



Special Education Needs & Disabilities (SEND) Commissioning Strategy

For consideration by:
Children, Young People and Education Scrutiny Commission
Date: 2 September 2021
Lead director: Tracie Rees

Useful information

- Wards affected: All
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1. Purpose

- To note the Leicester, Leicestershire & Rutland Joint Special Educational Needs & Disabilities (SEND) Commissioning Strategy, as detailed at Appendix A.
- A seven-week engagement exercise took place with a range of stakeholders, which has resulted in amendments to the strategy, which are summarised at Appendix D.
- An action plan has been developed and is in progress to underpin and deliver the strategy as detailed at Appendix C. Priority will be given to actions which support delivery of the SEND Accelerated Action Plan, following the feedback letter from Ofsted in June 2021.

2. Summary

- A joint Special Educational Needs & Disabilities (SEND) Joint Commissioning Strategy has been developed across Leicester, Leicestershire and Rutland (LLR), in partnership with the three Clinical Commissioning Groups (CCG's) and the three Local Authorities (L A's).
- The strategy identifies a common vision across Leicester, Leicestershire and Rutland *“we will work together across Leicester, Leicestershire and Rutland to improve the outcomes for children and young people with SEND”* and 7 priorities to address over the coming 3 years.
- Engagement took place on the strategy over a 7-week period earlier this year. A summary of the engagement is attached at appendix B. 82 responses were received across the Leicester, Leicestershire and Rutland area via an on-line survey, as well as comments from a number of meeting groups and forums.
- Overall, responses were positive about the vision and priorities and a set of proposed actions have been ranked by respondents. An action plan has been developed at appendix C which sets out proposed actions over the three-year period of the plan, reflecting the responses through engagement.
- There has been progress made during quarter one using of the SEND joint commissioning delivery group as the main vehicle for delivery and monitoring of the strategy, this includes
 - Agreeing terms of reference for delivery
 - Set out governance and reporting through the local authority SEND improvement Board and LLR Children and Young People's design Groups.
 - Seeking sign-off from all partners governance boards.
 - Identified leads for each of the 13 actions in year one – prioritising those actions to support the accelerated action plan
 - Establishing a rotating Chair amongst partners for the delivery group.

- An easy read version will be developed to support children, young people and families to understand the work and opportunities to engage further with delivery of the strategy.

3. Recommendations

- It is recommended the commission acknowledge the feedback from the engagement on the Joint SEND Commissioning Strategy, included at appendix B.
- It is recommended the commission acknowledge the action plan for year 1 at appendix C, drawing on feedback on which actions are most important to people responding to the engagement.
- It is recommended the commission acknowledge the changes to the strategy, set out at appendix D.
- It is recommended the commission acknowledge the proposed governance structure, set out at appendix E.
- It is recommended the commission support the strategy being published online on the Council's website, content set out at appendix A.

4. Supporting information including options considered

Background

- A joint SEND commissioning strategy has been developed across Leicester, Leicestershire and Rutland, covering the work of the three Clinical Commissioning Groups (CCG's) and Local Authorities.
- The strategy identifies a common vision across Leicester, Leicestershire and Rutland *"we will work together across Leicester, Leicestershire and Rutland to improve the outcomes for children and young people with SEND"* and 7 priorities to address over the coming 3 years.
- The strategy has been through engagement over a 7-week period with 82 responses received via an on-line survey and some additional feedback via presentations to a range of groups and meetings.

Who responded to the survey?

- Respondents were asked to identify which group they fell into; the following were recorded:
 - Child or young person (31%).
 - Member of staff supporting a child with SEND (29%).
 - School representative (18%).
 - Various other groups (22%).
- Respondents were from the following local authority areas:
 - Leicester – 17 respondents.
 - Leicestershire – 39 respondents.
 - Rutland – 5 respondents.
 - Other – 7 respondents.

What changes have been made as a result?

- Many, varied comments were received on the strategy. The majority were supportive of the priorities and actions. Some comments received were not relevant to the joint commissioning strategy but have been shared with partners to consider in their wider SEND work. Some comments were general observations or ways of working e.g. the on-going need to include children and young people in our work or the need to ensure we communicate well with families. These General comments have formed cross cutting themes that will be considered for each piece of work. Some comments were directly relevant to the strategy and have resulted in changes to the document. These latter set of changes are summarised in appendix D.
- A number of comments were received in relation to transition into adulthood. This is an identified priority in the strategy currently, with a proposal being drafted for a Leicester, Leicestershire and Rutland (LLR) approach to co-ordinating transitions work. It is proposed that the feedback on this section is fed into the development of an LLR transitions approach and that this is the delivery mechanism for this priority.

What does the action plan commit us to?

- The action plan was part of the engagement, asking for views on whether we had the right actions and asking respondents to actions in rank order of priority. The resulting rank order has been used to set out which actions are to be tackled in year one and which are identified for years 2 and 3.
- Appendix C contains the proposed action plan for the first year. Feedback on the strategy included requests to ensure there were measures in place to track progress, to identify the current position and the position we would like to be in, and the steps needed to take us there. These are all contained in the action plan as well as a new section in the strategy titled 'measuring our progress'.

What are the next steps?

- The strategy has been approved across the partner organisations. Once approved by all, it will be published on the City Council website as a web hosted document. There will be communications to formally launch the strategy and plan across all key stakeholders. There is intention for an annual commitment (action plan) and an annual summary of progress to be published on the website to allow for contributors and other interested parties to track progress.
- The SEND Joint Commissioning Delivery Group will ensure delivery of the actions in accordance with the year 1 action plan. This group will be overseen by the Joint Strategic Planning and Transformation Group, reporting into the Children and Families Strategic Leadership Group. The SEND joint commissioning delivery group will also report into local SEND management arrangements.
- The proposed governance structure is set out in appendix E.

5. Financial, legal and other implications

Financial implications

There are no direct financial implications arising from this report.

Martin Judson, Head of Finance

Legal implications

The findings of the consultation are appended to the report, summarised within, and should form part of the final consideration. Any data sharing with Leicester, Leicestershire and Rutland partners should be underpinned with appropriate data sharing agreements.

In respect of any future procurements which may be jointly commissioned with Leicester, Leicestershire and Rutland Partners, early legal and procurement engagement should be sought to advise on the model and ensure compliance with the Public Contract Regulations 2015 (as amended) and the Council's Contract Procedure Rules. Any collaborative working will need to be underpinned with appropriate agreements to capture responsibilities of contract management, decision making and governance of the service contract and ensure economies of scale.

Mannah Begum, Principal Solicitor (Commercial)

Climate Change and Carbon Reduction implications

Whilst there are limited direct climate change implications associated with this report, it should be noted that the council has an important role to play in addressing carbon emissions relating to the delivery of its services, and those of its partners, including through its commissioning activities. Carbon emissions from commissioning and delivery of services should be managed through use of the council's sustainable procurement guidelines, and by encouraging consideration of opportunities for reducing emissions through use of sustainable travel, efficient buildings and other measures where practical.

Aidan Davis, Sustainability Officer

Equalities Implications

When making decisions, the Council must comply with the Public Sector Equality Duty (PSED) (Equality Act 2010) by paying due regard, when carrying out their functions, to the need to eliminate unlawful discrimination, harassment, victimisation and any other conduct prohibited by the Act, to advance equality of opportunity and foster good relations between people who share a 'protected characteristic' and those who do not.

In doing so, the council must consider the possible impact on those who are likely to be affected by the recommendation and their protected characteristics.

Protected Characteristics under the Equality Act 2010 are age, disability, gender, reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex and sexual orientation.

The outcomes from the engagement exercise have led to the strategy being revised and these being fed into the proposed action plan for year 1, along with further areas being identified for years 2 and 3.

Whilst the SEND Strategy is a high-level overarching document, it is recommended that Equality Impact Assessment (EIAs) are carried out as appropriate on identified areas within the action plan, for example changes in policy/practice or service reviews, to ensure any impacts are identified and addressed, and mitigating actions put in place. Further support and advice can be sought from the Corporate Equalities Team.

Sukhi Biring, Equalities Officer

6. Appendices

Appendix A – Updated Strategy (note the final version will be web based).

Appendix B – Summary of engagement feedback.

