



The Future of the Sector

**Commissioning Guide and Workbook for Sensory Impairment Services**

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## Commissioning Guide and Workbook for Sensory Impairment Services

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**Authors:** *Brian Lamb with Michelle Allison  
for the NatSIP Commissioning working group*

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## Preface



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### Contact:

Lindsey Jane Rousseau, NatSIP Facilitator

T: 07711 030711

E: [lindsey.rousseau@natsip.org.uk](mailto:lindsey.rousseau@natsip.org.uk)

W: [www.natsip.org.uk](http://www.natsip.org.uk)

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## **1 Introduction**

This workbook aims to assist sensory support services to navigate through, and thrive in, the increasingly complex commissioning environment that has developed following the SEND reforms and the changing roles of Local Authorities (LAs) and Schools.

It considers the main factors that service leaders need to take into account to enable service development and promotion with commissioners and other stakeholders.

It has been developed following the work that NatSIP undertook on the future of the sector for the DfE in 2017<sup>1</sup> and is further informed by work with over 70 service leaders via a number of seminars and commissioning clinics.

The workbook is split into sections which mirror the stages of the commissioning process. It is intended to be a practical guide and resource which can be used as circumstances dictate.

It provides tools and tips on how to ensure effective development, planning and promotion of a service.

There are several checklists and proformas to facilitate navigating the commissioning process and any requirements commissioners may have. Crucially, this document will support the presentation of the best possible case for future support and development to meet children's needs.

Also included are sections regarding the current legislative framework, commissioner obligations to secure provision, and insights from Ofsted area reviews as to what makes a good service. These may also be of use for commissioners seeking to understand the context and legislative requirements for sensory impairment support services.

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<sup>1</sup> See: <https://www.natsip.org.uk/doc-library-login/natsip-briefing-documents-and-papers/future-of-the-sector-report/1270-future-of-the-sector-report>

## 2 A note about terminology

The term *parents* used throughout this document is intended to cover parents and/or carers.

The term *QTSI*, standing for *Qualified Teacher of Sensory Impairment*, is used for brevity when referring generally to specialist teachers qualified in specific sensory disciplines:

- Hearing Impairment: Teacher of the Deaf (ToD)
- Vision impairment: Qualified Teacher of the Visually Impaired (QTVI)
- Multi-sensory impairment: Qualified teacher for multi-sensory impairment (QTMSI)

## 3 Terms and acronyms

The following terms and acronyms are used in this document:

<b>ACE</b>	Action, Change, Equality
<b>AAC</b>	Augmentative and Alternative Communication
<b>ADCS</b>	Association of Directors of Children's Services
<b>BME</b>	Black and Minority Ethnic
<b>BSL</b>	British Sign Language
<b>CAF</b>	Children and Families Act, 2014 <sup>2</sup>
<b>CAMHS</b>	Child and Adolescent Mental Health Service
<b>CCG</b>	Clinical Commissioning Group
<b>CHSWG</b>	Children's Hearing Services Working Groups
<b>CoP</b>	Code of Practice
<b>CPD</b>	Continuing Professional Development
<b>CRIDE</b>	Consortium for Research and Development into Deaf Education
<b>CYP</b>	Children and Young People
<b>CQC</b>	Care Quality Commission <sup>3</sup>
<b>DfE</b>	Department for Education <sup>4</sup>
<b>EAL</b>	English as an Additional Language
<b>ECLO</b>	Eye Clinic Liaison Officer
<b>EHCP</b>	Education, Health and Care Plan
<b>ENT</b>	Ear, Nose and Throat
<b>EY</b>	Early Years
<b>GP</b>	General Practitioner
<b>HOSS</b>	Heads of Sensory Impairment Support Services <sup>5</sup>

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<sup>2</sup> See: <http://www.legislation.gov.uk/ukpga/2014/6/contents/enacted>

<sup>3</sup> See: <http://www.cqc.org.uk/>

<sup>4</sup> See: <https://www.gov.uk/government/organisations/department-for-education>

<sup>5</sup> See: <https://www.natsip.org.uk/hoss-email-forum>

<b>JSNA</b>	Joint Strategic Needs Assessment
<b>LA</b>	Local Authority
<b>LAC</b>	Looked-after Children
<b>LG</b>	Local Government
<b>LGA</b>	Local Government Association <sup>6</sup>
<b>LISEND</b>	Low Incidence Special Educational Need and Disability <sup>7</sup>
<b>LV</b>	Low Vision
<b>MAT</b>	Multi Academy Trust
<b>MCA</b>	Mental Capacity Act, 2005 <sup>8</sup>
<b>MCHAS</b>	Modernising Children's Hearing Aids Services
<b>NDCS</b>	National Deaf Children's Society <sup>9</sup>
<b>NHS</b>	National Health Service
<b>NatSIP</b>	National Sensory Impairment Partnership <sup>10</sup>
<b>NEET</b>	Not in Education, Employment or Training
<b>NHSP</b>	Newborn Hearing Screening Programme <sup>11</sup>
<b>Ofsted</b>	Office for Standards in Education, Children's Services and Skills <sup>12</sup>
<b>OLA</b>	Other Local Authority
<b>PCHI</b>	Permanent Childhood Hearing Impairment
<b>QTMSI</b>	Qualified Teacher for (children with) Multi-sensory Impairment
<b>QTVI</b>	Qualified Teacher for (children with) Visual Impairment
<b>RNIB</b>	Royal National Institute of Blind People
<b>SENCo</b>	Special Educational Needs Co-ordinator
<b>SEND</b>	Special Educational Needs and Disabilities
<b>SI</b>	Sensory Impairment
<b>TA</b>	Teaching Assistant
<b>TUPE</b>	Transfer of Undertakings (Protection of Employment) Regulations 2006 <sup>13</sup>
<b>ULG</b>	User-Led Group
<b>VFM</b>	Value for Money
<b>YP</b>	Young People

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<sup>6</sup> See: <https://www.local.gov.uk/>

<sup>7</sup> See: <https://www.natsip.org.uk/doc-library-login/si-documents-and-papers/392-lisend-description-final-summer-2012>

<sup>8</sup> See: <https://www.legislation.gov.uk/ukpga/2005/9/contents>

<sup>9</sup> See: <http://www.ndcs.org.uk/>

<sup>10</sup> See: <https://www.natsip.org.uk/>

<sup>11</sup> See: <https://www.gov.uk/guidance/newborn-hearing-screening-programme-overview>

<sup>12</sup> See: <https://www.gov.uk/government/organisations/ofsted>

<sup>13</sup> See: <http://www.legislation.gov.uk/uksi/2006/246/contents/made>

## **4 Sensory Impairment Services in context**

### **4.1 Who do Sensory Impairment Services support?**

Sensory impairment (SI) is a low incidence special educational need and disability (LISEND) which is characterised as follows:<sup>14</sup>

- A need which has the potential to have an adverse impact on learning and development unless additional measures are taken to support the child/young person.
- The prevalence rate is so low that a mainstream setting is unlikely to have sufficient knowledge and experience to meet these requirements. Settings will need to obtain specialist support and advice on how to ensure equitable access and progression (against national standards).
- The prevalence rate is so low that any formula for allocating specialist resources for additional needs, which is based on proxy indicators of need, will not reflect the true distribution of children and young people identified as having low incidence SEND.

### **4.2 The Changing Landscape for Commissioning**

Local Authorities (LAs) are being encouraged by Government to focus on their role as commissioners rather than providers. There is also a growing emphasis on school autonomy and leadership with the advent of academies, free schools and the move towards delegated funding as part of this process. As a consequence, the pressure to seek other provider arrangements is likely to increase. SI services may not be able to rely solely on LA funding for all, or a portion of, their funding in the future, and therefore need to give consideration to multiple purchasers of their services. Some services already have experience of this through being traded services.

The emphasis in the Children and Families Act 2014<sup>15</sup> on classroom teachers having the capacity to support children with SEND, with SENCos and specialist support working with them, to achieve this suggests that schools-led commissioning, either directly or through the LA, will grow over the coming years.

### **4.3 Sensory Impairment Support Services - what do they currently provide?**

Typically, a SI support service might offer some, or all, of the following:

- Direct teaching and support for early years, children and young people with a sensory impairment. This might include supporting babies, toddlers, children and young people in their homes with their parents, in mainstream schools, or in special schools through a peripatetic outreach service
- Assessment for Education, Health and Care Plans and for SEN support
- Support to a resource base within a mainstream school where more intensive support from the SI support service who have specialist staff based at the school can be accessed.
- Advice and information regarding education, health and social care issues or signposting
- Training for schools, specialist training providers, EY settings and post-16 settings staff on teaching children with a sensory impairment
- Specific advice to SENCos and teaching staff within schools
- Support to families of children with a sensory impairment including keyworker and signposting roles
- Independence development and support with habilitation

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<sup>14</sup> See: <https://www.natsip.org.uk/doc-library-login/si-documents-and-papers/392-lisend-description-final-summer-2012>

<sup>15</sup> See <http://www.legislation.gov.uk/ukpga/2014/6/contents/enacted>

- Technology support including equipment maintenance and advice to schools about acoustics, visual environment and related matters
- Provision of, and training in, the use of assistive technology
- Language support for children whose first language is BSL
- Support in the use of braille
- Multi-agency partnership working with education, health, social care and the voluntary sector and parents
- Support in examination administration and reasonable adjustments.

Depending on the local service configuration and size, there may also be provision of professional SI roles, including TA support, educational audiology, communication support workers, habilitation workers, braille teachers, intervenors, deaf tutors and other SI specific roles. A service usually consists of a specialist teacher team, led by a Head of Service who is also a qualified teacher of sensory impairment (QTSI).

#### **4.4 Service Development Framework**

NatSIP has produced an Eligibility Framework<sup>16</sup> designed for services to use to identify those who may qualify for support and intervention. The framework considers:

- the degree of SI
- the impact of SI on language, communication and access to the wider curriculum
- use of hearing amplification or development of habilitation skills
- the support needs of children and young people with SI to use equipment effectively
- training requirements for family or setting
- transition between settings and into further education
- the learning environment
- the impact of SI on the child or young person's personal, social and emotional learning
- SI teacher involvement in any multiagency liaison.

The aim of the NatSIP Eligibility Framework is to provide a tool to support service development. It is not designed to be used as a rationing or service allocation mechanism, though there is evidence that it has been (inappropriately) used in this way in recent service reviews. The framework is intended to be used by skilled professionals as a guide to support them in assessing benefit and intervention levels within their local environment. It is beneficial in illustrating the type of service criteria and decisions that SI services might need to address.

From feedback from the contracting workshops, a variance was found between services in the ratios between the amount of direct teaching support provided and the additional signposting and key worker roles. The amount of advisory to teaching input varied from 80% teaching-20% advisory, to 60% advisory-40% teaching.

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<sup>16</sup> <https://www.natsip.org.uk/eligibility-framework>

There is no typical size or shape of service. Differences in service provision depends on:

- local demographics
- the population and level of need
- how this has been identified and provided for
- the availability of local special school provision
- the size and role of local resource based provision in mainstream schools
- the historic level of delegation to schools.

The Head of Service role is also changing as financial and other pressures lead commissioners to look for synergies and cost savings. We know, from the feedback NatSIP received at our workshops, that Increasingly, in a number of LAs, SEND managers (with or without QTSI status) are leading specialist SI services for the LA within a wider SEND remit.

#### **4.5 Commissioning in the New Environment**

The Children and Families Act 2014<sup>17</sup> strengthens pre-existing expectations that commissioners of education and health and social care will work together in meeting the needs of children and families with SEND.

The SEND Code of Practice<sup>18</sup> makes clear that joint commissioning arrangements must set out:

- the education, health and social care provision reasonably required by local children and young people with SEN and disability; how this provision will be secured and by whom.
- the advice and information that is to be provided about education, health and care provision; who is responsible for providing this advice.

The Department of Health's guidance document *Care and Support for Deafblind Children and Adults*<sup>19</sup> requires local authorities to identify and keep a record of deafblind children and adults in their area and undertake specialist assessments of their needs.

SI services are involved in many aspects of assessment and support for EHCPs, and also in providing early intervention and support aimed at ensuring children and young people can thrive, without necessarily having to secure an EHCP. Many SI services provide crucial links and signposting between education, health and social care services and support the development of a team around the child approach. They support the cohesion and development of the contracting arrangements around SI support and link closely with schools in promoting early intervention thus preventing later additional costs.

NatSIP ran commissioning workshops with commissioners and providers to explore the development of joint commissioning. Key factors that were identified included:

- ensuring good communication between agencies
- a commitment to joint working
- capacity of agencies to participate in all stages of the process from assessment to planning and delivery
- a willingness to pool budgets
- the engagement of parents and young people.

