

**Update on the Implementation of the Special Educational Needs and Disability Reforms (SEND)**

Item 17k

Governing Body meeting

1 October 2015

<b>Author(s)</b>	Kate Laurance, CCG, Head of Commissioning, Children Young People and Maternity
<b>Sponsor</b>	Dr Nikki Bates, CCG Governing Body Lead, Children and Families Portfolio. Tim Furness, Director of Business Strategy and Partnerships
<b>Is your report for Approval / Consideration / Noting</b>	
For information.	
<b>Are there any Resource Implications (including Financial, Staffing etc)?</b>	
There are anticipated resource implications; however at this stage they are not quantified.	
<b>Audit Requirement</b>	
<b><u>CCG Objectives</u></b>	
<b><i>Which of the CCG's objectives does this paper support?</i></b> (2): To improve the quality and equity of healthcare in Sheffield	
<b><u>Equality impact assessment</u></b>	
<b><i>Have you carried out an Equality Impact Assessment and is it attached?</i></b> No	
<b><i>If not, why not?</i></b> Not applicable at this stage	
<b><u>PPE Activity</u></b>	
<b><i>How does your paper support involving patients, carers and the public?</i></b> Development of the SEND reforms has involved the Parent Carer Forum at all stages. A SEND co-production group has been formed as part of the programme of work; the programme of work is led by Sheffield City Council but is joint in some areas, which includes the engagement and communication work.	
<b>Recommendations</b>	
The Governing Body is asked to: <ul style="list-style-type: none"> <li>• Note the progress made in delivering the reforms and next steps</li> <li>• Receive a further update March 2016</li> </ul>	

## **Update on the Implementation of the Special Educational Needs and Disability Reforms (SEND)**

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#### **1. Background**

1.1. The Children and Families Act 2014 became statute on 1 September 2014 and reforms the process by which Local authorities, NHS and partners assess and support children and young people with a special educational need and disability.

1.2. The main changes are:

- Changes to the statutory assessment process
- Introduction of Education and Health Care (EHC) Plans to replace SEN statements
- Publication of an online Local Offer provision
- Developing joint commissioning arrangements for children and young people 0-25 years old with an SEN or disability
- Strengthening parental rights and decision making

1.3. The Act provides CCGs with a duty to cooperate with the Local Authority in commissioning integrated, personalised services and designing the Local Offer. The CCG has a duty to ensure that clinicians and providers:

- Support the identification of children and young people with SEN
- Respond to requests for advice for an EHC plan within required time limits
- Make available health care provision specified in the EHC plan as per their commissioning role
- Contribute to regular reviews of children and young people with EHC plans
- Contribute to the Local Offer to include information about health care provision

1.4. The CCG's key responsibilities are:

- 1) To contribute to the development of the Local Offer website to ensure it reflects relevant child and adult health services
- 2) To support the planning process for EHC Plans and redesign of the health workforce to support the new assessment and review process
- 3) To establish a Designated Medical Officer (DMO) function
- 4) To support the development of joint commissioning arrangements for this population.

1.5. An update on the delivery of the reforms was provided at Governing Body meetings in December and June. This paper provides an update on the overall timeframes to date in meeting our statutory duties, as well as the next steps required to ensure compliance and reduce risks in delivery.

#### **2. Progress to date**

The reforms remain a challenging programme of work to implement; the CCG has previously raised issues with the programme around concerns including: a lack of transparent process around how EHC pathway would work; communications around

progress to date; next steps in the programme; and workforce development. Some progress has been made in terms of taking action in regards to these concerns. The risks identified have been placed on the CCG risk register. The progress over the last few months has mitigated the risk to the CCG to some extent, but further progress needs to be made before the risk is closed.

A director level meeting was held to clarify the programme management arrangements and responsibilities around implementation between Sheffield City Council and NHSS CCG. The conclusion of these discussions was that a joint delivery plan was needed, particularly around service redesign for the health pathway supporting the assessment and EHC planning process.

The overall programme delivery timeframes are to have a new pathway and ways of working in place for the 1<sup>st</sup> of April 2016. Work is progressing within the programme team on revising the communication and engagement plan. Work is also planned to revise the local offer and update it based upon feedback from a review of the local offer.

## **2.1. CCG's responsibility**

Key progress against the CCG's responsibilities is as follows:

### **2.1.1. Local Offer**

The Local Offer provides details of a number of health services provided by SCH FT; SHSC FT and the CCG and have recently been reviewed and there are plans to update it. Further work is needed to develop and expand the local offer following the review of its content.

### **2.1.2. EHC Plan Process**

A high level Operating Model is now in place across education, health and social care. An interim health EHC assessment and planning process is in place, to enable the short term management of conversions and new requests. This is in place to enable a response from health in providing up to date information on the health needs of an individual with a new request or converting from a statement to an EHC plan.

The CCG is working with the DMO, local authority and health providers to develop the new process for health teams across universal and public health and CCG commissioned services to meet demand and statutory requirements.

A task and finish group has now been established to lead the service redesign and consider the variation with that proposal and the existing health workforce. There are wider workforce and commissioning implications for meeting the assessment timeframes now outlined within the new targeted operating model. Not all CCG commissioned health services are able to respond within the timeframes outlined within the new process, this has significant implications for some of the block contracted community services we commission, in terms of their ability to respond to request for assessment within the timeframes. The health care services that will need to respond to a request for assessment and work to reduce their waiting times to enable the timeframes to be met are at this stage not fully understood and further work will be undertaken in the task and finish group to scope these services and assess the level of change needed. The Joint commissioning group will then need to consider the implications for these services in providing assessment within the timeframe identified.

### **2.1.3. Designated Medical Officer (DMO) Function**

The role of the DMO has been agreed, but will evolve further, Dr Harrower Consultant Paediatrician from SC NHS FT is in post and providing this function commissioned by the CCG.

### **2.1.4. Joint commissioning**

An extensive data sharing project is underway between the Local Authority, SCH FT and SHSC FT which has enabled a detailed mapping of the number of children and young people accessing health, social care and education services with SEND. Requests for joint packages outside of the local offer will be monitored via Children's Joint Commissioning Group, so will the uptake on personal budgets.

## **3. Next Steps**

3.1. Development of the EHC health pathway in detail in line with the Targeted Operating Model. The CCG will continue to work with SCC and engage providers to progress this. It is hoped that a proposal will be developed on a redesign for March 2016; at this point any further implications on implementation and resources will be understood.

3.2. The data sharing work that is currently underway requires further analysis to support joint commissioning; a series of workshops have been established to facilitate this in which the CCG and providers are involved. This data will inform the Children's Joint Commissioning Group in the further development of plans.

## **4. Recommendations**

The Governing Body is asked to:

- Note the progress made in delivering the reforms
- Receive an update in March 2016

Paper prepared by Kate Laurance, Head of Commissioning, Children, Young people and Maternity

On behalf of Nikki Bates, CCG Governing Body Lead, Children and Families Portfolio

22. September 2015