

Proposed changes to the way in which Telford and Wrekin Local Authority undertake a new education health and care needs assessment.

Feedback following consultation and proposed next steps - May 2017

The Local Authority consulted with its partners to propose a number of changes to the way in which new education health and care needs assessment are completed.

The main driver for the change was to ensure families receive a high quality service which listens and takes their views into account. We also want to ensure procedures are as straight forward as possible and, where appropriate, reduce the amount of professionals families encounter.

We undertook consultation of the proposals during February and March 2017 with various stakeholders. The proposals were sent to early year's settings, school and post 16 providers, via the Telford and Wrekin SEND newsletter, and we raised them within various fora including Primary Heads, Aiming High SEND governance board and the Parent/Carer consultation and communication group. We liaised with the IASS and IS teams – (Information Advice and Support Service and Independent Support) and the parent carer forum (PODS). We held a briefing session that was open to all SENCos within Telford and Wrekin schools (20 SENCos attended).

We received 14 responses in total – the majority of which reflected collective views from LA and health teams and those from educational providers. We received some individual responses and a collated response from PODS who gathered comments from their family groups. The overall response to the proposals are outlined below along with tasks that the LA and its partners will now undertake in order to implement change which we are aiming to complete by September 2017.

Change 1: We will ask a professional who is already working with a family to complete a one page profile, which is part of the Education Health and Care assessment, rather than using a caseworker from the Local Authority social care service.

Original Proposal:

Where a new education, health and care assessment is undertaken, parents/carers, children and young people are asked for their views and aspirations which is collected using 'one page profiles'. In Telford and Wrekin a caseworker from the Local Authority Inclusion and Family Social care team is normally the professional who contacts a family to complete the one page profile. We have received feedback that families are not sure why it is necessary to introduce a new professional to them to undertake this task as it has meant they have needed to repeat information that has usually been told to someone else. The Local Authority therefore proposes to ask a professional who is already working with a family to complete the one page profile or ask the family to nominate someone they would like. For example where a child is at a school, the SENCo may be asked by the family to complete the one page profile. The profile could then be submitted as part of the request for an EHC assessment. The Local Authority will offer training across early year's providers, schools and post-16 providers about how to support families to complete a one page profile. This change also means that we are able to use caseworkers from the Local Authority Children and Families social care team to support the EHC assessment process in a different way – please see proposed change 2.

Summary of feedback:

- There was consensus that a professional already involved with the child/family is best placed to gather the views where there is a positive relationship.
- For some in school, concerns were raised that additional tasks were going to be difficult to manage due to capacity when pulling together an EHC request.
- It was noted that it would be good for the parent to have some choice as to who should complete this task.
- There was comment that duplication already exists as part of the existing EHC assessment request forms that asks for parent and child views and during the EHC assessment where all professionals seek parent and child views as part of their advice.
- Comments from parents included the need for guidance for both professionals and parents about how to complete one page profiles to ensure everyone gets the best out of them, agreeing that professionals already known to the family would be best placed to complete and ensuring that the professional who does complete the activity knows the range of services that are available to support families.

Proposed Implementation

The Local Authority will build on the current requirements to collect parental and child views as part of the Education, Health and Care Assessment request. The 'one page profile' will be built into the new EHCNA request form (see change 7) and guidance/ exemplars/briefings given to support completion.

Where families would prefer to work with a professional who is not completing the EHCNA request form there will be an opportunity to do this during an assessment and it is likely that an Educational Psychologist, as part of their statutory work, will undertake the 'one page profile' which will form part of their psychological advice (all Education, Health and Care requests must include psychological advice).

| Steps to implementation | Timeline for implementation |
|--|-----------------------------|
| Working party developing new EHCNA request form and guidance documents. | September 2017 |
| Training to deliver a comprehensive one page profile / template / guidance notes | Autumn Term 2017 |

Change 2: We will ensure an education, health and care assessment includes a "family conversation" with the children and families care team where a family is not known to the Local Authority children care services.

Original Proposal:

Currently our process for collecting care advice as part of the Education, Health and Care assessment has a gap where a family is not already known to Local Authority children care teams (for example Child Protection or Early Help). For the majority of children where we undertake an education, health and care assessment, direct intervention from these teams will not be necessary but signposting to other services in the local area may prove helpful. We will therefore ask practitioners from the Local Authority Children Specialist Service Care team to contact a family who are not already known to the other care teams to participate in a 'family conversation', likely to happen at the family's home, when a request for assessment has been agreed. Information that arises from the conversation, which will include advice in respect of services within the community, will then be written as care advice from the caseworker and contribute to the final EHC plan where one is issued. Where a family is already known to Child Protection or Early Help teams for example a caseworker will not become involved but rather the existing social worker/practitioner will submit advice, based on their current work with the family and that will contribute to the final EHC plan where one is issued.

