Strategic review of support, services and provision for children & young people with high needs in Bournemouth

Final report

Isos Partnership

January 2018





Executive summary

<u>Theme</u>	What is working well?	What are the challenges?	Recommendations	
Overarching theme: Relationships, funding & strategy	Strong strategic relationships within the local system; promising new partnership-based governance arrangements; a highly-valued SEN team and EP service.	Growing pressures on EHCPs, specialist places, AP, leading to pressure on the highneeds block. Need for clarity about how local continuum can meet needs effectively.	Develop core strategic principles and ensure broad communication and borough-wide sign-up. Ensure strong strategic co-production role for parents and young people. Strengthen join-up with health and care.	
Theme1: Identification, assessment & access	Positive feedback on SEN team; indicators of strong system performance (EHCPs conversations, EHCPs within timescales); some helpful information about local SEND system.	Profile of primary need suggests inconsistent identification practice; concerns re: panel decision-making; information needs to provide more in terms of practical signposting.	Strengthen identification practice and recording process. Adapt panel and assessment process to improve transparency and consistency. Develop the local offer as a practical, signposting tool. Consider route for time-limited top-ups.	
Theme 2: Mainstream support & targeted services	Examples of effective inclusive practice; recent graduated response review should provide clarity of expectations; generally positive feedback on support (when it can be accessed).	Need for consistent expectations of effective mainstream inclusion, backed by clear training offer. Strong message about need for formal outreach support for mainstream.	Develop consistent expectations of mainstream inclusion and SEN support (backed up by clear training offer). Refresh SENCO networks. Develop formal core offer of outreach support. Identify joint commissioning opportunities (e.g. SaLT).	
Theme 3: Specialist SEND and alternative provision	Positive feedback on some of the quality and pro-active development of SEND provision. View that current model of SEND provision should enable most needs to be met locally.	Current capacity of SEND provision and AP is stretched, increasing pressures and costs. Evidence of needs not being met by local provision (autism, SEMH, PD). Need for new approach to SEMH and tackling exclusions.	Investigate and trial new unit provision, and further reintegration projects / protocols. Establish collective forum for specialist providers. Strengthen oversigh of INMSS placements. Develop a "collective responsibility" model for AP.	
Theme 4: Preparation for adulthood	Positive feedback on the local post-16 education offer – range and quality of education pathways. Pro-active development of new pathways (e.g. Summerwood, CHI).	Need to develop a wider range of pathways into employment for young people (building on CHI), supported internships. Need to strengthen transition planning and joint offer across children's and adult services.	Strengthen the process for planning transition and preparation for adulthood for all young people with SEND. Continue to develop the local preparation for adulthood offer (supported internships, education, care, accommodation).	



CONTENTS

Introduction – Background and aims of the review

Part 1 – Key findings

Part 2 – Options and recommendations

Conclusion – taking forward the findings of this review



Introduction

Background

Bournemouth and Poole Councils commissioned Isos to undertake parallel independent, strategic reviews of "high-needs" support, services and provision in each local area. This included support and services for children and young people aged from birth to 25 with special educational needs and disability (SEND) or who require alternative provision (AP). The reviews were carried out at a time when the two local areas were considering greater join-up in the context of local government reorganisation, but around SEND specifically, to form a combined East Dorset local authority (LA).

The reviews in Bournemouth and Poole were undertaken separately but in parallel, in order (a) to provide a set of conclusions specific to each local area's needs and context, but also (b) to be able to bring together the key themes and recommendations to consider opportunities for greater join-up across the two local areas. Each review had three aims.

- 1. To gather evidence about trends in current needs and future demand for high-needs services and provision.
- 2. To gather feedback on current services and provision what was working well and priorities for development.
- 3. To work collaboratively to shape options for arranging services and provision to meet current and future needs.

During the review, we set out to engage a broad range of partners and stakeholders in the local SEND system, including:

- **children & young people** (referred to as 'young people' for brevity in this report) we engaged 22 young people through workshops and 1-to-1 interviews with Chatterbox, and at two special and two mainstream schools;
- parents & carers (referred to as 'parents' for brevity in this report) 32 completed an online survey and 13 attended one of two workshops we facilitated (some parents completed the survey and attended a workshop);
- **professionals** visits / interviews with 17 institutions and groups (including two early years settings, five primary schools, four secondary schools, three special schools, and three other services and associations), an online survey (45 responses), and workshops (attended by 15 professionals); and
- LA leaders, officers & partners through a series of 1-to-1, small group and workshop discussions.

We have triangulated these findings with in-depth analysis of published and internal data to inform the findings and recommendations set out in this report. We are grateful to all colleagues who have contributed to this review.

Introduction

Key contextual information on Bournemouth

- <u>Population</u> the 2011 census estimated that Bournemouth had a population of 183,491, of which 37,925 were aged 0-19, and 20,009 were aged 20-25. This means that, compared to the national average, Bournemouth has a slightly lower proportion of citizens aged 0-19 (21% compared to 24% nationally), but a slightly higher proportion of young adults aged 20-25 (11% compared to 8% nationally).
- <u>Demographic characteristics</u> according to the 2015 Index of Multiple Deprivation, Bournemouth is the 82nd most deprived local area in England. In terms of its school-age pupils, Bournemouth is the 49th highest for primary-age pupils eligible for free school meals (FSM) and 94th for those with English as an additional language (EAL), and 94th for secondary FSM and 86th for secondary EAL.
- <u>Education in Bournemouth</u> Bournemouth has a range of early years settings and a total of 41 schools, made up of 27 primary schools, 12 secondary schools and two special schools. Ninety per cent of schools in Bournemouth are academies. In March 2017, 90% of providers in Bournemouth were judged to be good or outstanding (above the figure for England, which is 89%) this had risen from 59% in August 2011 (when the national figure was 69%).
- <u>Levels of SEND</u> the most recent published data (from January 2017, published in *SEN in England* in July 2017) show that 2.5% of children of statutory school age attending schools in Bournemouth have a statement of SEN or an Education, Health & Care Plan (EHCP). This has historically been below the national figure (consistently 2.8%), but internal data suggest the Bournemouth figure has now risen above the national average. The data also show that 10.5% of pupils in Bournemouth schools are supported at "SEN support" (what was previously school action / plus). This is below the national figure (11.6%), and historically been so, although there were some year-on-year fluctuations in 2014 and 2015.



Introduction

The continuum of local high-needs support, services and provision in Bournemouth

We have set out below some information about the different forms of support, services and provision available in Bournemouth. Please note that young people living in Bournemouth also access provision in Poole and beyond.

- <u>Information & advice</u> provided through the local offer (online). Impartial information and advice is provided through SENDIASS (SEND information, advice & support service). The Bournemouth Parent Carer Forum also provides advice and support to families. Chatterbox is a local youth group for disabled young people aged 11-25.
- Mainstream education this is provided through a range of early years settings and 39 mainstream schools.
- <u>Targeted services</u> information and support is offered through the local Educational Psychology (EP) service (telephone consultations, "SENCO circles" where EPs work with groups of SENCOs on practice matters, as well as additional traded work including training). Dorset Clinical Commissioning Group (CCG) commission targeted health services including a sensory impairment service, speech & language therapy (SaLT) and child & adolescent mental health services (CAMHS). There is not a formal targeted education support / outreach offer support is offered by local schools such as Portfield (autism outreach), and some support via the teaching schools (Linwood, Tregonwell).
- <u>Specialist SEND provision</u> there are currently two specialist units the Small Talk and Riggs units at Malmsbury Park (primary) and the Emmaus Centre at the Bishop of Winchester (secondary). There are two special schools in Bournemouth Linwood (3-19, for pupils with a wide range of needs, which operates across five sites), and Tregonwell (5-16, for pupils with social, emotional & mental health, or SEMH needs, which operates across three separate sites). Bournemouth pupils also attend special schools in Poole, the independent and non-maintained special schools (INMSSs) located nearby such as Portfield, Victoria and Langside, and further afield.
- <u>Specialist AP</u> Tregonwell provides AP for pupils who are at risk of exclusion or who have been permanently-excluded and those who cannot attend school for medical reasons.
- <u>Preparation for adulthood</u> young people from Bournemouth attend Bournemouth & Poole College, Brockenhurst College, Kingston Maurward College. Post-16 pathways are also provided through Linwood's post-16 provision (including the new provision at Summerwood) and the "classroom at the heart of industry" (or CHI).

CONTENTS

<u>Introduction</u> – Background and aims of the review

Part 1 – Key findings

Part 2 – Options and recommendations

Conclusion – taking forward the findings of this review



How we have set out our findings

We have set out our key findings under four broad themes, listed below. These cover the continuum of support, services and provision for children and young people with high needs in Bournemouth – from universal and mainstream support, through targeted services and more specialist provision. We start, however, with some overarching messages about strategy, relationships and funding within the local system.

- 1 Identification of need, assessment and access to support
- 2 Support in mainstream settings and access to targeted services
- 3 Specialist SEND provision and alternative provision
- 4 Preparation for adulthood

Throughout this document, for the purposes of brevity, we use a range of acronyms related to SEND and AP. A full list of the acronyms used in this report are set out in the glossary, which can be found on p.44.



Part 1, overarching messages: Strategy, relationships and funding

Strong strategic and day-to-day relationships are a key feature of the local system. During the review, colleagues commented positively on the strong relationships that had been developed between LA leaders, officers, strategic partners and providers such as schools and other services. Colleagues noted that these were based on high levels of mutual understanding and trust, and we heard several examples where LA officers and providers had worked together to share intelligence and shape support and services to meet local need. A new governance structure has been put in place that brings together key partners across the system. This is a positive development, and colleagues recognise this means the right people are sitting around the table and grappling with the right issues – the next step, off the back of this review, is delivering demonstrable action to tackle those issues.

