

Scrutiny Inquiry Report

Aspire, Empower, Accomplish – Supporting Young People with Special Educational Needs and Disabilities in Leeds

**Scrutiny Board (Children's Services)
23 February 2017**



Leeds
CITY COUNCIL

Scrutiny Inquiry Final report

Aspire, Empower, Accomplish – Supporting Young People with Special Educational Needs and Disabilities in Leeds

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Desired Outcomes and Recommendations

Desired Outcome – To improve the support provided to children and young people with SEND by improving the quality and timeliness of EHCP's.

Recommendation 1 – That the Director of Children's services works collaboratively with all organisations involved in the provision or conversion of EHCP's to review quality assurance and ensure measures are in place to deliver complete, detailed and individual EHCP's in a timely manner.

Desired Outcome – To be able to utilise information provided by children and young people to identify issues, problems or barriers faced by a particular group, including those with SEND.

Recommendation 2 – That the Director of Children's Services ensures that monitoring information is incorporated in future children and young people surveys, facilitated or supported by Leeds City Council to enable the analysis of responses from groups including children and young people with SEND.

Desired Outcome – To improve parental engagement and collaboration in order to expand their voice and influence in the education, health and care of their child.

Recommendation 3 – That the Director of Children's Services collaborates with the SILC cluster to explore how parental engagement can be improved across all the SILC's in the Leeds area to expand parental voice and influence.

Desired Outcome – To facilitate understanding of attainment and achievement of children and young people with SEND at key stages, and enable the comparison of standards against national and other local authority standards.

Recommendation 4 – That the Director of Children's Services incorporates information into the next and future Annual Standards report(s) which supports a city wide understanding of attainment and achievement of all children and young people with SEND.

Desired Outcome – To understand if an attainment gap exists on the basis of physical disability only. If so, to identify the barriers to attainment and how these can be removed.

Recommendation 5 – That the Director of Children's Services collects and analyses data to identify attainment gaps for physically disabled children and young people, with a view to identifying and understanding if there are any barriers to learning that could be removed through reasonable adjustment.

Desired Outcome – To ensure the SILC Cluster is fully supported as it continues to evolve and to understand the impact of the SILC Cluster on improving school attendance.

Recommendation 6 – That the Director of Children's Services works collaboratively with the SILC Cluster Chair to provide an update in September 2017 on the development and progress of the SILC Cluster, and on the outcomes of their work on improving school attendance.



Desired Outcomes and Recommendations

Desired Outcome – To consider the outcomes of the supported internship pilot, including evaluation of success, areas for improvement and the experience of the young people engaged. To understand how this initiative will continue and the level of support and commitment provided by Leeds City Council and Partners in making this a success.

Recommendation 7 – That the Director of Children's Services provides a comprehensive update in September 2017 on the Supported Internship Pilot, which also includes

- a) feedback from young people who have participated in the programme.
- b) information regarding the extent to which Leeds City Council and Partners have supported young people through their internships.
- c) information about the future of the supported internship pilot.

Desired Outcome – To ensure that the appointment of additional resources to the Transitions Team and the changes in practice resulting from the Children and Families, and Care Acts 2014 has improved support for young people with SEND.

Recommendation 8 – That the Director of Children's Services and the Director of Adult Social Care provide a collaborative comprehensive update in September 2017 on the impact of the changes in practice and resources, and the outcomes for young people (with or without a social worker) who require transition support.

Desired Outcome – To understand the scope, purpose and content of the citywide Preparation for Adulthood Vision and Strategy, and how this is driving change and improvement across all health and social care services in Leeds for children and young people with SEND.

Recommendation 9 – That the Director of Children's Services provides a comprehensive update in September 2017, on the development and impact of the Preparation for Adulthood Vision and Strategy, providing an overview of this strategy to the Scrutiny Board (Children's Services).

Desired Outcome – To ensure that the complexities and barriers to providing supported and effective transition in health and social care services are addressed across all providers in Leeds.

Recommendation 10 – That the Director of Children's Services and the Complex Needs Partnership Board oversees the development of a plan aimed at addressing the recommendations within the 'Transition from children's to adults' services for young people using health or social care services' NICE guideline, across the local authority and all relevant health and social care partners in Leeds. Reporting to, and working collaboratively with, the Children and Families Trust Board and the Health and Wellbeing Board to secure positive outcomes. The Complex Needs Partnership Board is required to provide a progress update to the Scrutiny Board (Children's Services) at a future meeting.

Desired Outcome – To fully understand which interventions and support measures have provided the best outcomes for children and young people with SEND to enable effective future commissioning, service planning and investment.

Recommendation 11 – That the Director of Children's Services develops an evidence base of 'what works' based on the collection of intelligence and outcome information for SEND young adults who have been supported into adulthood wholly or in part by Leeds City Council.



Introduction and Scope

Introduction

- 1 A child or young person has Special Educational Needs (SEN) if they have a learning difficulty or disability which calls for special educational provision to be made for him or her. A child of compulsory school age or a young person has a learning difficulty or disability if he or she:
 - has a significantly greater difficulty in learning than the majority of others of the same age, or
 - has a disability which prevents or hinders him or her from making use of facilities of a kind generally provided for others of the same age in mainstream schools or mainstream post-16 institutions.¹
- 2 In October 2014 the Scrutiny Board (Children and Families) received a report about new the Children and Families Act 2014: SEN and Disability Reforms. The report stated that children and young people with special educational needs and disabilities (SEND), despite significant deployment of resource, do less well than their peers: they are more likely to be absent or excluded from school and are more than twice as likely to not be in Education Employment or Training (NEET). Longer term outcomes continue to be poor with 93% of learning disabled people unemployed. The report also clarified that Children's Services wished to actively engage with young people at risk of disenfranchisement and prepare them for adulthood and active citizenship.
- 3 The Department of Education has stated that 'Achieving good outcomes for children and young people with SEND is integral to the Department for Education's (DfE) wider aim of a highly educated society in which opportunity is equal for children and young people, no matter what their background or family circumstances. It is also integral to the Department of Health's wider aim to help people live better for longer – by leading, shaping and funding health and care in England, making sure people have the support, care and treatment they need, with the compassion, respect and dignity they deserve.'²
- 4 Leeds has an ambition to be a child friendly city by 2030. The methodology for delivering this vision is outlined in The Children and Young People's Plan (CYPP) 2015-2019. This details five headline outcomes one of which is to ensure children and young people do well at all levels of learning and have the skills for life. The CYPP also states that improving outcomes for children and young people with special educational needs and disabilities is a priority.
- 5 At the meeting on the 18th of June 2015 we resolved to undertake an inquiry to look at how these priorities are making a difference for young people with SEND, with a particular focus on how young people are supported to achieve their aspirations and also prepare for adulthood.
- 6 We also wanted to identify the support provided that enables those with SEND to succeed in their education, as the

¹ Special educational needs and disability code of practice: 0 to 25 years. Statutory guidance for organisations which work with and support children and young people who have special educational needs or disabilities, January 2015

² Special Educational Needs and Disability: Supporting local and national accountability - Department for Education March 2015



Introduction and Scope

Annual Standards Report presented to the Scrutiny Board in April 2015 identified that significant focus is required to improve education results at all the key stages, particularly key stage 4.

