





Stockton-on-Tees

Special Educational Needs and Disabilities

Written Statement of Action

August 2019

This document was classified as: OFFICIAL

Our approach and commitment

Partners in Stockton-on-Tees are committed to supporting all children and young people to reach their full potential.

This is especially important for those children with additional needs, who need more help to support them in developing the skills, confidence, resilience and independence they need to live fulfilling lives.

The strategic governance and drive for our combined efforts comes from the Health and Wellbeing Strategy and the Children and Young People's Strategy. The focus on giving children and young people the best start in life, and the emphasis on resilience, relationships, respect and response demonstrate a single minded and collaborative determination to improve the life chances and outcomes for all children, providing support to those who need it.

To this end, we will work in partnership as professionals from a variety of organisations and with children, young people and their families to ensure that services and support arrangements for children and young people with special educational needs and disabilities are of the highest quality and have the maximum impact.

We have already developed a needs assessment and a joint commissioning strategy to drive forward our collaboration, and we have many examples of effective joint working – from the development of Enhanced Mainstream Schools to the new neurodevelopmental pathway. However, the Special Educational Needs and Disabilities Local Area inspection in February 2019 highlighted a number of areas of weakness which we are addressing through this Written Statement of Action.

- 1. The lack of a clear commitment to and emphasis on co-production
- 2. A strategic focus on joint commissioning
- 3. Too much variability in the quality of Education. Health and Care Plans, and
- 4. The lack of a clear outcomes framework

We have taken stock of our approach to these issues, working together to understand the outcomes of inspection, and the inter-related nature of the issues, so that we avoid the temptation of defining actions in isolation, which will not result in the systemic change we believe is needed. Although there are many strengths in our system, as recognised in the inspection, we have much more work to do to be joined up in our approach.

Crucially, we want to develop a focus on an outcomes led system, which is the key driver for our actions. All other actions flow from this priority. We believe this will drive co-production, joint working, the redesign of services, better plans, and greater integration of education, health and care services and professionals to support children and families. One of our actions is therefore to have a new EHC Plan process in place by August 2020. This provides a focus for an outcomes led system, and a means of driving up quality.

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This Written Statement of Action describes the actions we will focus on to address the weakness in the inspection; however, we remain equally committed to actions in a number of other areas which we also believe are important, and which form the basis of our SEND Strategic Improvement Priorities. We continue to believe that a focus solely on the WSOA will not, in itself, deliver the outcomes and ambitions we have identified. We will continue to develop and enhance the Local Offer, work with schools to reduce exclusions, review our arrangements for enhanced mainstream schools and the availability of specialists support for schools, for example.

Partners and the Parent Carer Forum have co-produced this WSOA through a series of workshops. That in itself signals a different approach to the way we work together. We have a very flat accountability structure, with key leads for each of these action areas, through the SEND Strategic Group, co-chaired by the Local Authority Director of Children's Services and the Head of Children's Commissioning at the Clinical Commissioning Group.

Governance and accountability is then directly in to the Health and Wellbeing Board, and to respective executive arrangements in the CCG and Council. We believe these arrangements are effective, but recognise there is more to do to communicate these and to ensure that parents feel involved at every step.

Weakness to be addressed: Co-Production, engagement and communication with parents is under-developed

We will know this is working well when:

Co-production, engagement and communication is the embedded across Education, Health and Care.