The recent self-assessment exercise has involved forensic analysis of local data, gathering feedback from a broad range of partners, and a new strategy with some sensible, core principles for supporting inclusion at its heart. This should provide a good organising framework and platform for taking forward the recommendations of this review and other work that is already planned and/or being implemented. As we discuss later in this report, communicating this broadly and pro-actively, translating these strategic principles into what they mean in concrete terms for providers and partners, and securing collective sign-up to them, will be vital first steps in this process.

There is, however, also the need to rearticulate and set out clearly an overview of the local continuum, and the role of each provider and partner in supporting the inclusion and meeting the needs of all young people in Bournemouth. A strong overall message that we heard during the review was that it was not clear to all providers and partners how the continuum of support, services and provision fitted together, what role was to be played and what type of needs were expected to be met by which providers, and how specific types of needs were intended to be met locally. This matters at a strategic level, in terms of ensuring the local continuum is keeping pace with trends and meeting needs effectively, but also on a day-to-day level, in terms of providers and professionals knowing their role and what support they can access. As one school leader put it, '[we need a] greater strategic partnership with all schools within the continuum of provision, to ensure that they are all well gate-kept, robust and efficient tools to maximise capacity to meet needs.'

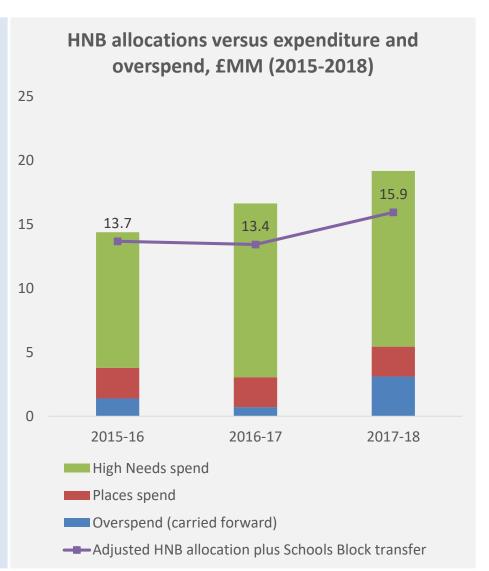


Part 1, overarching messages: Strategy, relationships and funding

The pressures on the high needs block (HNB) are well known. The chart on the right shows the overall HNB allocations over the last three years (the total height of the column), and then adjusts this for (a) the cost of specialist place funding (which is passported to providers) and (b) an overspend that has been carried forward each year. The purple line then shows what is essentially the local area's "high-needs spending power" after these have been considered. This increased in the last year due to a transfer from the schools block — national policy means the scope to do this will be much more limited in future.

During the review, discussions with schools forum were taking place about how to deal with the previous overspend and the pressures on the HNB. Plans have been put forward that will see action taken in order to address the deficit and in-year pressures by the start of financial year 2019-20.

Our review has not focused on how to deal with the overspend. Instead, our work has focused on understanding the pressures on local resources and how demand and pressure can be managed pro-actively in future. We have identified three main pressures on the HNB, which are set out on the next three pages.

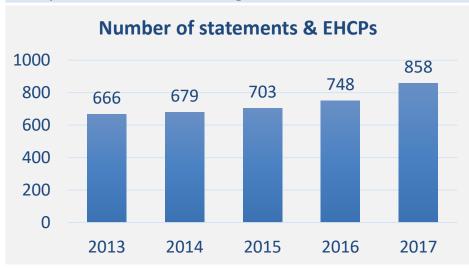


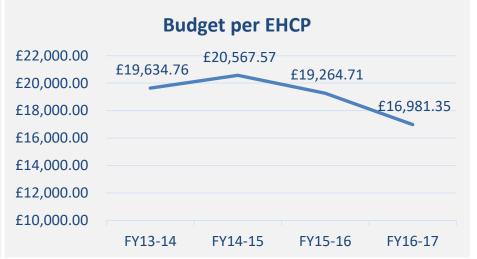


<u>Part 1, overarching messages</u>: Strategy, relationships and funding Pressures on the HNB: (1) Increasing demand for EHCPs

Bournemouth has seen a significant rise in the total number of statements and EHCPs in the last five years. As the left-hand chart shows, the number has risen from 666 in 2013 to 858 in 2017. (Internal data suggest this has continued to rise since.) This equates to a rise of 29% during this time. The trend has accelerated recently, with a 15% rise in EHCPs between 2016 and 2017. This reflects a trend that has been seen nationally. As is the case nationally, a large proportion of the new EHCPs have been for young people aged 16-19. To put this in context, the number of statements or EHCPs for young people aged 16-19 in 2013 was 55, whereas by 2017 this had risen to 166 – an increase of 202%. The increase in numbers of EHCPs for 16-19s accounts for 58% of the growth seen between 2013 and 2017. (An increase from one EHCP for young people aged 20-25 in 2016 to 26 in 2017 accounts for a further 14% of the growth.)

Nevertheless, there is also growing demand for EHCPs across all age-ranges. Over the same five-year period, Bournemouth has seen an increase of 34% among children aged 5-10. Furthermore, all age-groups saw a rise in the last year. The largest were seen among 16-19s and 20-25s, but there were increases of 15% among 0-4s, 11% in 5-10s, and 5% in 11-15s. Since resources are not increasing in proportion to demand, this means that resources are spread more thinly – as illustrated in the right-hand chart, which shows resources per EHCP reducing from £20,500 to under £17,000.

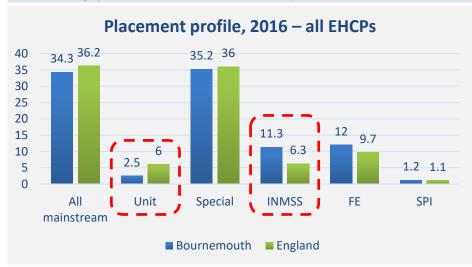


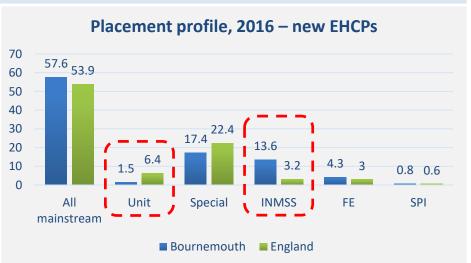


<u>Part 1, overarching messages</u>: Strategy, relationships and funding <u>Pressures on the HNB</u>: (2) Increasing demand for specialist provision

The increasing levels of EHCPs are even more significant since the profile of placements of young people with EHCPs in Bournemouth is skewed towards higher-cost provision. Looking at the left-hand chart, this shows that Bournemouth places a smaller proportion of young people with EHCPs in mainstream schools (34.3%), local special schools (35.2%) and particularly units / resourced provisions (2.5%) than is the case across England. The chart also shows that Bournemouth place a higher proportion of young people with EHCPs in INMSSs (11.3% compared to the national average of 6.3%) – Bournemouth has the 11th highest proportion of pupils placed in INMSSs nationally (the rate for Poole is 12.1%).

This trend is even more pronounced when it comes to newly-issued EHCPs. The data for newly-issued EHCPs is shown in the right-hand chart below. This chart shows that Bournemouth places a higher proportion of young people with new EHCPs in mainstream schools (57.6% compared to 53.9% nationally) and fewer in local special schools (17.4% compared to 22.4% nationally), which may reflect the fact that local special schools are full. The chart also reflects the same trends with regard to units / resourced provision (1.5% placed compared to 6.4% nationally) and INMSSs (13.6% placed compared to 3.2% nationally). The proportion of young people with new EHCPs placed in INMSSs is the fifth highest nationally (the rate for Poole is 9.1%).





<u>Part 1, overarching messages</u>: Strategy, relationships and funding <u>Pressures on the HNB</u>: (2) Increasing demand for specialist provision

The combination of these two factors – increasing rates of EHCPs and the types of placements for young people with EHCPs – is placing considerable pressure on the HNB. The left-hand chart below is based on a comparison of the HNB expenditure in the last two full financial years (2015-16 and 2016-17). It shows that a total of 71% of the increase in expenditure year is accounted for by placements in independent special schools (19%), non-maintained special schools (31%) and Bournemouth special schools (21%). It also shows growing demand for resources for mainstream schools and further education (FE), which is likely to reflect the increased demand for top-up funding, which is a consequence of increased demand for EHCPs, and spend on education other than at school (EOTAS), which is likely to reflect an increase in pupils who are not attending school.

As an illustration, the right-hand chart shows the average spend by Bournemouth on placements for young people with EHCPs in different types of settings. It then compares expenditure based on the current profile of placements with a hypothetical scenario in which the profile of placements is closer to what is seen nationally. It shows that, by supporting c.50 young people in less specialist, more local provision, the difference in expenditure would be between £1.5m and £2m annually. This is included for illustrative purposes only.

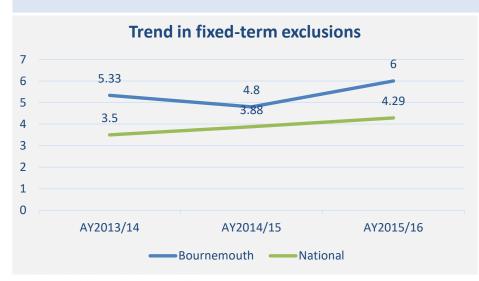
% of increase in £ in last year							
35%	/	31%					
30%	1		i				
25%	100/		21%				
20%	19%						
15%	!		11%				
10%			1	8%	8%		
5%	i						
0%	1						
	ISS	NMSS Bo	ournemouth Bournemouth special mainstream	FE	EOTAS		

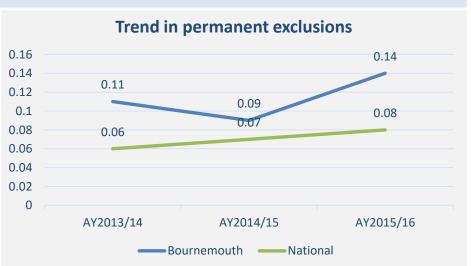
Area of expenditure	Average cost (B'mouth)	Spend based on current placement profile	Spend based on national placement profile	Difference in costs		
Mainstream	£6,222	£1.83m	£1.93m	+£101k		
Units	£23,117	£495k	£1.19m	+£694k		
Special	£22,101	£6.67m	£6.83m	+£152k		
INMSS	£55,073	£5.2m	£2.27m	-£2.93m		
Total		c.£14.2m	c.£12.2m	c.£1.5m- £2m		

<u>Part 1, overarching messages</u>: Strategy, relationships and funding Pressures on the HNB: (3) Rising exclusions

The third area of pressure is the increasing rate of exclusions. The issue here is that the most recent published data relate to the academic year 2015/16, so are somewhat out-of-date. The financial information also shows that less resource was spent on alternative provision in 2016-17 than in 2015-16. Nevertheless, leaving aside some of the issues with the sequencing and timeliness of the published data, the two charts below show a trend in the rates of exclusion in Bournemouth. They show that exclusions, both fixed-term and permanent have traditionally been above the national average and, despite a drop in the academic year 2014/15, they increased more rapidly than is the case nationally in 2015/16. The published data show that, while rates of exclusion from special schools are lower than is the case nationally, the rates for both primary and secondary schools in Bournemouth are higher than the national average.

