

**Education and Children's Services Overview and Scrutiny Committee**  
**4<sup>th</sup> April 2017**  
**Report of the Independent Chair of the Education Challenge Board and the**  
**Special Educational Needs, Disability & Inclusion (SENDI) Challenge Board**  
**Frances Done**

**Ward(s) All**  
**Portfolio; Councillor Rose Burley - Education and Children's Services**

1.	<p><b>Executive Summary:</b></p> <p>The purpose of this report is to update the Committee on</p> <ul style="list-style-type: none"> <li>i) the work of the Education Challenge Board (the ECB and</li> <li>ii) the work of the Special Educational Needs and Inclusion (SENDI) Challenge Board which was established in June 2016, and progress to date.</li> </ul> <p>The report outlines progress in relation to educational performance of both pupils and schools in Walsall, progress in the implementation of the School Improvement Action Plan, and the development of a SENDI Strategy and Action Plan.</p>
1.1	<p><b>Reason for Scrutiny:</b></p> <p>The OFSTED inspection report relating to local authority school improvement services published in June 2014 found that the local authority's arrangements for supporting school improvement were ineffective. The quality of the authority's arrangements is crucial to ensuring that all Walsall children achieve the best possible educational outcomes.</p>
1.2	<p><b>Recommendations:</b></p> <p>Members are asked to note;</p> <ul style="list-style-type: none"> <li>(i) The progress being made in relation to the implementation of the Walsall School Improvement Strategy</li> <li>(ii) The development of the SENDI Strategy and Action Plan</li> <li>(iii) The very substantial amount of work needed to ensure that Walsall's ambitions for pupils with SEND can be achieved, requiring an active contribution of Walsall's Adult Services and key partners such as those in health and further education.</li> </ul> <p>Members are asked to comment on the work of the ECB and SENDI Challenge Boards.</p>
1.3	<p><b>Background Papers:</b></p> <p>Walsall School Improvement Strategy and Action Plan.</p>
1.4	<p><b>Resource &amp; Legal Considerations:</b></p> <p>None</p>

1.5	<p><b>Citizen Impact:</b></p> <p>None</p>
1.6	<p><b>Environmental Impact:</b></p> <p>None</p>
1.7	<p><b>Performance Management:</b></p> <p>None</p>
1.8	<p><b>Equality Implications:</b></p> <p>The work of the two Boards is focussed on securing equal opportunity for all Walsall children by giving every single child the best possible chance of success.</p>
1.9	<p><b>Consultation:</b></p> <p>None</p>
1.10	<p><b>Contact Officer:</b></p> <p>Lynda Poole  Assistant Director: Access and Achievement  01922 652895      <a href="mailto:lynda.poole@walsall.gov.uk">lynda.poole@walsall.gov.uk</a></p>
2.	<p><b>Background</b></p> <p>The OFSTED inspection report relating to local authority school improvement services published in June 2014 found that the local authority arrangements for supporting school improvement were ineffective.</p> <p>In response to OFSTED'S finding the Children and Young People's Partnership approved a School Improvement Strategy and a related Action Plan. One of the commitments in the Plan was the establishment of an Education Challenge Board with an independent chair which is monitoring progress and providing challenge for the implementation of Walsall's Strategy. The Board provides constructive challenge and support to those responsible both for delivering improved outcomes in schools and those providing support for school improvement.</p> <p>The membership of the Board comprises Secondary, Primary and Special School Headteachers, a business person from Walsall, and an academic from Birmingham City University in addition to the Portfolio Holder for Children and Young People, the Director of Children's Services and the Assistant Director, Access and Achievement.</p> <p>OFSTED re-inspected the authority in March 2016 and reported on the outcome to the Director of Children's Services on 7<sup>th</sup> April. At its May meeting the ECB reviewed the OFSTED letter which concluded that there had been improvement, including improved leadership, since the 2014 inspection but that there was still a great deal to be done, reflecting that the percentage of good or better schools in Walsall was still around 10 per cent below the national average.</p>

A post OFSTED action plan was prepared that focused on the key priorities identified in the OFSTED letter. One of those priorities related to closing the gap between disadvantaged pupils and others, and improving the achievement of pupils with special educational needs or disability so that they make at least as much progress as other pupils nationally. The SENDI Challenge Board was established in June 2016 with the objective of providing focus and challenge in this key area and progress is discussed later in this report.

At its meetings the Education Challenge Board has continued to focus on:

- reviewing current performance of schools and pupils
- monitoring progress in implementing the School Improvement Action Plan.

These are reported on below.

### 3. **Reviewing Performance**

At each of its meetings the ECB carefully reviews the latest available performance data, drilling down where appropriate to identify issues and potential opportunities for improvement.

The high-level scorecard for January 2017 is attached as Appendix A. This indicates performance relative to the success measures included in the revised School Improvement Strategy.

#### **Pupil performance**

The Education and Children's Services Overview and Scrutiny Committee received a detailed report on 16<sup>th</sup> February 2017 outlining Primary and Secondary Educational Attainment 2016. For consistency the summary of that report is outlined below.

Primary and secondary results have now been validated and published, showing how Walsall's children and young people have performed compared to statistical neighbours and national averages. Due to major changes in assessment criteria, the 2016 results cannot be compared to those of previous years in most cases.

The 2016 results contain areas of strength compared to national averages. In particular, outcomes in Walsall for Year 1 Phonics, Key Stage 2 Writing and Key Stage 5 applied and technical qualifications are all above national averages. There are gaps in achievement, compared with all children, for Pupils with Special Educational Needs, those who are Looked After and those eligible for Free School Meals to a varying degree depending on Key Stage.

In Early Years, Walsall's performance on the measure of 'Good Level of Development' which children aged 5 at the end of the reception year are expected to have achieved has improved by 4% from 61% in 2015 to 65% in 2016. This is 4% below the national average. Outcomes in Year 1 Phonics for 6 year olds continue to be a strength, and at 82% is 1% above national average.

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At the end of Key Stage 1 (7 year olds), Walsall pupils performed just below the national average. 72% of pupils reached the expected standard in the new Reading test, compared to 74% nationally. In Writing, 62% of pupils met the expected threshold, compared with the national average of 65%. In Mathematics, 71% of pupils met the expected threshold which was 2% below the national average of 73%.

At the end of Key Stage 2 (11 year olds at the end of primary school), following the introduction of a new national curriculum, writing is a strength, being 3% above the national average at 77%. In reading 61% of pupils reached the expected level, which is 5% below the national average of 66%. In Maths 50% of Walsall pupils reached the expected standard in the combined Reading, Writing and Maths measure. This compares well with the outcomes for our statistical neighbours. Nationally, results are 3% higher than this.

Secondary success at Key Stage 4 (16 year olds) is now measured specifically in terms of Progress 8. On this measure, Walsall is -0.24 below the national average of zero. For comparative purposes, 57% of pupils have achieved at least a grade C or better at GCSE level in both English and maths. The national average is 59%.

At Key Stage 5 (18 year olds), success measures changed to a new points system in 2016. Walsall compares favourably with the national average on this measure for technical and applied level qualifications was 1.4 points below the national for the combined Level 3 qualifications measure. This is due to performance at A Level being 3.65 points below the national average.

At its February 2017 meeting the Board spent some time scrutinising performance at EYFS and each Key Stage. It subsequently endorsed some revised targets in relation to the success measures included in the School Improvement Strategy. These are shown in the high-level scorecard (Appendix A) and are largely based on attaining at least national levels of educational performance by 2019. The Board considers these to be ambitious but realistic targets and progress towards them will be reported regularly to the Board.

### **School performance**

The ECB also keeps under review the trend in OFSTED inspection judgements for Walsall schools.

Published OFSTED judgements on school inspections since December 2013 have shown an improving trend;

### **Schools judged good or outstanding by OFSTED**

December 2013	65.5%
June 2015	73.3%
December 2015	75.0%
September 2016	76.5%
March 2017	81.4%
National average	89.5%

	<p>Walsall's OFSTED inspection results, measured by this criterion, are continuing to improve but the national rate of improvement is greater. If the objective of reaching the national average of schools judged good or better by 2018 is to be achieved, then Walsall's <b>rate</b> of improvement must significantly increase.</p> <p>In my last report I indicated that the performance of some Academies, and particularly sponsored Academies, is a cause of concern. This continues to be the case despite the positive working relationships established with sponsored Academies and most multi Academy trusts and the regular contact between the Executive Director of Children's Services and the Regional Schools Commissioner, who is responsible for Academies. Sponsored Academy performance will remain something that the ECB will maintain an interest in given the impact of their results on Walsall's overall performance, and most important, the impact on educational outcomes for the Walsall children who attend them.</p>
4.	<p><b>Monitoring Progress on the School Improvement Strategy Action Plan</b></p> <p>The ECB continues to focus on the achievement of activity to support significant improvement in the performance of Walsall schools.</p> <p>The top priorities for action remain:</p> <ul style="list-style-type: none"> <li>• the development of school to school improvement support</li> <li>• improvement to governance</li> <li>• improvement to school leadership</li> </ul> <p>The Board has considered these in detail over recent meetings. The development of school to school improvement support has been progressed rapidly in the last six months, working towards a long-term sector led model. At its last meeting the Board endorsed the work underway between the school improvement team, teaching schools and schools in Walsall to focus on, and support. newly qualified teachers so that they were successful and also more likely to remain committed to teaching in Walsall. The Board was also encouraged to hear about the more effective use of Specialist Leaders in Education across the borough and the successful bids for resources to support individual schools, including schools in the 'good' category that needed support in relation to particular areas of the curriculum.</p> <p>In relation to school leadership the Board noted that the improved leadership scores in recent OFSTED inspections were a welcome sign that the implementation of the secondary and primary leadership strategy work was beginning to bear fruit. This work is benefitting from strong input from seconded headteachers and teaching schools.</p> <p>At its last meeting the Board also discussed a report about primary and secondary exclusions which updated the Board on the implementation of the Fair Access Protocol. This helps to address the increasing number of exclusions at both secondary and primary level which is a cause for concern. The Board was clear that behaviour issues in some cases were associated with a child's unidentified special educational needs, and that the earliest possible identification and support for such children was crucially important, via Walsall's Early Help and locality approach. This is an area of work being considered by the SENDI Challenge Board.</p>