Parent/Carers feel listened to and valued

Parent/Carers feel listen							Milestones							
	Responsible			RAG		RAG		RAG	G		RAG	RAC	G	5.1. 0.1
Objective	Person(s)/ Post	Actions	Aug-19	Q Q 1 2	Feb-20	Q 0	Aug-20	Q		Feb-21	Q C 7 8	Q	Q 10	Evidence & Impact
		1.1.1: Establish a multi- agency working group that will oversee strategy development of co- production, engagement and communication in the local area	SEND Co-Production working group is established with representation from SBC, CCG, SPCF & Catalyst		WSOA easy read guide produced by SEND co-production working group and endorsed by SEND strategic group									Evidence: 10% Participation rate achieved by survey. Results of survey are clearly reflected in the co-production charter
		1.1.2: Establish a shared language that is used by Education Health and Care systems			Develop and agree definitions of co- production, engagement and communication.									and compact 75% of parents/carers, children and young people feel that there
		1.1.3: Understand the local area's readiness to co-produce	Undertake the cornerstone assessment to understand the local area's readiness to co-							Using evidence from				are improvements in communication, engagement and co- production All SEND strategic
1.1 To ensure that coproduction, engagement and communication with all stakeholders including parents, carers, children and	Strategic Health & Wellbeing Manager, SBC Head of	1.1.4: Understand parent/carers perspectives on key challenges and priorities, and potential to be involved in a range of co-production activities 1.1.5: Understand children/young people's	produce. Parent/carer survey drafted by SEND Co- Production working group and endorsed by SEND Strategic Group Children/Young people survey drafted		Distribute parent/carer survey identify parents/carers willing to participate in focus group sessions Distribute children/young		Parent/Carer survey completed, and feedback collated, analysed and shared with SEND Strategic Board Children/Young people's survey		ai th	surveys, focus groups nd work completed by ne SEND co-production working group a Co- Production Strategy is developed. Co-Production Strategy sense checked by arents, carers, children				documents will demonstrate co- production Impact: Co-production is developing and embedded in all aspects of Education, Health and
young people is embedded within the local area's approach across Education, Health and Care	Commissioning & Strategy, CCG In Partnership with SPCF	perspectives on key challenges and priorities, and potential to be involved in a range of co- production activities	by SEND Co- Production working group and endorsed by SEND Strategic Group		people's survey and identify children/young people willing to participate in focus group sessions		completed, and feedback collated, analysed and shared with SEND Strategic Board			co-Production Strategy endorsed by SEND strategic group.				Care Engagement with a broader scope of parents/carers and children/young people
		1.1.6: Establish principles of co-production, and agreement of mechanisms for continuously engaging, consulting and co-producing services with parents, carers, children and young people.			Facilitate focus group sessions to establish principles of co-production, and agreement of mechanisms for continuously engaging, consulting and co-producing services with parents/carers and children and young people and are written into a charter/compact.					ontinuous engagement is established and ongoing				Mechanisms for continuous engagement and joint working has been determined by parents, carers, children and young people. These are embedded in Education, Health and Care. Parents/carers, children/young people report that they feel listened to and are influencing Education Health and Care

Weakness to be addressed: Co-Production, engagement and communication with parents is under-developed (continued)

We will know this is working well when:

Co-production, engagement and communication is the embedded across Education, Health and Care.

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	D 11 1							Milestones									
Objective	Responsible Person(s)/ Post		Aug-19	RAG Q Q	- Feb-20		Q	Aug-20	Q		Feb-21	Q		Aug-21	Q	RAG Q	Evidence & Impact
		Actions		1 2		3	4		5	6		7	8		9	10	Evidence:
		1.2.1: Strengthen SEND governance arrangements to ensure that parent/carer representatives have sufficient oversight/scrutiny and are part of decision making.	SEND strategic group and associated working groups have parent/carer representation														Minutes from SEND working groups Parents/carer guides have been produced and published, these are accessible in a variety of formats to ensure maximum accessibility
1.2 To develop a collective understanding of	Chair, Stockton Parent Carer Forum Strategic Health	1.2.2: Co-produce a mechanism for engagement and communication with parents/carers re: statutory and nonstatutory processes and associated documentation.	Networking and listening events held with SPCF by CCG, SBC Public Health, SBC SEND team					Evidence from the parent carer survey will inform the continuing strategy regarding networking and listening events									Increase in number of children, young people and their families using Stockton-On-Tees Local Offer 75% of Parent/carers report feeling listened to and that their views and are influencing Education, Health and Care
Education, Health and Care and how key decisions are made and to communicate this clearly.	& Wellbeing Manager, SBC Head of Commissioning & Strategy, CCG	1.2.3: Develop SENDIASS section of the Local Offer to include Frequently Asked Questions and information on how the Education, Health and Care services work			Develop SENDIASS section of the local offer to include FAQ's and information on how the Education Health and Care services work.			SENDIASS section of Local Offer to include details regarding support and services available EHCP process and procedures (Ref Action 2.2.8)									75% Parent carers report that they are able to access information that helps them to understand and navigate Education Health and Care Impact: There is a collective understanding of the Education, Health and Care systems
		1.2.4: Co-Produce all Education, Health and Care parent/carer guides						Co-Produced parent/carer guides to the Education, Health Care systems are developed and published									Parent/carer representatives have had sufficient oversight /scrutiny and are part of the decision-making process A reduction in complaints resulting from communication failings

Weakness to be addressed: The quality of EHC assessments and plans is too variable

How will we know when this has been achieved:

We will have a multi-agency agreement of what good EHCPs look like for Stockton on Tees, children/young people and their families.