A recent *TES* article suggested that this trend had continued in 2016/17. Analysis compiled and published by *TES* suggested that the trend of rising exclusions has continued nationally, but also in Bournemouth specifically. This suggested that Bournemouth has seen an increase of 81% in permanent exclusions (from 21 to 38) between 2015/16 and 2016/17. While the numbers are small, if this trend continues, it will continue to place the HNB under pressure.





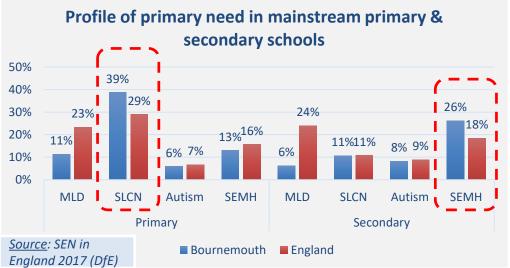
Identification, assessment & access

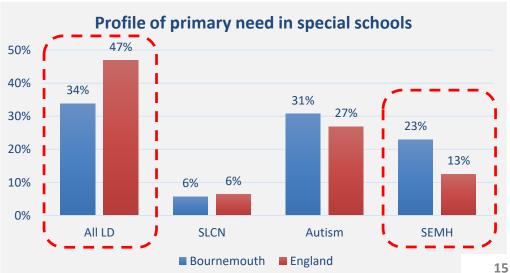
Mainstream support & targeted services

Specialist provision

Preparation for adulthood

The published data show the profile of primary need in Bournemouth is different to that seen nationally. Most notably, a higher proportion of school-age children (the dataset from which this is taken relates to school-age children) in primary schools have speech, language & communication needs (SLCN) as their primary need than is the case nationally (39% vs. 29%). For secondary-age pupils, SLCN is at levels comparable to the national average, but there are higher rates of SEMH (26% vs. 18%). Learning difficulties (LD) are low across all schools, particularly special schools, while autism and SEMH are higher than nationally. Given that autism in Bournemouth primary and secondary schools is lower than is the case nationally, but is higher in Bournemouth special schools, this may suggest that some of these needs are being "displaced" into specialist provision, and that a future priority should be building mainstream schools' workforce capacity around autism. We do not see such a pattern in terms of SEMH (it is high in both secondary and special schools) or LD (where rates are low across all Bournemouth schools). It is important to say that this is not an observation on the overall numbers of children with SEN supported in mainstream — although, as we show on p.12, the proportion of children with EHCPs in mainstream schools in Bournemouth is lower than the national average. Instead, our focus here is on the way in which children with SEN support and EHCPs have their needs identified and understood. Our evidence suggests that these differences reflect issues in the *process* of recording identified need and the *practice* of identification itself, rather than reflecting genuine underlying differences in local need.





Identification, assessment & access

Mainstream support & targeted services

Specialist provision

Preparation for adulthood

<u>In terms of process</u>, colleagues reflected to us that schools and settings make representations about a child's primary need, but there is not a formal process whereby this is moderated (and reviewed as a child gets older) by professionals such as EPs. They considered that formalising the process by which primary need information is recorded, moderated and kept up-to-date would be valuable not only in terms of ensuring holistic assessments of a child's needs, but also in terms of ensuring the local area has the right information on which to base its strategic planning.

Our evidence also suggests that this profile of need reflects inconsistent identification practice. There are two points to raise here.

- 1. The different profile of need at primary and secondary schools the argument put forward here was that support in early years settings and primary schools can be effective at addressing gaps in language development, but may not necessarily have addressed a child's underlying needs. As the child gets older, the nature of those underlying needs may change. In the case of underlying language needs, these may be manifested in different ways, particularly when a child moves to secondary school and is in a very different learning environment. Colleagues argued that, in such instances, a child's underlying needs may not be entirely clear, but what is clear is that they are demonstrating behaviour that is a barrier to their learning. This may account for why those needs are then recorded as SEMH. For balance, it is also important to note the feedback from professionals and parents that schools' ability to identify the underlying needs, rather than respond to the apparent behaviour, was not consistent and could also be behind the apparently high levels of SEMH in secondary and, as a knock-on, in special schools. As we discuss later (p.25), published data show that Bournemouth has higher rates of exclusions of pupils at SEN support, which may indicate exclusions are taking place before underlying needs are being identified. Early years colleagues argued there was little cross-phase work on identification, meaning work to identify needs had to start from scratch when a child moved on.
- 2. The impact of the availability of support on identification practice there was a strong view expressed that the identification of need could be driven by the perceived availability of support. Some (secondary) school colleagues made the point that they would be less likely to identify a child with LD as their primary need as this was unlikely to lead to further support, nor did they feel it was their role to "diagnose" a child as having autism or SLCN.

This suggests that there would be value both in looking at the availability of support, so that there is a clear route to support for all of the four categories of need in the SEN code of practice, but also working strategically with SENCOs to strengthen and agree some core principles, definitions and practices that would support consistent identification of need.

Identification, assessment & access

Mainstream support & targeted services

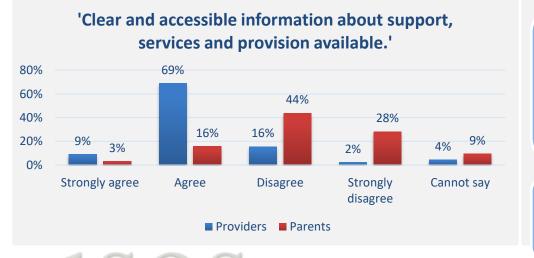
Specialist provision

Preparation for adulthood

There was some positive feedback about the way in which information about the SEN system and local support was made available. Professionals clearly value the local offer being available, and parents (those that were familiar with the local offer) commented positively on the way in which it provided an accessible introduction to the SEN system. There was very positive feedback on SENDIASS from some parents, although some also highlighted the need to strengthen relationships between SENDIASS and the local Parent Carer Forum. Nevertheless, colleagues highlighted the need to strengthen the local offer, raising two points.

- 1. Variable awareness of the local offer some of the parents we engaged, particularly those not involved with the Parent Carer Forum, were not aware of the local offer. Our survey findings (below) show a marked difference between professionals (78% strongly/ agreed that there was clear information about support) and parents (72% strongly / disagreed).
- 2. Making the local offer less of a static directory and more of a practical, signposting tool young people, parents and professionals agreed that the local offer worked well if you knew what you were looking for, but could become a more valuable tool if it provided an overview of the local continuum, and the support, services and provision available for different needs.

We are aware that work is underway currently to strengthen the local offer to make it a more practical, signposting tool.



'You don't have time to trawl through loads of activities to find something that <u>might</u> be relevant to your child. I haven't looked on the local offer website for the last two years.' (Parent) 'There is a clear and defined local offer.' (Special School HT)

'The local offer has improved ... but it is still a bit complicated, it needs to be more self-explanatory. This should be the no.1 priority.' (Young person)

'SENDIASS have been superb.' (Parent)

'[What works well?] Bournemouth local offer web pages ... the local offer and services available to support parents of children with SEND need to be highlighted on the Council's homepage so information is clearly identifiable.' (Primary SENCO)

Identification, assessment & access

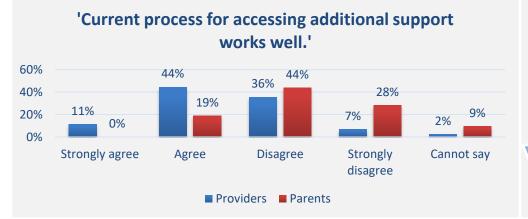
Mainstream support & targeted services

Specialist provision

Preparation for adulthood

We heard a lot of positive feedback about the SEN team. This came from both professionals, who valued having a consistent point-of-contact who knew their school or setting, parents and young people themselves, who valued being listened to during the EHC process. Published data show the Bournemouth SEN team perform strongly – 100% of EHCPs are completed within the 20-week timescale, and Bournemouth are ahead of the national average and similar local areas in terms of converting statements to EHCPs.

Where there were concerns raised, these were about the availability of and access to support. First, there was a general message about the time it takes to get support and the capacity of support services being stretched. Parents described a lack of specificity in the way some EHCPs were written, which they attributed to the lack of available support. Many described having to battle to get the support they felt was needed. Second, there were some concerns raised about the join-up with health services – some inconsistent messages from primary care professionals (e.g. "if a child has an autism diagnosis, they should have an EHCP"), and the need to strengthen the assessment and support pathways for mental health and autism (which is underway). Third, while some were positive, early years settings and schools also described concerns about the process for accessing support. They felt the process was overly reliant on the EHC process – rendering the statutory assessment process a 'money-driven exercise' according to some SENCOs – and that the decision-making process was not sufficiently transparent or consistent. The argued for transparent terms of reference, consistent membership, and stronger core processes around paperwork and triaging requests. It is worth noting that, in 2016, Bournemouth did not make EHCPs for 2.2% of those whom it had assessed, compared to 4.4% nationally. The survey findings reflected this mix of messages: 56% of professionals agreed access to support worked well, but 72% of parents disagreed.