SI support services can play a crucial role in supporting this process with commissioners.

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<sup>17</sup> <http://www.legislation.gov.uk/ukpga/2014/6/contents/enacted>

<sup>18</sup> See: <https://www.gov.uk/government/publications/send-code-of-practice-0-to-25>

<sup>19</sup> [https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/388198/Care\\_and\\_Support\\_for\\_Deafblind\\_Children\\_and\\_Adults\\_Policy\\_Guidance\\_12\\_12\\_14\\_FINAL.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/388198/Care_and_Support_for_Deafblind_Children_and_Adults_Policy_Guidance_12_12_14_FINAL.pdf)

## **4.6 Implications of changes in legislation and commissioning of services**

The implications of the changes in legislation and the changing role of LAs and early years, schools and college provision include:

### **4.6.1 Funding**

The new funding arrangements for the high needs block will provoke more discussion of what LAs provide centrally and what schools are expected to do to meet SEND obligations. This may challenge current ways of organising low incidence services even where there is a good case for retaining central provision. SI services need to establish good relationships with commissioners and be able to demonstrate achieved impact in any discussions about future provision.

### **4.6.2 Service Models**

Specialist SI support services cannot assume previous organisational models of delivering the service will continue in the future. Adapting to new ways of providing support, working across professional boundaries and structures, perhaps in partnership with other services, needs to be explored and considered.

### **4.6.3 Improving Educational Access**

SI support services will need to demonstrate the specific ways in which the access and educational needs of children and young people are being met, and what outcomes are being delivered due to the provided additional support. This will not always be easy to quantify given the nature of some of the support work. It is, therefore, even more necessary to ensure that close links with commissioners, schools and colleges are forged to ensure they understand what is most needed and how those needs can be addressed.

### **4.6.4 The Role of Specialist Teachers**

SI services need to look carefully and consider the deployment of specialist teacher teams and their role within any particular arrangements.

### **4.6.5 Who purchases Services?**

SI services will have to consider working across LA and CCG boundaries and there are already some examples of this. SI service models for the future will also need to consider what can be delivered through special schools either within an LA boundary or across a number of LA and CCG boundaries if regional commissioning becomes more established.

### **4.6.6 Working with Academies and Special Schools**

Further consideration will also need to be given to what can be delivered through a specialist SI service providing support to a number of MATs or other types of school and colleges and arrangements commissioned directly by special schools, resource bases or SI services. To do this, specialist services will need a very clear view of what it is that schools and other settings most value about the support that is provided.

### **4.6.7 Early Diagnosis**

SI services will need to consider the implications of any work with newly diagnosed children and their families as early intervention has proven benefits but may fall between funding and commissioning arrangements.

## 4.7 Working with Commissioners - the Commissioning Cycle

It is essential for services to understand what is of importance to commissioners, and how they work. With this understanding services will be better equipped to address what is needed and to shape any communications to enable proactive conversations.

Commissioners work to a well-understood cycle which is summarised in the diagram below:



Figure 1: The Understand-Plan-Do-Review Cycle

## 4.8 What Commissioners do

Commissioners take on a wide variety of tasks. Commissioning should not be viewed as simply purchasing what is on offer. Commissioners have a crucial role in shaping understanding of what local need is, and then ensuring the optimum mixture of support is in place to meet this need. There are a number of aspects to this process including the need to:

- understand local demand, needs and available resources
- work with services to ensure available resources are used to maximum effect
- work with services to identify where needs are not being met through the existing local offer
- work with services to plan creative, forward looking solutions to address gaps in service provision and meet future needs (underpinned by a robust evidence base as to the key areas for change and/or improvement)
- ensure commissioned services provide value for money
- ensure commissioned activity achieves good outcomes for children, young people and families and has measurable impact
- support services to engage (where necessary) in market engagement, market development and market management
- support services to manage the performance of commissioned providers

- support services to consider an integrated and strategic view of needs, ‘joining the dots’ across children and young people’s services so that services do not work in silos and LAs generate maximum value from procurement activity
- use business intelligence and performance monitoring to support continuous improvement.

As commissioners are responsible for balancing the needs of the whole community they are working for, they focus across:

- **individual need**  
ensuring the provision of personalised support for children and young people with Sensory Impairment (needs usually identified via an EHCP or other statutory plan)
- **services**  
specific services within the local offer addressing gaps in SI provision and improving outcomes
- **strategy**  
ensuring combined resources meet the needs of the SI population, aligning resources, capability, capacity to achieve greater efficiencies and improved outcomes.



*To ensure that commissioners fully understand the context, the changing landscape and the case for change and/or improvement for services, it is essential that effective service marketing is addressed. This needs to be underpinned with clear accurate data and intelligence, and needs analysis.*

Services should endeavour to present the best possible evidence of local need for children and families with sensory impairment to support the work and understanding of the commissioner. Presenting such evidence in the context of the statutory obligations that the LA or agency must comply with will ensure that the commissioner is fully informed.

## 4.9 Working through the evidence

Services, working in conjunction with commissioners, can work through the evidence in the following ways:

### 4.9.1 Regional Commissioning

Regional and cross-borough co-ordination and joint commissioning arrangements are likely to become increasingly relevant for the future. This was explicitly recognised early in the funding reforms when the DfE noted:



*Addressing the shortage of good local provision for children with the most complex needs is often beyond the ability of a single authority because the numbers of children concerned are too small. This is a facet of the SEN funding system which might be greatly improved by a systematic regional or sub-regional approach to commissioning.<sup>20</sup>*

<sup>20</sup> DfE (2016) High needs national funding formula and other reforms. See: [https://consult.education.gov.uk/funding-policy-unit/high-needs-funding-reform-2/supporting\\_documents/High%20needs%20funding%20reform%20%20government%20response%20and%20stage%20%20proposals.pdf](https://consult.education.gov.uk/funding-policy-unit/high-needs-funding-reform-2/supporting_documents/High%20needs%20funding%20reform%20%20government%20response%20and%20stage%20%20proposals.pdf)

This has been further reinforced in the Government's recent funding review:



**§4.34** *We would particularly encourage local authorities to work together when considering provision to meet low incidence but high complexity SEN. Such provision is frequently offered by providers which operate at a regional or national level, often through independent or non-maintained special schools and specialist post-16 institutions. It may be much more efficient for a group of local authorities to take a combined approach when engaging with such highly specialist providers. Sharing intelligence across a region would allow a group of local authorities to develop a strategic plan for meeting low incidence but high complexity needs, reviewing the quality and sufficiency of existing provision and working with providers to ensure the provision available meets both current and anticipated needs. This would offer a number of benefits, including reducing costs by removing duplication in the commissioning and quality assurance process. It would also allow highly specialised providers to plan ahead, ensuring the provision they offer reflects the likely demand from commissioning local authorities.*<sup>21</sup>

The Lenehan Review *Good intentions, good enough?*<sup>22</sup> supported the need for a more strategic approach to planning and commissioning for children and young people with complex special educational needs to mitigate the requirement for some children and young people to be placed in long-term residential provision. The review found that many children could be supported within their local community, and achieve better outcomes, if more effective strategic planning and commissioning processes were in place.

The Lenehan authors found that:



*While predicting demand for local services that support low incidence needs can be difficult, this, together with high-quality services to meet needs, is essential to ensuring that children and young people are supported close to home. Local areas need to plan both proactively in anticipation of demand, and reactively for individual children and young people in the system.*<sup>23</sup>

Because of the importance of this issue NatSIP has produced a separate report on how to construct a regional commissioning framework for very high cost low incidence groups of children.<sup>24</sup>

#### 4.9.2 New Models of Commissioning and Delivering Services

Local authorities are already moving towards becoming commissioners of services rather than providers in many areas of specialist provision. Some LAs are also looking at divesting themselves of being a provider of specialist support services, preferring to restrict their role to commissioning.

NatSIP has had reports of a large number of LAs actively undertaking reviews of SI services. This may lead to changes in the way services are commissioned in the future. Funding pressures are likely to accelerate this trend as LAs try to sustain service provision by charging schools for services previously centrally funded without delegating commensurate funding.

Some LAs are beginning to contract out significant elements of schools' support to new agencies. This raises the possibility of SI support services being provided by third parties contracted to the LA alongside other contracted-out schools' support.

Further, some LAs are considering the location and role of SI services as part of a local ecology of support which might include local special schools, specialist support units embedded in mainstream schools and other providers. It may not necessarily be cost effective for the LA to maintain different provision and funding arrangements within a number of different settings.

<sup>21</sup> DfE (2015) Research on the Funding of Young People With SEN § 12. See:

[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/445519/DFE-RR470 - Funding for young people with special educational needs.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/445519/DFE-RR470_-_Funding_for_young_people_with_special_educational_needs.pdf)

<sup>22</sup> See: The Lenehan Report *Good intentions, good enough?* See: <https://www.gov.uk/government/publications/residential-special-schools-and-colleges-support-for-children>

<sup>23</sup> See: The Lenehan Report *ibid* page 23.

<sup>24</sup> Regional Commissioning for low incidence, high-need children with SEND Michelle Alison and Brian Lamb, NatSIP. <https://www.natsip.org.uk/3435-regional-commissioning-report-mar-2018>

Potential models NatSIP has identified following a review of recent proposals reported by HOSS, commissioning clinics, interviews with LAs and by examining recent consultation proposals include:

- an *All Age Sensory Impairment Service* – bringing together adult and children’s SI into one grouping with specialist SI support services as part of that arrangement
- going out to tender for a SI Service or merging with another commercial provision as part of the outcome of that tender
- combining with the SI Service provided by another LA to ensure efficiency savings. This has already taken place where large unitary authorities have split into smaller ones or where authorities have merged services
- converting into a traded service with schools taking a much greater role in commissioning of any additional support not provided in respect of core statutory obligations
- merging with other specialist support services either at the management level or as a whole service
- combining resourced based provision with the SI Service if they were separate, or at a minimum having much closer operational alignment
- establishing a SI Academy Trust where local SI provision might be lacking
- creating new hubs containing different professional groupings across SEND and other professionals into one support service
- establishing a specialist resource through combining special school provision with the LA service into a specialist centre of expertise to serve a number of LAs.

In many cases, there was a financial imperative in respect of the changes being sought, in others an explicit strategy to free up resources from specialist provision to support mainstream provision or to fund special school places and provision of EHCP plans.

Moving to a traded service where only the core statutory work is LA funded, with the expectation that schools will commission the rest of the service, has been cited as one of the most common changes. However, feedback from SI Services has suggested that schools are highly unlikely to commission the required volume of support that was either being provided previously or that the service assesses as being required. Where there has been a diminution of service this has also led to a lack of early intervention with the consequence that additional support has then been required at a later stage which inevitably falls back on the LA with an increased demand for EHCPs or additional intervention.

#### **4.9.3 Ofsted Area Reviews**

Ofsted and CQC have been conducting area reviews of local authority, health and social services implementation of the SEND reforms.<sup>25</sup> These reviews have provided a focus and principles as to what makes for successful service development in respect of SI support. It may be advisable to have regard to these principles when developing service plans and strategies for commissioners.

SI support services have been positively mentioned in many reviews and these reviews help to provide an objective analysis of how the service is contributing to ensuring better outcomes. They can also be used to promote the service locally.

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<sup>25</sup> See: <https://www.gov.uk/government/publications/local-area-send-inspections-one-year-on> and <https://www.gov.uk/government/publications/local-area-send-inspection-outcome-letters>

Following are some of the Ofsted comments picking out some of the key themes as they relate to the legislation:



**Dorset:** Procedures to identify children and young people with sensory and behavioural needs, in connection with ASD, in schools have improved since 2014. *Professionals who work in the area's specialist services have increased the local area's capacity by providing training and support for colleagues in schools. Consequently, most children and young people receive timely specialist support so that they make at least expected progress from their starting points.*

**East Sussex:** Parents of children with sensory impairment report *prompt and accurate identification of their children's needs.*

**Greenwich:** support from Greenwich services specialising in HI, VI and autistic spectrum disorders is consistently described as *being of high quality* by education settings and parents.

**Halton:** The work of visual impairment services, audiology, teachers of the deaf and school nurses is a strength of the local area. *The quality of the support and provision that these services offer makes a positive difference to children and young people.*

**Middlesbrough:** There is a *strong and effective multi-agency approach* to assessing and meeting the needs of children and young people who have a hearing or visual impairment at the schools with an additionally resourced provision. Pupils at these schools spoke to inspectors about how *the specialist support they receive is helping them to learn well and make progress.*

**Leeds:** Parents and young people describe the *benefits of school-based resourced provision. Children and young people access specialist support, including support provided by health services, while being included in all aspects of school life with other children.* For example, in a resourced provision for deaf children, children learn about deaf culture that defines aspects of their lives that they have in common with other deaf people, while being included with their hearing peers.