We will have systems and processes in place that can meet the statutory guidelines and ensure all EHCPs are of a high standard.

We have a robust and effective method for monitoring quality and methods to implement positive changes where necessary.

		onitoring quality and metho	us to implement positive	. Criari	gcs (where necessary.			Milestones								
Ohiostivo	Responsible	Actions		RAG	G		R	٩G		RAC	G		RAC	G		RAG	Evidence & Impact
Objective	Person(s)/ Post	Actions	Aug-19	Q 1	Q 2	Feb-20	Q 3	Q 4	Aug-20	Q 5	Q 6	Feb-21		Q 8	Aug-21	Q 0	
		2.1.1: Undertake a multi- agency review of Current EHCNA and Annual Review process including the quality assurance (QA) of evidence, PCP Meetings and drafting of EHCP's	Complete QA sample of annual reviews.			Complete multi agency assessment and map what a good EHCNA/Annual Review process looks like.			Share learning								Evidence: Clear and agreed understanding of what a good EHCNA, Plan and Annual Review process from start to finish looks like.
		2.1.2: Engage with parents/carers regarding quality of EHCP's and annual reviews.				Engagement events completed as per the identified methods (Ref Action 1.1.4). Identify concerns for parents and share plans for improvement						Ongoing engagement to ensure open lines of communication regarding the quality of EHCP's and Annual Reviews.					Agreed analysis tests hypothesis - quality of EHCP's drop year on year as a result of lack of engagement from agencies
2.1 To have a clear and agreed understanding of what a good Education Health Care Needs Assessment (EHCNA),	SEN & Engagement Service Manager Designated Clinical Officer	2.1.3: Engage with children and young people regarding their EHCP's and annual reviews				Methods determined and experiences obtained regarding the children and young people's views											Engagement events with parents/carers, children and young people Impact: Test the hypothesis and the current QA tool
Plan and Annual Review looks like and an agreed analysis of the current quality of Education Health Care Needs Assessments, Plans and Annual Reviews.	(DCO) AD Children's Social Care CCG SPCF	2.1.4: Undertake a multi- agency QA sample review of EHCP's.				QA sample completed and analysis of areas of strength and weakness to commence						Annual process fully implemented					Builds engagement with parents on quality issues and identifies areas for improvement. Children and young people's views and
		2.1.5: Identify and prioritise areas to focus on for improvement based on clear analysis across the system.							Full review of EHCP's and annual reviews are completed, and priorities identified.								experiences are being used to develop services ensuring that they are central to this process.

Weakness to be addressed: The quality of EHC assessments and plans is too variable (continued)

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Objective	Responsible Person(s)/ Post	Actions		RAG			AG			AG			AG		RAG	
			Aug-19	Q Q 1 2	Feb-20	3	Q 4	Aug-20	Q 5	Q 6	Feb-21	Q 7	Q 8	Aug-21	Q C 9 10	Evidence & Impact
		2.2.1: Develop and initiate action plan focusing on areas for improvement. 2.2.2: Co-Produce a multi-agency audit process to review and success quality			Multi Agency Assessment process developed and tested			Full review of EHCP's and annual reviews are completed, and action plan developed.			Annual process implemented					We will have a clear plan for improvement We will have a renewed focus on person centred planning at heart
2.2 To improve the systems and processes (as per outcomes of Action 2.1) to ensure all Education Health Care Needs	SEN & Engagement Service Manager DCO AD Children's	2.2.3: Develop and implement a coproduced Education Health Care Needs Assessment, Plan and Annual Review process and improve EHCP document format.			Current process and format tested as per Action 2.1			Improved EHCNA, Plan and Annual Review process and format developed, inclusive of outcomes framework. Endorsed by the SEND Strategic Group			Co-Produce a multi-agency user guide. Providing comprehensive guidance on the EHCP process. Endorsed by SEND Strategic Group SEN Framework Guidance endorsed by SEND Strategic group and published.					We will have undertaken a review of the EHC assessment and plan process We will have an effective means of undertaking assessment through a system Multi-Agency involvement in EHCP drafts
Assessments, Plans and Annual Reviews are of a high standard.	Social Care CCG SPCF	2.2.4: Refresh focus on person centred planning as part of the new process						Schools and settings attend training on running Person Centred Planning meetings Multi-Agency professionals are trained in the PCP principles.			PCP meetings are held at the first drafting of every new EHCP.					Impact: Greater transparency in the process More efficient process Clear lines of accountability Capacity aligned to the new process EHCP's will be person centred Complaints have been reduced Parents do not feel they have to tell their story multiple times

