

NHS Rotherham Clinical Commissioning Group

Operational Executive – 26th March 2021

Strategic Clinical Executive – Date

GP Members Committee (GPMC) – Date

Clinical Commissioning Group Governing Body - 5 May 2021

Rotherham SEND Strategy, SEND Joint Commissioning Strategy and SEND health update

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Lead Officer:	Jenny Lingrell Joint Assistant Director, Commissioning, Performance & Inclusion Paul Theaker Commissioning Manager, Children & Young People and Maternity
Lead GP:	Dr Jason Page

Purpose:

To provide the Governing Body with the Rotherham SEND Strategy, the SEND Joint Commissioning Strategy and to give a SEND health update.

Background:

The Special Educational Needs and Disabilities Code of Practice was published in 2014; it sets out the statutory requirements for local authorities to work together with local health partners to identify and meet the needs of children with special educational needs and disabilities.

The Code of Practice refers to the expectation that, through the preparation of the Joint Strategic Needs Assessment, the Health and Wellbeing Board will identify the needs of children and young people with SEND.

The strategy describes an effective system: *‘for children and young people this means that their experiences will be of a system which is less confrontational and more efficient. Their special educational needs and disabilities will be picked up at the earliest point with support routinely put in place quickly, and their parents will know what services they can reasonably expect to be provided. Children and young people and their parents or carers will be fully involved in decisions about their support and what they want to achieve. Importantly, the aspirations for children and young people will be raised through an increased focus on life outcomes, including employment and greater independence.’*

Furthermore, the Code of Practice states that: *‘local authorities must place children, young people and families at the centre of their planning, and work with them to develop co-ordinated approaches to securing better outcomes, as should clinical commissioning groups (CCGs).*

They should develop a shared vision and strategy which focuses on aspirations and outcomes, using information from EHC plans and other planning to anticipate the needs of children and young people with SEN and ensure there are pathways into employment, independent living, participation in society and good health.’

In order to fulfil these expectations, a SEND Strategy and a Joint Commissioning Strategy have been prepared. These documents provide the strategic direction that will enable the system to work together to effectively support children and young people with SEND and reduce health inequalities. *Please see Appendix 1 and 2.*

Analysis of key issues and of risks

Rotherham has 8885 children identified with SEND; 2333 of whom have an Education, Health and Care Plan; this is a high number in comparison to regional nearest neighbours.

The SEND agenda is shared across the local system, with responsibilities held by the local authority, the health system and education providers. SEND is a priority in the Rotherham Place Plan and the Place Board receives regular performance reports and spotlight updates.

The SEND Strategy sets out the key outcomes for children and young people (up to the age of 25) and identifies the key priorities and objectives that will deliver these. The strategy identifies how the work will be organised and the oversight and accountability that is in place.

Rotherham has a long-established process for developing and agreeing strategy in relation to Special Educational Needs and Disabilities which involves co-production with children, young people and their families as well as partnership work with SEND practitioners.

The previous version of the SEND Strategy was only ever produced in draft form and was criticised for not reflecting the voices of children, young people or families due to a lack of co-production activity.

In order to provide the strategic direction for the joint SEND Strategy a co-produced 'Voices' day was held in November 2019 where young people, parents, carers and practitioners came together to reflect on Rotherham's journey in relation to inclusion and agree next steps and priorities. This day provided an opportunity to reflect on progress made following the initial 'Voices' day that took place in 2017.

The 'Voices' Day held in November 2019 agreed a specific set of outcomes for children with SEND in Rotherham. The outcomes were originally formulated by the SEND Strategic Board via an outcomes based accountability process; these were shared with attendees at the 'Voices' day and it was agreed that these outcomes **did** reflect the priorities of children, young people and their families. Alongside the SEND Strategy a scorecard and strategic action plan have been developed.

The draft SEND Strategy and SEND Joint Commissioning Strategy will be published on the SEND Local Offer and the SEND Strategic Board will continue to monitor the impact of the Strategy on outcomes for children and young people through monthly meetings and will provide spotlight updates to the Place Board.

The NHS Rotherham CCG led SEND Health Focus Group has refreshed its SEND Health Action Plan to ensure that the SEND Strategy and SEND Joint Commissioning Strategy priorities are reflected in the plan.

The key priorities within the SEND Health Focus Group action plan are as follows:

- Ensure timely and high quality EHC assessments
- Implement the Rotherham Joint Commissioning Strategy 2020-23
- Ensure that there is a clear nursing and AHP therapy offer to schools and key partners
- Ensure that there is a clear process for identifying need
- Implement the revised neuro-developmental pathway
- Implement recommendations from the Designated Clinical Officer sufficiency exercise
- Implement the Rotherham Sensory Differences Model

There has been good progress made in relation to the actions associated with the priorities outlined above. In particular, a SEND Toolkit has been developed and is currently being implemented, there is now a clear nursing offer to schools, the neuro-developmental pathway has been implemented and the recommendations from the Designated Clinical Officer sufficiency exercise have been implemented. There is also a process in place to monitor and ensure that high quality EHC assessments are provided by health services and, subject to some further training for RDaSH CAMHS staff, this priority will be signed-off.

The area of work where there has been least progress is the development of pathways to support the transition for children and young people with long-term conditions. This work was paused due to the pandemic, but there has also been a lack of strategic engagement from adult services within TRFT. There is work currently being undertaken to resolve this issue.

Patient, Public and Stakeholder Involvement:

There was extensive parent/carer, children and young people and stakeholder involvement in the development of the SEND Strategy, through the 'Voices' Day. There is also on-going parent/carer representation on the SEND Strategic Board and SEND Health Focus Group.

Equality Impact:

Implementation of the recommendations identified in the SEND Strategy and the SEND Joint Commissioning Strategy will have a positive impact on Children and Young People with SEND and their parents/carers. There will be Equality Impact Assessments undertaken where changes are made to services as a result of the SEND recommendations outlined within the aforementioned strategic documents.

Financial Implications:

There are no identified financial implications at this stage.

Human Resource Implications:

There are no identified human resource implications at this stage.

Procurement Advice:

Not applicable.

Data Protection Impact Assessment

Not applicable.

Approval history:

The SEND Strategy and SEND Joint Commissioning Strategy have been approved by the Health and Wellbeing Board.

Recommendations:

That Governing Body endorses the SEND Strategy and SEND Joint Commissioning Strategy.

