

# SEND Pathfinder Information Pack



Version 4, April 2014 – Joint Commissioning

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A word cloud of UK regions and cities, with words oriented vertically and horizontally. The colors are red and blue.

Nottinghamshire  
Bromley and Bexley  
Cornwall and Scilly  
Gateshead  
Solihull  
Manchester  
Wiltshire  
SE7  
Hertfordshire  
Southampton  
Northamptonshire  
Leicester  
City  
Calderdale  
North Yorkshire  
Trafford  
Wigan  
Lewisham  
Devon  
Greenwich  
Oldham and Rochdale  
Hartlepool and Darlington

# INTRODUCTION

## **Background & Context**

The pathfinder programme has been running for over 2.5 years. There is a growing body of learning that the new approaches pathfinders are trialling are making a real difference to the lives of children, young people and families, but that putting these reforms in place takes time, energy and determination.

**All areas will need to implement the SEND reforms from September 2014 as outlined within the Children and Families Act (2014).** The experience of the pathfinders has shown that the workforce development and culture change needed to implement the reforms takes time. Services and professionals across education, health and care for children and adults need to work together closely, putting families and young people at the centre of commissioning, assessment and planning. Every area will therefore want to begin considering the steps they need to take to implement the reforms successfully.

There have been clear messages that local areas would value practical advice and support in preparing for implementation. A pathfinder champion will be available in every region providing a mixture of information, advice and support to all non-pathfinder areas. **The information packs support the work of the regional champions by demonstrating learning from across the whole programme.** On 8 April 2014, Edward Timpson (Parliamentary Under-Secretary of State for Children and Families) and Dr Dan Poulter (Parliamentary Under-Secretary of State at the Department of Health) [wrote to local authority and health leaders](#) with further information on transition arrangements in relation to the reforms. The Department for Education and Department of Health also recently published an updated [implementation pack](#) which outlines the vision for the reforms and contains useful information for strategic leaders. Further information and case studies, together with details of the pathfinder champions, are available at [www.sendpathfinder.co.uk](http://www.sendpathfinder.co.uk).

## **Information Pack Format & Structure**

**This fourth version has been updated to reflect the Children and Families Act (2014), draft SEN Code of Practice, draft regulations and the proposals for transitional arrangements which were published in October 2013.** It is designed to draw together useful resources and case study learning from the pathfinder programme to support non-pathfinder areas to prepare to implement the SEND reforms themselves. **This month it has been updated to provide top tips for implementation based on a combination of key learning from Pathfinders areas, delivery partners and other VCS organisations including examples of how to use them and associated resources and case studies.**

This pack is created for everyone involved in making the reforms work – amongst others, children, young people and families, parent carer forums, local authority children’s and adult services, the health service, early years settings, schools, post 16 institutions and VCS providers.

This information pack covers the following six overarching themes of pathfinder testing:

- Coordinated assessment and EHC planning
- Personal Budgets
- Local Offer
- Preparing for adulthood
- Engagement and participation of children, young people, parents and carers
- Joint Commissioning

Please note these packs are supported by a glossary and resource list which can be found at the end of each pack.

### **Future Versions**

The pathfinder champion programme will run until March 2015. Pathfinders are now scaling up their new approaches to whole areas, working across the 0-25 age range and with the full range of providers. This will provide further vital learning that will be incorporated into future packs.

Information packs will be updated and published periodically over the coming months and feedback will inform development of future packs. **Resources and examples from other sources are welcomed and can be incorporated into later versions of the information pack** contact [pathfinder@mottmac.com](mailto:pathfinder@mottmac.com) to share your approach and any associated resources.

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# Joint Commissioning

## Introduction (Last updated April 2014)

This Special Educational Needs and Disabilities (SEND) Pathfinder Information Pack includes an overview of joint commissioning across agencies to deliver holistic support, specifically within the context. It provides links to relevant information, such as the draft Special Educational Needs (SEN) regulations and draft Code of Practice (CoP). It also provides information on Pathfinder activities, through case studies and short examples of interesting practice. This Joint Commissioning Information Pack **should not be viewed as thematically separate** from other SEND Pathfinder Information Packs but rather a cross-cutting theme and one that **relates particularly closely to the Local Offer and Personal Budgets Packs**. This is **version 4**, which builds upon the learning from previous introductory packs as well as developing more of an illustration on 'How' authorities have carried out these changes. This is a working document and the latest version can be found on the [SEND Pathfinder website](#)<sup>i</sup>. More detailed information will be included in future Pathfinder Information Packs.

**Joint commissioning is a strategic approach to planning and delivering services in a holistic, joined-up way.** It is a means for the different partners commissioning education, health and care provision, to deliver positive outcomes for children and young people with SEND. It offers partners a way to work together to deliver **more personalised and integrated support resulting in better outcomes for the system, as well as the individual**. A joint commissioning approach can also provide local area partners with an **opportunity to redesign services** across education, health and care in order to operate more effectively, both improving the experiences of children, young people and their families and making best use of local resources.