Weakness to be addressed: The quality of EHC assessments and plans is too variable (continued)

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									Milestones								
Objective	Responsible	Actions		RA				AG			١G		RAG			RAG	Evidence & Impact
Objective	Person(s)/ Post	Actions	Aug-19	Q 1	Q 2	Feb-20	Q 3	Q 4	Aug-19	Q 5	Q 6	Feb-21	Q Q 7 8	Aug-21	Q 9		Evidence & impact
		2.2.5: Improve and embed the SEN portal to support effective and efficient processes	Identify methods to successfully engage re SEN portal across all agencies Identify key personnel to be involved in the SEN portal development work Identify appropriate methods for training on SEN portal			Full engagement with the SEN portal across all agencies. Deliver training for all Education, Health and Care professionals developed and publish training on the local offer. Training for parents/carers on the portal is available through preferred identified methods.			There is an evidenced increase in multi-agency involvement. There is an evidenced increase of statutory advice being submitted on time via portal.			75% of Statutory advice is submitted on time Outcomes forms and processes updated.		90% of parents/carers are signed up and using the portal. 100% Statutory advice is submitted on time via the portal			
		2.2.6: Review capacity based on volume and new process to include possible restructure and roles/remit	Review current demand against capacity			Initial restructure and realignment completed											
		2.2.7: Develop training for partners on the process, what good looks like, and quality standards – to include sessions, online in induction	Joint training with DCO & Local Authority for Health professionals Multi-Agency training on statutory requirements in Annual Reviews			Training programme developed that will include but not limited to: What good looks like & quality standards, Statutory guidelines and timescales, SEN portal, PCP Meetings and developing outcomes framework.			Outcomes framework training embedded into ongoing programme.			All contributory agencies include SEND training in their induction and annual training programme to ensure all staff are kept up to date on current systems and processes.					
		2.2.8: Agree approach to rewrite/review of identified EHCP's.				Consultations with parents/carers.			SENDIASS section of the Local Offer developed to provide up to date information and support available.			First new plans developed through new system in place. Ongoing engagement with Parents/Carers to monitor quality.					

Weakness to be addressed: The quality of EHC assessments and plans is too variable (continued)

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								Milestones								
Objective	Responsible	Actions		RAG		R	AG		R.A	\G		RA	\G	A 21	RAG	Evidence & Impact
	Person(s)/ Post		Aug-19	Q 0		Q 3	Q 4	Aug-19	Q 5	Q 6	Feb-21	Q 7	Q 8	Aug-21 Q2	Q Q 9 10	
		2.3.1: Deliver multi agency audit process and use the results of this to monitor and maintain a good quality in EHCP's and Annual reviews.			MAA Process designed			Reviews undertaken and outcomes fed into EHC plan process review								Evidence: We have an understood affective and engaging mechanism to review quality
	SEN & Engagement	2.3.2: Develop and implement peer assurance process with another local authority			Approach tested											We have an independent assurance check from another LA in place We have reported openly on progress and where we are
2.3 To have a well- developed, multi-agency process to measure quality that is understood and transparent.	Service Manager DCO AD Children's Social Care	2.3.3: Develop a clear reporting and communication process to feedback on quality			Co-designed process in place - feedback from initial events											Impact: We will have a system wide agreement on what good looks like to enable us to hold each other to account
	CCG SPCF	2.3.4: Develop parent carer communication strategy alongside coproduction workstream.			Consultation with parents/carers to include continuing methods of feedback.			New EHCP process includes parent/carer feedback process as per identified methods.								MAA and assurance systems will enable a focus on quality There will be increased confidence in the system from parents and carers linked to better feedback
		2.3.5: Develop a method to capture child/young person's experience of process.						New EHCP process includes a children/young people's feedback process								Parents/Carers, children and young people's feedback is instrumental in the monitoring of quality.

