipment

SEND Strategy Link:

Strand A: Promote good inclusive practice to improve outcomes

Strand C: Effective joint commissioning to improve outcomes

Commissioning Project/Programme	Lead	Completion By	Key Milestones	Progress
3.1 To review the primary Inclusion Centre (additionally resourced provision) for sensory impairment at Northern Parade Infant and Junior Schools.	Julia Katherine (PCC)	Sept 2017	 Formal review - Mar 17 Changes made to Service Level Agreement Implementation against new SLA - Sep 17 	Green
3.2 To develop a secondary Inclusion Centre (additionally resourced provision) for sensory impairment at St Edmunds Catholic School.	Julia Katherine (PCC)	Sept 2016	COMPLETE	COMPLETE
3.3 Joint review of the health and education offer and outcomes for the children in each of the two Inclusion Centres to ensure it is meeting needs and statutory requirements	Julia Katherine (PCC) Lois Pendlebury (Solent NHS)		 Joint visits to schools by education and Solent - Summer term Clear description of current health offer and gaps - May 2017 	Green

		3.	Proposal to SEND Commissioning Steering Group - May 2017	
3.4 To evaluate the wheelchair provider to ensure minimal waiting times for receipt of wheelchairs	Andrea Havey (CCG)	2.	Performance report to SEND Steering Group - complete Updated performance report to SEND Commissioning Group - Jan 17 - Complete Agreed joint approach with Hampshire Commissioner to address performance - May 17	Amber

D4. Social emotional and mental health (SEMH)

Fully aligned with Future in Mind Transformation Plan

Our Ambition:

- To establish a clearly understood needs-led model of support for children and young people with SEMH difficulties across the city that makes the best use of the resources available
- For all professionals working with children and young people to have a shared understanding of SEMH and to promote resilience and emotional wellbeing in their work with children and young people
- To ensure there is a range preventative and early help support available to children and young people to prevent SEMH difficulties escalating
- To jointly commission a clear pathway of support (including prevention, early help and intensive therapeutic intervention) and provision for SEMH which ensures that difficulties are picked up and addressed at the earliest opportunity and that those with more complex needs can access the specialist support available.

SEND Strategy Link:

Strand A: Promote good inclusive practice to improve outcomes Strand C: Effective joint commissioning to improve outcomes

Strand E: Early intervention for children with SEND and their families

Commissioning Project/Programme	Leads	Completion By	Key Milestones	Progress
4.1 To complete a CAMHS Needs Assessment	Andrea Havey (CCG)	Jan 2017	 Draft to FiM Steering Group - Complete Recommendations discussed at SEND Commissioning Group - Jan 17 - Delayed 	Red
4.2 To review and remodel the SEMH educational provision delivered by The Harbour School to	Julia Katherine (PCC)	Sept 2017	Secure additional strategic support from Delta Education Trust - Complete	Green

commission distinct pathways for Alternative Provision (AP) and Special Educational Needs (SEN) provision.			 Revised Service Level Agreement for Harbour - Mar 17 Revised provision in place -
4.3 Develop a single CAMHS Specification - reviewing the service in the context of inclusion, the needs of children in the Harbour school and Multi-Agency Teams including restorative practice	Andrea Havey (CCG)		1. Xxx 2. Xxx 3. Xxx 4. Xxx
4.4 To commission an Early Help (pre-CAMHS) community based service that supports early intervention and prevention for children and young people between 11 - 25 years of age and their families. Ensure appropriate pathways into CAMHs provision for children and young people with mental health needs.	Andrea Havey (CCG)	Mar 2017	 Procurement exercise - Complete Mobilistaion plan for new provider - Complete Referral pathway and assessment process in place - Underway
4.5 To develop a strategy that will lead to effective whole school approaches in supporting pupils social, emotional and mental health wellbeing across Portsmouth schools.	Sarah Christopher (FiM/School)	Feb 2017	 Draft Strategy - Complete Final published strategy - Underway Revised governance arrangements for implementation linked to Stronger Futures and PEP Inclusion Group - Underway Delivery Plan in Place - Underway
4.6 To enhance the Eating Disorder service locally to ensure children and young people get expert help	Andrea Havey (CCG)		COMPLETE COMPLETE

early and are treated with effective evidence based treatment.				
4.7 Portsmouth CAMHS joined up with a Children and Young People IAPT collaborative in 2017 which will improve collaborative practice between therapists, children, young people and their families.	Andrea Havey (CCG)	April 2018	 Identify key staff to take part in the programme - Apr 17 CYP IAPT Steering Group to be set up to drive the implementation of programme - Aug 17 CAMHS staff to attend Leadership, Supervision and CBT courses - Nov 2017 	Green
4.8 To review the self-harm pathway from hospital into the acute and community services with the aim of developing an integrated paediatric mental health liaison service.	Andrea Havey (CCG)		 Working Group set up - Complete Decision-making tool developed Self-harm training delivered - Complete 	Green
4.9 To enhance the crisis care offer in CAMHS through the recruitment of a Crisis Care post that will assess, treat and risk manage young people	Andrea Havey (CCG)		COMPLETE	COMPLETE
4.10 To enhance the YOT CAMHS Provision	Andrea Havey (CCG)		COMPLETE	COMPLETE
4.11 To develop low-cost responses to child anxiety	Sarah Christopher Sonia King (Solent)		1. Xxx 2. Xxx 3. Xxx 4. Xxx	Red

4.12 To develop the response to primary age children with mental health concerns			1. Xxx 2. Xxx 3. Xxx 4. Xxx	Red
4.13 Update SEMH Ordinarily Available Provision	Sarah Christopher and PEP Inclusion Group Sub Group	Sept 2017	 Draw together working group -underway Agree scope Return to Steering Group in July 17 for consideration on links to MATs provision 	Green
4.14 To roll-out Restorative Practice in 10 - 15 'trailblazer' schools	Hayden Ginns (PCC)	Sept 2017	 Identify trailblazer schools - Complete Deliver training to school-based Restorative Champion - Sept 2017 - Underway Create schools network - Underway School level Action Plan in each school - Oct 2017 Publish first evaluation - Jan 2018 	Green

D5. Pre-birth to 5: SEND provision for pre-school children

SEND Strategy Link:

Strand A: Promote good inclusive practice to improve outcomes Strand C: Effective joint commissioning to improve outcomes

Our Ambition:

• To enable pre-school children with SEND to access mainstream pre-school settings wherever possible

• To ensure multi-disciplinary support is in place to support the inclusion of children in mainstream early education settings

Commissioning Project/Programme	Lead	Completion By	Key Milestones	Progress
5.1 To review and remodel the pre-school SEN education and childcare provision to ensure that children can be supported within their mainstream pre-school and childcare setting wherever possible.	Julia Katherine (PCC)	Sept 2018	 To secure external consultant resource to develop a range of models - Complete Project scope discussed at SEND Commissioning Group - Complete Consultation with parents - Summer Term Formal consultation on preferred model - Autumn Term Lead member decision - Nov 2017 	Green
5.2 To develop the Single Point of Access (including multi-disciplinary assessment) for health and developmental assessment and align with the statutory Education Health and Care Plan process.	Lois Pendlebury (Solent NHS)		 Mapping key pathways e.g. Autism, 0-5s etc - July 2017 To develop standard operating procedures for 	Green

Juli	ia Katherine	internal health referrals -
	(PCC)	Sept 2017
		Co-location of Falcon
		House and Battenburg
		Ave - 2018
		Consideration of
		establishment of
		SEND/High Needs hub
		across health, and
		education - 2018

D6. Transition into adulthood

Our Ambition:

- To ensure young people with SEND have successful transitions into adulthood (link to PfA outcomes)
- To enable post-16 education settings to be fully inclusive
- To increase the numbers of 16-25 year olds with SEND in education, employment or training

SEND Strategy Link:

Strand A: Promote good inclusive practice to improve outcomes

Strand F: Effective preparation for adulthood and smooth transitions to adult services

Commissioning Project/Programme	Lead	Completion By	Key Milestones	Progress
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6.1 To review the transition arrangements from CAMHS services to adulthood in the context of revised CAMHS offer 0 - 25	Andrea Havey (CCG)	1. Xxx 2. Xxx 3. Xxx 4. Xxx	Red
6.2 Ensure robust post-16 education provision is in place for young people with SEND	Amanda Percy (PCC)	1. Curriculum Mapped and gaps in provision is identified. Consultation to secure required provision. 2. Development of Supported Internships Programme 3. Support post-16 providers to develop transition support both into and from post-16 education and training. 4. Monitor participation and put in place effective support for those young people at risk of not progressing or who are NEET.	Green
6.3 Deliver the PFA Outcomes Plan	Mark Stables (PCC)	PFA Outcomes plan completed - Green Most recent plan indicates number of Reds and Ambers but progress is being made	Amber

D7. Parent and families support

Our Ambition:

- To ensure the parents and carers of children with SEND are provided with appropriate advice, information and support
- To locally embed the ambitions of Future in Mind transformation programme in responding to infant mental health
- To ensure Local Offer website is widely used as the single point of information for parents and carers of children with SEND

SEND Strategy Link:

Strand E: Early intervention for children with SEND and their families

Commissioning Project/Programme	Lead	Completion By	Key Milestones	Progress
7.1 To commission an early intervention service for women with mild to moderate mental health issues in the perinatal period.	Andrea Havey (CCG)		COMPLETE	COMPLETE
7.2 To enhance the Infant Mental Health provision locally to support parents in the family home to focus on the attachment relationship with their babies aged 0 -2 years.	Andrea Havey (CCG)		COMPLETE	COMPLETE
7.3 To develop a community based specialist perinatal mental health team in Portsmouth for women experiencing severe and complex mental health issues during the perinatal period.	Andrea Havey (CCG)		COMPLETE	COMPLETE
7.4 Revised Parenting Pathway (linked to Stronger Futures Strategy and incorporating restorative practice	Hayden Ginns (PCC)		 Multi-agency Mini-Team set up - complete Underpinning model of practice agreed - Feb 17 	Green

3. Revised Pathway	
consulted upon and	
published - Apr 17	
4. Training in place for	
professionals - May 1	7

D8. Personal budgets

Our Ambition:

• To enable as many families as possible to make use of personal budgets, in line with the national ambitions of the SEND reforms

SEND Strategy Link:

Strand B: Successful implementation of the SEND reforms

Commissioning Project/Programme	Lead	Completion By	Key Milestones	Progress
8.1 Pilot of the new Personal Health Budget methodology with a small number of Children with SEND to inform a wider rollout at a later stage if successful.	Jo Atkinson (ICU) Jo York (CCG)		 Pilot with a small number of children - In process Learning report completed - Delayed Roll-out plan for personal budgets 	Amber

D9. Decision-making for high cost placements

Our Ambition:

• To ensure that children who require high-needs placements are effectively identified and good multi-agency decision-making on placement, funding and reviews are in place.