**Telford and Wrekin:** The *assessments* of children's and young people's visual and hearing impairments are *timely and effective* in meeting the needs of children and young people.<sup>26</sup>

#### 4.10 Principles

To ensure services do well in an evaluation, a clear sense of direction through a Service development or improvement plan is required. The plan should embody the three main aspects that underpin an Ofsted and CQC local area inspection:

- identifying SEND
- meeting needs
- improving outcomes.

NatSIP identified the following key areas of focus for successful support services:<sup>27</sup>

1. Strong practice in identifying and meeting needs in early years with good evidence of well-planned transition from nursery to school
2. Strong strategic leadership that leads to established joint working between education, health and care services ensuring the best possible outcomes for CYP and families
3. Strong working partnerships and working together to provide the structure for improving outcomes and experiences for children, young people and their families

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<sup>26</sup> Our emphasis added.

<sup>27</sup> See Appendix 1 for the report on which this section is based.

4. Supporting the quality and capacity of early years providers, schools and colleges, in order to meet the needs of local families and their children with SI and to enhance their outcome and attainment. This will include working with schools to develop training programmes and develop information, advice, support and guidance, to make sure that all those who work with children and young people with SI have the necessary skills and confidence (appropriate to their role) to support children and young people and their families, thus improving inclusive practice in all settings from pre-school to post 16
5. Strong partnerships in health, education and care. Good impact in evaluating provision and outcomes for children and young people right across 0–25 years
6. Strong processes for meaningful engagement and participation with young people and families so that they have greater choice, feel they have control, are being listened to and feel supported and involved
7. Evaluative feedback from children, young people and their families and using this to illustrate not only the outcomes from, and the impact of, service delivery, but also to develop and continually improve it.

These principles can be used to inform service development and plans for and with commissioners in the knowledge that they encapsulate good practice as identified by Ofsted and CQC.

With these considerations in mind the next section looks at the practical steps services can take in developing a plan and promoting the service via the plan with commissioners.

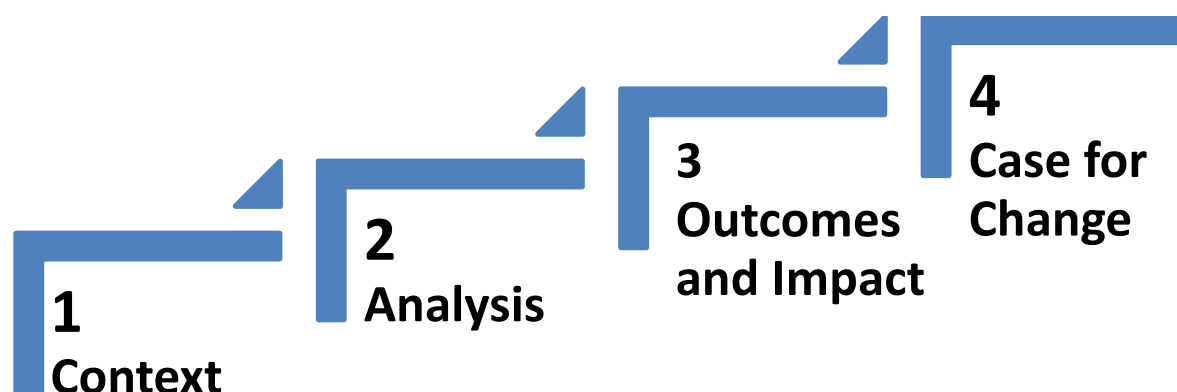


Figure 2: The steps in developing a service plan

### 5.1 Step 1: Context

It should not be assumed that the commissioner will understand the world of sensory impairment or how services operate. The *context* for such work, including relevant legislative requirements and key national policy and guidance, will need to be explained. NatSIP provides a comprehensive set of guides on the requirements for the legislation overall and for how to implement this in line with good practice.<sup>28</sup>

Many commissioners focus resources in line with statutory obligations, so if provision from Sensory Impairment Services is also aligned to the statutory obligations, then the more likely the LA is to want to fund them. NatSIP has provided a guide to aligning services for children and young people with sensory impairment with the specific requirements of legislation and guidance in Appendix 2.<sup>29</sup> This can be used to support the commissioner to ensure that statutory responsibilities are being met.

If SI Services are to be effectively supported, it is important that commissioners understand the context for the work of Services including the changing landscape in which they operate.

The structure and current service offer of Services should be clearly outlined to commissioners.

The following key information should be included:

- number of service users, number and type of settings supported
- overall budget; key inter-dependencies with other aspects of the Children and Young People's Service
- key information in relation to multi-agency/partnership working
- key performance indicators for the Service
- overall staffing levels and the main opportunities and constraints facing the Service.

It could be beneficial to map for the commissioner current provision against best practice from research and other local authorities.

<sup>28</sup> For example see <https://www.natsip.org.uk/ehc-plans> and <https://www.natsip.org.uk/post-16-16-25-years> and funding <https://www.natsip.org.uk/funding-for-send> and for schools <https://www.natsip.org.uk/getting-started>

<sup>29</sup> <https://www.natsip.org.uk/doc-library-login/natsip-guidance-on/checklist-for-service-alignment-with-legislation/1281-checklist-for-service-alignment-with-legislation-word-version>

## 5.2 Step 2: Analysis

Identify and explain the cohort of children and young people currently supported by the Service and provide analysis – including projections around future trends. Use data and needs analysis intelligently to support the case for change and/or improvement and to inform future commissioning requirements.

The SEND Code of Practice states:



**3.27** To inform commissioning decisions, partners should draw on the wide range of local data sets as well as qualitative information about the likely education, health and social care needs of children and young people with SEN or disabilities.

(A list of potential data sources can be found in the SEND CoP para 3.28)

Commissioners use data and intelligence to understand needs and future demand and make evidence-based decisions. Presenting clear and accurate data on the needs of the children and young people currently supported by services and future projections/analysis of need (including gaps in service provision) will help to support the strategic planning and commissioning process and any case for change or improvement.

**Needs analysis** will help the SI Service identify the current and projected future needs of the SI population. This involves gathering and analysing a range of information from service level data to regional and national demographic data.

**Gap analysis** involves undertaking a detailed review of what SI provision is currently available within the local offer, and what will be required in the future (based on the needs analysis and what has been identified as key strategic priorities within the Children and Young People's Plan and other key strategic plans.)

The data then needs to be assessed:

Key questions	Your answers
Are there increased referrals over time?	
Are there any patterns emerging in terms of complexity of need?	
What other key trends and patterns can be identified?	
Looking forward - what information can be gleaned from the SI population and needs projections?	
How does this compare with existing service provision?	
Are any gaps in service provision anticipated and if so, in what areas?	

Once assessed, what impact will this will have on:

- a) future workforce development needs?
- b) future budgets and resourcing?
- c) future commissioning requirements?

#### 5.2.1 What to consider in relation to discussions with Commissioners:

Questions	Your answers
What SI data/intelligence is locally captured, recorded and reported on by the SI Service and what does that data inform about outcomes/impact?	
What is working well?	
What is not working so well?	
What needs to change and/or improve?	
How is local data being benchmarked with national/regional data sets/statistical neighbours (using some of the identified data sources identified here)?	
What information can be gleaned from the benchmarking data?	
How are key stakeholders, including children, young people and families being engaged with to inform SI Services local intelligence?	
How do the population and needs projections inform Service provision? What impact will this have on future workforce developments, budgets and resourcing, and future commissioning requirements?	

## 5.2.2 Local Data

Local data is equally important. Using information from your service dashboard:

Referrals to your service in the 2016-17 Academic Year	Your answers Number	Your answers %
<b>Total number of CYP referred to the service</b>		
<b>Preschool</b> VI HI MSI		
<b>Primary Yr 1-6</b> VI HI MSI		
<b>Secondary Yr 7-11</b> VI HI MSI		
<b>Post-16</b> VI HI MSI		

Active involvement analysis	Your answers Number	Your answers %
<b>Total number of CYP where there is active involvement</b>		
<b>Preschool</b> VI HI MSI		
<b>Primary Yr 1-6</b> VI HI MSI		
<b>Secondary Yr 7-11</b> VI HI MSI		
<b>Post-16</b> VI HI MSI		

Other data you might consider include:

- Timeliness - referral to active engagement
- Referral - conversion rates and signposting
- Source of referrals
- Breakdown by gender and other characteristics e.g, LAC, CAF, BME, EAL etc
- Number of schools supported in area (as a percentage of all schools)
- Number of post 16 settings supported in area (as a percentage of all settings)
- NEET/Transitions data
- Complaints and commendations
- Number of CYP with SI by setting including OLA

Questions you might ask:

- How useful is your dashboard?
- Is it capturing all relevant data?
- How often are you reporting on your dashboard? Who to?
- For what purpose? What impact is this having?

### 5.2.3 What might this mean for future service design?



#### Data and Sensory Impairment Support

Section 22 of the Children and Families Act 2014 requires local authorities to identify all children in its area who may have a special educational need or a disability. SI services play a crucial role in helping LAs identify and support children with SI. There needs to be a clear focus on the handling and use of data as a baseline for monitoring outcomes, planning future service needs and feeding into the JSNA, health and wellbeing board, and local offer as part of effective service planning.

LAs and other agencies need to have effective mechanisms in place to consult and involve parents and young people on the Local Offer and strategic planning about these arrangements. SI services can provide vital links to parents.

The SEND Code of Practice provides a helpful list of resources that could be considered when compiling data.

- Local data on disabled children from the Register of Disabled Children (including those with impaired hearing and vision). Local authorities should ensure that registers of disabled children and young people, and particularly details of those with a vision or hearing impairment, are kept accurate and up-to-date, as such low incidence needs are particularly difficult to plan for from national data sets
- Population and demographic data
- Prevalence data for different kinds of SEN and disability among children and young people at national level – for example through the Child and Maternal Health Intelligence Network (CHiMat)<sup>30</sup>
- Numbers of local children and young people with EHC plans and their main needs
- Use of out-of-area placements for those with low incidence needs
- Analysis of key performance indicators that are shared across health, education and social care as part of the new joint commissioning arrangements
- The outcomes of developmental assessments (including the two-year-old check)
- Information from the Early Years Foundation Stage (EYFS) profile
- Where children or young people with SEN or disabilities are educated
- An analysis of local challenges and sources of health inequalities
- Employment rates for young people leaving education

#### Other key data to be considered:

- Statistical First Release (SFR)<sup>31</sup>
- Local Authority Interactive Tool (LAIT)<sup>32</sup>
- LG Inform<sup>33</sup>
- Internal Dashboards
- Ofsted and Care Quality Commission (CQC) inspection reports of local areas' effectiveness in identifying and meeting the needs of children and young people who have special educational needs and/or disabilities

<sup>30</sup> <https://fingertips.phe.org.uk/profile-group/child-health>

<sup>31</sup> <https://www.gov.uk/government/collections/statistics-special-educational-needs-sen>

The DfE produces a guide of all the key government data sources on SEN. See:

[https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/615192/Special\\_educational\\_needs\\_Publication\\_May17\\_v6.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/615192/Special_educational_needs_Publication_May17_v6.pdf)

<sup>32</sup> <https://www.gov.uk/government/publications/local-authority-interactive-tool-lait>

<sup>33</sup> [https://lginform.local.gov.uk/reports/view/send-research/local-area-send-report?mod-area=E92000001&mod-group=AllRegions\\_England&mod-type=namedComparisonGroup](https://lginform.local.gov.uk/reports/view/send-research/local-area-send-report?mod-area=E92000001&mod-group=AllRegions_England&mod-type=namedComparisonGroup)

- Self-Assessment Reports
- Data from the JSNA
- School Census data
- Publications and surveys by NDCS, Blind Children UK, RNIB, NatSIP, CRIDE, Sense, LGA, ADCS etc.
- Ofsted Thematic Reports

Consideration should be given as to how this data can be used effectively to illustrate the necessity of SI service provision/retention. For example, the LA statistics can be used to compare with DfE statistics on rates of placement in special schools, number of EHC plans, numbers of children meeting developmental and floor standard targets, to demonstrate the level of need locally.



#### **An example**

The following data on how the level of placements in special non-maintained and independent schools compares to neighbouring authorities could provoke a conversation about the necessity of more early support or an examination of the particular needs within your local community.