Summary of feedback:

- There were a range of comments about the need ensure families understood that a 'family conversation' was part of the EHC assessment process so that it reduced anxiety about care services contacting them.
- There were some comments that introducing this professional contradicted the proposed outcome of change 1 in that we were introducing another professional into the process.
- There was general comment that this change could be helpful to meet any unmet care needs but only if there was resource and capacity within care teams to act.
- Comments from parents raised wider issues about the changes in 'Early Help' services offered by the LA and key contacts for families where they do not meet the thresholds for social care support.

Proposed Implementation

The current role that caseworkers from the Local Authority Inclusion and Support Children Care team play in the EHC assessment process will be reshaped so that they undertake a family conversation with families, not known to other care teams in the Local Authority, when a request for assessment has been agreed. They will then submit advice to contribute to the final EHC plan where one is issued focusing on describing a child's care needs, outcomes and provision. Where families do not meet thresholds for support signposting will be provided focusing on the Local Offer.

(Where a family is already known to Child Protection or Early Help teams for example a caseworker will not become involved but rather the existing social worker/practitioner will submit advice, based on their current work with the family and that will contribute to the final EHC plan where one is issued.)

| Steps to implementation | Timeline for implementation |
|--|-----------------------------|
| Develop the family conversation and train caseworkers. | September 2017 |
| Develop advice template with a focus on care outcomes and provision. | Summer Term 2017 |
| Brief educational settings and parent groups | Summer Term 2017 |

Change 3: We will introduce a new health questionnaire as part of the request for an education, health and care need assessment.

Original proposal:

As part of an Education, Health and Care Assessment, all children are offered an appointment to be seen by a Community Paediatrician for a general health check-up. Following this appointment, Paediatricians then provide written advice. Where health issues are found these are included in an EHC plan where it is issued. Some children and young people are already known to other community health professionals, for example Speech and Language Therapy, Occupational Therapy, CAMHS, Physiotherapy, Community Children's Nurses etc. and advice is also sought from them to contribute to an EHC plan. At times families have reported that they are unclear why it is necessary to attend an appointment with a Paediatrician when there are no health concerns or where health needs are already known by other health services. We will therefore introduce a new health questionnaire which needs to be completed by families and submitted as part of the request for an education, health and care assessment. The health questionnaire will then be used by Paediatricians, after a request for an assessment has been agreed by the Local Authority, to identify who from health services are already involved and what, if any, further health assessment might be necessary. Where parents/carers have clearly indicated that they want a Paediatrician to undertake a general health check-up for their child, then when the request for an EHC assessment has been approved, this will be completed and the Paediatrician's advice will be submitted.

Summary of feedback:

- There is general support for this proposed change in that it was felt it would speed up and streamline the overall assessment process and avoid unnecessary health checks where a child or young people is already known to a health professional.
- There was some concern that a child may be able to go through an EHC assessment without receiving any health check-up should the health assessment be offered as 'optional' for those children not already known to health professionals and whether this raised a safeguarding issue.
- Comments from parents raised concerns that they might not be seen by a community paediatrician if there was no known health needs.

Proposed implementation

A health questionnaire will be introduced as part of the request for an education, health and care need assessment. Parents of children and young people already known to a range of health professionals will be offered the option of a Paediatric appointment for a general health check-up. Where children are not known to other health professionals a paediatric appointment will automatically be offered.

| Steps to implementation | Timeline to implementation |
|--|----------------------------|
| Develop the health questionnaire | Summer Term 2017 |
| Agree process for sharing completed health questionnaire between | Summer Term 2017 |
| LA SEN team and health. Training required for SEN | |
| officers/coordinators and Shropcom health provider. | |
| Ensure settings who make EHCNA referrals are aware of need for | September 2017 |
| parents to complete the health questionnaire and include it as part of | |
| the referral paperwork. To be delivered through new EHCNA | |
| guidance documentation. | |
| Include new health questionnaire as part of the parental request | Summer Term 2017 |
| form and liaise with IASS, IS and PODS | |

Change 4: We will introduce a new 'co production' meeting with parents / carers between week 12 and 15 of the 20-week timeframe to discuss the contents of a draft EHC plan where one is issued.

Original proposal:

The Local Authority would like to work closer with families during the education health and care needs assessment process and provide better opportunities to coproduce an EHC plan where one is issued. We will introduce a new 'coproduction meeting' between week 12 or 15 of the 20-week EHC assessment where a SEND officer will meet face to face with parents, staff from the child or young person's setting and relevant professionals, where they are available, to discuss and amend as appropriate the contents of the draft EHC plan. At week 16 families will continue to be sent a formal copy of the draft EHC plan where they are able to make further representation. We feel this change will enhance the opportunity for personalisation and choice for families during the assessment process.