## What do the Children and Families Act (2014), Draft Code of Practice and supporting documents say about Joint Commissioning? (Last updated April 2014)

Act and Supporting Documents			
<a href="#"><u>Children and Families Act (2014) (section 25 Promoting Integration) (section 26 Joint Commissioning arrangements)<sup>ii</sup></u></a>	<a href="#"><u>Updated draft Special Educational Needs (SEN) Code of Practice, Chapter 3: Working together across education, health and care<sup>iii</sup></u></a>	<a href="#"><u>Consultation on transition to Education, Health and Care plans and the local offer<sup>iv</sup></u></a>	<a href="#"><u>Implementing a new 0 to 25 special needs system: LAs and partners. Further Government advice for local authorities and health partners<sup>v</sup></u></a>

Between the 4<sup>th</sup> October and 9<sup>th</sup> December 2013 there was a national consultation on the draft SEN Code of Practice<sup>vi</sup>, Regulations and the proposals for transitional arrangements. The Department for Education (DfE) stated:

*'We will take account of any changes that may be made as result of Parliament's consideration of the Bill (enacted 13<sup>th</sup> March 2014) and the responses to consultation in developing versions of the Code of Practice and Regulations, including transitional arrangements. These will then be placed before Parliament for approval in the spring to come into force from September 2014 at the same time as the provisions in the Bill (enacted 13<sup>th</sup> March 2014). The results of the consultation and the Department's response will be published on the Department for Education e-consultation website in spring 2014.'*<sup>vii</sup>

In April 2014 the DfE and Department of Health (DH) published '[Implementing a new 0 to 25 special needs system: LAs and partners. Further Government advice for local authorities and health partners](#)'.<sup>viii</sup> This is non-statutory advice to help Local Authorities and their Health partners understand their role in implementing the reforms to the SEND system. Extracts from this document are included within this Information Pack and referenced accordingly.

The following is an excerpt from this non-statutory guidance '[Implementing a new 0 to 25 special needs system](#)'<sup>ix</sup> regarding legal requirements expected of all local authorities from September 2014:

*'From September 2014: local offers published following consultation; joint commissioning duty commences; new assessment and planning starts (for new entrants); personal budgets offered as part of Education, Health and Care (EHC) plans; mediation arrangements in place; local authorities should publish plans for EHC plan transfers.'*<sup>x</sup>

Local authorities are required by **Section 25 of the Children and Families Act 2014** to exercise their duties and powers under the Act with a view to ensuring the integration of special educational provision with health and social care provision where they think this would promote the wellbeing of children or young people in their area who have SEN or improve the quality of special educational provision.

**Section 26 of the Children and Families Act 2014** requires local authorities and partner commissioning bodies to commission services jointly for children and young people with SEN and disabilities, including those without Education Health and Care Plans. These arrangements must be robust enough to ensure a clear course of action in every case. The arrangements also require partners to establish effective dispute resolution procedures where local agencies disagree. The following excerpt is from Section 26 of the Children and Families Act (2014):

*'A local authority in England and its partner commissioning bodies must make arrangements ('joint commissioning arrangements') about the education, health and care provision to be secured for*

- (a) children and young people for whom the authority is responsible who have special educational needs and;*
- (b) children and young people in the authority's area who have a disability.*

*In this Part 'education, health and care provision' means:-*

- (a) special educational provision;*
- (b) health care provision;*
- (c) social care provision'*<sup>xi</sup>

Joint commissioning requires local partners to identify outcomes that matter to children and young people with SEND and their families, and then working in partnership plan, deliver and monitor services against those outcomes. **Figure 1 provides an example joint commissioning cycle.**

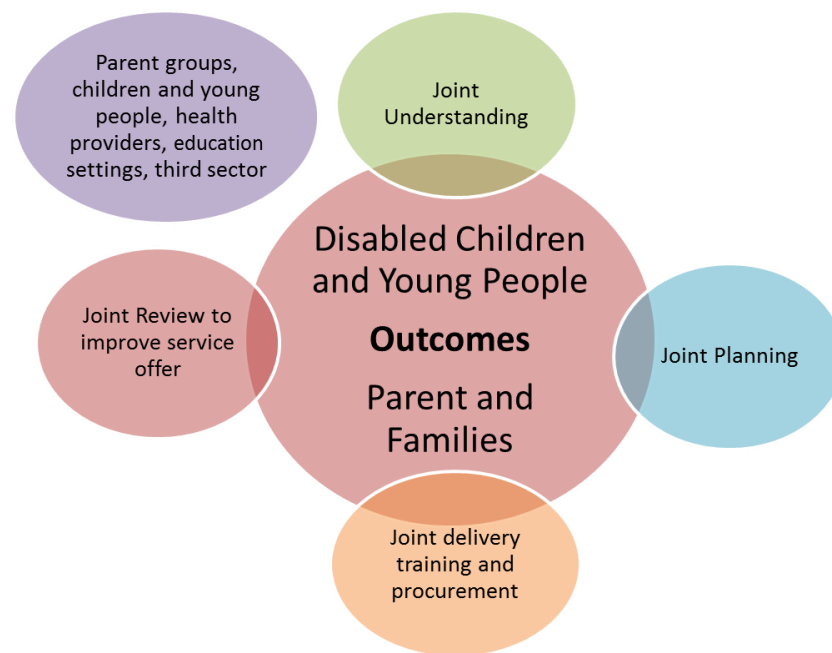
**Joint commissioning should involve families and providers in decisions** about provision, enabling areas to ensure that commissioning is **more responsive to local needs** on an on-going basis and **effectively meeting the health needs of a local population**, as addressed within areas' Joint Strategic Needs Assessments (JSNAs). The Health and Wellbeing Board can also have a useful role in giving the permissions to support the joint working at operational level between agencies. As the Draft SEN Code of Practice<sup>xii</sup> states:

*'[Joint commissioning is] an on-going process which **should** be directly informed by the experiences of children and young with SEND and their families.'*<sup>xiii</sup>

Joint commissioning is also an opportunity to develop provision that **supports early identification, prevention, and anticipates aspirations outlined in outcomes specified within EHC plans**. The latter is particularly the case for young people preparing for adulthood, where early transition planning should feed into commissioning cycles so that there are strong and aspirational post-16 options for young people.

It is important that joint commissioning governance arrangements are set out clearly, as noted in the Draft SEN Code of Practice<sup>xiv</sup>:

*'There should be clear decision making structures to agree the positive changes that joint commissioning will achieve in service design and outcomes. These arrangements should be transparent and used for identifying and resolving challenges. They **must** be robust enough to ensure that all partners*



**Figure 1: Example of a joint commissioning cycle from the Draft SEN Code of Practice**



*are clear about who is responsible for delivering what, who the decision makers are in education, health and social care, and how partners will hold each other to account in the event of a dispute.<sup>xv</sup>*

For a broader understanding of the policy drivers for joint commissioning, the Children and Families Act (2014) has now received Royal Assent and can be viewed on the [UK Parliament website<sup>xvi</sup>](#).

## Part 1: Top Tips to Implementation (New)

This section provides **top tips for implementation** based on a combination of **key learning from Pathfinders** areas to date, research and learning from **The Communications Trust**. Please note that resources and examples, from other sources, are welcomed and can be incorporated into later versions of the SEND Pathfinder Information Packs, contact [pathfinder@mottmac.com](mailto:pathfinder@mottmac.com) to share your approach and associated resources.

Since September 2011 Pathfinders have been working with their partners to develop a multi-agency approach to joint commissioning. Pathfinders have found that joint commissioning is challenging, but crucial to delivering **integrated services that meet the needs of their children and young people with SEN**, and making **best use of resources**. Many have seen the reforms as an opportunity to further develop joint commissioning of services and joint working. There is no single model of integration and joint commissioning between local authorities and their partner Clinical Commissioning Groups (CCGs). It requires **genuine co-production with all partners, backed by clear governance arrangements and a commitment to operating in a much more integrated way**. Pathfinder learning has also demonstrated that the development of joint commissioning arrangements is often gradual and delivered in a phased, sustainable way.

A number of Pathfinder approaches have evolved in light of their collective and individual experiences and the emerging legislation, which is also supplemented by learning from a number of non-Pathfinder areas who are also preparing for the implementation of SEN reforms.

### **Summary of Top Tips (please note these are not in sequential order)**

Please click on the links below for further information and resources:

- [\*\*Top Tip 1: Identify key individuals who can influence and make decisions and build relations recognising the common aim of improving outcomes of children and young people with SEND\*\*](#)

- [Top Tip 2: Establish appropriate governance arrangements with joint representation, agree vision, outcomes and mechanisms for review](#)
- [Top Tip 3: Identify needs, map provision and highlight gaps and actions across services and population](#)
- [Top Tip 4: Develop an implementation plan and be realistic about what can be achieved in the timeframes - most likely implementation will be achieved in phases](#)
- [Top Tip 5: Establish effective, clear and jargon free communications and engage with providers and users at an early stage](#)

