



Stockton-on-Tees

Special Educational Needs and Disabilities

Written Statement of Action

August 2019

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.

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 (continued)

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

Objective	Responsible Person(s)/ Post	Actions	Milestones										Evidence & Impact					
			Aug-19	RAG		Feb-20	RAG		Aug-20	RAG		Feb-21		RAG		Aug-21	RAG	
				Q 1	Q 2		Q 3	Q 4		Q 5	Q 6			Q 7	Q 8		Q 9	Q 10
1.2 To develop a collective understanding of Education, Health and Care and how key decisions are made and to communicate this clearly.	Chair, Stockton Parent Carer Forum Strategic Health & Wellbeing Manager, SBC Head of Commissioning & Strategy, CCG	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														Evidence: 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	
		1.2.2: Co-produce a mechanism for engagement and communication with parents/carers re: statutory and non-statutory 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
		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.																		
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			Aug-19	RAG		Feb-20	RAG		Aug-20	RAG		Feb-21		RAG		Aug-21	RAG	
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2.1 To have a clear and agreed understanding of what a good Education Health Care Needs Assessment (EHCNA), Plan and Annual Review looks like and an agreed analysis of the current quality of Education Health Care Needs Assessments, Plans and Annual Reviews.	SEN & Engagement Service Manager Designated Clinical Officer (DCO) AD Children's Social Care CCG SPCF	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	
		2.1.3: 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	
		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							Test the hypothesis and the current QA tool	
		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.										Builds engagement with parents on quality issues and identifies areas for improvement. Children and young people's views and 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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2.2 To improve the systems and processes (as per outcomes of Action 2.1) to ensure all Education Health Care Needs Assessments, Plans and Annual Reviews are of a high standard.	SEN & Engagement Service Manager DCO AD Children's Social Care CCG SPCF	2.2.1: Develop and initiate action plan focusing on areas for improvement.						Full review of EHCP's and annual reviews are completed, and action plan developed.								Evidence: We will have a clear plan for improvement We will have a renewed focus on person centred planning at heart 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 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		
		2.2.2: Co-Produce a multi-agency audit process to review and success quality			Multi Agency Assessment process developed and tested					Annual process implemented								
		2.2.3: Develop and implement a co-produced 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.							
		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.								

Weakness to be addressed: The quality of EHC assessments and plans is too variable (continued)																		
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		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: 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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3.1 To understand current and projected needs of children and young people with SEND to inform the joint commissioning of services	Strategic Development Manager SBC Head of Commissioning & Strategy, CCG	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 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.		
		3.1.2: 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											
3.2 To Jointly commission co-produced services and pathways which are able to demonstrate their contribution to improved outcomes for children, young people and families	Strategic Development Manager SBC Head of Commissioning & Strategy, CCG	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		
		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: <ul style="list-style-type: none"> •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.

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		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						<p>Impact:</p> <p>Partners are jointly commissioning services based on needs and priorities, and are co-produced with parents/carers and children and young people.</p> <p>There is a mechanism for addressing the commissioning requirements needed to deliver the Joint Commissioning strategy and action plan.</p> <p>Joint commissioning enables the provision of services that meet need.</p> <p>All children/young people with neurodevelopment disorders pre/during/post diagnosis have access to services based on need.</p> <p>Parents/carers feel better supported to meet the needs of their children/young people</p>	
		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													
		3.2.5: Develop financial mechanisms and where appropriate, form partnerships to jointly commission service provision across Education, Health and Care					Financial commitment and mechanism agreed through individual organisation governance arrangements and endorsed at system level by Health and Wellbeing Board											
		3.2.6: Identify and implement governance arrangements 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								

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.																		
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		3.2.7: Ensure that analysis of service review and implementation links into ongoing assessment of need.									A balanced scorecard has been developed which includes indicators for service accessibility, service user feedback and outcomes.							
		3.2.8 Develop a needs led neurodevelopmental pathway	Pathway has been developed		Transition to the new pathway will commence in November 2019.													
3.3 Improve processes to use strategic information about achievement of outcomes to influence commissioning	Service Area Leads	3.3.1: Align workstreams to ensure that ongoing work is coherent and congruent														<p>Evidence:</p> <p>As per Action 4.4</p> <p>Impact:</p> <p>Joint commissioning is providing provision that provides better outcomes for children, young people and their families.</p>		

Weakness to be addressed: Local leaders have not developed an effective approach to measuring and evaluating EHC outcomes for children and young people.

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.

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			Aug-19	RAG		Feb-20	RAG		Aug-20	RAG		Feb-21		RAG		Aug-21	RAG	
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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.			Ensure outcomes are embedded into new EHC Plan process			Re-engage on effectiveness of outcomes approach in new EHCPs					<p>Evidence:</p> <p>Audit Tool measure progress and development</p> <p>Impact:</p> <p>Increased understanding and awareness of current practice enabling issues to be identified, addressed and good practice shared</p> <p>Mapping of processes alongside one another enables the development of congruent processes</p> <p>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)</p>	
		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					<p>Evidence:</p> <p>Definitions published with stakeholders for continued oversight</p> <p>Multi-agency, multi-area awareness raising session - Feb 2019</p> <p>CDC Development Day - June 2019</p> <p>CDC Outcomes & NDti PFA Awareness session - July 2018</p>	

Weakness to be addressed: Local leaders have not developed an effective approach to measuring and evaluating EHC outcomes for children and young people. (continued)

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.

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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 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 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.
		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.													
		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							

Weakness to be addressed: Local leaders have not developed an effective approach to measuring and evaluating EHC outcomes for children and young people. (continued)

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.

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4.3 Improve processes to measure achievement of outcomes at a strategic level	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						<p>Impact:</p> <p>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</p> <p>Standardisation of outcome development and reporting will ensure a consistent approach across agencies improving quality of EHCP content</p> <p>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</p> <p>Documentation will be fit for purpose and in line with expectations of partners/ users.</p>
	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.				