'The valuable bit of learning is that if you do not become a pain to the system you will not get anywhere.' (Parent)

'The support system is too stretched and it is becoming less and less because of everyone's workload.' (EY professional)

'It appears that, as soon as parents challenge decisions or situations, they are resolved ... The decision about whether to initiate an EHCP seems a bit random still. Out-of-panel decisions seem very odd sometimes.' (Primary SENCO)

'Good communication and contact from the LA SEN team and positive working relationships with the SEN caseworkers.'

(Secondary SENCO)

Have to fight for everything ...' (Parent)



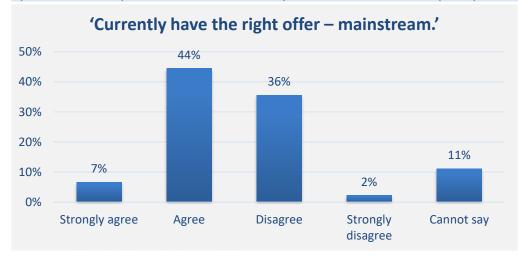
Mainstream support & targeted services

Specialist provision

Preparation for adulthood

We heard positive messages about mainstream SEN support in Bournemouth. Parents and young people described experiences in mainstream settings and schools where they had felt listened to, where there had been effective communication between setting and home, practical adjustments, and the deployment of expert staff. We heard positive feedback about primary-secondary transitions. We visited schools that had built up their capacity and specialism to support pupils with SEND. Some described wanting to provide more support, but being overwhelmed by increasing needs and the diminution of other services – they argued more flexible support and training would help them to meet a wider range of needs.

At the same time, we heard examples that suggested this is not consistent. From parents, we heard examples of placement breakdowns, informal / illegal exclusions and reduced timetables, often caused by a lack of understanding and adjustments. Parents were concerned about a lack of support for academically-able children. For young people, bullying was a significant concern — not just experiencing it, which some had, but whether the school had applied their anti-bullying policy to deal with it effectively. Some young people felt teaching staff had treated them differently or been bullying towards them. Ensuring there are clear expectations, backed up by appropriate training and access to support, is vital to meeting the needs of young people early and preventing pressure on specialist and statutory services. The survey responses from providers, below, bears out this somewhat mixed picture.



'My son has an EHCP and support was very good when he was at secondary school ... communication with the school was excellent.' (Parent) 'He had great support at nursery and primary school... his senior school have been brilliant and support him in so many ways.' (Parent)

'I feel support is only as good as the SENCO at the time. We had some terrible teachers throughout the years who lack even a basic understanding of autism in girls. I feel all teachers should be educated in this.' (Parent)

Identification, assessment & access

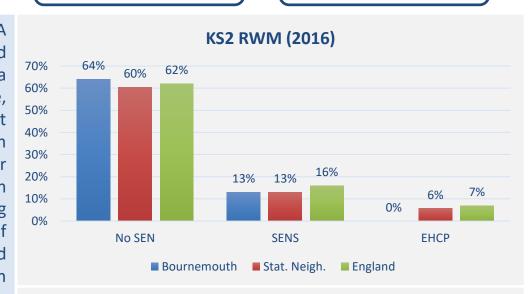
Mainstream support & targeted services

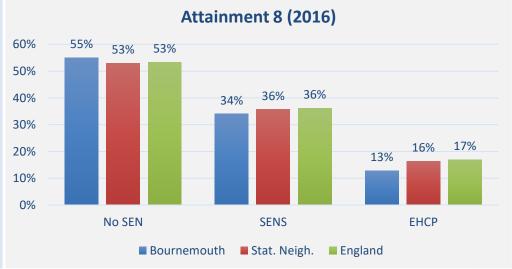
Specialist provision

Preparation for adulthood

There is work in train to strengthen mainstream SEN support. A significant recent piece of work has been the "graduated response review", which aims to ensure that there is a consistent approach to graduated, early SEN support. Likewise, work has been undertaken to map the workforce development around SEND offer across Bournemouth. In addition, an approach has been rolled out whereby EPs and other professionals work with local networks of SENCOs within existing multi-academy trusts, local clusters and other existing partnerships. These initiatives are welcome, and, if implemented consistently, should strengthen expectations and build mainstream capacity to identify and meet needs. Such approaches should include early years and school SENCOs.

There is also, however, the need to engage leaders as well as SENCOs. This was a strong message from SENCOs, who argued that understanding of SEND among school leaders was variable. As the charts we have included on the right show, support for children with SEN is a whole-school improvement issue, rather than something that can be tackled in isolation. We have presented the charts on reading, writing & maths (RWM) at KS2 and Attainment 8, but the same trend is seen for Progress 8 and other measures: namely that Bournemouth pupils with no SEN outperform their peers in similar LAs and nationally, but Bournemouth pupils with SEN (support / EHCP) do less well.





<u>Source</u>: National curriculum assessments at KS2 2016, Revised GCSE and equivalent results in England 2015 to 2016 (DfE)



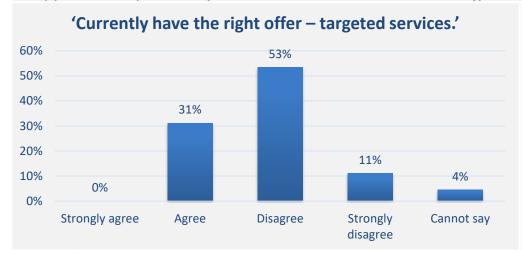
Mainstream support & targeted services

Specialist provision

Preparation for adulthood

A very strong message throughout this review has been the lack of a "core offer" of formal, borough-wide targeted SEND services. Colleagues argued that one of the reasons for the increased demand in EHCPs and special school places is because the gap between mainstream and more specialist support is too big. There is some support available, and some of this is valued very highly – the EP advice surgeries, and the autism outreach offer from Portfield School. The concern is that there is very little formally commissioned and planned outreach or targeted services, and thus access to additional, targeted support is ad hoc. Furthermore, colleagues have argued that some of the support available focuses on children at crisis-point – it does not build capacity to support a wider group of children in the setting or school. There was a strong desire, particularly among primary and special schools, to develop a consistent, borough-wide core outreach offer with a focus on building capacity, particularly around SEMH and autism.

There were mixed messages about access to other targeted services. Feedback on the quality of these services – SaLT, CAMHS, sensory impairment support – was generally positive, from parents and professionals. Parents and professionals recognised, however, that the capacity of these services were severely strained. Professionals in these services noted that there was a lack of clarity about the continuum of support, services and provision – they felt that often schools and settings felt their responsibility stopped at the point they made a referral. There were strong messages about more joint commissioning of SaLT and SEMH support.



'[Need] support for specific needs advisors available to support you with SEN – e.g. autism support, behaviour support.' (Primary SENCO)

'The loss of the Learning Support
Service means that there was a loss
of centralised expertise for support.'
(Secondary SENCO)

"A more considered and strategic
"early intervention" offer – a
collaborative approach that involves
schools, children's social care and
health ..." (Special school leader)

'EP service – including telephone consultation line [works well].' (Primary SENCO)

'My son, at secondary school, has emotional difficulties, but getting support with this before the worries escalate is nigh on impossible, via school and GPs alike.' (Parent) 'CAMHS intervention is very difficult to access as the thresholds are very high and early intervention is needed.'

(Primary SENCO)



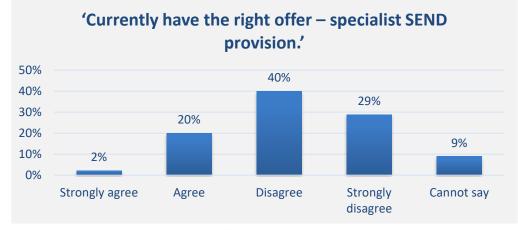
Mainstream support & targeted services

Specialist provision

Preparation for adulthood

Current specialist SEND provision is viewed positively by professionals and parents. There was positive feedback from parents and young people about placements in current specialist provision (units and special schools). This was echoed by professionals, who commented on the quality of support available and highlighted examples of how this had been developed pro-actively. The work with some of the "partnership" local non-maintained schools, such as Portfield, to develop a cost-effective offer to meet a gap in local provision (in this case support for young people with high-functioning autism) and the development of a reintegration offer between Portfield, Kingsleigh Primary and Bourne Academy are good examples of this.

Colleagues noted that the current model of specialist provision was a sensible one for the local area – the model of having an all-needs special school (Linwood) with separate specialist SEMH provision. The proviso, however, is that there must be sufficient capability and capacity to meet the most complex needs – otherwise, this will increase strain on local provision, unnecessary placements in the independent sector and pressure on resources. Discussions are taking place about what the offer of specialist provision, particularly SEMH, needs to look like in the future, which is positive. Many mainstream colleagues, however, feel that there are insufficient specialist places (hence, as shown below, 69% of professionals disagreed that there is the right offer currently) – and may not be aware of the limitations on LAs' ability to expand provision. Encouragingly, there is growing understanding that addressing the pressure on specialist provision will require greater capacity and support for pupils with SEND in mainstream.



'This is the best school I have been to — I've had the fewest problems, I have more confidence, and I am now moving back into a mainstream setting with more strategies for learning and coping.' (Young person) 'My child got into the Riggs unit at Malmsbury Park – it is brilliant, really good.' (Parent)

'Not enough specialist provision. Children having to "make do" in inappropriate mainstream settings.' (Primary SENCO)

'Provision that sits between mainstream provision and high needs provision to provide an appropriate environment for children who require more support than mainstream provision but who are not best served in high-needs provision.' (EY leader)

Identification, assessment & access

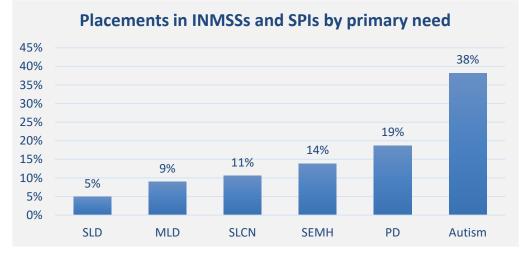
Mainstream support & targeted services

Specialist provision

Preparation for adulthood

Alleviating the pressure on specialist SEND provision will require three things.

