

CHILDREN AND YOUNG PEOPLE'S LEARNING SCRUTINY PANEL

Date: Monday 4th October, 2021
Time: 10.30 am
Venue: Virtual Meeting

Please note this is a virtual meeting.

**The meeting will be livestreamed via
the Council's YouTube channel at
[Middlesbrough Council - YouTube](#)**

AGENDA

1. Apologies for Absence
2. Declarations of Interest
3. Minutes - Children and Young People's Learning Scrutiny Panel - 6 September 2021 3 - 10
4. Special Educational Needs and Disabilities (SEND) - Further Information 11 - 58

Officers from the Local Authority and the NHS will be in attendance to provide the Scrutiny Panel with:

- a) key data in respect of special educational needs and disabilities in Middlesbrough, specifically data on type of needs and pupil characteristics and how these compare regionally and nationally; and
- b) a detailed overview of how Education, Social Care and Health work collectively to deliver SEND provision at a local level, including information on the SEND Strategy and the SEND Strategic Group.

5. Special Educational Needs and Disabilities (SEND) - Terms of Reference 59 - 60

The Scrutiny Panel will be asked to consider, discuss and agree the terms of reference for the review.

6. Education and Covid-19 Recovery

The Director of Education and Partnerships will provide a verbal update.

7. Overview and Scrutiny Board - An Update

The Chair will present a verbal update on the matters that were considered at the meeting of the Overview and Scrutiny Board held on 8 September 2021.

8. Any other urgent items which in the opinion of the Chair, may be considered.

Charlotte Benjamin
Director of Legal and Governance Services

Town Hall
Middlesbrough
Friday 24 September 2021

MEMBERSHIP

Councillors D McCabe (Chair), L Mason (Vice-Chair), A Hellaoui, D Jones, T Mawston, M Nugent, M Saunders, P Storey and G Wilson

Assistance in accessing information

Should you have any queries on accessing the Agenda and associated information please contact Georgina Moore, 01642 729711, georgina_moore@middlesbrough.gov.uk

CHILDREN AND YOUNG PEOPLE'S LEARNING SCRUTINY PANEL

A meeting of the Children and Young People's Learning Scrutiny Panel was held on Monday 6 September 2021.

PRESENT: Councillors D McCabe (Chair), L Mason (Vice-Chair), A Hellaoui, D Jones, M Saunders, P Storey and G Wilson

ALSO IN ATTENDANCE: Councillor S Hill (Executive Member for Education)

OFFICERS: R Brown, S Butcher, S Calvert, C Cannon, E Cowley, T Dunn, C Lunn and G Moore

APOLOGIES FOR ABSENCE: Councillors T Mawston and M Nugent

21/14 **DECLARATIONS OF INTEREST**

There were no declarations of interest received at this point in the meeting.

21/15 **MINUTES - CHILDREN AND YOUNG PEOPLE'S LEARNING SCRUTINY PANEL - 26 JULY 2021**

The minutes of the meeting of the Children and Young People's Learning Scrutiny Panel held on 26 July 2021 were submitted and approved as a correct record.

21/16 **SPECIAL EDUCATIONAL NEEDS AND DISABILITIES (SEND) - AN INTRODUCTION**

The Strategic Lead for the Inclusion and Specialist Support Service; the Head of Inclusion, Assessment and Review and the Principal Educational Psychologist were in attendance to provide the scrutiny panel with a general introduction/overview of the topic of Special Educational Needs and Disabilities (SEND), including:

- an overview of the legal framework in which statutory agencies needed to work to support children and young people with SEND;
- an outline of how special educational needs and disabilities (SEND) could affect a child or young person's ability to learn; and
- an update on the local developments within Middlesbrough.

The Strategic Lead for the Inclusion and Specialist Support Service advised that the submitted report contained a detailed overview of the SEND Code of Practice and the broad duties of the Local Authority, Health, schools and colleges. The report also contained information on the key developments in Middlesbrough, which aimed to ensure that the needs of children and young people with SEND 0-25 were being met.

It was advised that the evidence presented would focus on the four main areas of need that were listed within the SEND Code of Practice, aiming to provide the scrutiny panel with a shared understanding of the impact of SEND on a child or young person's ability to learn.

Members heard that The Children and Families Act and the Special Educational Needs and Disabilities Code of Practice (2014 updated 2015) transformed the system for disabled children and young people and those with Special Educational Needs (SEN), ensuring that services consistently supported them to achieve positive outcomes.

The reforms created a system from birth to 25 through the development of coordinated assessment of a single Education, Health and Care Plan (EHCP), which aimed to improve cooperation between all services responsible for providing education, health and or social care and giving parents and young people greater choice and control over their support.

It was advised that a SEND review was currently underway, which planned to investigate the

impact of the SEND Code of Practice. It was hoped that outcomes of the review would be reported at the end of the year.

It was commented that the Local Area SEND Inspection Framework was currently being updated/revised and it was anticipated that the new framework would include children and young people accessing Alternative Provision. Further updates on, and revisions of, the framework would be shared later in the year.

In terms of data, Members were advised that in 2021, 3.7% of pupils attending school and/or settings in Middlesbrough had an EHCP, that equated to 1300 children and young people, which was slightly lower than the North East rate of 3.8% but in line with the National of 3.7%.

It was important to note that there had been a significant increase in requests for EHCP assessment nationally. It was believed that the increase was due to the impact of COVID-19. That surge had resulted in an increased workload for the SEND Assessment Team and the Educational Psychology Service.

It was noted that nationally, there was a shortage of educational psychologists. However, Middlesbrough had a strong team of educational psychologists who were recognised regionally and nationally for the work they undertook.

Members were advised that in 2021 a total of 3,459 pupils in Middlesbrough schools were in receipt of SEN Support, which accounted for 13.8% of the overall school population and was higher than both the North East (12.9%) and National (12.2%).

It was planned that the new Inclusion, Assessment and Review Service would be further developed to improve and enhance SEN Support. The Local Authority's workforce development package also aimed to ensure that all settings had access to appropriate training and support.

In respect of the SEND Code of Practice, there were four main areas of need within the code:

- Cognition and Learning
- Communication and Interaction
- Physical, Medical and Sensory
- Social, Emotional and Mental Health (SEMH)

In respect of each of the four main areas, the impact of those needs on the child/young person would be identified and a case study example would be provided to identify how Education, Health and Social Care worked together to support and meet the needs of children and young people with SEND.

The Principal Educational Psychologist advised that in terms of cognition and learning, essentially thinking and reasoning, there was a huge spectrum of needs. The following key points were made:

- A small number of children may have profound and multiple learning difficulties, affecting all aspects of their development and functioning.
- Some would have severe learning difficulties, while others would have mild to moderate learning difficulties.
- Those attending special schools, with severe learning difficulties, would be likely to have very significant needs in terms of thinking and reasoning, have difficulties with mobility and require support in respect of personal care.
- Those with moderate to mild needs were more likely to be educated in mainstream schools with a significant amount of additional support.
- Beyond severe, moderate and mild learning difficulties there was a further group that had specific learning difficulties with literacy (dyslexia, which was the most common developmental difficulty, affecting 10% of people and ranging from mild to severe), numeracy (dyscalculia) or motor planning (dyspraxia).

In terms of the impact on functioning development and learning, it was advised that the child or young person may:

- become acutely aware of his/her areas of difficulty and may then become fearful of learning tasks and lose confidence in their own abilities;
- require support to access work and may develop work avoidance strategies;
- mask difficulties, sometimes through inappropriate/challenging behaviour and

- questions; and
- reach adulthood without having acquired the basic levels of literacy and numeracy (and in some cases social skills and confidence and/or personal independence) that they need in order to be able to manage in adult life.

It was commented that, if dyslexic, a child may be able to answer questions and express good ideas orally, but be unable to record the information. Members heard that the child may also dislike reading, partly because the content of books may not be age appropriate.

The Head of Inclusion, Assessment and Review provided a case study example in respect of cognition and learning needs. Members were advised that a child had started primary school as a reception admission and it was then identified that the child had cognition and learning needs. Once those needs had been identified, the school pulled together a team of professionals to provide support to the child, there was educational psychology involvement and speech and language therapy was provided. The school applied to Local Authority for high needs funding and utilised that funding to develop a small nurture group provision, which involved a Teaching Assistant providing memory, literacy, numeracy and handwriting support alongside intervention programmes for reading and spelling.

As the child was nearing the transition to secondary education, the school put forward a referral for a EHCP assessment. At the time of the referral the child had moderate learning difficulties and in Y6, at time of referral, was working at Y2 level across the national curriculum. The assessment focused on planning for the child's secondary transition. Following assessment and consultation with the family, it was determined that the child should transfer to a secondary resource base, which was additionally staffed and funded to provide a higher level of support to those with SEND. It was added that the child's EHCP would be reviewed on an annual basis to track progress and ensure that the child continued to achieve.

In terms of communication and interaction needs, the Principal Education Psychologist advised that children and young people had difficulties with speech production; with expressing their needs, wishes and opinions and with understanding language that they heard. There was a wide spectrum of need, some would be preverbal, while others would have needs that were much less obvious. Some children and young people had social communication and social interaction needs. Such needs were very typical of those diagnosed with autistic spectrum conditions.

With communication and interaction needs, it was commented that a child or young person may:

- have encountered difficulties with speech sound production that made their speech difficult to understand, causing them frustration;
- have given up trying to make themselves understood;
- struggle to make and maintain friendships, which could have an adverse impact on their social development and confidence at school; and
- have speech immaturities that impact upon the acquisition of literacy skills.

It was commented that in instances where children had receptive language difficulties but could read fluently, it could be assumed that they had a higher level of understanding of text than was actually the case. The scrutiny panel was advised that the child or young person may not understand longer and more complex words used in the classroom, causing stress and frustration and resulting in a struggle with listening and attention. Members heard that may lead others to perceive that they were misbehaving. It was also added that the child may struggle to acquire key vocabulary needed for learning (e.g. language relating to range of simple concepts such as time, size, shape, position).

The Head of Inclusion, Assessment and Review provided a case study example in respect of communication and interaction needs. Members were advised that a child, whose needs were evident very early on in their life, had received a diagnosis for Autism Spectrum Disorder (ASD) before they had started primary school. The child was open to the Local Authority's Specialist Early Years Service, which involved the early identification of needs by a multi-disciplinary team. The child was behind with meeting early years milestones and was referred for an EHCP assessment. The child subsequently secured an EHCP, prior to starting in Reception.