That Governing Body notes the progress being made in relation to the SEND Health Focus Group action plan.

Paper is for endorsement and discussion

ROTHERHAM PARTNERSHIP

SPECIAL EDUCATION NEEDS AND DISABILITIES (SEND) STRATEGY



INTRODUCTION

Rotherham is ambitious for all children and young people to achieve their potential and have the best start in life. The Rotherham Partnership Special Education Needs and Disabilities (SEND) Strategy recognises that children and young people have different strengths and needs and that services and provision need to be differentiated so that all children and young people have their needs met and experience success.

This strategy is a partnership strategy because in Rotherham we recognise that for children and young people to achieve their potential then all services need to work together with parents, carers, children and young people being equal partners and their voices heard at all levels when planning and developing a SEND Strategy. The SEND Strategy is overseen by the Place Board in recognition that SEND is an area of responsibility for all partners in Rotherham.

In Rotherham we have developed Four Cornerstones which we believe are essential for ensuring that good practice in working with children, young people, parents and carers is achieved these are:



We recognise that when these values are integrated into practice then trust is developed and progress in achieving outcomes for children and young people is made; without trust systems, partnerships, organisations and families cannot work together effectively and meaningful partnership work cannot be achieved. This strategy was developed following a series of Voices Events including focus groups, workshops and events held throughout October and November 2019.

OUR VISION AND OUTCOMES

In Rotherham our strategic leaders for integrated place-based priorities share the vision that services and organisations should support people and families to live independently in the community, with prevention and self-management at the heart of our delivery. Our SEND Strategy therefore starts with a conversation with our population, parents, carers, children and young people about how best we can support them to achieve this.

On 13th October 2017 Rotherham held its first VOICES event. Young people, parent carers, leaders and front-line practitioners from health, education and care services including the private and voluntary sector, schools and settings, came together. The event provided an opportunity to identify areas of strength when it comes to experience of SEND and co-production, as well as suggestions for further development, were highlighted.

Over the next two years partners continued to work together to create a Rotherham VOICES Action Plan: Co-production is Everyone's Business. The aim of the action plan was to embed a culture in Rotherham in which front-line practitioners, administrative and support staff, organisational and strategic leaders, and commissioners, work together to ensure that children and young people, parent carers and families are equal partners in decision-making that affects their lives at all levels (individual, organisational and strategic).

Two commitments were made:

Make our relationships stronger

Make communication more honest, open and accessible

Three priority areas were identified:

Believe

Get Me Help Quicker

Make Transitions to Adulthood Better and Plan Them With Me

These priorities were revisited at the workshops, focus groups and at the Voices Day that took place throughout October and November 2020. This strategy reflects the feedback that was captured. These priorities are recognised as informing a number of strategic projects within Children and Young People's Services and Partnerships with a number of organisations and partnership delivery groups responsible for ensuring that these priorities are delivered.



AREAS FOR DEVELOPMENT: VOICES PRIORITIES

Areas for Development: Voices Priorities	Strategic Oversight	Responsible Individual
<p>Listening, involving and believing children, young people, their carers and their families</p>	<p>Workforce development Programme linked to SEMH Strategy.</p> <p>SEMH Strategy reporting to SEMH Strategic Implementation Board</p> <p>SEND Strategy reporting to SEND Board</p> <p>Integrated Care Partnership Workforce Enabler Group</p>	<p>Jenny Lingrell Joint Assistant Director Commissioning, Performance and Inclusion (RMBC/RCCG)</p>
<p>Resources to sustain and develop the voice of young people in the way they would like it to happen</p>	<p>Strategic audit of children and young people's voices (to include LAC Council, Different but Equal Board; EHCP Audit findings; SENDIASS Annual report; POET survey) reporting to SEND Board to identify where children's voices are evident within their planning and where they are absent and identify next steps and resources.</p> <p>Further joint work to identify how arrangements can be aligned between Place Board partners.</p> <p>SEND Strategy reporting to SEND Board</p>	<p>Sue Wilson Head of Performance at RMBC</p> <p>Joint Assistant Director Commissioning, Performance and Inclusion (RMBC/RCCG)</p>



Areas for Development: Voices Priorities	Strategic Oversight	Responsible Individual
Working in a person/ family-centred way	Workforce Development Programme SEMH Strategy reporting to SEMH Strategic Implementation Board. SEND Strategy reporting to SEND Board Integrated Care Partnership Workforce Enabler Group	Jenny Lingrell Joint Assistant Director Commissioning, Performance and Inclusion (RMBC/RCCG)
Workforce development to aid better understanding of experience and to promote better responses	Workforce Development Programme SEMH Strategy reporting to SEMH Strategic Implementation Board SEN Strategy reporting to SEND Board Integrated Care Partnership Workforce Enabler Group	Jenny Lingrell Joint Assistant Director Commissioning, Performance and Inclusion (RMBC/RCCG)
Communication	Integrated Care Partnership Communication and Engagement Group Local Offer Steering Group reporting to SEND Strategic Board.	RMBC/RCCG Communications Team.
Clearer pathways and thresholds – better joined up thinking	Review of service descriptions and content of Local Offer Local Offer Steering Group. SEND Strategy reporting to SEND Board	Mary Jarrett Head of Inclusion RMBC.
Developing the offer from mainstream schools	Workforce Development Programme SEMH Strategy reporting to SEMH Strategic Implementation Board SEND Strategy reporting to SEND Board	Assistant Director Education RMBC

Areas for Development: Voices Priorities	Strategic Oversight	Responsible Individual
<p>Reducing waiting times for neuro-developmental diagnosis (Neuro-developmental pathway re-design)</p>	<p>SEMH Strategy Delivery Group reporting to Place Board Autism Strategy</p>	<p>Christina Harrison RDASH/Jenny Lingrell Joint Assistant Director Commissioning, Performance and Inclusion (RMBC/RCCG) Garry Parvin Joint Commissioner RMBC/RCCG.</p>
<p>Understanding of, and response to, SEMH/ anxiety/autism (Neuro-developmental pathway re-design)</p>	<p>SEMH Strategy Delivery Group reporting to Place Board</p>	<p>Christina Harrison RDASH/Jenny Lingrell Joint Assistant Director Commissioning, Performance and Inclusion (RMBC/RCCG)</p>
<p>Increasing support to enable independence, including in paid employment</p>	<p>Preparation for Adulthood Board</p>	<p>Ian Spicer Assistant Director Adult Services. RMBC</p>

We will measure how successful we are in making progress against these priorities by using series of outcome measures which reflect the need to measure the impact of strategic work on the lives of individual children, young people and their families.