- 1. First, there needs to be greater support for the reintegration of young people back into mainstream settings. Published data show that 20 children with EHCPs moved from mainstream to special settings during 2016, but only two moved from special to mainstream during the same period. The work between Portfield, Bourne and Kingsleigh schools is a positive development, but needs to be built upon with clear protocols and an offer of support for pupils moving back into mainstream settings.
- 2. Second, as noted earlier, Bournemouth has comparatively few units (and pupils placed in units) relative to other LAs professionals and parents expressed an appetite for developing more of this provision to meet a wider range of needs locally. Again, there are discussions taking place with schools about developing this type of provision.
- 3. Third, there was a strong view about the need to reverse the trend of increasing placements in the independent sector where this is due to a breakdown or lack of local alternatives. Again, there are developments in train to strengthen the processes for deciding upon and monitoring INMSS placements. LA officers and professionals were of the view that, with the right capacity and provision locally, these needs could be met through local provision. There was a strong view that it was vital to develop more therapeutic support to meet complex SEMH needs through local provision.



What do we know about out-of-borough placements?

Internal data suggest that 12% of young people with an EHCP are placed in the independent sector — 109 in INMSSs, and 9 in specialist post-16 institutions (SPIs). The chart on the left shows that a high proportion (49%) of these young people have C&I needs (autism or SLCN), 19% have physical difficulties (PD), 13% have learning difficulties (LD, moderate or severe), and 14% have SEMH. The majority are of secondary-age or post-19. We also know, however, that some will have been placed in cost-effective out-of-borough provision that has been developed proactively to meet gaps in local provision (e.g. Portfield's offer).

Identification, assessment & access

Mainstream support & targeted services

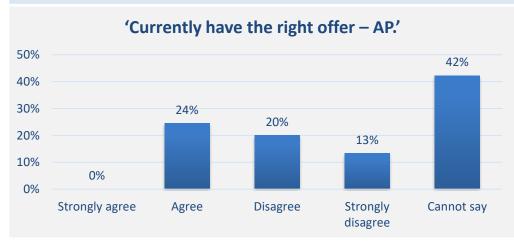
Specialist provision

Preparation for adulthood

There was a strong view from professionals that the current offer of AP was not working effectively. There were four parts to this.

- 1. Colleagues, particularly secondary schools, emphasised a lack of preventative and turnaround provision for children with SEMH and those at risk of exclusion they recognised Tregonwell's secondary capacity was limited in this area.
- 2. Colleagues noted that the changing levels and nature of demand raised questions about the nature and shape of the offer for specialist SEMH provision and AP they emphasised the need to develop a more flexible range of AP locally, specifically with more specialist therapeutic support available for young people. Colleagues also considered it would be useful to rethink the mix of pupils with EHCPs and in AP, currently supported in the same setting. Encouragingly, discussions to reshape provision to meet local needs are underway, and we heard a strong message from leaders about using local sites to respond to local need.
- 3. Colleagues also highlighted a perceived lack of rigour among some independent AP providers, hampering reintegration.
- 4. There was a strong message about the need for collective responsibility and stronger processes (managed moves, use of AP).

As such, there is both the need and opportunity to rethink the current processes and continuum around AP / SEMH. Encouragingly, there appears to be a willingness to do this: a new "Reducing Exclusions Working Group" was recently established.



'Greater outreach support, more preventative support for students who are at risk of permanent exclusion, more alternative provision for permanently-excluded students.'

(Secondary leader)

'[Need] A more robust CAMHS.'
(Primary SENCO)

'Lack of alternative provision is at crisis point in this area.'
(Secondary leader)

'[What are the top 3 priorities?] Alternative provision x3.' (Secondary leader)

'CAMHS intervention is very difficult to access as the thresholds are very high and early intervention is needed.' (Primary SENCO)





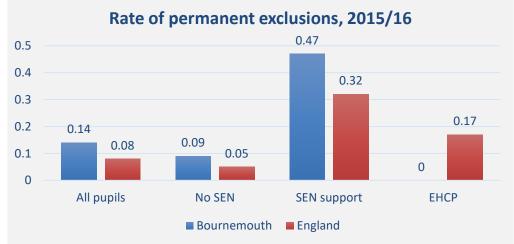
Mainstream support & targeted services

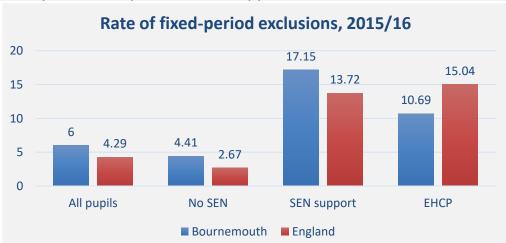
Specialist provision

Preparation for adulthood

One argument that was put to us during the review was that, in parts of the local system, there was a culture of dealing with the presenting behaviour of a child, rather than identifying the underlying need. This has been a central thrust of the SEN reforms, particularly the re-naming of what was previously "behavioural, social and emotional difficulties" (or BESD) as SEMH, and links back to our discussion of the consistency of identification practice earlier in this report (p.16).

The published data provide some corroboration (although, as noted earlier, the most recent data are from the academic year 2015/16). Colleagues argued that Bournemouth has a good record of not excluding pupils with EHCPs (and previously statements). The data below show that this is the case for both permanent and fixed-period exclusions, where the rate in Bournemouth is lower than is the case nationally. The data also show, however, that for pupils at SEN support, the rate of both permanent exclusions (0.47 compared to 0.32) and fixed-period exclusions (17.15 compared to 13.72) is higher in Bournemouth than is the case nationally. This does add weight to the argument that, in some instances, pupils' behaviour is being seen as the problem, rather their underlying needs identified and effective, early support being put in place. We also know that this is placing an additional strain on local specialist SEMH provision / AP (in Tregonwell), with pupils entering via the AP route and then being found to require EHCPs and specialist SEND provision, which has a knock-on effect on the availability of AP and preventative support.







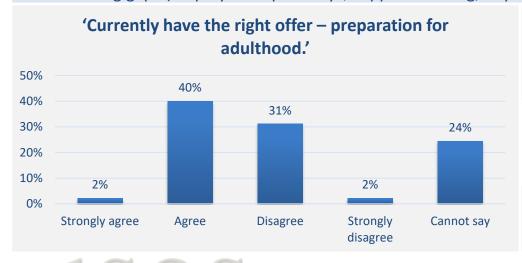
Mainstream support & targeted services

Specialist provision

Preparation for adulthood

There was positive feedback on the quality and range of post-16 education options. Colleagues argued that Bournemouth was relatively well provided for in terms of post-16 study options for young people with SEND — both in terms of the offer at local colleges, but also the development of new pathways through Summerwood and CHI. As noted earlier, the number of post-16 EHCPs is rising, and this will put a premium on continuing to have a flexible and broad range of post-16 and post-19 pathways for young people to enable their needs to be met through effective, local packages of support wherever possible. For many parents whom we engaged, what happens after education or when a young person turns 18/19 was 'the big question mark'.

Professionals also reflected on the need to strengthen the transition from children's to adult services, and the broader join-up around preparing all young people with SEND (including those who will not meet the criteria for adult services, those on SEN support) for adult life. Work has been undertaken to strengthen transition between children's and adult services, but turnover in key roles has meant impact has been limited. First, it will be vital to strengthen and embed multi-agency process for identifying and planning how to meet young people's needs early, particularly those with complex needs that are known to professionals. Second, it will be necessary to develop a more coherent "joined-up" offer across education, care, health and other services – both in terms of addressing gaps (employment pathways, supported living, day care), but also ensuring all services understand this offer.



'[Need] more opportunities for further education and training post-18 ... and to socialise post-16.' (Parent)

'Individual projects, for example Summerwood and the CHI, are having a real push with promoting employability and study.' (Special school leader) 'I don't want to close doors on how far I will go — I've had a chequered education career, but I am now on the right track.' (Young person)

'[Need] Transition from school and at 18, particularly around social care and mental health needs ... lack of opportunities for supported living for adults with SEND.' (Post-16 SENCO)

'Gaps in provision for 20-25 age group ... improving range of outcomes are emerging around employment and independence, but older young people still struggle with transition from post-16 provision.' (SPI leader)

Identification, assessment & access

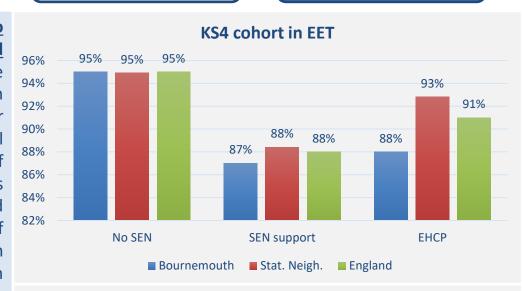
Mainstream support & targeted services

Specialist provision

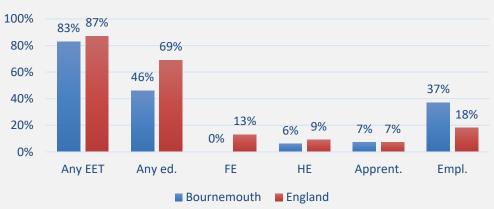
Preparation for adulthood

In terms of outcomes, we see a similar pattern with regard to destinations after KS4 and KS5 as that which we highlighted regarding attainment at KS2 and KS4. The upper chart on the right shows that, while the overall rate of KS4 pupils in education, employment or training (EET) two terms of after completing KS4 is in line with similar LAs and the national average for pupils with no SEN (95%), the proportion of Bournemouth pupils at SEN support (87%) and with EHCPs (88%) in EET is lower than for their peers in similar LAs and nationally. The lower charts then shows the types of destinations for KS5 pupils with SEN (support / EHCPs) from mainstream schools. This shows that, while a higher proportion Bournemouth pupils go into employment destinations, a lower proportion overall go into education or any EET destination.