	<p>Whilst acknowledging the encouraging progress being made in implementing the current school improvement action plan and the undoubted commitment of those involved at school level, within the school improvement team and at senior management level, it remains the case that Walsall's ambition to achieve national performance levels by 2019 will require a redoubling of effort across all those involved in improving the educational outcomes of children in Walsall.</p>
5	<p><b>SENDI Challenge Board Update</b></p> <p>As outlined in paragraph 2 the gap between the performance of Walsall pupils with special educational needs and disabilities and that of children without such needs is a continuing cause for concern.</p> <p>The SENDI Challenge Board was established to provide greater focus on this issue. In my report to the Overview and Scrutiny Committee in October 2016 I reported that a revised SENDI strategy 2016-2020 was in development. This has now been largely completed and is attached as Appendix B. The strategy is to be circulated to headteachers and chairs of governors via the Local Authority's Weekly Newsletter (the Link) to increase awareness and obtain feedback.</p> <p>The key priority of the strategy is to ensure outcomes for children and young people with special educational needs and disabilities are good or better. The strategy identifies ten clear priorities for action, and these have been drawn up taking account of the results of a detailed self-evaluation prepared by the Head of Service SENDI.</p> <p>These priorities are;</p> <ul style="list-style-type: none"> <li>• Commissioning high quality specialist provision that meets the needs of children and young people</li> <li>• Developing a SEND pathway of school to school support</li> <li>• Strengthening and improving our co-production with children and young people, parents and carers</li> <li>• Continuing to ensure that the Local Offer provides the fullest amount of guidance and information</li> <li>• Developing an all age disability service to secure the best outcomes for children and young people at key transition stages</li> <li>• Continuing to support and develop our policies to ensure all young people are in education, training or employment</li> <li>• Updating the Council's accessibility strategy</li> <li>• Developing Personal Budget guidelines</li> <li>• Having in place timely and high quality Education, Health and Care Plans, and</li> <li>• Achieving timely and effective use of data.</li> </ul> <p>The Action Plan associated with the key priorities for action forms part of the Strategy document as does the SENDI scorecard, which is based on the success measures included in the Strategy. The success measures are based largely around the achievement by children with SEND of national levels of performance by 2020. The Board recognises that this is a very ambitious target given the current level of performance but that it nevertheless represents the right level of ambition.</p>

	<p>The Board is very clear that Walsall has a great deal to do in this crucial area of work. Progress has speeded up considerably since the recruitment of a permanent Head of Service SENDI particularly in relation to cross Council working and with partners such as health. However the self-evaluation revealed several areas where the appropriate systems and partnership working are not yet in place to provide children with SEND with the support and opportunities that they are entitled to. Particular areas of concern are;</p> <ul style="list-style-type: none"> <li>• The involvement of parents and carers both at the strategic and operational level</li> <li>• Enabling the views of children and young people with SEND to be both heard and acted on</li> <li>• Providing smooth transitions for children and young people at key points from the ages 0-25</li> <li>• Fulfilling the authority's statutory obligations in relation to the production of Education, Health and Care Plans.</li> </ul> <p>The Overview and Scrutiny Committee will be aware of the review of commissioning in relation to SEND needs and provision (reported on 10<sup>th</sup> January 2017) which is currently in progress. It is anticipated that the Cabinet will receive a report on this for decision in April 2017. This is a very important review, responding to one of the key priority areas for action in the SENDI Strategy. However the SENDI Challenge Board is very clear that this should not detract in any way from the high priority that should be given to spreading good inclusion practice in mainstream schools, enabling teachers, headteachers and governors in those schools to be able to provide confidently the individual support needed for each of the many children with SEND needs within their school. There are already examples of excellent practice within Walsall schools and the challenge is to ensure that this becomes the norm for all mainstream schools.</p> <p>In all areas relating to the improvement of educational performance excellent partnership working is an essential element of success. This is especially so in the SEND area, and the active contribution of health and further education partners, and other council services such as Adult Services, must be achieved if the SENDI Strategy is to be delivered.</p> <p>The SENDI Challenge Board will continue to meet regularly to monitor progress in relation to the SENDI Strategy Action Plan and review performance in relation to the success measure, via the SENDI scorecard.</p>
6	<p><b>Conclusion &amp; Next Steps</b></p> <p>The work of both the ECB and the SENDI Challenge Board continues to provide strong focus on the delivery of Walsall's improvement strategies, along with monitoring progress against the success measures agreed.</p> <p>The targets set are extremely challenging. As independent Chair of both Boards I am continually impressed by the strong commitment and enthusiasm of those involved in driving and supporting improvement within the authority and within schools, although resources are increasingly stretched.</p>

<p>Achieving the ambitious targets agreed will require all those involved to 'move up a gear' and in relation to the SENDI area, partner organisations will need to give high priority to ensuring that they make their full contribution.</p>
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<p>I intend to report again to the Committee in autumn 2017.</p>
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Author: Frances Done

13th March 2017

Attachments; Appendix A Education Challenge Board January 2017 high level scorecard  
Appendix B SENDI Strategy 2016-2020



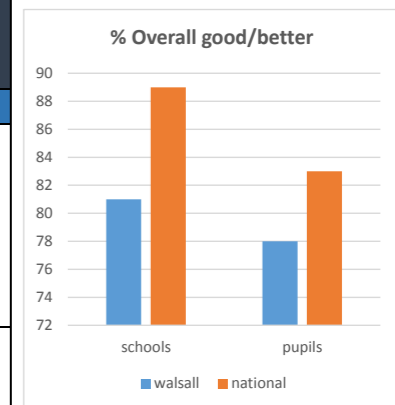
# Success Measures Scorecard 2016/19

Produced January 2017 - Version 1.0

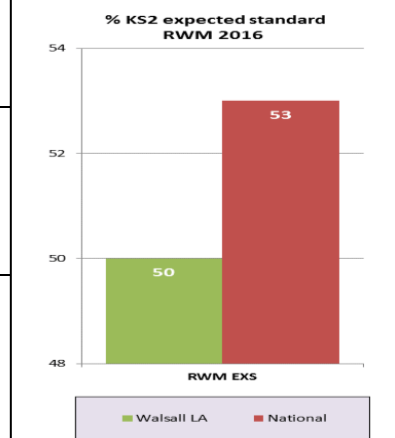
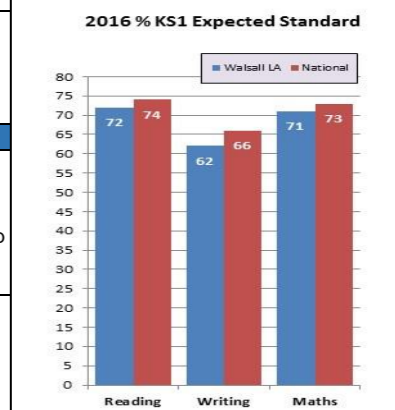
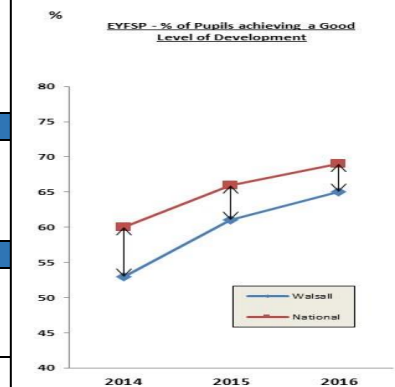
A	School Leadership
B	Ofsted Outcomes
C	Progress and Attainment
D	SEN Scorecard
E	CLA Scorecard
F	Higher Level Scorecard

## Priority F) Overview: Key measures of School Improvement Strategy (for detail see scorecards A), B) and C)

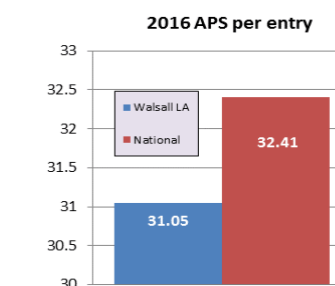
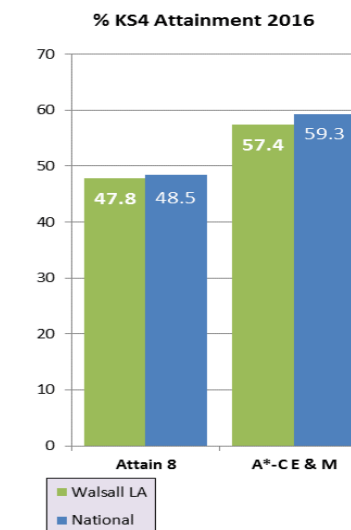
Measure	Actual Sept 16	Actual Nov 16	Actual Jan 17	Target	Longer term target	RAG	Comments
	% schools % pupils	% schools % pupils	% schools % pupils	% schools % pupils	% schools % pupils		
<b>Overall - By July 2019 the proportion of good or outstanding schools matches or exceeds the National average</b>							
WALSALL	77% schools 74% pupils	78% schools 76% pupils	81% schools 78% pupils	School - Gap with national < 6 % by July 2017 and below 3% by July 2018 Pupils - Gap with national 4% by July 2017 and in line with NA by 2018	School - 0% gap to national (2019) Pupils - above national (2019)		gap to national reduced for % schools and for % pupils
NATIONAL	88% schools 81% pupils	89% schools 83% pupils	89% schools 83% pupils	n/a	n/a	n/a	n/a