Rotherham has developed four strategic outcomes which will form the basis of planning and measuring the successes for children and young people with SEND and ensuring that the priorities in this strategy are recognised and met.

Each outcome has a series of indicators and performance measures which will ensure that they create a meaningful understanding of the experiences and successes of children and young people with SEND in Rotherham and that the partnership is held accountable for the success of achieving these outcomes and begins to understand where progress is not being made and why, or where success is being achieved and should be shared and celebrated.

The Four Outcomes are as follows:

WELLBEING Outcome: All children and young people in Rotherham with SEND to enjoy good physical and mental health

Preparation for Adulthood Outcome: All young people in Rotherham with SEND are well prepared and supported to exercise choice and control that enable them to enjoy fulfilling lives

CYP and Parents Voice Outcome: All Children and Young People in Rotherham with SEND and their families have their voices heard and this makes a difference to their experiences and outcomes

Whole Child Progress: Promises and Commitment (Attainment) Outcome: All children and young people in Rotherham with SEND have positive opportunities to make progress in a person-centred way

Outcome:

All children and young people in Rotherham with SEND to enjoy good physical and mental health

Indicators:

- In development

Measures:

- % of services are delivered in the required time period (18 weeks) (SALT (Speech and Language Therapy), OT (Occupational Therapy) , PT(physio Therapists) CDC (Child Development Centre)
- % and Care Plans with written advice from a health professional within the 6 week timescale.
- % of children receiving the 2 year old health check % of children and young people assessed in 2 weeks for a wheelchair

Outcome:

All young people in Rotherham with SEND are well prepared and supported to exercise choice and control that enable them to enjoy fulfilling lives

Indicators:

- Numbers of young people with SEND who are EET
- Number of care leavers with SEND who are “in touch”
- Number of young people referred into Adult Transitions team-
- Number of over 19s with EHCPs

Measures:

- % increase of young people with SEND who are EET compared to their peer group (i.e. the whole cohort).
- Number of young adults on ROC supported Internships Scheme who obtain employment
- Social care advice received within timescales
- Number of Permanent Exclusions (primary and secondary against nearest neighbours

Outcome:

All Children and Young People in Rotherham with SEND and their families have their voices heard and this makes a difference to their experiences and outcomes

Indicators:

- All EHC Plans are informed by the views of children and young people, parents and carers Number of audits that have section A met.
- Number of POET surveys completed by year (baseline 2019)
- Number of families receiving a Short Break

Measures:

- Numbers of schools, services and settings participating in the Rotherham Charter Gold accreditation process
- 100% of EHC Plans incorporate the views of children and young people, parents and carers (EHC Audit/POET)
- Numbers of children and young people with SEND attending groups that have a Voice and Influence remit (Genuine Partnerships data).
- Numbers of families accessing Rotherham Parent Carers Forum and strategic meetings attended (RPCF data)



Outcome:

All children and young people in Rotherham with SEND have positive opportunities to make progress in a person centred way

Indicators:

- Attendance rates in line with peers and other LAs
- Progress and value added of attainment le child/YP outcome
- Number of children with EHCPs
- Number of Children with SEN
- Number of LAC with SEN

Measures:

- % attendance in line with peers
- % children with SEND attainment at all Key Stages
- % of young people with SEND who are EET
- % of Audits of EHCP's that are met or unmet
- Increase in the number of schools who have requested a SEND review as part of the ROSIS offer
- % increase in children with EHCPs
- % increase in SEN
- ratio of children in Special school/ Mainstream provision
- The SEND Scorecards will be published quarterly on The Local Offer: <http://www.rotherhamsendlocaloffer.org/>



Accountability and Measuring Success:

For each of the four outcomes a score card has been developed which will report to the SEND Strategic Board. A refined set of headline measures will be reported quarterly to the Place Board, who also receive a detailed spotlight update three times a year. These performance measures will encourage accountability across systems and organisations and increase operational accountability for achieving these outcomes.

It is recognised that success in achieving high quality outcomes for children and young people with SEND is captured in several strategies for which accountability sits with the following strategic partnership boards. These are:

Autism Strategy	Autism Board	Learning Disability and Mental Health Transformation Group	Rotherham Place Board
Preparation for Adulthood	Preparation for Adulthood Board	Children and Young People's Transformation Group	
SEMH Strategy	SEMH Strategy Delivery Group		
SEND Strategy	SEND Board		
SEND Sufficiency Strategy	SEND Board		

The oversight for the Rotherham SEND Strategy is the responsibility of the SEND Strategic Board who meet bi-monthly. The SEND Strategic Board reports to the Rotherham Place Board. This Strategy will be reviewed annually to ensure accountability for progress and outcomes for children, young people and their families.





ROTHERHAM INTEGRATED CARE PARTNERS

Connect Healthcare Rotherham CIC
NHS Rotherham Clinical Commissioning Group
Rotherham Doncaster and South Humber NHS Foundation Trust
Rotherham Metropolitan Borough Council
The Rotherham NHS Foundation Trust
Voluntary Action Rotherham

ROTHERHAM SEND

JOINT COMMISSIONING STRATEGY 2020-2022



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INTRODUCTION

Rotherham is ambitious for all children and young people to achieve their potential and have the best start in life. The Joint Commissioning Strategy for Children and Young People with Special Educational Needs and Disabilities underpins the overarching SEND Strategy. It recognises that children and young people have different strengths and needs, and that services and provision need to be differentiated so that all children and young people have their needs met and experience success. The SEND Strategy is overseen by the Place Board in recognition that SEND is an area of responsibility for all partners in Rotherham.

Joint commissioning is a continuous improvement cycle and as stated in the Code of Practice for SEND (2014), over time, partners may shift the focus of their activity as the needs of the local population change and delivery of services improves. This strategy builds upon its predecessor, the Rotherham Joint Commissioning Strategy for SEND 2015-18.

The Strategy will be monitored and reviewed by the Rotherham SEND Strategic Board, which reports on a regular basis to the Children and Young People's Transformation and Partnership Board and to the Rotherham Place Board. The governance structure is outlined at **Appendix A**.



2

COMMISSIONING RESPONSIBILITIES AND APPROACHES

Joint commissioning is the process of meeting needs and improving outcomes through joint planning, agreeing and monitoring services across agencies.