Due to the severity and complexity of the child's needs, it had been determined very early on

that the child would require a place in an Autism special school. In respect of the Autism special school, there was a higher staff to pupil ratio and specialist staff. The school also offered a nurturing environment and specialist programmes for social and communication skills development. At Annual Review, as the child was approaching Year 5, it had been determined that the child was making good academic progress (2 years behind chronological peers), which confirmed that the school was meeting the child's needs. It was commented that the child required additional support during social and unstructured times and to support emotional regulation.

As the child was making good progress, in terms of secondary planning, a mainstream secondary ASD resource base was being explored. The resource base planned to allow the child to access the broader secondary curriculum but also provided a nurturing and supporting environment to meet the child's needs.

In terms of physical, medical and sensory needs, the Principal Educational Psychologist advised that children with medical conditions, physical disabilities and sensory impairments formed a particularly diverse group with highly individual needs. In general terms, it was commented that a condition or disability could make it difficult or impossible for a child or young person to make use of the educational facilities normally provided.

Members heard that a child with mobility difficulties would more than likely require adjustments to the curriculum and significant adaptations to the physical environment. It was also commented that mobility difficulties could also result in a child requiring support for personal care and/or daily routines and learning activities.

It was explained that, in terms of the impact on the individual, mobility difficulties could lead to issues with self-image and self-esteem, particularly if the child or young person had a chronic or degenerative condition, or had suffered a life-changing accident.

Members heard that children with physical, medical and sensory needs could experience periods of absence from education, due to being unwell or taking time off school to attend medical appointments and receive treatment.

The Head of Inclusion, Assessment and Review provided a case study example in respect of a child with physical, medical and sensory needs. It was advised that a child's sensory impairment had been identified at 0-6 months, the child had undergone audiology screening and input from health services to diagnose the condition. The family and child were supported by professionals, which included the Local Authority Sensory Service.

The child had attended a mainstream school, had secured an EHCP and had received regular support and input from a teacher of the deaf. A high needs funding package of support was in place that provided one-to-one support from a teaching assistant, pastoral support and mentoring. It was also added that assistive technology had been provided to reduce the requirement for adult supervision and support. Ultimately, the child had made very good academic progress and had achieved GCSE's grade 4-9. The child then secured an apprenticeship and was supported by the DWP in the workplace, which subsequently led to the young person achieving sustained independence and employment.

In terms of Social, Emotional and Mental Health Needs (SEMH), the Principal Educational Psychologist advised that SEMH was a major focus for the local area. Members were advised that very often the behaviour could be rooted in early trauma, difficulties in forming a secure attachment with an adult when young, loss/bereavement of a loved one or an undiagnosed neurodevelopmental disorder, such as an autistic spectrum condition. In addition, it was explained that the child or young person could have unidentified learning needs or speech and language needs. Members heard that anxiety and depression were increasingly prevalent in children and young people with SEMH, with COVID-19 undoubtedly having an impact.

In terms of SEMH, Members heard there was an increased risk of the child or young person being excluded from school and losing valuable learning time, which would be likely to have an impact on their progress and possibly their life chances. It was commented that the child or young person could require targeted teaching in a dedicated space, away from other pupils, in order to access learning. It was explained that, being taught away from other pupils, was likely to have an impact on the range of activities the child or young person could access and would reduce interaction with peers. It was commented that their social skills and confidence could

be adversely impacted. Members were advised that some children could appear loud, confident and challenging, however, inside they could be very distressed, anxious and hurting. Children tended to either act out their frustrations or internalise them. For those who internalised their feelings, it was commented that those children may engage in self-harming, become involved in risk taking behaviour placing them and others in danger or develop anxiety based school avoidance (EBSA).

Members were advised that SEMH needs were very complex and very much interwoven with the other needs referenced.

The Head of Inclusion, Assessment and Review provided a case study example in respect of a child with SEMH. A child had been identified as being at risk of exclusion at primary school and was added to SEN register. The school worked with agencies to support the child and the family to access education and learning. Subsequently, a holistic package of support was developed for the child. The child was then referred to the Local Authority's Inclusion Support Team, as the school had identified the child was at risk of exclusion from education due to presenting behaviour.

Members were advised that high needs funding had been accessed to provide the child with a behaviour support mentor and a short-term (6 week) assessment placement was also secured at Holmwood School. The purpose of the placement was to undertake a multi-agency assessment to identify further additional needs and develop strategies that school could use to fully support the child. Once the assessment had been completed, the child successfully returned to school. Additional funding had also been secured to provide a school-based support package, which included support from a teaching assistant to guide and mentor the child.

In respect of the child moving to secondary education, it was advised that transition planning had been undertaken by sharing information from the assessment. Transition planning had enabled the new school to understand the needs of the child, in addition to the triggers and change that could result in the child's behaviour becoming more challenging. Through transition planning, it had been established that the child's needs would be best met in a special school. As a result of that, an EHCP had been secured and the child successfully transitioned to a special SEMH school for secondary education.

A Member raised a query regarding waiting lists for EHCP assessments. In response, the Strategic Lead for the Inclusion and Specialist Support Service advised that there was no waiting list. It was clarified that the statutory process allocated 20 weeks for completion of the EHCP assessment and in Middlesbrough, during 2020/21, 99% of assessments had been completed within that timeframe. Middlesbrough was performing well and was currently ranked 9th nationally, which was a significant achievement. A strong team had been established to ensure that assessments were processed effectively, efficiently and within the 20 weeks timeframe.

A Member raised a query in respect of the impact for teaching staff. The Strategic Lead for the Inclusion and Specialist Support Service advised that all teachers received targeted training to enable them to teach, support and meet the needs of children and young people with SEND. It was commented that all schools had a Special Educational Needs Coordinator (SENDCo). Members heard that, as a local area, a SEND review had been undertaken of all Middlesbrough's settings, i.e. for early years, primary, secondary and post-16. The purpose of the review was to identify strengths and areas of development. Outcomes of the review had been reported to the settings and actions were being undertaken to further develop/enhance support/training for members of staff. It was also commented that there was a Workforce Development Programme in place, which aimed to ensure the training needs of staff in each setting were being met. In addition, the new Inclusion, Assessment and Review Model had been implemented, which provided the greatest support at the earliest of stages.

A Member raised a query regarding the mechanisms established to engage successfully with parents. The Strategic Lead for the Inclusion and Specialist Support Service advised that work had been undertaken with families to seek feedback on the provision and support available in the local area. Drop-in sessions were held for parents that involved colleagues across Education, Health and Social Care, enabling them to discuss the needs of their child with the relevant professionals. The Head of Inclusion, Assessment and Review commented that part of the process involved securing the most appropriate educational placement for the child,

which could involve difficult conversations with parents. The importance of building and developing positive relationships with parents, which were based on mutual challenge and trust was referenced. It was commented that the Local Authority worked hard to:

- ensure parents were aware of statutory duties; and
- resolve any conflicts or disagreements with families.

Members heard that the Local Authority would continue to work in partnership with families to meet the needs of Middlesbrough's children and young people. It was also highlighted that parents were able to refer their child for an EHCP assessment.

A Member raised a query about identifying those with SEND, who developed needs as they progressed through school. The Strategic Lead for the Inclusion and Specialist Support Service advised that the Local Authority had recently developed a new service and model that focused on early intervention and support at the earliest of stages. Feedback from schools had been used to inform the model's development. It was commented that a review of the model had been undertaken and work was planned to further develop/enhance the model to provide outreach and inclusion support to settings. The Principal Education Psychologist advised that the schools that used Middlesbrough's Educational Psychology Service were able to access consultation sessions. Middlesbrough Psychology Service operated a consultation based service, whereby, when schools had an initial concern about a child, discussions were held to explore explanatory factors. Following the initial discussion, if SEND needs were identified, the process would be formalised and a consultation session would be held with parents, the school and other relevant agencies to discuss next steps and agree a way forward.

A Member queried the key duties in respect of children and young people with SEND across the 0-25 age range. The Strategic Lead for the Inclusion and Specialist Support Service advised that once a young person was being educated at university level, the EHCP would cease. Support was provided to ensure that children and young people were able to progress in their education. It was clarified that not all EHCPs would continue to the age of 25, plans were reviewed on an annual basis and if a child or young person was progressing well and achieving their identified outcomes, the plan would cease. In terms of the post-16 element of the EHCP, the Head of Inclusion, Assessment and Review commented that young people may secure a place at university, an apprenticeship or employment. However, for those young people with more severe/complex needs, work was undertaken with other departments (e.g. adult social care) and stakeholders (e.g. Jobcentre Plus) to plan an appropriate pathway and develop a package of support.

A Member queried how the Local Authority ensured that statutory duties in the SEND Code of Practice were being met. The Strategic Lead for the Inclusion and Specialist Support Service commented that the Local Authority worked closely with all settings to ensure compliance and a SEND review had been undertaken to ensure settings were accessible and staff were fully trained. Reference was also made to service level agreements being in place; quality checks being conducted; feedback being requested from children, young people and parents and training being delivered. The Head of Inclusion, Assessment and Review advised that schools were also involved in a number of Local Authority working groups/workstreams aiming to develop provision in respect of areas of strategic importance. It was commented that there was a strong governance structure in place to support that work, which involved regular monitoring and reporting to the Children's Trust.

A Member expressed concern in respect of the negative connotations associated with the word 'disability'. The Strategic Lead for the Inclusion and Specialist Support Service acknowledged those concerns, however, it was advised that the Local Authority was governed by a legal framework and there was a need to be consistent and in line with national language.

A Member commented that it would be beneficial to receive data on type of needs and pupil characteristics and how those compare regionally and nationally.

AGREED

That the information presented at the meeting be considered in the context of the scrutiny panel's investigation.

21/17 **EDUCATION AND COVID-19 RECOVERY**

The Executive Director of Children's Services advised that:

- a rise in the number of COVID-19 cases was anticipated as schools returned from the summer break;
- if required, online/remote learning was available;
- a Government announcement was expected, imminently, on the rollout of vaccinations for 12 to 15 year olds;
- all children would be asked to participate in testing, however, schools would no longer be responsible for contact tracing;
- if a child or young person tested positive, close contacts would not be required to self-isolate, which was envisaged to result in less disruption in schools;
- the summer activities commissioned by Public Health had received positive feedback from children and young people; and
- those families who were in receipt of free school meals, continued to receive meals throughout the summer break.