Summary of feedback:

- There was much support for this proposal. There was recognition that this would encourage more opportunity for parents to be part of the process and the ability for them to ask questions and shape the future offer. There was also support from professionals who thought that this meeting could provide an opportunity for them to contribute to the content of the final plan and ensure that their advice had been accurately reflected in an EHC plan. Educational settings too felt the co-production meeting would enable them to plan ahead in terms of support once the EHC plan was finalised.
- There was concern however that some professional groups are unlikely to have the capacity to contribute to the co-production meeting due to their capacity and that we would need to be clear with parents from the outset that not all professionals who contributed to the assessment would be able to attend this meeting.
- There was concern that the coproduction meeting may not be possible all year round due to school holiday periods.
- There was some concern that the co-production meeting would mean that parents could no longer seek support from IASS or IS.

Proposed implementation

The Local Authority will implement a co-production meeting as best practice. Where a child attends an educational setting it will take place at that setting and a representative from that setting will be present but it will be led by the SEN officer from the Local Authority who is responsible for the EHC assessment. Whilst professionals involved in the EHC assessment process will be invited it is understood that not all will be able to attend due to capacity. At times it may not be possible to conduct a co-production meeting where statutory timescales do not allow. This would be particularly pertinent during holiday periods, although the longer summer holiday are subject to timescale exceptions. Where a co-production is not completed parents will still be able to make representation once a draft EHC plan is issued. Parents are still able to seek support to make representations at the coproduction meeting via existing services (i.e. IASS and IS).

| Steps to implementation | Timeline for implementation |
|---|-----------------------------|
| Internal process change so that coproduction meeting is | September 2017 |
| scheduled by SEN team once EHC request has been agreed. | |
| Training and development in how to lead a coproduction meeting | Summer Term 2017 |
| for SEN officers. | |
| Information briefings to educational settings/ advice providers and | Summer Term 2017 |
| parent/carer groups. | |
| Information booklet on the coproduction meetings for parents – to | Autumn Term 2017 |
| be included in the new 20 week assessment guidance | |

Change 5: We will introduce the use of one template for all children and young people who are issued with an Education, Health and Care Plan aged 0 to 25 years.

Original Proposal:

Currently the Local Authority has two templates that are used when it issues an Education, Health and Care Plan. One is for children aged 0 to 5 and the other is for children and young people aged 5 to 25. Feedback from settings, schools and parents indicate that two templates have caused confusion and there is no clear rationale why a difference exists as there is no substantial difference in the content of the plans. There is also an unnecessary burden on the team that writes EHC plans to convert from one template to the other as a child grows older. The Local Authority therefore proposes to adopt the use of its existing 5 to 25 template to cover all age groups.

Summary of feedback:

- There was general consensus that the template should be the same across age phases for simplicity.
- There was some concern that some sections of a plan may not be valid across age phases and that there was a need to personalise the plan to the individual.

Proposed Implementation:

The Local Authority will introduce the use of one EHC plan template. The Local Authority will continue to personalise plans as far as possible but is statutorily bound to include specific sections (identified as A-K within the SEND Code of Practice).

| Steps to implementation | Timeline for implementation |
|---|-----------------------------|
| SEND team to use agreed EHC template for all children and | Summer half term 2017 |
| young people who require an EHC plans | |

Change 6: Where young children have received a multi-disciplinary assessment at the Child Development Centre (Stepping Stones) an education, health and care assessment will be triggered where it is deemed appropriate.

Original Proposal:

Some children in early years are assessed by a multi-disciplinary team at Stepping Stones. This team comprises a Paediatrician, Educational Psychologist, Physiotherapist, Speech and Language Therapist, Occupational Therapist and Specialist Nursery Nurses. Following a detailed assessment, a multidisciplinary report is then written in which a child's needs are described and appropriate education, health and care provision identified. Currently, following a multidisciplinary assessment, a large number of children will then enter the Bridge Assessment Nursery (BAN) which is a specialist educational pre-school provision, where developmental progress is monitored for a further year. Before a child enters school, a decision is then made as to whether an education, health and care plan is required and a new set of assessments are then completed. Families and professionals alike report that there is mass duplication in terms of assessment and advice writing between a multidisciplinary assessment and the EHC assessment. Families are telling their stories to too many professionals more than once. It is known that a large number of children who have a multi-disciplinary assessment consequently meet criteria for an education, health and care assessment. The Local Authority therefore proposes to use the multidisciplinary assessment as the trigger point for an education, health and care assessment where this is appropriate. All services who have not contributed advice through the multidisciplinary assessment or who wish to update their advice will be given that opportunity during the EHC assessment process.