	<b>Special School: Non-maintained %</b>	<b>Special School: Independent special schools %</b>
<b>Region XX</b>	<b>1.4</b>	<b>3.0</b>
LA A	1.4	4.5
LA B	0.8	0.0
LA C	1.0	3.1
LA D	1.3	3.2
LA E	8.2	9.5
LA F	0.1	1.3
LA G	1.6	1.9
LA H	1.0	3.0
LA I	1.4	6.1
LA J	0.8	7.1

#### 5.2.4 Using SI Service Information

Additional data from Services which can also be collated and prove valuable in presenting a case to commissioners may include:

- Timeliness - referral to active engagement
- Conversion rates
- Source of referrals
- Breakdown by gender and other characteristics eg LAC, CAF, BME, EAL etc.
- Number of schools supported in area (as a percentage of all schools)
- Number of post-16 settings supported in area (as a percentage of all settings)
- NEET/Transitions data etc.
- Compliments and complaints.

The aim is to build up a positive service picture illustrating effectiveness in provision, outcomes and meeting the needs of the CYP.

### 5.3 Step 3: Outcomes and Impact

Outcomes achieved by the children and young people currently supported by the Service and the impact the service is making need to be identified and explained:

- how the work of the service is contributing to broader key strategic priorities and plans of the LA
- how the commissioned activity will lead to improved outcomes for children and young people
- evidencing outcomes and impact which is an important element of the strategic planning process
- identifying areas for improvement and/or change which can help to inform service planning and future commissioning requirements. What needs to change and/or improve?

Following are some examples of quantitative and qualitative methods of demonstrating outcomes and impact.

#### 5.3.1 NatSIP Outcomes Benchmarking

NatSIP Outcomes Benchmarking<sup>34</sup> is an annual exercise, started in 2011. It involves services collecting and submitting data on CYP with SI on a range of performance indicators, mainly (but not exclusively) related to educational achievement and progression. The main purpose is to provide reliable data for use by LA SI support services to evidence their impact and inform development needs.

It provides opportunity for extensive benchmarking of data against sixteen performance indicators, against which services can compare their results. It also provides a comparison of HI, VI and MSI results and provides trend data through a comparison of year-on-year results. This provides an opportunity for services to compare NatSIP outcomes data with that for all CYP published by the DfE and help show progress over time or point to areas for improvement and demonstrate impact.

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<sup>34</sup> See: <https://www.natsip.org.uk/outcomes-benchmarking>

### 5.3.2 Other Key Data

Some other key data that will enable comparison of children with sensory impairment to others at different stages of their education can be accessed through the DfE.<sup>35</sup>

There are a number of additional ways in which outcomes may be demonstrated:

- Outcomes from any self-evaluation exercise and/or service review(s)
- Direct feedback from children, young people and families
- Feedback from schools/settings with which the service works
- Interviews with Head-teachers, SENCos within individual settings
- Outcomes from observations/visits
- Case studies
- Feedback from partners (eg CCG, local health and other professionals with whom the service has contact)
- Feedback from parent carer forum and other local networks
- Case studies, publications, contributions service may have made to local, regional and national initiatives etc.
- Findings from inspections (particularly Ofsted/CQC Local Area Inspections)
- Feedback from any questionnaires (eg Health Related Behaviour Questionnaire)
- Feedback from staff employed within the SI Service

### 5.3.3 Service Evaluation

Consider undertaking a service evaluation. Below is a checklist of the types of questions that could be asked:

Question	Your answers
What is the speed of response - from initial enquiry/referral to active engagement?	
How easy is it to understand what the SI Service is delivering as part of its core (and traded) offer?	
How good is the quality and accessibility of information provided as part of the local offer?	

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<sup>35</sup>

[https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/615192/Special\\_educational\\_needs\\_Publication\\_May17\\_v6.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/615192/Special_educational_needs_Publication_May17_v6.pdf)

Question	Your answers
How available are the staff within the SI Service and what is their ability to respond to urgent requests for support?	
What is the overall quality of assessments and reports provided by the SI Service?	
How able are the staff to explain assessments and reports provided by the SI Service (appropriate to the audience)?	
What is the overall contribution of the SI service to the monitoring, review and planning for a child/young person with SI	
What is the overall quality of support/training offered by the SI Service from the perspective of individual settings?	
How well does the work of the SI Service complements/supports the work of the school, college or other educational setting in which it is working?	
Quality of relationship between the SI Service and the individual setting?	
What is the quality of relationship between the SI Service and the parent/carer?	
What is the quality of the relationship between the SI Service and the child/young person?	
What is the overall contribution towards the child or young person's progress?	
How able are the staff to to work across organisational boundaries/feedback in multi-agency working?	

Question	Your answers
<p><b>What is the feedback on the management of complaints or concerns?</b></p>	

Such a service evaluation could be quickly done with key stakeholders or from assembling internal service information and analysis.

A further strategy is to engage trusted partners to undertake a service review. NatSIP has conducted a number of service reviews using trusted consultants from the sector who have usually worked within a local authority setting or service and/or have experience of local authority planning and commissioning. For more information on NatSIP service reviews, please see the NatSIP website.<sup>36</sup>

In demonstrating outcomes and impact, evidence on how the work of an SI service contributes to broader key strategic priorities and plans needs to be considered. How are the needs of children and young people with SI currently reflected in key strategic priorities and plans? If not – what more can the SI Service do to influence this?



**Remember:** key strategic priorities and plans for the commissioner often drive and influence commissioning decisions and commissioning priorities. Resources follow key strategic priorities and plans – locally, regionally and nationally.

#### 5.4 Step 4: The Case for Change

Once all the evidence and data that is required is assembled, then the Service is in a position to present an overall plan or case for change. How the Service achieves value for money will need to be explained, along with any cost/benefit analysis to support the case for change or improvement, including the use of a robust evidence base.

Question	Your answers
Is the overall plan driven by best possible outcomes for children, young people and families and is the impact of the commissioned activity measurable?	
Is the overall plan underpinned by a clear business case which sets out why the commissioned activity is required?	
Does the overall plan meet identified current and future needs and gaps in SI provision? This must be underpinned and informed by robust needs analysis including evidence of what works best for children, young people and families?	
Does the overall plan provide value for money and maximises the use of available resources?	

<sup>36</sup> See: <https://www.natsip.org.uk/sensory-service-reviews>

Question	Your answers
Does the overall plan take account of national and local guidance and good practice exemplars in the field of SI?	
Does the overall plan achieve high performance and quality standards?	
Does the overall plan meet the requirements of a changing landscape? Is it future proof (as far as possible)?	

#### 5.4.1 Funding of Services

It is crucial to understand the funding context for services. How are budgets formed and allocated? To establish this, services require a good knowledge of how LAs are currently prioritising their budgets. Some key questions services should ask on funding are:

Question	Your answers
What proportion of high needs funding (or other funding flowing into the LA) is currently being allocated and spent on children and young people with SI?	
How does this compare with other children and young people with SEND?	
How does this compare with existing and future demands on the SI Service?	
How visible is the SI Service at School Forum and other forums which make decisions regarding funding?	
What can be done to influence and inform decisions made at School Forum and other funding sub-groups in relation to how available funding is currently being allocated to support children and young people with sensory impairment?	

### 5.4.2 Developing a business case.

Developing a detailed business case outlining what the SI service will achieve through any commissioned activity will support any negotiations with the commissioner. The business case needs to include the following:

- Why the commissioned activity is required (underpinned by robust needs and gap analysis) ie the case for change and/or improvement. This may include identifying what may need to be reconfigured and/or de-commissioned in order to meet future needs
- An analysis of risks of not providing this support (Risk Assessment)
- An analysis of the resources required (Resource Analysis)
- An analysis of what other options have been considered by the SI Service (Options Appraisal)
- How the commissioned activity contributes to key strategic priorities and improved outcomes for children, young people and families.

This element of the business case involves the Service identifying with the commissioner the resources currently available and the costs/benefits of adopting different approaches to future SI provision.



**Remember:** The commissioner will want to ensure that any commissioned activity provides value for money, maximises available resources and is affordable in the current funding envelope.

### 5.4.3 Demonstrating value for money and undertaking a cost/benefit analysis

Demonstrating value for money and undertaking cost/benefit analysis will become increasingly important as the funding envelope tightens. Services will therefore need to ensure they have the best possible case to illustrate cost-effective meeting of needs.

As the following hypothetical example shows, services can demonstrate value for money in a number of different ways using a basic cost/benefit methodology. In this example, hypothetical costs from a local service have simply been divided by the number of total service users to get an average cost per service user.



#### **An example:**

Sunnyside Sensory Impairment Service: Value for money

Staffing costs	£386,000
On Costs	£77,200
SI service contribution towards training and other central support costs	£57,860
Total Costs	£521,060
Service users – children and young people supported in the 2016/17 academic year	178
Average cost per service user	£2,927

Services may be able to further demonstrate value for money by identifying income generated from other sources eg traded income.

This could then be used to compare with other LAs to demonstrate the effectiveness of the services compared with those in neighbouring authorities. Care needs to be taken when using this approach if all that is demonstrated is that the service is the more expensive; therefore the data should be illustrated alongside a number of other factors that might affect the cost. For example, the complexity of the local population and other service factors. Nevertheless, average cost per user gives a useful benchmark for commissioners and can be a good way of demonstrating effectiveness.



#### A second example:

Comparison of average cost per service user with other LAs

The data below is based on real LA data, with the LA names removed. It demonstrates that it is possible to establish the number of service users and cost per user across a number of LAs. While useful, this data will also need to be put into the context of the population, level of need and other relevant factors. However, it can provide a rough baseline from which to work.

LA Name	Budget	Number of service users	Approximate average cost per user
LA 1	£1,087,000	Not stated	
LA2	£928,000	335	£2,770
LA3	£764,000	500	£1,528
LA4	£467,000	467	£1,000
LA5	£699,000	Not stated	
LA6	£915,000	Not stated	
LA7	£3,083,000	875	£3,523
LA8	£791,000	525	£1,506
LA9	£1,343,000	652	£2,059
LA10	£914,000	306	£2,986
LA11	£1,229,000	336	£3,657
LA12	£240,000	Not stated	

Once the basic analysis is in place, then services can use this to start modelling more complex scenarios.

The following hypothetical example imagines the development of an additional SI service to target children at high risk of a residential placement.



### A third example:

Introduction of a new targeted SI module in the 2017-18 Academic Year  
Proposal to School Forum

Our proposal to commission a targeted SI Service model to support children and young people with complex MSI who are failing to meet the Performance Indicators as outlined in [Annex B] and for whom placement breakdown has been identified as HIGH RISK, as outlined in the Risk Analysis at [Annex C], will require an initial investment of £182,600 in the 2017/18 academic year, broken down as follows:

Staffing costs	£137,000
On Costs	£27,400
Other costs including recruitment and selection and initial setup	£18,200
Total Costs	£182,600
Service users – children and young people supported in the 2017/18 academic year	16
Average cost per service user	£11,412

The targeted SI Service Model will support a minimum of 16 children in the 2017/18 academic year.

Whilst the cost per each service user of £11,412 is higher than the average cost per child for the service as a whole (£2,927 in 2016/17) these children have been identified at *high risk* of placement breakdown.

4 out of the 16 children (25%) have already been referred to Placement Panel for consideration of an OLA placement (3 on the basis of a day placement and 1 residential as a result of escalating difficulties at home and the child now being on the edge of care). The cost of placing these 4 children in OLA provision in 2017/18 would amount to an annual cost of circa £270,000 - thus significantly higher than the cost of commissioning a targeted SI Service model to support children with sensory impairment identified as being at high risk of placement breakdown.

From the above analysis it could be shown that the proposed cost of the new SI service is far less than the alternative risk of placing a number of children in high cost placements. For example:

Cost per child of SI service support £11,412 against the potential cost of:

- £68,000 - Day Placement
- £90,000 - Residential (38 week)
- £125,000 - Residential (52 week)

A number of SI Services with whom NatSIP consulted are already deploying this type of analysis to support continued LA funding for their core service.

The financial case is not the only consideration and would have to be supported within the context in which the *additional benefits* that such a strategy might bring such as:

- Increased parental confidence
- More families staying together
- Enhanced capacity to meet need at a local level.

## 6 Agreeing a Service Specification

As part of the strategic planning process, services will need to work with the commissioner to agree a specification and contract for the engaged activity. The specification and contract need to be clear on the expected outcomes, and key performance indicators will need to be developed and agreed so that progress can be effectively measured. The commissioner will be keen to ensure that any commissioned activity achieves both outcomes and efficiency. The contract monitoring process should ensure that the impact of any commissioned service is regularly assessed and reviewed and the measurable outcomes identified within the contract are being met. As part of the contract monitoring process the service should put into place a process for gathering the feedback of children, young people, families and providers.