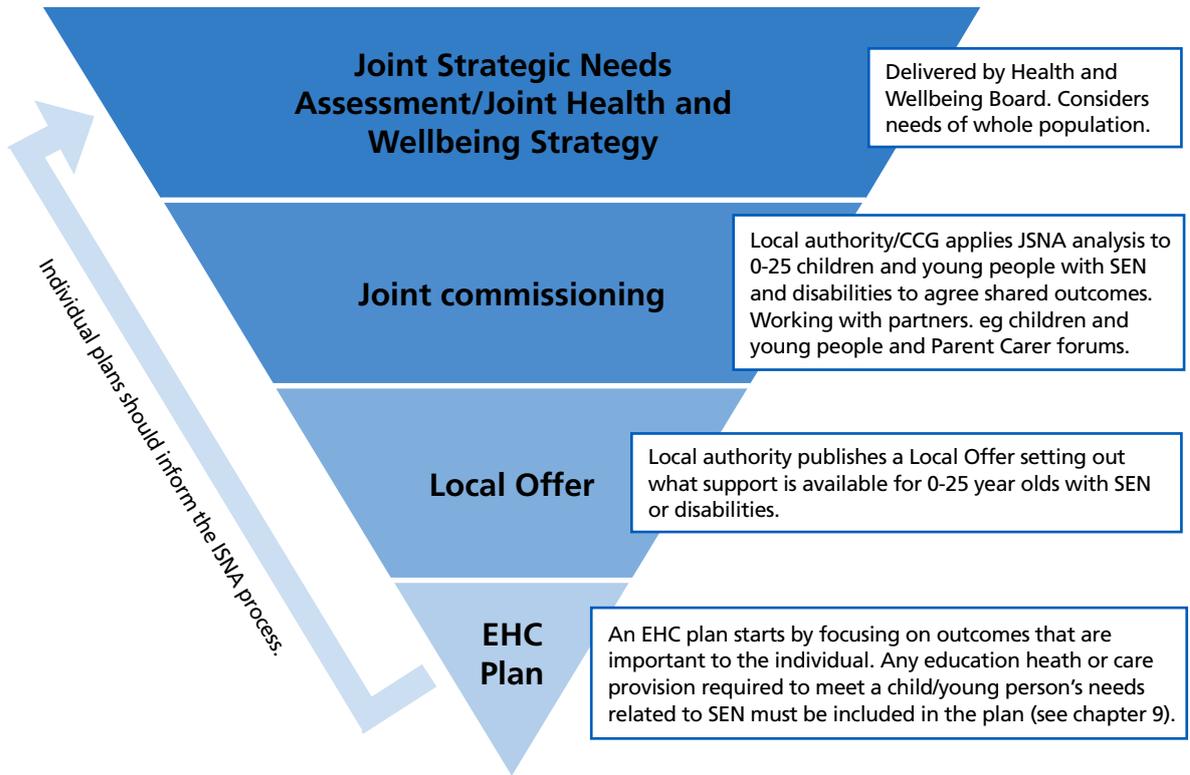
Figure 1.1: The Joint Commissioning Cycle



The Children and Families Act (2014) and Code of Practice for SEN (2014) places explicit duties on local authorities and Clinical Commissioning Groups (CCGs) for developing joint commissioning arrangements for education, health and care provision for children and young people with SEN or disabilities. The duty includes the joint arrangements for commissioning services to improve outcomes for 0 to 25-year-old children and young people with SEND, including those with Education Health and Care (EHC) plans.

The duties for joint commissioning of SEND services extend to a range of partners, including: the Local Authority, Clinical Commissioning Groups, NHS England, Health and Wellbeing Board, Healthwatch and education providers. Further details of commissioning responsibilities for agencies are set out in **Appendix B**.

Figure 1.2: Commissioning Accountabilities



3

UNDERPINNING PRINCIPLES OF COMMISSIONING SEND SERVICES

In Rotherham we have developed Four Cornerstones which we believe are essential for ensuring that good practice in working with children, young people, parents and carers is achieved. These are:



The Four Cornerstones should be embedded within our joint commissioning arrangements to ensure that, in every part of our delivery, these values are integrated into practice. This will enable trust to develop and progress to be made in achieving outcomes for children and young people.

The Rotherham Place Plan 2020-2022 sets out the shared principles across the Integrated Care Partnership. These are:

- Focus on people and places rather than organisations, pulling pathways together and integrating them around people's homes and localities; we will adopt a way of working which promotes continuous engagement with and involvement of local people to inform this.
- Actively encourage prevention, self-management and early intervention to promote independence and support recovery and be fair to ensure that all the people of Rotherham can have timely access to the support they require to retain independence.
- Design pathways together and collaborate, agreeing how we do pathways once collectively, to make our current and future services work better.
- Be innovative, using international evidence and proven best practice to shape our pathways to achieve the best outcomes for people in the most cost-effective way.

- Strive for the best quality services based on the outcomes we want within the resource available.
- Be financially sustainable and this must be secured through our plans and pathway reform.
- Align relevant health and social care budgets together so we can buy health, care and support services once for a place in a joined-up way.

The priorities outlined in Section 8 of the SEND Joint Commissioning Strategy are underpinned by the four cornerstones, the Integrated Care System principles and the duties for joint commissioning, including the requirements to:

- Be informed by a clear assessment of local needs;
- Enable partners to make best use of all the resources available in an area to improve outcomes for children and young people in the most efficient, effective, equitable and sustainable way;
- Cover the services for 0-25 year old children and young people with SEN or disabilities, with and without EHC plans;
- Include arrangements for: securing EHC needs assessments, securing the education, health and care provision specified in EHC plans, and agreeing Personal Budgets;
- Engage children and young people with SEN and disabilities and children's parents in commissioning process and decisions, including the review of processes to enable improvements to be made to services;
- Use the Joint Strategic Needs Assessment (JSNA) to inform the joint commissioning priorities made for children and young people with SEN and disabilities, which will in turn be reflected in the services set out in the Local Offer;
- Put local governance arrangements in place to ensure clear accountability for commissioning services for children and young people with SEN and disabilities from birth to the age of 25;
- Be based on evidence about which services, support and interventions are effective;
- Agree how they will work together to monitor how outcomes in education, health and care are being improved as a result of the provision commissioned.

4

OUTCOMES

We will measure how successful we are in making progress against our commissioning priorities by using series of outcome measures which reflect the need to measure the impact of strategic work on the lives of individual children, young people and their families.