Appendix C – Action plan.

Appendix D – Changes made to the strategy as a result of feedback.

Appendix E – Proposed governance structure for joint commissioning.

Appendix A – Updated strategy (all links and images to be added)

Special Educational Needs and Disability (SEND)

Joint Commissioning Strategy 2021 - 2024

For Leicester, Leicestershire and Rutland



Image to be inserted

Introduction

Leicester City, Leicestershire County and Rutland Councils and Leicester City, West Leicestershire and East Leicestershire Clinical Commissioning Groups (CCG's) are working together to commission services for children and young people with Special Educational Needs and/or Disabilities (SEND).

Together, we commission a range of provision to meet need. We are working together because a lot of needs across the area are similar and related, and because a lot of our providers are the same. In addition, for some families, funding for care and support comes from several agencies. By collaborating we will improve our combined offer to children and young people, reduce gaps, provide better coordinated services and achieve value for money and sustainability.

This strategy explains how and why we will do this; spells out our aims and objectives; and sets out the action plan to take us there. We see commissioning as a framework to help us work together to better meet need and improve outcomes.

Although this is a joint commissioning strategy for the Leicester, Leicestershire and Rutland (LLR) area, this doesn't mean we will do everything together. Some services need to be specific to individual agencies. However, this strategy sets out those areas where joint working is intended and planned for because we believe it will add value to do these things together. In addition, our

single agency action plans support us to achieve where actions are specific to one agency only.

Together, these plans set the roadmap for work until 2024 to ensure we achieve our common vision.

Strategic Context

This strategy forms the first Leicester, Leicestershire and Rutland Commissioning Strategy for Children and Young people with Special Educational Needs and/or Disabilities (SEND). It presents a collective vision and priorities to achieve this, with a focus on working together to bring about improvement.

Good commissioning and effective integration between services lie at the heart of our strategy. These aspects of our approach will increasingly be the focus of the inspections that we will undergo. The Code of Practice (COP) 2015 for SEND sets out the commissioning responsibilities across partners and the expectation that joint working and planning occurs, and we will continue to follow this Code in delivering the strategy set out here.

Each Local Authority has its own SEND strategy and local offer. Alongside this, the commissioning strategy sets out the framework and resources to make this happen. The different strategies and documents produced by each agency and their relationship to this Joint SEND Commissioning Strategy are listed here <link>.

As the public sector continues to experience financial challenge, a key objective of this strategy is to ensure that

we use effective commissioning to make sure our services work well for children and families, provide positive impacts and value for money and are sustainable.

By working together as agencies, we will be able to see the cumulative effect of the changes we put in place and this will allow us to assess the impact of our joint approach on the system and services that we all use (shared markets). This is a key approach to managing risk through change.

For children, young people, families and carers, having agencies work together will help them to navigate an often-complex system of support. By aligning and understanding each other's worlds, we can support families holistically and ensure that every child can reach their full potential.

What is commissioning?

Commissioning is a way of understanding need, planning a response to meet this need and reviewing the effectiveness of action taken. It is often viewed as a cycle (you keep going around to drive improvement). It is commonly described as having 4 stages which are described in more detail here [<link>](#)

Our vision, principles and values

Through our services we want to remove barriers to opportunity, to improve equality of access and to provide care and support to enable children to enjoy and achieve life to the maximum of their potential. We must do this through the best use of our available resources, spending

wisely to achieve greatest impact. We recognise this is best achieved through supporting independence, choice and personalisation.

We will know that we have achieved this when children, young people and families tell us this is the case; when we see improvements in outcomes on a par with other, similar areas; and when we are confident that the mix and quality of provision meets the diverse needs of our children and young people.

Each local area within Leicester, Leicestershire and Rutland has their own vision for children and young people with SEND, commissioning effectively is one of the tools to help achieve these visions.

Our collective vision for Leicester, Leicestershire and Rutland is:

'we will work together across Leicester, Leicestershire and Rutland to improve the outcomes for children and young people with SEND'

Principles

We will make sure that the commissioning decisions we make are based on a sound evidence of what children, young people and families need and on our analysis of what works to best meet those needs, within our available resources. We will analyse the real impact of services before planning any change, and we are committed to

changing services that do not provide the quality of support that we know people want.

To ensure that services are of the quality that we expect, we will monitor, and quality assure them while they are being delivered.

We will work with children, families and young people to evaluate services and to plan change using participative and co-productive methods.

Aims, objectives and priorities

Across the local area we have agreed a common aim, objectives and priorities to support achievement of our vision. These draw on other information contained in our strategy including what we know about local needs and outcomes.

Aim

Across the Leicester, Leicestershire and Rutland area, we aim to use our funds in the best possible way to bring maximum impact to as many eligible children and families within the available resources.

Objectives

We will:

- commission wisely: we will look at quality as well as cost when commissioning, look at what is coming and plan for this in advance

- commission together: examine our priorities for commissioning, look at opportunities to align work or jointly commission, particularly where we're buying the same or similar provision. We will include children, young people and families in commissioning and make sure they have a voice in our reviews of provision.
- target our commissioned activity: We will offer support or services to those who most need it or where there is greatest likelihood of it preventing an escalation of need.

Priorities

Our priorities are broadly formed around the commissioning cycle and will be addressed in partnership across Council's and the CCG's:

1. Build on our understanding of need and demand
2. Plan to meet statutory need within available resource, forecast for the future and prevent escalation
3. Quality assure our provision and contracts
4. Examine how we can provide greater flexibility and tailored packages of support
5. Align our services with those for adults, to prepare young people for adulthood
6. Develop our joint working and governance approaches
7. Jointly review our existing provision to ensure it meets needs and provides good quality support

Measuring our progress

We will use an action plan, prioritising actions according to feedback received through engagement on this strategy. Each action sits alongside a statement of 'where do we want to be' and the steps to get there. The action plan for the year ahead can be found here <link>.

Collectively, these actions will ensure progress is made against our priorities.

Local information

There are around 22,000 children with SEND in the Leicester, Leicestershire and Rutland area with a wide range of needs.

For more information about children and SEND provision in the area, click here <link>

Current joint working

The agencies signed up to this strategy are already working together in a number of areas to bring about positive change through integration and collaboration. Details of current joint work can be found here <link>

Future direction

We know there is more we could do and more we could tackle jointly. Our priorities form the basis for our action planning and broadly follow the commissioning cycle. Many of the changes to provision contained in the 'doing' phase of commissioning will be driven by a deeper

understanding of the issues faced and the success of service responses and from the reviews of specific areas of provision.

We have developed action plans for each priority, these are available here <link>.

Engagement and co-production in commissioning

We will involve children, young people, families and carers to plan and review services, taking a co-production approach where possible. More details can be found here <link>

Governance and accountability

This strategy is owned by the three Councils in Leicester, Leicestershire and Rutland and the Leicester City, West Leicestershire and East Leicestershire CCG's. More details about how it will be governed can be found here <link>

Glossary

CCG

The Clinical Commissioning Group – This public agency is part of the NHS, responsible for commissioning most of the hospital and community health provision.

Local Authority

Local Council for that area with legal responsibility for a range of service provision.

LLR

Leicester, Leicestershire and Rutland – the area covered by this strategy, formed from 3 different local authority footprints.

SEND

Special Educational Needs and/or Disabilities – a term used in many of the legal and policy papers referring to children with additional needs.

Domiciliary Support

Care and Support in your home, often referring to personal care e.g. washing, dressing, feeding etc.

Universal Services

Services that are offered to all children and young people, regardless of the level of need they have. A good example of this is school places – all children are entitled to access school within certain age brackets.

Targeted Services

Services that are targeted at children that may need additional support to access provision or who may need services specifically designed to meet their needs.

Specialist Services

Services for children with severe or complex needs, usually accessed following an assessment of that need.

Shared Markets

Where more than one agency uses the same provider(s) to deliver a service

Commissioning

A process of analysing, planning, doing and reviewing the support on offer to improve outcomes

Co-production

Working with those in receipt of services to design the provision they need

Local Offer

The services and support on offer to people in that area, including any criteria for access

Linked Pages – these will be pages on the website, the links in the text above will take you to them

What is commissioning?