### 6.1 Step 1: Background and Context

Include:

- An overview of the nature and scope of the service required and its overall purpose. Include here the background and context as to why the commissioned activity is required
- The timeframe for delivery
- The overall value of the contract
- Any relevant local, regional or national policy and guidance for the work, including any relevant legislation which the commissioned provider should be aware of. NatSIP has provided a range of useful information to explain the statutory context for children and young people with SI<sup>37</sup>
- Any values or guiding principles the provider is required to work to and the overall ethos of the service eg aim to triangulate this with any key principles identified within the Children and Young People's Plan
- A definition of any technical terms used within the specification
- Any key data or intelligence on the cohort of children and young people with SI to be supported and key information drawn from the needs analysis.

### 6.2 Step 2: The Service required

Include:

- The activities to be provided under the contract
- An overview of the make-up of the children and young people with SI to be supported (including age profile and any other relevant characteristics)
- The specific needs of the children and young people with SI to be supported
- Referral route and method - The mechanics of how children and young people with SI will be referred to the Service (if relevant) and any eligibility criteria which may apply throughout the life of the contract
- The geographic location of the children and young people to be supported including any relevant information in relation to settings.

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<sup>37</sup> See: <https://www.natsip.org.uk/doc-library-login/natsip-guidance-on/checklist-for-service-alignment-with-legislation>

### 6.3 Step 3: Deliverables and Standards

Include:

- The outputs required eg specific activities to be provided throughout the life of the contract, including volumes
- The outcomes to be achieved – note that these need to be measurable
- Requirements in relation to:
  - Meeting relevant legislative requirements and relevant local or national service standards and guidance
  - Workforce and employment standards e.g., staffing levels, management – including, training, support and supervision requirements, qualifications, knowledge, skills and experience, DBS requirements etc.
  - TUPE (if applicable)
  - Quality Assurance and continuous improvement eg any requirements for quality assessment feedback from current and former service users, involvement of service users in decision making, any mandatory requirements related to accreditation, kitemarks such as *Investors in People*, professional registration etc.
  - If working directly with Children and Young People –safeguarding, the Mental Capacity Act, positive behaviour support, physical Intervention etc.

### 6.4 Step 4: Performance Monitoring

Include:

- The Key Performance Indicators against which the provider will be measured
- Contract management – roles and responsibilities
- Any requirements in relation to how information will be recorded, collated, transmitted and used and data security
- Requirements in relation to attendance at monitoring meetings, arrangements for monitoring visits/observations etc.
- Requirements in relation to how complaints will be managed
- Requirements in relation to reportable incidents
- Financial health, insurance requirements etc.

## **7 Looking Outwards**

Services should consider where there are any significant opportunities for service promotion and include a case in any plans.

### **7.1 Opportunities: Schools**

#### **Overall strategic driver: Children and Families Act/Schools Reforms**

Consider how to demonstrate Service relevance to schools who may become the future key commissioners for specialist support in some areas, or at least will be expected to identify and provide support. This could include:

- Identifying good practice and developing the evidence-base for what works - links to schools Ofsted inspections and schools' duties under the Children and Families Act
- Making specialist expertise available to schools, EY settings and colleges, including signposting to existing resources and providing specialist advice
- Building on current connections with SENCos and support staff in schools and providing training and support to SENCo and teachers
- Supporting the delivery of the Code of Practice and especially SEND support by offering training and other workforce development opportunities
- Supporting mainstream schools to set up or develop special units or resourced provision - or the service offering to take these on to ensure more co-ordinated service
- Taking a role in supporting Initial Teacher Training especially in Teaching Alliance settings
- Crossing over between work in special schools and mainstream settings - can this be extended?

### **7.2 Opportunities: The System**

Many LAs will still be focusing on what are their core statutory duties and how to deliver these. While particular models of contracting will be different between different LAs and reflect the specific expertise, strengths and local circumstances there are some core considerations:

- Ensuring services stay relevant as statutory services through provision planning, statutory advice on EHCPs, working with maintained special schools.
- Help to define what innovation will look like within SI specialisms and how best to deliver this. What do future models of specialist support look like?
- What is the balance between 1-1 working and whole school provision and advice. What should it be, what is needed?
- Working with special schools to share expertise on SI and ensure access to specialist teachers/workforce development.
- Working with special Academies or free schools in a Multi-Academy Trust.
- Once both the service plan and the market analysis of the opportunities and needs of commissioner is completed, then services will be in a position to promote their plan.

### **7.3 Shouting about Success**

Services will need to ensure that all the relevant stakeholders know about the service and its impact. The data that is being compiled to convince your commissioners is also useful to make a wider case about the effectiveness of the service, inform others who might want their children to be supported by it and inform the wider system about what is happening.

### **7.4 Ways of promoting the Service**

#### **7.4.1 Ofsted Area Reviews**

There are a number of ways in which the quality of a service will be judged externally beyond the commissioner's evaluation. The single most significant of these will be the Ofsted area reviews (discussed earlier). It is worth examining the learning from these as this gives many pointers to what is seen as a good service.

Consideration will need to be given as to who are the potential stakeholders of the service, how aware are they of the work of the service and whether they can help promote the value of the service.

#### **7.4.2 Parents and Services**

The impact that parents' and young people's positive views can have on the perceived value of the service should not be underestimated. LAs have a duty to consult with parents and CYP through the local offer about the adequacy and value of services. It is important parents are aware of these opportunities to express their views about what is needed to support their children well. It should be noted that parents' views are given strong weighting in the Ofsted area reviews. Also, parents need to be aware that they can ask for, and scrutinise, the Schools Information Report, which should contain all the information about what expertise the school has in ensuring good SI support and what additional specialist services they access to ensure this.

#### **7.4.3 Local Accountability**

It is important to remember the accountability system for local services rest with local politicians. There will be children and young people's committees or boards which the director of services will report into. There is also the Health and Wellbeing Board that will have LA members on it, and is responsible for ensuring that services combine to meet the needs of the local population.

It is important in this context that SI services ensure that local politicians are aware of their work, and understand the impact made on raising outcomes and meeting need.

For example:

- Do parents regularly feed back into local consultation mechanisms such as the local offer, Schools Information Report and other local consultation fora the value of the SI service that is being provided and what their needs are?
- How aware are local politicians of the SI service - could an invitation be extended to visit or to see the work that is being done?
- Does SI Service data feed into the wider discussions on the Joint Strategic Needs Assessment and discussion on the Health and Wellbeing boards?

## 7.5 Looking to broaden the Reach of the Service

There are a number of key areas that services will need to focus on in the future when thinking about where they might be commissioned from. This is more pertinent if the service is traded or in another arrangement which requires direct charging for services to sustain current activities.

### 7.5.1 Marketing Services

It is always important to remember the key principles of marketing when thinking about how to promote services. These are:

- **Product:** What is it the service does that is different, additional, unique or irreplaceable?
- **Price:** Not only what the service costs but also what is the added value and what is the cost benefit of using the Service to address need.
- **Place:** Where can Services be delivered to whom and how?
- **Promotion:** How do commissioners and stakeholders know about the service? What are services doing to ensure that commissioners and stakeholders understand what is on offer and how the needs of SI children can be met?

The whole process of how these elements are brought together will need to be thought thorough by services to ensure that commissioners receive a clear accessible offer and that Service stakeholders also understand what is being done.

Services should also think about what other opportunities exist to be promoted either directly or through the community they serve.

### 7.5.2 Using Narrative

While it is important to ensure that services have the data and analysis to support their case, consideration should be given to the effective use of case studies and examples of where service input has impact.

It can be very powerful to illustrate data with case studies outlining what position a child, young person or family was in before intervention, what was done in that specific case, the outcomes achieved, and the positive effect on the child and family. Also consider the wider context. Did an early intervention ensure that the commissioner or school saved resources later because of the intervention? Can services quantify this in terms of better outcomes achieved and money saved in that particular case?

Narrative examples help the data to come alive and to engage with commissioners and stakeholders in demonstrating the impact of services. Ofsted already accepts that such narrative can be useful in schools' inspections, and services may already have examples from existing work. It is advisable for services to keep a folder of written-up case-studies from service practice which can be used when needed.

## 8. Top Tips



### 1. Legislative Duties

Services need to understand how their local commissioner is responding to the legislation especially the Children and Families Act, but also need to give cognisance to the extensive legislative requirements around sensory impairment, especially the interface between the Equality Duties and SEND requirements. Local commissioners may need reminding of their legislative duties.



### 2. Marketing Services

Commissioners need support from services to enable them to understand service provision, the context for service work, the changing landscape and the case for change and/or improvement so that services can be marketed effectively. Underpinning this needs to be clear and accurate data and intelligence and needs analysis.



### 3. Talk to the Commissioner:

How are services capturing, recording and reporting on SI data/intelligence locally and what can be gleaned from that data in relation to outcomes? What is working well? Not so well?

What needs to change and/or improve?

How are services benchmarking local data or intelligence with national or regional data sets, or with statistical neighbours (using some of the previously identified data sources). How does the benchmarking data inform services?

What are the population and needs projections telling services and what impact will this have on future workforce developments, budgets, resourcing and future commissioning requirements?

How are services sharing data or intelligence on the SI population with key local stakeholders?

Is the data or intelligence understood at a local level?

Which key forums have a handle on the data or intelligence and how this is being used to inform strategic dialogue and planning?

Who else may services need to more effectively engage in the strategic dialogue? For example: what is the level of engagement at School Forum? SEND Board? Children's Trust Board? Health and Well Being Board? Education Partnership? Safeguarding Board? Council Members?



### 4. Evidence your Outcomes

Talk to the commissioner about:

the evidence drawn from any outcomes benchmarking, evidence drawn from service reviews etc.

what needs to change or improve?

evidencing outcomes and impact forms an important element of the strategic planning process. Use the NatSIP Outcomes Benchmarking Tool.<sup>38</sup>

analysing outcomes which can help to identify areas for improvement and/or change and can help to inform service planning and future commissioning requirements.

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<sup>38</sup> See: <https://www.natsip.org.uk/outcomes-benchmarking>



## 5. Making a Case for Change or Improvement

Making a good case for change or improvement needs to be supported by:

- a sound Business Case – what needs to change and/or improve and why
- Risk Assessment
- Resource Analysis (staffing, buildings, budgets, other assets)
- Options Appraisal
- Equality Impact Assessment
- an overview of how the commissioned activity contributes to key strategic priorities and improved outcomes for children and young people.



## 6. Planning

Commissioners and stakeholders will want to see a plan that sets out:

WHAT services are going to do

WHY services are doing it (position now/outcomes expected/what will change and or improve)

WHO services are going to do it for

HOW services will do it

WHEN services will do it

WHAT resources services will need to do it

Evidence of co-production should be demonstrated wherever possible



## 7. Evaluation and Review

Talk to the commissioner about how the service intends to:

- measure change over time – what is improving, what could be done better?
- share practice innovation, learning and lessons learnt to inform future working practice
- keep key stakeholders including children, young people and families and the commissioner informed of progress.

Other things that commissioners will be interested in – VFM, Spread and Scale, potential for Invest to Save.



## 8. Promoting Services

Think about who may be commissioners in the future. Services should ensure they engage with them and can demonstrate the benefits of service delivery.

Schools could soon be significant commissioners. Services need to ensure knowledge of what schools need and that service effectiveness can be demonstrated to them. Schools may not be aware of, or even understand the benefits of service provision or why it is needed.

Who else are the customers in the future?

Services may feel challenged, but there are also opportunities for Services to find new ways of supporting children with sensory impairment.

If these principles are kept in mind services will have a good chance of success in self-promotion to commissioners so that children and families with sensory impairment can have their needs met in the most effective way possible.

## Appendix 1     Supplementary Report Ofsted Area Reviews

### A1.1     Introduction

This section has been developed to support senior managers, including heads of specialist education support services, and other professionals who work to support and raise outcomes for children and young people with sensory impairments and their families. It is intended to be an overview of how to shape thinking around effective service delivery in response to the continued development of the SEND reforms and the expectations of a Local Area SEND Joint Inspection by Ofsted and the Care Quality Commission (CQC), by looking at the conclusions from the Ofsted SEND area reviews which have been published up to November 2017, where there were direct positive comments in relation to service delivery from SI support services.

### A1.2     Context

In 2016, Ofsted and the Care Quality Commission began a programme of 152 local area inspections over a five-year period to evaluate the effectiveness of local areas, which includes the local authority, health commissioners and providers, in fulfilling their new duties set out in the document *Special educational needs and disability code of practice: 0 to 25 years*.<sup>39</sup>

The first local area inspections took place in May 2016, and in October 2017 a summary report of the main findings from the first 30 local area SEND inspections by Ofsted and the Care Quality Commission was published in the document *Local Area SEND inspections one year on*.<sup>40</sup>

The findings indicated that, broadly, there is much more work still to be done across the three main aspects of the inspection framework relating to children and young people with SEND, namely:

- identifying SEND
- meeting needs
- improving outcomes.