Weakness to be addressed: Strategic Joint Commissioning, in a way that demonstrably improves Education, Health and Care provision and outcomes for children, young people and families, is not fully embedded

We will know this is working well when:

The detailed and comprehensive understanding of the needs of children and young people with SEND, and the needs of their families, is utilised to inform strategic planning.

The Local Area will maximise all opportunities to jointly commission services and pathways which are able to demonstrate their contribution to improved outcomes for children, young people and families.

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Objective	Responsible	Actions		RA	G		RA	AG		F	RAG		R	AG		R	AG	Evidence & Impact
·	Person(s)/ Post		Aug-19	Q 1	Q 2	Feb-20	Q 3	Q 4	Aug-20	Q 5		Feb-21	Q 7	Q 8	Aug-21	Q 9	Q1 10	
3.1 To understand current and projected needs of	Strategic Development Manager SBC	3.1.1: Detail an evidenced based, robust analysis of the needs of the Local Area's SEND population to develop a Joint Strategic Needs Assessment (JSNA)	Multi-agency Needs Assessment Working Group established			Accurate local information collated, analysed and shared with Needs Assessment Working Group Built upon the 2017 SEND Health Needs Assessment (HNA), a refreshed JSNA drafted and published												Evidence: JSNA is published on Stockton-On-Tees JSNA website Gap analysis is published Impact: Provides local leaders with
children and young people with SEND to inform the joint commissioning of services	Head of Commissioning & Strategy, CCG	3.1.2: Prepare a gap analysis based on refreshed JSNA to identify gaps in provision and pathways. Identify areas where services need to be developed, thorough a joint commissioning approach.				Draft gap analysis based on the refreshed JSNA drafted and published. Shared with SEND Strategic Group and the Health & Wellbeing Board												an understanding of population need and gaps in service provision. Identified gaps in specific service area can be reviewed, re-commissioned and/or decommissioned This allows for the effective joint planning and commissioning of services and pathways.
3.2 To Jointly commission co-produced services and pathways which are able to demonstrate their contribution to improved outcomes	Strategic Development Manager SBC Head of Commissioning &	3.2.1: Joint Commissioning Workstream to review the Joint Commissioning Strategy and develop a refreshed action plan which identifies agreed priorities between Education, Health, Social Care, parents/carers, children and young people	Revised Terms of Reference and membership for joint commissioning workstream in place. Meetings are in place and an indicative timeline for implementation of action plan has been developed															Evidence: SEND Joint Commissioning Strategy reviewed and presented to SEND strategic group SEND Joint Commissioning action plan endorsed and published SEND Co-production strategy developed, endorsed and published
for children, young people and families	Strategy, CCG	3.2.2: Develop and implement system wide reviews of service provision across Education, Health and Care in line with priority areas identified.				System wide review of service provision has commenced			System wide service reviews completed, and recommendations endorsed by SEND Strategic Group									Balanced scorecard report to SEND strategic group which includes indicators for: • Service access • Service user experience • Outcomes Evidenced by: Action logs of working group

Weakness to be addressed: Strategic Joint Commissioning, in a way that demonstrably improves Education, Health and Care provision and outcomes for children, young people and families, is not fully embedded (continued)

We will know this is working well when:

The detailed and comprehensive understanding of the needs of children and young people with SEND, and the needs of their families, is utilised to inform strategic planning.

The Local Area will maximise all opportunities to jointly commission services and pathways which are able to demonstrate their contribution to improved outcomes for children, young people and families.