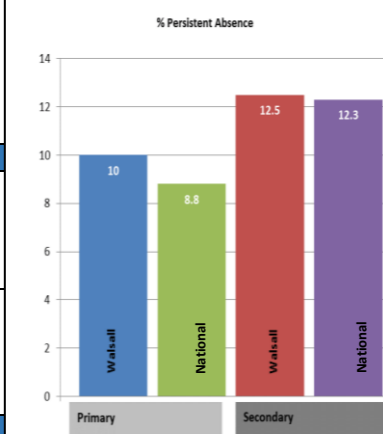
Measure	Actual Sept 16	Actual Nov 16	Actual Jan 17	Target	Longer term target	RAG	Comments
<b>EYFS - Achievement in EYFS matches or exceeds the national average by July 2019.</b>							
EYFS Good Level of Development	LA 65%, Nat 69% based on indicative 2016 data. SN TBC	LA 65%, Nat 69% SN 66%	as Nov 16	LA to achieve 68% by 2017 and National by 2018	Above National by July 2019		LA improved by 4%, national by 3% Gap to national reduced from 7% in 2014 to 4% in 2016
<b>Year 1 Phonics- Achievement in Y1 Phonics continues to exceed that in national/statistical neighbours</b>							
Achieving the expected standard	LA 82%, Nat 81% based on indicative 2016 data	LA 82%, Nat 81% SN 79%	as Nov 16	maintain above National 2017 & 2018	maintain above national by 2019		LA improved by 7% from 2014, 3% from 2015 Target Achieved: National average exceeded by 1%. Achieved 3 % higher than statistical neighbours
<b>KS1 - The proportion of pupils reaching the expected standard matches or exceeds the national average by July 2019</b>							
KS1 Reading - At or above the expected standard	LA 72%, Nat 74% based on indicative 2016 data. SN TBC	LA 72%, Nat 74% SN 71%	as Nov 16	To achieve in line with national (2017)	To achieve above national (2019)		Cannot compare new measures to previous years. Gap to national 2% . Walsall remains above statistical neighbours
KS1 Writing - At or above the expected standard	LA 62%, Nat 66% based on indicative 2016 data. SN TBC	LA 62%, Nat 65% SN 63%	as Nov 16	<2% gap to national (2017), in line with national in 2018	To achieve above national (2019)		Cannot compare new measures to previous years. Gap to national 3% . Below statistical neighbours by 1 percentage point
KS1 Maths - At or above the expected standard	LA 71%, Nat 73% based on indicative 2016 data. SN TBC	LA 71%, Nat 73% SN 70%	as Nov 16	In line with National in 2017, maintain in 2018	To achieve above national (2019)		Cannot compare new measures to previous years. Gap to national 2% . Walsall remains above statistical neighbours by 1 percentage point
<b>KS2 - The proportion of pupils reaching the expected standard matches or exceeds the national average by July 2019</b>							
KS2 Combined Reading, Writing and maths working at or above the expected standard	LA 46%, Nat 53% based on DfE SFR. Walsall based on full dataset is 50%. TBC Jan 2017	LA 46%, Nat 53% SN 49% based on DfE SFR. Walsall based on full dataset is 50%. TBC Jan 2017	LA 50%, Nat 53% SN 50%	Gap to national below 4% in 2017. In 2018 RWM=65% or in line with national	To achieve above national (2019)		Cannot compare new measures to previous years due to change in curriculum. Validated figures published by the DfE confirms 2016 results for Walsall as 50% which matches statistical neighbours. Gap to national now at 3% which equals the gap to national in 2015.
KS1-2 Reading progress score	LA -1.0 provisional. SN TBC	as Sep 16	LA -1.0 SN -0.4	Above national (>0) in 2017 and maintain in 2018	Maintain above National progress in 2019		A new progress measure introduced in 2016. A score of 0 means pupils on average, do about as well as those with similar prior attainment nationally. • A positive score means pupils on average do better • A negative score means pupils do worse Walsall achieved the target in writing progress, slightly below national in Maths. Biggest gap to national is in Reading progress.
KS1-2 Writing progress score	LA 0.6 provisional. SN TBC	as Sep 16	LA 0.7 SN 0.3				
KS1-2 Maths progress score	LA -0.3 provisional. SN TBC	as Sep 16	LA -0.2 SN 0.1				
KS2 Combined Reading, Writing and maths Gap between Disadvantaged/Non Disadvantaged pupils (National) working at or above the expected standard - <b>New Methodology Applied</b>	LA 24% gap provisional.	as Sep 16	LA 24% gap NAT 21%	DV gap to non DV (National) reduces by 50% (or by 13%) by July 2018	To achieve in line with national (2019)		Due to new curriculum in 2016, outcomes cannot be compared to previous years. Based on validated data 37% of disadvantaged pupils achieved the expected standard compared to 61% of Non disadvantaged pupils nationally. Gap to national is 3%. <b>This is a change to the previous methodology used for reporting.</b>
KS2 Combined Reading, Writing and maths Gap between SEN/All pupils Nationally working at or above the expected standard <b>New Methodology Applied</b>	LA 46.2% gap provisional.	as Sep 16	LA 44% gap NAT 39%	SEN gap to all pupils nationally reduces by 20% in 2017 and to no greater than 15% by 2018	To achieve in line with national (2019)		Due to new curriculum in 2016, outcomes cannot be compared to previous years. Based on validated SFR 9% of SEN pupils achieved the expected standard compared to 53% of ALL pupils nationally. Gap to national is 5%. <b>This is a change to the previous methodology used for reporting.</b>



Measure	Actual Sept 16	Actual Nov 16	Actual Jan 17	Target	Longer term target	RAG	Comments
<b>KS4 - By July 2018 LA average attainment will be at least in line with statistical neighbours and/or national average</b>							
KS4 Achieving a good GCSE in both English and in Maths	LA 58.1% highly provisional. NAT TBC	LA 57.1% NAT 58.7% SN 57.7%	LA 57.4% NAT 59.3% SN 58.2%	0 gap to national (2018)	To achieve above national (2018)		LA improved 6.14 from 2014. Gap to national closed from 3.1% in 2015 to 1.9% in 2016
KS4 Attainment 8 Score ( new measure to be reported from 2016)	LA 46.2% highly provisional. NAT TBC	LA 47.6% NAT 48.2% SN 47.7%	LA 47.8% NAT 48.5% SN 47.9%	n/a	To achieve above national (2018)		New measure for 2016. Gap to national 0.7% . Walsall in line with SN
KS4 Progress 8 Score	LA -0.07 highly provisional. SN TBC	LA -0.24 SN -0.12	as Nov 16	n/a	To achieve above national (2018)		no historical data as this is a new measure from 2016 onwards. Data for 2015 reflects one school who opted into P8 early. National progress score is zero, A score of 0 means pupils on average, do about as well as those with similar prior attainment nationally. • A positive score means pupils on average do better • A negative score means pupils do worse. Walsall is below this national average by 0.24. This is double the SN Progress 8 score of -0.12. Ragged red due to gap to comparators
KS4 -% of pupils achieving a threshold measure (grade C or above in 2016) in English and mathematics - Disadvantaged/Non Disadvantaged Gap	available in Jan/Feb 17	LA GAP 29.3% NAT & SN TBC	LA GAP 29.4% NAT 27.5% & SN 28.3%	reduce baseline gap by a third	0 gap to national (2018)		Latest % gap in line with previous years. Gap to national 1.9%
KS4 -% of pupils achieving a threshold measure (grade C or above in 2016) in English and mathematics - SEN/Non SEN Gap	available in Jan/Feb 17	LA GAP 46.9% NAT & SN TBC	LA GAP 47% NAT 45.5%	reduce baseline gap by a third	0 gap to national (2018)		Latest % gap in line with previous years. Gap to national 1.5%. SN data not available due to the supression of DfE statistics
<b>KS5 - By July 2018 LA average attainment will be at least in line with statistical neighbours and/or national average</b>							
KS 5 APS per entry - Level 3 students	LA 31.0 NAT & SN TBC	LA 30.83 NAT 32.23 SN 30.76	LA 31.05 NAT 32.41 SN 31.10	0 gap to national (2016)	To achieve above national (2018)		<b>The points system has changed significantly in 2016.</b> Changes in the A Level points system in 2016 means that average point score data can no longer be compared historically. Walsall are slightly below SN and below national by 1.4 points. Walsall data is based on schools only and does not include Walsall College
KS5 Students remaining in an education destination (Reported a year behind)	2014/15 available Jan/Feb 17	2014/15 available Jan/Feb 17	2014/15 data LA 69% Nat 65%	maintain	To achieve above national (2018)		Walsall outcome for 14-15 has declined by 3% from 13-14 however Walsall remain above national. This is based on KS5 students who left in 2014 and remained in a sustained education destination. Data is based on mainstream schools and colleges. 15-16 outcomes not available until Jan 18
<b>Persistent absence to meet or be better than the national average by July 2018</b>							
Primary % Persistent Absence (10% methodology)	LA 9.72% - Proxy figure from Capita One.	LA 10.0% NAT 8.8% - Combined Autumn & Spring 15/16	LA 10.0% NAT 8.8% - Combined Autumn & Spring 15/16	reduce baseline gap by a third	0 gap to national (2019)		Latest data is taken from DfE SFR published in October 16 which combines absence figures from Autumn and Spring terms in 2015/16. PA has decreased by 0.16% from the previous year and the gap to national has declined from 2.2% to 1.2%. Full year release available in March 2017
Secondary % Persistent Absence (10% methodology)	LA 18.47% - Proxy figure from Capita One.	LA 12.5 NAT 12.3% - Combined Autumn & Spring 15/16	LA 12.5 NAT 12.3% - Combined Autumn & Spring 15/16	reduce baseline gap by a third	0 gap to national (2019)		Latest data is taken from DfE SFR published in October 16 which combines absence figures from Autumn and Spring terms in 2015/16. PA has decreased by 1.7% from the previous year and gap to national has declined from 0.4% to 0.2%. Full year release available in March 2017.
<b>Exclusions to meet or be better than the national average by July 2018</b>							
Primary % Permanent Exclusions	LA 0.07% - (16) Proxy Figure from Capita One. TBC July 17	LA 0.1% (22) Proxy figure from Capita one	LA 0.1% (22) Proxy figure from Capita one	reduce baseline gap by a third	0 gap to national (2018)		Figures are based on a rolling 12 month period Jan to Dec 16 and is proxy data from Capita one,. Latest figure shows permanent exclusions have increased. 2016 figure still provisional to be confirmed in July 2017
Secondary % Permanent Exclusions	LA 0.65% - (100) Proxy figure from Capita One. TBC July 17	LA 0.4% (64) Proxy figure from Capita one	LA 0.3% (53) Proxy figure from Capita one	reduce baseline gap by a third	0 gap to national (2018)		Figures are based on a rolling 12 month period Jan to Dec 16 and is proxy data from Capita one,. Latest figure shows permanent exclusions have increased from the validated 2015 outcome. 2016 figure still provisional to be confirmed in July 2017.
<b>NEET to continue to be lower than the national average by July 2018.</b>							
% young people not in education, employment or training.	LA 4.0% - July 16 figure	latest figures tbc	LA 1.3% - Nov 16	maintain	positive gap to national (2018)		currently achieved, maintain



**Absence charts reflects latest 15-16 figures from DfE - provisional only. based on combined autumn and spring terms**



# SEND and Inclusion Strategy

2016 - 2020

## CONTENTS

<b>Executive Summary.....</b>	<b>2.0</b>
<b>Purpose and Scope of Strategy.....</b>	<b>2.0</b>
<b>Our vision.....</b>	<b>2.0</b>
<b>Key Challenges.....</b>	<b>3.0</b>
<b>Our Key Priority.....</b>	<b>3.0</b>
<b>Definition of SEND.....</b>	<b>4.0</b>
<b>Policy Context: Local and National.....</b>	<b>5.0</b>
<b>Specialist Educational Provision in Walsall.....</b>	<b>7.0</b>
<b>Attainment of Children and Young People with SEND.....</b>	<b>9.0</b>
<b>Services Supporting Special Educational Needs, Disabilities, and Inclusion in Walsall.....</b>	<b>10.0</b>
<b>SEND Funding.....</b>	<b>21.0</b>
<b>SEN Transport.....</b>	<b>21.0</b>
<b>Action Plan.....</b>	<b>22.0</b>
<b>Appendix 1. Success Measures.....</b>	<b>28.0</b>

# **Walsall Strategy for Children and Young People with Special Educational Needs and Disability (SEND) 0 to 25**

(2016 – 2020)

## **1.0 Executive Summary**

This strategy sets out the vision, key priorities and broad range of provision and services that will support children and young people with special educational needs and disabilities. The strategy brings together key areas of service development for children and young people with SEND and Inclusion Strategy (2015 – 2018).