Scope of the Inquiry

- 7 Terms of reference for the inquiry were agreed on the 10th of September 2015. We agreed that the inquiry would be undertaken with significant focus on the challenges that face young people from year 9 onwards, in education, transition to adult life and into employment or training.
- 8 We concluded that the purpose of the inquiry would be to make an assessment of and, where appropriate, make recommendations on the following areas:
 - The voice of the child and their family and the extent to which children, young people and their families feel informed and involved in decisions affecting their lives particularly in preparing for adulthood.
 - Learning and achievement from year 9 onwards. Education settings and the educational pathways available to generate opportunities for children and young people to obtain skills for life and/or qualifications.
 - Promoting good school attendance.
 - Increasing the number of SEND young people in education, employment or training
 - Preparation for adulthood and transition support.
- 9 The inquiry was conducted over four evidence gathering sessions which took

place between September 2015 and February 2016, when we received a range of evidence both written and verbal.

- 10 We also visited five educational settings between January 2016 and April 2016 to speak to education professionals, young people and carers. We are grateful for the enlightening contribution they made to this inquiry and for the open and informative information provided which highlighted many complexities. We would like to thank them for their input into this inquiry.

Best Council Plan

- 11 The scope of the inquiry fulfils some of the best council objectives and priorities as defined in the Best Council plan for 2015 to 2020
 - Improving educational achievement and closing achievement gaps
 - Providing skills programmes and employment support
 - Improving school attendance
 - Reducing the percentage of young people NEET (not in education /employment/training) / not known

Desired Outcomes, Added Value and Anticipated Service Impact

- 12 In conducting the Inquiry we reflected on the aspirations of the City and how we identify the needs of SEND young people and their families. This included the extent to which children, young people and their families feel informed



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and involved in decisions affecting their lives particularly in aspects that will prepare young people for adulthood. The Scrutiny Board endeavoured to establish if robust strategies, partnerships and services are in place to provide the necessary support that young people require as they progress through the later stages of their education, into post 16 provision and into meaningful employment.

- 13 We also considered the challenge of providing high support in a climate of reducing financial resources. We acknowledge that there continues to be a significant rise in the number of children and young people in Leeds who have SEND. In 2008 there were 8290 children and young people with SEND rising year on year to 9651 in 2014; an increase of 16.4% over a six year period. We were also advised that there has been a steady increase in the complexity of need for this cohort with over 22.5% experiencing more than one type of need in 2014.
- 14 Our recommendations require a number of improvement measures. Such measures potentially will require additional local authority resources and/or support from partners across the City.
- 15 We hope that our findings and recommendations will influence the improvement in services and support provided by Leeds City Council and partner organisations, including the health sector. Our overarching desire is to alleviate the situations that create anxieties and barriers for young people as they develop into young adults, and increase opportunities to enable fulfilled and active adult lives.

Equality and Diversity

- 16 The Equality Improvement Priorities 2016 – 2020 have been developed to ensure that the council meets its legal duties under the Equality Act 2010. The priorities help the council to identify work and activities that help to reduce disadvantage, discrimination and inequalities of opportunity.
- 17 Many children and young people who have SEN may have a disability under the Equality Act 2010. This Act sets out the legal obligations that schools, early years providers, post-16 institutions, local authorities and others have towards disabled children and young people.
- 18 Equality and diversity issues have been considered throughout this Scrutiny Inquiry. The evidence submitted and the topics debated in this inquiry have highlighted that more males than females experience SEND. With regard to ethnic type 75.55% of children and young people in the 2014 cohort are white. The greatest concentration of children and young people with SEND reside in the inner city and South Leeds. It is a well-documented fact that children and young people with SEND do less well than their peers, with long term outcomes that are poor. We hope that our inquiry may contribute to addressing this inequality.
- 19 In all inquiries, where a Scrutiny Board has made recommendations and these are agreed, the individual, organisation or group responsible for implementation or delivery should give due regard to equality and diversity and where appropriate an equality impact assessment should be carried out.



Conclusions and Recommendations

Legislation, Governance and Strategy

- 20 During our preliminary investigations we sought to understand the framework of legislation, governance and strategy that influences the support provided to young people with SEND in Leeds. Our aim was to identify the objectives and outcomes defined, and if our approach fully adhered to and incorporated all requirements, particularly with regard to The Children and Families Act 2014.
- 21 We were advised that the **Children and Families Act** came into force in September 2014.
- 22 The Act was introduced because the former system of support was complicated, expensive and delivered poor outcomes, and children and young people struggled to get the help they needed. Local authorities spend over £5 billion a year on SEND provision, and yet:
- in 2012 at Key Stage 2, pupils with SEND achieved roughly half as well as those with no identified SEND at English and Maths (43% achieved level 4 in comparison with 91%)
 - the percentage of pupils with SEND achieving 5 or more GCSEs at grade A* to C was 22% in comparison with 69% with no identified SEND at Key Stage 4/5; and
 - around 30% of all young people with statements of SEN at 16 are not in education, employment or training at 18 compared to 13% of their peers.³
- 23 The changes also aim to make it easier for children and young people with SEND and their families to get the information, support and services they need to have good outcomes and get ready for adulthood.
- 24 The Act also aims to make sure children and young people, and their families get to have a say when decisions are made about the services they access themselves and about how services are developed locally by education, health and social care agencies.
- 25 The **Special Educational Needs and Disability Code of Practice 0 to 25 Years** is the comprehensive document produced by the Department for Education and the Department for Health⁴ which enabled us to establish the Government expectations in terms of duties, policies and procedures with regard to the Children and Families Act 2014. This document covers the 0-25 age range and includes guidance relating to children and young people with SEND. The code is referenced further in this report as it enabled us to better identify gaps and areas for improvement.
- 26 It was brought to our attention that **Ofsted and the Care Quality Commission (CQC)** will also be starting their inspection of SEND nationally from May 2016. Leeds City Council would take a lead role in the inspection of SEND provision in Leeds which would also include children, young people, their families and partner organisations such as schools, health and voluntary sector.⁵

³ Supported Internships – Department of Education June 2014 revised December 2014

⁴ January 2015

⁵ Post inquiry – inspection took place in Leeds December 2016



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27 Inspectors will gather evidence to answer three primary questions:

- Question A: How effectively does the local area identify children and young people who have special educational needs and/or disabilities?
- Question B: How effectively does the local area assess and meet the needs of children and young people who have special educational needs and/or disabilities?
- Question C: How effectively does the local area improve outcomes for children and young people who have special educational needs and/or disabilities?⁶

28 In addition we understand that inspectors will also evaluate how education, health and social care services work together in the best interest of children and young people, an area of specific focus for us particularly with regard to supporting a young person into adulthood (transition).

29 During our inquiry we received information relating to the **Leeds SEND Strategy** and resulting action plan. The Strategy sets out how partners across Leeds plan to support learners with SEND aged 0–25 to achieve their best possible outcomes. In this regard we continually sought to establish, during inquiry sessions and during visits, what challenge and support mechanisms are in place to ensure that young people with SEND are supported to succeed in

their education, reach their potential, progress and achieve.