							Milestones							
Objective	Responsible Person(s)/ Post	Actions	Aug-19	Q 1	Q Feb-20	 AG Q 4	Aug-20	Q 5	Feb-21	AG Q 8	Aug-21	RA Q 9		Evidence & Impact
		3.2.3: Understand need and co-produce a service delivery model, specification and outcome measures			Undertake rapid needs assessment for priority areas identified between Education, Health, Local Authority, Parents/Carers and Children/Young People.		Priority needs assessments completed and recommendations endorsed by SEND strategic group. Service delivery models are co- produced and agreed with providers		Service specifications and outcome measures have been developed					Impact: Partners are jointly ommissioning services
		3.2.4: Maintain continuous engagement with education settings regarding joint commissioning principles and establish an understanding of their levels of need and spend on health and care services.	Capacity and resource commitment to accelerate joint commissioning has been identified. Presentations on principles of joint commissioning delivered to primary and secondary school senior leaders' meetings		Meetings held with individual schools to understand their commissioning of health and care services and estimated levels of spend								pare Th	based on needs and priorities, and are coproduced with ents/carers and children and young people. ere is a mechanism for addressing the commissioning quirements needed to deliver the Joint action plan.
		3.2.5: Develop financial mechanisms and where appropriate, form partnerships to jointly commission service provision across Education, Health and Care	J				Financial commitment and mechanism agreed through individual organisation governance arrangements and endorsed at system level by Health and Wellbeing Board						er se All wi dis dis	Joint commissioning nables the provision or rvices that meet nee children/young peoplith neurodevelopment orders pre/during/poagnosis have access the rvices based on need
		3.2.6: Identify and implement governance 7 arrangement for the performance management of all jointly commissioned services which incorporates the voice of children/young people and parents/carers							Joint performance management arrangements have been agreed				SI	rents/carers feel bett upported to meet the needs of their hildren/young people

Weakness to be addressed: Strategic Joint Commissioning, in a way that demonstrably improves Education, Health and Care provision and outcomes for children, young people and families, is not fully embedded (continued)

We will know this is working well when:

The detailed and comprehensive understanding of the needs of children and young people with SEND, and the needs of their families, is utilised to inform strategic planning.

The Local Area will maximise all opportunities to jointly commission services and pathways which are able to demonstrate their contribution to improved outcomes for children, young people and families.

							Milestones								
Objective	Responsible	Actions	A 10	RAG	Feb-20	RAG Q Q	Aug 20		AG	Feb-21	RAG	A.v. 21		RAG	Evidence & Impact
	Person(s)/ Post		Aug-19	Q Q 1 2	Feb-20	Q Q 3 4	Aug-20	5	Q 6		Q Q 7 8	Aug-21	9	Q 10	
										A balanced					
										scorecard has					
		3.2.7: Ensure that								been developed					
		analysis of service								which includes					
		review and implementation links								indicators for service					
		into ongoing								accessibility,					
		assessment of need.								service user					
										feedback and					
										outcomes.					
		3.2.8 Develop a needs			Transition to the new										
		led	Pathway has been		pathway will										
		neurodevelopmental	developed		commence in										
		pathway			November 2019.										
															Evidence:
3.3															As per Action 4.4
Improve processes to		3.3.1: Align													As per Action 4.4
use strategic		workstreams to ensure													Impact:
information about	Service Area Leads	that ongoing work is													
achievement of		coherent and													Joint commissioning is
outcomes to influence commissioning		congruent													providing provision that
Commissioning															provides better outcomes
															for children, young people
															and their families.

We will know this is working well when:

Local area leaders have developed and implemented an effective approach to identifying, measuring and evaluating EHC outcomes for children and young people

Practitioners have a clear understanding of outcomes and the differences between actions, provision resources and outcomes and participate effectively with children and young people, their families and professionals in the development, review and evaluation of personal outcomes.