## **1.1 Purpose and Scope of the Strategy**

The strategy sets out the vision and priorities for Special Educational Needs and Inclusion for the next four years for all those who live and work in Walsall and use our services. Our key priority is to drive up educational standards and to improve outcome for all children particularly those with special educational needs and disabilities. The strategy also describes the services that Walsall Council and its key partners provide and commission for Children and Young People with Special Educational Needs and Disabilities and their parents and carers.

The strategy is also for staff and partners, all schools and settings, the wider public and all organisations that have a role to play in supporting children and young people up to the age of 25 years. This strategy incorporates the Walsall Inclusion Strategy 2015-2018 and provides greater ambition to meet the needs of all children and young people with Special Educational Needs and Disabilities.

The strategy sets out how our key priority to ensure outcomes for children and young people with special educational needs and disabilities are good or better, how this will be supported over the next three years and how these outcomes are going to be measured.

### **Our Vision**

In Walsall our vision for children and young people with special educational needs and disabilities is the same as for all children and young people – that they achieve well in their early years, at school and in further /higher education, are well cared for, have their health needs met, live happy and fulfilled lives and have choice and control over the key decisions that affect them. Our vision and priorities underpins the work we all have to do in improving attainment and progress for all our children and young people.

All education providers in Walsall will work in partnership to achieve a culture of inclusion by creating a secure, accepting, collaborating learning community where everyone is safe, valued, appreciated and accepted. Improving the achievement of children is the motivation and driving force for everything the school and setting does and that every teacher is a teacher for special educational needs. Paramount to all this is ensuring that the voice of the child and young person is listened to and responded to.

## Key Challenges

- The Children and Families Act 2014 and its accompanying Code of Practice sets out a new system for the identification, assessment and delivery framework for those children and young people who have special educational need and disabilities.
- The act now provides for all children and young people from 0 to 25 years.
- The new Local Area Inspection introduced in May 2016 will examine how effectively key partners work together in identifying children and young people with SEND, how these needs are met and assessed and how effectively outcomes are improved.
- The Children and Young People's Partnership Board supported by the Special Educational Needs and Inclusion (SENDI) Challenge Board has high ambitions that the outcomes for children and young people are good or better in Walsall.
- That appropriate provision and support is in place to meet the broad range of needs.
- That provision is affordable and that services work together in order to meet increasing demand for support.
- To ensure that children and young people with disabilities are treated equally as set out in The Equality Act 2010.

## Our Key Priority

1. **Ensure outcomes for children and young people with special educational needs and disabilities are good or better.** We need to work with all early years' settings, schools and other education providers to drive up standards in attainment and progress. We need to challenge both services and schools where there are identified gaps in achievement and outcomes by:
  - i) **Commissioning high quality specialist provision that meets the needs of children and young people.** As a local area we need to reconsider our current specialist provision provided by our special schools and mainstream schools to ensure that, as commissioners, we are working with our providers and many partners that appropriate provision is meeting the current and future needs of all children and young people who have special educational needs and disabilities. Health and social care as well as the education sector will play a major role in providing those services and support needed within a commissioning framework.
  - ii) **Developing SEND pathway of school to school support.** To promote and develop specialist support and advice from special schools to mainstream schools across a range of special needs through service level agreements and other mechanisms to improve outcomes for pupils with SEND.
  - iii) **Strengthening and improving our co-production with children and young people, parents and carers.** There is an identified need to ensure good engagement with parents and carers particularly around supporting policy development, co-production and to ensure that the voice of children and young people is heard.
  - iv) **Continuing to ensure that the Local Offer provides the fullest amount of guidance and information.** To work with key partners and families to ensure a wider take up of the Local Offer and to ensure greater accessibility and access to information and advice for all including children and young people themselves.
  - v) **Developing an all age disability service to secure the best outcomes for children and young people at key transition stages.** To provide a seamless

transition from adolescence to adulthood particularly for those young people who may require ongoing support from adult services.

- vi) **To continue to support and develop our policies to ensure all children and young people are in education, employment or training.** To ensure that all children and young people especially those with identified needs are provided for and included in all our settings particularly those who are missing education, vulnerable to exclusion and non- attendance or are educated at home. To ensure that the numbers of young people not in education, employment and training continues to reduce.
- vii) **Updating the Council's Accessibility Strategy.** Council's must publish their Accessibility Strategy to inform how children and young people can access schools and the curriculum.
- viii) **Developing Personal Budget Guidelines** which will enable children and young people and parents to have a greater control over meeting their particular needs. Personal budgets provide for support from education, social care and health.
- ix) **Have in place timely and high quality Education, Health and Care Plans.** Improve joint working processes across services and families in compliance with the Children and Families Act 2014 in the agreement and completion of Education, Health and Care Plans.
- x) **Timely data** shared, understood and acted on at the earliest point to ensure the difference for vulnerable children diminishes. This proactive approach to data interrogation will enable the local area to plan for future needs taking into account current need and future trends.

## 2.0 Definition of SEN

Under the Children and families Act 2014 and the 1996 Education Act a child or young person has special educational needs if they have a learning difficulty or disability which requires special educational provision to be made for them.

A child or young person has a learning difficulty or disability if they:

- Have a significantly greater difficulty in learning than the majority of others of the same age;
- Have a disability which prevents or hinders them from making use of facilities of a kind generally provided for others of the same age in mainstream schools or mainstream post 16 settings; or
- Are under compulsory school age and fall within one of the definitions above or would do so if special education provision was not made for them.

Special Educational Provision means:

- For children of 2 years or over, educational provision additional to, or different from, the educational provision made generally for children of their age in schools maintained by the local authority, other than special schools, in the area; or
- For children under 2, education provision of any kind.

The Special Educational Needs and Disability Code of Practice 2015 sets out the four broad areas of need. They are:

- Communication and Interaction
- Cognition and Learning
- Social, Emotional and Mental health Difficulties and
- Sensory and/or Physical Need

### 3.0 Policy Context

#### 3.1 National

The Children and Families Act 2014 represents the biggest shake up of the special educational system for 30 years. The main changes are:

- The introduction of a single assessment process that may involve the some of the services referenced in this strategy and others not referred to here. The single assessment is designed to involve co-production between services and agencies and parents/carers. It is also designed to involve children and young people too. The Act puts families at the centre of the new system.
- A new age range is introduced: 0 to 25 years and statements of special education needs and learning disability assessments have now been replaced by education, health and care plans.
- The need for services to reform to work in a more joined up way to ensure greater value for money and avoid unnecessary duplication of information which parents and carers provide. This particularly refers to services across education, social care, health, housing and safeguarding.
- A new statutory duty has been introduced to publish a local offer. The local offer in Walsall was designed with parents but it is now recognised that it needs further work to improve accessibility and the information it provides.
- There is a much stronger focus on the transitional arrangements that must be put in place at key transition points in a child's life with particular emphasis on transition to adulthood.
- The introduction of personal budgets for some services which is intended to give families a greater say in how a child or young person is supported.

#### 3.2 Local: Prevalence of SEND in Walsall

The needs of most children with special educational needs are met in mainstream schools. In January 2016, there were 51,758 pupils on roll in Walsall schools. Of these, 7,849 pupils or 15.2% had some form of special educational need. Within that total, 1,376 had a statement of special educational need while 422 had an Education Health and Care plan. 1,798 pupils or 3.5% of the total pupils on roll had a statement or EHC plan.

The table below shows the numbers of pupils on roll in Walsall with or without SEN by Key Stage. The numbers and percentages receiving SEN support (K) is shown as are the numbers with statements (S) or Education Health and Care plans (E).

Pupils with/without SEN by Key Stage, Walsall schools, January 2016

Key Stage	Number on Roll	K:SEN support	S: Statement	E: EHC plan	Total SEN	No SEN
EYFS	8,300	526	36	80	642	7,658

KS1	7,641	924	147	48	1,119	6,522
KS2	14,933	2,194	326	149	2,669	12,264
KS3	10,642	1,465	395	64	1,924	8,718
KS4	6,896	811	371	23	1,205	5,691
KS5	3,346	131	101	58	290	3,056
Total	51,758	6,051	1376	422	7849	43,909
%	100.0	11.7	2.7	0.8	15.2	84.

Source: Schools census January 2016

The table shows:

- 7,849 pupils in Walsall schools have some form of special educational need, or 15.2% of the total number of pupils;
- 1,798 pupils in Walsall schools have a statement of special educational needs or an Education Health & Care plan. That is 3.5% of the total number on roll. The percentage of pupils in England with a statement of special educational needs or an Education Health & Care plan is 2.8% (236,805), so Walsall is above average in that respect;
- 6,051 pupils in Walsall schools are on SEN support, or 11.7% of the total number on roll. The equivalent figure for England is 11.6% (991,980), so Walsall is at the average for SEN support;
- The most common primary type of need in Walsall within Total SEN is MLD (Moderate Learning Difficulty) at 38.4%; followed by SLCN (Speech, Language and Communication Needs) at 18.2%, then SEMH (Social, Emotional and Mental Health) at 12.3%.

Of the 7,849 pupils with some form of SEN, the largest category was MLD (Moderate Learning Difficulty) representing 38.4% of SEN pupils, followed by SLCN (Speech, Language and Communication Needs) at 18.2%; then SEMH (Social, Emotional and Mental Health needs) at 12.3%. Like many other local authorities, Walsall has seen an increase in the number of diagnoses of ASD (Autistic Spectrum Disorder) in recent years. There are now over 600 children with ASD in Walsall schools, 7.7% of the total number of pupils with SEN in schools.

- The numbers of pupils with Moderate Learning Difficulty in Walsall, both with statements / EHCPs where they represent 25.2% of the number with statements (twice the national average) and with SEN support where nearly half (45.8%) the pupils are MLD, significantly above the national average of 26.8%;
- The second highest group with statements are those with SLD, 200 pupils or 16.8% of the total and about 4 percentage points above the average;
- The third largest group with statements are those with ASD, 14.6% of the Walsall total, though this is a good 10 percentage points less than the average for England;



- The fourth highest group with statements are those pupils with SEMH – 130 with statements or 10.9% of the total compared with the average for England of 12.3%. Over 600 young people with SEMH are on SEN support, 11.7% of the Walsall SEN support total;
- 128 or 10.8% of pupils with statements have SLCN in Walsall; that is 3 percentage points below the national average. 937 pupils with SLCN have SEN support, 18.0% of the SEN support total in Walsall and just below the average for England.

#### 4.0 Specialist provision in Walsall

The table below shows specialist provision in Walsall at 7 special schools, 9 Additional Resourced Provisions and in Alternative Provision. These are places that were funded by Walsall Council or the Education Funding Agency in 2015/16.

There are 836 3-16 age range places funded plus 85 post 16 places. The numbers on roll (NOR) at the special schools and the PRU are shown as at January 2016; these are taken from the School Census January 2016. The pupils in the ARPs attached to mainstream schools will appear in those schools' census information.