Rotherham has developed four strategic outcomes which will form the basis of planning and measuring the successes for children and young people with SEND.

Each outcome has a series of indicators and performance measures which will ensure that they create a meaningful understanding of the experiences and successes of children and young people with SEND in Rotherham and that the partnership is held accountable for the success of achieving these outcomes and begins to understand where progress is not being made and why, or where success is being achieved and should be shared and celebrated.

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Whole Child Progress: Promises and Commitment (Attainment) Outcome: All children and young people in Rotherham with SEND have positive opportunities to make progress in a person-centred way

There is now a requirement to ensure that our local commissioning arrangements are linked to these outcomes and key performance indicators are captured to evidence impact.



5

LOCAL NEEDS

In Rotherham there are 56,900 children aged under-18, which represents 21.6% of the local population (ONS, 2017). Further local and national demographic information tells us that:

- 21.8% of children live in low income families (HMRC, 2016) (England 17%)
- FSM entitlement rate is above national ave. (14.8% compared to 13.7% at Primary, 14.4% compared to 12.4% at Secondary)
- 17.8% of Rotherham's school age population is from BME background (England 32.2%) (DfE 2018)
- Over the last ten years there has been a significant increase in the Eastern European Roma population (from Slovakia and Czech Republic since 2004 and Romania since 2014), concentrated in a few central neighbourhoods
- Disability Living Allowance (DLA) is claimed for 5.3% of children aged under 16 years in the local authority area compared with 3.8% in England as a whole. Learning Difficulties affect 55% of DLA claimants under 16 years in Rotherham. (DWP 2018).

The Rotherham school census data from January 2019 identifies that:

- There are 45,209 children and young people attending Rotherham's schools
- 7796 children in the Census are identified as having a Special Educational Need (17.2%) compared to the latest national average of 14.6%
- 1506 children (3.3%) in the Census have needs met with support of an Education Health and Care Plan being in place compared to the latest national average of 2.9%
- Local data shows that at the end of April 2019 - 2160 CYP aged 0-25yr old have an Education Health and Care Plan in place. This number equates to 4.8% of our School population but if compared to the 2018 latest Rotherham ONS 0-25yr population projections this equates to 2.7%
- 6290 children (13.9%) have needs met by a graduated response (Sen Support level) compared to the national average of 11.7%

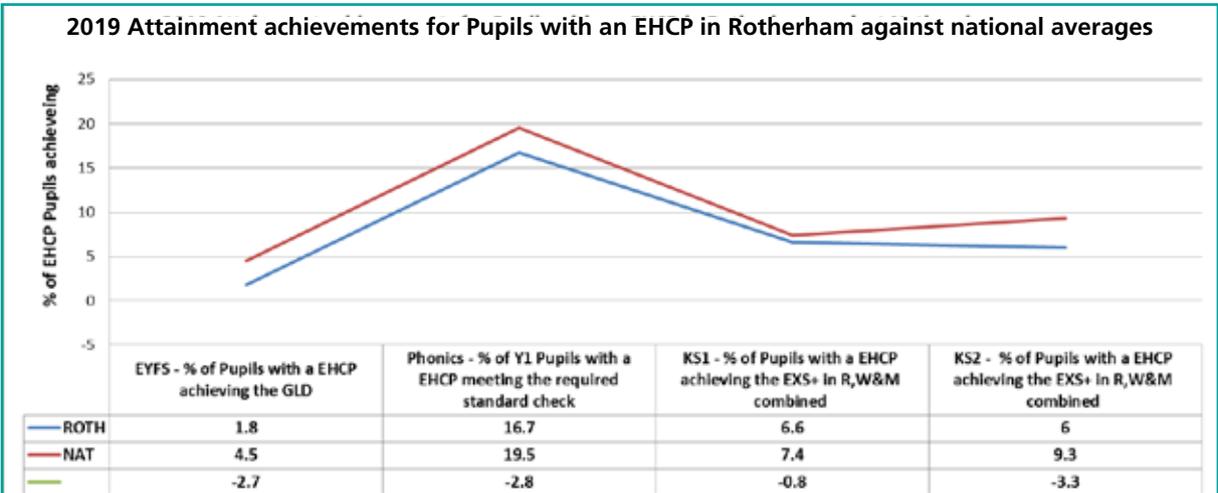
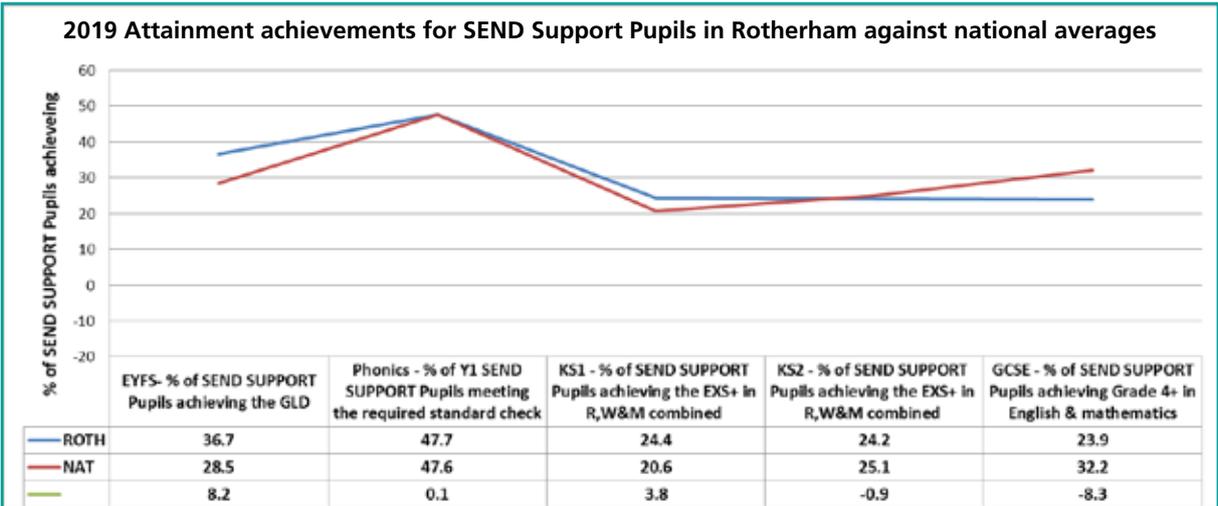
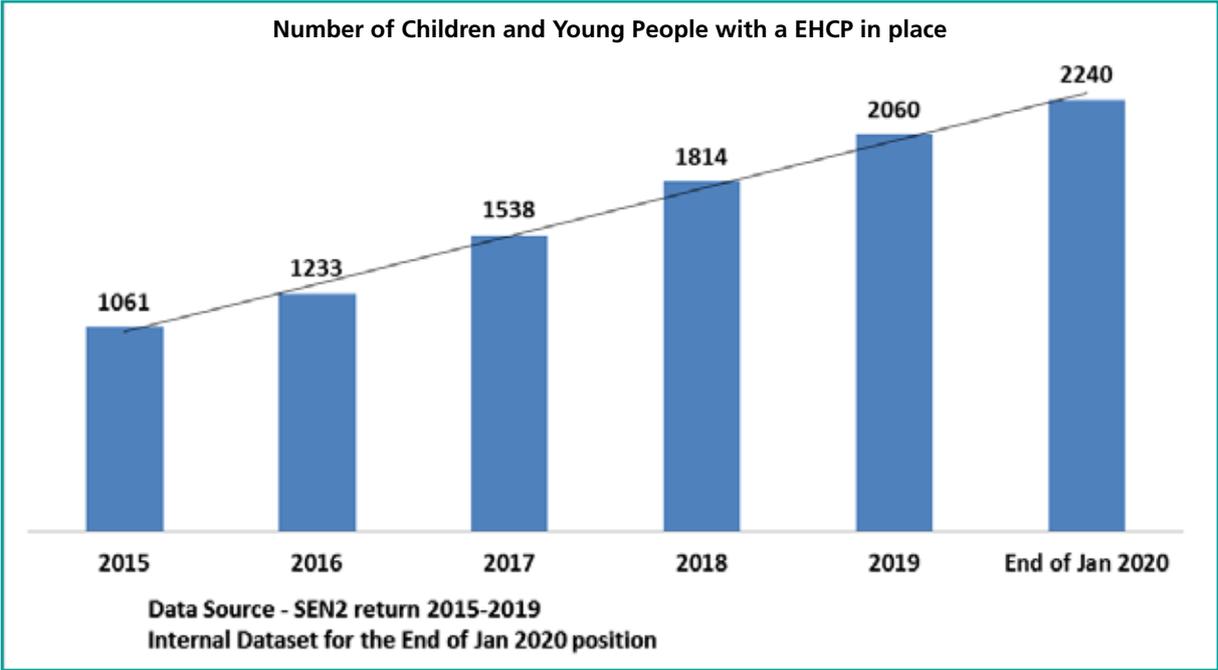
- The main Primary Needs coming through from Schools via Census data on all Rotherham SEND Children are recorded as: Specific Learning Difficulty (22%), Speech, Language and Communication Needs (16.8%) and Social Emotional Mental Health (15.9%) needs.
- When focussing on CYP who are in Rotherham Schools whom have a EHCP in place – the information from the Census shows that the main primary needs for these CYP are around Autistic Spectrum Disorder (29.3%), Moderate Learning Difficulties (15.7%), Social Emotional Mental Health needs (14.6%) and Speech, Language and Communication Needs (10.8%).