NOTED

21/18 **OVERVIEW AND SCRUTINY BOARD - AN UPDATE**

The Chair advised that at the meeting of the Overview and Scrutiny Board, held on 28 July, the Board had considered:

- the Executive Forward Work Programme;
- an update from the Chief Executive in respect of the Council's response to COVID-19 and other organisational matters;
- an update in respect of the financial pressures facing Children's Services;
- the Scrutiny Work Programme Report for 2021-2022; and
- updates from the Scrutiny Chairs.

NOTED

21/19 **ANY OTHER URGENT ITEMS WHICH IN THE OPINION OF THE CHAIR, MAY BE CONSIDERED.**

A Member raised a query in respect of how many children were affected by the changes to Pupil Premium allocations. The Member advised that, from April 2021, pupil premium allocations for mainstream and special schools were calculated based on the number of eligible pupils recorded by schools in their census in October. The Director of Education, Prevention and Partnerships advised that the information requested would be provided once obtained from the Local Authority's Revenue and Benefits Team.

NOTED

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CHILDREN AND YOUNG PEOPLE'S LEARNING SCRUTINY PANEL

4TH October 2021

Special Educational Needs and or Disabilities

Caroline Cannon: Strategic Lead for Inclusion and Specialist Support Services

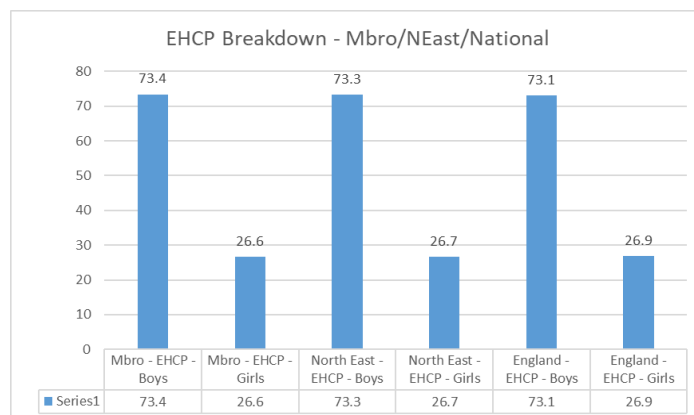
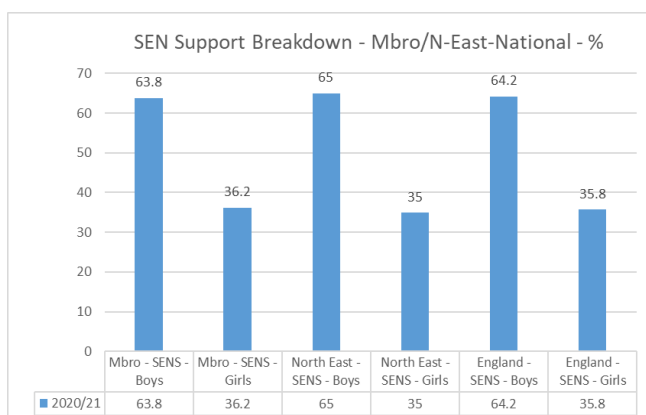
SUMMARY

1. The purpose of the paper is to provide:
 - a) Key data in respect of special educational needs and disabilities in Middlesbrough, specifically data on type of needs and pupil characteristics and how these compare regionally and nationally: and
 - a) A detailed overview of how Education, Social Care and Health work collectively to deliver SEND provision at a local level, including information on the SEND Strategy and the SEND Strategic Group.

INTRODUCTION

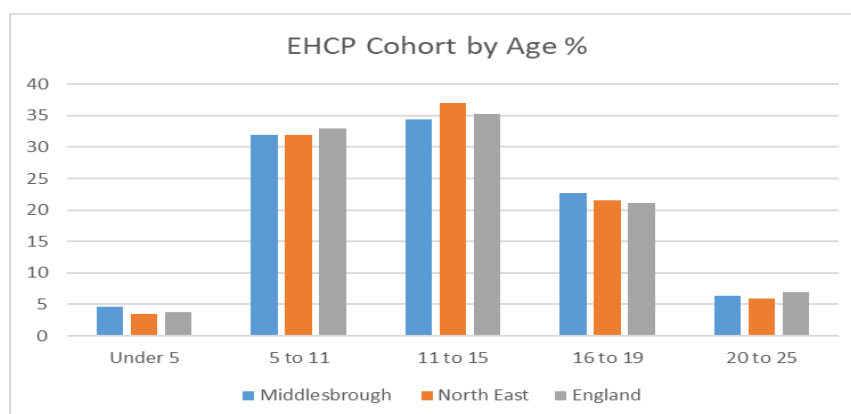
2. The Children and Families Act and the Special Educational Needs and Disabilities (SEND) Code of Practice 2014 (updated 2015) pushed forward the Government's commitment to improve services and support for children, young people and their families and to help them achieve the best possible outcomes.
3. The SEND Code of practice introduced a coordinated single assessment across Education, Health and Care named the Education, Health and Care Assessment.
4. Nationally there are approximately 431,000 children and young people across the whole 0-25 age range with an Education Health and Care Plan (EHCP). Within Middlesbrough, there are approx. 4800 children and young people classed as SEND, of this figure, approximately 1300 have an EHCP.
5. From these national figures there are approximately 325,000 children and young people with an EHCP who attend state-funded nursery, primary, secondary and special schools, non-maintained special schools, pupil referral units and independent schools. This represents 3.7% of the population. In Middlesbrough, this figure is 3.7% which is on par with the national figure, and slightly lower than the regional figure of 3.81%.
6. Further analysis of the individual characteristics of the children and young people with an EHCP and those in the SEN Support Cohort shows that:

7 Gender



In Middlesbrough, the SEN Support cohort is split into 63.8% male and 36.2% female. The EHCP cohort split is 73.4% male and 26.6% female. These levels are comparable to national and regional data.

8 Age

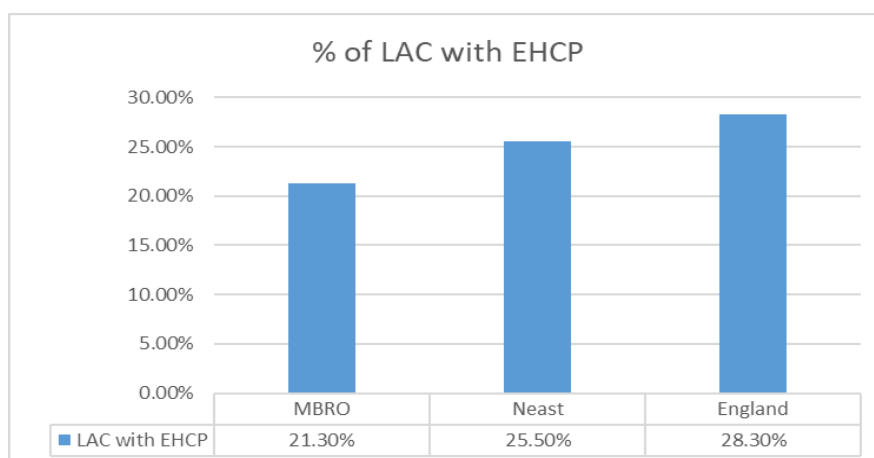


The majority of children with an EHCP are of primary and secondary age in Middlesbrough. Middlesbrough is broadly comparable to regional and national levels for the ages of children and young people with an EHCP.

9 Ethnicity

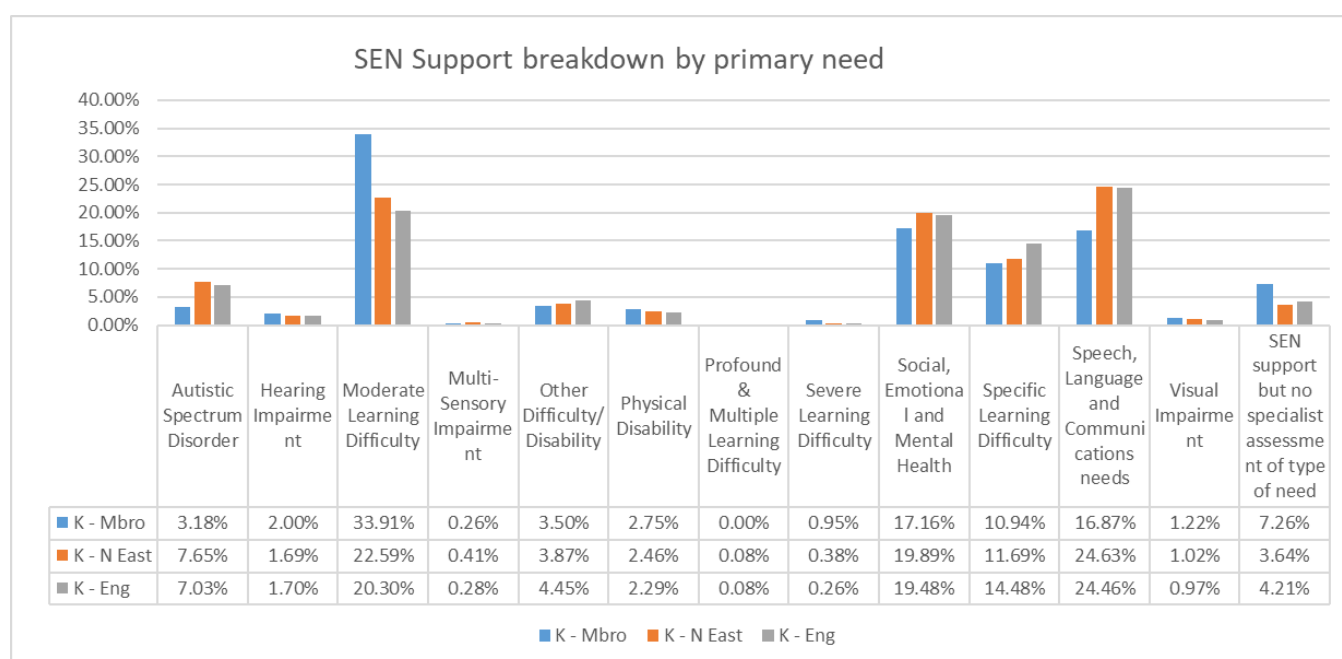
The majority of children with an EHCP in Middlesbrough are White, in particular White British (73.5%), this is broadly comparable to national but slightly less than regional levels. 7.8% of children and young people with an EHCP are Asian Pakistani, this is higher than national and regional levels. Just over 1% are Black African which is comparable to regional but less than national levels. All other ethnicities (including those of mixed heritage) account for less than 1% each of the EHCP population; when totalled this accounts for 14.5% of children with an EHCP.