The schools' designations may not accurately or fully reflect the range of special needs that they meet, but it is clear that the bulk of Walsall's special schools are focussed on Cognition and Learning needs. The three relatively large special schools (each of 120 or more places up to age 16) Castle, Jane Lane and Mary Elliot are described as 'MLD and additional', 'Cognition and Learning Difficulties' and just 'Learning Difficulties' respectively. The two smaller special schools' designations imply the more severe end of cognition and learning with 'SLD,PMLD, Medical' for Oakwood school and just 'Complex need' for Old Hall. Relationship of the two primary schools with Mary Elliott for complex needs.

'BESD' (now renamed Social, Emotional and Mental Health or SEMH) provision is at two special schools, Phoenix for primary age and Elmwood for secondary age pupils, with 88 funded places in total.

In terms of standards, all Walsall's special schools are Good or Outstanding, two are Outstanding.

There are 9 Additionally Resourced provisions in Walsall, offering 105 places in all.

- AS/SLCN – there are two primary and two secondary ARPs with 42 places;
- AS- there is also an ARP that is attached to the short stay school with 12 places. So, 54 ASD places in all;
- SpLD – two secondary age ARPs offering 23 places;
- Sensory – one primary age ARP;
- PD – 1 primary, 1 secondary ARPs with 22 places.

<b>School Name</b>		
<b>Special schools</b>		<b>Age range</b>
Castle Business and Enterprise College	MLD + additional	7-19
Elmwood School	EBD	11-16
The Jane Lane School, A College for Cognition & Learning	Cognition & LD	7-19
Mary Elliot School	Learning Difficulties	11-19
Oakwood School	SLD PMLD Med	3-11
Old Hall School	Complex need	3-11
Phoenix Primary EBD School	EBD	4-11
<b>Total</b>		
<b>Additional Resourced Provision (ARP)</b>		<b>Age Range (ARP)</b>
Bentley West Primary	Sensory	4-11
Busill Jones Primary	AS/SLCN	4-11
Rushall Primary	AS/SLCN	4-11
Lindens Primary	PD	4-11
Pool Hayes Arts & Community Secondary	AS/SLCN	11-18
St Francis of Assisi Catholic Secondary	SpLD	11-18
Shire Oak Academy (Secondary)	SpLD	11-18
Streetly Academy (Secondary)	PD	11-18
Shepwell ARP	AS	11-16
<b>Alternative provision</b>		
New Leaf Centre, Rushall (PRU)		11-16
Shepwell Centre Short Stay		5-16

School (PRU-Medical)		
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The numbers and percentage of children with special educational needs has fallen in Walsall. Over the past three years, the numbers of pupils identified as having special educational needs (with or without a statement or plan) in Walsall schools has declined from 8,248 (16.9% of the school population) to 7,849 (15.2%) pupils.

This is occurring nationally too. From 2014/15, when the revised code of practice and the Children and Families Act came into force, the School Action and School Action Plus categories were combined to form the SEN Support category. This led to schools reviewing the need for SEN support. In Walsall, 6,051 pupils or 11.7% of all pupils were identified as having special educational needs without a statement or plan. This compares with the figure for England of 11.6% of all pupils.

In Walsall, the number and percentage of children with a statement or EHCP increased from 1,614 (3.3%) in 2013 to 1,798 (3.5%) in 2016. 1,376 pupils had a statement, 422 had a EHC plan. In England, 236,805 children have statements or EHC plans. This is equivalent to 2.8% of the total pupil population, a figure that has remained constant since 2007.

As part of our 5 year pupil place planning strategy, we are looking at how many specialist places and of what type are needed to be commissioned across Walsall, mapped against current provision.

The commissioning of special school places is looking at the number of providers in Walsall and elsewhere, their designation, type of special need provided for and sufficiency and suitability of places. Underpinning this work we will have a clear focus on quality of provision, teaching and learning.

## **5.0 Attainment of Children and Young People with SEND**

The percentage of pupils with SEN who have achieved a Good Level of Development within the early years profile over the past 12 months has declined 3% from 15% in 2015 to 12% in 2016. The outcomes for the phonics screening test in year 1 have shown a three year improvement for children with SEN, with the percentage of pupils achieving the expected standard rising from 29% in 2014 to 41% in 2016. National results for SEN pupils will be made available by the DfE later in the year.

With national curriculum changes for 2016 the DfE have introduced a new assessment measure for outcomes at KS1 and KS2. The new measure is "working at the expected standard. Due to these changes that the DfE have implemented no comparisons can now be made to pupil results from previous years. Within KS1 the percentage of SEN pupils in reading that have achieved the expected standard was 23%. This is 7% below the national of 30% for 2016. For writing the attainment gap to national was 6%, with 14% of SEN pupils in Walsall making the expected standard. In maths 24% of pupils achieved the expected standard this year, but the gap to national was still 6%. With the attainment gap to national around 6 to 7 percentage points across all three subjects at KS1

The DfE have not at present released any national comparator data for progress of SEN pupils at KS2. Within Walsall SEN children make the least progress in reading and the most

in mathematics, although both levels of progress are below the national average for all pupils.

At KS4 the attainment GAP between SEN and Non-SEN for their attainment 8 score was 22.5 points. The progress of SEN students compared to non-SEN students was -0.47 points below.

## **6.0 Services supporting special educational needs and inclusion.**

There are a range of services and support for children and young people with SEND and their families as well as schools and settings. The following is not a listing of all services and support provided but those services supporting those with special educational needs and ensuring the fullest inclusion in education.

### **Education Psychology Service**

The service comprises educational psychologists and trainee educational psychologists. Educational psychologists are fully qualified applied psychologists who specialise in work with children and young people 0-25 years, families and schools and settings. All educational psychologists who work for the service are registered with the Health and Care Professions Council. Trainee educational psychologists also work in the service; they are graduate psychologists experienced in working with children and young people who are completing professional doctoral training. They work under the supervision of qualified and experienced educational psychologists.

Walsall educational psychology service provides psychological services for children and young people aged 0-25 years. This means using psychological theory, research and approaches to understand and advise on complex situations with the aim of supporting the development, learning and well-being of children and young people. Educational psychologists also apply psychology to help understand how schools and settings, families and organisations work and how they can support positive outcomes for children and also how change can be managed effectively. Educational psychologists work with children and young people with special educational needs but also with those who have not been identified in this way but where consultation is required. The educational psychology service targets work to individual children/young people and their families, to groups and to organisations. The service uses consultation to help develop an understanding of the child or young person in context. This approach seeks to actively engage the child/young person, parents and carers and other key adults in developing solutions.

Additionally, educational psychologists contribute assessment and psychological advice as part of the statutory education, health and care (EHC) needs assessment process.

Walsall educational psychology service also provides critical incident support and guidance to schools and settings at times of crisis.

Walsall Council commissions the educational psychology service to provide statutory psychological advice (based on assessment) to contribute to the education, health and care needs assessment process. This commissioned work commences once education, health and care needs assessment has been agreed by the SEND panel. Consultation from Walsall educational psychology service is accessed by schools, settings and organisations primarily through a traded service level agreement.

## **SEN Advisory Support Team**

The team comprises of sensory support staff (Teachers of the Deaf, Teachers of the Visually Impaired, Specialist learning Support Practitioners); Specific Learning Difficulties Teachers, Early years SEN Teachers and Specialist learning Support practitioners.

The Advisory Support Team engages with schools and settings to remove barriers to learning for children and young people with SEND. The team also provides effective challenge and support to schools and settings in relation to the principles of partnership, inclusion and multi-agency working.

The team also provides advice, guidance and training to schools, settings and other agency partners in relation to the SEND Code of Practice 2015 including implementation of national and legislative requirements.

## **SEN Statutory Assessment Team**

This team is responsible for the assessment of children and young people who may require an Education, Health and Care Plan (EHCPs). They are required to collate evidence from across a number of different agencies including health and social care in the completion of the EHCPs. In the consideration of whether an assessment is carried out or whether an EHCP is to be agreed the team involve head teachers and other relevant professionals in the decision making process. The team also attend annual reviews and multi-agency meetings for complex needs.

## **Social Care**

The service works with children and young people and their families who are in need of help and protection or who are looked after and in need of permanence. For those children and young people who have special educational needs or disability who also require social care support is available from specialist teams.

## **Children with Disabilities Team**

The Children with Disabilities Team offers a social work assessment and care planning service to children and young people aged 0-18 years who have a 'permanent and substantial' (Equality Act 2010) disability and who live within the Walsall Local Authority Area.

The majority of children in Walsall who require services will receive them through universal provision within their local community. The same should be true of any child with a disability. Only when it has been identified, via the Multi Agency Safeguarding Hub (MASH) that the impact of a permanent and substantial disability on the child's life is too great to be addressed by universal provision or targeted Early Help provision, should a referral for an assessment be made to the Children with Disabilities Team.

A Child has a disability if:

- they have a physical or mental impairment and
- the impairment has a substantial and long-term adverse effect on their ability to perform normal day-to-day activities

A child or young person is eligible for a service from the Children with Disabilities team if he or she has:

- A profound or severe learning disability; those children who tend to need significant support with most daily tasks.
- A profound and multiple learning disability; the child has more than one disability with the most significant being a learning disability.
- Severe physical disabilities.
- Severe developmental delay in motor and / or cognitive functioning.
- Autistic spectrum where this has a significant impact on the child: persistent ongoing emotional and / or behavioural difficulties.
- Severe sensory impairment (registered blind / profoundly deaf).
- Complex and severe health problems that arise from disability, that are life threatening, degenerative or organic resulting in severe disability.
- Mental illness only if this is within the context of a diagnosed disability.

Where the matrix assessment tool identifies that a child does not meet the criteria for a service from the Children with Disabilities team the threshold may be met for Early Help support or a service from the Safeguarding Family Support Service.

The Children with Disabilities Team will offer advice and guidance to the Early Help Services and any other children's social work team where they are managing a case and there is a child with a disability in the family.

The work of the team links in with the support provided by the Walsall Healthcare NHS Trust.

### **Short Breaks Services**

Short Breaks services support children with disabilities and their families by providing opportunities to spend time away from their primary carer. A short break can be as short as a half hour session, a number of hours in a group setting, an overnight stay or it can last a few days. The local authority has a legal duty to maintain short breaks. This is a range of evening, weekend and school holiday experiences, including daytime care in or outside the child's home. Universal breaks available to all disabled children are also funded in educational and leisure facilities.

Within Walsall, short breaks are accessed via both the Early Help Service and the Children with Disabilities Social Work team. Resource allocation is administered by the Short Breaks Panel that is chaired by the Joint Disability Commissioner and consists of a multi-agency panel of social work manager, special school head teacher, SEN Manager, disability nurse etc. The aim of the panel is to provide cross-agency consensus on resource allocation. The Early Help service also distributes a smaller range of short breaks.