SEND Strategy Link:

Strand B: Successful implementation of the SEND reforms

Commissioning Project/Programme	Lead	Completion By	Key Milestones	Progress
9.1 Review of High Needs Panel	Julia Katherine (PCC) Andrea Havey (CCG)		 Revised Terms of Reference - complete Referral form updated - complete Implementation - underway 	Green
9.2 Analysis of current out of city placement cohort	Julia Katherine (PCC) Hayden Ginns	Sep 2017	Scope of analysis completed - July 2017 Commissioning implications discussed at SEND Commissioning Group - Oct 2017	Green

SEND Early Identification and Early Support Delivery Plan

Objectives	Expected impact – how will this improve outcomes?	Actions	Lead officer	By When	Evidence	Evaluation (updated quarterly)
Carry out a review of Early Years Panel	Early Years Panel fulfils the statutory duty to share information between health and education about pre-school aged children who are likely to have special educational needs and require additional support at school.		Liz Robinson	March 2018		
	Information about children known to Early Years Panel is used to inform commissioning priorities (e.g. commissioning special school places). CCN, School Nurse provision, Early Years settings, mainstream schools, equipment and outreach support.	Links with outreach support Transitions - managed appropriately. Send Inclusion Fund - How it fits.				
	Early Years Panel is efficient and effective.	Review process of panel and membership				
2. Update the Early Years Pathway (on the local offer)	The Early Years Pathway published on the Local Offer website is up to date and demonstrates early identification of SEN and the provision of timely support.		Ella Harbut			

3. Consider the effectiveness of key working for preschool age children with SEND.	Families with a pre-school age child with SEND have access to a key worker to help them 'navigate through the system'. Key workers are clear about their role and can provide accurate information about education, health and care services available to support families.		Carol Stevens & Sharon Ensor	
4. The views of parents and carers are sought and used to inform any changes that are made to the way in which services are delivered.	Parents and carers have the opportunity to work in coproduction with commissioners and providers to review and shape the services that are available to support them. Parents and carers report that they feel listened to and that their input has helped to improve processes and services.	Seek feedback from parents through - ECAF - SBFT - Portage coffee morning - Willow parents - Early Years Cluster	Kara Jewell & Louisa Paston	

DELIVERY PLAN (September 2017 Adulthood Group Action Plan 2017 - Louision

PfA Sub-Group Outcome 1: To be assured that the Education, Health and Care Planning process identifies and works towards the realisation of PfA outcomes for those in transition

PFA Objective 1.1: To establish if current EHCPs identify and support the realisation of PfA outcomes

				Progress	RAG
Action	Measures	Lead	Timescale	comments	rating
1.1.1. To establish a task and finish group to undertake an audit of current EHCPs	Task and finish group established with appropriate membership.	Sharon Cooper/Mark Stables / Amanda Percy	Mar 17	Completed	Green
1.1.2. To audit 50 current EHCP's	50 plans audited.	As above	July 17	3 completed future meeting dates set	Amber
1.1.3. To produce recommendations for the SEND board.	Report sent to SEND board.	As above	Sep 17		Red

PFA Objective 1.2: To explore good practice relating to the PfA outcomes and benchmark against local practice.

Action	Measures	Lead	Timescale	Progress/comments Progress/	RAG rating
1.2.1 To review current local practice against NICE guidance	The PfA group will agree how local practice fits against the guidance and will respond or update action plan accordingly.	All	May 17 - next meeting		Amber
1.2.2 To make links with the 'Ready, Steady, Go' project and explore the possibility of piloting on a wider scale	Information to PfA group to enable decision to conduct pilot or not.	Lois Pendlebury	May 17	Lois invited to next meeting	Amber
1.2.3 To review range of planning tools and consider how they may work together/best	Inventory of tools. Agreement re role of each and consideration to one overall planning summary form	PfA group	Nov 17		Red

PFA Objective 1.3: To ensure appropriate tools are available to support the PfA outcomes						

Action	Measures	Lead	Timescale	Progress comments	RAG rating
1.3.1 Through being a National Demonstration Team for inclusion (NDTi) PfA demonstration site, develop information and decision-making tools which support the PfA outcomes.	Tools for each PfA outcome to be shared with the PfA group and agreed to be fit for purpose. Self-assessment tools to be shared with PfA group that support identification of need and determination of eligibility	Mark Stables	May 17	Outcomes Planning overview in place. Draft Housing Tool	Amber
1.3.2To Review the Local Offer with respect to whether it provides information of a nature and in a form that supports planning for PfA outcomes	Group will prepare report and present recommendations to SEND Board	PfA group	July 2017	Dynamite Audit completed	Amber
1.3.3 To develop an exemplar page for Local Offer and principles to inform the content of all pages	Page to come back to PfA Group List of principles To be then shared with SEND Board	Dynamite/Lily and Lime	July 2017		Red

1.3.4 Local Offer to be developed to	Priority list of pages needed to	PfA group	Aug 2017	Some tools	
form comprehensive and coherent	be established	Sara		developed.	Amber
Offer consisting of both information	Pages to be developed	Langston		And work	
and tools (to go beyond a directory of				to develop	
Services). Linking with PCC website				exemplar	
work					

PFA Sub-Group Outcome 2: To be assured that the EHC Planning process supports commissioning including for people with autism

PFA Objective 2.1: To explore how to collate information from PfA outcomes in ECHPs to inform commissioning

Action	Measures	Lead	Timescale	Progress comments	RAG rating
2.1.1 To establish what mechanisms are in place currently to collate information.	Information to PfA group	Sharon Cooper	May 17	Sharon looking at what is in place and what can be developed	Amber
2.1.2 To explore what mechanisms are used elsewhere	Information / options to PfA group to inform further actions	Mark Stables	May 17	Contact being made with Kingston	Amber
2.1.3 To explore how other NDTi pilot sites looking at commissioning are tackling / addressing this.	Information / options to PfA group to inform further actions	Mark Stables	May 17	As above	Amber

2.1.4 To use planning with a cohort of	Recommendations contained	PiP	June 18	Ptmth	
people with autism as part of Partners	in Partners in Policy making			College	Amber
in Policymaking to develop	Report			signed up.	
commissioning intentions and inform				Anticipated	
the Autism Strategy and wider				start Sept	
commissioning					

PFA Objective 2.2: To be assured / ensure there are clear pathways for assessment and support for people with including people with autism

Action	Measures	Lead	Timescale	Progress /	RAG rating
2.2.1 To collaborate with the Autism Board on its development of an Autism Strategy to establish clear pathways for assessment and support by Adult Social Care services for people with autism. Carry out Gap analysis to identify and respond to the needs of young people who have been receiving support form children's services but who are not able to get support from adult services. To inform local planning and commissioning	 Updates to PfA group outlining: Clarity of responsibilities and Tools and methods 	Barbara McDougall Mark Stables	Initial Strategy meeting 30.3.17	Planning group established to refresh strategy	Amber
2.2.2 To explore the extent to which assessments and support planning tools can be aligned to promote continuum	Identification of range of assessment and support planning tools for consideration	Sharon Cooper/Mark Stables/lan	July 17 Aug 17		Red

Secured commitment of stakeholders to consideration of amendment Aligned formats developed	Chalcroft/Andy Biddle	Nov 17	

PFA Sub-Group Outcome 3: To be assured that processes enable effective transition for people into and following on from college.

PFA Objective 3.1: To support / oversee the Partners in Policymaking project with which will work with two cohorts (one of people with Autism) to ensure the planning process is cumulative and a continuum is established from school to college into adulthood.

Action	Measures	Lead	Timescale	Progress comments	RAG rating
3.1.1 To explore the extent to which the college curriculum can focus on PfA outcomes	To be assured that the college curriculum supports the PfA outcomes as far as is possible	Sharon Cooper Amanda Percy	Ongoing Partners in Policy making Sept 2017	PiP Meeting with Colleges April	Amber

3.1.2 To explore and identify opportunities and challenges to maximise collaborative working	Process in place that ensures that any service which complements college input is working with the college to support achievement of outcomes identified in the EHCPlan	As above	As above	Sept 2017	Amber
3.1.3 Work with stakeholders to develop innovative ways of planning that produce EHCPs that identify clear aspirational outcomes and an Action Plan that supports their achievement	P in P Report Comparative data - start and end of project	As above	As above	Sept 2017	Amber
3.1.4 To be the core membership of the PiP Project Board and in that capacity to consider the Final Report and take forward recommendations	Development and implementation of action plan developed from recommendations included in the PiP Report	PfA group	As above	Sept 2017	Amber
 3.1.5 Bring Colleges together to Review outcomes from recent SEND area inspections Share good practice around planning, coproduction and transition to and from Post-16 Receive updates on the changing Adult Services provision in Portsmouth and look at opportunities 	Event	Amanda P Sharon Cooper ongoing	6 th April 2017	Actioned	Green

	Т		1
for developing joint			
programmes			
 PfA outcomes 			
 Provide an opportunity for young people to be asked if services have helped to achieve their identified outcomes (could link to 2.1.1?) Feedback to the young person 			
about the effect their involvement has had (2.1.1.?)			
Develop a process that supports the young person to make decisions and builds their confidence to direct their own care and support over time, to include fully involving the young person in planning, implementation and review and agreeing outcomes. (Link with 2.2.2.?)			
Develop a joint mission statement (Health and social care service managers) in children's and adult services to develop a joint mission statement or vision for transition, agreeing shared transition protocols and approaches (could this link with 3.1.3?)			
 Develop Advocacy service to support people through transition where required. 			
Build into plan, opportunities for the young person to visit and experience			

 Consideration should be given to 			
health input where an individual			
does not have specialist health			
involvement, e.g. GP?			