10 Children Looked After



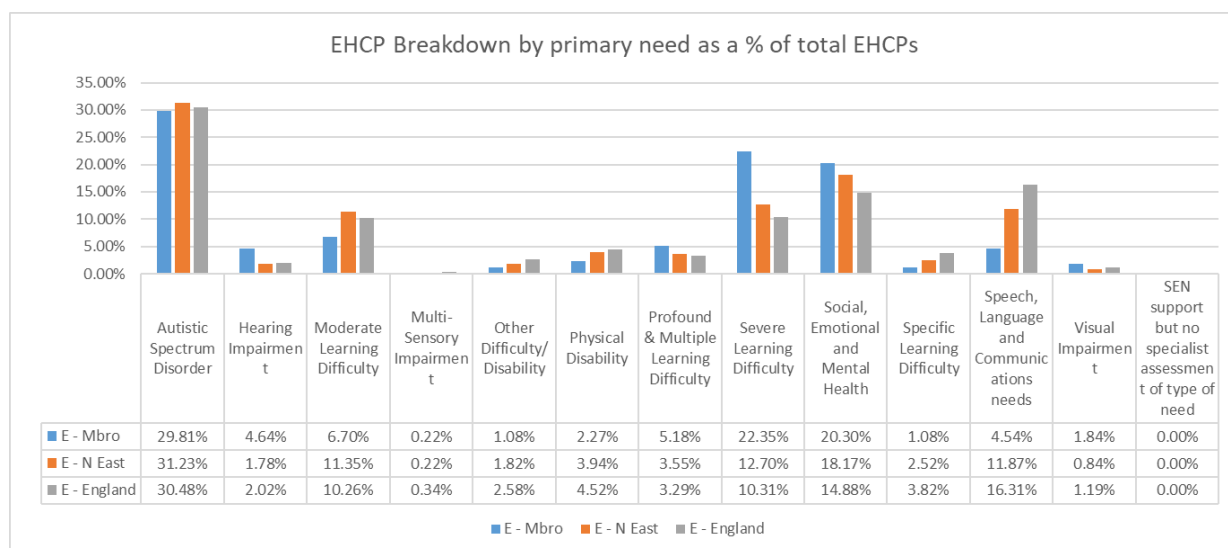
At present, 21% of children in Middlesbrough who are looked after have an EHCP. This is lower than regional and national levels.

11 Primary Needs



The Primary Needs breakdown for the cohort of children and young people at SEN Support in Middlesbrough shows that:

- There are less children with autism than regional and national levels
- There are more children with a moderate learning difficulty than regional and national levels
- There are slightly less children with social and emotional needs, specific learning difficulties and speech and language needs in Middlesbrough than regional and national levels.
- Middlesbrough is broadly comparable to regional and national levels for children and young people with a hearing impairment, visual impairment, physical disability, profound and multiple difficulty and other difficulty/disability.



The Primary needs breakdown for children and young people with an EHCP shows that:

- There are more children with a Hearing impairment, Severe Learning Difficulties, Profound and multiple learning difficulties and Social and Emotional Difficulties compared to regional and national levels.
- There are fewer children with moderate learning difficulties, speech language and communication needs and specific learning difficulties compared to regional and national levels.
- The levels of children and young people with Autism with an EHCP is broadly comparable to regional and national levels.

- 12 The majority of statutory duties in relation to Special Educational Needs and or Disabilities rest at a local area level, predominantly with local authorities but since the implementation of the SEND Code of Practice this now also places duties on Clinical Commissioning Groups. The Children and Families Act 2014 strengthens local authorities' key duties in respect of children and young people with Special Educational Needs and or Disabilities across the 0-25 age range, regardless of where they are educated. It places duties on health and education settings to use their best endeavours to meet the needs of children and young people with Special Educational Needs and or Disabilities; and requires local authorities and other listed bodies to have regard to the statutory guidance set out in the Special Educational Needs and or Disabilities Code of Practice: 0-25 years.
- 13 As mentioned above the SEND Code of Practice was introduced to ensure that children and young people receive the support that they require through a single assessment process across Education, Health and Social Care. It is important to note that through the implementation of the SEND Code of Practice came the creation of a new Local Area Inspection framework. This is a joint inspection across Education, Health and Social Care.
- 14 In March 2017 Middlesbrough Local Area was inspected by Ofsted and the Care Quality Commission as part of a new Local Area SEND inspection process. The inspection included scrutiny of the contribution of Education, Social Care and Health in ensuring that children and young people with Special Educational Needs and Disabilities made good progress and had their needs met in a timely manner. The outcome of the inspection in 2017 resulted in a Written Statement of Action to address significant concerns. These concerns identified that:
- a) There was a weakness in the strategic leadership, governance and implementation of the disability and special educational needs reforms in the local area.
 - b) Strategic planning was weak and there was no strategy for jointly commissioning services across Education, Health and Social Care.
 - c) Children, young people and families had too little involvement in discussion and decision-making about the services and support they needed. The local offer was poor and, as a result, children, young people and families had a weak understanding of the resources and support available in Middlesbrough.
 - d) Leaders had an inaccurate view of the local area's effectiveness. They did not gather, analyse and use information and data to drive improvement in provision and outcomes for children and young people who have special educational needs and/or disabilities in the local area.
- 15 As a result of this outcome a SEND Improvement Board was implemented with a number of work streams to address the required areas for improvement. Both the SEND Improvement Board and the work streams had representation from our local

parent's forum Parents4change, Education, Health and Social Care. The SEND Improvement Board developed into the SEND Strategic Group which was co-chaired by the Director of Education and the Director Lead for Children's Services, South Tees CCG. The Local Area was also supported by Special SEND Advisors from the Department for Education and from Health during this time. Our Parents forum began to find it difficult to attend all work streams so they focused on key areas such as the Local Offer and Preparing for Adulthood. They also set up meetings with the Strategic Lead for Inclusion and Specialist Support Services and the Designated Clinical Officer from Health on a regular basis to discuss developments within the local area, share feedback and plan engagement sessions.

- 16 In July 2019 the same Ofsted and CQC inspection team revisited the local area to inspect the sustained progress since the inspection in March 2017 and to identify if sufficient progress had been made on each of the four areas for development. The Lead HMI Inspector identified that the inspection team observed sufficient progress in each of the four areas and that Middlesbrough (LA and Health) no longer needed formal monitoring.
- 17 The Local Area SEND Inspection Framework is currently being updated and it is anticipated that the new framework will include children and young people accessing Alternative Provision. It is also anticipated that further news of the framework will be shared later this year.
- 18 To ensure that the local area continues to meet its requirements as outlined within the SEND Code there remains in place the SEND Strategic Group. This group has been further developed in terms of membership and has representation from the LA, Health, Educational Settings and Parents. The group is now chaired by the Executive Director for Children's Services. There continues to be a number of work streams focusing on areas linked to our key priorities as identified within the SEND Strategy (See appendix 1: SEND Strategy). The SEND Strategic group reports to the Children's Trust.
- 19 Since the inspection in March 2017, the revisit in July 2019 we continue to develop a range of services and support to meet the needs of our children and young people with SEND. Through working together across the SEND Strategic Leadership Group, key work streams, various task groups and engagement sessions we have:
 - Further improved how we work with our families and capture the voice of children and young people. This work includes engagement with our parents forum Parents4change, parents, carers and young people through regular meetings, drop in sessions, training sessions, membership of key tasks

groups, work streams, key engagement sessions, surveys, young people's Preparing for Adulthood conference, celebration events etc.

- Worked together across Education, Health and Social Care during COVID to ensure that children and young people with SEND have been supported. This has been through regular multi agency meetings to address any concerns and put in place required support from relevant agencies. Alongside this we worked together to ensure that all young people with an Education Health and Care Plan had their plan risk assessed at the height of the pandemic in line with national requirements.
- Developed a Single Point of Contact in partnership with families, this will be further reviewed with families in early 2022 to analyse impact and identify further areas for development.
- Continued to deliver a range of training to staff (staff who have completed key training have shared that they feel more confident in their role and understanding the needs of children and young people with SEND). This training has included undertaking SEND Peer Reviews across early years, schools and settings.
- A Designated Clinical Officer in post (Health) to support with key developments, deliver training and provide support for Health Colleagues. The Designated Clinical Officer is also the point of contact within Health across Education and Social Care.
- Developed our data systems through our Data, Quality and Outcomes work stream across Education, Health and Care to ensure all agencies understand the needs and changing needs of children and young people with special educational needs and / or disabilities. We have used and continue to use this information to develop local provision where gaps are identified. This has included the:
 - Development of a new integrated Early Years model which has increased the number of children with special needs able to access mainstream provision getting the health and education support they need.
 - Increase in the number of local specialist education placements including the development of a secondary autism base within a mainstream setting resulting in more children and young people accessing the support they need within the local area.
 - Continued to work closely with Post-16 providers to develop a range of provision which fully supports our young people as they move into adulthood. By doing so we have increased the range of Post 16 opportunities for young people with special needs. Feedback from young people has identified that they feel listened too and are accessing the provision which they feel meets their needs and prepares them for adulthood.
 - Development of Health Data dashboard to monitor the number of children accessing A&E and therapy services with an Education Health and Care

- Plan. This information will improve monitoring of incidents, involvement and inform future commissioning.
- Development and implementation of our new Outcomes Framework which was developed through our regional data group to collect data on progress for children and young people around softer outcomes across Education, Health and Social Care. This is now embedded within our Annual Review paperwork and is seen as an example of good practice. Further analysis and validation of the data is required, but through the initial evaluation we can see that:
 - 94.4% of children and young people with an EHCP are making progress towards their education outcomes
 - 95.2% of children and young people with an EHCP are making progress towards their health outcomes
 - 90.1% of children and young people are making progress towards their social care outcomes
 - Used our data to support schools and settings meet needs and we can see from the wider Middlesbrough Children Matter Education Strategy that the gap between non SEND and SEND pupils achieving good level of development at the end of early years **continues to close**. This was a 5% improvement compared to the national average. Other areas of **significant improvement** and where local scores **outperform national** are: KS2 Reading and Mathematics where there is a **10% improvement**; KS4 English and Maths level 4 and 5 where there is also a **10% difference of closing the gap** compared to national.
 - Improved the quality of Education, Health and Care Plans through developing a robust quality assurance process which continues to include or SEND Advisor from the Department for Education. We can also see from the feedback from parents and young people that 90% of families are satisfied with their experience and feel that their voice was heard during the process.
 - Improved and maintained good completion rate of Education Health and Care Plans during COVID which ensures that children and young people with SEND are assessed within the required timeframe. In the recently published data it should that Middlesbrough's completion rate was **99% which was 9th nationally**. This is a significant achievement considering the increased pressures as a result of COVID.
 - Used our data, feedback from families and partners to develop a new Inclusion model in 2020 which supports early identification of need to ensure children and young people with SEND receive the support they require in a timely and coordinated way. This model has been further developed and is in the process of a phased implementation as from September 2021.
 - We have further developed the Local Offer in partnership with families and increased the number of people using the Local Offer. This was achieved

through setting up initially a dedicated work stream with a key focus of ensuring the Local Offer was accessible and in a format families wanted. The impact of this work has supported more families and professionals to understand what support is available within the local area and to identify gaps in provision.