Commissioning is a way of understanding need, planning a response to meet this need and reviewing the effectiveness of action taken. It is often viewed as a cycle (you keep going around to drive improvement). It is commonly described as having 4 stages:

Analyse

Understand the need, the numbers of people affected, the reasons for this, how we address this now (or identification of a gap if we don't), how we might do this better in the future.

Plan

What changes do we want to bring about, what are the steps to doing this, who needs to be involved, what are the likely impacts and timescales?

Do

The implementation stage; making the plans real. Sometimes this will involve buying new services or ending existing ones. At other times the approach might be to do things differently or to hold different conversations.

Review

This stage is where we look at how we do things or a change that we made and ask whether it is the best way to achieve the results we want. This could include an evaluation of a new service or a review of a whole area of provision.

Fig 1 The IPC Commissioning Framework



Commissioning is often shown as a cycle like this version from the Institute of Public Care (IPC).

By following this cyclical approach, agencies can gain a deeper understanding of the issues, plan for change that is most likely to have the desired impact, implement effective changes and monitor the impact on the person using a service, the service providers and wider partners.

Each of the partners use commissioning as a technique to improve outcomes currently. This strategy provides an opportunity for agencies to join together and do this collectively with identified areas to work on over the next 3 years.

Joint Commissioning

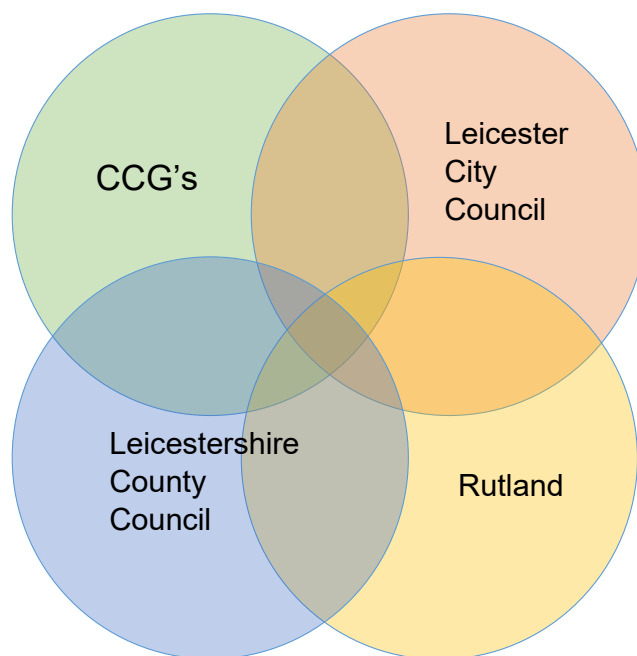
When we talk about joint commissioning, this can cover a range of approaches to working together to analyse, plan, do and review. Joint commissioning can include:

Approach	Meaning	Example of how this could work
Aligning our services or funds	Working together as agencies to ensure our services create a seamless system. Each agency makes their own arrangements to provide the necessary services, but this will be worked through with partners to ensure it fits with the wider needs of the system and with the strategic plan of all partners.	All agencies identify a growing number of children with SEND. They work together to understand the needs of these additional children and the services across the system that will be required. They make plans together to increase the services they offer or to do things differently to meet this need in a new way. They work together to make it happen.
Pooled budgets	A shared fund set up by 2 or more partner agencies. An agreement is in place to define how much each party will put into the fund and what the funding can and can't be used for.	The councils and CCG's decide to create one 'pot' of money to fund placements for children whose needs cannot be met through mainstream services. This pot of money combines some spend from councils on social care and education and Continuing Care funding from the CCG. All the partners agree the level of contribution they will make to the pot at the start of the year. The pot of money is used to fund the needs of children meeting the criteria for the fund throughout that year.
Lead agency	One agency takes the lead on delivering or contracting out a service on behalf of another. There will be an agreement in place to set out what the lead agency should do and to cover the funding arrangements.	One council agrees to contract for all the short breaks provision on behalf of all three local authorities. There is an agreement that states how this should be run and how much money will be paid to the council doing this on behalf of the others.
Integrated teams	Teams of people that are funded or employed by more than one agency but that work as a single team. They deliver	A team of speech and language therapists (funded by the CCG) are based in the same building and share the same manager as a team of specialist teachers for children with

Approach	Meaning	Example of how this could work
	services that meet the responsibilities of both agencies.	hearing and/or visual impairment (funded by the council). They work as one team although their jobs are different.

Some joint commissioning will involve the local authorities working together, some will involve the CCG and local authorities. Some will take place across the whole of Leicester, Leicestershire and Rutland area, others may cover just one locality.

All of the overlapping areas in the diagram below represent areas of joint commissioning.



Key facts about children with SEND in Leicester, Leicestershire and Rutland

How many children have SEND in Leicester, Leicestershire and Rutland?

In April 2020 there were nearly 22,000 children with SEND in Leicester, Leicestershire and Rutland. This makes up 13.7% of our overall school population which is just under the national average of 14.8%. Children in primary school are most likely

to have support for SEN and we know that nationally the numbers peak at age 10, declining through secondary education. The numbers of children with an Education, Health and Care Plan (EHCP) continues to rise as they journey through school.

What school provision do children access?

Most children receive an education in a mainstream school, with only 2,313 children across the area receiving education in a Special School. There are 12,142 children in primary schools with SEND from the Leicester, Leicestershire and Rutland area and 7,513 children in secondary schools.

What are the main reasons for a child receiving support for SEND?

The primary needs of children with SEND across the area are:

Primary Need	Number	% of Total	National Average
Specific LD	2,477	11.3%	12.5%
Moderate LD	6,547	29.8%	20.4%
Severe LD	836	3.8%	2.7%
Profound LD	175	0.8%	0.9%
Social, Emotional and MH	3,543	16.1%	17.1%
SLC needs	4,087	18.6%	21.7%
SEN Hearing	391	1.8%	1.8%
SEN Visual	355	1.6%	1.1%
Multi-Sensory	55	0.3%	0.3%
Physical Disability	664	3.0%	2.9%
Autistic Spectrum	1,630	7.4%	11.0%
Other Difficulty	732	3.3%	4.4%
No specialist assessment	474	2.2%	3.3%
Total	21,966	100%	100%

What do children, young people and families tell us about the services they receive?

We know that we are delivering services in the local area that make a huge difference to the lives of children, young people with SEND and their families and carers. We also know that there are areas for improvement in our provision, identified by children, young people and families and highlighted through Joint Ofsted and Care Quality Commission (CQC) SEND inspection findings for Leicester and Leicestershire. Key areas for us to work on include:

- Strategic planning to improve outcomes in Leicester and Leicestershire
- Quality of Education Health Care Plans in Leicester and Leicestershire
- Assessment of Children and Young People's Social care needs in Leicester City
- Joint commissioning to support health needs post 19, the development of a joint commissioning strategy for SEND and a co-ordinated approach to preparing for adulthood in Leicester and Leicestershire

What do we commission to meet this need?

We commission a wide range of universal, targeted and specialist services to meet the needs of children with SEND. Many of the services are commissioned by Council and CCG's individually but they are delivered as integrated pathways to help children, young people and families experience joined up support. Some services are delivered by Councils themselves, and others are commissioned from independent or voluntary and community organisations.

Details of services commissioned by partner agencies and the level of funding committed to each type of provision can be found here [<link>](#)

It is important to note that schools and further education facilities are increasingly acting as commissioners of services in order to meet the varied needs of children attending. It is expected that the work included in the delivery of this strategy will start to map this commissioning activity in schools and in further education and, that we will involve them in discussions about future provision.

Parents and carers are also increasingly acting as commissioners through the use of personal budgets. Here the Council or CCG makes funding available to parents and carers so that they can source their own support to meet the child's individual need. This approach can help to increase choice and support families in developing bespoke, personalised packages of care. These personal budgets are agreed by the relevant teams in the Council or CCG in line with each agencies agreed process.

More information about children and young people in Leicester, Leicestershire and Rutland can be found in the Joint Strategic Needs Analysis document that each area produces. Links to the latest versions are can be found in our list of key documents here <link>.