30 We established that the aspirations within the Leeds SEND Strategy are in accord with the SEND code of practice, these include:

- Early intervention and support for children and young people with SEND
- Personalisation to meet individual needs
- The opportunity whenever possible for children and young people with SEND to be educated as close to home as possible, in order to foster and maintain strong supportive networks within their own communities that continue beyond their school years into adulthood
- Collaborative working and co planning with parents, carers and children and young people regarding SEND developments and provision
- Local pathways with clear transition arrangements across phases to promote positive outcomes for children and young people with SEND throughout school and into adulthood
- Clear, transparent information about services to support families in making informed choices and accessing services

31 To support the implementation of the SEND reforms a **Children and Families Act Steering Group** was established in Leeds. This is a multi-agency group which continues to look at national policy and inspection frameworks and reports to the Complex Needs Partnership Board.

⁶ The handbook for the inspection of local areas' effectiveness in identifying and meeting the needs of children and young people who have special educational needs and/or disabilities, Handbook for inspecting local areas in England under section 20 of the Children Act 2004 – April 2016



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Education Health and Care Plan (EHCP)

- 32 From 1 September 2014 the Children and Families Act provided new statutory assessment and planning arrangements for children and young people with SEND. This replaces statements and Learning Difficulty Assessments.
- 33 By 1 April 2018, local authorities must have transferred all children and young people with statements of SEN to the new SEN and disability system who meet the criteria for an Education Health and Care Plan. From 1 September 2016, all young people who had received support as a result of a Learning Difficulties Assessment in further education and training who continue in further education or training beyond that point and who need an EHC plan must have one.⁷
- 34 We were advised that the initial year of conversions to the new Education Health and Care Plans (EHCP) had been successful, with 2.5k statements having been converted. It was also stated that Leeds has been working hard with parents, carers and children to reflect their wishes.
- 35 EHCP's aim to provide support for children and young people through a unified plan taking into account education, healthcare and social care needs. The plan sets out the additional support to meet those needs. Each local authority is responsible for ensuring an EHCP is prepared which involved multi-agency input, including health services. An EHCP can be in place until the age of 25 for those who stay in education and have complex needs.
- 36 During our discussions with Health professionals we were advised that all children's health services will contribute to the EHC planning process when invited to do so, through the submission of information and/or attendance at planning meetings. It was noted that work by health services is being undertaken to improve these processes, particularly in relation to EHCP conversions at the Specialist Inclusive Learning Centres (SILC's).
- 37 When speaking with education professionals they advised us that they have experienced problems with the quality of some of the EHCP's received. It was stated that the quality can be inconsistent, some very good and some not so. Practitioners have also found that there can be a lack of detailed information/explanation which means that the school or learning centre does not have the information to enable them to meet specific needs when the child or young person arrives. It was also stated that repeated generic terms have been used in some EHCP's when explaining health needs, instead of providing an individual explanation for the child or young person.
- 38 By way of explanation we were advised that all EHCP conversions will be completed using existing information. There is not sufficient capacity to provide a complete reassessment so recent and relevant information and advice is used. We were advised that new assessments as they come through will be of better quality. Whilst we
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- ⁷ Transition to the new 0 to 25 special educational needs and disability system, Departmental advice for local authorities and their partners - Third edition: September 2015



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acknowledge that there is a limited time scale imposed by Government to undertake EHCP conversions we understand the importance of an individual and specific EHCP which should empower and enable young people, family members and practitioners to remove any barriers to education and care.

39 An EHC plan must be reviewed and amended in sufficient time prior to a child or young person moving between key phases of education, to allow for planning for and, where necessary, commissioning of support and provision at the new institution.⁸

40 At one of the educational establishments visited we were advised that a number of EHCP's were received three days before the end of the summer term for children due to start the following September. This provided very little time to put the necessary support in place to meet their individual needs from their first day at the school.

Recommendation 1 – That the Director of Children's services works collaboratively with all organisations involved in the provision or conversion of EHCP's to review quality assurance and ensure measures are in place to deliver complete, detailed and individual EHCP's in a timely manner.

⁸ Special educational needs and disability code of practice: 0 to 25 years. Statutory guidance for organisations which work with and support children and young people who have special educational needs or disabilities, January 2015

Voice and Influence

41 The SEND Code of Practice defines the requirement for local authorities to consult with children and young people with SEND and their parents.

42 The requirements are designed to support:

- the participation of children, their parents and young people in decision-making
- the early identification of children and young people's needs and early intervention to support them
- greater choice and control for young people and parents over support
- collaboration between education, health and social care services to provide support
- high quality provision to meet the needs of children and young people with SEN
- a focus on inclusive practice and removing barriers to learning
- successful preparation for adulthood, including independent living and employment⁹

43 We were informed that the Complex Needs and the Voice, Influence and Change (VIC) teams work closely together to ensure families, children and young people with SEND are included in the design of services that are relevant to them. Work with parents via EPIC Leeds¹⁰ is part of that work. It was reported that there are now established mechanisms in place to enable children and young people with SEND to be made aware of opportunities to participate in decision making via the

⁹ Special Educational Needs: support in England, Robert Long, House of Commons Briefing paper 07020 8 February 2016

¹⁰ the parent participation forum



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VIC network, who then advise decision makers of progress and key challenges.

44 It was evident during the inquiry that there are strong mechanisms in place to seek out and identify the views of young people. These include the 'Make your Mark Ballot',¹¹ the SILC Parliament and the Youth Council. Pupils within the SILC's have been involved in curriculum review, recruitment and selection, and in evolving their anti-bullying policy. There is also a network of VIC 'champions' within the variety of educational establishments and in the voluntary sector in the City. In addition we were advised that there is an advocacy service which supports those young people who may feel that their views are not being considered sufficiently.

45 We asked if the views of young people with SEND have been sought about the things that would make the most positive differences in their lives. In response we were advised that the universal 'Growing up in Leeds' and 'My School My Health' surveys had been undertaken but these surveys did not ask any monitoring questions about disability or SEN. As a result it was impossible to identify from this survey if there were specific issues that impacted positively or adversely on this cohort of young people.

Recommendation 2 – That the Director of Children's Services ensures that monitoring information is incorporated in future Children and Young People surveys, facilitated or supported by Leeds City Council to enable the analysis of responses from groups including children and young people with SEND.

46 Throughout the inquiry we were repeatedly advised about the active participation of young people and their parents/carer in the establishment and review of EHCP's. This was reinforced during discussions with education professionals. We did explore the levels of regular engagement with parents and carers, being conscious that parental support is very important. During each of our visits we asked for clarity about direct engagement with families, and if there are concerns or challenges that need ardent focus.

47 At one school visit we were advised that professionals were very involved with parents/carers engaging where possible on almost a daily basis. When speaking to SILC Cluster¹² representatives we were advised that they work to provide support to parents particularly where a parent has a concern about the health of their child. They also advised us that they do encounter difficulties with parental engagement particularly at parent's evenings, with an example of 30% attendance quoted. Whilst we acknowledge that the young people attending SILC's have very complex needs that may create difficulties in enabling parents to engage with SILC's, we also consider that there is an

¹¹ Organised by the Youth Parliament and the British Youth Council.

¹² See page 16 for further information about the SILC Cluster.



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opportunity to improve engagement which should be explored.

Recommendation 3 – That the Director of Children’s Services collaborates with the SILC cluster to explore how parental engagement can be improved across all the SILC’s in the Leeds area to expand parental voice and influence.