SEND Board

Performance Framework Quarterly Report

Quarter 2 - July - September 2017



- I. Introduction
- II. Performance Summary
- III. Local Area SEND information
- IV. Performance Data
 - A. Outcome Indicators
 - B. Inputs, Outputs & Process Indicators
 - C. Demand Management Indicators
 - D. Experience of the system narrative
 - E. What's trending report

I. INTRODUCTION

The aim of the special educational needs and disability (SEND) strategy is to promote inclusion and improve the outcomes for Portsmouth children and young people aged 0-25 years with SEND and their families.

In order to improve outcomes, we aim to ensure that there are in place a range of high quality support services that contribute to removing the barriers to achievement for all Portsmouth children and young people, in particular those with special educational needs and disabilities. This includes enabling children and young people to lead healthy lives and achieve wellbeing; to benefit from education or training, with support, if necessary, to ensure that they can make progress in their learning; to build and maintain positive social and family relationships; to develop emotional resilience and make successful transitions to employment, higher education and independent living.

Key outcomes to be achieved.

The strategy aims to achieve increased percentages of children and young people with SEND who are able to:

- 6. Be included within their local community,
- 7. Lead healthy lives and achieve wellbeing,
- 8. Learn and make progress,
- 9. Make and maintain positive relationships within their family and community
- 10. Participate in education and training post-16 and prepare for employment

The quarterly performance reports provide the SEND Board and Children's Trust Board with key data to understand performance at a system-wide level, and to manage the impact of work in support of the overarching SEND strategy.

There are six strands of the SEND Strategy:

Strand A: Promote good inclusive practice to improve

Strand B: Successful implementation of the SEND reforms

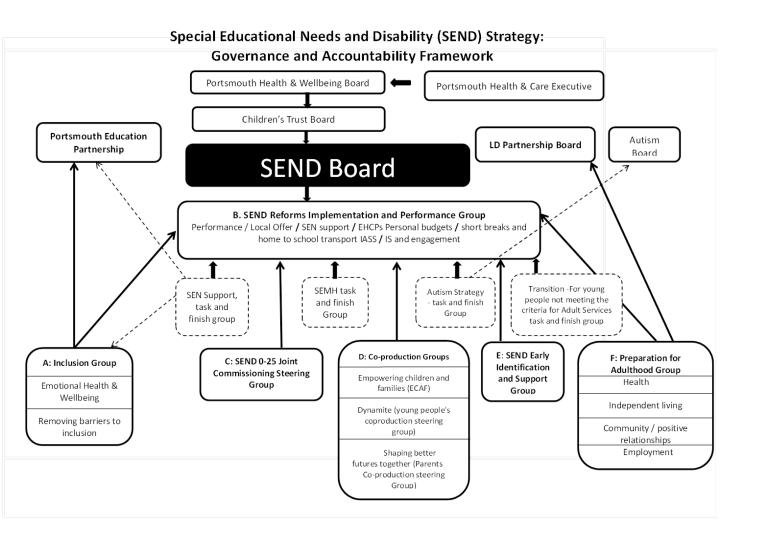
Strand C: Effective joint commissioning to improve outcomes

Strand D: Co-production, embedded as a way of working with children, young people and their parents and carers

Strand E: Early identification and early support for children with SEND and their families

Strand F: Effective preparation for adulthood and smooth transitions to adult services

Performance Management Reporting Structure



PERFORMANCE SUMMARY

1. Areas of good performance

- a) In relation to timely issue of EHC plans, Portsmouth is performing above the national average.
- b) Fewer statements have been discontinued as part of the transfer process than the national average.
- c) Participation of young people at age 17 and 18 is positive for young people with an EHCP. The latest data is 91% national and 95% for Portsmouth.

2. Encouraging signs of Improvement

- a) In 2015/16, a smaller percentage of statements were transferred to plans than the national average. Transfers will have significantly increased during 2016/17, and we retain confidence that we will achieve the March 2018 deadline.
- b) We are working towards completing EHCPs for year 11 and 12.
- c) Rates of progress of pupils on SEN support, whilst still a priority area, improved significantly in KS2 Reading from -4.0 to -2.5 and slightly in Maths -3.8 to -3.1.
- d) In relation to settled accommodation, we have moved from 60/40 Residential Care care/Supported Living split 4 years ago to 42/58 now. A recent ADASS commissioned Report concluded that we are the 3rd highest in the South East region in terms of proportion of Supported Living.

3. Areas for Concern and proposed responses

- a) The percentage of pupils on SEN support meeting age related expectations in KS1 and KS2 remained significantly below national average in 2017. Progress in Writing at remains of concern -4.8 to -4.7.
- b) Attendance is a general concern for Portsmouth, although this is improving significant improvement needs to be made at out SEMH special school.
- c) In relation to fixed period exclusions, this picture was not improving and the disproportionate representation of the SEN statement/EHCP population was increasing. Pupils with SEMH as a need type dominate amongst the pupils with exclusion incidents, and that this is most prevalent amongst the special school pupils. Permanent exclusions are very low.
 - More needs to be done to support the progression in education, employment and training of young people with SEND support and this will be a focus of work moving forward.

4. Further Observations

a) The take-up of personal budgets so far has been low, and relates to those families who have taken up school transport budgets. This is likely to gradually increase over time, with personal budgets for respite included as part of the transfer process.

- b) Portsmouth continues to have low numbers of appeals to tribunal. The SEND team works hard to co-produce EHCPs in partnership, resulting in a relatively small number of cases where there is a disagreement.
- c) Data received in response to our POET survey was broadly positive
- d) There is little data supporting our activity around transition this could be an area of focus.

5. Recommendations to the SEND BOARD

Note that Behaviour and Attendance group will consider data relating to attendance and exclusions at January meeting.

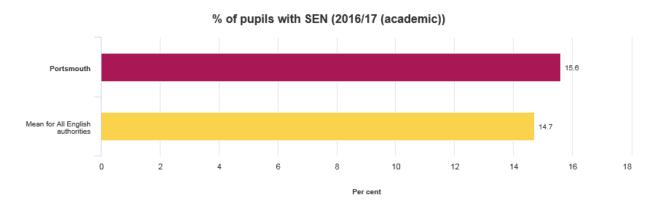
Note that CAMHS indicators are still not available.

Note plans for increased systematic capture of child, young person and parent feedback.

Consider what information may be useful in relation to transition.

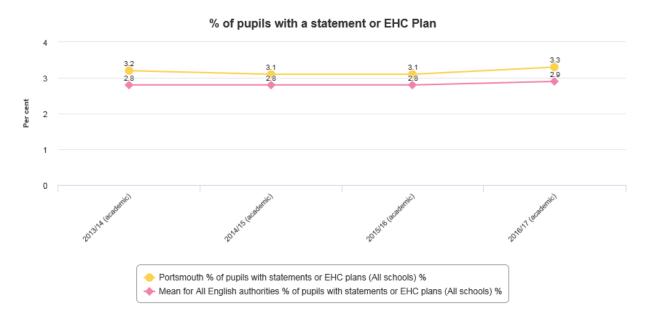
II. Local Area SEND information (inclusion in the community)

NB these figures, and those in the first three charts below, are for pupils attending schools in Portsmouth. They do not include children and young people for whom Portsmouth is responsible but has placed out of borough.



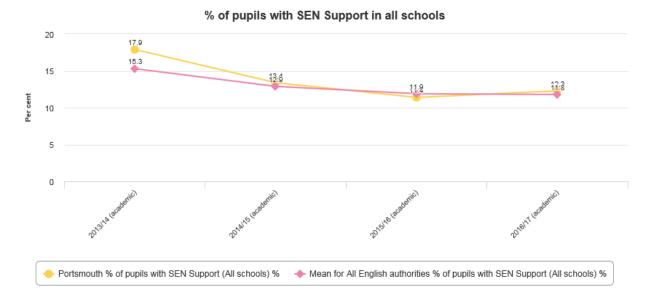
Metric ID: 2212, Department for Education, Special Educational Needs in England

Across All English authorities, the proportion of pupils with statements or education, health and care (EHC) plans ranges from 0.8% to 4.5%%. Portsmouth has a value of 3.3%, compared to an average of 2.9%% in All English authorities.



Source: Metric ID: 2213, Department for Education, Special Educational Needs in England

For SEN support the proportion for All English authorities ranges from 6.5% to 16.8%%. Portsmouth has a value of 12.3%, compared to an average of 11.8%% in All English authorities.



Source:

Metric ID: 2214, Department for Education, Special Educational Needs in England

Commentary

The percentage of pupils identified as having SEN is slightly lower in Portsmouth than the national average, although the percentage of pupils with a statement or EHC is slightly higher in Portsmouth than the national average.

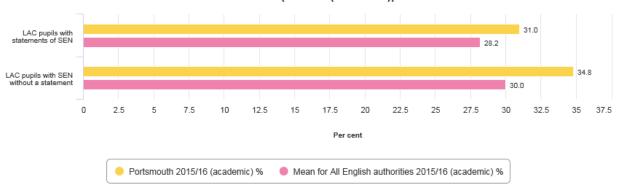
These are likely to be accurate figures, given the Portsmouth demographic, and have remained stable over the past few years.

The percentage of pupils with SEN Support has come more closely in line with the national average as SENCO have become more confident and consistent in identifying need, supported by professional development through the SENCO Network and seconded SENCO programme both of which began in 2013.

Looked after children and Children in need.

Looked after children are defined as those looked after by the local authority for one day or more. In Portsmouth, 34.8% of looked after children are on SEN support, compared to 30.0% in All English authorities. 31.0% of looked after children in Portsmouth have a statement of SEN or EHCP, compared to 28.2% in All English authorities.