Summary of feedback:

- The majority favour this change and feel it would be welcomed by families and professionals alike as the multi-disciplinary assessment provides all the necessary specialist assessments that are required as part of an EHC assessment process. There was comment that professionals would need to proceed with caution given the amount of information that is provided to parents at this time to prevent overload and that the process is clear regarding who 'triggers' the assessment.
- There were concerns that adopting this change may limited the graduated approach to meeting SEND although it is recognised that the majority of children who attend the multi-disciplinary assessment also attend an early years provider.
- Wider concerns were raised about unidentified need in the early years and the possibility of children falling through the gap (i.e. not receiving specialist assessment, limited access to support services, funding issues etc).

Proposed implementation

An education, health and care plan will be triggered where children have received a multidisciplinary assessment and where criteria, as described on the Local Offer, has been met. It is expected that there will be evidence of the child's needs having being support at an early years setting (outside of the MDA process) and/or the child's needs are so complex that support is required to access their education setting.

| Steps to implementation | Timeline for implementation |
|---|-----------------------------|
| The internal process within the MDA to trigger an EHC assessment to be developed and agreed (likely to require EP). | Summer Term 2017 |
| Briefing session for those at MDA | Summer Term 2017 |
| Agree cohort from which new procedures apply. | September 2017 |

The Local Authority is also proposing to make the following changes which will impact on the way requests are made for Education, Health and Care Plans

Change 7: We will amend the Education, Health and Care Needs Assessment request form so that settings are more able to demonstrate how a child / young person meets the published criteria for assessment and how to evidence a high quality graduated response to meeting need.

Original Proposal:

The Local Authority will work with educational settings to ensure that information submitted in a request for an education, health and care assessment meets the published criteria. A key requirement is for educational settings to demonstrate how they have supported a child or young person's need through a high quality graduated response. Training will be provided by Local Authority SEND support services to educational settings so that it is clear what a high quality graduated response is which includes the need to develop support in waves, use outside professionals and implement recommendations while continually tracking progress against SMART targets. Briefings will also be provided to parents about how educational settings should support SEN through a high quality graduated response.

Summary of feedback:

- There was universal support for this proposal. There was general consensus that the current Education, Health and Care Assessment request form did not provide the opportunity to evidence how a setting provides a high quality graduated response to meeting special education needs.
- There was comment from parents that it would be beneficial to support their understanding of the graduate response with a wider focus on understanding the Local Offer and SEN support.

Proposed implementation

The Local Authority will make amendments to the Education, Health and Care Needs Assessment request form so that settings are more able to demonstrate how a child / young person meets the published criteria for assessment and how to evidence a high quality graduated response to meeting need. Briefing sessions will also be planned for parents regarding the gradated approach.

| Steps to implementation | Timeline for implementation |
|---|-----------------------------|
| Workshops for schools – a high quality graduated response | Summer Term 2017 |
| Working party developing new EHCNA request form and guidance documents. | September 2017 |
| Parent workshops – the graduated approach | Autumn Term 2017 |

The Local Authority is also proposing to make a change to the way it specifies the allocation of resource when it issues an Education, Health and Care Plan.

Change 8: We will remove "hours" from EHC plans and replace them with a banded level to indicate the available resource (top up/school notional budget) that supports implementation of provision specified in section F of an Education, Health and Care Plan.

Original Proposal:

We will move away from stating 'hours' in EHC plans so that resources provided can be used more flexibly to support a child's need. Provision specified in a child's EHC plan can often include a range of activities that requires a personalised, individual package of support. This may include targeted adult support, delivering evidence-based interventions, but may also include group activity or equipment for example. Where 'top up' is provided, educational settings must be able to identify to families how they have used that resource to support their child or young person.

Summary of feedback:

- There was consensus from educational settings that removing hours would be a positive move. This would allow more flexible thinking in terms of the support that could be put in place and developing the child as an independent learner.
- There were some concerns raised from parent groups and support services that taking away hours may reduce their ability to challenge the school regarding how funding was being used to support their individual child.
- There was comment that removing hours would be ok if EHC plans were specific and quantified in the provision section (F).

Proposed Implementation:

The LA will remove 'hours' in EHC plans. The LA will specify the banded level to indicate the available resource (top-up/school notional budget) that supports implementation of provision specified in section F of an Education, Health and Care Plan. The allocation of resource attached to the banded level will be published on the Local Offer website. This will enable parents to ask how allocated resource is being used to deliver provision specified in their child/young person's EHC plan. The Local Authority will undertake quality assurance audits focusing on the specificity of provision in advice provided by professionals and final EHC plans to further develop clarity about provision that is required to enable proposed outcomes to be achieved.

| Steps to implementation | Timeline for implementation |
|---|-------------------------------------|
| The SEND team will no longer state 'hours' in EHC final plans | From May half term 2017 |
| QA process focusing on specificity in provision | QA cycle – beginning September 2017 |
| Banded funding levels and available resource | From May half term 2017 |