Supporting children and young people with special educational needs and disabilities in Stockton-on-Tees

Our story – July 2022

Stockton-on-Tees BOROUGH COUNCIL

STOCKTON PARENT CARER FORUM

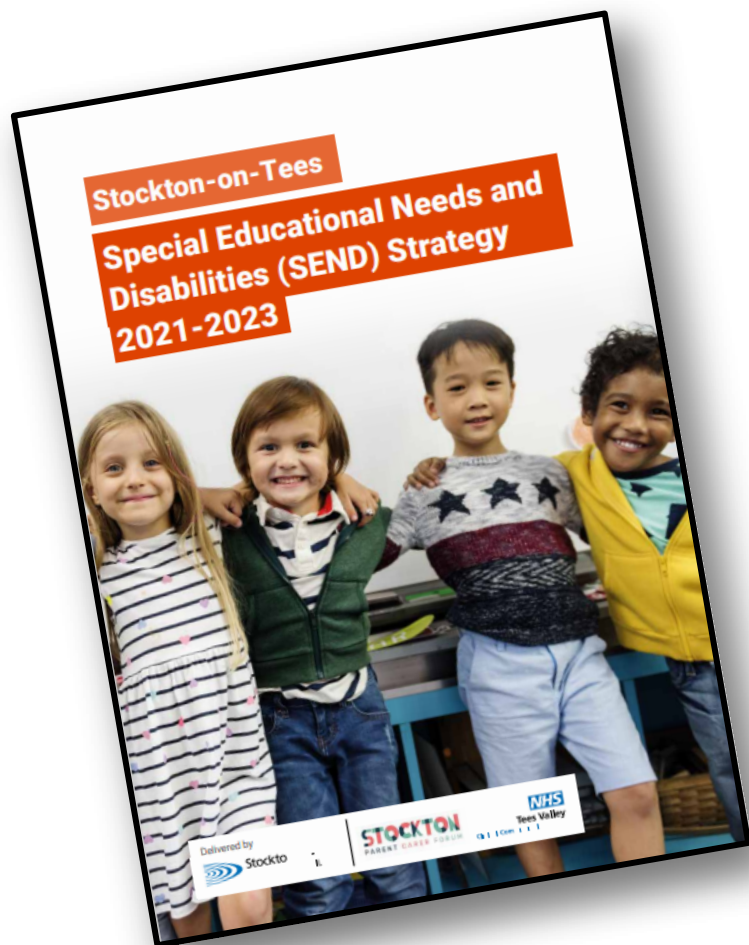NHS Tees Valley Clinical Commissioning Group

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Our ambitions

- Outcomes focused
- Needs led
- Emphasis on quality
- Based on partnership and communication
- Child centred
- Innovative
- Effective
- Transformational

In May 2021 the Local Area published its SEND and Disabilities Strategy.

It was coproduced with partners.

Our partners include:
• Children and Young People with SEND
• Parents/Carers of Children and Young People with SEND
• Stockton-on-Tees Borough Council
• Stockton Parent Carer Forum
• NHS Tees Valley Clinical Commissioning Group
• Mainstream and specialist education settings
• Providers of NHS services including:
       Harrogate and District NHS Foundation Trust,
       North Tees and Hartlepool NHS Foundation Trust
       Tees, Esk and Wear Valleys NHS Foundation Trust
• Voluntary and Community Sector organisations

Our strategic priorities

1. Working in partnership
2. Understanding needs and strengths
3. An effective and accountable system
4. Mainstream
5. Specialist provision
6. Independence

What have we delivered

Partnership

- Start together / stay together – by default
- Systems, services, staffing change / improvement

Understanding needs and strengths

- Valuing SEND
- Person centred planning
- Focus on outcomes in plans

Strategy and intent

- New SEND strategy, co-produced
- JSNA; joint commissioning priorities
- Key service areas
- Neuro pathway, autism support in schools, early years communication

What have we delivered

Local inclusive schools

- A consistent way of assessing needs and ability of provision to meet needs (VSEND)

- SEN support focus

- SENCO training

- Practice hubs

- SEMH offer

Developing high quality provision mainstream and special

- Abbey Hill expansion and Abbey @

- NEAS

- King Edwin expansion

- Ash Trees @ model

- Jointly designed, co-produced services

Independence

- Internships

- Project Choice

- EHCP framework / PfA

Our progress since inspection

What did we need to improve?

1. Our engagement and work with parents and carers – the whole system felt too remote, difficult, combative

2. Variable quality of EHCPs

3. Not enough progress on working together and jointly commissioning support

4. Lots of inputs, system, process, not enough focus on outcomes for children and young people and across the whole system

What have we improved

Co production

1. Active representation for the SPCF
2. SPCF reach
3. Co-production charter
4. Parents / schools liaison meetings
5. Newsletters and social media
6. Co produced strategy
7. Events
8. Surveys and feedback

9. Advocacy capacity
10. 100 days to inclusion design
11. Short breaks engagement

Start Together Stay Together

What have we improved

Quality of EHCPs

1. Deep dive reviews
2. Stakeholder events
3. Redesign of advice
4. Systemic change to the EHCP
5. Person centred planning approach
6. Development of What Matters Island
7. New QA framework
8. New audit process

9. Training
10. Investment in additional staffing capacity
11. Focus on need and development of VSEND
12. Embedding process in reviews

What have we improved

Joint commissioning

1. Regular planning group
2. Development of a new JSNA
3. Co-produced strategy
4. Additional capacity in staffing
5. Changes to individual packages process
6. Events / sessions/ feedback
7. Specific focus on LD / Autism – DSR and key working
8. Neuropathway

9. Speech, language and communication pathway
10. Occupational therapy pilot at Abbey Hill
11. Education OT support commissioned
12. SENDIASS
13. Sleep support
14. Sensory eating service
15. Downs syndrome pathway
16. Complex needs review process

What have we improved

Outcomes

1. Strategic outcomes framework developed
2. Shared data dashboards
3. Outcomes embedded in new EHCP
4. Active engagement of children and carers in What Matters Island objectives
5. Training on outcomes specifications
6. PfA outcomes embedded in EHCP
7. QA tool for health outcomes developed
8. Measurement of achievement of outcomes in EHCPs process
9. V-SEND and meeting needs as a key outcome

Our COVID-19 story

- Focus was on delivery and keeping children and young people safe – collaboration; vulnerability; data sharing; seeing children

- Reviews of plans / adjustments

- Virtual offers

- Special schools focus

- Health pathway/assessment work stood down due to need for face to face required for validity of outcome

- Emotional wellbeing responses developed now informing future design of services e.g. CAMHS

- Recovery / impact: anxiety / loss of boundaries and structure / parental impact

- Managing longer waiting times and demand pressure on e.g. neuropathway

Our future

Where do we go next?

What else do we need to do?

- All EHCPs reviewed and transferred to new EHCP format

- Ongoing improved communication with parents

- Support and challenge to mainstream schools and settings ability to meet needs

- Quality of SEN support plans

- More work on therapies eg SALT – following a needs led approach, and early support to reduce the need for specialist intervention wherever possible

- Neuropathway refinement

- The impact of COVID-19: school refusal / anxiety / developmental delay / parental impacts

- Improving the pathways to independence for young people

- Longer term tracking of outcomes and progress to independence

Further ambitions

- Implementing national changes following the Green Paper

- Improving the ability for all staff and settings to meet needs without specialist involvement wherever possible

- More support and practice – attachment aware, trauma informed

- Redesign of CAMHS / emotional wellbeing / Thrive Stockton-on-Tees and a focus on mental health in schools

- More integration of early help / social care / SEN systems - SMART