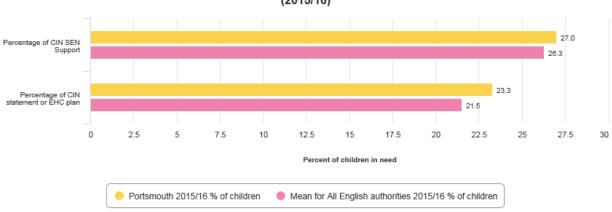
% of looked after children with statements of SEN and % looked after children with SEN without a statement (2015/16 (academic))



Source:

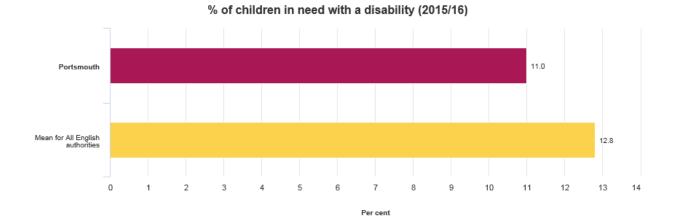
Metric ID: 2133, Department for Education, Outcomes for Children Looked After by Local Authorities in England Metric ID: 2134, Department for Education, Outcomes for Children Looked After by Local Authorities in England

% of children in need with SEN support and % of children in need with statements or EHC plans (2015/16)



Source:

Metric ID: 4852, Department for Education, Characteristics of Children in Need in England: Outcomes tables Metric ID: 4855, Department for Education, Characteristics of Children in Need in England: Outcomes tables



Source:

Metric ID: 2246, Department for Education, Characteristics of Children in Need in England

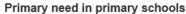
COMMENTARY

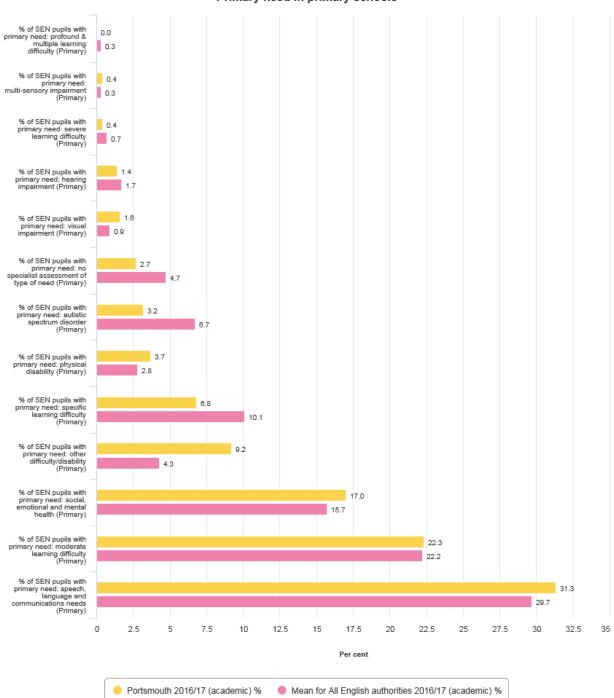
Portsmouth has fewer LAC with statements than national, but more on SEN support. It is difficult to draw firm conclusions from this as the numbers involved are so small. It could be that LAC are effectively supported with SEN support. There is also likely to be an impact of those who have historically been placed at The Harbour School (under the power to innovate) without a statement or EHC plan.

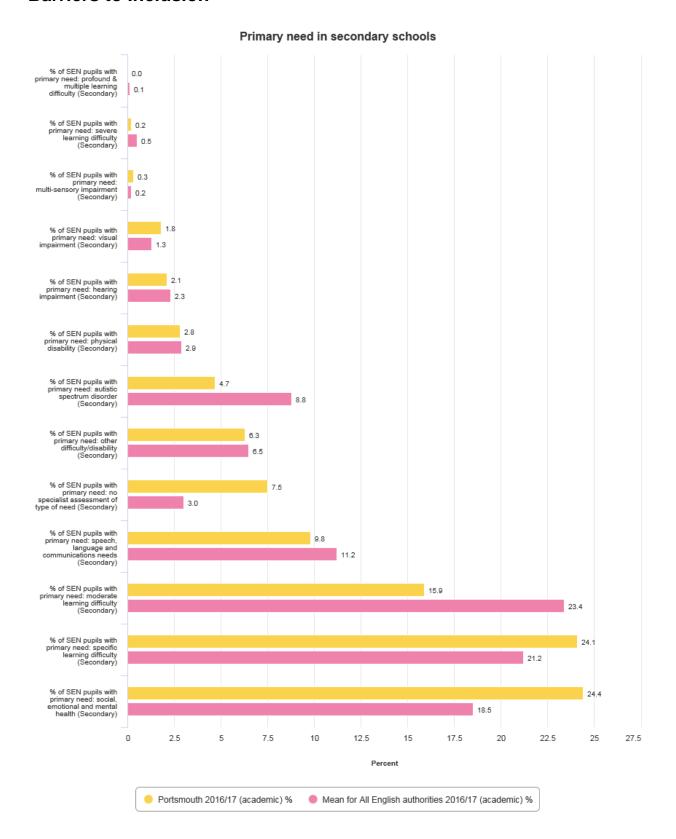
The issues are the same for CiN, although the Portsmouth percentages are closer to the national average in this case. It is difficult to draw firm conclusions from this as the numbers involved are so small. Given the definition of CiN, it could just be that those CYP known to the LA in that reporting period did not have SEN support or Statement/EHCP. Portsmouth has slightly lower percentage of children in need with a disability. Again, it is difficult to draw conclusions from this figure as the rate will vary depending on what criteria are used to record a child as disabled within this context.

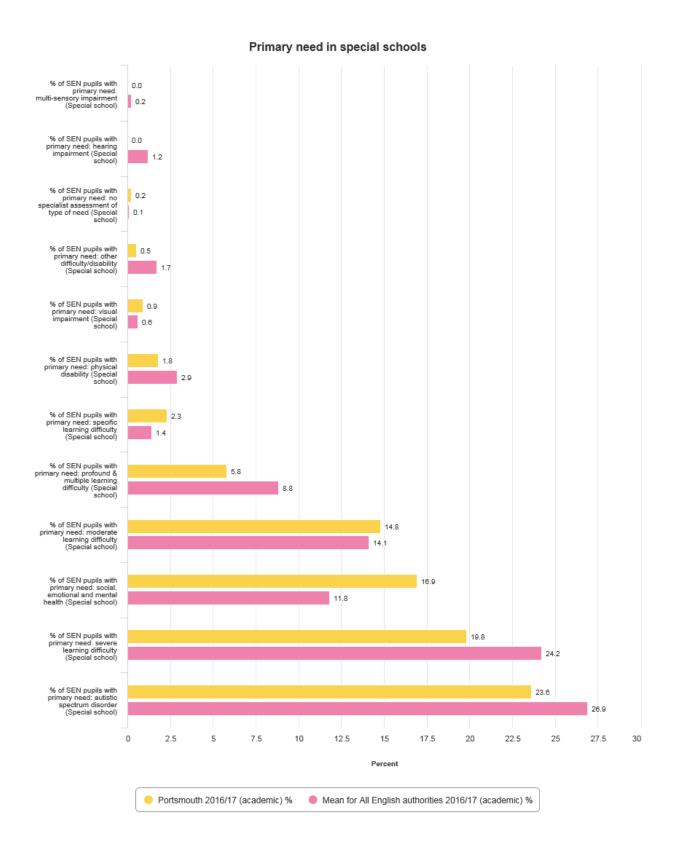
Primary Need

A child or young person has SEN if they have a learning difficulty or disability which calls for special educational provision to be made for them. All pupils with SEN have an assessment of their primary need. The following charts show the breakdown of need in Portsmouth by primary, secondary and special school, compared to the national averages and ranked by prevalence.

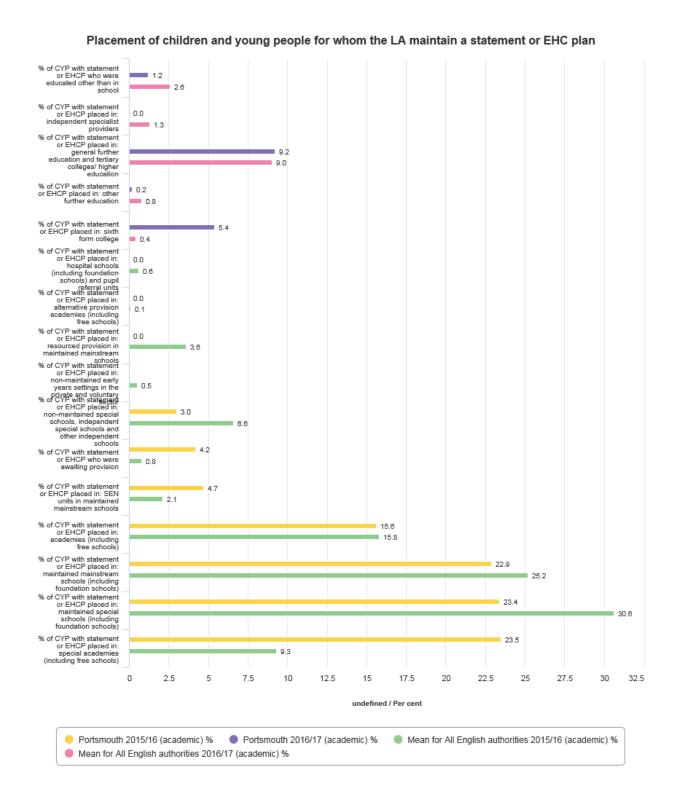








The child's parent or the young person has the right to request a particular school, college or other institution to be named in their statement or EHC plan. The chart below "Placement of children and young people for whom the LA maintain a statement or EHC plan" shows the type of schools pupils with statements or EHC plans have been placed in by Portsmouth, compared to national averages and ranked by frequency.



COMMENTARY

Primary need in primary schools: Portsmouth has a higher percentage of pupils with speech, language and communication needs (SLCN) than the national average. This is likely to be impacted by the additionally resourced provision available in primary schools in the city for pupils with SLCN as their primary need. Portsmouth has a lower

percentage of pupils with autism spectrum disorder (ASD) identified as the primary need. This is likely to be related to the lower than average number of diagnoses of autism in the city. It is likely that some of these pupils have been recorded as having SLCN as their primary need, rather than ASD, particularly younger children within the primary phase.

Primary need in secondary schools: The percentage of pupils in Portsmouth secondary schools identified as having a primary need of SEMH is above the national average. It is anticipated that the work taking place on the SEMH pupil pathway will bring this more in line with the national average. The percentage of pupils in Portsmouth secondary schools identified as having MLD, SpLD and SLCN as their primary area of need is lower than the national average. There is further work to be undertaken to give secondary schools within the city the competence and confidence to meet the needs of pupils with a wide range of SEN. The SEND Strategy and inclusion agenda is taking forward this piece of work, with an Inclusion group being established in the Autumn term to focus on this identified area for development.

Primary need in special schools: The percentage of pupils in Portsmouth special schools with a primary need identified as severe learning difficulties (SLD) and autism spectrum disorder (ASD) is lower than the national average, whereas for moderate learning difficulties (MLD) and specific learning difficulties (SpLD) it is higher than the national average. This is likely to be impacted on by the current designation of the special schools in the city - 2 of which are undergoing a process of re-designation. It is anticipated that over time this will become more in line with national averages.