personal outcomes.							Milestones							
Objective	Responsible Person(s)/ Post	Actions	Aug-19	RAG Q Q 1 2	Feb-20	RA Q 3	AG Aug-20	AG Q 6	Feb-21	AG Q 8	Aug-21	R Q 9	AG Q 10	Evidence & Impact
4.1 To develop and embed an outcome focused approach	Service area leads	4.1.1: To review, evaluate and understand the developing local area SEN process to develop better outcomes – our readiness and where we need to focus	Revisit outcomes group deep dive work and baseline developed in 2018		Continued and ongoing engagement with stakeholders to sense check what and how services should be evaluated against- what does good look like. Audit tool to be reviewed and developed.	3	Ensure outcomes are embedded into new EHC Plan process		Re-engage on effectiveness of outcomes approach in new EHCPs					Evidence: Audit Tool measure progress and development Impact: Increased understanding and awareness of current practice enabling issues to be identified, addressed and good practice shared Mapping of processes alongside one another enables the development of congruent processes The logged baseline of current practice will provide a mechanism to measure change over time and improve quality. This will inform other workstreams (quality of EHCP and joint commissioning)
		4.1.2: Embed a collective understanding and definition of outcomes and impacts for children/ young people with SEND and their families	Definitions developed by working group in December 2018. CDC Outcomes Training June 2019. Development of training and awareness sessions for multi- agency workforce		Develop staff understanding of outcomes and how to write and evaluate effective outcomes and steps towards outcomes as part of EHCP process Session planned for October 2019		Develop and embed processes to reflect agreed definitions and newly developed frameworks as part of EHC new approach		Develop and publish SEN Framework Guidance (Fact Sheet) Work alongside SENDIASS, in line with the Co- Production workstream to make information available through the Local Offer					Evidence: Definitions published with stakeholders for continued oversight Multi-agency, multi-area awareness raising session - Feb 2019 CDC Development Day - June 2019 CDC Outcomes & NDti PFA Awareness session - July 2018

We will know this is working well when:

Local area leaders have developed and implemented an effective approach to identifying, measuring and evaluating EHC outcomes for children and young people

Practitioners have a clear understanding of outcomes and the differences between actions, provision resources and outcomes and participate effectively with children and young people, their families and professionals in the development, review and evaluation of

personal outcomes.							Milestones					
Objective	Responsible Person(s)/ Post	Actions	Aug-19	RAG Q Q 1 2	Feb-20	RAG Q Q 3 4	Aug-20	RAG Q Q 5 6	_ Feb-21	Aug-21 Q 8	RAG Q Q 9 10	Evidence & Impact
		4.1.3: Develop and implement a multiagency workforce development programme to ensure a collective understanding of the framework	Continued development of understanding within wider workforce of Education, Health and Care		Outcomes fact sheet developed and endorsed by SEND Strategic Group. Multiagency and public distribution of fact sheet Develop multiagency training programme for workforce. Overview training model suitable for members of the public including parents/ carers, children and young people to be available on the Local Offer		Dynamic and responsive training programme to be implemented formally		Review impact of training on quality of outcomes being generated in EHCPs			EHCP Writer training for wider workforce in Education Health and Care – Oct 2019. Impact: Shared understanding across agencies of key terms improves quality of information provided by services. Processes and service delivery is developed around the needs and priority outcomes for children/young people and their families. All published information reflects local area approach.
4.2 Improve processes to identify and measure personal outcomes	Service area leads	4.2.1: Continue development of the themed Model (Preparing for Adulthood) of outcome development and review 4.2.2: Review pathway from specialist paediatric services to adult healthcare	Co-Produce outcomes model in line with PfA themes.		Develop and embed new outcomes framework. Understand what and how data will be collected to measure progress and attainment of outcomes at a strategic level		Reviewed pathway and recommendations developed		Implementation of agreed recommendations			Co-Produced PfA outcomes model and a tangible product developed. Initial developments of framework from CDC/NDti facilitated PFA Awareness session – July 2018 Improved transition pathway and feedback from service users Performance management framework

We will know this is working well when:

Local area leaders have developed and implemented an effective approach to identifying, measuring and evaluating EHC outcomes for children and young people

Practitioners have a clear understanding of outcomes and the differences between actions, provision resources and outcomes and participate effectively with children and young people, their families and professionals in the development, review and evaluation of personal outcomes.