<b><i>Top Tip 1: Identify key individuals who can influence and make decisions and build relations recognising the common aim of improving outcomes of children and young people with SEND</i></b>	
<b><i>Ideas and examples of how to use and/or embed this learning</i></b>	<b><i>Examples/ Resources</i></b>
<ul style="list-style-type: none"> <li>• Determine who the key individuals are who currently have a budget and make commissioning decisions</li> <li>• Work to understand different approaches from different partners and common aim of improving outcomes</li> <li>• Understand how individuals and partners make decisions, their budgets and KPIs</li> <li>• Agree protocol for resolving disagreements and escalation routes</li> <li>• Establish working group with representatives from key partners, support professionals (procurement, I.T., legal etc.) and users</li> </ul>	<p><b><u>Resources:</u></b></p> <ul style="list-style-type: none"> <li>• <b>Wigan terms of reference for panels [Please refer to Appendix 1]</b> – confirms details of panel meeting objectives, membership, decision making, confidentiality etc.</li> <li>• <a href="#"><u>Rochdale's Terminology Table</u></a> – enables joint understanding across professionals and agencies as to what is meant by key terms</li> </ul>
<b><i>Top Tip 2: Establish appropriate governance arrangements with joint representation, agree vision, outcomes and mechanisms for review</i></b>	
<b><i>Ideas and examples of how to use and/or embed this learning</i></b>	<b><i>Examples/ Resources</i></b>
<ul style="list-style-type: none"> <li>• Decide how decisions will be made in conjunction with partners and what funding powers are delegated</li> <li>• Establish appropriate links with wider agenda including Health and Wellbeing Boards (HWBBs), implementation boards etc.</li> <li>• Determine involvement of parent carers at strategic and individual levels</li> <li>• Agree appropriate set of terms of reference</li> <li>• Communicate clear vision and outcomes for success and measures</li> </ul>	<p><b><u>Case Studies:</u></b></p> <ul style="list-style-type: none"> <li>• <a href="#"><u>Wigan Case Study</u></a> - provides details as to how to establish a new structure for key paediatric services in the Local Authority (LA) and the NHS, including the development of</li> </ul>

- Agree review mechanisms for commissioning decisions

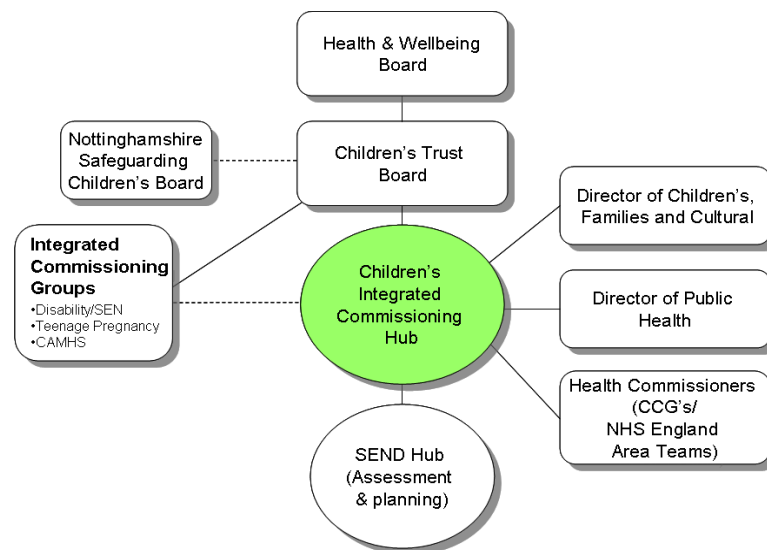


Figure 2: Nottinghamshire's governance arrangements for commissioning hub

a single provider organisation.

**Resources:**

- [Rochdale's Joint Commissioning strategy](#) - provides details of principles, drivers and joint arrangements for joint commissioning for Children's Services 2013-2015.
- **Wigan terms of reference for panels [Please refer to Appendix 1]** – confirms details of panel meeting objectives, membership, decision making, confidentiality etc.

**Top Tip 3: Identify needs, map provision and highlight gaps and actions across services and population**

<i>Ideas and examples of how to use and/or embed this learning</i>	<i>Examples/ Resources</i>
<ul style="list-style-type: none"> <li>• Pull together summary of needs based upon existing data including JSNA and other data (statements, LDAs, EHCPs, parent feedback, LO feedback, SEN data, social care data, school place planning etc.)</li> <li>• Map needs against existing provision to determine gaps and take this as the baseline from which to build</li> <li>• Capture intelligence relating to existing commissioning including block contracts, expiry dates, measures of success and areas for improvement</li> <li>• Identify requirements for workforce training and development</li> </ul>	<p><b>Resources:</b></p> <ul style="list-style-type: none"> <li>• <a href="#">Rochdale's Health and Wellbeing Strategy</a> - provides details of their priorities and strategic intentions for entire population.</li> </ul>