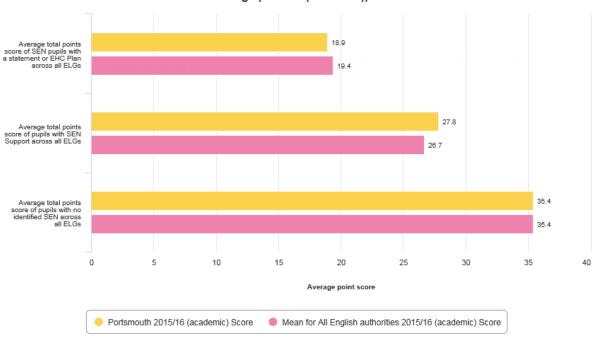
The percentage of pupils in Portsmouth special schools identified as having social emotional and mental health difficulties (SEMH) is higher than the national average. This has been impacted on by the 'power to innovate' which has meant that pupils with SEBD/SEMH needs could be placed in the SEBD/SEMH special school in the city without a statement or EHC plan. The 'power to innovate' has now come to an end and so this anomaly is being addressed. It is anticipated that the work taking place on the SEMH pupil pathway will bring this more in line with the national average.

III. PERFORMANCE DATA

Headline outcome: Learning and Making Progress

Attainment of pupils with SEN

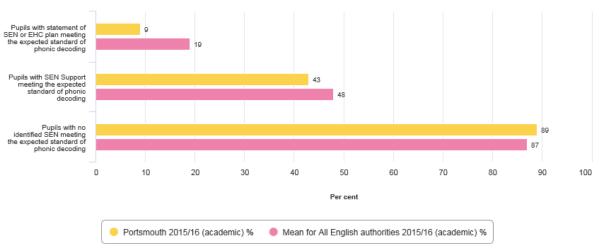
% of SEN pupils with a statement or EHC plan achieving a 'good level of development' at foundation stage (2015/16 (academic))



Source:

Metric ID: 5387, Department for Education, Early years foundation stage profile attainment by pupil characteristics **Metric ID:** 5386, Department for Education, Early years foundation stage profile attainment by pupil characteristics **Metric ID:** 5383, Department for Education, Early years foundation stage profile attainment by pupil characteristics

% of pupils with SEN support and % of pupils with a statement or EHC plan meeting the expected standard of phonic decoding (2015/16 (academic))

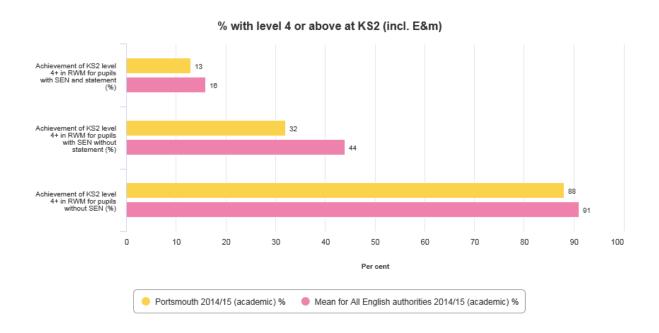


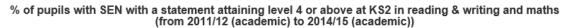
Source:

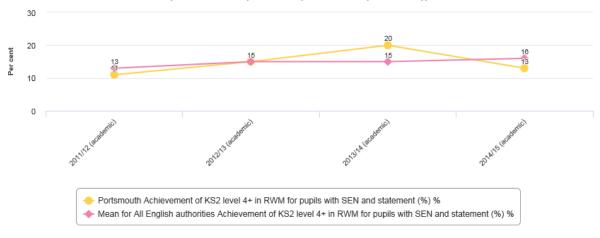
Metric ID: 4668, Department for Education, Phonics screening check and key stage 1 assessments: England Metric ID: 4667, Department for Education, Phonics screening check and key stage 1 assessments: England Metric ID: 4664, Department for Education, Phonics screening check and key stage 1 assessments: England

Key Stage 2

13% of pupils with statements of SEN or EHC plans and 32% of pupils on SEN support in Portsmouth achieve a level 4 or above in reading, writing and mathematics at KS2. For pupils with statements, this is worse than the previous period (20%) and for pupils with SEN support this is worse than the previous period (37%). This compares an All English authorities' average of 16% for pupils with statements of SEN or EHC plans, and 44% for pupils on SEN support. The third chart in this series shows attainment for children with no SEN, which stands at 88% in Portsmouth and 91% in All English authorities.



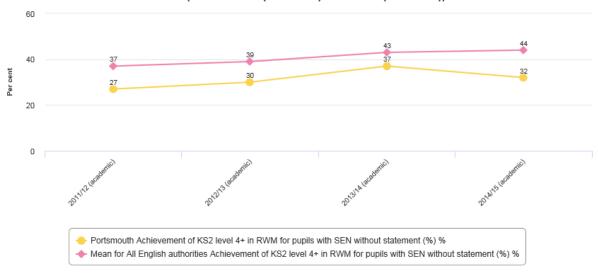




Source:

Metric ID: 4307, Department for Education, National curriculum assessments at Key Stage 2 (KS2)

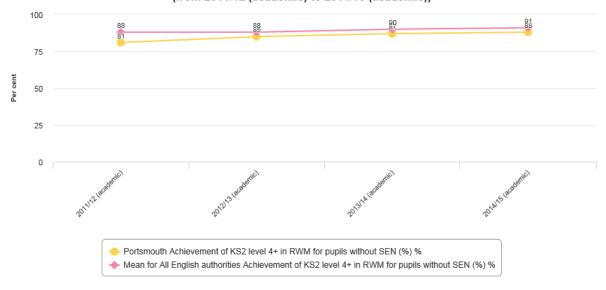
% of pupils with SEN but without a statement attaining level 4 or above at KS2 in reading & writing and maths (from 2011/12 (academic) to 2014/15 (academic))



Source:

Metric ID: 4306, Department for Education, National curriculum assessments at Key Stage 2 (KS2)

% of pupils with no identified SEN attaining level 4 or above at KS2 in reading & writing and maths (from 2011/12 (academic) to 2014/15 (academic))

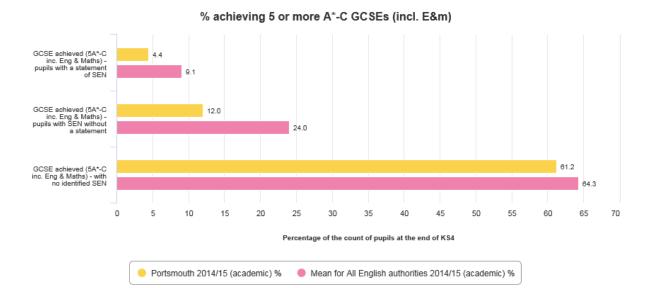


Source:

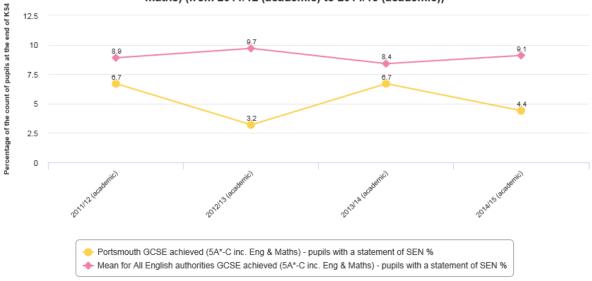
Metric ID: 4303, Department for Education, National curriculum assessments at Key Stage 2 (KS2)

Key Stage 4 (GCSE)

4.4% of pupils with statements of SEN or EHC plans and 12.0% of pupils on SEN support in Portsmouth achieve 5A*-C inc. English and maths at KS4. This compares to the All English authorities average of 9.1% for pupils with statements of SEN or EHC plans, and 24.0% for pupils on SEN support. For comparison, of pupils with no SEN, 61.2% in Portsmouth and 64.3% in All English authorities achieve 5A*-C inc. English and maths at KS4.

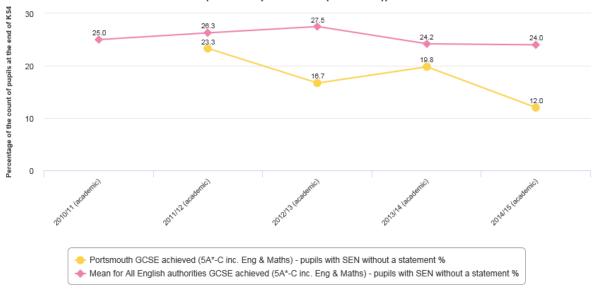


% of pupils with SEN with a statement or plan achieving 5 or more A* to C GCSEs (incl. English & maths) (from 2011/12 (academic) to 2014/15 (academic))

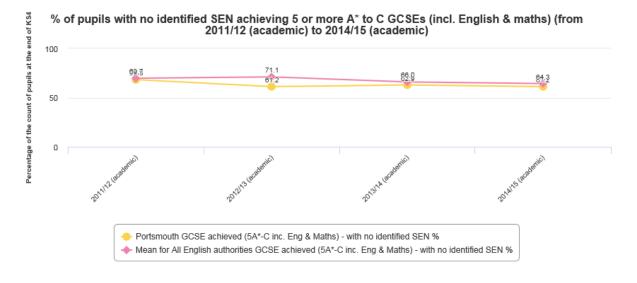


Source: Metric ID: 921, Department for Education, GCSE and equivalent attainment by pupil characteristics

% of pupils with SEN support achieving 5 or more A* to C GCSEs (incl. English & maths) (from 2010/11 (academic) to 2014/15 (academic))

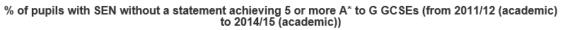


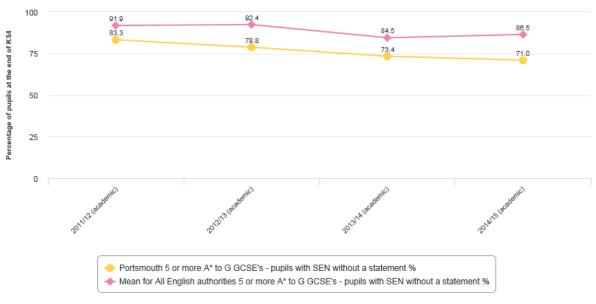
Source: Metric ID: 897, Department for Education, GCSE and equivalent attainment by pupil characteristics



Metric ID: 2181, Department for Education, GCSE and equivalent attainment by pupil characteristics

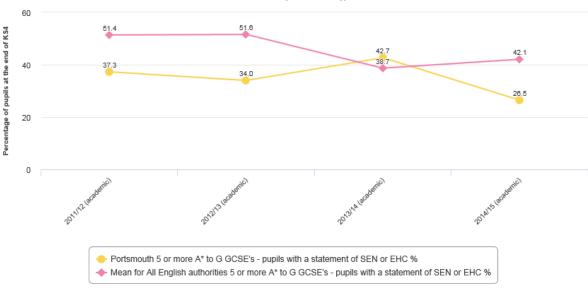
26.5% of pupils with statements of SEN or EHC plans and 71.0% of pupils on SEN support in Portsmouth achieve 5A*-G inc. English and maths at KS4. This compares to the All English authorities average of 42.1% for pupils with statements of SEN or EHC plans, and 86.5% for pupils on SEN support.





