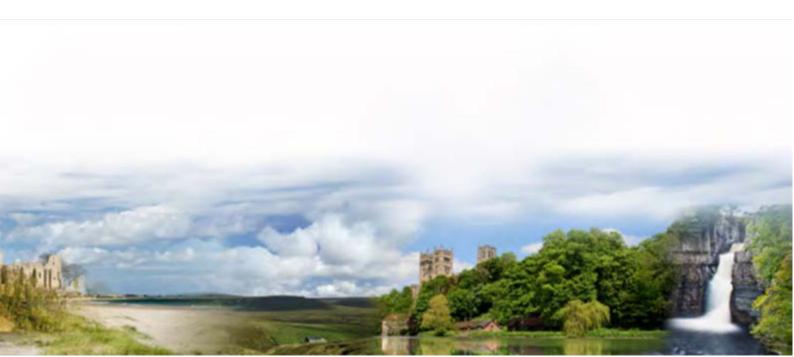
County Durham Integrated Steering Group for Children

Local Area SEND Inspection
Improvement progress one year on



Introduction

Thank you for the opportunity to update you with our progress against the recommendations made by Ofsted and the Care Quality Commission in their joint Local Area Special Educational Needs and Disabilities (SEND) inspection in Durham last year. One year has passed since the inspection was concluded. Significant progress has been made in the further implementation of the reforms set out in the Children and Families Act 2014 over the last year. The improvements that have been made in 2018 are detailed within this document and for reference are set out against each of the written statement of action (WSoA) areas below. References contained within this document refer to individual actions in our Written Statement of Action.

Executive Summary

Significant progress has been made in 2018 against the recommendations set out in the inspection letter following the joint local area SEND inspection which can be summarised as follow:

Strategic leadership and governance of SEND reforms

A new leadership, governance and accountability framework implemented

- Senior management restructure of children and young people's services in Durham County Council establishing a Head of Early Help, Inclusion and Vulnerable Children with responsibility for SEND
- Quality Improvement Manager post established to develop, agree and implement service transformation and practice improvement to further support children and young people with SEND
- CCG response with a revised job description for Designated Clinical Officer.
- Integration of the Quality Improvement Manager and Designated Clinical Officer through their co-location and integrated work programme
- Strengthening of political oversight of SEND issues
- Regular reporting to CCG governing bodies
- Patient congress session held to improve awareness of SEND
- Refresh of Local Area SEND Strategy coproduced with parent carer forum
- Children and Young People's Promise developed by children and young people themselves
- Participation Strategy developed by parent carer form
- Participation Strategy cited as best practice by Local Government Association
- System wide audit of SEND reforms conducted by local health service providers improving service interface for Children and Young People.
- Health needs assessment of young people with SEND commissioned by Public Health providing a deeper insight into needs for 2019

Performance management and quality assurance

- Key performance data for priority areas agreed and reporting rationalised into one document
- Clear escalation process for performance challenges established

Provision/Local Offer

- Schools support delivered through Special Educational Needs Coordinators. Attendance at network meetings improved from 126 to 145 schools
- o 16 new SENCOs completed the National Award for SEN Coordination
- 49 autism training and development sessions ran for school staff attended by 900 people
- o A two day event ran in June 2018 on autism attended by Emily Reuben
- Three new enhanced mainstream provisions identified for secondary school age phase
- An eight bed 52 week residential and learning setting for young people aged 14+ jointly commissioned

Assessment

- o EHCP completions within 20 weeks improved from 85% to 91%
- New procedures introduced for Education, Health and Social Care Managers to monitor EHCP completion rates and implement learning
- Steps taken to improve feedback response quality and rate from parent carers

Exclusion

- Behaviour Partnership Panels established to develop strategies to support young people under threat of exclusion
- Exclusion trends monitored by Local Area with challenge and support provided to schools with high rates

Health

- Waiting times for SALT continue to improve, currently 72% of routine referrals are being seen and assessed within 6 weeks
- Over 90% of those referrals receive treatments within 12 weeks of assessment
- Funding increased to implement a single provider Social Communication Assessment Team (SCAT) diagnostic service
- Waiting times for patients on SCAT waiting list has halved
- Learning from EHCP panels shared at three half-day health focused training sessions
- o Greater scrutiny of health service provider performance

Social Care

- 481 Social Care Staff 71% of the workforce undertaken SEND awareness training
- Revised short breaks offer introduced increasing the number of families that can access this service

Improving progression

- o Supported Internship Forum established resulting in 27 new internships
- Tri-Work Young Persons' Supported Work Experience for Schools Pilot introduced resulting in 125 young people gaining work experience
- Children and young people carried out their own review of good practice in relation to support for young people during transition from schools to post-16 providers