<b>Top Tip 4: Develop an implementation plan and be realistic about what can be achieved in the timeframes - most likely implementation will be achieved in phases</b>	
<b>Ideas and examples of how to use and/or embed this learning</b>	<b>Examples/ Resources</b>
<ul style="list-style-type: none"> <li>• Draw down from overarching vision linking to partners strategies (Health and Wellbeing Board etc.) with phased activities in short, medium and long term</li> <li>• Identify resources, activities, owners and realistic timeframes for deliverables</li> <li>• Keep plan under review reflecting changes in needs throughout</li> </ul>	<p><b>Case Studies:</b></p> <ul style="list-style-type: none"> <li>• <a href="#">Heywood, Middleton &amp; Rochdale CCG (HMRCCG)/Rochdale Metropolitan Borough Council (RMBC) Children's Integrated (CICT)</a> - provides details of their phased approach (0-19 phase 1 then adults up to 25 phase 2) including an initial outline plan and continuum for longer term</li> </ul>
<b>Top Tip 5: Establish effective, clear and jargon free communications and engage with providers and users at an early stage</b>	
<b>Ideas and examples of how to use and/or embed this learning</b>	<b>Examples/ Resources</b>
<ul style="list-style-type: none"> <li>• Ensure common understanding of terminology across partners</li> <li>• Recognise different communications required for professionals and service users</li> <li>• Remember professionals will be having different conversations with families as a result of personalisation</li> <li>• Establish an effective mechanism(s) to engage with children, young people and parent carers</li> <li>• Communicate engagement activities and actions as a result (You said. We did.)</li> <li>• Establish mechanisms for engaging with providers and informing them of new approaches and appetite for more flexible approach – fill gaps in service areas or localities and respond to personalisation etc.</li> </ul>	<p><b>Case Studies:</b></p> <ul style="list-style-type: none"> <li>• <a href="#">The Communication Trust: Speech Language Communication Needs (SLCN) Guidance</a> - provides details of what makes for effective and joined up commissioning practice</li> <li>• <a href="#">Wigan's 'An Audience with...'</a> - provides an example of how parents have directly communicated their needs to representatives from health in relation to key priorities.</li> </ul> <p><b>Resources:</b></p> <ul style="list-style-type: none"> <li>• <a href="#">Rochdale's Terminology Table</a> – enables joint understanding across professionals and agencies as to what is meant by key terms.</li> </ul>

Key extracts from both the resource pack and case studies are included within this section; wider selections of case studies can be found on the [SEND Pathfinder website](#)<sup>xvii</sup>. The following information should be viewed as a work in progress which will be developed and updated throughout the Programme.

## Part 2: Key Elements (New)

Local authorities and their local CCGs are tasked with agreeing what services will be locally commissioned as well as making arrangements for agreeing:

- The education, health and social care provision reasonably required by local children and young people with SEND, in line with the statutory duties of the relevant commissioners;
- Which education, health and social care provision will be secured and by whom, linking as necessary to the provision being commissioned by schools and other education settings;
- What advice and information is to be provided about education, health and care provision and by whom and to whom it is to be provided;
- How complaints about education, health and social care provision can be made and are dealt with; and
- Procedures for ensuring that disputes between local authorities and CCGs are resolved as quickly as possible.

## Partnerships (New)

**It is critical that all local partners understand who is accountable for what.** Therefore **local governance arrangements must be established** across SEND commissioning. These arrangements should set out the decision making structures in relation to joint commissioning to ensure transparency and assist with dispute resolution. It should be clear who can make decisions both operationally (e.g. deciding what provision should be put in an EHC plan) and strategically (e.g. what provision will be commissioned locally, exercising statutory duties).

[Rochdale's Joint Commissioning Strategy Children's Services 2013-2015<sup>xviii</sup>](#) sets out:

- Principles that the Local Authority (LA) and CCG will adopt to work together to deliver collaborative, transparent and whole systems approach and common understanding of what is meant by joint commissioning and different terms.
- National and local drivers for joint commissioning developments within children's services.
- Developing joint commissioning arrangements including intention to move to a single joint commissioning unit to commission all services for children and young people.
- Governance arrangements, action plan and intention to established pooled budgets.

- Improving commissioning for priority outcome areas and how to use these areas to test out and learn from joint commissioning approach and how to shape and inform development of the new single unit.
- Communications and engagement plans as well as workforce development needs to ensure high quality commissioning is delivered.

**Kent Children & Maternity Services** has highlighted the importance of focusing on the themes that unite people such as:

- Children and young people - maximising their potential
- Co-production
- Resilient families and local services
- Safeguarding vulnerable children and adults
- Joint commissioning & managing demand with finite resources

## **Joint understanding (New)**

Achieving a joint understanding of how best to improve the health and wellbeing of the local population and reduce health inequalities is the purpose of health and wellbeing boards. These boards hold commissioners to account with representatives from the local Healthwatch, CCGs and the local authority directors for adult social services, children's services and public health. A key mechanism for understanding and agreeing the needs of the local population is through a Joint Strategic Needs Assessments (JSNA) which forms a platform from which to develop the joint health and wellbeing strategy.



[Please click here for an example of Rochdale's Health & Wellbeing Strategy<sup>xix</sup>](#)

[Please click here for an example of Rochdale's Joint Commissioning Strategy Children's Services 2013-2015<sup>xx</sup>](#)

**Figure 3: Rochdale's Joint Health and Wellbeing Strategy Webpage**

Below is an example of Rochdale's Joint Commissioning terminology table:

Terminology	Definition
Commissioning	The means by which we secure the best value for children, young people and their families. It is the process of translating aspiration and need, by specifying and procuring services which deliver the best possible outcomes, reduce inequalities, ensure high quality service provision, and make the most effective use of available resources.
Outcomes Based Commissioning	This is commissioning focused not on activity and process, but on the results to be achieved. There is less emphasis on inputs and activity (e.g. how many workshops, hours of counselling etc. were carried out) and more focus on results and outcomes (e.g. reduced offending, better levels of health, improved school attainment). Outcomes may be identified through the use of proxy indicators (e.g. reductions in number of court appearances, less referrals to acute hospital services).
Population Level Commissioning	This is commissioning for whole population outcomes e.g. to reduce health inequalities for children and young people.
Targeted Level Commissioning	Commissioning that is targeted at a specific group or outcome area, examples could be services for children with disabilities, provisions for children in need, teenage parents etc.
Individual Level Commissioning	Packages of support for individual child/family, as part of a team around the family approach.
Commissioning Cycle	This describes the cyclical nature of the whole commissioning process. Rochdale's model is described in more detail below.
Needs assessment	The process for understanding the needs of the local population, resources and priorities. This can be at a whole population level e.g. Rochdale Borough Joint Strategic Needs Assessment, or can be targeted, for example the needs of children and young people. Needs assessments inform the setting of priorities and commissioning plans.
Specification	A document that is developed by commissioners to describe the outcomes, service delivery model, performance indicators and monitoring arrangements for services.
Procurement	The process by which services providers are identified and selected. This usually involves seeking expressions of interests, tenders etc. and encompasses the principle of open competition. Procurement is subject to stringent legal requirements.
Contract	A formal written agreement between the commissioner and the service provider
Contract Management	Managing commissioner and provider relationships and managing provider performance

#### Rochdale's definition of Commissioning:

The means by which we secure the best value for children, young people and their families. It is the process of translating aspiration and need, by specifying and procuring services which deliver the best possible outcomes, reduce inequalities, ensure high quality service provision, and make the most effective use of available resources.

#### Joint planning (New)

#### Who are commissioners?

- Parents
- Clinical Commissioning Groups
- NHS Commissioning Board
- Local Authority (Public Health)
- Local Authority (Education)
- Local Authority (Social Care)
- Head Teachers
- Local Authority (Housing)
- Department of Work and Pensions
- Joint commissioning & managing demand with finite resources



Joint planning requires authorities to set out their strategies, agree their outcomes with parental engagement and develop their plans to ensure that they make the best use of local resources. **A focus on early intervention is critical along with an understanding of what budgets might be pooled or aligned.**

*Heywood, Middleton & Rochdale CCG (HMRCCG)/Rochdale Metropolitan Borough Council (RMBC) Children's Integrated (CICT) Case Study (New)*

**The process to date:**

- Joint funded Associate Director Joint Commissioning Post (to provide ownership and leadership) - and signal intent and commitment from the LA and CCG - April 13
- Development of a Children's Joint Commissioning Strategy and ratification through Health and Wellbeing Board – June 13 (to view [click here<sup>xxi</sup>](#))
- Development of an options appraisal document for relevant boards in LA/CCG/HWBB which presented the differing models of joint/integrated commissioning – and a recommended model for Rochdale's children's services. Ratification of the preferred option (fully integrated commissioning team from April 15) at the Health and Wellbeing Board and mandate to work up a full business case - November 13

- Business Case development - in progress
- Identification of existing capacity to form a small team from 1 April 14 to progress commissioning priorities – to begin to build team and processes during the 14-15 financial year.

**The Levers/Drivers/Enablers:**

- HMRCCG/RMBC have totally embedded joint commissioning both within local strategic priorities for Children (through the Children and Young People's Partnership which is a sub group of HWBB, and the Children and Young People's Plan), as well as within the Health & Wellbeing Strategy.
- They have established governance structures through the Children and Young People's Partnership which is a sub group of the Health and Wellbeing Board.
- HMRCCG/RMBC are using the Public Service Reform agenda as another key driver – and the SEND work programme is embedded in the Borough's Health and Social Care Integration Strategic Plans which covers both adults and children's services.

- HMRCCG/RMBC are using the forthcoming joint commissioning duty re SEND in the Children & Families Act (2014) as a driver for change (especially relevant for securing CCG commitment)
- SEND reforms and Children's Joint Commissioning are included in the CCG's 5 year strategic plans (required through Every One Counts 2014/15-2018/19 Planning Framework )
- The CCG GP clinical lead for children in CCG is fully abreast of this agenda and is showing visible clinical leadership, and enables her to champion this agenda with fellow clinical leads within the CCG, through attending briefings and presenting her paper for the CCG re the draft code and its implications.

Work is ongoing around the development of a service delivery model and service specification to provide a Borough wide integrated team, this will be followed by redesign and implementation plans. They have mapped children/ young people/ family's journeys to identify and reduce duplication, and focused on the outcomes and functions that CCG/RMBC want the service to deliver as a starting point – rather than looking at existing services and trying to design a structure. The actual 'make up' of the team will be considered in the next stage (redesign and implementation). Due to the complexities and scale of transformation, initial work is focusing on the 0-19 age range, and we will consider how we need to redesign provision for young adults up to 25 in the second phase.