Source: Metric ID: 4662, Department for Education, GCSE and equivalent attainment by pupil characteristics

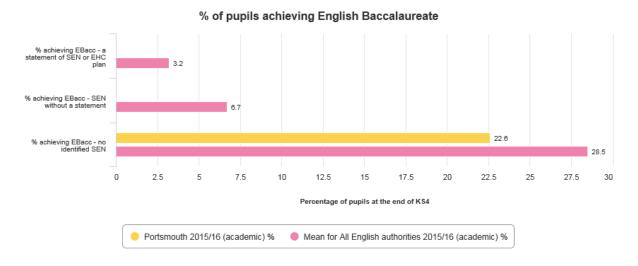
% of pupils with a statement of SEN achieving 5 or more A* to G GCSEs (from 2011/12 (academic) to 2014/15 (academic))



Source:

Metric ID: 4663, Department for Education, GCSE and equivalent attainment by pupil characteristics

Please note that where values are not displayed, this is a result of them being suppressed, which means that the number of pupils is too low to be published.



Source:

Metric ID: 4653, Department for Education, GCSE and equivalent attainment by pupil characteristics

COMMENTARY

Attainment in Portsmouth has been increasing overall and this was broadly maintained in 2017. However attainment is still well below national expectations and this is particularly the case for pupils with SEN, notably those on SEN Support.

There is variation across the years with things dipping, particularly in 2014/15 for a number of indicators. There are bigger gaps at KS4 for progress for those with SEMH but not for attainment. It is difficult to make comparisons across other areas as national results are not broken down by primary need.

In line with the national picture, it is very difficult to make comparisons between schools, as the numbers of pupils are low in many schools and the criteria for identification of SEN differ. Schools in Portsmouth are getting better at more accurately identifying SEN, as opposed to low attainment, however there are no clear criteria nationally. SENCOs have discussed this and shared some of the criterion used in individual schools or clusters of schools. The SENCO Network is working towards developing some shared criteria for identifying pupils on SEN support which will enable us to better target support and identify practice to share.

The percentage of pupils meeting age related expectations in KS1 and KS2 remained significantly below national average in 2017. Rates of progress of pupils on SEN support, whilst still a priority area, improved significantly in KS2 Reading from -4.0 to -2.5 and slightly in Maths -3.8 to -3.1. Progress in Writing at remains of concern -4.8 to -4.7

We know that we need effective targeted support, and tracking and monitoring of pupils' progress if we are to see improvements in these outcomes. This is an area where we are working through the Portsmouth Education Partnership (PEP) and as part of our overall school improvement strategy (working with the Portsmouth Teaching School Alliance) to bring about sustained improvement.

We have identified a cohort of 6 priority schools to do some focussed work on SEN Support, using a framework developed by Challenge Partners, working in collaboration with a national leader of SEN (David Bartram).

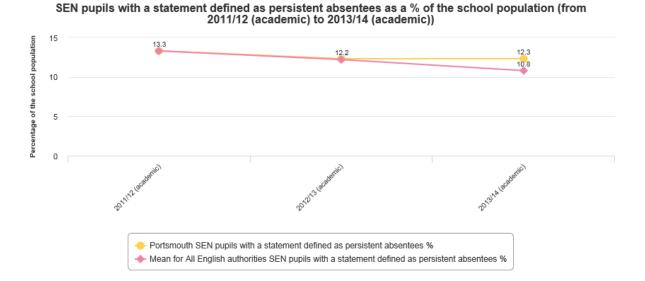
We have put forward a bid to the SSIF which, if successful, will involve a further 14 schools in this work.

Alongside maintaining the drive towards raining overall attainment in Portsmouth there is now an increased understanding and recognition across our schools of the need to focus on the attainment and progress of pupils with SEND, strategies to address this have be shared via the Leadership Conference, the Inclusion Conference and the SENCO Network.

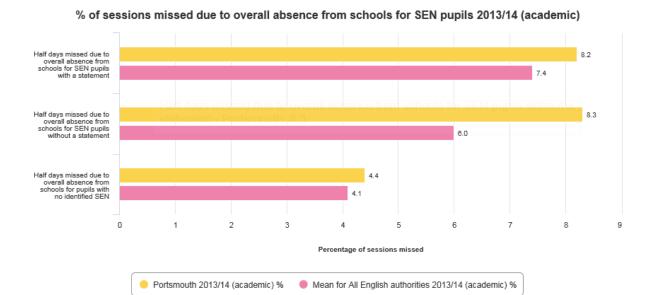
The learning and case studies from our work with the schools involved with Challenge Partners through our School Improvement work and, hopeful the SSIF work will be shared with schools across the city through dedicated workshops and our existing networks.

Absence

Persistent absentees are defined as pupils who have missed 15% or more of school sessions through authorised or unauthorised absence. A session is defined as half a day – morning or afternoon. Overall absence is the total number of overall absence sessions as a percentage of the total number of possible sessions available to that enrolment.



97



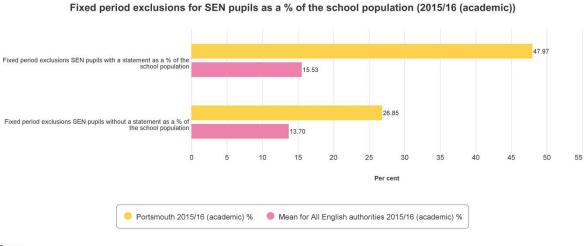
COMMENTARY

Overall attendance is improving and the introduction of the attendance strategy should assist this. The biggest different would be made through improved attendance at our SEMH special school which significant work has gone into.

. The evidence supports the suggestion that SEMH pupils are "over-represented" in both absence and exclusion data.

Exclusion

Fixed period exclusion refers to a pupil who is excluded from a school for a set period of time. A fixed period exclusion can involve a part of the school day and it does not have to be for a continuous period. A pupil may be excluded for one or more fixed periods up to a maximum of 45 school days in a single academic year.



Source:

Metric ID: 4732, Department for Education, Permanent and Fixed Period Exclusions from Schools in England
Metric ID: 4729, Department for Education, Permanent and Fixed Period Exclusions from Schools in England

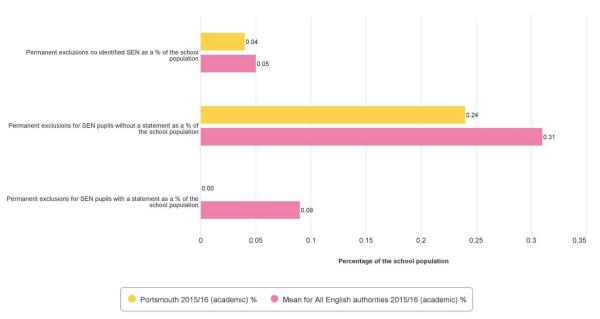
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Permanent Exclusion

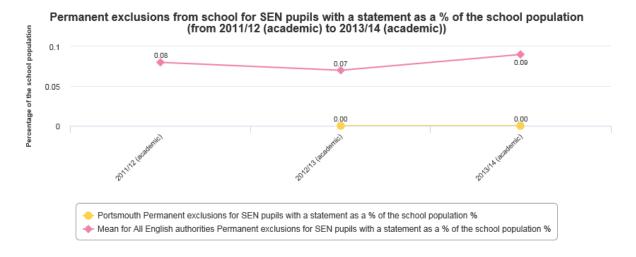
A permanent exclusion refers to a pupil who is excluded and has their name removed from the school register. Such a pupil would then be educated at another school or via some other form of provision.

Please note that where values are not displayed, this is a result of them being suppressed, which means that the number of pupils is too low to be published.

Permanent exclusions from school as a % of the school population



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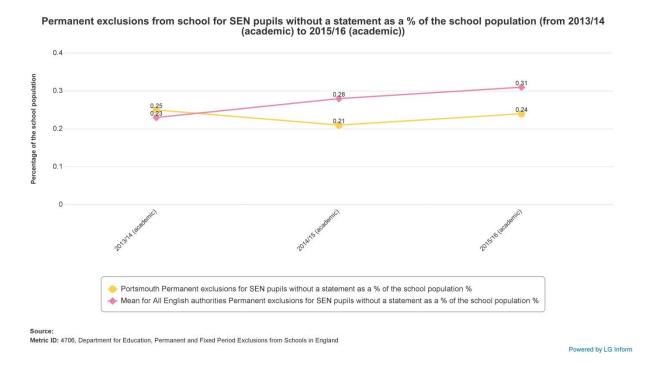
Source:

Metric ID: 4709, Department for Education, Permanent and Fixed Period Exclusions from Schools in England

In Portsmouth the permanent exclusion rates for SEN pupils without a statement was 0.24%, compared to the previous period when it was a rate of 0.21%. In

All English authorities the rate is 0.31%, which has increased since the previous period (0.28%).

Please note the time series may be broken if values are suppressed.