The findings also highlighted that parental dissatisfaction is a significant challenge:

- A large proportion of parents in the local areas inspected lacked confidence in the ability of mainstream schools to meet their child's needs
- In over a third of the local areas inspected, leaders across education, health and care did not involve children and young people or their parents sufficiently in planning and reviewing their provision (a process known as co-production)
- Many local area leaders were unaware of the depth of frustration among local parents and what their concerns were about.

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<sup>39</sup> See: <https://www.gov.uk/government/publications/send-code-of-practice-0-to-25>

<sup>40</sup> See: <https://www.gov.uk/government/publications/local-area-send-inspections-one-year-on>

### A1.3 Findings

There are some common themes in relation to service delivery that emerge from those specialist sensory impaired services where the SEND Reviews made specific and positive comments namely:

- Building school/educational setting capacity in meeting the needs of CYP with SI
- Strong commitment to high expectations and aspirations for CYP with SEND across the local area
- Strong relationships with CYP and parents
- Strong and effective working relationships with health and social care
- Strong practice in identifying and meeting needs in early years.

#### A1.3.1 Theme 1

**Building school/educational setting capacity in meeting the needs of CYP with SI** *through working as effectively as possible with settings, other agencies and disciplines and with a strong focus on raising awareness of sensory impairment issues and the impact on learning and independence.*

All the SI Services concerned are proactive in delivering a range of training and CPD activities that enhance the skills and expertise of the workforce and promote strategies that contribute to improved outcomes and successful inclusion for CYP with SI needs.



[The SCS] has enabled us to understand the impact of the children's HI and VI needs and how we can best support them. Their training, advice and 1:1 input with children, families and school staff has been invaluable - their expertise has had a huge impact on the children, increasing confidence and independence. Staff and parents have benefitted from learning how to use equipment to support children effectively and on-going support with this.

Berks Sensory Consortium Schools Survey



Visual impairment services, audiology and teachers of the deaf provide effective support for children and young people. Services are timely and of good quality. Their work is making a positive difference to the lives and development of these children and young people. For example, the work of the teachers of the deaf ensures that teachers have the skills and strategies to fully engage children and young people who are deaf in learning alongside their peers.

Halton Joint local area SEND inspection

In addition to general SI awareness training and bespoke packages to settings, other training offered on a regular basis are:

- OLT International Courses in sensory impairment<sup>41</sup>
- accredited BTech course for teaching assistants
- emotional resilience training such as *Think Right Feel Good*, *Promoting Emotional resilience for CYP with HI*, *Healthy Minds*, *Parents as Partners* and *Transition workshops*.<sup>42</sup>

<sup>41</sup> See: <https://www.oltinternational.net/>

<sup>42</sup> See: <https://www.natsip.org.uk/doc-library-login/emotional-resilience>



*Healthy Minds* has made me learn something new and my new friends have helped me.

Girl aged 10

So pleased to meet other children who don't see very well and also use a long cane - I'm not the only one. Yay!

Girl aged 11

Halton Pupil Feedback



C and I thoroughly enjoyed the workshop and found it a real relief to hear of other people's children in similar situations to ours. We learnt a lot of things in such a short space of time and are just sorry the workshop was only three weeks. The parents and children we heard about and spoke to are a real inspiration and made us feel that we are not alone.

Berks Sensory Consortium, Parent Evaluation

In all these areas, the exclusion of CYP with SI is typically rare, with only two being educated out of their local area due to their SI needs (parental choice/cost).



The local area is successfully building the skills and capacity of staff in mainstream schools to support pupils who have special educational needs and/or disabilities. Central to this work is the development of the role of special educational needs leaders. These leaders work closely with advisory specialist teachers to ensure that mainstream staff deliver effective support to pupils with hearing impairment, visual impairment and communication and interaction needs. This work is changing the culture in the local area schools, with a greater focus on delivering provision in pupils' local community schools.

Gloucestershire Joint local area SEND inspection

### A1.3.2 Theme 2

**Strong commitment to high expectations and aspirations for CYP with SEND across the local area** *through strong support from senior strategic leadership with a firm commitment to improving the strategic direction of services with clear pathways and improved outcomes for CYP and their families.*

Most of the areas concerned had strong, clear graduated pathways for referral, assessment and meeting of needs with a 'tell it once' approach. For example, Plymouth has a 'Gateway Portal' where referrals are dealt with holistically; families are listened to and that holistic collection of information supports people to identify exactly what it is that they are looking for – part of the Local Offer. This encourages settings/schools to think holistically about the family and current needs and how to meet them and effectively plan outcomes.

**Greenwich** has a strategic leadership that is committed to high aspirations for CYP with SEND. For example, they hold a *Meet the Managers* event once a term with an open-door policy for parents. As well as service managers, the strategic leadership members also attend, which sends a strong message to the workforce, to families and to CYP that they are valued. The SI service's improvement plan has to dovetail into the area CYP's plan, embodying joined-up, person-centred approaches to identify and meet the needs of children, young people and their families.



Greenwich has set up a full-time Participation and Projects Officer whose role is to ensure that all services across the authority are regularly consulting parents and children and shaping service delivery accordingly. There are Action Change Equality (ACE) groups of young people with special educational needs and disabilities who look at what is working and not working in Greenwich, starting with 16+yrs, with the next phase including all secondary school age. One of ACE groups at a College is HI, another to be set up at secondary school will be 7-11.

There are seven focus groups of young people with SEND with different foci including that specific to education. Young people's opinions are continually being gathered. Within each group one young person goes to the ACE Board which meets at least twice a year with the Assistant Director on the board, therefore at that upper strategic management level there is someone who is talking with CYP with SEND all of the time.

### A1.3.3 Theme 3

**Strong relationships with CYP and parents** *through effective multi-agency discussions and collaborative working and involving CYP and parents in shaping service delivery.*

Most of the SI Services/Teams concerned were involved with the local area's parent and carer forums or user groups that sought and used the views of parents and CYP to inform their discussions with leaders and their role in co-production. This helps to ensure that the views of parents inform all decisions made with parents feeling valued and partaking in the improvement planning for provision in their area including understanding the reasons why decisions are taken.



Halton HI and VI Services hold various social inclusion events to bring parents and CYP together that give opportunities for informal discussion, social activities, networking and mutual support. From these events, the services have supported and encouraged families to develop their own self-help networks. A *WhatsApp* group has been set up to enable parents to support each other and exchange and share ideas. The families have also set up a closed Facebook mutual support group.



Parent 1: *The Sensory team's support has had a very positive impact which has helped enormously with my child's progress in all areas.*

Parent 2: *Staff arrange events where parents and children can get together. It's great to be around other parents in the same situation as me.*

Halton Parent Feedback



Halton HI and VI Services have developed the pupil voice through regular questionnaire and independence training feedback. This has promoted independence and management of visual/hearing needs, including specialist equipment/resources and refined and improved provision; bespoke packages of support meet pupil voice needs e.g. independent travel, emotional resilience.

The services review with students their opinion on their access to the curriculum/support and how to improve and refine their provision so that they can feel in control of their support and take increasing responsibility for their own needs and learning.



Windsor and Maidenhead are supported by the Berkshire Sensory Consortium Service. The consortium meets with groups of parents in terms of service delivery, getting their feedback in terms of new packages of support and feedback about how service delivery can be improved. There is a consultative ethos that informs the Consortium's strategic service delivery plan. Focus groups take place twice a year, in the evening, to make them as accessible to parents as possible. In response to Focus Group feedback, the Consortium has enhanced the website and set up a Facebook page so that additional resources can be available e.g. information about events that are taking place, links to pertinent organisations.

The Consortium places parents and the CYP very much at the forefront and is proactive in encouraging a change of culture in settings where parents do not have ownership of outcomes for their child. For example, the parental comment used to be at the end of any meetings, e.g. EHC Plan, Family Plan, but the Consortium has gradually changed the culture so that parents speak first and set the agenda ensuring that parents have ownership and are involved in coproduction with settings and service.

#### A1.3.4 Theme 4

**Strong and effective working relationships with health, social care and the third-sector through effective multi-agency discussions and collaborative working which supports and enhances outcomes for CYP.**

All services have strong and effective working relationships in this area. The focus is always on having strong communication that can influence improved outcomes. For example, regular frequent meetings with health, both at a local and national level, and user groups such as CHSWGs and Low Vision Groups. There is a professional cohesion in most user groups, which include representatives from health, third sector and social care, which illustrates a coordinated approach to supporting SEND. In two areas, doctors in training shadow SI service staff as part of their training and hospital Eye Clinic Liaison Officers spend time with the VI Teams as part of their induction.



Gloucester specialist teachers work collaboratively with other professionals to meet need, including NHS audiologists, ENT specialists, specialist paediatricians, optometrists, ophthalmologists, health visitors, portage, paediatric occupational therapists, SLT and physiotherapists and specialist settings. They actively seek the views, wishes and aspirations of the children and their families, and work in a *creative/can do* way to make these things happen. e.g.

- TODs act as second tester at audiological testing for Babies and Early years CYP with moderate, significant and profound loss maximising assessment time and minimising need for repeat testing.
- All babies/early years CYP identified via New-born/2-year Screening Programme are offered joint TOD/Health visitor to home
- Monthly Early Years Sensory group attended by audiology staff/ATS/SLT/parents/child – enabling one stop shop to meet need. All 0-5s invited. Parent information/networking session (parental evaluation over time - consistently rate as very good)
- Mature, regular, well attended and robust meetings with NHS and other professionals e.g. Children's Hearing Services Working Group, Modernising Children's Hearing Aid Support Services, VI professional meetings. New links with adult SI services
- Attend Access Panel meetings with Property services, architect, OT to identify all CYP with access needs in transition to mainstream Reception classes, KS1 to KS2, Primary to Secondary, post-16
- Co-production work with voluntary organisations, Gloucester Deaf Association, Whizzkidz to develop joint pathways to promote independence, e.g. *Whizzing on Wheels* (Power chair users Y5- post 18,) Guide Dogs for the Blind.



Plymouth has links with Deaf CAMHs that co-locates within a local secondary school with a HI support centre and regularly meets with those CYP and/or families that need support. In practice this means that families do not have to travel long distances to Taunton or Bristol if they need support.

Those SI services that are effective see user groups as an opportunity to co-produce their service, eg Plymouth, reported that both CHSWGs and LV Groups had been involved in discussion and in supporting the SI service in the redesign of their local offer - developing the direction of service delivery.

In another authority that was undergoing reorganisation in their SEND services, involvement of the User Led Groups involving CHSWGs, NDCS and groups of families alongside managers, resulted in a change of direction once senior managers understood better the concerns around meeting levels of need.



*... so we had discussions around what our NatSIP (taking local needs into account) criteria looked like, they (ULG) were part of formulating what that local intelligence looked like. A good piece of work, challenging but it brought us all closer together in terms of transparency and trust and improving outcomes for CYP even if they are difficult conversations to have.*

Manager, Advisory Support Team



Parents welcome a recent initiative which involves weekly visits to their school by an ophthalmologist. Children are now able to have their eye tests and eye drops put in at school, where previously they had to go to a clinic appointment. This is less stressful for them and means they do not miss valuable learning time in school.

Halton Joint local area SEND inspection

### A1.3.5 Theme 5

**Strong practice in identifying and meetings needs in early years through focusing on inclusivity in the early years underpinned by the ethos of multi-agency working and an equality of access and provision.**

Positive joint-working arrangements between education, health and care services in the early years provides the opportunity to identify and address need early. Pathways such as the Newborn Hearing Screening Programme is well established and effective in all areas.



Hearing checks for new-born infants are carried out effectively by health visitors, with 99.5% of all new-borns receiving their check. Rigorous quality assurance ensures consistency in approach, and the number of inappropriate recalls is very low. Families report high satisfaction with the service as the test is carried out by practitioners who are already engaged with the family and are able to offer immediate advice, support and guidance.

Plymouth Joint local area SEND inspection

The most effective areas have strong multi-agency approaches, such as *Team Around the Child*, *Team around the Family* or *Team Around Me*, with early years professionals, teachers and specialist support from health, education and care working together in a more integrated way, but with a clear understanding that the main aim is to support accurate identification of needs early in a child's life, and thus enhance outcomes and parental confidence. For example, in Gloucestershire, all families, including extended families and grandparents, can access training/support from the SI services in the home and/or the EYs setting.

All families with babies with hearing impairment are offered *BabyBeats*, a program to foster listening and communication development and all EYs settings and parents are offered signing skills training.