- Through feedback with families and the work of the Local Offer work stream we have also developed at the request of families a Facebook page and an email network.
- Through work of the Joint Commissioning work stream we developed a Joint Commissioning Strategy in partnership with children, young people and their families. This work stream has also supported the development of:
 - A jointly commissioned Speech and Language therapy service. This service is currently being further reviewed with a new and further improved model to be in place by April 2022.
 - Developed a children's equipment service to ensure children received the equipment they require in a timely way.
 - The CAMHS model was further revised which has resulted in the development of a needs-led neurodevelopmental pathway throughout South Tees. This was achieved through analysing key data, feedback from families, engagement sessions and the establishment of key partnerships. The new model was launched in September 2021.
 - Completed a review of Occupational Therapy support for 0-25, this review ensured continuity of provision for young people and their parents.
 - Ensured regular contract review of joint service provision through the Joint commissioning panel with South Tees authorities and clinical commissioning group representatives, exploring future opportunities of joint working.

20 Alongside the points raised above the SEND Strategic group, professionals, feedback from families and representation from our Parents Forum supported the completion of the local area SEND Strategy which has been further updated (see appendix 1: SEND Strategy)

21 Through the work of the SEND Strategic Group we continue to move forward with key developments to ensure that the needs of children and young people with SEND 0-25 in Middlesbrough are met. This work is linked to our strategic priorities and identified areas of development as outlined within our SEND Strategy. These are:

- a. To further develop **strategic leadership** across Education, Health and Social Care and identify and remove barriers to learning and support which have been a result of COVID.
- b. To ensure **greater involvement of children, young people and families** to support coproduction and ensure that their voice is heard regarding the services and support they need.
- c. To ensure greater analysis and use of information to ensure that there is sufficient **local educational provision** and to drive improvement in provision through the use of **data** and improve systems for capturing **softer outcomes** for children and young people who have special educational needs and/or disabilities
- d. To further improve strategic planning to support **jointly commissioning** services across Education, Health and Social Care.
- e. To improve processes and opportunities for children and young people in **preparation for adulthood**.
- f. To have a **trained and competent** workforce in understanding how to meet the needs of children and young people with SEND

22 We are currently awaiting the National SEND Review which should be published later this year. This review will provide feedback regarding the impact of the SEND Code of Practice since implementation and propose some further changes.

CONCLUSIONS

23 Through the ongoing improved local area strategic governance and oversight from our SEND Strategic Group which reports to the Children's Trust we can see that provision, opportunities and outcomes for children and young people with SEND continue to improve across the local area. There are a greater range of opportunities for children and young people and our improved data systems are supporting strategic planning arrangements to ensure that there is sufficient local provision and support.

24 We can also see from the work of the SEND Strategic Group key areas for development which link into our strategic priorities and work stream action plans which are monitored by the SEND Strategic Group

25 As a local area we continue to work together to ensure that the needs of our children and young people are met and we continue to develop our services in partnership with our families to meet needs and improve outcomes.

BACKGROUND PAPERS

26 SEND Strategy Appendix 1

AUTHOR: Caroline Cannon: Strategic Lead for Inclusion and Specialist Support Services

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Special Educational Needs and Disability Strategy 2021 - 2024



in partnership with



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Introduction

Middlesbrough Council and its partners recognise that “Middlesbrough Children Matter” and are the next generation who will ensure the success and prosperity of the town. It is therefore imperative that we invest in their development and create an environment in which they can grow and prosper.

Who does this strategy support?

This strategy supports children and young people with special educational needs and or disabilities aged 0-25

This strategy demonstrates through a clear vision how partners across Education, Health and Care will ensure improvements are made in how we deliver provision, support and develop services to meet the needs of children and young people aged 0-25.



Definition of Special Educational Needs

(as written within the SEND Code of Practice 2014)

Children have special educational needs if they have a learning difficulty which calls for special educational provision to be made for them.

Children have a learning difficulty if they:



A Have a significantly greater difficulty in learning from the majority of children of the same age; or



B Have a disability which prevents or hinders them from making use of educational facilities of any kind generally provided for children of the same age in schools within the area of the Local Authority;



C Are under compulsory school age and fall within the definition at A or B above or would so do if special educational provision was not made for them.

Definition of Disability

The Equality Act 2010 states a person has a disability if:

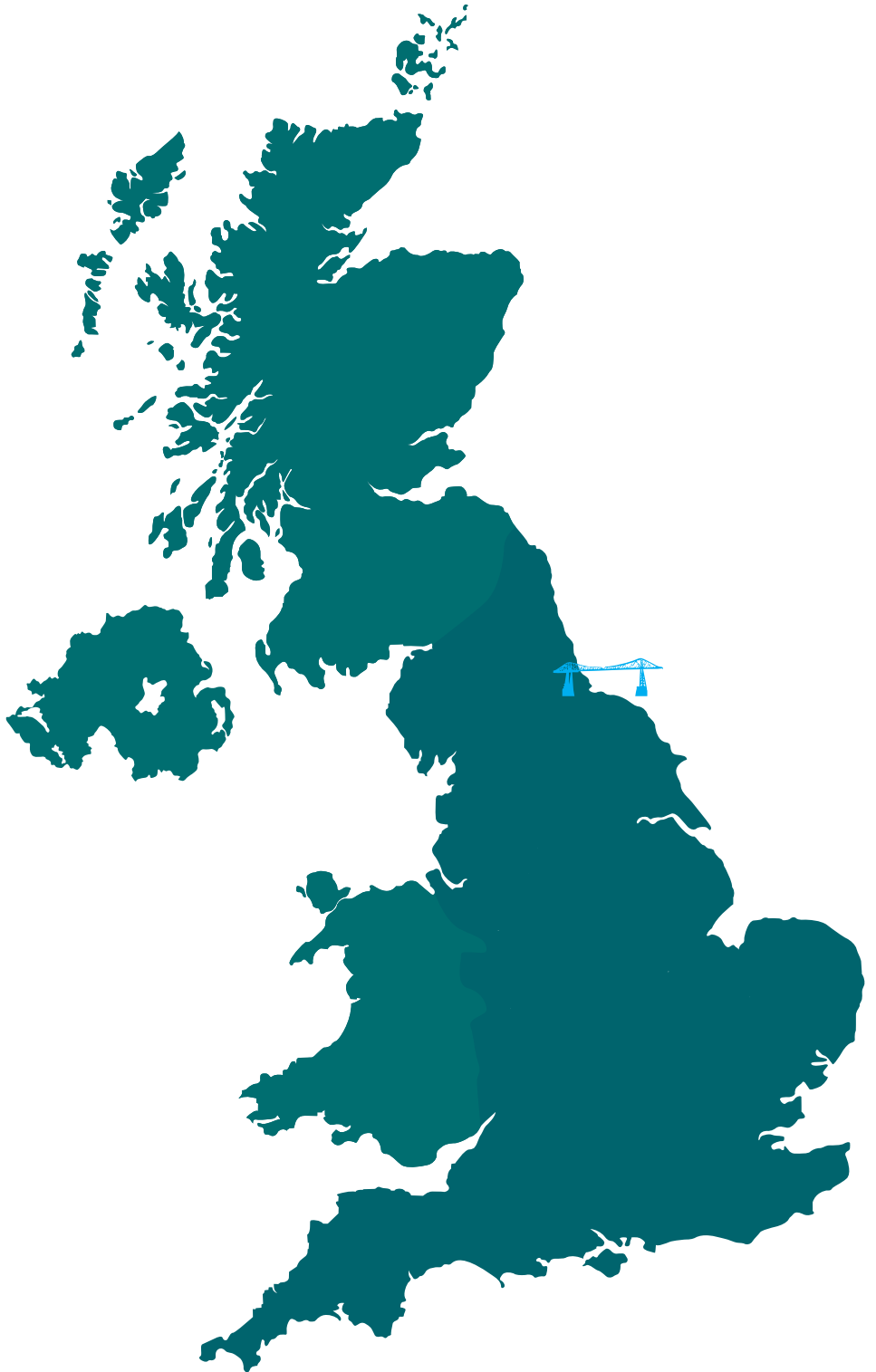
- A They have a physical or mental impairment; and**
- B The impairment has a substantial and long term adverse effect on their ability to carry out normal day-to-day activities**

The Government guidance states that the term substantial means more than minor or trivial. The term physical and mental impairment implies that a disability can arise from a wide range of impairments such as:

- Long term medical conditions such as asthma and diabetes.
- Fluctuating or progressive conditions such as rheumatoid arthritis or motor neurone disease.
- Mental health conditions such as bipolar disorder or depression.
- Learning difficulties such as dyslexia.
- Learning disabilities such as Down's syndrome and autistic spectrum conditions.
- Cancer.
- Multiple sclerosis.
- HIV / AIDS.
- People with severe disfigurement will be protected as disabled without needing to show that it has a substantial adverse effect in day to day activities.