It is vital that there are strong processes for gathering information about young people's aspirations and using these to plan pro-actively. The young people to whom we spoke described aspirations including script-writing, film directing, drama, broadcasting, creative writing, illustration, web design, video game design, building computers, mechanics, engineering, teaching, owning a business, cafés, forestry, and being a pilot. These young people, and others with similar ambitions, are in the system now. The challenge is ensuring there are pathways that enable them to pursue these aspirations.





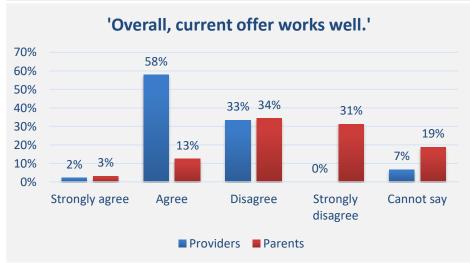


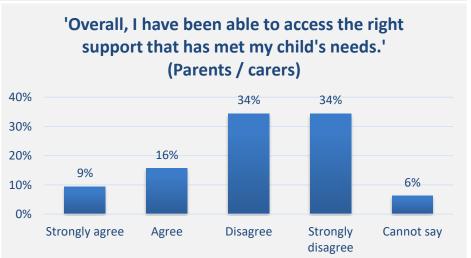
Part 1, overarching messages: The current offer overall

In our survey, we asked professionals and parents whether they felt the overall offer worked well. As with the other two questions (about information and access) that we asked of both, we see a similar pattern: namely, the majority (in this case 60%) of professionals agreeing that the current offer works well, while a similar proportion of parents (66%) disagreed. We would highlight two points here.

First, while it is encouraging that the majority of professionals who responded to our survey were positive about the overall offer of local support, services and provision, this also suggests that there may be a lack of join-up between the everyday experience of a well-run local system and some of the significant strategic pressures, challenges and priorities facing the local area. The recent self-evaluation exercise and the discussions with strategic groups like schools forum appear to have helped to raise awareness of these issues. In taking forward the findings of this review, it will be important to ensure that there is clarity about how changes to different services and provisions fit together and form a coherent strategic approach and continuum of high-needs support, services and provision.

Second, it is important to recognise the frustration felt by some parents: the right-hand chart shows 68% strongly/disagreed that they had been able to access the right support to meet their child's needs.





CONTENTS

Introduction – Background and aims of the review

Part 1 – Key findings

Part 2 – Options and recommendations

Conclusion – taking forward the findings of this review



PART 2: OVERARCHING RECOMMENDATIONS

Identification, assessment & access

Mainstream support & targeted services

Specialist provision

Preparation for adulthood

In this section of the report, we have made 18 recommendations, that we have developed through discussions with LA officers and colleagues who took part in the review. These recommendations are specific to Bournemouth, but we have framed them so that they could form the basis of further discussions on how to join-up with Poole (as well as Christchurch). It is important to recognise that what is needed overall is a whole-continuum approach: it is not the case that individual recommendations can be taken forward in isolation, but rather all parts of the continuum must be aligned to a strategic plan for meeting current and future needs.

- 1. <u>Develop core strategic principles for supporting inclusion across Bournemouth and foster collective sign-up to these</u>. The recent self-assessment exercise has led to a new strategic document with four key outcomes / principles. The next step is to build on these, communicate them broadly to partners across the system, and translate them into what they mean in concrete terms for providers, professionals and partners. In other words, it must be clear to all partner agencies, professionals in schools and settings, specialist services, parents and carers the collective principles of supporting inclusion in Bournemouth and what this means for their role and institution. Broad and explicit sign-up to these principles should be sought, and revisited regularly. Other local areas with whom we have worked have argued strongly that this is the foundation for developing a new high-needs approach.
- 2. <u>Build on the new governance arrangements to drive collective and collaborative action</u>. As noted, the new arrangements should provide partnership-based strategic governance of the local high-needs strategy and continuum. The groups involved have a key role to play in taking forward the findings and recommendations of this review. In addition to this, first, it will be necessary to ensure that schools and settings, leaders as well as SENCOs, are represented on these groups and that there are strong communication links to wider groups of school leaders and staff (phase associations, SENCO networks) so that practice and support in mainstream settings is at the heart of the new approach. Second, there needs to be a strong, strategic role for the Parent Carer Forum and young people, with opportunities for strategic co-production on key issues (hallmarks of mainstream inclusion, developing post-19 pathways) identified and used to foster a central role in strategic developments. One suggestion put forward was having a parent and young person champion embedded with the SEN team, for example one day per week.
- **3.** <u>Strengthen joint working between education, health and social care</u>. Identify priority areas where greater join-up would have greatest impact (e.g. key messages from frontline staff, contribution to EHCPs and complex needs cases, joint commissioning for SaLT and SEMH support). Ensure SEND has a clear champion, linked to the governance structure, within key partner organisations.



- 1. <u>Strengthen identification practice and recording processes</u>. As noted earlier, the profile of primary need in Bournemouth may reflect issues of both process and practice. To address the former, we suggest making a small adaptation to existing panel / decision-making processes so that professionals (EPs, SEN team etc.) consider and agree how a young person's primary need is to be recorded before it is entered onto the SEN database. We also suggest that this is reviewed as necessary through annual reviews. To address the latter, we suggest that work is undertaken through the refreshed SENCO networks to strengthen the consistency of identification practice potentially through some broader cross-phase work, that could be part of a Strategic School Improvement Fund (SSIF) bid we know other local areas have submitted successful bids for strengthening SEND and whole-school improvement.
- 2. Adapt the statutory assessment process in light of feedback to improve transparency and consistency. First, respond to feedback from some (by no means all) that the panel process lacks transparency and consistency. Ensure there are consistent and transparent thresholds, consistent membership and agreed terms of reference, and clear processes for sharing information and triaging decisions ahead of panel meetings. Second, once the immediate focus on EHCP conversions is over, build into the assessment process more strategic dialogue between the SEN team and providers so that, where providers say they are not able to meet needs, there can be a "what would it take?" discussion that could, with sufficiently flexible support, enable more needs to be met in local, non-specialist, non-statutory provision.
- 3. Develop the local offer into a strategic overview and practical, signposting tool for professionals, parents and young people. First, as noted earlier, some of the information (specifically about the SEN system) set out in the local offer is valued by parents the challenge is ensuring that it is publicised widely, particularly within universal services, to families coming into contact with the SEN system for the first time. Second, building on this, it will be necessary to develop the aspects of the local offer that set out available services and provision so that this provides a clear overview of the local continuum, showing different levels of support available for specific categories of needs, when and how to access them so that the local offer becomes less of a directory and more of a practical, signposting tool. Linked to this, it will be vital that the local offer provides information about future choices and support in a form that is accessible to young people.
- 4. <u>Consider developing a route to access small, time-limited, non-statutory top-ups</u>. Colleagues argued that the current approach, whereby top-up funding is dependent on the EHCP process, can mean support is delayed and is likely to be increasing demand for EHCPs. We suggest that there may be merit in exploring alternative, time-limited forms of top-up funding (from the same overall resources) as other local areas have developed as an alternative form of early support in clear-cut cases.



- 1. <u>Develop a consistent set of expectations of mainstream inclusion and SEN support</u>. The graduated response review should provide a platform for setting out some explicit principles and expectations of effective inclusion and SEN support in mainstream settings. (This may also offer opportunities for strategic co-production with young people and parents.) Ensure that this is backed up by a clear and accessible offer of training and professional development (again, the planned workforce mapping exercise should provide a useful platform). Ensure that the effectiveness of this universal offer is overseen at a strategic level, and is linked to targeted support and challenge, including around whole-school improvement. (This is another SSIF bid opportunity.)
- 2. <u>Continue to strengthen support for SENCOs, linking this to strategic local priorities</u>. The approach of EPs working with groups of schools through "SENCO circles" is a sensible one, and should offer a platform for supporting high-quality inclusion practice. At the same time, there is an opportunity to refresh the borough-wide SENCO networks, ensuring that these discussions are linked to strategic priorities as well as practice enhancement, so that they are helping to build mainstream capacity and reduce pressure on statutory and specialist services. Work with SENCOs to shape the agenda and respond to areas where they would welcome support.
- 3. Develop a formal "core offer" of outreach / targeted support. This was one of the strongest messages we heard during the review, and the lack of support between mainstream and specialist provision was seen as a key factor in the growing pressure on the HNB, both in terms of demand for EHCPs, special school provision and exclusions. Support around SEMH and autism were highlighted as two pressing areas, but colleagues also noted the value of having support from professionals with expertise in cognition & learning. An equally strong message was that a future outreach offer must be formally planned and commissioned (so that there is a clear offer of support to settings and schools), must focus on building capacity through observation and working alongside staff (rather than only working with young people at crisis-point), and must support around SEN and to prevent exclusions. There are different ways this could be developed provided centrally, commissioned from local providers, or funded jointly by the LA and schools collectively. There should also be consideration of how this fits with existing support (e.g. Portfield's outreach offer) and when it comes to joining up with Poole (where there is already a commissioned outreach offer).
- **4.** <u>Consider opportunities for joint commissioning of targeted support</u>. There was a strong message about the need to rethink how SLCN and SEMH support was arranged, and how specialist support (including from targeted health services) was commissioned. We suggest that the next step is redefining how the continuum in these areas should operate, what support should be available at what level, and the expectations of all providers, and then using this to identify opportunities for joint commissioning to fill gaps.