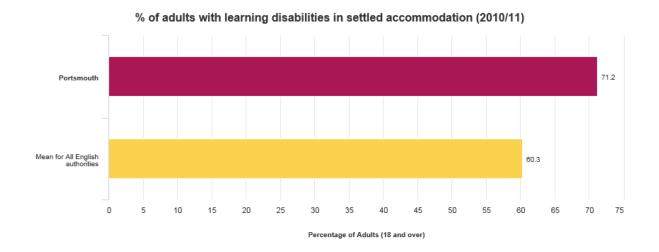


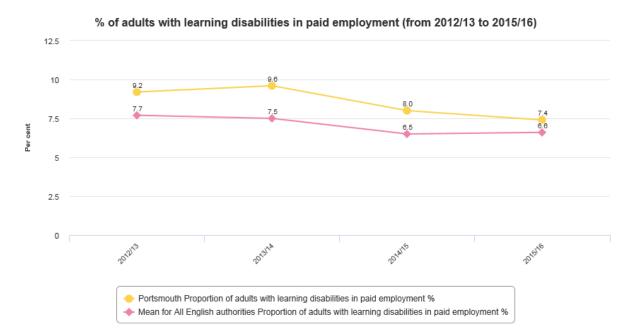
COMMENTARY

In relation to fixed period exclusions, this picture was not improving and the disproportional representation of the SEN Statement/EHCP population was increasing. The introduction of the ordinarily available provision, pupil and curriculum pathways document and rigorous tracking of vulnerable groups and multiple exclusions have shown improvement in the data. Pupils with SEMH as a need type dominate amongst the pupils with exclusion incidents. However, it also shows that this is most prevalent amongst the special school pupils. Therefore there is improvement necessary at the Harbour school to shift this significantly, and recent figures are showing that improvement following the change of management and the beginnings of the implementation of the recommendations of the recent SEMH review.

Permanent exclusions are very low and much work has gone into ensuring that this becomes a redundant tool. Pupils can be catered for equally with or without a permanent exclusion and the inclusion agenda combined with processes around Fair Access and the availability of dual registered alternative provision have meant that schools don't tend to use this sanction.

HEADLINE OUTCOME: MAKE AND MAINTAIN POSITIVE RELATIONSHIPS IN THEIR FAMILIES AND COMMUNITIES





COMMENTARY

In relation to settled accommodation, we have moved from 60/40 Residential Care care/Supported Living split 4 years ago to 42/58 now. A recent ADASS commissioned Report concluded that we are the 3rd highest in the South East region in terms of proportion of Supported Living. We spend £11,567,750 on accommodation and support for people with a learning disability per annum of which £5,416,818 is spent on Supported Living. We commission Supported Living for 228 people, 219 within the City. In 2017/8 we will have an additional 4 Supported Living schemes which will increase the number of Supported Living places to 242.

Our recently published Housing and Support Transformation Plan sets out 3 Key Aims:

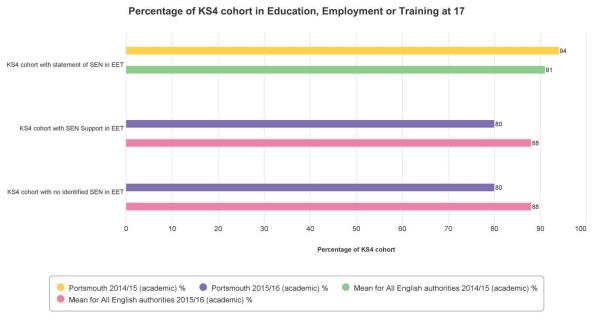
- Change in shape and size of service provision
- Change in culture to one of Independence.
- Supporting people to be part of their Community

And 9 Desired Outcomes - to:

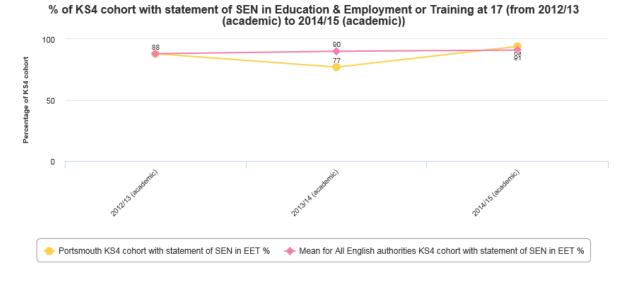
- Increase the range and choice of available housing and support options
- Maximise independence, sense of ownership, and, personal responsibility
- Be cost effective
- Develop and maintain a local market
- Support Transition into adulthood
- Reduce financial vulnerabilities around limited provision for 'specialist' services
- Empower choice and decision making
- Increase quality in both accommodation and support
- Increase the sense of belonging, social inclusion and social benefit

HEADLINE OUTCOME: Participate in education and training post-16 and prepare for employment

The reforms placed increased emphasis on supporting children and young people with SEND to make a positive transition to adulthood, including paths to employment, good adult health, independent living and participating in society. For more information visit http://www.preparingforadulthood.org.uk/.

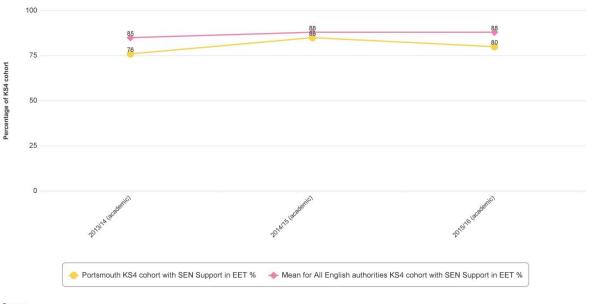


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Source:
Metric ID: 4689, Department for Education, Destinations of key stage 4 and key stage 5 pupils

% of KS4 cohort with SEN Support in Education & Employment or Training at 17 (from 2013/14 (academic) to 2015/16 (academic))



Source:

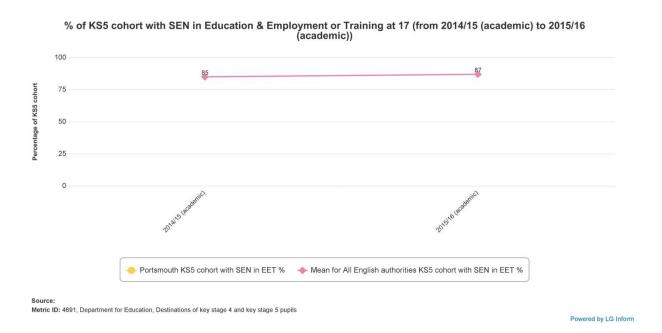
Metric ID: 4688, Department for Education, Destinations of key stage 4 and key stage 5 pupils

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Key Stage 5

Key Stage 5 is the period of education covering pupils aged 16-18. The next chart shows the percentage of the Key Stage 5 SEND cohort in a sustained education, employment or training destination in the first two terms of the year after they completed A level or other level 3 qualifications. This is Missing in Portsmouth, which compares to Missing in the previous period, and the All English authorities average of 87%.

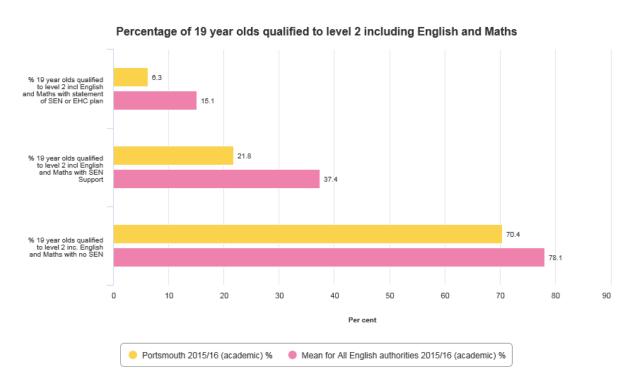


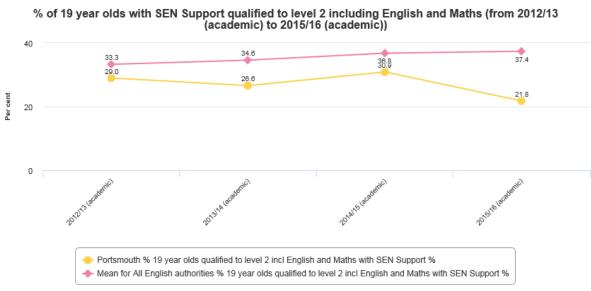


Level 2

Attainment of Level 2 equates to achievement of 5 or more GCSEs at grades A*-C or a Level 2 vocational qualification of equivalent size. The next chart shows that the percentage of the SEN cohort studying in Portsmouth at the age of 16 (academic age 15) who attain a Level 2 qualification, including English and Maths, by the age of 19, is 21.8%, compared to an average of 37.4% across All English authorities. This compares to those with statement of which 6.3%

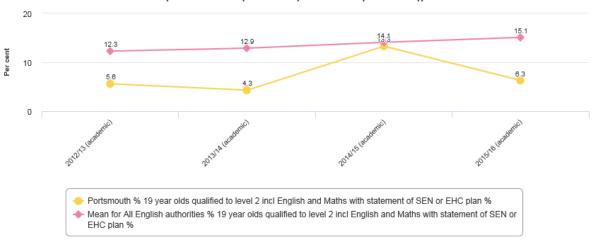
attained a Level 2 qualification, including English and Maths in Portsmouth and 15.1% in All English authorities.





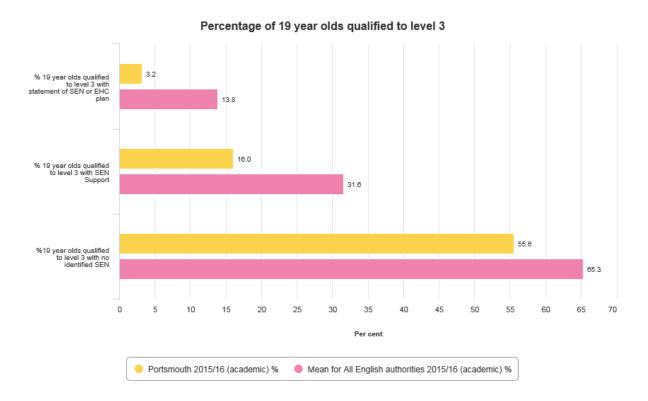
Source: Metric ID: 4672, Department for Education, Level 2 and 3 attainment by young people aged 19

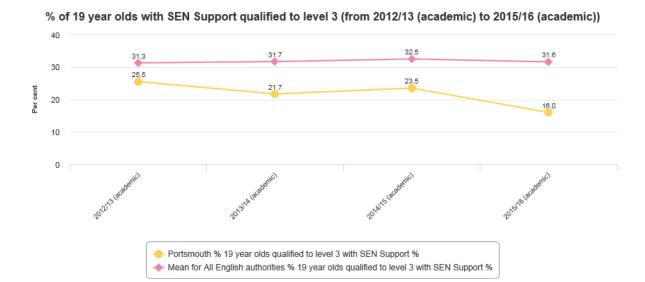
% of 19 year olds with statement of SEN or EHC plan qualified to level 2 including English and Maths (from 2012/13 (academic) to 2015/16 (academic))



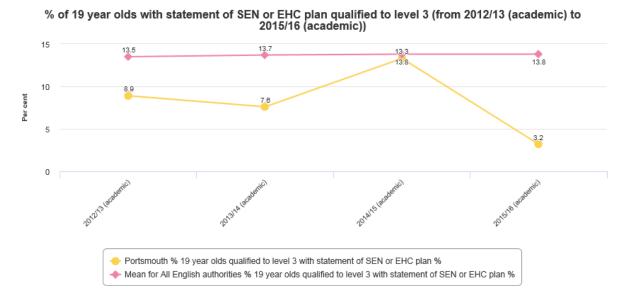
Level 3

Attainment of Level 3 equates to achievement of 2 or more A-levels or equivalent qualifications. The following chart shows the percentage of the SEN cohort studying in Portsmouth at the age of 16 (academic age 15) who attain a level 3 by the age of 19 is 16.0% for those with SEN support and 3.2% for those with a statement or EHCP.