There are two Short Break pathways:

- a. Following a social work or Early Help assessment a case is presented to the Short Break panel where an allocation of a range of support packages is made.
- b. Commissioned term-time and/ school holiday activity Short Breaks - access is through the Short Break Panel (term-time groups) or Early Help / Family Information Service (play schemes).

## **Behaviour Support**

The Integrated Behaviour Support Service is a team within the Access Team and they support primary schools to manage behaviour. The team is made up of Specialist Teachers, Integrated Behaviour Support Workers and Clinical Nurse Specialists seconded from CAMHS: The team is led by a Specialist Advisory Teacher. Each school has allocated Teacher and Support Worker sessions which are used to plan interventions across all aspects of behaviour management. The service offers a range of training; bespoke intervention; work with parents; support with policy, in addition, they support and jointly plan a range of strategies to help schools manage high risk children and will work with other agencies as deemed appropriate to support difficult cases. Referrals to the Clinical Nurse Specialists are made through the Specialist Teachers when investigation is required to establish whether mental health is a causal factor for behaviour. The Clinical Nurse Specialists are able to refer cases into CAHMS for clinical intervention when necessary.

## **School Exclusions**

The Local Authority has a statutory responsibility to ensure school exclusions are handled within statutory guidance and this function is led by a Specialist Officer within the Access Team. The Specialist Officer will consider each exclusion raised by a head teacher and will challenge and offer advice and guidance in respect of each case. In addition the Officer will advise parents of process, their right of appeal, to obtain independent legal advice and specialist SEND representation. In cases where a child has a Statement of Educational Needs or Education Health & Care Plan, the school will be advised to call a review at the earliest time. In all cases, head teachers will be asked to consider whether there are any indications of SEND and be advised to investigate and support rather than permanently exclude a child. In addition the Specialist Officer will protect from challenge by advising all head teachers to consider the Disability Discrimination Act 1995 and the Equality Act 2010.

The Specialist Officer also has the LA overview for children on roll at school but on reduced timetables. Reasons for reducing a time table is very often related to behaviour and organised as a strategy for preventing a permanent exclusion. However statutory guidance suggests this strategy is used for short periods and kept under review. The Officer makes enquiries with schools that are using this strategy to ensure there is compliance with the guidance.

## **Education Welfare Service**

The Education Welfare Service carries out a range of interventions in respect of school attendance including all statutory measures. In addition this service is responsible for issuing licences for child employment, child entertainment and Chaperones. The service offers a traded service, to help school's manage attendance through a graduated process from an early intervention targeted approach to legal work. The officers are mindful of children with SEND and other vulnerabilities when planning their work, as it is recognised the Children who have additional provision because of their SEND are disadvantaged when absent. Officers work with a range of other professionals as required and make decisions about case progression through a supervised process.

## **Elective Home Education (EHE)**

The Elective Home Education Service carries out the LA statutory responsibilities in respect of Elective Home Education, namely to be satisfied that parents are providing a suitable

education for their child. There is one full time equivalent Specialist Officer split between two officers who are experienced teachers, each with their own specialist knowledge of either Primary or Secondary phases. When parents of a child on roll at a Special School setting, have decided to home educate, the Local Authority will decide whether this is appropriate. This responsibility lies with the officers of the SEND service who know the circumstances of the case and can make an informed decision. If sanctioned by the LA, the Specialist Officers for EHE will support the SEND officers when the statement or EHCP is reviewed and will communicate after each contact with the family when necessary. Children with statements or EHCPs who are on the roll at mainstream schools and academies do not require this permission from the LA. However, the Specialist Officers communicate as necessary with the SEND service and can support them when reviews are due.

The EHE service has a number of supportive measures in place to engage families and to provide educational advice in respect of their education plans. However, when the LA is not satisfied a suitable is being provided they will advise that the child needs to be in school or other formal education setting. Some cases are referred to School Admissions and Planning as Children Missing Education (CME), so that a school place can be sought or prompting a referral for a School Attendance Order.

## **Early Help**

The Early Help strategy sets out the partnership commitment to provide help at the earliest possible point in a child's life to ensure all children can be Safe, Happy and Learning Well.

The Early Help provision is based on 3 key principles developed and agreed with partners:

- is everyone's business – at first point of contact all agencies are committed to responding to the needs of families whether that need falls within their immediate area of expertise or not
- is about empowerment – families are central to defining and addressing the problems they face and are equal partners in the process. The voice of the child will be sought at all stages with appropriate respect for age, developmental stage and levels of understanding
- is about intervention at the earliest stage of identification

The Early Help Assessment (EHA) is our standardised approach to assessing children and young people's needs and deciding how they should be met.

The EHA is a key element of our strategy to delivering more effective early intervention and prevention and is a tool for the identification of children and young people considered to be in need of additional multi agency support.

Children with SEND are an important target group within the delivery of Early Help in ensuring that all agencies identify need early and we have a robust plan of support so they can meet their full potential.

There are a number of areas within Early Help that can help support children with SEND and their families including:

- The four 0-19 Family Support Locality Teams: these are multi disciplinary teams based within our 4 localities providing effective and timely whole family working and to ensure better, evidence informed, help was available to those children and



families who needed it most. Menu of interventions delivered by the team include evidence based parenting (including disability specialist programmes) programmes, Behaviour support interventions, interventions around sexualised behaviour and risky relationships, support around Domestic Abuse, etc. The teams work with children and their families in their home, community and in schools. Each of the teams has Family Support Practitioners with a SEND specialism. The Early help Review completed in July 2016 demonstrated that 19.8% of the children the teams work with have a need related to SEND.

- Early Help Locality Panels – They are a multi agency panel that enable a joined up approach to early identification of children, young people and families in need of Early Help, joint decision making and the timely and effective delivery of support. Partners include Schools, Children’s Services, Voluntary Sector, Police, School Health, Health Visiting, CAMHS, Fire Service, Housing Providers, Money Home Job and Area Partnerships. The panel meets every Wednesday morning rotating across the 4 localities.

### **Early Years School Ready Service**

The Early Years Schools Ready Service, part of the Walsall Early Years Partnership, has a strategy which underpins the development of all children in the promotion and support for personal, social and Emotional skills, physical health and wellbeing, communication, speech and language, eagerness to learn and curiosity and imagination and creativity.

For those children who do not progress in line with the majority of their age practitioners across the Early Years Partnership support parents and carers to ensure any barriers that may be inhibiting progress are identified and overcome so that children have plenty of opportunities to develop. Many children, with the right support will catch up to their age related expectation. Children with complex special educational needs or disabilities can make progress in a different way to the majority.

All professionals working with children 0 – 5 and their families are considered to be part of the early years workforce. Primarily the services are delivered by: midwives, health visitors, school nurses, family information services, voluntary organisations, childminders, day care and school practitioners. Other services linked to identified need have other professionals to include, speech and language therapists, mental health specialists, family support workers, specialist teachers, educational psychologists, occupational and physiotherapists.

### **Virtual School for Looked After Children and Young People**

Walsall’s Virtual School for Looked After Children and young people is a small multi-disciplinary team working to raise the educational attainment and attendance of looked after children and care leavers in the care of Walsall Council.

The Virtual School is not a teaching institution. It is “a model by which the LA provides services and support for the education of looked after children and a constructive challenge to those providing the services”. It works closely and in partnership with Schools, Health and Social Care so that there is a holistic and comprehensive approach to the support of Looked After Children in all areas of their lives.

The Overall aim of the Virtual School is to help produce better educational outcomes, and enhanced personal and social development of all Walsall's looked after children by:

- Ensuring all looked after children have a good quality Personal education Plan (PEP)
- Working with schools, social workers and carers to Improve attendance and reduce exclusions
- Providing support and challenge to designated teachers to enhance the educational outcomes of looked after children
- Providing training to designated teachers, social workers and foster carers
- Overseeing the Pupil Premium grant to ensure the funding is used effectively to raise the attainment and aspirations of looked after children

## **7. Health Services for Children and Young people with SEND**

### **Child and Adolescent Mental health Service (CAMHS)**

Learning disabilities Child and Adolescent Mental Health Service is a specialist team within the generic CAMHS team and is based at Canalside in Walsall.

The team is a multi disciplinary made up of professionals who specialise in meeting the psychological, emotional and mental health needs of children and young people with a learning disability and consists of:

- Learning disabilities nurse
- Occupational Therapist
- Speech and Language Therapist
- Consultant child and adolescent learning disabilities psychiatrist
- Clinical psychologist
- Assistant psychologist
- Medical secretary

The service is available for young people of school age up to 18 years old, who have an identified emotional or mental health difficulty and a diagnosable learning disability, the service also offers support to young people with a diagnosable learning disability and who have severe challenging behaviour.

Support includes:

- Assessment of mental health concerns and challenging behaviour
- Multi disciplinary assessments of ASD (autistic spectrum disorder) and ADHD (attention deficit hyperactivity disorder)
- Advice and support in managing difficulties with ASD and ADHD
- Individual therapy
- Prescribing, monitoring and reviewing medication
- Sensory assessments and recommendations for home and school where appropriate

- The team works closely with other services involved with the young person

### **General CAMHS:**

When a young person doesn't have a learning disability but has mental health needs and these are identified as part of the EHC plan, a young person locally would access Walsall CAMHS. If a young person has ASD or ADHD but doesn't have a diagnosable learning disability when there are also presenting mental health needs Walsall CAMHS support them offering an ASD and ADHD clinic and include:

- Multi disciplinary assessments of ASD (autistic spectrum disorder) and ADHD (attention deficit hyperactivity disorder)
- Advice and support in managing difficulties with ASD and ADHD
- Individual therapy
- Prescribing, monitoring and reviewing medication
- Sensory assessments and recommendations for home and school where appropriate
- The team works closely with other services involved with the young person

For post 18 year olds the Black Country Partnership Trust provides specialist health care to adults with learning difficulties and additional complex needs. These health needs can include ASD, mental health difficulties and behaviour problems. A team of specialist health staff from different professions provide a range of in-patient, outpatient and community treatments and interventions. Specialist health care staff work closely with community nurses and social workers.

For post 17 mental health needs support is provided through Walsall secondary mental health adult's services. Walsall CAMHS transitions young people to adult mental health services and has a process in place to support this

For out of area young people in residential schools, if the young person cannot access local services for review and support and are placed in 52 week residential provision out of area, the young person would be referred into the local NHS CAMHS in the area placed for psychiatric input. If the young person is a looked after child, Walsall CCG has a partnership arrangement with Children's Services to fund identified clinical health costs that are above those normally provided by locally commissioned services in relation to meeting mental health needs.