- Pilot programme introduced to increase the number of young people with SEND travelling independently
- 991 young people with SEND participated in employment, education or training, 438 progressed to employment
- Reduction in young people with SEND who are not in education, employment or training reduced from 20.2% to 16.1%

Strategic planning and joint commissioning arrangements

- More integrated governance and planning arrangements introduced for commissioning. Including a balanced provider scorecard introduced to monitor performance
- Jointly funded assistive technology pilot improved the lives of six children and young people
- Service user engagement exercise for children's therapy services carried out
- Co-creation and commissioning of Durham Resilience Project to improve independence and resilience of young people with 20 schools taking part
- Five emotional health and resilience nurses commissioned
- CCGs introducing a coordinator for personal health budgets for children, 10 children and young people now have personal health budgets
- Jointly funded post for commissioning services for children with autism introduced

Approach to strategic co-production with parents and children

- Coproduction of a Participation Strategy which is cited as best practice by Local Government Association All leaders and frontline staff to be trained in the new strategy by the parent carer forum and Special Educational Needs and Disabilities Information and Advice Service early in the new year
- Parent Carer Form delivered two conferences attended by over 150 parents
- SEND Toolkit developed in coproduction with parents for parents with six parent led training sessions on the toolkit delivered in 2018
- Young People's Future Event planned by young people delivered in October aimed at children and young people aged 13-25
- Children and young people supported the CCG in the children's therapies review
- 30 secondary schools and post-16 providers engaged by SENDIASS Young People's Development Worker to develop SEND practices
- 994 people attended Fulfilling Lives event resulting in 25 new enrolments of young people into higher education

Further detail on these improvements is presented below.

Improvements

WSoA Area 1 – there are fundamental weaknesses in the local area's strategic leadership and governance which have resulted in the disability and special educational needs reforms being implemented too slowly.

Strategic oversight and linkage with other partnership activity has been transformed by establishing a new leadership, governance and accountability framework for all local area provision for children and young people with SEND. These arrangements have been implemented as part of the introduction of strengthened partnership arrangements through the Integrated Steering Group for Children (ISGC), which is jointly chaired by Durham County Council's Corporate Director of Children and Young People's Services and Director of Nursing, for the Durham Dales, Easington and Sedgefield Clinical Commissioning Group (CCG) and North Durham CCG. The ISGC reports into the Integrated Care Board. This is the key decision making authority for the new strategic model of health and social care in County Durham. The ICB reports to Durham's statutory Health and Wellbeing Board. A diagram of the governance structure is set out in our written statement of action.

Work stream groups have been established for each of the written statement of action priorities. Each work stream has an agreed term of reference (WSoA references 1.1 – 1.8) setting out objectives, desired outcomes, membership and a timetable of future meetings. All groups have parent carer representation through Making Changes Together (MCT) which is Durham's official parent carer forum to support coproduction in all areas of work.

A review of the resources available to effectively lead SEND services across the Local Area was undertaken alongside a fundamental management restructure of children's services within Durham County Council. A number of key changes and appointments have been made. These include:

- Local authority services are now combined under an Early Help, Inclusion and Vulnerable Children portfolio. Following recruitment in summer 2018, these services are now led by a new Head of Service with SEND and inclusion work as a central part of this portfolio.
- Health service resources have been reviewed and a revised job description for a dedicated Designated Clinical Officer (DCO) has been agreed. This will build on recent work of the DCO and Designated Medical Officer (DMO) roles, bringing additional capacity and improving joint working on the SEND agenda.
- A Quality Improvement Manager post has been established in the local authority and an appointment has been made to this position. The postholder works with partners, children, young people and families to develop, agree and implement service transformation and practice improvement to further support improved outcomes for children and young people with SEND.

The new DCO and recently recruited Quality Improvement Manager are based together within Durham County Council's children and young people's services, and have an integrated work programme agreed and overseen by the council and the CCGs.

Political leaders are briefed on SEND practice, strategy development and quality assurance issues through Overview and Scrutiny meetings, fortnightly meetings with the council's Corporate Director of Children and Young People's Services and monthly meetings with the new Head of Early Help, Inclusion and Vulnerable Children. This has raised the SEND profile facilitated service improvements, responses to demand and gave recognition and response to financial pressures. This is complemented by detailed reports to Cabinet (WSoA reference 1.09 report to Cabinet on high needs block pressures), discussions with head teachers and reports to the Schools Forum regarding funding issues and options around SEND financial pressures. Cabinet has agreed proposals regarding high needs block funding pressures, which includes support from the council's reserves to help manage current levels of demand.