There are more Children and Young People in Rotherham who have an EHCP in place that won't be included in the Census dataset, as they may not be of statutory school age or they access a provision out of area:

- Local Data shows that at the end of January 2020, 2240 children and young people aged 0-25yr old had an Education Health and Care Plan in place. This number equates to 4.9% of our School population – however when compared to the latest Rotherham ONS 0-25yr population projections this equates to 2.8%.
- 235 children and young people (10.5%) from the overall 2240 on Plans access on out of authority provision, 89.5% of CYP access a provision in Rotherham.
- Data shows that between January 2015 and the end of January 2020 we have had 1179 more CYP with EHCP's, which equates to a 111% increase over this 5 years period.
- The latest dataset around SEND shows the rising trend in the number of CYP who have EHCP's in place and fewer CYP having needs met through SEN support.



- Local data shows the main presenting areas for needs for CYP who have a EHCP are Autism Spectrum Disorder, (31%) Social, Emotional & Mental Health needs (21.4%), Moderate Learning Difficulty, (20%), Speech, Language and Communication Needs (8.9%)
- There is now a requirement to ensure that our local commissioning arrangements are linked to these outcomes and key performance indicators are captured to evidence impact.



6

WHAT FAMILIES TELL US

In November 2019, the VOICES Next Steps event brought together young people, parents/carers and a wide range of stakeholders to consider the priority areas to be taken forward for a refreshed Rotherham SEND Strategy. The key priority messages from the event were as follows:

Believe

- Workforce development on how to understand, work with and involve young people with SEND
- Involvement of partners in the Believe movement

Get me help quicker

- Workforce development that focusses on being welcoming, inclusive, an empowering and holistic approach, person-centred reviews and practice and pathways and referral processes

Improved communication

- Reduce waiting times (Health and Social Care)
- Closer working with mainstream schools
- Enhance early identification, including more focus on the two-year assessment and longer Child Development Centre support
- More timely Social Care and Health input into EHCPs
- Increase respite opportunities, including those for siblings
- Review SEND funding for services
- Review traded services offer
- Make transitions to adulthood better
- Create a person-centred lifelong service with clear pathways
- Improve communication
- Increase support to enable independence including in paid employment.

7

KEY ACHIEVEMENTS

Much has been achieved over the lifetime of the SEND reforms in Rotherham. Some Of our key achievements to date are:

- The relationship between Rotherham MBC and Rotherham CCG is strongly developed and this has enhanced the ability to work collaboratively on joint commissioning activity at individual, operational and strategic level to ensure high quality provision to meet the needs of children and young people with SEND
- A well-established Children and Young People's SEND Strategic Board, which is overseeing the development of SEND provision and joint commissioning work in Rotherham
- Rotherham MBC and Rotherham CCG commissioners have strong links with the Rotherham Parent Carer Forum, with parent/carers representation on key strategic groups and on-going consultation and co-production exercises
- There are a number of jointly commissioned packages of individual support for children and young people with complex, which are now reviewed regularly by the newly established Joint Resourcing Panel.
- There is an established Joint Commissioning Operational Continuing Health Care Panel.
- Alongside any individual packages of support, Rotherham MBC and Rotherham CCG currently jointly commission Child and Adolescent Mental Health (CaMHS) in Rotherham through a Section 75 pooled budget agreement.
- There are jointly funded posts between Rotherham MBC and Rotherham CCG
- An All-Age Autism Strategy and implementation plan has been co-produced with all stakeholders and there is a commitment to create an All Age Neurological Pathway
- In 2019/20 Rotherham Clinical Commissioning Group invested £390k to support additional services for children and young people with Special Educational Needs and Disabilities. This has included investment to create a co-produced Sensory Model, additional Speech and Language Capacity and additional training capacity.
- The SEND Education Sufficiency Strategy will create 111 new school places to support children and young people with Education, Health and Care Plans. Health provision will be aligned to support new education provision.