Identification, assessment & access

Mainstream support & Specialist provision

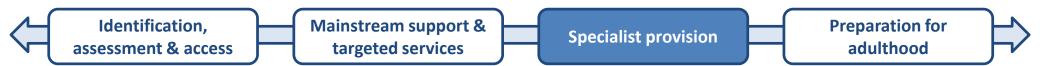
Preparation for adulthood

The first two recommendations here focus on creating capacity within local specialist provision by meeting needs earlier.

- 1. <u>Consider developing additional SEN units</u>. There was strong support among LA officers, professionals and parents for developing more local unit provision. We suggest that work is done to consider the cohort of pupils in INMSS provision (or in special schools, where this would create additional capacity to reintegrate those placed out-of-borough), and, on a trial basis, commission some unit-style provision to support these young people. Our analysis suggests autism and SEMH are the areas where this is needed. We know work is underway to develop this analysis further, using LA intelligence, and to explore options with prospective providers. During the review, we shared the example of one local area that had successfully established two resource bases for pupils with high-functioning autism, who were previously having to go into out-of-area provision, and recouped the costs within three years.
- 2. <u>Develop reintegration projects and protocols</u>. Key to easing pressure on the HNB will be creating capacity to meet needs in less specialist provision, which will involve creating capacity in local special schools to meet the needs of pupils who are / would be placed out-of-borough. Part of this is developing units, but part of this is also developing a more effective approach to reintegration. Work involving Portfield, Bourne and Kingsleigh is already underway. We suggest that this is built upon, with a clear offer of reintegration support and clear protocols agreed to increase the proportion of young people moving back into mainstream.

Recommendations (3) and (4) then focus on how local specialist provision can meet the most complex local needs.

3. Establish a collective dialogue among specialist providers. During the review, we shared the example of a local area that had previously been contending with rising rates of out-of-area placements. They found that the local special schools had said individually that they could meet the needs of the young people in question. The local area responded by facilitating a collective dialogue between specialist providers, with funding devolved to them, to encourage them to consider whether and how such needs could be met through local provision. They found this had enabled them to meet the needs of young people who had previously been placed out-of-area more swiftly, efficiently and cost-effectively, and had also facilitated collective problem-solving and sharing of practice between schools. We suggest that a similar approach could be adopted in Bournemouth (and potentially, in time, the wider East Dorset area), with providers working collaboratively to consider complex cases, but also medium-term trends and priorities so that the local offer can remain responsive and attuned to local needs.



4. Continue to develop the new approach to overseeing INMSS placements. Work has begun to look at a new approach for deciding upon and monitoring placements in the independent sector. (This is not because there is anything wrong with these placements, but rather than they can be, on average, more expensive than local provision, and it is important that decisions about placements in this sector are planned and appropriate. As noted earlier, high and increasing rates of placements in this sector has been a significant source of budgetary pressure.) This is a sensible approach, and should be built upon. During the review, we shared the example of a local area that had responded to a similar financial challenge to the one facing Bournemouth, and which had responded by agreeing (a) some core, local strategic principles, (b) developing a wide range of unit provision, and (c) strengthening their oversight of INMSS placements. In terms of the latter, they had cut down on INMSS placements straight from mainstream settings, put in place outcomes-focused contracts (with clear exit and reintegration criteria built in), and had focused on young people approaching key transition-points and developing local alternative support plans. In Bournemouth, we note than 41% of those placed in the independent sector are aged 11-15 and 20% are aged 16-19. We would advocate building on the existing approach to INMSS decision-making and monitoring to build outcomes-based commissioning and pro-active transition-planning.

The final recommendation we make here relates to AP, but also concerns the interface between the SEND and AP systems.

5. Foster a new model of "collective responsibility" for pupils at risk of exclusion and in need of AP. A strong message throughout the review concerned both the need, but also the opportunity, to revisit the current continuum of support for pupils at risk of exclusion or who required AP. First, we suggest that the willingness of colleagues, particularly secondary schools, to do this together offers and opportunity to develop a local model of "collective responsibility", with devolved funding and overall responsibility for commissioning and funding placements in AP. Second, this may then offer opportunities to shape further the local offer of support, defining effective, early support and mainstream practice around SEMH and building on ongoing discussions about the future shape of local AP. Third, there was a strong message put forward that local provision needed to be developed with greater access to therapeutic support, potentially something that could be planned and commissioned jointly between local health and education services. This is a broad and challenging agenda, but we know from national research and local practice that such collective responsibility models have been effective in reducing exclusions and improving outcomes. We also know of some local areas that have, through collaboration between the LA and school leaders, developed successful SSIF bids to improve local SEMH support.



- 1. Strengthen the processes for transition between children's and adult services and for broader preparation for adulthood. Work is underway to strengthen the process of transition in adult services for young people known to children's social care. Ensuring that there are effective (and ideally joint) processes for identifying needs early, making decisions about future pathways and putting in place effective support for the specific group of young people who will transition into adult services is important. Likewise, it is vital that there is greater understanding of what different services are able to offer, so professionals can plan and describe the overall, Bournemouth-wide offer currently, professionals working in one area (e.g. education) will know what support is available there, but will not be as familiar with the offer of support in adult social care or other service areas. Having a clear and joined-up offer is crucial to planning local, cost-effective multi-agency packages of support for young people with complex needs. At the same time, however, it is important that the transition process for this specific group of young people is located within a broader framework for supporting all young people with SEND, both those with EHCPs and those on SEN support, to prepare for adulthood. From a process perspective, this will involve ensuring that there is an effective approach to annual reviews, which is applied consistently by SENCOs, which captures the aspirations of young people with SEND and uses this to inform planning of their pathways and broader strategic commissioning.
- 2. Continue to develop the local preparation for adulthood offer. As noted in Part 1, while there are positive aspects of the local psot-16 and post-19 offer, there are also some areas for development. As demand (in the form of numbers of post-16 young people with EHCPs) is expected to continue to increase, it will be important that there are the right range of flexible, effective, cost-effective and local pathways for them to pursue. This will include pathways into paid employment and supported internships, a wide range of education study programmes (backed up by providers who understand and can support the needs of young people with autism, SEMH and complex needs), and a responsive package of social and care support young people were particularly keen on ensuring there were sufficient opportunities to socialise with friends and peers, and support around their own finances to enable them to live independently. This will, in turn, require pro-active leadership and co-ordination of this agenda, to convene partners (education, social care, health, housing), approach employers and create new supported internships programmes and employment opportunities (Bournemouth is well-served with regard to local employers, and the Chatterbox group's work with a large, national employer is an example of such collaboration that can be built upon).

CONTENTS

Introduction – Background and aims of the review

Part 1 – Key findings

Part 2 – Options and recommendations

Conclusion – taking forward the findings of this review



In the preceding section, we have set out a total of 18 recommendations that respond to the opportunities and challenges raised by colleagues during the review. Some are overarching recommendations, concerned with the strategic clarity, governance and relationships within the local system, and some relate to specific aspects of the local continuum of high-needs support, services and provision, and are set out under our four themes.

These recommendations fall into two broad categories – (a) improvements in the day-to-day systems, processes and operations of the local SEND system, and (b) re-shaping specific services or provisions to meet need and manage demand more effectively in the longer term.

The first set of recommendations – incremental improvements in the day-to-day running of the local system – are actions that can be taken forward immediately, and indeed in many instances work is already underway.

- <u>At a strategic level</u> communicate, agree and secure broad sign-up to some core strategic principles for supporting inclusion; identify specific projects that would benefit from greater strategic co-production with parents and young people; and strengthen processes that support partnership working across education, health and care.
- <u>Identification, assessment & access</u> strengthen processes for recording data on needs; work with SENCOs to agree and build capacity for a more consistent approach to identifying needs; adapt assessment and decision-making processes to improve transparency, consistency and foster strategic dialogue with providers; continue to develop the local offer as a practical signposting tool, working with professionals, parents and young people.
- <u>Mainstream support & targeted services</u> building on the graduated response review and workforce development mapping, articulate core expectations of what good mainstream inclusion and SEN support looks like and ensure this is backed up by an accessible training offer; refresh the SENCO networks through work in clusters; build on existing reintegration projects, and develop clear protocols and support for young people moving back into mainstream.
- <u>Specialist provision</u> establish a collective dialogue with specialist providers (special schools, units); continue to develop new arrangements for deciding on, monitoring and planning transition from out-of-borough placements.
- <u>Preparation for adulthood</u> strengthen the transition-planning process; continue to develop a clear, joint offer.



Many of the recommendations in this first group can be taken forward now and are largely cost-neutral – in the sense that the resources required to implement them are largely the time of officers with strategic responsibilities for SEND and high-needs, and partners across the system.

While these actions are important, however, it is the second set of recommendations that are likely to be most transformative in terms of the local area's ability to fill gaps in support and manage demand effectively (and cost-effectively). This second set of recommendations, which relate to actions to re-shape aspects of the local continuum, are likely to require some up-front investment. We suggest, however, that this investment will enable the local area to meet needs more effectively and cost-effectively in the future, and will therefore cover its own costs over time. Below, we have set out our estimates of the costs of some of the key recommendations. On the following page, we have set out an illustration of the costs and returns on this investment over a five-year period from when they are implemented.

£250k

Developing a core offer of outreach / targeted support

Based on 3-4 full-time equivalent posts: specialist staff in key areas of need including SEMH, communication & interaction, cognition & learning. (Comparable to other LAs.)

£320k

Developing additional unit capacity

Based on commissioning 2x 8-place units (e.g. one for autism, one for SEMH), at the cost of £20k each (revenue costs; capital costs would be separate).