Ambition in Education

Key stage 4

48 All pupils should have access to a broad and balanced curriculum. The National Curriculum Inclusion Statement states that teachers should set high expectations for every pupil, whatever their prior attainment. Teachers should use appropriate assessment to set targets which are deliberately ambitious. Potential areas of difficulty should be identified and addressed at the outset. Lessons should be planned to address potential areas of difficulty and to remove barriers to pupil achievement. In many cases, such planning will mean that pupils with SEN and disabilities will be able to study the full national curriculum.¹³

49 We established that there are a number of different settings to support SEND young people during their education or life skills development, including further education. The different types of settings are established to meet the range of needs of children and young-

people in Leeds. There are seven Special Inclusive Learning Centres (SILC) in Leeds. One in each of the five areas of the city, a free school SILC and a SILC for children with severe behavioural, emotional and social difficulties. SILC schools support the education and learning of children and young people who have severe and complex difficulties and are unable to access mainstream provision. 6% of the children and young people classified as having SEND in Leeds attend a SILC.

50 A considerable focus of our inquiry was to identify and compare attainment and achievement in Leeds, and establish how young people are supported in their educational setting to be ambitious, and how progress, attainment and achievement is encouraged.

51 We acknowledged that some children and young people take National Curriculum tests (SATs) at the end of Year 6, GCSEs and other equivalent qualifications in Year 11. There are also young people who cannot access the National Curriculum and for whom this form of assessment is not appropriate.

52 We were advised that performance attainment targets (P scales) are a national alternative for assessing the progress of children and young people with SEND who cannot access the national curriculum.

53 Data was provided for key stage 4 (percentage of pupils achieving 5 A*-G at GCSE) for 2011/12, 2012/13 and 2013/14. This highlighted that SEN Pupils in Leeds do not perform as well as SEN pupils nationally across all categories of SEN, with the biggest attainment gaps reported in 2013/14

¹³ Special educational needs and disability code of practice: 0 to 25 years. Statutory guidance for organisations which work with and support children and young people who have special educational needs or disabilities, January 2015



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across all categories.¹⁴ When we challenged levels of attainment in Leeds we were advised that closing the attainment gap is one of the aims defined in the SEND strategy for Leeds.

54 During our inquiry we had the opportunity to speak to education professionals at Broomfield Special Inclusive Learning Centre (South SILC). We also visited two resourced schools. Ralph Thoresby and John Smeaton Academy. These are mainstream schools that provide specialist support to address the individual needs of children and young people with SEND. Children are included in the mainstream school in both settings, whilst receiving specialist support to address their individual needs.

55 At each setting visited we explored how young people are encouraged to reach their potential. We were advised that each young person has a personalised pathway to learning. Expectations for progress and target setting for each young person will depend on the severity or their disability or special need.

56 It was evident that the professionals who spoke to Board members in the various settings are dedicated to the young people they support and educate. At the resourced settings we were provided with specific examples of the support provided to meet individual needs, we also discussed structured lesson planning to support inclusive and integrated learning and adapted communication methods.

57 In terms of closing the gap and providing challenge, both resourced schools were very clear that each pupil with SEND is treated individually; with some supported to do EBACC, some doing a similar number of subjects as non-SEND pupils, some study a reduced number of subjects and some are provided with additional support and extra study time. Both resourced schools have also invested in staff training so that they are better equipped to support the needs of children and young people with SEND.

58 As young people with more complex needs attend the SILC's it was evident that many are undertaking non-academic programmes or study programmes which provide them with skills for life. Professionals at Broomfield SILC stressed the importance and value of this type of learning for young people with highly complex needs. In addition we were advised that there are a number of young people who cannot function in a mainstream school due to autism or Asperger's but who require a mainstream education. Partnership arrangements with Rodillian Academy help to address that need and also support social development with peers in the mainstream setting.¹⁵

59 At all settings we were advised that aspirational targets are set for SEND pupils and where appropriate additional challenge is set. Progress is monitored continually and, as with all schools their performance is assessed externally by Ofsted.

60 For those students working at P scales we were advised that progress is

¹⁴ The data presented reflects the categories School Action, School Action Plus and Statemented which preceded EHCP's.

¹⁵ Partnership Schools are mainstream schools with some teachers and specialist staff employed by the SILC.



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recorded and monitored. Comparison and analysis of Special Pupil Attainment data is captured electronically which allows nationwide comparisons with other special schools.

- 61 Each year the Director of Children's Services submits the Annual Standards Report to the Executive Board of Leeds City Council. This report summarises data and information which shows the outcomes of Leeds children and young people. During the time of the inquiry we identified that the Annual Standards Report did not reflect the attainment of the SEND cohort. This was addressed in part in the next Annual Standards Report for 2014/15. This report contained information relating to GCSE and level 4 attainment. We felt it important that all organisations and educational settings supporting children and young people with SEND in Leeds should be able to access a comprehensive overview of educational performance and achievement for all Children and Young People with SEND within the Annual Standards Report including those undertaking entry level programmes and P Scales. This should include comparator information which will enable readers to understand how Leeds performs.

Recommendation 4 – That the Director of Children's Services incorporates information into the next and future Annual Standards report(s) which supports a city wide understanding of attainment and achievement of all children and young people with SEND.

Post 16 learning

- 62 It was evident that young people with SEND in Leeds have a number of options available to them post 16 should they wish to stay in education. We were informed that many of those in SILCs will continue in their education until 19 years of age and will have access to a range of qualifications that prepare them for adult life. Others who study in resourced or partnership schools may have an option to move into their 6th form provision. Some young people who wish to continue their studies until they are 25 may opt to learn at Leeds City College.
- 63 We asked Diane Wilson the Director of Essential Skills at Leeds City College how young people with SEND are challenged to achieve their aspirations through learning. We were advised that Leeds City College has a large selection of non-accredited provision. Each student has an interview, induction and an assessment, when outcome based targets are set with students based on learning, development and behaviour. Individual learning plans are created which are reviewed regularly and quality assured.
- 64 SEND students are also expected to contribute to college life like other students. They are student ambassadors, student representatives and will join the student union and therefore have a student voice. We were informed that a considerable amount of feedback is obtained through these avenues.



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65 A number of students are based at Vine¹⁶. This provides individual learning programmes to meet the high level of learning and support needs of the students based there. We were informed that care is taken to design and adapt learning around the individual needs and aspirations of each student. They are supported by a team which comprises of teachers, learning support staff and a team of specialist full time nursing staff. Information, advice and guidance is also offered so students are able to move within Leeds City College when they are ready.

66 Whist focusing on post 16 learning we discussed the funding of guided learning hours during our visits. This is funding provided by the Education Funding Agency to be used for the provision of education only. We were advised that guaranteed funding for further education equates to approximately 3 days. This is proving problematic for some families who need to secure additional care for 2 days per week once their child enters further education.

67 We were advised that not all providers have adjusted their learning offer to 3 days and are still providing 5, but financial pressures are making this difficult to continue. We appreciate that there is a distinction between education and care, and we acknowledge in some settings both is provided. Young people and their families need to be made aware about the changes in support early, well before transition to post 16 learning, so that they can make the appropriate choices about post 16 settings and decide which will best suit the needs of the young person.

Reasonable Adjustment

68 We understand that among adults of working age, those with a disability are roughly half as likely to have degree level qualifications as those without.