JOINT COMMISSIONING PRIORITIES FOR ROTHERHAM 2020-2023

Areas for Development: Voices Priorities	Joint Commissioning Opportunities	Responsible Individual
Listening, involving and believing children, young people, their carers and their families	<p>Embed the Four Cornerstones into service specifications as they are refreshed</p> <p>Embed SEND Strategic Outcomes into commissioning arrangements</p>	<p>Paull Theaker RCCG Commissioning Manager</p> <p>Sean Hill RMBC Commissioning Manager</p>
Resources to sustain and develop the voice of young people in the way they would like it to happen	<p>Review existing arrangements to capture the voice of children, young people and families and explore Joint Commissioning Arrangements for:</p> <p>Parent Carer Forum</p> <p>SENDIASS</p>	<p>Sue Wilson Head of Performance at RMBC</p> <p>Joint Assistant Director Commissioning, Performance and Inclusion (RMBC/RCCG)</p>
Workforce development to aid better understanding of experience and to promote better responses	<p>Undertake a joint review of workforce development offer for children, young people and families with SEND</p> <p>Devise a consolidated offer with a single point of access</p> <p>Embed Four Cornerstones and SEND Workforce Development Offer into Place Workforce Enabler Group</p>	<p>Jenny Lingrell Joint Assistant Director Commissioning, Performance and Inclusion (RMBC/RCCG)</p>

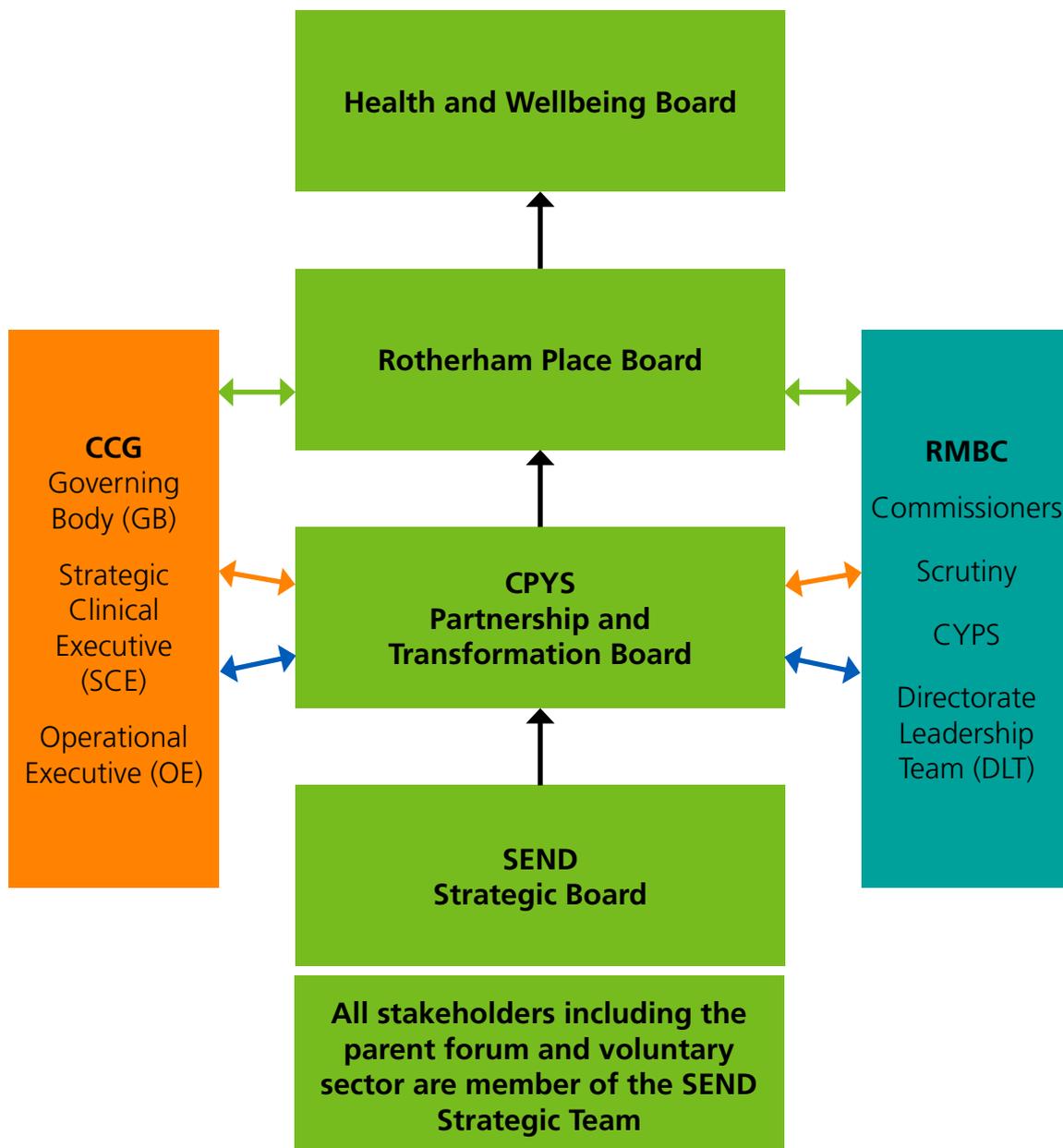
Areas for Development: Voices Priorities	Joint Commissioning Opportunities	Responsible Individual
	<p>Joint work between Rotherham CCG, The Rotherham Foundation Trust and Special Schools to develop Core Competencies Framework and Documented Roles and Responsibilities</p> <p>Roll-out the Health Offer approach across all community health services, so as to provide clarity to schools and wider partners as to health roles and responsibilities</p>	<p>Paul Theaker RCCG Commissioning Manager</p> <p>Vicky Whitfield Designated Clinical Officer</p>
<p>Clearer pathways and thresholds – better joined up thinking</p>	<p>Develop joint commissioning arrangements for Home Care arrangements</p> <p>Re-commission short-breaks, identifying opportunities for alignment between the Local Authority and Rotherham CCG.</p> <p>Review Joint Equipment Panel</p>	<p>Sean Hill RMBC Commissioning Manager</p> <p>Jane Newton Head of Continuing Health Care To be confirmed</p>
<p>Developing the offer from mainstream schools</p>	<p>Develop clear joint pathways of support for children and young people who are accessing specialist school places (SEND Education Sufficiency Strategy)</p> <p>Develop an SEN Support Toolkit</p> <p>Review Inclusion Services that are traded by the Local Authority</p> <p>Review the offer of speech and language to ensure that it is targeted appropriately at need</p>	