£50k

Additional therapeutic input

Based on commissioning 1x full-time equivalent specialist therapeutic professional.

c.£620k

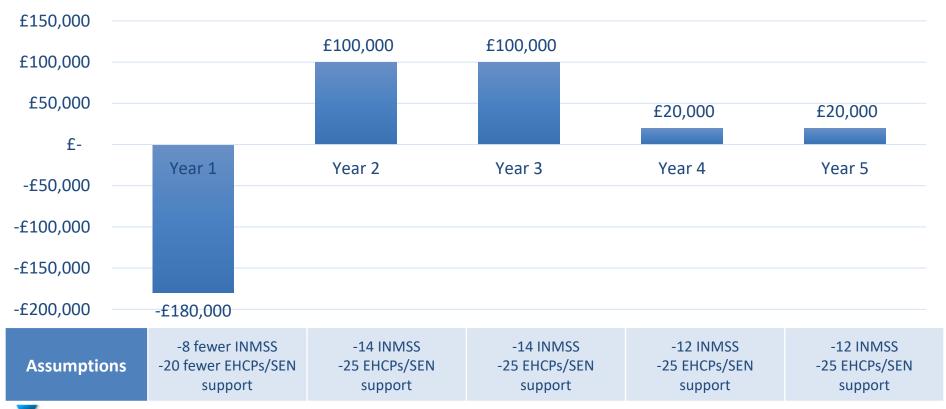
Indicative total cost

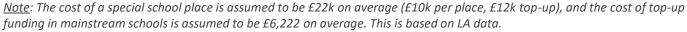


Illustration of the financial implications of these recommendations – investing to meet demand effectively

Amounts are net of costs of implementing recommendations.

Our assumptions are based on the recommended actions enabling needs to be met at an earlier, less specialist stage. Thus we have assumed (a) a reduction in placements in INMSS, with more children supported in local specialist provision, and (b) that outreach helps to prevent the escalation of needs of children at SEN support and those with EHCPs in mainstream requiring more specialist provision. (Note that this is not a projection, but rather an illustration of potential costs savings.)



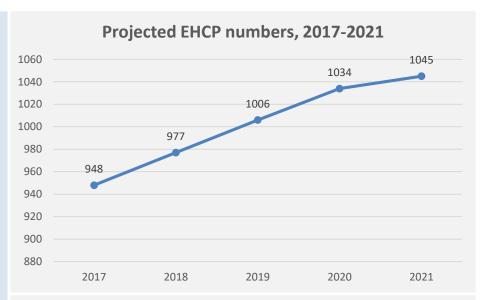


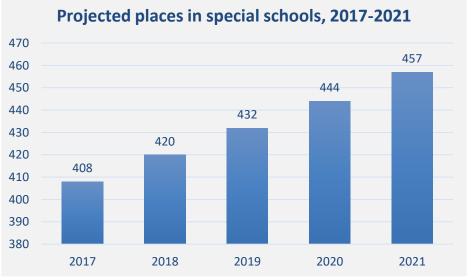
Conclusion: Future needs

During the final stage of the review, we drew together some projections of future need. There are a number of ways of doing this, and a number of scenarios we could have modelled. We decided not to base these projections on the assumption that the rate of growth in EHCPs continues in the way it has in Bournemouth over the last year, given that this type of demand pressure is what we are seeking to avoid.

Instead, the upper chart shows projections of EHCP numbers over the next four years that are modelled on the assumption that the rate of growth seen by each agegroup matches the national rate of growth between 2010 and 2016. In other words, this reflects the growth that has been seen in Bournemouth and nationally during this period, but balances the sharper recent growth with the steadier growth seen earlier in this period. Our aim in presenting this is not to *predict* future growth, but rather to give an indication of the numbers of EHCPs in Bournemouth if the trend in Bournemouth followed that which we have seen nationally over the last six years.

The lower chart then takes these numbers and presents the number of places in special schools to which this could equate — calculated by taking the average % of young people with EHCPs placed in any kind of special school between 2014 and 2016.

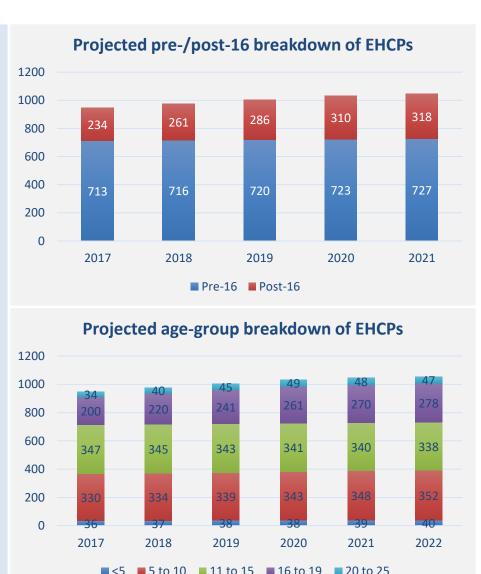




Conclusion: Future needs

Given that the rise in EHCPs among young people aged 16-25 has been a significant driver of the increased number of EHCPs overall, the two charts break down our projections based on age. The top chart shows the increased rates of EHCPs among young people pre-16 and post-16. For pre-16, this has been done based on the national trends for each age-group. For post-16s, since these young people have come into the reformed SEND statutory framework following the 2014 reforms, the calculations here have been done using a two-year average. The charts show that we would expect the numbers of post-16 EHCPs to continue to grow over the next four years, before they reach a "steady-state" where the proportion of young people aged 16-25 with EHCPs matches that for other agegroups. As noted earlier, this will place a premium on being able to offer effective, cost-effective and local post-16 pathways.

We have not, however, made projections based on needs. In part, this is because of the some of the inconsistencies in the primary need data. In part, this is also because we suggest that work is done to pool intelligence about small cohorts of children in INMSSs or in special schools, and considering what would be needed to meet their needs in more local / less specialist provision. We understand that such work is already underway.



Conclusion: Next steps – joining up with Poole and East Dorset more broadly

As we explained at the outset of this report, we have carried out strategic high-needs reviews in both Bournemouth and Poole in parallel in order to provide recommendations specific to each local area, but also to identify potential areas where further join-up might be explored across the two areas, and more broadly in the context of an East Dorset combined authority.

Below, we have highlighted nine areas where we consider that there would be value in further discussions between Bournemouth and Poole to build on complementary strengths, tackle common challenges, and explore joint approaches to core processes and work with shared partners. This formed the basis of a discussion with colleagues from both local areas in January 2018, with the aim of informing how the recommendations for each local area taken forward in tandem.

- 1. Developing pre-statutory SEN support outreach and targeted services
- 2. Developing the local offer of alternative provision and tackling rising exclusions
- 3. Specialist SEND provision offer planning, commissioning, admissions processes
- 4. Strategic commissioning and working with the INMSS sector
- 5. Continuing to develop preparation for adulthood pathways across the local area
- 6. Developing a strategic role for parents and carers refreshed role for a joint PCF
- 7. Strategic relationships and commissioning with local health and care services
- 8. Recruitment and deployment of specialist staff especially EPs
- 9. Core processes, frameworks identification, assessment, banding



We have set out recommendations that, based on discussions with colleagues during the review, we consider will help the local area to meet current and anticipated future needs effectively, manage demand, and address pressures on local resources. The context, both in terms of the changing nature of demand but also the immediate financial context, remains challenging. Nevertheless, there was a significant desire on the part of those whom we engaged in this process to meet these challenges through collective action and collaboration, and this provides an important platform from which to build a new strategic approach, to strengthen core systems and processes, to develop new partnerships, and to reshape the local high-needs continuum.

The key message that we would emphasise at the conclusion of this project is of the need for the actions to address these challenges and to take forward the findings and recommendations of this review to be undertaken as part of a "whole-continuum" response. This will mean having a clear strategic view of how the needs of Bournemouth's young people are to be met, what role is to be played by which part of the continuum, and how all of this fits together. It will also mean communicating this often, revisiting this in light of up-to-date data and intelligence on latest trends, and responding swiftly to address emerging needs and gaps in support.

We recognise that discussions are ongoing currently with regard to how to deal with the overspend and pressure on the HNB. Our role is not to pre-judge the outcome of these discussions. What we would emphasise, from our work in the local area, is the need for decisions about both short- and long-term financial matters to be aligned to the overall strategic priorities for meeting the needs of Bournemouth's young people. The thrust of the recommendations we have made is to seek to reverse the trend Bournemouth has seen in recent years of increased demand for statutory services and specialist provision, and, over time, to shift support and resources to mainstream and targeted services in order to support young people earlier and in ways that keep them, where it is right for them, in their local communities.

Achieving this aim will enhance and speed up support for mainstream and universal services, increase parental confidence in the local SEND system, and improve long-term outcomes for Bournemouth's young people.



Annex A: Glossary

AP – alternative provision

CAMHS – child & adolescent mental health services

CCG – clinical commissioning group

CHI – classroom at the heart of industry (local post-16

programme)

C&I – communication & interaction (needs)

DfE – Department for Education

DSG – dedicated schools grant

EAL – English as an additional language

EET - education, employment & training

EHCP – education, health & care plan

EP – educational psychologist

EOTAS – educated other than at school

FE – further education

FSM – free schools meals

HNB – high needs block

INMSS – independent or non-maintained special school

KS – key stage (e.g. KS2 – key stage 2)

LA – local authority

LD – learning difficulty (moderate – MLD; severe – SLD)

PD – physical difficulties

RWM – reading, writing & mathematics

SaLT – speech & language therapy services

SEMH – social, emotional & mental health

SEN – special educational needs

SENCO – special educational needs co-ordinator

SEND – special educational needs and disability

SENDIASS - SEND information, advice & support service

SLCN – speech, language & communication needs

SPI – specialist post-16 institution

SSIF – strategic school improvement fund



Annex B: Survey responses

During the Bournemouth review, we ran two parallel surveys – one for parents (32 responses) and one for professionals, including early years settings, mainstream schools, special schools, colleges and other services (45 responses). The two charts below show the make-up of responses from professionals – by role (left) and type of institution (right). Over half (58%) of responses came from SENCOs, while 40% came from those in leadership roles (some of whom also held the SENCO role). In terms of institutions, the largest proportion of responses came from primary schools (38%, or 17 responses), with a reasonably good spread of responses across other types of institutions.