Current joint working

The four agencies commission a range of provision to support children, young people and families with SEND. Details of these services can be found here <link>. These services combine to offer a range of support and to improve outcomes for this group. There are increasing amounts of joint commissioning and partnership working across the agencies, including:

- A Joint Planning and Transformation Group for Children has been established to identify and deliver on joint commissioning opportunities for children's services across Leicester, Leicestershire and Rutland.
- The Joint Solutions Panels between each of the Council's and CCG reviews the complex needs of children and young people where there is a need for joint co-ordination and personalised funding.
- Council and CCG representatives attend the monthly in-patient Mental Health bed management meeting working with case manager from specialised commissioning to plan and support discharge of vulnerable children who often have SEND.
- Joint CCG and Council senior officers have responsibilities across the Transforming Care (TCP) agenda, delivering service improvement for all age learning disability and autistic spectrum disorder services to ensure community care and reduce in-patient admissions
- Leicester, Leicestershire and Rutland Future in Minds (FIM) Board having oversight of delivery of the Mental Health Transformation Plan
- The SEND improvement boards are multi-agency forums for Councils and CCG's to improve provision, activity and outcomes. Two boards cover the Leicestershire and Rutland and Leicester with the Councils and the CCG present on each. Robust plans to oversee change are monitored at the boards and these provide a regular, joint forum to discuss issues and barriers and to collaborate
- Local authorities and the CCG have also collaborated through work on supporting the transition to adulthood with examples of joint plans or governance arrangements to support this.
- The regional commissioning group for children and young people, bringing commissioners from Councils across the region together to discuss issues arising and the common market. The group has recently collaborated on establishing a regional dashboard of placements, giving access to data on where placements have been made and

the cost of these amongst other data sets. The group is currently working on sharing quality assurance information to improve the intelligence held by each Council on the quality of placements made.

Engagement and co-production in commissioning

We will involve children, young people, families and carers in all of our work to plan and review services. Wherever possible, we will take a co-production approach. The way in which we do this will vary for each piece of work but there are some key drivers to achieving this.

We will work with our engagement forums to people that use our services to understand the issues and to seek views on how to commission our services. These include:

- Big Mouth Forum (Leicester City)
- Parent Carers Forum (Leicester City)
- Leicestershire Parent and Carer Forum
- Rutland Voice
- Healthwatch

We want to work together with children, young people and families to help us understand their experiences of living with SEND and using our services. We will work with them to gain insight into services from their points of view and to work together to plan services for the future that represent the best use of the resources we have. Where solutions cannot be found, for example when finances don't allow or there are legal limitations to what we can do, we will use this engagement to help people understand the situation.

Governance and accountability

This strategy is owned by the three Councils in Leicester, Leicestershire and Rutland and the Leicester, Leicestershire and Rutland CCG's.

It was developed by a working group, reporting into the Children's Planning and Transformation Partnership. The Partnership is a subgroup of the Leicester, Leicestershire and Rutland Children and Young People's Senior Leadership Group, which in turn reports to the Sustainability and Transformation Partnership (STP) for Children and Young People.

It is proposed that a joint commissioning board across Leicester, Leicestershire and Rutland will implement the action plan, tackle any issues or barriers arising and establish task and finish groups as needed.

The work of the board and progress on the delivery plan will be monitored by the Planning and Transformation Partnership and ultimately by the Senior Leadership Group.

Each agency will have its own reporting routes including joint commissioning boards and improvement boards etc. These will also help to assure the work and to keep a check on progress made.

The SEND Code of Practice <link> sets out specific roles and responsibilities for joint commissioning. These are summarised in the table 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 need’s 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
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.	CCGs will be held to account by NHS England. 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. 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.
NHS England	NHS England commissions specialist services which need to be reflected in local joint commissioning	Secretary of State for Health

Agency	Key responsibilities for SEND	Accountability
	arrangements (for example augmentative and alternative communication systems, or provision for detained children and young people in relevant youth accommodation).	
Healthwatch	Local Healthwatch organisations are a key mechanism for enabling people to share their views and concerns – to ensure that commissioners have a clear picture of local communities’ needs and that this is represented in the planning and delivery of local services. This can include supporting children and young people with SEN or disabilities.	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.
Maintained nurseries and schools (including academies)	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. 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.	Accountability is through Ofsted and the annual report that schools have to provide to parents on their children’s progress.
Colleges	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.	Accountable through Ofsted and performance tables such as destination and progress measures.

Commissioned services across health, education, social care and public health

The list below details the provision that each agency is funding or directly delivering, correct as of August 2020. These are services primarily focused on children with SEND but some reference is also made to universal provision for all children, young people and/or families. It should be noted that this does not include services directly commissioned by schools and colleges or by NHS England.

Table 1: Services commissioned by councils

Services commissioned by Councils	Spend in the area (approximate)
Education placements	£116.9 million
Education psychology	£2.7 million
Short breaks/respite	£2.3 million
Specialist nursery provision	£2.4 million
Assessment and support teams	£2.3 million
Specialist teaching service	£6.6 million
Domiciliary support	£444k
Social work provision (for disabled children)	£1.1 million
0-19 healthy child provision (health visitors, school nurses etc for all children)	£16.2 million
Early help (for all children)	£18.5 million

Table 2: Services commissioned by councils

Services commissioned by CCG's	Spend in the area (approximate)
Child and Family Support Service (CAFSS)	£1.8 million
Community Paediatric Medical Services	£4.3 million
Children's Continuing Care 0-18	£2.7 million
Adult Continuing Health Care (CHC) 18+	£200k
Speech and Language Therapy	£1.5 million
Children's Physiotherapy	£1.25 million
Children's Occupational Therapy	£1 million
Children's Community Nursing	£364k
CAMHS Triage and Access	£200k
CAMHS Eating Disorders	£868k
CAMHS Outpatients City and County	£7.97 million

Services commissioned by CCG's	Spend in the area (approximate)
CAMHS LD Team	£1.1 million
CAMHS Crisis Team	£1.35 million
CAMHS PBS	£108k
Early Intervention	£380k
Community equipment loans across all organisations	£195,000

Linked strategies and documents

There are a range of linked strategies and documents held jointly or by individual agencies. These linked documents and their relationship to this commissioning strategy are listed below.

Strategy/Document	Relationship to this commissioning strategy	Link
Leicester City All Age Commissioning Strategy	Covers commissioning intentions for all age services in the City only from the Local Authorities position.	https://www.leicester.gov.uk/media/186505/all-age-commissioning-strategy-2020-2025.pdf
Leicester City All Age Market Position Statement	A statement for the market (providers of services) on the anticipated direction of travel and key messages	https://www.leicester.gov.uk/media/186504/all-age-market-position-statement-2020.pdf
Leicester City SEND Strategy	The city's strategy for SEND services	https://www.leicester.gov.uk/media/186416/strategy-for-supporting-children-and-young-people-with-special-educational-needs-and-disabilities-send-2017-2022.pdf
Local Offer Leicester City	Details of services and support available to children with	https://families.leicester.gov.uk/local-offer/

Strategy/Document	Relationship to this commissioning strategy	Link
	SEND and their families	
Leicester City Joint Transitions Strategy	A strategy for the city, looking at how best to improve the journey into adulthood for young people	https://www.leicester.gov.uk/media/185659/the-joint-health-social-care-and-education-transitions-strategy-2019-2022-plain-text.pdf
Leicester City Early Help Strategy	The city's strategy for providing early help and support	https://www.leicester.gov.uk/media/186713/leicester-early-help-strategy-2020-2023.pdf
Leicester City CYP JSNA	A Joint Strategic Needs Analysis (JSNA) looking at the needs of children in Leicester City	https://www.leicester.gov.uk/your-council/policies-plans-and-strategies/public-health/data-reports-information/jsna/cyp-jsna/
NHS Long-Term Plan (CYP pages 45-54)	The Government's long term plan for NHS provision	https://www.longtermplan.nhs.uk/wp-content/uploads/2019/01/nhs-long-term-plan-june-2019.pdf
Leicester City Joint Health and Wellbeing Strategy	A health and wellbeing strategy for all Leicester residents,	https://www.leicester.gov.uk/media/177755/leicester_s_joint_health_and_wellbeing_strategy_2013-2016.pdf