National Context

The Special Educational Needs and or Disabilities (SEND) Code of Practice came into force on the 1st September 2014. The code covers the 0-25 age and sets out the statutory guidance on duties, policies and procedures for all organisations who work with and support children and young people with special education needs and disabilities.



Key Policy Drivers



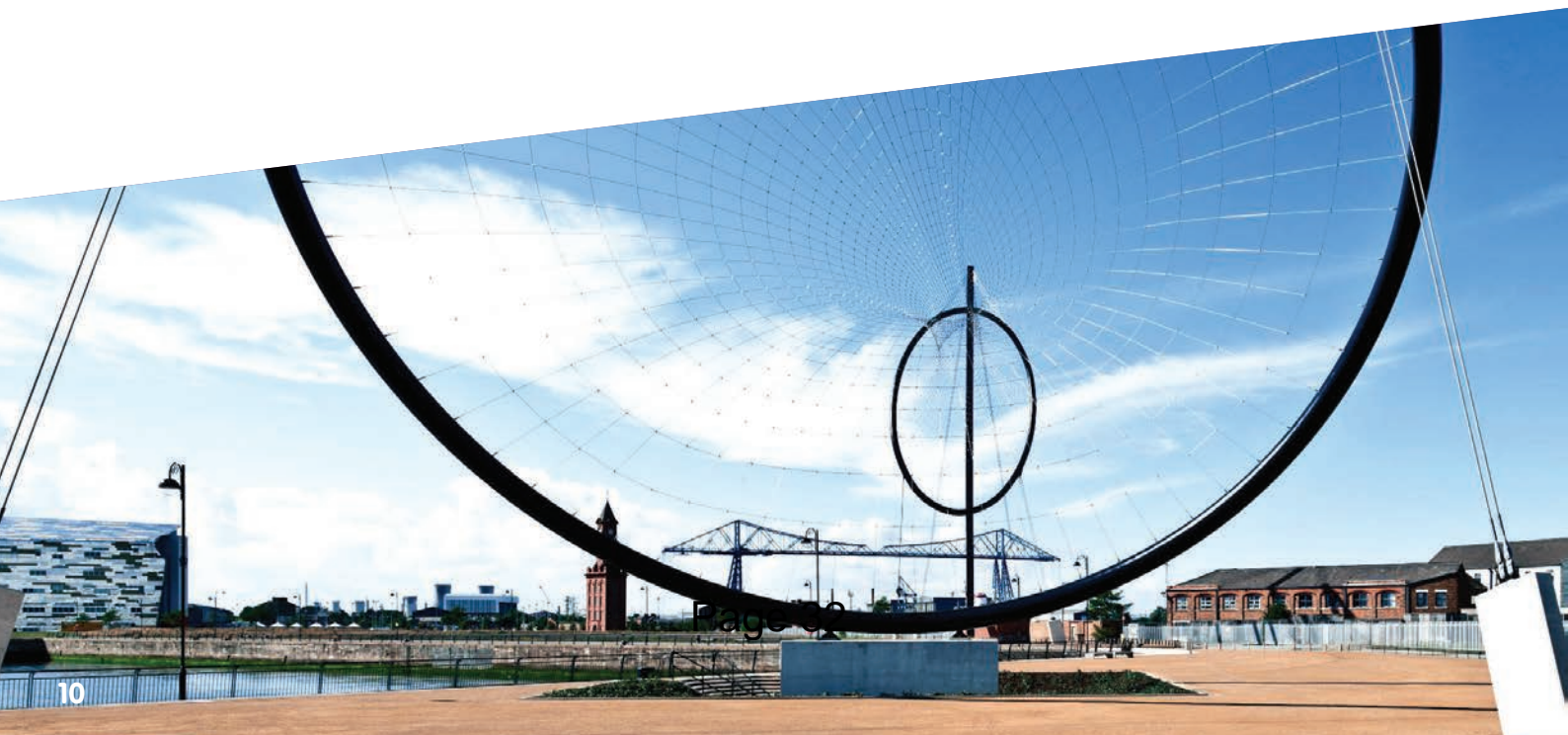
The Children and Families Act 2014, the Care Act 2014 and the Single Equalities Act 2010 form the backbone to the Special Educational Needs and or Disabilities reforms. Together they identify:

- Children and young people with more complex needs will access a coordinated assessment process.
- Education, Health and Care Plans (0-25 years) replace statements and Learning Difficulty Assessments.
- Coordinated support should meet the identified needs of children and young people, improving their outcomes, as they seek to reach their aspirations.
- All children and young people are encouraged to make decisions about their future, their support and to participate in designing services.
- Planning for adulthood should begin from the earliest opportunities to promote independence and full participation in their community.
- Children, young people and their families are given the option to receive a personal budget or direct payment to pay for their support or services.
- Public bodies have a duty to proactively meet the needs of disabled children and young people and ensure they are not disadvantaged.
- Local authorities must have an online 'Local Offer' detailing all support available for children and young people who have special educational needs.
- Services should be jointly planned and commissioned by the Local Authority and Clinical Commissioning Groups.
- Parents are able to ask for a carers assessment in their own right and receive appropriate support for identified needs.

Local Context

Situated on the North-East coast of England, Middlesbrough is at the heart of the Tees Valley. The minority ethnic population of the town is one of the highest in the region. It is very diverse with 55 different languages being spoken from 49 different countries, a factor that must be reflected and considered when designing and planning services for children and young people.

The town currently has a range of early years settings, 41 primary schools, 8 secondary schools, 5 special schools, an Alternative Provision Academy and a range of post-16 provision including Middlesbrough College and Northern School of Art.



There is also a number of specialist provision within mainstream settings which deliver support to meet the needs of children and young people with Special Educational Needs and or Disabilities. All settings have a duty to adhere to the Special Educational Needs Code of Practice and to ensure that they are as inclusive as possible



Numbers of children and young people with Special Educational Needs and or Disabilities (SEND) 0-25 in Middlesbrough: 4,800 (approx)

1,300
children and young people have a have an Education, Health and Care Plan

3,500
children and young people 0-25 have a SEN Support Plan

What is an Education, Health and Care Plan?

An Education Health and Care Plan is for children and young people aged up to 25 who need more support than is available through special educational needs support. It is a legal document that describes a child or young person's special educational, health and social care needs. It explains the extra help that will be given to meet those needs and how that help will support the child or young person to achieve what they want to in their life.

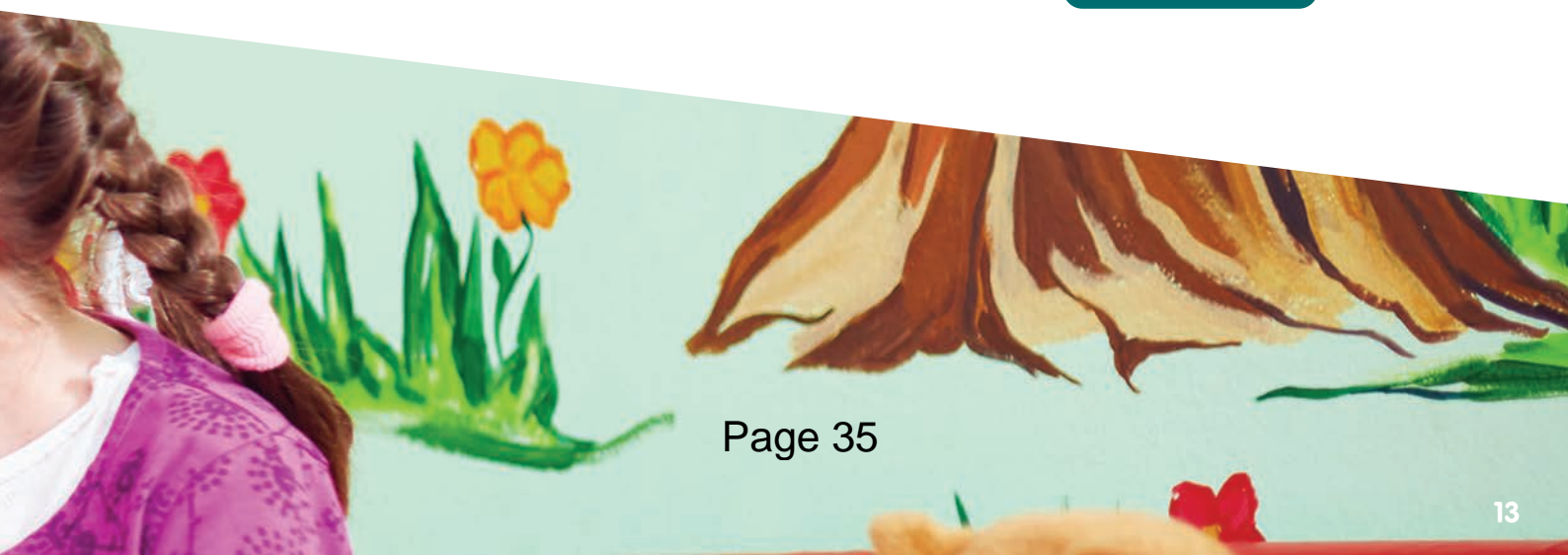


What is a SEN Support Plan?

A SEN Support Plan is a non-statutory plan which supports settings to evidence how they utilise their existing resources to support a child or young person. The plan will show a graduated response in terms of the support offered, prior to a request for an EHCP assessment. SEN plans are portable and will follow a child or young person between settings, reducing the need for them or their family to tell their story more than once. We have our own template which was developed in partnership with settings and which captures the needs of the child or young person. Additional resources through the SEN High Needs Funding Matrix can be made available if a need is identified and evidenced in the plan. Admission to High Needs Bases / Units in mainstream settings can also be accessed on the basis of SEN support details plus recommendations of professionals e.g. Educational Psychologists.

For further information regarding Education, Health and Care Plans and SEN Support Plans please see

Appendix 1: The Graduated Support Model (page 34)



Key commitments across Education, Health and Social Care



We have an agreed set of commitments across Education, Health and Social Care. Through these we will ensure that:



Children and young people have the best start in life.



Children and young people are not disadvantaged as they move into adulthood as a result of COVID.



Children and young people with special educational needs and or disabilities and their families, are fully involved in discussions and decision making about the services and the support they receive through meaningful and ongoing co-production.