Regular update reports are also provided to the public meeting of the CCG Executive and Governing Body (WSoA reference 1.10). In addition, updates on the SEND WSoA are reported to CCGs through respective work plan briefings to its Executive Board. A patient congress session was also held in May 2018 dedicated to learning disabilities (WSoA reference 1.11) which included an update on SEND. The impact of this has been to increase public awareness of SEND and also what support is available such as the Special Educational Needs and Disabilities Information Advice and Support Service (SENDIASS.) It has also increased public awareness of the importance of having annual health checks for people with a learning disability, evidenced by the improving uptake with the local area.

The Local Area SEND Strategy has been refreshed in coproduction with representatives from MCT, the eXtreme group of young people and partners across education, health, care and commissioning. The SEND Strategy provides a shared understanding of the vision for the local area incorporating the findings and recommendations of the extensive Local Area review work (WSoA reference 1.12 High Needs Review and WSOA reference 1.13 Autism Review). This is underpinned by the Children and Young Peoples Promise developed by the eXtreme group (WSoA reference 1.14), a representative body of children and young people with SEND and the Participation Strategy developed by MCT (WSoA reference 1.15). The Participation Strategy is being considered as best practice in the Local Government Association publication <u>Developing and sustaining an effective local SEND system: a practical guide for councils and partners</u>.

The revised SEND Strategy was discussed at the MCT Conference in November, and received the endorsement of a wider group of parents and carers. Work will take place early in 2019 to further promote the strategy to raise public and partner awareness through a cross service partnership communication plan. There will be further revisions to the SEND Strategy in September 2019 based on the findings of the needs assessment and additional engagement activity.

The coproduced Local Area SEND Strategy will continue to make positive changes in provision for children and young people with SEND, through the promotion of a shared vision across the local area and implementation of actions agreed in Local Area reviews. To measure the effectiveness of cross service communications, A survey is currently being undertaken to measure the effectiveness of cross service communications across the Local Area. Learning will be taken from the survey which will be repeated again in Spring 2019 and fed into the revised strategy in September 2019.

To further support strategic leadership and governance, a health system wide audit tool (WSoA reference 1.16) was completed by local health service providers in April 2018 to establish compliance against SEND reforms and gain assurances that internal systems and processes are in place. Individual action plans for each service providers are rigorously monitored and discussed at the Quality Assurance and Standards Group. This has led to good practice can be shared such as the education, health and care plan (EHCP) monitoring tool (WSoA references 1.17 and 1.18) and tracking systems being established across health teams and standard operating procedures being developed within health teams.

The ISGC have prioritised a new health needs assessment (HNA) of young people with SEND commissioned by Durham County Council's Public Health Team and this is currently underway. The HNA process is being coproduced with a range of key stakeholders including parents, children and young people to ensure that coproduction is at the heart of all future service design and that the voice of children, young people and their families is captured in a meaningful way.

During the process of developing the HNA a number of key products will be reported to the Local Area, including an updated Joint Strategic Needs Assessment SEND factsheet providing a comprehensive picture of the SEND population from the data sets currently available as well as identifying gaps from a data and intelligence perspectives. A specific focus of this work is vulnerable groups including those children and young people who are educated either outside of the boundaries of County Durham or those who are accessing education with an alternative provider. In relation to these action areas, we have identified the following as further areas for development in 2019:

- We will continue with and further refine our partnership governance arrangements and oversight by political leaders to ensure we monitor progress, quality improvements and evidence impact for children and young people
- Work with leaders across all learning settings to transform high needs provision ensuring the local offer is further improved
- Working specifically to improve health and reduce inequalities for children and young people who have SEND

WSoA Area 2 – Leadership have an inaccurate view of the effectiveness of the local area. The analysis and use of performance information to tackle weaknesses in education, health and care outcomes are poor and there has been a lack of rigorous quality assurance and monitoring to inform decision-making.

Key performance data on high priority areas were agreed and are now being reported in one document which is monitored and discussed at the Quality Improvement Board and Quality Standards Group, as per their terms of reference (WSoA reference 1.7) and escalated in accordance with the new governance structure. High priority area performance data includes information on the following areas:

- Out of county placements.
- Number of EHCPs being completed within 20 weeks.
- Identification of the schools requiring most support to include pupils.
- Length of waiting times to access therapy services and Child and Adolescent Mental Health Services (CAMHS).
- Identification of SEND status across children's social care.
- Take up of post-16 placements for young people with SEND.

This improved approach is enabling a greater understanding and scrutiny by all partners and early identification of themes, trends and deficits in performance and escalation to the SEND Quality Improvement Board as necessary. In addition to this, there is a clearly established escalation process in place, whereby issues raised during contract meetings between CCG and providers will be reported to the DCO/DMO (WSoA reference 2.1). The impact of this means the DCO is better sighted on issues as they arise and can act and resolve any problems quickly.