Source:
Metric ID: 4678, Department for Education, Level 2 and 3 attainment by young people aged 19



Source:

Metric ID: 4679, Department for Education, Level 2 and 3 attainment by young people aged 19

COMMENTARY

Participation in Post-16 Education

Participation of young people at age 17 and 18 is positive for young people with an EHCP. The latest data is 91% national and 95% for Portsmouth. More needs to be done to support the progression of young people with SEND support and this will be a focus of work moving forward.

Current programmes including a Youth NEET Prevention programme that supports young people on the RONI list (including young people with SEND) to progress will be reviewed to ensure they include young people with SEND support.

Tri-Work: Young Person's Supported Work Experience for Schools

The Department for Work and Pensions have invited us to join a funded pilot programme to support young people in years 10 and 11 with SEND to participate in a four week work experience placement. The aim is improve transition to employment (traineeship/apprenticeship) for these young people at 16 or after post-16 education. The programme will be designed to be flexible and work around best options for the school and the young person

Further work needs to be done to continue to support NEET young people with SEND to engage. SEMH continues to be the main reason young people with SEND are NEET. Colleges and other Post-16 Providers are concerned about SEMH and the impact on participation and progression.

We are working with providers to support them with a joint approach through the post-16 Forum and Portsmouth Education Partnership.

Advisers who work with young people who are NEET will receive further training to help them support young people with SEND

A SEND transition guide is being developed to support young people and their families and carers to make a positive transition to post-16 education Supported Internships continue to be developed across the travel to learn area.

In relation to increasing numbers of adults with learning disabilities in paid employment, this is an area we are actively working on. We have:

- commissioned a work assessment, finding and support service
- made employment a key outcome in support planning,
- assigned a named worker to proactively work with everyone re the outcome of work
- freed up the money by significantly reducing block expenditure which in turn allows the growth and funding of Social Enterprise.

We are working closely with current and potential providers to create a rich and diverse market and have created a post whose focus is this area of activity.

SECONDARY INDICATORS

Headline Outputs	Performance Measure	2015/16	2016/17	2017/18 Qtr 1	2017/18 Qtr 2	2017/18 Qtr 3	2017/18 Qtr 4	RAG	TREND AND NOTES	
	% children at Year R (age 4-5) receiving height and weight checks	95%	95%	n/a - report Q3	n/a - report Q3			Green	This is an annual report in Q3	
Lead healthy lives and achieve wellbeing	% children at Year R (age 4-5) receiving hearing and vision checks	95%	95%	n/a - report Q3	n/a - report Q3			Green	This is an annual report in Q3	
	% of eligible young people and adults aged 14 years and above with a learning disability having a GP health check	n/a	n/a	n/a	37.07%			New measure		
	Numbers of referrals to paediatric therapies of CYP aged 0-19 years. Only just started reporting on this so only have July and August data	n/a	n/a	n/a	222 (new measure so only July and August)			The Paediatric therapy measures were bought into the service specification in early 2017. These were added into System One and were reportable from July; therefore the data available is only for July and August		
	% of children and young people seen within 12 weeks from referral by integrated Therapy Team	n/a	n/a	n/a	74% (new measure so July and August average)			is only for July and August. There have been no targets set against these measures as it was agreed they are founderstanding the demand on the service as the aim is to be more outcome and quality focused, with the exception of the "Paediatri		
	Paediatric therapies: Percentage of routine referrals	n/a	n/a	n/a	98% (new measure			therapies: Percentage of patients waiting 18 weeks of less from referral to		

					so July and August average	95%. This averaging Exception	which is set at is currently 96%. reporting and data will be
	Paediatric therapies: Percentage of inappropriate referrals	n/a	n/a	n/a	3% (new measure so July and August average)	reported o	n at quarterly views, the next on 8 th November.
	Paediatric therapies: Percentage of patients waiting 18 weeks or less from referral to treatment	n/a	n/a	n/a	July 100% in August 92%	Amber	Should be 100% without exception - likely to be an issue with August holidays
	Paediatric therapies: Percentage of first assessment appointments which are DNA'd	n/a	n/a	n/a	3% average July and August	Green	Requirement for <10%
	Paediatric therapies: Percentage of follow up appointments which are DNA'd				11% average July and August	Amber	Requirement for <10%
	CAMHS indicators (from reporting set - see below)See below						
Implementation of the reforms	% children and young people (0-25) with statements assessed and EHCP issued	3.1%	3.3%	1511	1443	n/a	Data available annually via DfE SEN2 SFR: uses DfE school population data.

w	% new EHC plans issued vithin 20 weeks, excluding exceptions	86.7%	98.0%	95.6%	83.8%		Amber	For quarters, provided total Numbers at end of quarter from Capita ONE. 2017 SEN 2 SFR has up to calenda 2016 (treated as
P	Proportion of new EHC plans ssued within 20 weeks, ncluding exceptions	59.8%	80.9%	95.6%	83.8%		Amber	2016/17) 2017 SEN 2 SFR has up to calenda 2016 (treated as 2016/17)
yo st	lumber of children and oung people (0-25) with tatements assessed and no EHC plan issued	0	6	0	0		n/a	
(0	6 children and young people 0-25) with statements assessed and no EHC plan ssued	0% of Statements maintained at 15th January 2015 or 0% of the total number of Children and young people with statements who were issued with an EHC plan by 21st January 2016 with	0.71% of Number of statements maintained at 21st January 2016 or 1.38% of the total number of Children and young people with statements who were issued with an EHC plan by 19th January	0%	0.0%		n/a	

		the Children and young people with statements assessed and decision made not to issue EHC plan	the Number of children and young people with statements assessed and decision made not to issue EHC plan by 19th January				
	Number of personal budgets taken up for EHC plans issued and transferred or reviewed	5	2017	-	-		DfE Changing definitions from next year Jan 2018 so won't be consistent SFR.
Experience of	Number of SEND mediation cases that have been held	Х	1				
the system (see narrative section D)	% SEND mediation cases that went on to appeal	0%	100.0%				
	Number of SEN appeals per 10,000 of school population						

CAMHS Indicators (national performance measures to be reported from mental health services dataset when available)

REFERENCE NUMBER	PERFORMANCE MEASURE
CYP01	People in contact with children and young peoples' mental health services, end of reporting period
CYP23	Open referrals (children and young peoples' mental health services), end of reporting period
MH01a	People in contact with mental health services aged 0-18, end of reporting period
MHS32a	Rerrals starting in reporting period, aged 0-18
MHS38b	Referrals active at any point in the reporting period, with indirect actility in the reporting period, aged 0-18
MHS39a	People with a referral starting in reporting period, aged 0-18
MHS57a	People discharged from a referral in reporting period, aged 0-18
MHS55a	People attending at least one contact in reporting period, aged 0-18
MHS30d	Attended contacts in reporting period, aged 0-18

MHS61a

c. DEMAND MANAGEMENT INDICATORS

The Children's Trust Board has indicated that it would be helpful to begin considering indictors of demand management in the city - the indicators below will begin to be measured from the second half of 2017/18

Demand Area	Performance Measure	2015/16	2016/17	2017/18 Qtr 1	2017/18 Qtr 2	2017/18 Qtr 3	2017/18 Qtr 4	RAG	TREND AND NOTES
Education, Health and Care Plans - monitor demand	Number of EHCPs requested								
Out of city placements - monitor to ensure this is not increasing	Number of out of city placements								
Continuing healthcare - ensure good value for money from placements	Number of new placements								
	Number of placements reviewed								
	% placements meeting need								
	Average placement costs								

Experience of the system narrative appendix

Tribunals - issues and learning summary

This report will be available from January 2018.

Feedback summary

Extract taken from the Personal outcomes Evaluation Tool 'POET Final Report' The full report can be found in the embedded document below.

Executive Summary

We wanted to understand how the EHCP process was working from parent's and children's perspectives. This work was conducted in partnership with the SEND team, the corporate team and the communications team who undertook the task of enabling the online surveying to proceed. It was hoped that we could get a survey response group large enough to carry out a detailed analysis, certainly in excess of the 19 responses achieved in 2016. As it transpired the online format was a success and we received a total of 119 responses from parents and children.

The surveying was designed to capture a broad range of views that parents and children had about their involvement in and outcomes from EHCP processes. What we saw from the data we received back was a broadly positive in outlook with a number of interesting caveats.

- Parents are feeling more optimistic about EHCP matters than their children
- Mothers tend to get more from their involvement in EHCP than fathers do
- Girls appear to be operating at a disadvantage in EHCP processes

As a result of the valued feedback that parents and children have provided us, we have understood the following points.

- Our survey pool is broadly representative of the populace in general
- Personal Budgets are still not a significant factor in connection with EHCP
- Generally the EHCP process is working well

- Education settings are influencing some outcomes
- Mature EHCP are perceived to influence some outcomes positively due to individuals becoming accustomed to them as time
 moves on
- Gender differences are evident in children's involvement and outcomes
- Gender differences are evident in parental outcomes
- The local offer needs more publicity

Based on these points a number of recommendations are made at the end of this paper that will hopefully address the concerns of interested parties. We will also continue to work alongside all our partners on similar surveying projects in the future.

SECTION E - PPV "WHAT'S TRENDING?" REPORT