Strategy/Document	Relationship to this commissioning strategy	Link
	including children and young people.	
Leicestershire JSNA (CYP Physical Health)	A Joint Strategic Needs Analysis (JSNA) looking at the needs of children in Leicestershire	https://www.lsr-online.org/uploads/children-and-young-peoples-physical-health.pdf?v=1590599655
Leicestershire JSNA for children with SEND	A specific joint strategic needs analysis focusing on children with SEND	Awaiting publish
Leicestershire Joint Health and Wellbeing Strategy	A health and wellbeing strategy for all Leicestershire residents, including children and young people.	https://www.leicestershire.gov.uk/sites/default/files/field/pdf/2016/10/11/Leics%20JHWS%202017-22v2.pdf
Rutland JSNA	A Joint Strategic Needs Analysis (JSNA) looking at the needs of children in Rutland.	https://www.rutland.gov.uk/my-services/health-and-family/health-and-nhs/joint-strategic-needs-assessment/

Strategy/Document	Relationship to this commissioning strategy	Link
Rutland JSNA for children with SEND	A specific joint strategic needs analysis focusing on children with SEND	Awaiting publish
Rutland Health and Wellbeing Strategy	A health and wellbeing strategy for all Rutland residents, including children and young people.	https://www.rutland.gov.uk/my-services/health-and-family/health-and-nhs/health-and-well-being-strategy/
Rutland SEND and Inclusion Strategy	A strategy for SEND for Rutland Council	https://search3.openobjects.com/mediamanager/rutland/fsd/files/send_and_inclusion_strategy_-_updated_september_2019_-_pdf.pdf
Future in Minds Transformation Plan	Plan for delivering a range of emotional, mental health and wellbeing services	https://www.leicestercityccg.nhs.uk/my-health/childrens-health/future-in-mind-plan-mental-health-children-young-people/future-in-mind-transformation-plan-2018-2020/
Maternity Transformation Plan	A plan for transforming maternity services	https://www.leicestermaternity.nhs.uk/betterbirths/

Strategy/Document	Relationship to this commissioning strategy	Link
Leicester, Leicestershire and Rutland Learning Disability Strategy	A strategy for services and support for people with a learning disability	https://www.leicester.gov.uk/media/186869/joint-health-and-social-care-learning-disability-strategy.pdf
Leicestershire Preparing for Adulthood Strategy	A protocol for professionals working with young people with SEND	https://www.leicestershire.gov.uk/sites/default/files/field/pdf/2019/2/1/Preparing-for-adulthood-strategy.pdf
Leicestershire Whole Life Disability Strategy	A whole life approach to supporting people with disabilities	https://protect-eu.mimecast.com/s/mKpKC83OVSOQLInuwJsUm?domain=leicestershire.gov.uk
Leicestershire SEND and Inclusion Strategy	A strategy for SEND for Leicestershire County Council	Awaiting publish

Appendix B – summary of engagement feedback

Introduction

A statutory consultation was carried out between 10th December 2020 – 31st January 2021 to gather feedback from stakeholders on the draft Joint SEND strategy.

The 3 Councils in Leicester City, Leicestershire, and Rutland along with the 3 Health Commissioners (Clinical Commissioning Groups) East Leicestershire and Rutland, West Leicestershire and Leicester City are working together on a joint strategy. These partners are working together to commission services for children and young people with Special Educational Needs and/or Disabilities (SEND). These organisations are working together as there are several needs across the area which are similar and related, and many of these services are the same.

The consultation was carried out to seek views on the strategy and action plan to ensure the strategy fully reflects the views of those represented, including service providers and individuals in receipt of services commissioned by the organisations listed above.

This feedback will inform the final version of the strategy and influence which priorities and actions will be concentrated on first. This report details the findings and analysis from the recent survey.

Methodology

Each local authority and CCG area completed their own promotion of the survey. A detailed communication plan was produced by each authority and partners to ensure the survey was promoted to wider stakeholders.

Emails and newsletters:

Emails were circulated to individuals both internally and externally, including:

- Mainstream schools & colleges
- Special schools
- Early years settings
- Independent school providers
- Short break providers
- Employers of young people with SEND
- Staff from all 3 local authorities and across the CCG

Forums:

Presentations were given to the following groups:

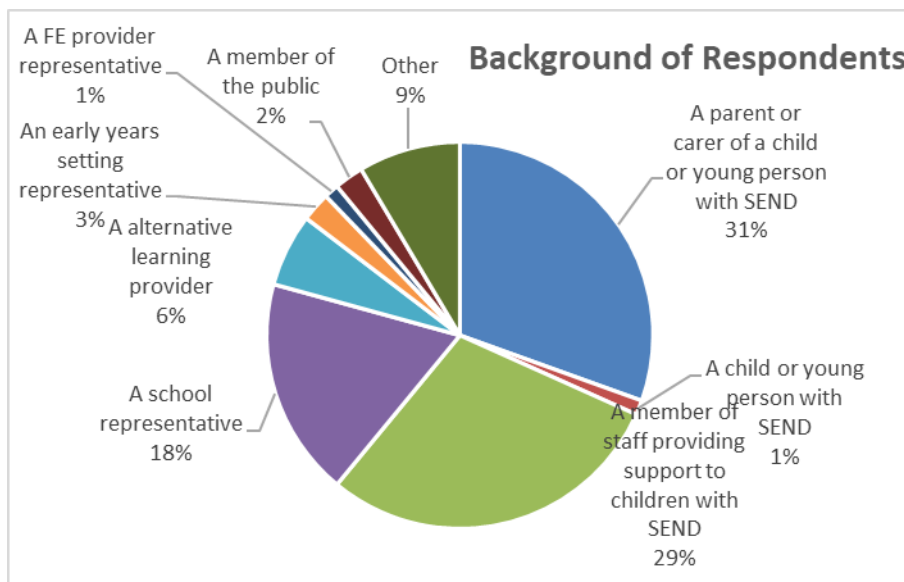
- Parent carer forum
- Big Mouth forum
- FE colleges meeting
- CLASS
- ISP event
- Schools forum

During all phases of promotion individuals were introduced to the strategy, explained the need to consult and provided with the link to the survey.

Survey:

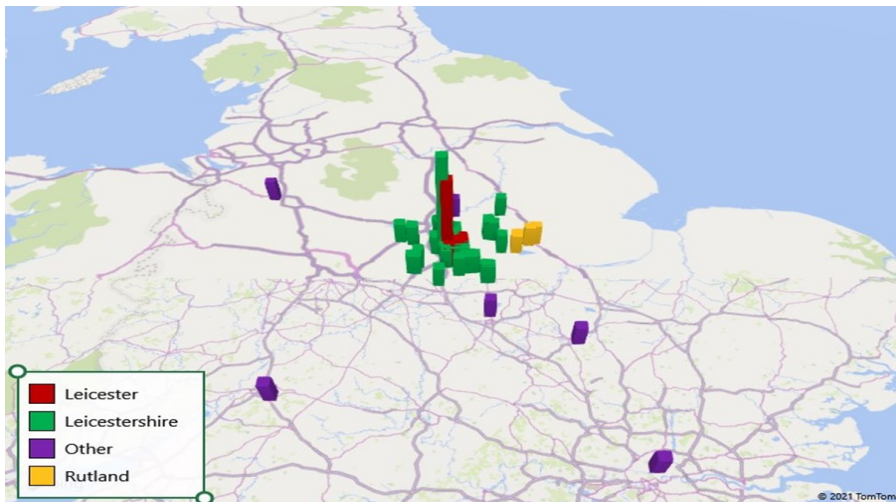
A survey was developed to understand what individuals' views were towards the joint SEND strategy. A total of **82 responses** were received, all of these were via the online platform.

Of those respondents they were asked to identify themselves for example, a member of the public (parent, young person) or professional. Below is a breakdown of response groups:



Respondents were also asked to provide their postcode on an optional basis to provide an understanding of the areas who most took part in this survey. 75 respondents provided a postcode representing which areas across Leicester, Leicestershire & Rutland took part in the survey the most:

- Leicester – 17 respondents
- Leicestershire – 39 respondents
- Rutland – 5 respondents
- Other – 7 respondents



Headline findings

The survey was broken down into several areas:

- Comments on vision and priorities of strategy
- Ranking each priority's actions in order of priority
- Commenting on actions
- Commenting on overall strategy

Comments on vision and priorities of the strategy

Respondents were asked for their feedback on the vision of the strategy and to rank and comment on future priorities.