Greenwich Sensory Service has an established sensory early years (0-5yrs) group. It comprises a morning session each week, including school holidays, in a local NHS Centre. The group is for sensory impaired children including those with additional needs from birth to five who live in the Royal Borough of Greenwich. The total number of different families who attend in a year is over 25. Parents and grandparents are made welcome, as are siblings.

There are occasional guest speakers, and visiting professionals such as SLT, Community Paediatricians, Early Years Team, Habilitation professionals, Implant Team teachers; Greenwich's Assistant Director also attends the group at least twice a year to meet and talk with parents.

A monthly ear-mould making clinic session held at the group makes the audiologists much more accessible with children/families more relaxed in a familiar environment.



**Parent 1:** *There is no one who understands better what it is like to be a parent of a child with special needs, than a parent of a child with special needs. I have found it very hard to come to terms with all that my son's complex needs have brought, and the help and support that I have received from the tots group, both professional and parents has been invaluable. It is such a big help to have people to talk to and to support us as a family...*

**Parent 2:** *Tots group has been a life saver for me ... being a mum to a severely disabled little girl who is also profoundly deaf...This tots group has given me the courage that I needed to be who I am now. They are always there when my daughter is in hospital (which is very often) and their support is amazing...*

**Parent 3:** *...For us it's been the difference between being isolated and supported and able to mix with other families and support each other and share our journey so far.*

Greenwich Parent Feedback



*The HI team have supported all staff in nursery to teach basic BSL and hearing aid care. This has now helped the child to be more independent and be able to communicate with staff.*

Halton EYs Setting Feedback

#### A1.4 Principles

Sensory Impairment Services should have a clear sense of direction through a Service Development Plan that embodies the three main aspects that underpin an Ofsted and CQC local area inspection:

- identifying SEND
- meeting needs
- improving outcomes.

NatSIP suggest that SI services undertake to develop the following:

1. strong practice in identifying and meeting needs in early years with good evidence of well-planned transition from nursery to school
2. strong strategic leadership that leads to established joint working between education, health and care services ensuring the best possible outcomes for CYP and families
3. strong working partnerships and working together to provide the structure for improving outcomes and experiences for children, young people and their families.
4. Support for the quality and capacity of early years' providers, schools and colleges, in order to meet the needs of local families and their children with SI and to enhance their outcome and attainment. This will include working with schools to develop training programmes and develop information, advice, support and guidance, to make sure that all those who work with children and young people with SI have the necessary skills and confidence (appropriate to their role) to support children and young people and their families, thus improving inclusive practice in all settings from pre-school to post 16
5. strong partnerships in health, education and care – good impact in evaluating provision and outcomes for children and young people right across 0–25 years
6. strong processes of meaningful engagement and participation with young people and families so that they have greater choice, feel they have control, are being listened to and feel supported and involved in processes
7. evaluative feedback from children, young people and their families and using this to illustrate not only the outcomes from, and the impact of, service delivery, but also to develop and continually improve it.

### **A1.5 Acknowledgements**

This section has been developed with support from a wide range of colleagues. We would like to thank those below who have contributed their support and time to developing this resource.

- Gloucestershire: Advisory Teaching Service, Hearing Impairment Team, Visual Impairment Team
- Greenwich: Sensory Impairment Services
- Halton: Inclusive Learning, Hearing Impaired Service, Visually Impaired Service
- NatSIP: National Sensory Impairment Partnership
- Plymouth: Advisory Team for Sensory Impairment Support
- Windsor & Maidenhead: Berkshire Sensory Consortium Service

### **Judy Sanderson**

Section Lead Author

## Appendix 2 The Legislative Framework

What follows is a summary of the legislative framework which pulls together in one place the core legislative requirements for LAs and commissioners of health which are relevant for children and young people with sensory impairment. It provides the statutory context for which the service is provided, and allows you to estimate how much of your service is provided as part of commissioners fulfilling their statutory obligations. It will be helpful to ensure that not only are you aware of the possible legislative requirements around your service, but also that commissioners fully understand this context and the risks of challenge from parents and young people if they do not meet their obligations in these areas. Hopefully they may provide a helpful and supportive context for the discussions around service developments and what constitutes a core statutory service which commissioners must fund.

### A2.1 Duties and Requirements

Duties and requirements	Source/reference	Service provision/percentage of time spent on this area
<b>Identification</b> A Local Authority must identify all CYP with SEN or a disability. <sup>43</sup>	Children and Families Act 2014, Section 22 <sup>44</sup>	
<b>Responsibility for children and young people with SEND<sup>45</sup></b> An LA is responsible for a child or young person: <ul style="list-style-type: none"><li>• identified by the LA as having SEND (or may have SEN)</li><li>• brought to the LAs attention by any person as someone who has or may have SEN</li></ul>	Children and Families Act 2014, Section 24 <sup>46</sup>	
<b>Key worker</b> LAs should adopt a key working approach which provides children, young people and parents with a single point of contact to ensure holistic provision and coordination.  Can be offered where the child or YP has SEN eg offered SEN support in school	SEND Code of Practice. DfE 2015  Para 2.21	

<sup>43</sup> See Section 22 of the Children and Families Act 2014 which gives a responsibility to identify all children for **all** children with SEND. It does not distinguish between those with and without Education Health and Care Plans.

<sup>44</sup> See <http://www.legislation.gov.uk/ukpga/2014/6/section/22/enacted>

<sup>45</sup> Section 24 of the Children and Families Act 2014 gives a responsibility for **all** children with SEND. It does not distinguish between those with and without Education Health and Care Plans

<sup>46</sup> See <http://www.legislation.gov.uk/ukpga/2014/6/section/22/enacted>

Duties and requirements	Source/reference	Service provision/percentage of time spent on this area
<p><b>All families of babies with confirmed PCHI are offered a main professional contact to:</b></p> <p>a) provide ongoing regular support b) ensure a co-ordinated and coherent service.</p>	NHS Newborn Hearing Screening Standards, Standard 22 <sup>47</sup>	
<p><b>Local Offer – supporting its production and review</b></p> <p>LAs must produce a Local Offer setting out education provision and training. It must review it and this includes the sufficiency of provision.</p> <p>4.31 The Local Offer should cover:</p> <ul style="list-style-type: none"> <li>• support available to all children and young people with SEN or disabilities from universal services such as schools and GPs</li> <li>• targeted services for children and young people with SEN or disabilities who require additional short-term support over and above that provided routinely as part of universal services</li> <li>• specialist services for children and young people with SEN or disabilities who require specialised, longer term support</li> </ul> <p>and 4.32</p> <p>and information about:</p> <ul style="list-style-type: none"> <li>• approaches to teaching, adaptations to the curriculum and the learning environment for children and young people with SEN or disabilities and additional learning support for those with SEN</li> <li>• enabling available facilities to be accessed by disabled children and young people and those with SEN (this should include ancillary aids and assistive technology, including Augmentative and Alternative Communication (AAC))</li> </ul>	<p>CFA 2014, Section 30</p> <p>SEND CoP 2015, Paras 4.18, 4.31 and 4.32</p>	

<sup>47</sup> See <http://webarchive.nationalarchives.gov.uk/20150408175925/http://hearing.screening.nhs.uk/standardsandprotocols>

Duties and requirements	Source/reference	Service provision/percentage of time spent on this area
<ul style="list-style-type: none"> <li>• securing expertise among teachers, lecturers or other professionals to support children and young people with SEN or disabilities – this should include professional development to secure expertise at different levels:</li> <li>• awareness (to give a basic awareness of a particular type of SEN, appropriate for all staff who will come into contact with a child or young person with that type of SEN)</li> <li>• enhanced (how to adapt teaching and learning to meet a particular type of SEN, for early years practitioners, class and subject teachers/lecturers and teaching assistants working directly with the child or young person on a regular basis), and</li> <li>• specialist (in-depth training about a particular type of SEN for staff that will be advising and supporting those with enhanced-level skills and knowledge).</li> </ul> <p>Support services have a role in saying both what they do in contributing towards that offer and ensuring that parents can access it.</p>		
<p><b>Supporting Integration</b></p> <p>An LA must exercise its SEND functions with a view to ensuring the integration of healthcare and social care provision where it thinks it would:</p> <ul style="list-style-type: none"> <li>• promote the welfare of CYP with SEND</li> <li>• improve the quality of SEND provision.</li> </ul>	<p>CFA 2014</p> <p>Section 25</p>	
<p><b>Partners should consider how an integrated approach can best support:</b></p> <ul style="list-style-type: none"> <li>• prevention to reduce the need for specialist support later on</li> <li>• early identification</li> <li>• better access to services</li> <li>• good language.</li> </ul>	<p>SEND CoP 2015,</p> <p>Para 3.37</p>	
<p><b>Partners should consider whether and how specialist staff can train the wider workforce so that they can better identify need and support earlier</b></p>	<p>SEND CoP 2015,</p> <p>Para 3.41</p>	

Duties and requirements	Source/reference	Service provision/percentage of time spent on this area
<p><b>Progress check at the age of 2:</b></p> <p>EY practitioners must review progress and provide parents with a report on their child's development</p> <p>The report must describe the activities and strategies the provider intends to adopt to address issues and concerns.</p>	SEND CoP 2015, Para 5.23	
<p><b>Children's Hearing Services Working Group</b></p> <p>Governance structures and strategic partnerships are in place to ensure the service is delivered to meet standard procedures, with clear lines of responsibility and accountability.</p>	NHS Newborn Hearing Screening Standards, Standard 27 <sup>48</sup>	
<b>Early Years</b>		
<p><b>Identification:</b></p> <p>In addition to the statutory duties under section 22 of the CFA 2014, LAs are required to identify children eligible for Early Years Pupil Premium and Disability Access Fund<sup>49</sup> and promote it.</p>	<p>Early education and childcare statutory guidance to LAs (March 2017)</p> <p>Para A1.29</p>	
<p><b>Support to EY providers</b></p> <p>When securing funded places LAs must promote equality of opportunity for disabled children. This should include securing relevant expertise among early years providers and working with parents to ensure that appropriate provision is in place to enable each child to flourish.</p>	SEND CoP 2015, Para 4.37	
<p><b>LAs are required by legislation to:</b></p> <p>[...] secure information, advice and training for providers in their areas [...] on meeting the needs of children with SEND.</p>	Early education and childcare statutory guidance to LAs (March 2017), Part D, Section D.1 <sup>50</sup>	

<sup>48</sup> See: <http://webarchive.nationalarchives.gov.uk/20150408175925/http://hearing.screening.nhs.uk/standardsandprotocols>

<sup>49</sup> This includes children in receipt of Disability Living Allowance

<sup>50</sup> See

[https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/596460/early\\_education\\_and\\_childcare\\_statutory\\_guidance\\_2017.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/596460/early_education_and_childcare_statutory_guidance_2017.pdf)

Duties and requirements	Source/reference	Service provision/percentage of time spent on this area
<p><b>Specialist support for under 2-year olds</b></p> <p>This support can take a number of forms, including:</p> <ul style="list-style-type: none"> <li>• specialist support from [...] specialist teachers, such as a Teacher of the Deaf or QTVI. These specialists may visit families at home to provide practical support, answering questions and clarifying needs</li> <li>• training for parents in using early learning programmes to promote play, communication and language development</li> <li>• home-based programmes [...] which offer a carefully structured system to help parents support their child's early learning and development</li> </ul>	SEND CoP 2015, Para 5.16	
<p><b>For very young children</b>, LAs should consider commissioning the provision of home-based programmes such as Portage, or peripatetic services for children with hearing or vision impairment. Parents should be fully involved in making decisions about the nature of the help and support that they would like to receive.</p>	SEND CoP 2015, Para 9.144	
<p><b>Where a child continues to make less than expected progress [...]</b> practitioners should consider involving specialist teachers, who may be able to identify effective strategies, equipment, programmes or other interventions to enable the child to make progress towards the desired learning and development outcomes.</p>	SEND CoP 2015, Para 5.48	

Duties and requirements	Source/reference	Service provision/percentage of time spent on this area
<p><b>Early Support</b></p> <p>It is particularly important in the early years that there is no delay in making any necessary special educational provision. Delay at this stage can give rise to learning difficulty and subsequently to loss of self-esteem, frustration in learning and to behaviour difficulties. Early action to address identified needs is critical to the future progress and improved outcomes that are essential in helping the child to prepare for adult life.</p>	SEND CoP 2015, Para 5.36	
<p><b>Newborn Hearing Screening</b></p> <p>Children's Services (usually education) are notified within one working day of confirmation of PCHI</p> <p>Families are offered a visit within two working days of contact (year-round)</p> <p>All families of babies with confirmed PCHI are provided with an explanation of the full range of support available and are given the Early Support publications: 'Helping you choose: making informed choices for you and your child' and 'Information for Parents: Deafness'.</p>	NHS Newborn Hearing Screening Standards, Standard 21 <sup>51</sup>	
<p><b>All families of babies with PCHI to be given information about the full range of communication approaches</b> and supported in their choices, in accordance with the principles of Informed Choice.</p>	NHS Newborn Hearing Screening Standards, Standard 24	
<p><b>Statutory EHC Assessment and Plans</b></p> <p>SI services have a key role in the statutory assessment, planning and review processes set out in Sections 36-62 of the CFA 2014 and chapter 9 of the SEND CoP.</p>	CFA 2014, Sections 36-62 SEND CoP 2015, Chapter 9	