All children and young people with special educational needs and or disabilities will have equitable access to services through a review of the support planning and the Education, Health and Care Planning (EHCP) process, including robust quality assurance and moderation of plans and evidence of partnership working.



We have a clearly defined system of governance and accountability.



Our strategic leaders and staff at all levels have a clear understanding of the needs of children and young people with special educational needs and or disabilities through strategic leadership, robust data sharing across Education, Health and Care and through an embedded culture of effective training.



Our strategic planning is more responsive to local need through strong partnership working across Education, Health and Social Care.



Provision for children and young people is needs led, flexible and responsive and will provide choice and control.



Everything we do has the child, young person and their family at the centre.



We have integrated children's service provision that offers planned services responsive to need rather than diagnosis.



We improve the overall quality, responsiveness and equity of access of our services to meet all needs of children within an appropriate setting.

Our Vision



Underpinning our vision is a set of principles that we will uphold when developing and delivering services for children and young people, which are:



Working and committing resources together to effectively deliver improved outcomes for children and young people and their families.



Together we will work with integrity, trusting each other in an open and honest manner, exercising moral courage in all that we do.



We will be creative and develop new ideas to deliver a better future for children and young people and their families.



We will make services and learning opportunities available for all children in the community that respond to their different needs whilst focusing relentlessly on their communication and language skills and social and emotional development.



Commissioning budgets from all organisations will be utilised more effectively to monitor and evaluate outcomes of services and the impact they have on the target group.



Through continuous improvement, we will develop the best and most effective services for children and young people.

What has changed
as a result of our
2018-2020 strategy?



Through working together we developed:

- A new integrated early years model which has increased the number of children with special needs able to access mainstream provision getting the health and education support they need.
- A Single Point of Contact through which parents and professionals can receive the information they require.
- Improved data systems which have supported our planning of required provision.
- Improved Local Offer and made it more accessible for families and professionals.
- Improved ways for capturing the voice of children and young people to ensure that we can use this information to support developments.
- A range of training opportunities which have been delivered for parents and developed key information which families find useful.
- A new and improved Speech and Language offer which means a much more personalised approach.
- A new Inclusion model which supports early identification of need to ensure children and young people with SEND receive the support they require in a timely and coordinated way.

Through our Strategic Leadership we:

- Increased the number of children and young people accessing mainstream provision with an EHCP which means these children and young people have the opportunity to have their needs met in mainstream where mainstream is appropriate to offer the inclusive support identified in their EHCP rather than moving into specialist provision.
- Ensured all schools and Post 16 settings took part in a SEND Peer Review which helped everyone understand what they needed to further develop.
- Delivered a range of training to staff who shared that they feel more confident in their role and understanding the needs of children and young people with SEND.
- Improved the quality of Education, Health and Care Plans.
- Received a positive outcome in the July 2019 Local Area revisit where inspectors found that we had made good progress against the areas identified within the Written Statement of Action.

We developed our data systems across Education, Health and Care to ensure all agencies understood the needs and changing needs of children and young people with special educational needs and/or disabilities. We used this information to develop local provision where gaps were identified.

This included:

- Improved support within our Early Years Specialist Support Service
- Increase in the number of local specialist placements including the development of a secondary autism base within a mainstream setting resulting in more children and young people accessing the support they need within the local area
- Approval for a new Free Special School which will be open in September 2022 which will provide additional capacity
- Increase in the number of Supported Internships which has resulted in more young people accessing the most appropriate Post 16 pathways
- Health Data dashboard developed to monitor the number of children accessing A&E and therapy services with an Education Health and Care plan, this will improve monitoring of incidents, involvement and inform future commissioning



Through our work around Joint Commissioning we have:

- Developed a Joint Commissioning Strategy in partnership with children, young people and their families
- Established a young commissioners panel
- Jointly commissioned a Speech and Language therapy service with agreed performance outcomes, which is jointly monitored and captures the views of the children engaging in the service
- Developed a children's equipment service
- Developed an all age autism strategy. A needs-led neurodevelopmental pathway has been developed and is planned for implementation throughout South Tees in September 2021
- Completed a review of Occupational therapy support for 0-25, this review resulted in all OT provision being provided by the same organisation
- Regular contract reviews of joint service provision through the joint commissioning panel with South Tees authorities and clinical commissioning group representatives, exploring future opportunities of joint working

We increased the number of people using our Local Offer. This was achieved through:

- Advertising the Local Offer on a range of Billboards across the town
- Ensuring posters of the Local Offer were visible across a range of settings
- Engaging with families to understand how we could improve the Local Offer
- Offering Drop in Sessions to families
- Running competitions

The impact of this work has supported more families and professionals to understand what support is available within the local area.

Key Priorities 2021-2024



To support development across the Local Area the key priorities within Middlesbrough are:



To develop **strategic leadership** across Education, Health and Social Care and identify and remove barriers to learning and support which have been a result of COVID.



To ensure **greater involvement of children, young people and families** to support coproduction and ensure that their voice is heard regarding the services and support they need.



To ensure greater analysis and use of information to ensure that there is sufficient **local educational provision** and to drive improvement in provision through the use of **data** and improve systems for capturing **outcomes** for children and young people who have special educational needs and/or disabilities.



To further improve strategic planning to support **jointly commissioning** services across Education, Health and Social Care.



To improve processes and opportunities for children and young people in **preparation for adulthood**.



To have a **trained and competent** workforce in understanding how to meet the needs of children and young people with SEND.

How will we achieve these priorities?



We will achieve these priorities through:

Strategic Leadership

We will build on the already strong partnerships and shared vision across Education, Health and Care at a strategic level to ensure that children and young people with special educational needs and or disabilities have access to a range of services and that all agencies understand their responsibilities.

What will this mean for you?

Children and young people with special educational needs and/or disabilities will be supported by competent and knowledgeable staff. Their needs will be identified and outcomes in place which will support them to achieve and meet their aspirations.

Parents and carers will receive the support and information they require to ensure the needs of their children are met.



We will achieve these priorities through:

Greater involvement of children, young people and families

Children, young people and their families will be at the centre of the planning and development of services from the start. Services will be co-produced by parents and young people and resources will be designed with and for young people.

What will this mean for you?

Children, young people and their families will be involved in the planning, delivery and evaluation of services. Services will be flexible and accessible to ensure that the child is at the centre of all planning and that their voice is heard throughout the process.



Sufficient local educational provision through the use of data and improved systems for capturing holistic outcomes

We will continue to analyse our data and ensure that we develop the required educational, health and care provision within the local area based on identified needs. We will use our data to identify commissioning opportunities to inform what provision is required and ensure we have robust systems in place to capture holistic outcomes of children and young people with SEND.

What will this mean for you?

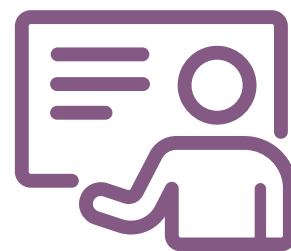
Children and young people will access local provision which meets their identified needs. This provision will support them to achieve their identified outcomes across education, health and social care.

Joint Commissioning

We will further improve Joint Commissioning in partnership with children, young people and their families. Joint commissioning of services will continue to improve outcomes for children and young people.

What will this mean for you?

Children, young people and their families will see a more co-ordinated approach accessing the right services at the right time.



We will achieve these priorities through:

Preparation for adulthood

We will further develop the pathways and provision available for young people at post 16 to ensure that young people achieve their outcomes when they finish their education, and that they are prepared for employment, independence and remain in good health.

What will this mean for you?

Young people will be able to access a range of support and provision to help prepare them to progress to greater employment and independence and make a positive transition to adult life.

Trained and competent workforce

Staff across Education, Health and Social Care through effective training will fully understand their responsibilities towards children and young people with special educational needs and or disabilities.

What will this mean for you?

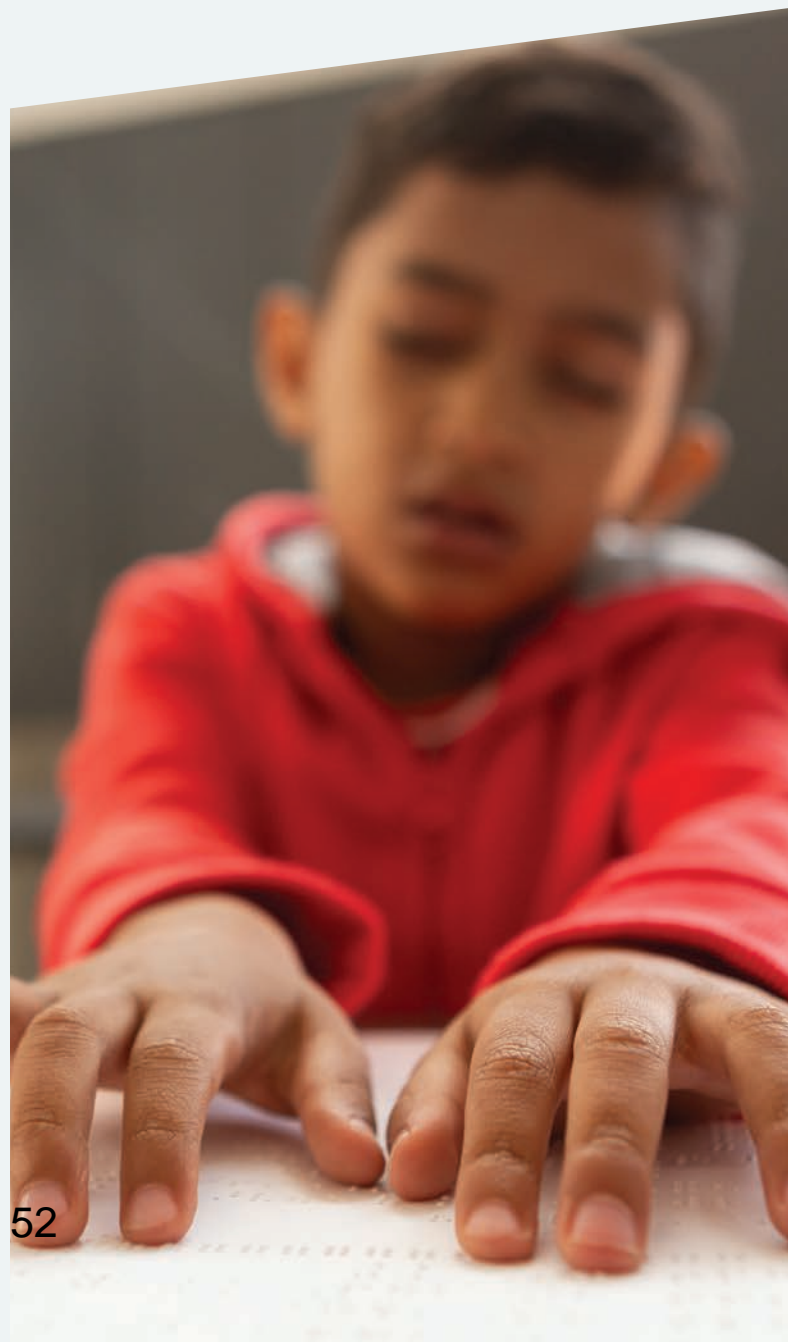
Children and young people with special educational needs and / or disabilities will be supported by competent and knowledgeable staff. Their needs will be identified and outcomes in place which will support them to achieve and meet their aspirations and identified outcomes.