### **Community Paediatrics**

The Community Paediatric Service provides assessment, diagnosis, management and where indicated, treatment to children and young people across the borough of Walsall. The service is delivered in a range of settings (including Clinics and schools) by specialist doctors as part of a multi-disciplinary team and in partnership with other agencies (in particular Education and social services). The aim of the service is to enable children and young people to achieve their optimum health and reduce the impact of illness on their health and wellbeing. The service also carries statutory duties in relation to child protection, medical advice for special educational needs, and health assessments of children in care.

Referrals to the service are reviewed via a multi-agency panel which includes representation from CAMHS.

### **Child Development Service**

This is a Team Around the Child Multi-Agency service for children aged 0-4 with complex needs. All referrals receive a specialist assessment visit resting in the development of a Family service Plan. Follow up may include referral to appropriate assessment / diagnostic groups; Early intervention groups; home teaching and/or relevant therapy support (i.e. OT; Physiotherapy, SLT.) The team comprises of EYSEN Teaching service, SALT, Physiotherapist, OT, Clinical Psychology, Community Paediatrics and Specialist Health Visiting.

### **Children's Occupational Therapy Service**

Children's Occupational Therapists in Walsall aim to maximise a child or young person's abilities and independence. Advice and support is offered to children and young people up to the age of 19 years who have a co-ordination, visual perceptual or sensory processing difficulty or a physical disability that impacts upon their life skills but where their skills are below that of their overall developmental level. These may include using both hands together to play with toys, doing written work at school, dressing and self care activities, or co-ordinating movements to be able to carry out leisure activities or school work.

In consultation with schools (SENCOs) and on the basis of schools satisfaction with the service training was provided to SENCOs, health visitor, school nurses and educational psychologists who can all make referrals to the service. GPs or other doctors involved with the child, Team Around the Child professionals via TAC panel, local physiotherapy, speech and language therapy service or children's podiatry service, Local Social care Occupational Therapists can all refer to the OT service.

Children who have difficulty in any of the following areas where their difficulty is not as a result of global development delay or where their skills in one of the areas are below that of their overall developmental level are eligible to access the service.

- Co-ordination difficulties where a child's skills are below that of their level of learning and are affecting function in delay life skills or access to the school curriculum.
- Planning and organisational difficulties
- Handwriting difficulties, particularly in regard to how children write and position words on paper and their posture, but not as a result of a developmental delay where their writing is delayed along with other skills such as reading and language.
- Self care difficulties not as a result of a developmental delay such as dressing skills or using cutlery.

Children with a physical difficulty or difficulty such as one of those listed below in mainstream schools who have difficulty in accessing the school environment or curriculum are also eligible.

- Cerebral Palsy
- Muscular Dystrophy
- Juvenile Arthritis
- Osteogenesis Imperfecta (Brittle Bones)
- Developmental Co-ordination Disorder including Dyspraxia

### **Children's Speech and Language Therapy Service**

Children's Speech and Language Therapists aim to maximise a child or young person's communication skills and opportunities for social interaction. Advice and support is offered to children and young people up to the age of 19 years who have a Speech, Language and Communication Need (SLCN). This may be a single area of need or related to other difficulties e.g. learning, hearing or autism spectrum. These might include difficulties in understanding spoken language, learning vocabulary, using sentences, speaking clearly or fluently, or knowing how to communicate appropriately. Some children may need to learn to communicate using alternative systems e.g. Makaton, Picture Exchange systems (PECS) or Objects of Reference.

Referrals to the service for children with SLCN can be made by anyone, including parents, as long as consent has been obtained. Referrals to the feeding and swallowing service are only accepted if they are signed by a relevant doctor or specialist nurse.

Referrals will be accepted for any child or young person with a speech, language, or communication need including:

- Vocabulary development
- Talking in sentences
- Pronunciation
- Dysfluency (i.e. stammering)
- Understanding spoken language
- Early communication skills ( e.g. turn taking, using gesture)
- Social communication
- Higher level language difficulties

### **Looked After Children Health Service**

The Looked After Children's Health Service seeks to improve the outcomes for looked after children and young people who are corporately parented by Walsall Council or who are resident in Walsall having been placed into area by other local authorities. The Looked After Health Team is the conduit to notify the relevant health professionals when children become looked after or any change in circumstances thereafter. The team co-ordinate all statutory health assessments for Walsall looked after population, ensuring timely appointments for initial health assessments and timely initiation of review health assessments. The team also co-ordinate statutory health assessments for other authorities' children residing in Walsall. A key objective of the service is to ensure that assessments are completed by the most appropriate health professional. The Transition and Leaving Care Health Advisor conducts health assessments for the leaving care population.

The team provides specialist advice and support to the most vulnerable clients, their parents and/or carers. The team is also a source of specialist advice to partner agencies on the health needs of children in care. Direct management of care delivery operates particularly focussing on children and young people in residential care and the leaving care population. The team contribute to and are involved in individual care planning and review meetings in order to ensure children's health needs are met and to facilitate timely, consistent access to health services.

The service provides training for social workers, foster carers and health staff to ensure awareness of health processes, providing specific elements of training to each respective group in relation to health matters for looked after children and young people.

### **Paediatric Physiotherapy Service**

The Children's Physiotherapy service is comprised of a team of qualified physiotherapists as well as specially trained technical instructors with knowledge and experience in child development, anatomy and implementation/progression of physiotherapy programmes. The service works in partnership with families to offer advice and support for children and young people up to the age of 19 (for those attending special schools). The service helps with problems in gross motor development including advice on how to achieve rolling, sitting, crawling, standing, walking and moving between positions. The aim of the service is to minimise physical difficulties and maximise physical abilities and independence.

On-going support for children attending school will depend upon the need of the child and can vary from an annual review to termly reviews as required. Advice is also provided as to whether a child would benefit from specialist equipment.

Referrals to the service are accepted from, GP or other doctor involved with the child, Team Around the Child professionals via TAC panel, local physiotherapist, occupational therapy service, speech and language therapy service or child's podiatry service, health visitors and out of area physiotherapy service where the child is moving into the Walsall area.

### **School Nursing Service**

This service of health professionals is lead by a school nurse and supported by community staff nurses, nursery nurses, clinical support workers and administrative staff. School nurses are qualified nurses with specialist training in public health for children, young people and families. The service is skilled in identifying health problems or concerns early, to provide early support. School nurses lead and deliver the healthy child programme for 5-19 year olds. It is a programme for children and young people and their families which focuses on early intervention and prevention, immunisation, screenings, and healthy choices. This includes advice on healthy eating, dental health, sexual health and substance misuse.

The team work with communities, whole families, and individual children in different settings e.g. homes, children's centres, schools and GP surgeries. Assessments can take place with a school nurse in a local clinic or a child's school.

Referrals are accepted for any child or young person in a Walsall school who is between school reception age and 19 years of age. This includes children who live in Walsall borough and are home educated.

Referrals for children who are subject of a Child Protection Plan will automatically be accepted into the service and offered a health assessment to identify health needs.

Referrals for children who are the subject of an Early help Assessment or who have a Child in Need: The child's key worker or social worker will need to make the referral and explain the concerns about the child's health.

Long term conditions or medical problems which are impacting on education: This can include children and young people who are not attending school regularly and parents are citing a health reason for poor or non attendance at school.

Emotional health and behavioural problems which have been present for less than two years: If problems have been present for longer the service recommends that the parent talks with their GP. The GP may then arrange for referral to other services such as CAHMS or Community Paediatrician if he/she feels this is indicated. This route will ensure more timely access to specialist services if the child or young person requires further assessment.

### **Specialist Health Visitors – Children’s Disabilities Universal 0-5 Years Service**

Specialist health visitors have a specialist interest in working with families with children who have disabilities. One of the aims of the service is to support and empower parents to manage their child’s condition. The service works with children who have a range of conditions including complex and life limiting conditions. Post diagnostic support is offered at difficult and sensitive times. Advice, support and signposting are provided to parents to enable parents and their child to access appropriate services and advice. This may include referral to other health professionals, liaising with education, social care and a range of voluntary organisations. Specialist Health Visitors are part of the multi-agency team (TAC) and their role may include completing specialist assessments, co-ordinating services or acting in the role of key worker for the child and parent.

On referral to this service some children will be allocated to the Specialist Health Visiting caseload and will no longer receive service from the universal Health Visiting Service. This will enable the service to offer more support to the family on disability issues. Also in addition to extra support the service will continue to offer the core healthy Child Programme offered previously by the universal health Visitor. The service concentrates particularly on readiness for school and offer specialist advice around toileting programmes, sleep, feeding and behaviour to help to facilitate a smooth transition to school.

Ongoing support may be in the form of visits at home, nursery, children’s centres, school, clinic, hospital or hospice. The service works jointly with the Council’s SEND Advisory Team based at the Education Development Centre. Referrals are accepted from the TAC panel and a range of health and educational professionals but must meet referral criteria.

### **Health Transition Team**

The team offers person centred support and advice to young people who have a physical impairment and are preparing for adulthood. A comprehensive assessment is completed to determine transition readiness and provide advice and signposting to other services as appropriate.

This is offered to all young people from Walsall from year 9 onwards who are in mainstream education. Young people (14 to 25 years) who have:

- A long term physical health condition such as Cerebral Palsy, Muscular Dystrophy.
- Help young people to gain access to services available within health, education, social care and leisure.
- Help young people to put together their own Health Passport or one page profile which contain information about support needs or details about a medical condition.
- Offer 1 to 1 peer or group support in a range of appropriate settings
- Promote self- efficacy and self care management.

7.1 Multi-Disciplinary Training for Parents and Professionals includes – Living with Autism; Communication Friendly Training for Schools; Cygnet; Understanding Me (support for parents of children with SEN or AS at preschool; Sleep Management (using the Scotland Sleep Management programme); Makaton; Early identification of SEND.

## 8.0 SEND Funding

Local authorities must ensure that the budget shares of its mainstream schools and academies have an appropriate amount of funding identified to contribute to the cost of the whole school's additional SEN support arrangements, up to the mandatory threshold of £6000 per pupil with SEN. This is a notional amount of funding and should not be regarded by schools and academies as a substitute for their own budget planning and decisions about how much they need to spend on SEN support, or as a fixed budget sum for spending for schools.

The notional budget should be spent on special educational provision for pupils with SEN. Not all pupils with SEN will require this level of spend. If a pupil has needs that requires support in excess of this budget then schools or a parent/carer can request a formal assessment of the pupil's needs.

There are a range of financial funding for early years, specialist providers and post 16 young people with EHCPs and SEN support is offered by post 16 providers subject to their own criteria.

## 9.0 SEN Transport

Walsall has a policy in relation to home to school travel which is a statutory requirement. The threshold for accessing home to school travel applies to all children and young people. For children and young people who have special educational needs and disabilities and do not meet the published criteria they are assessed and will get transport from home to school if needed. Pupils who require specialist arrangements are transported in a variety of ways which include specially adapted buses or coaches and taxis. Where the need arises some pupils may be accompanied to and from school by a trained escort. Where ever we can independent travel is supported.