<sup>51</sup> See: <http://webarchive.nationalarchives.gov.uk/20150408175925/http://hearing.screening.nhs.uk/standardsandprotocols>

Duties and requirements	Source/reference	Service provision/percentage of time spent on this area
<p><b>EHC Assessment</b></p> <p>In seeking advice and information (for an EHC assessment) the LA should consider with professionals what advice they can contribute to ensure the assessment covers all the relevant education, health and care needs of the child or young person. Advice and information must be sought as follows:</p> <ul style="list-style-type: none"> <li>• If the child or young person is either vision or hearing impaired, or both, the educational advice and information must be given after consultation with a person who is qualified to teach pupils or students with these impairments.</li> </ul>	<p>SEND CoP 2015, Para 9.49</p>	
<p><b>The CoP states that the purpose of information from the assessment is to:</b></p> <ul style="list-style-type: none"> <li>• establish and record the views, interests and aspirations of the parents and child or young person</li> <li>• provide a full description of the child or young person's special educational needs and any health and social care needs</li> <li>• establish outcomes across education, health and social care based on the child or young person's needs and aspirations</li> <li>• specify the provision required and how education, health and care services will work together to meet the child or young person's needs and support the achievement of the agreed outcomes.</li> </ul>	<p>SEND CoP 2015, Paragraph 9.2</p>	
<p><b>Provision of evidence for the assessment</b> as outlined in SEND CoP para 9.14</p>	<p>SEND CoP 2015, Paragraph 9.14</p>	

Duties and requirements	Source/reference	Service provision/percentage of time spent on this area
<p><b>Department of Health Guidance: Care and Support for Deafblind Children and Adults.</b></p> <p>Three main duties imposed on LAs:</p> <ul style="list-style-type: none"> <li>• Ensuring that when an assessment of needs for care and support is carried out, this is done by a person or team that has specific training and expertise relating to deafblind persons - in particular to assess the need for communication, one-to-one human contact, social interaction and emotional wellbeing, support with mobility assistive technology and habilitation/rehabilitation</li> <li>• Ensuring that services provided to deafblind people are appropriate, recognising that they may not necessarily be able to benefit from mainstream services or those services aimed primarily at blind people or deaf people who are able to rely on their other senses</li> <li>• Ensuring that deafblind people are able to access specifically trained one-to-one support workers if they are assessed as requiring one.</li> </ul>	Care and Support for Deafblind Adults and Children 2014, Dept of Health	
<p><b>Support for Education Establishments</b></p> <p>Supporting the best endeavours of education establishments and supporting LA responsibility for all children and young people under the CFA 2014.</p>	CFA 2014, Sections 22, 24 and 66 <sup>52</sup>	

<sup>52</sup> See <http://www.legislation.gov.uk/ukpga/2014/6/section/66/enacted>

Early years – involving specialists (see EY section above)		SEND CoP 2015, Para 5.48
<b>Primary and secondary schools</b>	SEND CoP 2015, Paras 6.58 to 6.62	
<p><b>Schools may involve specialists at any point to advise them on early identification of SEN and effective support and interventions.</b> A school should always involve a specialist where a pupil continues to make little or no progress or where they continue to work at levels substantially below those expected of pupils of a similar age despite evidence-based SEN support delivered by appropriately trained staff. The pupil's parents should always be involved in any decision to involve specialists.</p> <p>The involvement of specialists and what was discussed or agreed should be recorded and shared with the parents and teaching staff supporting the child in the same way as other SEN support.</p> <p>Where assessment indicates that support from specialist services is required, it is important that children and young people receive it as quickly as possible. Joint commissioning arrangements should seek to ensure that there are sufficient services to meet the likely need in an area. The Local Offer should set out clearly what support is available from different services and how it may be accessed.</p> <p>The SEND CoP (2015) Para 6.61 states:</p> <p>'Schools should work closely with the local authority and other providers to agree the range of local services and clear arrangements for making appropriate requests. This might include schools commissioning specialist services directly. Such specialist services include, but are not limited to:</p> <p>[...]</p> <ul style="list-style-type: none"> <li>• specialist teachers or support services, including specialist teachers with a mandatory qualification for children with hearing and vision impairment, including multi-sensory impairment,</li> </ul>	SEND CoP 2015, Paras 6.61 and 6.62	

and for those with a physical disability. (Those teaching classes of children with sensory impairment must hold an appropriate qualification approved by the Secretary of State. Teachers working in an advisory role to support such pupils should also hold the appropriate qualification.) ‘

The SEND CoP (2015) Para 6.62 states:

‘The SENCO and class teacher, together with the specialists, and involving the pupil’s parents, should consider a range of evidence-based and effective teaching approaches, appropriate equipment, strategies and interventions in order to support the child’s progress. They should agree the outcomes to be achieved through the support, including a date by which progress will be reviewed.’

**The SEND regulations set out what information schools should be providing.** It includes

- information about the expertise and training of staff in relation to children and young people with special educational needs and about how specialist expertise will be secured
- information about how equipment and facilities to support children and young people with special educational needs will be secured
- how the governing body involves other bodies, including health and social services bodies, local authority support services and voluntary organisations, in meeting the needs of pupils with special educational needs and in supporting the families of such pupils

SEND Regulations 2014, Schedule 1<sup>53</sup>

<sup>53</sup> See <http://www.legislation.gov.uk/ukxi/2014/1530/schedule/1/made>

## A2.2 General Duties

There are also some general sufficiency duties which apply to children with a disability which would include all children with sensory impairment.

These are as follows:

1. **Education and care provision for disabled children and young people**<sup>54</sup> Section 27 of the Children and Families Act 2014 states that as well as keeping education and care provision under review, local authorities must 'consider the extent to which the provision...is sufficient to meet the educational needs, training needs and social care needs of the children and young people concerned'. In considering this local authorities have to consult with (amongst others) children, young people and parents. Section 27 is therefore likely to be important in any case involving cuts to education or care services for children and young people.
2. **Adult social care services**<sup>55</sup> Section 5 of the Care Act 2014 is often described as the 'market shaping' duty on local authorities. However, as well as generally promoting an effective market in services, every local authority must 'also have regard to the need to ensure that sufficient services are available for meeting the needs for care and support of adults in its area and the needs for support of carers in its area.'
3. **Short breaks**<sup>56</sup> Regulation 4 of the Breaks for Carers of Disabled Children Regulations 2011 requires local authorities to provide 'so far as is reasonably practicable, a range of services which is sufficient to assist carers to continue to provide care or to do so more effectively.' This is a key duty in relation to the provision of short breaks.
4. **Childcare**<sup>57</sup> Section 6 of the Childcare Act 2006 mandates that local authorities must provide 'secure, so far as is reasonably practicable, that the provision of childcare (whether or not by them) is sufficient to meet the requirements of parents in their area who require childcare<sup>58</sup> in order to enable them to [work or study]'. This requirement extends up to 18 in relation to childcare for disabled children.
5. **Children's Centres** Section 5A of the Childcare Act 2006 (referenced above) states that childcare arrangements 'must, so far as is reasonably practicable, include arrangements for sufficient provision of children's centres to meet local need.' These have to be physical centres, as per the definition in sub-section 4. This is why it would be very unlikely to be lawful for a local authority to decide to close all its children's centres.

These duties are subject to important qualifications. The first two duties listed above are 'regard' duties, which require local authorities to 'think about' the need for sufficiency rather than actually achieve sufficiency. The final three duties are focused more on outcomes, but are qualified by reference to reasonable practicability. This means that local authorities can take account of their own resources when deciding what level of provision to make. When contemplating cuts in these areas local authorities must understand the level of demand for a particular service and assess the extent to which the remaining service will be sufficient to meet local needs if the cut is to be made lawfully.

(Sourced from Steve Broach - Rights in Reality<sup>59</sup>)

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<sup>54</sup> See <http://www.legislation.gov.uk/ukpga/2014/6/section/27/enacted>

<sup>55</sup> See: <http://www.legislation.gov.uk/ukpga/2014/23/section/5/enacted>

<sup>56</sup> See: <http://www.legislation.gov.uk/uksi/2011/707/regulation/4/made>

<sup>57</sup> See: [http://www.legislation.gov.uk/ukpga/2006/21/pdfs/ukpga\\_20060021\\_en.pdf](http://www.legislation.gov.uk/ukpga/2006/21/pdfs/ukpga_20060021_en.pdf)

<sup>58</sup> See: <https://rightsinreality.wordpress.com/2014/10/24/challenging-childcare-cuts-through-sufficiency-duties-a-key-case/>

<sup>59</sup> See: <https://rightsinreality.wordpress.com/>

### A2.3 Relevant Legislation and Guidance

LAs and their key strategic partners may find it helpful to consider the following primary legislation and guidance of relevance to joint commissioning for children and young people with SEND:

Sections 23, 25, 28 and 31 of the Children and Families Act 2014<sup>60</sup>

The Care Act 2014<sup>61</sup>

Section 2 of the Chronically Sick and Disabled Persons Act 1970<sup>62</sup>

Schedule 2, section 17 and section 47 of the Children Act 1989<sup>63</sup>

Section 2 of the Children Act 2004<sup>64</sup>

National Health Service Act 2006<sup>65</sup> (Part 3, section 75 and 14Z2)

Local Government and Public Involvement in Health Act 2007<sup>66</sup>

Equality Act 2010<sup>67</sup> (including disability equality duty under s149)

Health and Social Care Act 2012<sup>68</sup>

Working Together to Safeguard Children (2015)<sup>69</sup>: Statutory guidance from the Department for Education which sets out what is expected of organisations and individuals to safeguard and promote the welfare of children

The Children Act 1989 Guidance and Regulations Volume 2<sup>70</sup> (Care Planning Placement and Case Review) and Volume 3 (Planning Transition to Adulthood for Care Leavers): Guidance setting out the responsibilities of local authorities towards looked after children and care leavers

Supporting pupils at school with medical conditions (2014)<sup>71</sup>: statutory guidance from the Department for Education

The Mental Capacity Act Code of Practice (2005)<sup>72</sup>

See also:

Equality Act 2010: Advice for schools<sup>73</sup> - Non-statutory advice from the Department for Education, produced to help schools understand how the Equality Act affects them and how to fulfil their duties under the Act

Reasonable adjustments for disabled pupils (2012)<sup>74</sup>: Technical guidance from the Equality and Human Rights Commission

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<sup>60</sup> See: <http://www.legislation.gov.uk/ukpga/2014/6/contents/enacted>

<sup>61</sup> See: <http://www.legislation.gov.uk/ukpga/2014/23/contents/enacted>

<sup>62</sup> See: <https://www.legislation.gov.uk/ukpga/1970/44>

<sup>63</sup> See: <https://www.legislation.gov.uk/ukpga/1989/41/contents>

<sup>64</sup> See: <https://www.legislation.gov.uk/ukpga/2004/31/contents>

<sup>65</sup> See: <https://www.legislation.gov.uk/ukpga/2006/41/contents>

<sup>66</sup> See: <https://www.legislation.gov.uk/ukpga/2007/28/contents>

<sup>67</sup> See: <https://www.legislation.gov.uk/ukpga/2010/15/contents>

<sup>68</sup> See: <http://www.legislation.gov.uk/ukpga/2012/7/contents/enacted>

<sup>69</sup> See: <https://www.gov.uk/government/publications/working-together-to-safeguard-children--2>

<sup>70</sup> See:

[https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/441643/Children\\_Act\\_Guidance\\_2015.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/441643/Children_Act_Guidance_2015.pdf)

<sup>71</sup> See: <https://www.gov.uk/government/publications/supporting-pupils-at-school-with-medical-conditions--3>

<sup>72</sup> See: <https://www.gov.uk/government/publications/mental-capacity-act-code-of-practice>

<sup>73</sup> See: <https://www.gov.uk/government/publications/equality-act-2010-advice-for-schools>

<sup>74</sup> See: [https://www.equalityhumanrights.com/sites/default/files/reasonable\\_adjustments\\_for\\_disabled\\_pupils\\_1.pdf](https://www.equalityhumanrights.com/sites/default/files/reasonable_adjustments_for_disabled_pupils_1.pdf)