How does the Special Educational Needs and Disability strategy link to other key strategies?

This strategy and vision links to the Council's Strategic Plan and Tees Valley CCG Children and Young People's Plan.

The table opposite demonstrates the links between these three plans.



Middlesbrough Council Strategic Priorities	TVCCG Children and Young People Plan	Special Educational Needs and or Disabilities priorities 2021-2024
<p>We will show Middlesbrough's children that they matter and work to make our town safe and welcoming and to improve outcomes for all children and young people.</p>	<p>Further refine needs assessment and gap analysis.</p>	<p>We will further develop strategic leadership across Education, Health and Social Care and ensure that children and young people achieve their identified outcomes.</p>
<p>We will work to address the causes of vulnerability and inequalities in Middlesbrough and safeguard and support those made vulnerable.</p>	<p>Continue to develop effective and meaningful data flow to improve strategic understanding of current and future cohorts for children and young people with SEND, based on Data Sharing agreements, EHCP cohort data and key performance indicators.</p>	<p>We will continue to involve children, young people and families around discussion and coproduction of the services and support they need</p>
	<p>Children's equipment pathways to be considered for joint commissioning opportunities. Continue to develop Tees Community Equipment Stores.</p>	<p>We will ensure further improvement of strategic planning to support jointly commissioning services across Education, Health and Social Care.</p>
	<p>Undertake review of therapy services including speech and language, occupational therapy, physiotherapy and learning disability physiotherapy and jointly commission.</p>	<p>We will work with young people, their families, local partners and national leads to further improve processes and opportunities which will support young people as they move into adulthood.</p>
	<p>Work with Local Authority and Education Partners to improve outcomes for children and young people with SEND via workstreams.</p>	<p>We will ensure that we have a trained and competent workforce across Education, Health and Social Care.</p>
	<p>Work with Local Authority and Education partners to identify and pursue other joint commissioning opportunities</p>	

How will this strategy be monitored?

There will be a clear action plan in place which will support the delivery of the Special Educational Needs and Disability Strategy. This action plan will be monitored through the SEND Strategic Group and Children's Trust Board.

Feedback on delivery of the strategy will be sought from children and young people and their families using a variety of formats to ensure the needs of children and young people are met and that local changes are made to ensure children and young people achieve their outcomes and aspirations.

Where will you find out about the progress of this strategy?

Updates on progress against the priorities within this strategy will be published on the Local Offer website. Information will also be published in the Disabilities Matters newsletter, Parents4change newsletter and key service updates and newsletters.

When will this strategy be reviewed?

The Special Educational Needs and Disability Strategy will be reviewed and updated every 12 months.

For further information please contact

Single Point of Contact

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Page 54
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Appendix 1

Graduated Response

The reforms included a greater emphasis on SEN Support for children/young people in educational settings and the recommendation of the use of a SEN Support Plan.

Good SEN Support Plans can be valuable tools to help evidence the graduated response.

A well written SEN Support Plan demonstrates effective practice and evidence of steps taken and progress made as part of a Graduated Response including any Early Help Assessment. It demonstrates an awareness and evidence of the use of SEND processes in the SEND Code of Practice.

SEN Support Plans are flexible non statutory working plans which will be written and reviewed by educational settings, facilitate portability between settings, and follow a child or young person when there is movement between educational settings.

Education Health and Care Plans

The majority of children and young people with special educational needs will have their needs met in the child's local mainstream school or setting, sometimes with the help of outside specialists. In some cases, children attend specialist bases in mainstream schools or special schools depending upon the needs of the individual child.

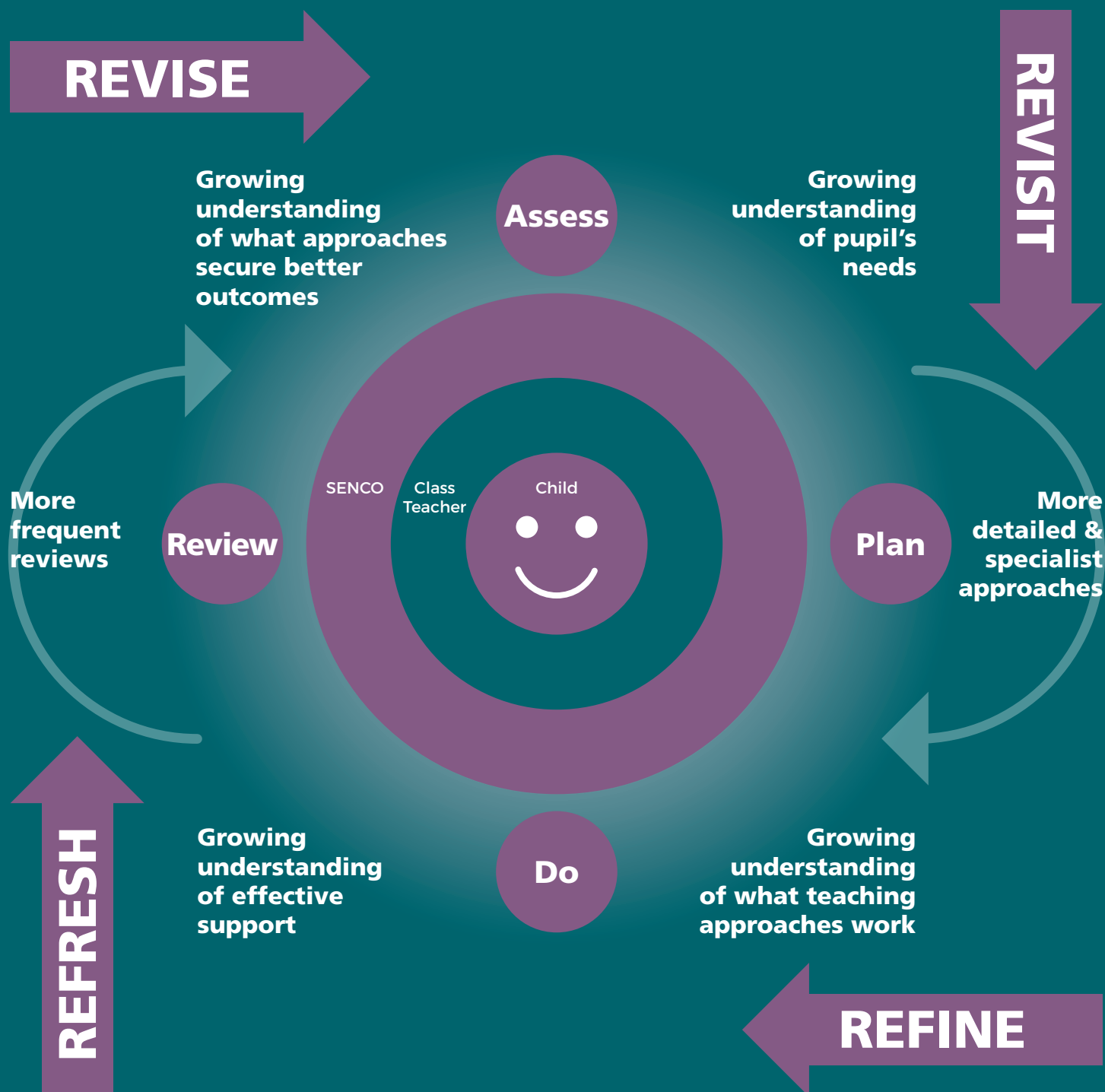
Most children and young people will have their needs met without the need for an EHCP however they may have a SEN Support Plan produced by a setting in dialogue with other professionals and parents, carers and children/young people, which identifies need, appropriate outcomes and support.

For those with the most complex needs, a statutory (EHC) assessment may be requested via an appropriate referral from a setting, professional, parent/young person. The statutory assessment of SEN covers a child/young person's education, health and care needs however in all cases, children/young people must be identified as having a special educational need to have an EHC assessment. The assessment is coordinated by the Local Authority's Inclusion, Assessment & Review Team.

Timescales for making assessments & issuing Education Health and Care Plans (EHCP)

The process of EHC assessment and EHC plan development must be carried out in a timely manner. Local authorities must ensure that they have planned sufficient time for each step of the process, so that wherever possible, any issues or disagreements can be resolved within the statutory 20 week timescale.

Graduated Support Model



Middlesbrough Local Offer

Useful information for children and young people with special educational needs and disabilities (SEND) and their families.

Who is it for?

- Children and young people with special educational needs and/or disabilities (SEND) from birth to 25 years
- Parents, carers and families
- Professionals



www.middlesbrough.gov.uk/localoffer



SPECIAL EDUCATIONAL NEEDS AND DISABILITIES (SEND)

DRAFT TERMS OF REFERENCE

- a) To examine key data in respect of children and young people with special educational needs and disabilities in Middlesbrough.
- b) To identify:
 - the range of special educational needs and disabilities that children and young people may experience; and
 - the impact of special educational needs and disabilities on the ability of children and young people to learn and achieve alongside their peers.
- c) To examine how the Local Authority works with early years providers, schools and colleges to identify and support all the children and young people in Middlesbrough who have or may have special educational needs and disabilities.
- d) To investigate how Education, Social Care and Health work collectively to deliver SEND provision at a local level.
- e) To examine how the views, wishes and feelings of the child/young person and their parents are gained and how the child/young person is encouraged to participate as fully as possible in decisions.
- f) To identify best practice strategies in supporting children and young people with special educational needs and disabilities.

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