The high priority areas have focussed resources used to deliver critical areas of SEND provision that require either positive change or maintenance of good performance to improve outcomes for children and young people.

Out of county placements - Provision / Local Offer.

Durham County Council supports schools in their SEND provision through the ongoing practice of Special Educational Needs Coordinators (SENCOs) through Network Meetings (WSoA reference 2.2) over the year attendance has improved from 126 to 145 schools. In addition over the year 16 new SENCOs completed the Durham led National Award for SEN Coordination (NASENCO) increasing the total number of those qualified to 107. The impact of effective SENCO practice and support on school leadership cannot be underestimated the following SENCO impact testimonial demonstrates this

"The course has allowed me to have a bigger picture of the management of inclusion within the school. It has allowed me to work more strategically, delegate and upscale teaching assistants and higher level teaching assistants within. More strategic interventions can now be planned for"

Further examples of the quality and support offered to and by SENCOs can be seen ref NASENCO studies / testimonials (WSoA reference 2.3).

The High Needs Review identified through coproduction with children and young people and parent carers, the need to improve the awareness and skills of schools in supporting young people with autism. The LA has ran 49 autism training and development workshops for school staff, which was attended by over 900 people. In addition an arrangement has been developed between the SEND Autism Team and The Oaks Special School to deliver Autism Education Trust training to support parental confidence in the offer to school staff.

The Local Area also hosted a two day event in June facilitated by the SEND Autism Team and delivered by the internationally renowned speaker, Emily Reuben. The conference was fully attended by representatives from both mainstream and special schools and NHS health professionals. A follow up Social Communication, Emotional Regulation and Transactional Support (SCERTS) interest group has been established, and is having an impact on policy and practice. The impact of the SCERTS approach and the AET team on supporting inclusion be seen in the attached case studies (WSoA reference 2.4). A example can be seen in the following case study

L a Y6 boy presenting with anxiety; felt that school was about '3 out of 10' and could not think of anything that he liked about it, Ls behaviour resulted in long periods out of class. Following a 12 week support programme L made positive steps towards being able to talk about his feelings and use calming strategies. By the end of the intervention L was in class for up to 75% of the school week, grandparents reported that 'his mood is much lighter; he seems happier in himself and he is talking about his feelings much more'. L said that he felt school was now '6 or 7 out of 10' and that this was because he now 'has someone to talk to'.

In relation to these action areas, we have identified the following as further areas for development in 2019:

- We have identified three new enhanced mainstream provisions (EMP) for young people in the secondary age phase, which are scheduled to come on line in September 2019. An outline example can be seen in WSoA reference 2.5 Developing enhanced provision for pupils with autism in secondary education. The provisions are all developed in partnership with the local authority, special and mainstream schools ensuring access to appropriate adaptations and curriculum, each provision is centred in a strategic location to reduce associated travel time and cost. We have confidence in the new provisions developed through the successful running of 10 EMPs in the county, a high parent demand for ASC specific EMP placement (Autism and High Needs Reviews) and the new provisions all being developed with schools judged to be good or outstanding.
- The Local Area is jointly commissioning an eight bed 52 week residential and learning setting for young people aged 14 plus in order to address gaps in provision for the most complex needs In addition to this a further eight bed supported living accommodation unit will be jointly commissioned between education, health and care. Despite this being a small cohort the impact on resources is significant and the Local Area recognise the strength of such an offer in County Durham.

Number of EHCPs being completed within 20 weeks.

The Local Area maintains scrutiny on the 20 week completion schedule for new EHCPs. Performance has been historically been consistently high in County Durham but an even further improvement from 85% in 2016-17 to 91% in April-July 2018 has been achieved.

Education, Health and Social Care Managers now meet on a weekly basis to consider Draft EHC Plans prior to the 16 week deadline, and finalisation of the draft EHCP for consultation with schools/providers. This process has ensured a continuous improvement in the overall quality of EHC plans and improved communication between Education, Health and Social Care. Areas of good practice and underperformance are reported back to service areas and teams to ensure ongoing improvement by the DCO (WSoA reference 2.6).

We recognise that we can improve our feedback loop with parent carers and children. Previous methods of surveying parents at the end of the EHCP process has had a low response, therefore revised methods of proactively seeking feedback from parents has provided a much improved response (WSoA reference 2.7). We will build on improving the uptake of responses, but have confidence in parental satisfaction as the new sample is in line with the latest Department for Education guidance - Experiences of Education, Health and Care plans: a survey of parents and young people, This report cited Durham as having one of the highest rates of overall satisfaction (WSoA reference 2.7).

Identification of the schools requiring most support to include pupils.