Areas for Development: Voices Priorities	Joint Commissioning Opportunities	Responsible Individual
<p>Reducing waiting times for neuro-developmental diagnosis (Neuro-developmental pathway re-design)</p>	<p>Develop a joint commissioning plan for 2020/21 to reduce the waiting time for neuro-developmental diagnostic pathway</p> <p>Develop a joint commissioning plan for 2021/22 to sustain the reduction in waiting time for neuro-developmental diagnostic pathway</p>	<p>Christina Harrison RDASH/Jenny Lingrell Joint Assistant Director Commissioning, Performance and Inclusion (RMBC/RCCG)</p>
<p>Understanding of, and response to, SEMH/ anxiety/autism</p>	<p>Joint commission a Therapeutic Review and identify opportunities to align pathways</p> <p>Reflect findings of Therapeutic Review in refreshed arrangements for CAMHS Section 75 agreement</p> <p>Develop a Learning and Evaluation approach to the Mental Health Trailblazer and ensure that findings are embedded into joint commissioning arrangements to support children and young people to be emotionally resilient and have good mental health</p> <p>Review joint commissioning arrangements for all residential care packages with a focus on quality assurance and clear funding arrangements</p>	<p>Christina Harrison RDASH/Jenny Lingrell Joint Assistant Director Commissioning, Performance and Inclusion (RMBC/RCCG)</p>
<p>Increasing support to enable independence, including in paid employment</p>	<p>Develop pathways to support the transition for children and young people with long-term conditions</p>	<p>Ian Spicer Assistant Director Adult Services. RMBC</p>

APPENDIX A

RMBC/CCG GOVERNANCE STRUCTURE

The diagram below shows the governance structure for the joint commissioning process. The SEND Strategic Board is the forum where joint commissioning priorities are discussed, agreed and monitored, with periodic updates given as part of wider SEND update reports at the oversight groups outlined below.



APPENDIX B

COMMISSIONING ROLES AND RESPONSIBILITIES (CODE OF PRACTICE FOR SEN, 2014)

The roles and responsibilities of bodies involved in joint commissioning arrangements are summarised below:

Agency	Key responsibilities for SEND	Accountability
Local authority	Leading integration arrangements for Children and Young People with SEN or disabilities	Lead Member for Children's Services and Director for Children's Services (DCS)
Children's and adult social care	Children's and adult social care services must co-operate with those leading the integration arrangements for children and young people with SEN or disabilities to ensure the delivery of care and support is effectively integrated in the new SEN system	Lead Member for Children and Adult Social Care, and Director for Children's Services (DCS), Director for Adult Social Services (DASS)
Health and Wellbeing Board	The Health and Wellbeing Board must ensure a joint strategic needs assessment (JSNA) of the current and future needs of the whole local population is developed. The JSNA will form the basis of NHS and local authorities' own commissioning plans, across health, social care, public health	Membership of the Health and Wellbeing Board must include at least one local elected councillor, as well as a representative of the local Healthwatch organisation. It must also include the local DCS, DASS, and a senior CCG

Agency	Key responsibilities for SEND	Accountability
Clinical Commissioning Group	To co-operate with the local authority in jointly commissioning services, ensuring there is sufficient capacity contracted to deliver necessary services, drawing the attention of the local authority to groups and individual children and young people with SEN or disabilities, supporting diagnosis and assessment, and delivering interventions and review.	<p>CCGs will be held to account by NHS England.</p> <p>CCGs are also subject to local accountability, for example, to the Health and Wellbeing Board for how well they contribute to delivering the local Health and Wellbeing Strategy.</p> <p>Each CCG has a governing body and an Accountable Officer who are responsible for ensuring that the CCG fulfils its duties to exercise its functions effectively, efficiently and economically and to improve the quality of services and the health of the local population whilst maintaining value for money</p>
NHS England	NHS England commissions specialist services which need to be reflected in local joint commissioning arrangements (for example augmentative and alternative communication systems, or provision for detained children and young people in relevant youth accommodation)	Secretary of State for Health
Healthwatch	Local Healthwatch organisations are a key mechanism for enabling people to share their views and concerns – to ensure that commissioners have a clear	Local Healthwatch organisations represent the voice of people who use health and social care services and are represented in the planning and delivery of local services. This can include supporting children and young people with SEN or disabilities. They are independent, but funded by local authorities.

Agency	Key responsibilities for SEND	Accountability
<p>Maintained nurseries and schools (including academies)</p>	<p>Mainstream schools have duties to use best endeavours to make the provision required to meet the SEN of children and young people. All schools must publish details of what SEN provision is available through the information report and co-operate with the local authority in drawing up and reviewing the Local Offer</p> <p>Schools also have duties to make reasonable adjustments for disabled children and young people, to support medical conditions and to inform parents and young people if SEN provision is made for them</p>	<p>Accountability is through Ofsted and the annual report that schools have to provide to parents on their children's progress</p>
<p>Colleges</p>	<p>Mainstream colleges have duties to use best endeavours to make the provision required to meet the SEN of children and young people. Mainstream and special colleges must also co-operate with the local authority in drawing up and reviewing the Local Offer</p>	<p>Accountable through Ofsted and performance tables such as destination and progress measures</p>





ROTHERHAM INTEGRATED CARE PARTNERS

Connect Healthcare Rotherham CIC
NHS Rotherham Clinical Commissioning Group
Rotherham Doncaster and South Humber NHS Foundation Trust
Rotherham Metropolitan Borough Council
The Rotherham NHS Foundation Trust
Voluntary Action Rotherham