## Action Plan

Outcomes	Commissioning Activity	By When	Who
<p><b>1. Commissioning of high quality school places</b></p> <p>Outcomes:</p> <p>(i) More flexible high quality provision for pupils with a range of special educational needs across special and mainstream schools.</p> <p>(ii) Identification of areas of special need where there has been an increase in</p>	<ul style="list-style-type: none"> <li>Produce a position report in relation to the current level of SEND provision both in and out of borough. To include historical levels of support and to set out projections of need over the next 5/10 years.</li> <li>Develop proposals</li> </ul>	<p>Autumn Term 2016</p> <p>February 2017</p>	<p>Head of Service SENDI</p>



<ul style="list-style-type: none"> <li>(iii) demand for provision. Special schools enabled to offer a broader curriculum to a wider range of pupils with SEND.</li> <li>(iv) Improved collaboration between specialist providers across health and social care with education.</li> <li>(v) Greater choice for pupils and parents in relation to the SEN offer.</li> </ul>	<p>in consultation with providers.</p> <ul style="list-style-type: none"> <li>• Prepare report to Cabinet for approval to consult on any formal proposals</li> </ul>		
<p><b>2. Develop SEND pathway of school to school support to improve outcomes for pupils with send</b></p> <p>Outcomes:</p> <ul style="list-style-type: none"> <li>(i) Improve the capacity in mainstream schools to meet the growing and more complex needs of SEND in Walsall</li> <li>(ii) Improving confidence and awareness around the challenges of meeting the needs of pupils with SEND.</li> <li>(iii) Access to high quality support from special schools.</li> <li>(iv) Outreach will support and contribute to improved joint collaborative working between schools, school improvement and SEND services.</li> <li>(v) Recognising and celebrating excellent inclusive practice in mainstream schools.</li> </ul>	<ul style="list-style-type: none"> <li>• Proposals to be developed in working partnership with Special School Leaders and SEN Managers.</li> <li>• Consultation with Mainstream Schools</li> </ul>	<p>February 2017</p> <p>Implement in April 2017</p>	<p>Special School Leaders/ SENDI Managers</p>
<p><b>3. Strengthen and improve co-production with children and young people, parents and carers</b></p> <p>Outcomes:</p> <ul style="list-style-type: none"> <li>(i) Reach out and work with a wider group of parent/</li> </ul>	<ul style="list-style-type: none"> <li>• Agree plan of action with Contact a Family and parent group.</li> </ul>	<p>2017</p>	<p>Head of Service SENDI/ SEND Team Managers and key Local Area Leads on</p>

<p>carers in relation to all matters relating to SEND and other services relevant to families with children with SEND.</p> <p>(ii) Partnership will provide a better opportunity to work together with SEND services in relation to meeting needs.</p> <p>(iii) Provide an improved opportunity to hear the views of children.</p> <p>(iv) The views of children and young people and parents and carers are evidenced.</p> <p>(v) Children and young people with SEND are empowered to be involved in all decision making processes relevant to them.</p> <p>(vi) Children and young people are involved in all areas of decision making from strategic to operational relating to SENDI policy.</p> <p>(vii) Children, young people and their parents/carers feel respected, listened to and fully involved.</p> <p>(viii) Will provide a more robust opportunity to co-produce key policy and practice around SEND.</p>			SEND
<p><b>4. Continue to ensure that the Local Offer provides all relevant information and advice</b></p> <p>Outcomes:</p> <p>(i) Refresh the Local Offer with key local Area colleagues through ensuring that relevant information is published and accessible to all partners, schools, parents and their children.</p> <p><b>(ii)</b> Improved navigation and</p>	<ul style="list-style-type: none"> <li>Following a review an agreed action plan is developed with key partners in the local area to refresh the Local offer.</li> </ul>	<p>Review/Action plan with dates for completion agreed:</p> <p>Reviewed Spring Term 2017 and Action Plan in place</p>	<p>Head of Service SENDI and Local Offer Group</p>

<p>key points of linkage to policy and procedures.</p>			
<p><b>5. Develop an all age disability service to secure the best outcomes for children and young people at key transition stages</b></p> <p>Outcomes:</p> <p>(i) All young people with SEND have a co – produced EHCP with identified milestones to be achieved in supporting them to prepare for adulthood including preparation for employment.</p> <p>(ii) All young people with SEND receive a local offer for how their education, health and social care support can be provided within and by their local communities.</p> <p>(iii) Greater independence and well being .</p> <p>(iv) Greater access to personal budgets so that young people have greater control over the type of support they get. For those deemed not eligible for statutory services at any point in the pathway will be supported to access universal and community support services.</p>	<ul style="list-style-type: none"> <li>An agreed action plan is developed with key partners To demonstrate how this Service is to develop</li> </ul>	<p>Further discussion Summer Term 2017</p>	<p>Adult Services</p> <p>Head of Service SENDI</p>

<p><b>6. Continue to support and develop policies to ensure that all children and young people are receiving an education and are in employment or training</b></p> <p>Outcomes:</p> <p>1) Attendance: Primary, Secondary and Special school overall absence and persistent absence to be in line with or better than national average</p> <p>2) Exclusions: Primary, secondary and special school fixed term and permanent exclusions to be in line with or better than the national average</p> <p>3) Children Missing Education: Offer of appropriate placement without unnecessary delay and to return to education within one term, or for a school attendance order to be issued and enforced where appropriate</p> <p>4) Looked After Children: To increase the number of Looked After Children achieving level 4 or above at end of year 6.</p> <p>To increase the number of Looked After Young People who achieve 5 or more A*-C GCSE including English and Maths</p> <p>5) Movement into Learning: To increase % of school/college learners continuing their participation in education and training</p>	<p>Continue to provide a traded Education Welfare Service to schools to manage their school attendance. Develop the trading both in and outside of Walsall</p> <p>Continue to provide behaviour support service which supports LA maintained primary schools.</p> <p>Develop support package for the secondary sector with a view to offer a traded service.</p> <p>Implementation of Secondary Fair Access Protocol</p> <p>Implementation of Primary Fair Access Protocol</p> <p>All children in key stage 2 have access to additional support in school or at home</p> <p>All children in key stage 4 have access to a tutor</p> <p>Commission appropriate local provision to meet the assessed needs of young people leaving school</p>	<p>Greater trading out of Borough in progress 2016/7</p> <p>Continued delivery 2016/7</p> <p>To be developed July/August 2017</p> <p>October 2016</p> <p>December 2016</p> <p>Throughout the school year</p> <p>Throughout the school year</p> <p>Throughout year 2016/7</p>	<p>Access Manager</p> <p>Access Manager</p> <p>Service Manager: Admissions and Pupil Place Planning</p> <p>Virtual School Lead</p> <p>Virtual School Lead</p> <p>Children's Services Commissioner</p>
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<p>6) Not in Education, Training and Employment (NEET): To continue to increase the % of young people in education, Training and Employment</p> <p>7) Elective Home Education (EHE): That all children and young people educated at home is based on parental choice</p> <p>8) Managed Moves: To be agreed through Fair Access Panels to reduce the number of unnecessary and unsuccessful managed moves</p>	<p>European Social Fund (ESF). Roll out of the Youth Employment Initiative, an impact project to re-engage young people 16 to 29 in education, employment or training</p> <p>EHE service will record reasons why parents choose EHE and to provide challenge where there are grounds to believe that suitable education is not being provided</p> <p>Secondary Fair Access Protocol Implemented</p> <p>Primary Fair Access Protocol to be implemented</p>	<p>Through to July 2018</p> <p>Throughout school year 2016/7</p> <p>October 2016</p> <p>December 2016</p>	<p>Post 16 Strategic Lead</p> <p>Access Manager</p> <p>Service Manager: Admissions and Pupil Place Planning</p>
<p><b>7. Updating the Council's Accessibility Strategy Outcomes:</b></p> <p>i) All families, schools and partners will have information relating to disability access to all schools thereby giving better informed judgements for school preference</p>	<p>Commission work on school accessibility across the borough and to publish outcome on the Local Offer site</p>	<p>Spring Term 2017</p>	<p>AD: Access and Achievement</p>
<p><b>8. Develop Personal Budget Guidelines</b></p> <p>Outcomes:</p> <p>(i) Publication of entitlement as to when parents/young people can apply for a personal budget.</p> <p>(ii) Publication of policy in relation to the application for and management of personal budgets.</p> <p>(iii) Published on the Local Offer.</p> <p>(iv) Key staff and schools</p>	<ul style="list-style-type: none"> <li>National guidance to be adapted and consulted on.</li> <li>Publication of policy and relevant partners briefed.</li> </ul>	<p>Spring term 2017</p>	<p>Head of Service SENDI</p>

<p>(v) briefed on the policy. Monitoring mechanism of personal budget take up set in place.</p>			
<p><b>9. Have in place timely and high quality Education, health and Care Plans</b></p> <p>Outcomes:</p> <p>(i) Improved rates of EHCP completion in compliance to the Code of Practice.</p> <p>(ii) More efficient exchange and sharing of information between key statutory services.</p> <p>(iii) Increased electronic sharing and exchange of information between partners and families.</p> <p>(iv) Establish a strategy and work plan to ensure all Statements are transferred to EHCP in compliance with government deadlines.</p> <p>(v) Staff trained and supported in faster turn round of EHCPs during the 20 week process.</p>	<ul style="list-style-type: none"> <li>• Review decision making processes to bring completion of EHCPS in compliance with statutory deadlines</li> <li>• To establish better IT platform to ensure more efficient sharing of information across services and to reduce the amount of paper based practice.</li> </ul>	<p>Spring/ Summer Term 2017</p> <p>September 2017</p>	<p>Head of Service SENDI</p>
<p><b>10. Timely and high quality data that is shared, understood and acted on</b></p> <p>(i) Publish up to date SEND profile information with a clear vision to identify trends, areas for further training and development of provision.</p> <p>(ii) Develop a data dash board.</p> <p>(iii) Focus on improving outcomes for Young People with SEND in Walsall.</p>	<ul style="list-style-type: none"> <li>• Review information and take action</li> <li>• Using the data to Identify next steps to help children make better progress, e.g. individual school, clusters based and borough wide analysis and challenge</li> <li>• Identify emerging trends within Walsall and at national level to plan next steps- a long term plan in place</li> <li>• Working with all</li> </ul>	<p>Spring Term 2017</p> <p>Spring Term 2017</p> <p>Spring Term 2017</p> <p>By Summer 2017</p>	<p>Head of SENDI and School Improvement /Data Team</p>

	stakeholders to ensure quality and breadth of provision within Walsall.		
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Our vision recognises that we actively promote the development of progress and performance for Children and Young People with SEND. Through working with all partners; children, young people and their families, we strive to ensure that every child and young person has the opportunity to achieve their full potential, working towards greater independence and have sense of belonging within Walsall.

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