As a Local Area Durham has not had any permanent exclusions of primary aged children, looked after children or young people with an EHCP over a 3 year period. Despite this the Local Area has heard from parents of the negative impact that repeat fixed term exclusion has on their children and themselves in our High Needs Review, and how this erodes confidence in the ability of mainstream schools to meet the SEND needs of their children.

Schools are supported to be inclusive through Behaviour Partnership Panels. These are local partnerships between schools, education, SEND, Inclusion and Early Help staff where strategies to support young people are put in place. An example of this would be the Behaviour Improvement Team (Crisis Response) who have supported schools with 56 pupils in crisis, and prevented exclusion in all instances; the full impact report can be seen in WSoA reference 2.8.

The Local Area is monitoring exclusion trends and identifies schools with the highest levels of exclusions in each age phase and each type. These schools are provided with appropriate challenge and support from partners. This has helped leadership in the Local Area better understand the pressures that lead to exclusion and to support appropriately prior to exclusion taking place. An example of this challenge and support can be seen in the following case study.

F has their needs recognised through an EHCP, at school, F had received several fixed term exclusions and parent was becoming frustrated with the support being made available. The school made effort to improve support and received additional resource through top up funding to meet need. Despite this school went on to instigate what would have been the first permanent exclusion of a child with an EHCP in County Durham. Following an appropriate challenge from the Head of Education and the offer of further support to the school, an independent review panel overturned the schools decision. F has returned to his local school with his siblings, the school have received advice and support from the Local Authority Autism team and F is now better included in the local learning offer.

In relation to these action areas, we have identified the following as further areas for development in 2019:

- There needs to be an agreed approach across all schools to further reduce exclusions of young people with SEND. Through joint working with the Durham Association of Secondary Heads (DASH) we have developed an Inclusion Strategy and are planning for the September 2019 implementation of:
 - Increased high quality alternative provision offered as a proactive alternative pathway for young people who are not benefitting from the core curriculum.
 - A teaching school demonstrating an early intervention nurture model that improves the transition of children with SEND through Year 5 planning and engagement and the development of a nurture base in school (WSOA reference 2.9).

Length of waiting times to access therapy services and Child and Adolescent Mental Health Services (CAMHS).

Despite the steady increase in referrals to Speech and Language Therapy (SALT), on average between 62% and more recently 72% of children and young people have been seen and assessed within 6 weeks of referral. This demonstrates a steady improvement over the last year, which we expect to continue. We also anticipate a reduction in the number of referrals to generic SALT service due to the new Social Communication Assessment Team (SCAT) pilot service, which now undertakes their own SALT assessments. The 90% target for children and young people assessed and treated within 12 weeks of assessment has consistently been achieved throughout the last year.

As previously mentioned, an escalation policy has been agreed between CCG contract demand management teams and DCO/DMO, which facilitates greater scrutiny of health provider's performance. The impact of this means the DCO is better sighted on issues as they arise and can provide further challenge on performance, have access to health service improvement plans and alert CCG executive accordingly if health providers continue to underperform.

We have increased funding to implement a new single provider autism spectrum disorder (ASD) diagnostic service to address the unacceptable high waiting times and backlog of referrals to SCAT. Since commencement of this new service in September 2018, the backlog of referrals has been reduced from 565 to 480 and waiting times reduced from the longest time of 98 weeks to on average 45 weeks, although this varies across the local area. Contractual arrangements are now in place to ensure continued reduction in waiting times and quarterly performance monitoring to ensure the target of 12 week waiting time by the end of July 2019 is achieved.

The new ASD diagnostic service has been evaluated (WSoA reference 2.10). Part of the evaluation process included talking to parents and carers who told us that having an earlier diagnosis affects the support they receive for their child at school and that the report helps toward improved understanding of their child's needs.

Parents and carers also told us they found the clinic letter from SCAT unhelpful and felt there was no support available whilst they waited for the ASD assessment. The clinic letter has therefore been modified (WSoA reference 2.11) and positive feedback received by Making Changes Together Parent Carer Forum.

The findings of the EHCP quality assurance panels and the health provider systems audit have been used to develop three half-day training sessions for a wide range of health practitioners. These sessions were held throughout September 2018 organised by DCO and SENDIASS, to improve practice through reflective learning from audits and provide an update on SEND Tribunals, Single Route of Redress National Trials and using anonymised real life cases from QA panels. The impact of the focused training has been improved understanding of expectations from health teams as evidenced in feedback evaluations (WSoA reference 2.12).

Identification of SEND status across children's social care.