69 We are also aware that all providers must make reasonable adjustments to procedures, criteria and practices and by the provision of auxiliary aids and services. Schools and local authority education functions must publish accessibility plans setting out how they plan to increase access for disabled pupils to the curriculum, the physical environment and to information.¹⁷

70 We wanted to understand the barriers that could be preventing disabled young people from undertaking and obtaining degree level qualifications. We questioned if enough is being done to implement reasonable adjustments, whilst undertaking entry level qualifications for higher education. In response we were informed that attainment data will include all levels of disability and that can present a problem in terms of analysis. Many children with physical disabilities will have the same cognitive ability as an able bodied child and therefore in theory should be able to attain the same. It was acknowledged that some detailed examination of statistics is needed to identify if there is an attainment gap where cognitive ability is not an issue, and if targeted intervention is required.

¹⁶ Part of Leeds City College

¹⁷ Special educational needs and disability code of practice: 0 to 25 years. Statutory guidance for organisations which work with and support children and young people who have special educational needs or disabilities, January 2015



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Recommendation 5 – That the Director of Childrens Services collects and analyses data to identify attainment gaps for physically disabled children and young people, with a view to identifying and understanding if there are any barriers to learning that could be removed through reasonable adjustment.

The SILC Cluster

71 A Cluster Partnership is a local model of support for children and families which link a number of key services such as education and early year's provision, with personal, social and health support, to improve outcomes wherever they live in the city.

72 The remit of a Cluster Partnerships is much wider than the provision of Education. Cluster working enables specific focus on the child or a family so that whole family support can be implemented using a range of services such as school nursing or counselling. These should, either directly or by default, remove barriers to learning for children.

73 All Cluster Partnerships with the exception of the SILC Cluster are geographical areas defined by networks and relationships built over a number of years by schools in that area.

74 The SILCs have come together to form their own Cluster Partnership. This partnership was formed later than the other clusters and in comparison is still in its infancy. We were advised by the SILC Cluster Chair of their aim to

develop and to reach parity with the geographical Cluster Partnerships.

75 We were informed that historically some SEND children and young people had not been able to access targeted support because they did not attend school in the area in which they lived. The formulation of the new SILC Cluster has removed this barrier to services. Before the Cluster was formed the SILC's did not qualify for TAMHS¹⁸ funding or benefit from Targeted Service Leader Support. This support is now in place.

76 We were further advised that the SILC Cluster would like to build stronger and closer relationships with organisations such as Childrens Social Services and Health Services. As young people travel from across the Leeds area to various SILC's the SILC Cluster also recognises the need to build strong links with the geographical Clusters.

77 We understand that families with a child or young person with SEND will face additional challenges and as a result may need targeted support. We were informed by 'Sibs'¹⁹ that siblings of children and young people with SEND can also struggle with wellbeing or attainment as a result of the pressure of family life, particularly if they have carer responsibilities. They need to be identified early as they are also a vulnerable group which needs support. This area may warrant further attention by the Scrutiny Board in the future. We therefore found the intention of the SILC Cluster to build links to geographical Clusters, to support the delivery of

¹⁸ Targeted Mental Health in Schools

¹⁹ Sibs an organisation which exists to support people who grow up with or have grown up with a disabled brother or sister



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services for the whole family in the area in which they live, an encouraging development.

78 When speaking to SILC Cluster representatives we wanted to explore school attendance in further detail as we understand that children and young people with SEND in general, have a higher percentage of overall absence and persistent absence than non-SEND pupils. Nationally in 2013/14, pupils with a statement of special education needs had an overall absence rate of 7.5% whereas pupils with no identified SEND had an overall absence rate of 4.1%.

79 We were advised that the SILC Cluster had conducted an outcomes based accountability event in October 2015 to explore school attendance specifically. This was attended by attendance services, complex needs and health professionals and SILC's.

80 Attendees recognised that each SILC is addressing the needs of different children and young people. Those with profound and moderate learning difficulty, Autistic Spectrum disorders, those with parentally condoned absence, and those whose physical disabilities create challenge. We were informed that it was difficult to identify a one size fits all solution but it did enable the SILC's to understand what could be done to improve attendance in their settings.

81 We recognise that the SILC Cluster is evolving and already working to positively influence and support families who need targeted services and would welcome an update on the development and progress of the SILC Cluster.

Recommendation 6 – That the Director of Children's Services works collaboratively with the SILC Cluster Chair to provide an update in September 2017 on the development and progress of the SILC Cluster, and on the outcomes of their work on improving school attendance.

School Transport

82 The aspirations for SEND services in Leeds are documented in 'Making Leeds a great place to learn for all our children and young people: the Leeds SEND Strategy 2014 – 2017'. These aspirations include the opportunity whenever possible for children and young people with SEND to be educated as close to home as possible, in order to foster and maintain strong supportive networks within their own communities that continue beyond their school years into adulthood. We were advised however across all the settings visited that young people are travelling from across the city to attend their school or SILC. Some are brought by family members, a significant amount are transported by local authority provided bus services.

83 Education professionals had mixed views about local authority provided transport. It was stated that social interaction is hindered, such as participation at after school clubs and extracurricular activities, as there is no flexibility in travel arrangements. Journeys can be particularly long and arduous for the students. It was stated that 'kids can be on the bus for hours.'

84 Conversely, concern was expressed should this service not be available in



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the future, particularly with regard to safeguarding. We were advised that independence is welcomed; however travel training would not be appropriate for all young people, particularly with regard to the emotional resilience and safety of a student if faced with an unfamiliar set of circumstances.

- 85 We have maintained a watching brief over the ongoing development of the Post 16 SEND school transport policy and we acknowledge the feedback received regarding transport during this inquiry. We will continue to provide support and challenge as this policy continues to develop until such time as it is adopted by the Executive Board of Leeds City Council.

Positive Destinations

- 86 Over recent years the Scrutiny Board has maintained a rigorous overview of the number of young people in Leeds who are not in education, employment or training. One notable cohort on which we have focused is young people with SEND. For that reason we wanted to understand how we improve outcomes for young people, keeping them in education, giving them the opportunities to undertake training and supporting them into employment.
- 87 During our inquiry we were very fortunate to speak to a number of young people of school age. We wanted to understand their aspirations and what they wanted to achieve. All saw themselves in employment, being a teacher, architect, accountant, games concept designer. Some being their own boss, running a restaurant, being a builder. For some their pathway included further study. These were

young people with high aspirations, and quite rightly so.

- 88 We were advised that a key part of the EHCP is to document aspirations and plan for each young person to reach a positive destination, with Complex Needs Specialist Transition Advisors working with education providers and year 11 students to ensure that they have an education, training or employment destination at the end of year 11. It was stressed to us that education providers are working to ensure that there is a range of options available so that the young person is on the most appropriate pathway.
- 89 All the education professionals to whom we spoke advised us of how they support their young people through the provision of information advice and guidance and provided opportunity to experience work. We were advised that it is usual to start providing information advice and guidance (IAG) in year nine, speaking to both the young person and their parent or carer about options. At Broomfield SILC we spoke to a member of staff engaged to provide specific focus on the provision of information advice and guidance to young people regarding continued education, employment or training. He advised us that in some cases it has been beneficial for the young person to receive support earlier in year eight, which we found both encouraging and reassuring.
- 90 The Special Educational Needs Coordinators (SENCO) we met advised us of their role in providing IAG and also in arranging meaningful work experience. All settings demonstrated that they have been proactive in



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establishing links with organisations to secure work experience. Some have provided employment experience opportunities within the setting or at established internal enterprises.