Vision

There were 49 responses on the vision of the strategy. The majority of respondents agreed with the vision with many stating that *"it is a really good idea to work together to commission services."* Others also stated it

will also help when children transfer within the county and will mean consistency across services.

Ranking of strategy priorities

Although most respondents were pleased with the list of priorities a common theme was that some of the priorities (F, A, B, E) are not as clear as others. Some actions are very general and not specific, as the actions do not give information on what services are being referred to. The strategy should be using SMART objects to measure these actions. It was also stated that priorities should be considered against the full 'as is' status.

The below table provides the most to least ranked priorities:

Item	Ranking
E (Align our services with those for adults, to prepare young people for adulthood)	5.78
C (Quality assure our provision and contracts)	4.15
G (Jointly review our existing provision to ensure it meets needs and provides good quality support)	3.85
B (Plan to meet needs within available resource, forecast for the future)	3.49
A (Build on our understanding of need and demand)	3.43
D (Examine how we can provide greater flexibility and tailored packages of support)	2.61
F (Develop our joint working and governance approaches)	2.09

The below table details suggestions and questions regarding the overall strategy and priorities:

Suggestions/questions
Will this reduce CAMHS waiting times, reduce starting the process again if families move from one area to another
Joint working approaches and preventing escalation will require that NHS clinicians provide assessments and reports for Tribunal Appeals
Support needs for individual children should be clear and detailed and regarding, regardless if they have an EHCP
Compatibility of provision across areas so those schools living on boards can access support across borders

Front line staff need to be trained in SEND and Mental Health awareness
Strengthen links with schools particularly mainstream settings and use consistent language regarding SEND
Ensuring education providers can meet the demands with EHCPs and offer financial support for additional resources
Train school SENCO's, so there is a clear & concise pathway to support or request for assessment.
More guidance and correct information available to children and parents/carers who use services
Commission expertise with a holistic approach in all that sought in supply chain. Follow models that work and work with both neuro typical and SEN that are experienced. Evaluate, learn and change what is not working, before it is too late.

Ranking and comments of priority actions

Throughout the survey there were a range of common themes as stated below:

- Lack of knowledge and services in autism and FASD there should be more focus on these areas
- More joint working between education and health, need to overcome language divide
- Focus on bespoke models and packages for individuals
- Better provisions in specialist schools, but not in mainstream schools
- Early preparation (14 years onwards) for adulthood is vital for planning outcomes, fear of children leaving education and receive no support, more working between education (especially post 16) and health and social care
- EHCPs need to include section on health, mental health and social care
- Work with parents, carers and young people to understand their views

Priority 1: Build on our understanding of need and demand

There were on average 74 responses to this part of the question. Below are how these actions were ranked:

Priority 1	Average Rank
E) Engage with children, young people, and families to understand what their priorities are in terms of service provision / improvement.	1.76
C) Ensure we have projections for service need per year group to support allocation of school places and key health and social care provision.	3.34
G) Gather information on cases where a standard service response has not met need. Build an evidence base to show where changes are needed.	3.73
B) Review the information gathered in each agency in relation to outcomes, looking for ways to improve practice and to provide consistent data across the area.	4.03
A) Ensure that information collated on placement/service access is captured on systems to allow for easy reporting and analysis. This should include placement cost and details of those refused a service because it was full.	4.20
D) Make use of the regional information gathered on education placements to ensure this feeds into decisions and spend on placements.	5.07
F) Develop a commissioning dashboard of key information to be reviewed frequently across the area.	5.72

The common theme of priority 1 was that it is extremely important to gather views of children, young people, and families to decide what the focus of commissioning should be. There was also an emphasis on considering the child's educational and emotional needs above all else.

Priority 2: Plan to meet needs within available resource, forecast for the future

There were 75 responses to this part of the question. Below are how these actions were ranked:

Priority 2	Average rank
A) Jointly plan for education, health, and social care provision to best meet the volume and type of need in coming years.	1.40

Priority 2	Average rank
B) Plan a series of service reviews where we feel that provision isn't currently meeting need or there are opportunities to join up across the area (proposals are listed under priority 7).	1.60

Although many welcomed this priority, many felt that this might be difficult to scope and needs must be met according to legislation and not what resources are available. Feedback also included it not being possible to meet needs within resources, as stated by the Care Act which states resources should be developed to meet need. Work on gaining an understanding from parents of their wants and needs should be undertaken. Forecasting for the future also depends on the quality of data available which may not be obtainable.

Some were left anxious about this priority and felt it contradicted with further priorities in the strategy *"I think this statement could lead to inflexibility and restrictive options. It seems to contradict priority 4 'examine how we can provide greater flexibility and tailored packages of support'."*

Priority 3: Quality assure our provision and contracts

There were 73 responses to this part of the question. Below are how these actions were ranked:

Priority 3	Average rank
A) Ensure a robust quality assurance process is in place for all external service provision. Consider how to hold and share this information across agencies and how to share the load of QA. To include an approved approach to QA for joint funded cases.	1.34
B) Jointly develop a timetabled programme of quality assurance for external provision across the area.	2.03
C) Continue to develop regional approaches to information sharing in relation to quality of placements out of area.	2.63

Many agreed that there should be a focus on quality assurance, should be devised jointly and be consistent. Respondents felt it was important to streamline this process because it is onerous for providers if they are having to account to a plethora of commissioners. Respondents also welcomed this priority as it will help to reduce the amount of out of area placements and provide better value for money.

Priority 4: Examine how we can provide greater flexibility and tailored packages of support

There were 76 responses to this part of the question. Below are how these actions were ranked:

Priority 4	Average Rank
C) Jointly develop a pre, diagnostic and post support pathway for children with Neurodevelopmental needs.	1.97
B) Examine how greater flexibility can be introduced for cases that don't fit with our standard service offer (link to action above).	2.26
A) Review the personal budget agenda across organisations and how this links to SEND.	2.72
D) Look at development of the marketplace for services for young people with ASD.	3.03

Many respondents welcomed this priority and feel it will provide more children with better support. Respondents felt reviewing budgets and having greater flexibility is very important as some budgets currently seems illogical and don't always reach those that need it. Respondents also emphasised using a one style fits all agenda doesn't work and there needs to be a focus on bespoke models.

Many felt that ASD is not the only issue and there should be a marketplace of services for all children with SEND. A respondent also felt that describing ASD as a marketplace was a poor way to describe services for autism, which could be changed to the marketplace must be accountable and have accreditation.

Priority 5: Align our services with those for adults, to prepare young people for adulthood

Respondents felt that priority 5 was very important as reflected to begin with in the rankings. There was only one action point within this priority:

Review our transition/preparing for adulthood plans and approaches, looking for opportunities to work together as a system to improve the transition experience for young people.

Most respondents indicated that more work needs to be done on transitions as there is a fear that many will fall through the gaps. Comments focused on this work needing to be done early and more work between education and health.