Continued awareness raising of SEND and effective adaptations in social care practice has seen 481 Social Care Staff 71% of the workforce undertake online SEND training. This is monitored through noting how many young people have SEND needs recognised and at what level. This rise in awareness has led to the active support of 461 children with SEND. An example of the impact of Early Help Support can be seen in Case Study for T and their family (WSoA reference 2.13).

Early Help supported the family due to T's range of complex needs and behaviours that were significantly impacting on his and his family's wellbeing. T has been supported in all areas of his Education Health and Care needs the contribution of Early Help was to support T to:

- Access he short breaks service, giving him more social activity and stimulation as well as allowing his parents more 1:1 time with his sibling.
- Undertake direct work on including 'All About Me', 3 Houses, Queen of the Island and work on identifying feelings and emotions. This resulted in additional family support and the building of a wider community network to sustain positive change.
- T is attending appropriate educational provision and is making educational progress now. Mam states that T looks forward to going to school and is happy to go.
- T can identify friends in school and friends at his short break provision. He takes part in activities and now can play with the other young people.

 Mam reports that she feels more able to deal with T's behaviour at home and feels that she has strategies to overcome difficult situations. Mam states she is much less anxious about T's wellbeing now that he is in specialist educational provision.

The Short Breaks Review In October 2017 identified gaps in the way that the previous short break offer was commissioned for families in County Durham due to strong coproduction principles in the review of the offer. The gaps included:

- limited access for children with needs considered too high for universal short breaks.
- some targeted Short Breaks being determined on Special School Placement
- limited access to Specialist Short Breaks for young people with the most complex needs

To address this the Local Area have revised the Short Breaks Offer (WSoA reference 2.14) and have achieved the following:

- A significant increase in new families accessing community short breaks who were previously not able to.
- Higher numbers of children with more complex needs accessing short breaks through receiving more specialist or one-to-one support.
- Children and young people accessing community breaks reporting greater independence to access with less support required, or moving on to access wider activities.
- Seven families assessed as requiring short breaks above the community through the Early Help Service who were unable to do this previously.
 Feedback so far from these families have been extremely positive.

Take up of post-16 placements for young people with SEND.- Improving Progression

The Preparation for Adulthood Group is committed to sustaining the increase in young people with SEND participating in education, employment or training.

Through the development of a coproduced plan with young people their parent carers and partner organisations the group developed an action plan to drive an increase in education, employment and training opportunities (EET) for young people with SEND. This plan aligned to the priority within the County Durham Progression Plan of improving the participation rate of young people with SEND.

Key actions of the group in the last year have included:

 Supported Internship (SI) Forum established to develop and lead on the implementation of a SI Action Plan to drive a year on year increase in SI opportunities available.

- Work experience opportunities developed for young people aged 16-24 through implementation of the Tri-work Young Person's Supported Work Experience for Schools Pilot. This is a three way partnership between the young person, a job coach and a host employer to improve understanding, experience and progression to the world of work.
- Investing in Children Extreme Group undertook a review of good practice in relation to support for young people during transition from school to post 16providers. The resulting recommendations were disseminated through the Preparing for Adulthood (PfA) Group.
- The transition protocol for supporting young people with SEN support needs focusing upon sharing of key information and documentation between school and post-16 providers was reviewed.
- A pilot programme was undertaken to support an increased number of young people with SEND to travel independently. The pilot was evaluated and is informing broader implementation of individual transport training across the county.
- Adult Learning and Skills Service Changes Programme which seeks to provide information, advice and guidance for parents and carers who have children/young people with SEND was co-produced, piloted and evaluated.
- Co-produced commission for employment provision for young people with SEND through DurhamWorks which resulted in NEAS delivering a bespoke programme for young people with ASC.

The impact of this joint working has been:

- The engagement of 1,638 young people with a self-declared SEND or mental health issue through Durham Works, 991 of those have participated in EET and, of those, 438 have progressed into employment
- A reduction in young people with SEND who are not engaged in education, employment or training from 20.2% to 16.1%.
- An increase in the number of Supported Internship Opportunities available for young people from zero in 2016/2017 to 27 in 2017/18.
- Supported work experience opportunities delivered for 125 young people with SEND.
- NEAS and Core Assets delivered 81 bespoke opportunities for young people with SEND through DurhamWorks.

A report of the group's practice and impact can be seen in WSoA reference 2.15.

WSoA Area 3 - Poor strategic planning and joint commissioning arrangements have led to unacceptably long waiting lists for access to services, delays for treatment for some conditions, and variability of experience for children and young people who have SEN and/or Disabilities.