- 91 As detailed earlier in this report, young people with SEND have the option to enter into further education. Many choose to continue their education at Leeds City College who provide support for young people until the age of 25, predominantly transferring from the SILC's.
- 92 The college plans for transition to destinations, with some students going onto higher education, apprenticeships or work. We were informed that the college has invested heavily to put into place a team of coaching tutors, job coaches and specialist teachers.
- 93 The college also runs supported employment programmes, and has internal enterprises where their students can obtain work experience and practice their skills. We were informed that the college had been particularly successful in securing work placements.
- 94 It was stated that not all students go into employment as this is not always appropriate. The college has built relationships with the 3rd sector and created an active adult life programme. Working with a network of 80 services, they create a timetable with the young person and their families that may include voluntary work, groups, clubs and activities, making sure the funding is in place and the timetable is sustainable.
- 95 The National Audit Office report *Oversight of special education for young*

people aged 16-25 published in November 2011, estimates that supporting one person with a learning disability into employment could, in addition to improving their independence and self-esteem, increase that person's income by between 55 and 95 per cent. A 2007 Ofsted survey of college-based provision for 16-18 year olds with learning difficulties and/or disabilities found that learners' progression to employment was 'under-developed' and a more recent report from Ofsted suggests that this issue remains.²⁰

- 96 In the knowledge that only a small proportion of young people with moderate or severe learning difficulties go into paid employment we wanted to understand what other initiatives are in place to support young people with SEND into employment.
- 97 We were advised that a supported internship pilot for post-16 students with SEND has been established. Leeds City Council is working closely with employers, post-16 providers and supported employment advisers to provide courses which aim to help young people to achieve paid employment by giving them the skills and experience they need through learning in the workplace. The internship is part of the young person's programme of study, it is unpaid and lasts approximately 6 -12 months. The internship should support young people to develop the skills valued by employers, enable young people to demonstrate their value in the workplace

²⁰ Supported Internships – Department of Education June 2014 revised December 2014



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and develop confidence in their own abilities.

98 We were informed that 30 students are on a study programme which is intended to lead them into permanent employment. A number of opportunities are being offered by Leeds City Council, Leeds Community Health NHS Trust and Leeds Teaching Hospitals Trust with support from other sectors being sought.

99 We understand that the provision of supported internships in Leeds for SEND young people is in development and it is our intention to monitor progress, particularly the provision of opportunities provided by Leeds City Council and Partners.

Recommendation 7 – That the Director of Children’s Services provides a comprehensive update in September 2017 on the Supported Internship Pilot, which also includes

- a) **feedback from young people who have participated in the programme.**
- b) **information regarding the extent to which Leeds City Council and Partners have supported young people through their internships.**
- c) **information about the future of the supported internship pilot.**

Transition to Adult Life

100 In February 2013, Leeds City Council signed the Every Disabled Child Matters Charter agreeing to 12 commitments. One of these commitments was that the local

authority would work together with disabled young people and adult service providers to ensure a smooth transition to adult services for disabled young people preparing for adulthood.

101 For approximately 6 years, preceding the Children and Families Act, Leeds City Council has had a Transitions Team who help young people, meeting particular criteria, to transition to adult services.

102 Leeds City Council’s Transitions Team is jointly funded by Adult and Children’s Services. It is a multi-disciplinary team who work city wide to provide specialist advice, guidance and support to young people with a range of disabilities and or complex health needs. The team work with young people between the ages of 14 and 25 and also support their families, parents and carers through the transition from child to adult services. We were advised that the team work closely alongside other social workers, education providers, health professionals, voluntary and independent sector providers. Historically young people had to have an allocated Social Worker from Children’s Social Work Service to qualify for this support.

103 The SEND Code of Practice states that from Year 9 onwards local authorities, schools, colleges and other agencies will be involved in the planning for transition to adult life, the future and how to prepare for it, including their health, where they will live, their relationships, control of their finances, how they will participate in the community and achieve greater independence. It also states that the local authority must carry out an adult



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care transition assessment where there is significant benefit to a young person or their carer in doing so and they are likely to have needs for care or support after turning 18. Transition assessments for adult care must take place at the right time for the individual. There is no set age when young people reach this point and as such transition assessments should take place when it is of 'significant benefit' to them.

Therefore, children's services must not be discontinued simply because a young person has reached their 18th birthday.²¹

104 We were reassured that the Transition Team understand that some young people cannot transition into adult services at 18 years and therefore their case will remain with the team until such time as the young person is assessed as ready to move on.

105 However, whilst speaking to professionals during our visits we were advised that there are problems for children moving to adult services. For some families it can be a traumatic time. There was a view that moving to adult services 'only flows for those with complex physical conditions, which is about 15% of young people'. We were also advised that some families endeavour to provide support to their young person, who may have very complex needs, without the support of a social worker. By doing this, however they have not historically met the criteria for transition support from the transitions team.

106 Professionals based in the various educational settings visited have laboured to support students and families through the changes, with families having to seek out social work support purely to meet criteria for transition support. During our discussions at Ralph Thoresby we were advised that they endeavour to provide co-ordination between the various organisations involved with a young person and that the relationship that students have with staff during transitioning can often go well beyond key stage 5.

107 When we investigated this we were advised that there has been a development from the established eligibility criteria for transition services to include those with a common assessment or EHCP. The Transition Team would therefore be supporting a wider cohort of young people. This is due to the impact of the Care Act 2014 and the Children and Families Act 2014. It was stated that work had been undertaken to develop pathways between Children's Services and Adult Social Care to ensure that young people with SEND are effectively screened for eligibility of service under the Care Act 2014. The team now works with young people who may not have had a social worker, but still have a level of need requiring adult services. Two additional members of staff would be recruited to the Transitions Team to take into account the increase in role and workload.

²¹ Special educational needs and disability code of practice: 0 to 25 years. Statutory guidance for organisations which work with and support children and young people who have special educational needs or disabilities, January 2015



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Recommendation 8 – That the Director of Children’s Services and the Director of Adult Social Care provide a collaborative comprehensive update in September 2017 on the impact of the changes in practice and resources, and the outcomes for young people (with or without a social worker) who require transition support.

108 To strengthen a co-ordinated partnership approach to transition we were informed that a ‘Preparation for Adulthood Vision and Strategy’ was in development. The production of this strategy would involve young people with SEND and their families as equal partners working alongside statutory and non-statutory agencies and organisations across education, health and care. The aim of the strategy is to improve outcomes for individuals and their families by establishing a coherent framework locally, focusing knowledge, resources and services across the partnership on supporting and enabling the successful transition of young people with SEND into adulthood. We welcome this development and consider that the strategy and the outcomes and impact delivered as a result should be reported to the Scrutiny Board.

Recommendation 9 – That the Director of Children’s Services provides a comprehensive update in September 2017, on the development and impact of the Preparation for Adulthood Vision and Strategy, providing an overview of this strategy to the Scrutiny Board (Children’s Services).