Priority 6: Develop our joint working and governance approaches

There were 73 responses to this part of the question. Below are how these actions were ranked:

Priority 6	Average rank
A) Establish an Leicester, Leicestershire and Rutland Joint Commissioning Board for SEND to oversee this action plan	1.96
B) Carry out an audit of commissioning expectations in the SEND COP, looking at what we do now and where we need to do more.	2.25
D) Jointly review arrangements for joint funded cases to ensure roles and responsibilities are clear and appropriate documentation is in place.	2.79
C) Review data sharing arrangements in place to ensure these are fit for purpose.	2.99

Priority 7: Jointly review our existing provision to ensure it meets needs and provides good quality support

There were on average 64 responses to this part of the question. Below are how these actions were ranked:

Priority 7	Average rank
A) Jointly review our approach to high need children and young people, ensuring we are innovative and cost effective in our responses to need.	2.89
B) Jointly review provision for children and young people who have behaviours that challenge to ensure we are able to deliver a comprehensive offer of support, including key workers when needed	3.03

Priority 7	Average rank
C) Examine the health support needed across our educational settings but particularly those with high clinical need children, to ensure our response is effective.	3.06
E) Ensure those children with LD/ASD who are at risk of admission to a hospital setting have a key worker identified.	4.72
D) Jointly review personal care offer / domiciliary support to understand how best to purchase, provide and quality assure.	5.75
F) Jointly review short breaks and respite provision to ensure it best meets need and to clarify who can access.	5.95
G) Jointly review provision at the hospital school to ensure it reflects demand and meets need.	6.42
H) Jointly examine the current Assistive Technology offer and the potential gains in expanding this.	6.87
J) Review services for children with a hearing or visual impairment to look for opportunities for greater collaboration.	7.37
I) Review system and contractual arrangements for CYP in residential schools to ensure they receive hearing, sight and dental checks.	8.37

Many felt that these actions were clear but might be relevant to some and not others. There were comments on there being far too many actions to order by priority, and that they are all equally important. One respondent also questioned “*what happens to the lower priority. Q? versus Q1 of the first year Delivery Plan, Year 2 of the Delivery Plan, or No Longer a priority as if everything is seen as a priority then nothing actually is*”

Final feedback on overall strategy

Overall respondents were pleased with the strategy and felt it was a positive and clear strategy. Respondents welcomed joint working and emphasised the need for consistency throughout all agencies. Feedback included:

- Ensure to use clear, simple language and ensure no one is left out in processes

- Make sure that local authorities really listen to children, young people, and their families
- The strategy needs to involve an audit and an honest review

As previously discussed, one respondent felt that the strategy wasn't clear. They feel it needs to set out what the strategy is trying to achieve. They stated that it doesn't sound like an action plan as there are too many review actions which won't achieve an outcome or an action. They will only result in recommendations.

Comments on groups not reflected

- Missing point of if the strategy is benefiting children, south of County is lacking a local offer
- Not seeing any impact on children, especially if they are in rural areas
- Not enough focus on individuals
- Not enough emphasis on schools, communities & societies being as inclusive as possible to those with SEND

Appendix C – Action Plan

The following sets out proposals for a year 1 action plan, identifying priority actions using the rank order suggestions from respondents as part of the engagement on the strategy. The proposals for year 2 and 3 rankings are listed in the second table and will be more thoroughly scoped as part of the planning for each year. The group may choose to bring in new actions or to re-prioritise the order if it is felt that a current action is dependent on another taking place.

The Joint Commissioning Delivery Group will hold a more detailed action plan with clear steps to be taken, milestones, leads and timescales to enable the Group to monitor progress.

	Action	Where do we want to be?	How will we get there?
1	Ensure we have projections for service need per year group to support allocation of school places and key health and social care provision.	All Councils have data and projections to show the volume of provision needed for their area, but this is also viewed on a Leicester, Leicestershire and Rutland footprint to look at overall trends and shared with health colleagues to inform whole system planning.	<p>We will each share our data on projections for the level of need for future years.</p> <p>This data will collectively form a picture of the changing need and demand on services we anticipate in future years.</p>
2	Jointly plan for education, health, and social care provision to best meet the volume and type of need in coming years.	<p>This data is shared across health partners as well as Council's and informs whole system planning e.g. social care, health and areas other than educational placements.</p> <p>Consideration is given to the sharing of resource, particularly for small cohorts (e.g. developing a specialist service for small numbers across the area) or where there is capacity in one area and demand in another.</p>	<p>Using the data from action 1, we will collectively look at the impact this will have on services across education, social care and health and develop plans to ensure we are ready.</p> <p>We will work with our provider markets (internal and external) to ensure plans involve those delivering services.</p>

	Action	Where do we want to be?	How will we get there?
3	Ensure a robust quality assurance process is in place for all external service provision. Consider how to hold and share this information across agencies and how to share the load of QA. To include an approved approach to QA for joint funded cases.	A system exists for sharing quality concerns or outcomes of quality visits across the Leicester, Leicestershire and Rutland area. An agreed protocol is in place between Council's and CCG's re quality assurance of joint funded placements and the responsibilities/involvement of both parties.	Engage with children, young people and families to ask their views on our QA approach and whether there are additional things they would like us to explore We will share details of how quality checks are carried out currently. We will look at ways to make this more efficient/reduce duplication. We will agree a protocol setting out how we will look at quality collectively in the future, rather than separately.
4	Jointly develop a timetabled programme of quality assurance for external provision across the area.	All agencies have one overall timetable for quality assurance focus, regularly reviewing and updating this as it changes. All agencies to consider whether there are opportunities for joint visits or agreed leads where timescales are similar.	Linked to action 3 above, we will co-ordinate timetables for quality visits or focus that reduces duplication
5	Jointly develop a pre, diagnostic and post support pathway for children with Neurodevelopmental needs.	A proposed pathway model to be proposed following multi-agency involvement by May 2021. Final proposed pathway to then follow engagement process for feedback at system wide groups.	Parent and Carer Forums continue to be involved at all stages of the pathway development CYP and Family engagement of proposed model will take place in line with system wide engagement.
6	Examine how greater flexibility can be introduced for cases that don't fit	To enhance current provision through Joint Assessment Panel / Joint Solutions Panel.	Review current provision with system leads from Health, Local Authority and Personalisation Teams.

	Action	Where do we want to be?	How will we get there?
	with our standard service offer (link to action above).		
7	Review our transition/preparing for adulthood plans and approaches, creating opportunities to work together as a system to improve the transition experience for young people.	Leicester, Leicestershire and Rutland joint system to take this forward as the next joint piece of work, getting to grips with what is needed to improve transition and planning for actions required to make this happen.	<p>We will establish a steering group for transitions</p> <p>We will draft strategy/plan of action for the area</p> <p>We will seek the views of parents/carers/children and young people and other interested stakeholders</p> <p>We will identify what needs doing to improve the transitions experience and the actions needed to ensure this happens</p> <p>Publish strategy and related action plan and governance structure for taking actions forward</p>
8	Establish a Leicester, Leicestershire and Rutland Joint Commissioning Delivery Group for SEND to oversee this action plan	A permanent delivery group is established to ensure delivery of the actions contained in this strategy over the next 3 years.	<p>We will approve terms of reference</p> <p>We will arrange regular meetings to take the work forward</p> <p>We will agree an action plan to ensure work is delivered</p>
9	Jointly review our approach to high need children and young people, ensuring we are innovative and cost effective in our responses to need.	<p>Partners have a collective understanding on a definition of 'high need'.</p> <p>Partners understand the needs of these children and young people and have plans</p>	<p>We will agree on a definition of 'high need' for this piece of work</p> <p>We will take steps to understand the need of these children and young people</p>

	Action	Where do we want to be?	How will we get there?
		<p>to meet these needs where it falls within the remit of their agency.</p> <p>Strategic co-ordination is in place across the system to set out the plan for these children and to monitor effectiveness</p> <p>Clear arrangements for funding are available and understood.</p>	<p>We will understand the support offer available in the area to meet this need</p> <p>We will examine whether there is unmet need, how this could be met and the duties to ensure provision is offered to these children, including funding responsibilities.</p>
10	<p>Jointly review provision for children and young people who have behaviours that challenge to ensure we are able to deliver a comprehensive offer of support, including key workers when needed.</p>	<p>Partners have an understanding of the main impacts of behaviour that challenges e.g. family breakdown, school exclusion etc.</p> <p>Partners have an understanding of what might support in preventing or managing these challenges and what support services already exist for access.</p> <p>Agencies and families are supported with training and understanding around how to prevent and manage these challenges and/or signposted to support agencies.</p> <p>Where necessary, there is a mechanism for escalating concerning cases for additional support to prevent breakdown.</p>	<p>We will look at the impact behavioural challenge can have on children young people, families and the services provided.</p> <p>We will understand the current support offer in the area and best practice from across the country</p> <p>We will identify any gaps in provision or ways in which the system could be strengthened to ensure support is accessed where needed</p>
11	<p>Examine the health support needed across our educational settings but particularly those with high clinical need children, to ensure our response is effective.</p>	<p>CCG funded provision in schools where there is a statutory responsibility to meet the needs of children at that school.</p>	<p>We will discuss with schools and others working in the system to understand current practice and provision</p>