The Local Area has established clear governance and improved, more integrated planning arrangements have been established for commissioning services for children and young people with SEND. All commissions relating to children and young people with SEND are considered by the Joint Commissioning Group for Children and the Co-production and Engagement Operational Workstream for comment and endorsement. The Joint Commissioning Group for Children has produced revised Joint Commissioning Strategy developed in partnership across the Local Area

There are a number of examples where the joint commissioning of individual support packages has had a positive impact on children and young people with complex needs accessing learning provision. An example would be the continued strong progress in early years establishing integrated support packages at the earliest point possible. These include the joint working of portage, early years, schools or setting, NECS and continuing health care nurses, this approach enables access to a full early years entitlement in a mainstream setting. Early Years Joint Package Planning Case study (WSoA reference 3.2).

The joint planning, resourcing and training of setting staff in the early years has allowed Y to transition into the reception of his mainstream primary with an appropriate package fulfilling Ys parents' wishes for him to be supported by a Teaching Assistant and not a health professional so he would be like other children.

The group has also developed a balanced provider scorecard covering finance, service user experience, service delivery, safeguarding and provider market health. The impact of the enhanced joint working has been a reduction in organisation specific commissioning and a greater understanding of collective pressures, priorities and interdependencies.

A further development has been the jointly funded assistive technology pilot (WSoA reference 3.3) which has demonstrated improvements for six children and young people with physical and learning disabilities who require a high degree of support. The pilot has demonstrated improvements in:

- Choice and control
- Safety
- Crisis prevention
- Parent/carer capacity to cope
- Family independence

In addition, the Local Area hosted an Early Years SEND event informing parents and carers of the early years offer. Feedback from parents regarding the event was extremely positive and Early Years services are reporting additional contacts from families helping them to shape their offer, for example regarding childcare costs.

A service user engagement exercise for children's therapy services (SALT, Occupational Therapy and Physiotherapy) was also undertaken across Health and Education to gain feedback and ensure robust services are in place to meet need (WSoA reference 3.4). The impact of undertaking the review has been to give us a rich source of qualitative information, which we are using to improve services. The action plan agreed with providers will make a difference to families in terms of having clearer information on referral/discharge processes and sharing of treatment plans between health and education. A light touch repeat of the engagement exercise will be undertaken in June 2019 to evidence that improvement has been made.

The Director of Public Health's Office has co created and commissioned The Durham Resilience Project with the SEND and Inclusion Service. This bespoke package for Durham schools builds resilience in children and young people. 2017/18 saw 20 schools taking part and a further 16 schools are agreed for this year. The programme has improved independence in young people and increased the resilience of both children and staff across schools (WSoA reference 3.5).

Secondary school A identified low resilience and limited independence in their pupils. The DRP working group developed a daily tutor group time package for all pupils, to ensure regular and productive use of time to promote core elements of emotional wellbeing. The resource has been implemented from September 2018 initial feedback from staff, pupil and parents is positive.

The Director of Public Health's Office has also jointly commissioned five Emotional Health and Resilience Nurses, aimed at improving young people's mental health by building resilience and capacity within schools and raising awareness of mental health. The impact of this service has been to provide early help and support for children and young people and support schools in having a better understanding of mental health issues and has been extremely well evaluated as evidenced in testimonies from schools and students (WSoA reference 3.6)

Specific areas for development cited in the inspection report concerning personal health budgets (PHBs)have been addressed. Clear information is now made available on the Local Offer and the number of PHBs has increased from zero to 10 for children and young people. The CCGs do not consider the current processes relating to PHBs to be sufficient and have responded by recruiting to a new post specifically co-ordinating PHBs for children, starting with those entitled to Children's Continuing Care.

We recognise that a jointly funded post between the CCGs and Durham County Council, responsible for the joint commissioning of community services for children with Autism associated learning difficulties and mental health needs would support this area of significant need. The Joint Commissioning Group for Children are working towards securing this appointment.

Whilst all SEND related commissioned contracts are monitored across the Local Area, having a shared understanding of the performance and impact of commissioned contracts is a key to identifying gaps in resource. The Joint Commissioning Group for Children has developed a 'Balanced Provider Scorecard' covering finance, service user experience, service delivery, safeguarding and

provider market health. After developing this over recent months, this is being and will provide a quarterly update regarding service delivery issues and mechanism to escalate issues. The impact of the enhanced joint working has been a reduction in organisation specific commissioning and a greater understanding of collective pressures, priorities and interdependencies.

WSoA Area 4 - The Local Area does not have an embedded approach to strategic co-production with designated representatives of parents, children and young people to inform strategic planning and secure improvements.