Transition in Health

109 The SEND code of practice stipulates that there must be effective planning with health services for the transition of young people from specialist paediatric services to adult health care. An important part of this is helping young people understand which health professionals will work with them as adults and also ensuring those professionals understand the young person’s learning difficulties or disabilities. Care should be co-ordinated based on their needs to ensure continuity and the best outcomes for the young person. The young person should be involved in developing their transition plan, which should identify who will take the lead in co-ordinating care and referrals to other services. The lead health professional should be known to the young person.

110 Before the introduction of the Children and Families Act and Care Act 2014 research identified that only 50% of young people and their parents said they received support from lead professionals during the process leading up to transition into adult services. Many professionals delivering care said that they were not clear about the process and parents said that they felt abandoned by health and social care services at this most difficult time.²²

111 Fully appreciating that the change from paediatric care to adult health services can create anxiety for young people and their families, we wanted to better understand how health and social care providers in Leeds are co-ordinating this process, particularly for

²² From the Pond into the Sea – Children’s transition to adult health services, Care Quality Commission, June 2014



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young people who have complex health care needs. Representatives from Leeds Community Healthcare NHS Trust (LCH), Leeds Teaching Hospitals Trust (LTHT) and Leeds South and East Clinical Commissioning Group (CCG) contributed to the inquiry and advised us of the particular challenges they face as organisations and how they are developing to improve transition in health.

112 We were informed that the health communities in Leeds are working together as a transitions panel that consider the needs of young people with SEND and ensure that provision is commissioned and the correct funding streams are in place to meet their needs.

113 Health care in Leeds is provided by three different agencies: Leeds Community Healthcare NHS Trust (LCH), Leeds Teaching Hospitals Trust (LTHT) and Leeds and York Partnership Foundation Trust (LYPFT). Each of these organisations is made up of a number of different services with different management structures and commissioning arrangements, criteria and functions. We were advised that transition in healthcare is a challenge as there are very few instances where a service provided for children has a directly equivalent service for adults.

114 We were advised that Leeds South and East CCG lead the citywide commissioning of Children and maternity services on behalf of the three Leeds CCG's. To demonstrate one of the changes in commissioning practice we were informed that the 2015/16 Leeds Community Healthcare contract contained a requirement for Leeds

Children's Hospital and Leeds Community Healthcare to work together to develop a coordinated transition pathway including discharge planning and access to electronic patient records.

115 LCH advised us that they are paying particular attention to the coordination of care needs. Starting early so when the time transition to adult services is occurring, it is a natural extension of an ongoing process. They recognise that trying to coordinate care at the end of a young person's journey through children's services is unlikely to be successful. LCH is also investing in staff training to ensure professionals are confident in supporting young people to identify what they want and need from their health care.

116 LCH also advised us that a focus on the key areas that matter to young people and their families would support smoother transitions by helping young people feel more in control and prepared for adulthood. A number of these have been identified as priorities for the year ahead, based on feedback from both families and services. We were also informed that young people are being encouraged to understand their health needs earlier so that they are better equipped to manage their health before they reach adulthood.

117 To provide some clarity about the complexity of the healthcare systems in Leeds we were advised that there are 36 specific services and 10 support services within LTHT alone which children access. Children with complex needs will access multiple services.

118 We were also advised that in Leeds, the Child and Adolescent Mental Health



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Services (CAMHS) and Adult Mental Health Services (AMHS) are provided by different organisations, LCH and Leeds and York Partnership NHS Foundation Trust (LYPFT) respectively. LCH also outlined the many services provided to children. All health representatives acknowledged that this reinforces the need for health providers to work collaboratively within and across organisations to ensure that transition is as smooth as possible and meets the needs of the young person over the needs of the service providers. It was stated that many of the challenges are around how systematically healthcare staff are working together and with social workers and transition workers to have one coherent process, a single set of agreed outcomes and fully co-ordinated care. It was felt that if each young person had someone to lead and co-ordinate this it would support transition as there can be a large number of professionals involved with one young person, each with their own focus. We agree that this approach is of significant importance, particularly with complex health systems and structure as previously described.

119 There is also a need to communicate the differences in adult health services to both young people and their parents early so that they are empowered and in an informed position to make the decisions that will affect them in the future.

120 In February 2016 National Institute for Health and Care Excellence (NICE) published their guideline on Transition from children's to adults' services for young people using health or social care

services.²³ This is aimed at professionals and managers in health and social care services, in both children's and adult services. The guidance addresses a number of the areas identified for development and improvement by the health and social care professionals involved in this inquiry.

121 The guideline makes specific reference to the identification of a named worker to co-ordinate transition care and support, who should be someone with whom the young person has a meaningful relationship.

122 We feel it appropriate to understand how the guideline has been adopted, and seek reassurance that recommendations and recognised development areas have been progressed in order to improve transition for young people from children's to adult health and social care services.

123 The Complex Needs Partnership Board brings together agencies and key stakeholders involved in the provision and commissioning of services for children and young people with complex needs in Leeds. It seeks to provide governance and direction on all aspects of complex needs, in order to support services to make a significant contribution to improving outcomes for children and young people aged 0 – 25.

124 The Board membership consists of senior representatives from organisations across Leeds, including Leeds City Council Children's Services

²³ Transition from children's to adults' services for young people using health or social care services NICE guideline Published: 24 February 2016 nice.org.uk/guidance/ng43



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and Adult Services, Health, Schools and Educational Settings. We would welcome the support of the Complex Needs Partnership Board to oversee the implementation of the NICE guideline and monitor improvement in practice and outcomes. As part of this process we consider it essential that the Complex Needs Partnership Board reports progress, and barriers to progress to the Health and Wellbeing Board and Children & Families Trust Board.

Recommendation 10 – That the Director of Children’s Services and the Complex Needs Partnership Board oversees the development of a plan aimed at addressing the recommendations within the ‘Transition from children’s to adults’ services for young people using health or social care services’ NICE guideline, across the local authority and all relevant health and social care partners in Leeds. Reporting to, and working collaboratively with, the Children and Families Trust Board and the Health and Wellbeing Board to secure positive outcomes. The Complex Needs Partnership Board is required to provide a progress update to the Scrutiny Board (Children’s Services) at a future meeting.

What works?

125 After considering a large amount of information and evidence about the initiatives and interventions in place to support young people with SEND we wanted to know what work and what success looks like. We were eager to understand what information is collected

that identifies which support has been most beneficial. Referencing Ofsted, we wanted to know how effectively does Leeds improve outcomes for young people who have special educational needs and/or disabilities.

126 We asked how Leeds City Council monitors or tracks what happens to young people with SEND and for how long into their adult life. Do we look at those over 25 years of age to assess if the measures put into place have had a long term positive impact?

127 We were advised that prior to the introduction of the Children and Families Act in September 2014 statements lapsed at the age of 19 or earlier, therefore the collection of comprehensive data for young adults up to 25 and beyond had never been a requirement. We were reassured that the act does require Leeds City Council to track and map going forward through EHCP’s and it will be possible to assess how successful interventions and support have been going forward. We were advised that information about the outcomes for those young people that previously moved into adult services at 18 are known however this is only a small proportion of the young people with SEND who have received support.

128 The paper, Special Educational Needs and Disability: Supporting local and national accountability²⁴ clarifies what success should look like over the short, medium and long term. In the long term, it says success is where there are increased employment and health outcomes that are based on need and aspirations.