	Action	Where do we want to be?	How will we get there?
		<p>Support to schools wishing to purchase additional support to add to the statutory offer, especially around clinical governance.</p> <p>A good understanding in mainstream schools, likely through SENCO's, of provision and thresholds.</p>	<p>We will identify arrangements that schools are making directly for provision of health support and the funding arrangements for this</p> <p>We will identify areas for improvement e.g. through protocols or guidance, through changes to funding arrangements etc.</p>
12	Collectively review our information, advice and guidance offer to children, young people and families with SEND to examine whether joint approaches would be beneficial.	Partners make an informed decision on whether to jointly commission (with jointly commissioned services in place if required)	<p>We will look at each of our current offers/service provision</p> <p>We will look at the risks and opportunities of commissioning this together rather than separately</p> <p>We will secure joint provision if this is agreed as the best way forward.</p>
13	Raise awareness of the Local Offer amongst families and professionals. All partners are contributing relevant, comprehensive and accessible information coproduced with families and young people.	<p>Professionals are aware and signpost families to use the Local Offer website.</p> <p>The Local Offer is used to access information and is valued by young people and families. It is responsive to their needs and aspirations.</p> <p>The Local Offer provides clear, comprehensive, accessible and up to date information about the available provision and how to access it.</p>	<p>We will work on a joint promotional / communications campaign across Leicester, Leicestershire and Rutland to raise awareness amongst families and professionals</p> <p>We will use platforms and social media channels that are relevant for today's families to support engagement and be responsive to their needs.</p> <p>We will carry out a mapping exercise of current Health content across Leicester, Leicestershire and Rutland to ensure relevant,</p>

	Action	Where do we want to be?	How will we get there?
		<p>The Local Offer is coproduced with professionals and families to ensure information reflects needs</p> <p>LO is accessible and reflects the current ways children and families access information and support online</p>	<p>up to date and consistent information is shared across the 3 areas. Information produced and shared is accessible for young people and remains person centred</p> <p>We will work to ensure the Local Offer provides clear comprehensive accessible and up to date information about the available provision and how to access it.</p> <p>Utilise existing engagement groups and new mechanisms to inform and develop the Local Offer website.</p> <p>We will use the gaps identified to inform commissioning priorities</p> <p>We will work together to identify a LO champion in Health and LA</p>

Cross cutting themes that we should consider when working on each action:

Theme
How do we involve children, young people and families in this action?
How do we explain this system or these changes to children, young people and families?
How do we approach this action together, as a whole system, including wider partners?
Have we approached this across education, social care and health?
How do we engage, inform and train the workforce on this process or these changes?
How do we ensure early identification and intervention takes place?

Future actions and proposed year order (as per ranking at engagement):

Action	Suggested Year
Gather information on cases where a standard service response has not met need. Build an evidence base to show where changes are needed.	Year 2
Review the information gathered in each agency in relation to outcomes, looking for ways to improve practice and to provide consistent data across the area.	Year 2
Plan a series of service reviews where we feel that provision isn't currently meeting need or there are opportunities to join up across the area (proposals are listed under priority 7).	Year 2
Continue to develop regional approaches to information sharing in relation to quality of placements out of area.	Year 2
Review the personal budget agenda across organisations and how this links to SEND.	Year 2
Carry out an audit of commissioning expectations in the SEND COP, looking at what we do now and where we need to do more.	Year 2
Jointly review arrangements for joint funded cases to ensure roles and responsibilities are clear and appropriate documentation is in place.	Year 2
Ensure those children with LD/ASD who are at risk of admission to a hospital setting have a key worker identified.	Year 2
Jointly review personal care offer / domiciliary support to understand how best to purchase, provide and quality assure.	Year 2
Jointly review short breaks and respite provision to ensure it best meets need and to clarify who can access.	Year 2
Ensure that information collated on placement/service access is captured on systems to allow for easy reporting and analysis. This should include placement cost and details of those refused a service because it was full.	Year 3
Make use of the regional information gathered on education placements to ensure this feeds into decisions and spend on placements.	Year 3
Develop a commissioning dashboard of key information to be reviewed frequently across the area.	Year 3
Look at development of the marketplace for services for young people with SEND, starting with where we are seeing the greatest need or most pressing changes occurring.	Year 3
Review data sharing arrangements in place to ensure these are fit for purpose.	Year 3
Jointly review provision at the hospital school to ensure it reflects demand and meets need.	Year 3
Jointly examine the current Assistive Technology offer and the potential gains in expanding this.	Year 3
Review services for children with a hearing or visual impairment to look for opportunities for greater collaboration.	Year 3
Review system and contractual arrangements for CYP in residential schools to ensure they receive hearing, sight and dental checks.	Year 3

Appendix D – changes made to the strategy as a result of feedback

Change requested	Where can this be seen?
One of our actions was to 'Look at development of the marketplace for services for young people with ASD'. It was felt that development was needed across the whole market, not just for those with ASD.	The action is now listed as 'Look at development of the marketplace for services for young people with SEND, starting with where we are seeing the greatest need or most pressing changes occurring'
Suggestion that the strategy was not specific, not SMART and didn't contain enough information on the 'as is' position.	The action plan developed from engagement feedback contains a set of specific actions, states where we want to get to, where we are now and gives timescales for the work.
A strong message throughout the engagement was about the need to ensure early identification and intervention to try to prevent the escalation of need which will require more intervention further down the line. This would include work with mainstream school settings in particular. As this can apply across many of the actions, this has been proposed as a cross cutting theme.	Cross cutting commitment to ask, 'How do we ensure early identification and intervention takes place?'
Priority 2 during the engagement was 'plan to meet need within available resource, forecast for the future'. Concern was expressed that resource shouldn't be a limiting factor, it should be legislation i.e. statutory responsibility.	The priority has been changed to state 'plan to meet statutory need within available resource, forecast for the future'.
Text during the engagement read 'Review our transition/preparing for adulthood plans and approaches, looking for opportunities to work together as a system to improve the transition experience for young people'. One respondent suggested we should be making these opportunities, rather than looking for them.	Text now reads as 'Review our transition/preparing for adulthood plans and approaches, creating opportunities to work together as a system to improve the transition experience for young people'
A request was received from all partners to include an action looking at the IAG provision collectively.	This has been added as a new action to year 1.

Change requested	Where can this be seen?
<p>One of our actions was to 'Engage with children, young people, and families to understand what their priorities are in terms of service provision / improvement'. Whilst this was obviously very important and formed part of the engagement on the strategy where views were sought on the ranking of actions, it also forms a cross cutting action that should be considered in all pieces of work we do. This has therefore been removed as a specific action and included as part of the cross-cutting commitment.</p>	<p>Cross cutting commitment to ask during each piece of work 'How do we involve children, young people and families in this action?'</p>

General cross cutting themes to be taken away and woven through the work

Theme
<p>The need to work with and listen to children, young people, parents and carers and to support them in understanding the systems, services and changes. This includes provision of guidance and information about what is available and who can access services and support.</p>
<p>The need to work with all partners, including schools, and with each other to ensure we are a joint system, working together</p>
<p>The need to consider the holistic needs of children across education, health and social care</p>
<p>The need to engage, inform and train the workforce on these processes and any changes made</p>
<p>The need to ensure early identification and intervention to prevent the escalation of need.</p>

Appendix E – proposed governance structure for joint commissioning

Meeting	Purpose	Who attends?	Reporting to
SEND joint commissioning delivery group	Delivery of SEND Joint Commission action plan	Commissioning leads, operational SEND leads (Local Authorities, CCG's)	<ul style="list-style-type: none"> SEND local Improvement boards/management arrangements Leicester, Leicestershire and Rutland Children Design Group
Local SEND boards/management structures	Delivery of SEND improvement agendas for local areas	Heads of Service and Directorate level officers from Local Authorities and CCG's	Each agencies directorate/senior management
Leicester, Leicestershire and Rutland Children Design Group	To provide system leadership for children and young people services	Local Authorities and CCG Directorate level leads	Linking in with each agencies individual governance arrangements
Joint integrated Commissioning Board	Delivery of Joint Commissioning Agenda for Leicester, Leicestershire and Rutland	Directorate level commissioning leads for Local Authorities and CCG's	Leicester, Leicestershire and Rutland Children and Families Strategic Leadership Group