personal outcomes.								Milestones									
Objective	Responsible Person(s)/ Post	Actions	Aug-19	RAG	Feb-20	RA	\G	Aug-20	RA	AG	Feb-21	R	AG	Aug-21	R	AG	Evidence & Impact
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		4.2.3: Workforce training linked to the quality of information provided and in line with PfA framework.	Continued development of understanding within wider workforce of Education, Health and Care		PCP training			Delivery of wider workforce development opportunities to support the implementation of the PfA framework.									Impact: Standardisation of outcome reporting at an individual child/YP level will enable performance management of outcomes
		4.2.4: Develop review & engagement processes that will enable case studies (and other appropriate evidence) to show the journey of the child/young person in relation to the EHCP process and their achievement of personal outcomes			Develop key performance indicators and qualitative measures including the voice and SEND journey of the CYP and their family.												to be established which will improve the experience of families, children and young people Standardisation of outcome development and reporting will ensure a consistent approach across agencies improving quality of EHCP content Performance framework
		4.2.5: Ensure an outcome focus is developed and embedded into the new EHC process.			Develop, produce and implement an EHCP PfA exemplar framework and template to feed into ongoing EHCP review			Development of forms and processes internally to accommodate revisions to outcomes measurement processes. SEN Portal updated to capture revised forms and processes.			Multi-agency review of the framework and data capture using thematic analysis of outcomes and measurable impact alongside annual quality audit						for outcomes will allow measurement of whether services are meeting the needs of young people; by SEND need, age etc. and identify potential gaps in services or provision to inform commissioning intentions and work force development Documentation will be fit for purpose and in line with expectations of partners/ users.

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Local area leaders have developed and implemented an effective approach to identifying, measuring and evaluating EHC outcomes for children and young people

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			Milestones															
Objective	Responsible Person(s)/ Post	Actions	Aug-19	RAG		Feb-20	RAG		Aug-20	RAG		Feb-21	RAG		Aug-21	RAG		Evidence & Impact
				Q 1	Q 2		Q 3	Q 4	.0	Q 5	Q 6		Q 7	Q 8	Ü	Q 9	Q 10	
	Service Area Leads	4.3.1: Propose a framework for outcome development within EHCP's	Co-Produce outcomes model in line with PfA themes.			Develop, produce and implement an EHCP PfA exemplar framework and template to feed into ongoing EHCP review			Reviewed and develop EHCP process (including documentation, data flow and pathways).			First review of progress						Impact: Standardisation of outcome reporting at an individual child/YP level will enable performance management of outcomes to be established which will improve the experience of families, children and young people
4.3 Improve processes to measure achievement of outcomes at a strategic level	SEN & Engagement Service Manager Support from Service Area Leads	4.3.2: Develop systems and mechanisms to measure performance management and review process in outcomes of individuals and agencies.										Review of first evidence across the system, and agencies about outcomes approach and ability to report across the system.			Continued development of defined framework of how outcomes will be developed, identified and achievement monitored.			Standardisation of outcome development and reporting will ensure a consistent approach across agencies improving quality of EHCP content Performance framework for outcomes will allow measurement of whether services are meeting the needs of young people; by SEND need, age etc. and identify potential gaps in services or provision to inform commissioning intentions and work force development Documentation will be fit for purpose and in line with expectations of partners/ users.

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personal outcomes.			Milestones													
Objective	Responsible Person(s)/ Post	Actions	Aug-19	RAG Q Q 1 2	Feb-20	RA Q	Aug-20	Q		Feb-21	Q	AG Q	Aug-21	Q	AG Q	Evidence & Impact
4.4 Improve processes to use strategic information regarding outcomes to contribute to joint commissioning	Service Area Leads	4.4.1: Explore options/potential issues in relation to reporting of data and information sharing across agencies. 4.4.2: Develop process for ongoing transfer of service level information to be set up across agencies as Business as Usual Reporting to inform future commissioning			Agreement of PfA outcomes and service level milestones and measures established. Performance management framework to be agreed. Identifying activity information and qualitative outcomes information. Agree minimum data set to be colle1cted and reported for SEND Strategic Group. Develop contracts and monitoring arrangements.	3	Appropriate contacts across agencies identified to enable an agreed information sharing process to be established Limitations of current systems to be identified Functionality of IT and Case Management Systems investigated in relation to reporting. Key Areas to be identified. Appropriate contacts identified within each agency and agreed information sharing process established. Current system limitations identified.	5	6		7	8		9	10	Evidence: Data sets reported to SEND Strategic Group Up to date service level information Impact: Ongoing and improved understanding and awareness of current and developing practice. Issues are identified and on an ongoing basis. Themes can be identified and improved services can be designed and delivered to children and young people with SEND and their families.