²⁴ Special Educational Needs and Disability: Supporting local and national accountability - Dept for Education March 2015



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129 To understand impact we need to know and understand how successful interventions have been. We asserted that the understanding of outcomes can enable the identification of success, thereby facilitating the planning of effective services and how they are delivered. Due to the lack of tracking information we cannot ascertain which pathways and support are providing the best outcomes. Whilst there may not be a statutory requirement to assess outcomes in adulthood we feel this should be undertaken if we are to proactively improve the services and support provided. There is a clear need for monitoring and tracking of young people and young adults following transition to adult services, going into employment or after leaving education, training or apprenticeships.

Recommendation 11 – That the Director of Children’s Services develops an evidence base of ‘what works’ based on the collection of intelligence and outcome information for SEND young adults who have been supported into adulthood wholly or in part by Leeds City Council.

Monitoring arrangements

Standard arrangements for monitoring the outcome of the Board's recommendations will apply.

The decision-makers to whom the recommendations are addressed will be asked to submit a formal response to the recommendations, including an action plan and timetable, normally within two months.

Following this the Scrutiny Board will determine any further detailed monitoring, over and above the standard quarterly monitoring of all scrutiny recommendations.

Reports and Publications

- Report of the Head of Service Complex Needs, The Children and Families Act 2014, SEN and Disability Reforms 16 October 2014
- Increasing the Number of Young People in Employment Education or Training, Report of the Director of Children's Services 10 September 2015
- Preparing for the Future, Supporting Special Educational Needs and Disabled Young People, Report of the Head of Complex Needs Service and the Head of Learning Improvement, 15 October 2015
- Local Authority Disabled Children's Charter
- Responses to Every Disabled Child Matters (EDCM) Charter Commitments
- Making Leeds a great place to learn for all our children and young people: the Leeds Special Educational Needs and Disabilities (SEND) Strategy 2014-17
- Leeds Local Offer Annual Feedback Report
- Education Health Care Plan (EHCP) Review Report – Special Educational Needs Statutory Assessment and Provision (SENSAP), Complex Needs Service
- Children and Young people with SEND – Demographic information
- Leeds SEND attainment and attendance data
- National Sensory Impairment Partnership (NATSIP) benchmarking data.
- Voice and Influence Presentation, 15 October 2015
- Preparing for the Future, Supporting Special Educational Needs and Disabled Young People, Report of the Head of Complex Needs Service and the Head of Learning Improvement, 12 November 2015
- Updated Special Educational Needs and Disabilities (SEND) Action Plan
- School attendance by SEND children and young people in the 2014/15 academic year
- Details of Personal Progress Courses
- Ofsted and Care Quality Commission (CQC) consultation: inspection of local area SEND arrangements
- Example of an Education, Health and Care Plan (EHCP)
- Outcomes of the 'Make Your Mark Ballot
- Preparing for the Future, Supporting Special Educational Needs and Disabled Young People, Report of the Head of Complex Needs Service and the Head of Learning Improvement, 21 January 2016

Reports and Publications

- YouTube Clip – Supported Internships, Sept 2015 Leeds City Council
- Leeds City Collage SEND , Dianne Wilson, 25 February 2016
- List of courses studied by students who have high needs enrolled at Leeds City College in the academic year 2015-16.
- Preparation for Adulthood - Leeds Community Healthcare (LCH), 25 February 2016
- Transition between Child and Adolescent and Adult Mental Health Services in Leeds – LCH, 25 February 2016
- Presentation - Transition to Adulthood: Preparing for the Future (LCH)
- Presentation - Clinical Commissioning Groups - CCG key deliverables in support of transition
- Presentation - The issues facing young people with complex needs - transition in healthcare – LTHT
- School and College Performance Tables - Broomfield South SILC, January 2016
- Broomfield South SILC, Curriculum Statement (sourced school website)
- John Smeaton Academy – SEND information (sourced school website January 2016)
- School and College Tables - Ralph Thoresby, January 2016
- Ralph Thoresby, Special Educational Needs Policy (sourced school website)
- Special educational needs and disability code of practice: 0 to 25 years. Statutory guidance for organisations which work with and support children and young people who have special educational needs or disabilities, January 2015
- The handbook for the inspection of local areas' effectiveness in identifying and meeting the needs of children and young people who have special educational needs and/or disabilities, Handbook for inspecting local areas in England under section 20 of the Children Act 2004 – Ofsted and CQC April 2016
- Transition to the new 0 to 25 special educational needs and disability system, Departmental advice for local authorities and their partners - Third edition: September 2015
- Special Educational Needs: support in England, Robert Long, House of Commons Briefing paper 07020 8 February 2016
- Supported Internships – Department of Education June 2014 revised December 2014
- From the Pond into the Sea – Children's transition to adult health services, Care Quality Commission, June 2014
- Transition from children's to adults' services for young people using health or social care services NICE guideline Published: 24 February 2016
- Special Educational Needs and Disability: Supporting local and national accountability, Department for Education March 2015
- Annual Standard Report 2013/14, Leeds City Council

Witnesses Heard

Cllr Jane Dowson, Deputy Executive Member (Children and Families)
Barbara Newton, Head of Service (Complex Needs)
Andrew Eastwood, Head of Service (Learning Improvement)
Hannah Lamplugh, Voice and Influence Lead
Councillor Lucinda Yeadon, Executive Board Member (Children and Families) 2015/16
Nigel Richardson, Director of Children's Services
Paul Brennan, Deputy Director of Children's Services (Learning)
John Ashton, Targeted Service Leader (SILC Cluster and JESS)
Maxine Naismith, Head of Service, Adult Social Care
Barry Jones, Area Lead (Complex Needs)
Sally Lowe, Partnership Manager 14-19.
Stephen Bardsley, Service Delivery Manager, Adult Social Care
Sue Rumbold, Chief Officer (Partnership Development and Business Support)
Catherine Williams, Commissioning Manager, NHS South and East Clinical Commissioning Group
Benita Powrie, Head of Service (Integrated Children's Addition Service), Leeds Community Healthcare NHS Trust
Nick Wood, General Manager, Leeds Community Healthcare NHS Trust
Anne Stanton, Head of Nursing, Leeds Teaching Hospitals NHS Trust.
Diane Wilson, Director of Essential Skills, Leeds City College.
Michael Purches – Principal North West SILC
Michelle Willman – Principal West SILC
Julian Snape, Linda Livesy and colleagues at John Smeaton Academy
John Fryer and colleagues at Broomfield SILC
Andrea Caswell, Sally Scargill and colleagues at Ralph Thoresby
Monica McCaffrey, CEO Sibbs
The brilliant Young People at John Smeaton Academy and the SILC Parliament (with special thanks)

Dates of Scrutiny

Meetings

10 September 2015
15 October 2015
12 November 2015
25 February 2016

Visits

SILC Cluster, Green Meadows School - 6 January 2016
Broomfield South SILC – 7 January 2016
John Smeaton Academy – 20 January 2016
Ralph Thoresby – 28 January 2016
SILC Parliament, Penny Field School – 25 April 2016

Scrutiny Board (Children's Services)
**Aspire, Empower, Accomplish – Supporting Young People with Special Educational Needs
and Disabilities in Leeds**

23 February 2017
Report author: Sandra Pentelow

www.scrutiny.unit@leeds.gov.uk