MCT has coproduced a Participation Strategy with Durham County Council and local partners (WSoA reference 1.15). The process of developing the Strategy and implementing recommendations within has been cited as best practice by the Local Government Association in their publication <u>Developing and sustaining an effective local SEND system: a practical guide for councils and partners</u>

To implement and embed the strategy, further training for leaders and frontline staff across the workforce is to be delivered jointly by MCT parent forum members and SENDIASS Manager. Six dates are planned throughout January and February 2019, with 90 people signed up to attend so far. Attendees will become 'designated participation champions' and be expected to develop at least one initial project in coproduction with service users with feedback requested six weeks after training.

MCT continue to deliver two annual conferences for parents and carers of young people with SEND. Both spring and autumn conferences were successful with 150 parent carers attending. The autumn conference was themed on feedback from attending parent carers on what they want included at the next event and how the Local Area and MCT can support further parental involvement in Local SEND planning.

Parents and carers with local authority staff, have developed a <u>SEND toolkit for parents</u> (WSoA reference 1.15). The SEND toolkit helps parent determine what the Local Offer is for their children. In addition to this six parent led training sessions for other parents were held across September and October 2018. Feedback from parent carers evidenced the positive effect of the training in relation to parents being able to liaise directly with schools, with increased knowledge of their child's rights as a child with SEND. A further six sessions are available in January and February 2019 and a rolling programme will continue after this.

To ensure that the voice of children and young people is heard throughout Local Area SEND planning The eXtreme Group from Investing in Children have developed a SEND charter for services in the Children and Young Peoples SEND Promise (WSoA reference 1.14). All partners have committed to this at the Integrated Steering Group for Children. To ensure the SEND Promise is embedded all new commissioned projects throughout the Local Area have the Promise as a stipulated commitment for providers, the SEND Promise also underpins the revised Local Area SEND Strategy.

The eXtreme Group from Investing in Children planned the Young People's Future Event I October 2018 as follow up to the successful first event which took place in February 2017 co-ordinated by SENDIASS. The events have been resourced by

Durham County Council and promoted throughout the Local Area Partnership at the request of the young people who planned, participated and co-delivered both events. The events are aimed at children and young people aged 13-25 with SEND and their parents/ carers. Young people planned an event to exhibit a range of services and opportunities available to young people with SEND throughout County Durham. The event featured information, advice and activities relating to Health, Education, Employment and Training, Leisure Provision and Social Activities. The services that attended the event had been identified by the young people from the eXtreme Group as well as through Investing in Children facilitating conversations with other young people with SEND from across a range of schools within the County.

On the day the feedback from young people and parents and carers was extremely positive (WSoA reference 4.1). Further impact since the first event in 2017 includes young people previously home schooled or not in employment, education or training returning to full time education. In addition several young people are now active members of Investing in Children's eXtreme Group who have the opportunity to have a voice and strategically coproduce future service delivery based on their lived experience. A number of young people have signed up to SEND specific and mainstream social groups which they were introduced to at the Young People's Future Event.

The Investing in Children eXtreme Group has supported DDES Clinical Commissioning Group with the development and engagement of the Children's Therapies Review in County Durham (extract from the Children's Therapies Review Summary Report below).

Investing in Children's eXtreme group

The Engagement Lead and Project Lead requested permission to visit Investing in Children's eXtreme group, a pro-active group of young people with learning disabilities, who helped with the question design for the survey and also shared their own personal experiences of accessing Children's Therapy Services.

Investing in Children continue to support peer facilitated discussions with children and young people with SEND across County Durham regarding opportunities post 16 regarding education, employment and training. A recent impact of this work is the development of young people led good practice guidance regarding transitions for young people with SEND post-16, supporting further education providers make effective adaptation for young people during their transitions (WSoA reference 4.2).

SENDIASS Young Peoples Development Worker has engaged 30 secondary schools and post 16 providers to develop their SEND practices and identify in provision SEND champions. SEND Champions will be young people ambassadors with additional needs who will be a peer supporter/ point of contact for peers. The first round of induction training workshops are planned for early 2019 with a view to have all schools and colleges working with an acknowledged SEND champion by the end of 2019. SEND Champions will provide general information about the "Local offer" "Youth Offer" signposting to services or providing some peer support.

A key focus of the Local Area over the year has been enhancing the transition experience of Young SEND and their parents and carers transition into adulthood. Fulfilling Lives an event ran by Adult Services providing information on health, social activities, education, sports, leisure and staying safe. Events in October 2017 and May and October 18 have had 994 attendances at an average rate of 331 attendees per event. (WSoA reference 4.1) The last Fulfilling Lives event resulted in 25 new enrolments into higher education course in New College Durham.

In relation to these action areas, we have identified the following as further areas for development in 2019:

- The embedding of the Participation Strategy including measuring impact from the benchmarking of the first organisational Self Assessment.
- To develop a deeper understanding of quality and impact from the perspective of service users. Parents and carers have been engaged in the appointment of a Local Area Quality Improvement post.