Version 4.1, April 2014

Rochdale are developing a Borough Wide Integrated Team for Children and Young People with SEND with intention that families should expect to see:

- A single point of access to information and services
- Information and signposting in relation to local offer
- Person centred integrated assessment/planning (either via the Common Assessment Framework or EHCP (Education, Health Care Plan)
- Direct Specialist intervention when it is needed (e.g. therapists, educational psychologist, specialist teachers, social workers, equipment etc.)
- A skilled competent workforce supporting children with SEND to ensure they can access local provision.

#### **Biggest challenge**

*"...is the scale of transformation – the SEND reforms are not about 'tinkering with existing services' and processes, and we recognised that to deliver what our children and families need and deserve, we need to take a whole system, redesign approach and to do this in partnership with parents - this takes time".* **Karen Kenton, Associate Director, Joint Commissioning Children**

**Our advice (in addition to SE7's advice):**

- **Identify a clinical lead, and a commissioning lead** within the CCG who has responsibility for SEND to drive a partnership approach
- **Keep outcomes for the child/family uppermost in everybody's minds** – so when conversations get challenging or difficult you can remind yourselves why you're doing this, and try to lessen the focus on service and organisational issues/needs that can sometimes get in the way
- **Embed SEND related work programmes into all local strategic plans across partners** – so that it is fully embedded and sustainable, this will help with governance and support delivery
- **Be resilient and don't give up** – some of this is really hard and takes a lot of time, energy and commitment (at a time when resource and capacity may be reducing) – make sure there are good support processes for all involved, keep expectations manageable and celebrate success!

***Wigan Case Study: Children's Integrated Care Programme***

***(New)***

**Rationale**

- Wigan children and young people experience poorer health and wellbeing outcomes than their peers in a number of key areas (ChiMat Child Health Profile)
- The national drive towards integrated delivery (Health and Social Care Act 2012)
- The Healthier Together reorganisation of acute healthcare services in Greater Manchester requires a complimentary local strategy for children's services
- There is a need to develop a sustainable model for children's services as fiscal efficiency savings need to be made between now and March 2017
- National QIPP Programme in the NHS

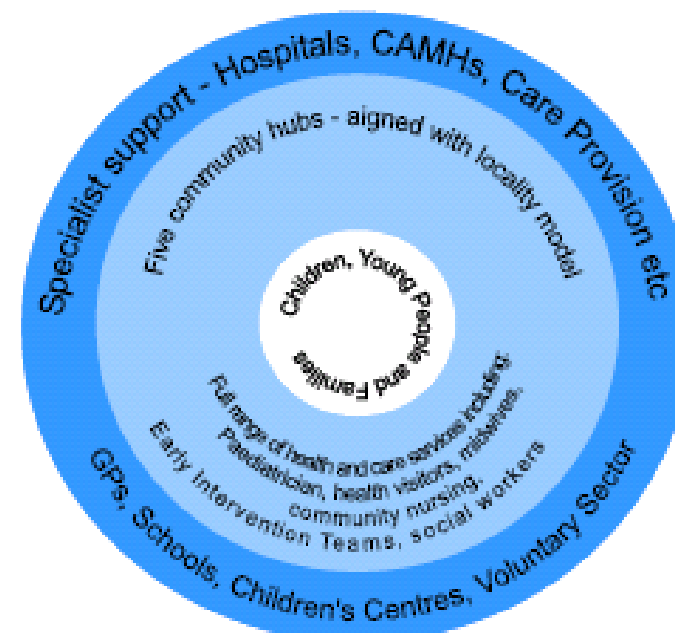


Figure 4: Wigan's Integrated Care Model

### Vision

Wigan's vision is to **establish an integrated, locality based hub for children's services with primary care**. This will enable a **holistic** service offer to be delivered to families, focusing on improving health and wellbeing outcomes, but in particular reducing the need for acute and statutory care and allowing families to access the right care at the right time.

Wigan intend to do this by developing an integrated approach to service delivery that establishes a new structure for key paediatric services in the Local Authority and the NHS, including the development of a single service offer. **It is Wigan's vision that families are able to access care that is; coordinated, seamless, person centred, empowering and effective 'self-care'.**

### Measures of success

- Reducing hospital admissions, re-admissions and lengths of stay
- Reducing attendances at Accident and Emergency departments
- Improving school attendance, attainment and readiness (including child health and wellbeing)
- Reduced involvement of statutory services (Local Authority Care, the Youth Justice System, SEND and educational support services)

- Improved child and family experience
- Improving access to primary care
- Building self-reliance in families

Figure 5 below shows details of Wigan's Governance Structure:

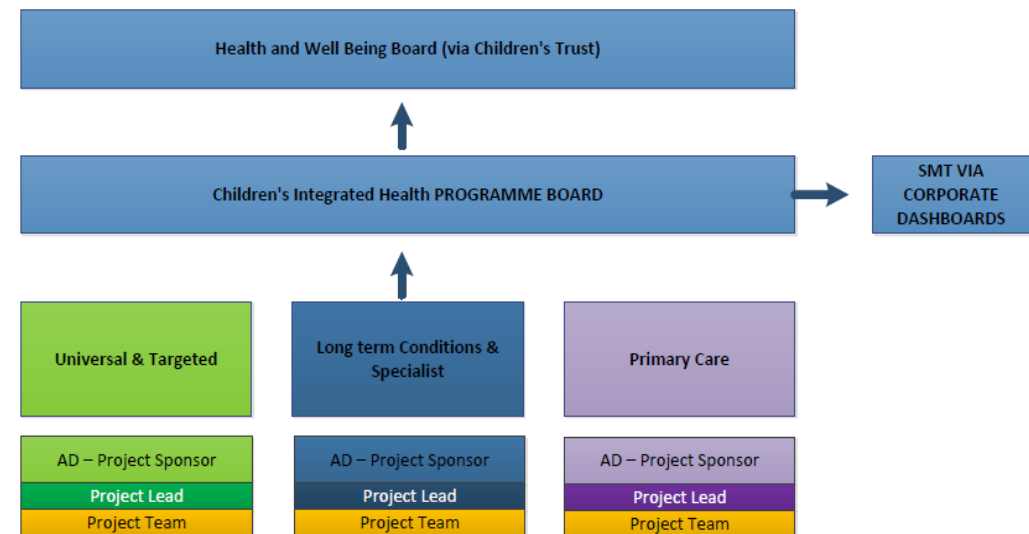


Figure 5: Wigan's Governance Structure

**There are a number of cross cutting areas of work that are critical to success:**

- Defining a detailed delivery model for Children's Integrated Care (the staff and the skills required, the requirement of new organisational structures, roles and responsibilities, assessment and care planning frameworks)
- Developing a data set that evidences the basis for change that enables benchmarking and performance management of the system
- Agreeing and delivering a communication strategy
- Agreeing and delivering a stakeholder engagement strategy setting out how stakeholder professionals and families will shape the future design of children's services
- Information Technology
- Information governance and data confidentiality
- Estates, capital investment and medical equipment
- Human Resources and Legal services
- Commissioning, in particular contract negotiation and procurement
- Finance

***Wigan's additional resources:***

- **Wigan terms of reference for panels [please refer to Appendix 1]**

***Joint delivery (New)***

Delivery is the sharp end of joint commissioning as the strategies and plans come into action. **The delivery of jointly commissioned service could include maintaining existing provision, re-designing or decommissioning existing services, or procuring new or alternative provision.** The governance arrangements established should **enable them to track progress against the commitments** for delivering services made at the planning stage, **and resolve any disputes** that arise between partners.

### *Kent and Medway Case Study - 0-25 wheelchair service (New)*

Kent and Medway have a 0-25 wheelchair service that has been operating for a year to date. It came about as a result of working with the national advisory group for wheelchairs from a children's commissioning perspective and co-producing an effective local model of delivery with parent carers, disabled young people and a range of professionals from health, education, social care and the voluntary sector. The service specification includes the learning from both the Posture Mobility Group and the 'Future Economics' report into the effectiveness of the Whiz Kidz model developed in Tower Hamlets.

**CCGs in Kent and Medway wanted to commission a holistic approach to the provision of wheelchairs, repairs and maintenance** delivered by a lead provider, working collaboratively with the child / young person and family and other agencies to develop a multi-agency assessment of need and maximise the child's or young person's independence.

As one of its projects the new Kent multi-agency SEND Strategy has to look at the joint commissioning opportunities around the provision of wheelchairs on a case by case basis for particular groups of children. For instance a Year 6 child may have been able to maximise his / her independence with a manual chair in primary school, but on transition to secondary school will require either a teaching assistant to support them to go from class to class (because the child does not have the

Version 4.1, April 2014

physical strength to travel around the school) or a jointly commissioned powered chair (from £3.5K) that would deliver savings in the school and maintain his / her independence and mobility in all areas of the child's life. Also, there are joint commissioning opportunities linked to the provision of risers (enable a wheelchair user to go up or down). It would be far cheaper to jointly commission a wheelchair with a riser than spend capital funding adapting classrooms etc. to enable a wheelchair user to fully access the curriculum.

The work was important for them to enhance the clinical expertise in the children's and young people's pathway for wheelchair services through creating a 0-25 model. This has in turn enhanced the clinical expertise in the adult pathway (26+).

### *Wigan's examples of joint commissioning (New)*

Wigan has a number of examples of joint commissioning in practice (see box below) ranging from a multi-agency keyworking service to support families through the SEND process, through to services for children and young people with Autism and a redesign of CAMHs. This work is due to their integrated commissioning structure for children's services as well as the partnership with Bridgewater Community Healthcare Trust and has included professionals from healthcare disciplines (Nurses, Allied Health Professionals).

#### **Joint Commissioning examples:**

- Integrated personal budgets. Within our Personalisation and Personal Budgets work we were able to bring together three funding streams to allocate an integrated personal budget in support of an Education, Health and Care Plan.
- Multiagency key working team to support pilot families within Pathfinder.
- Substantial service redesign activity is also delivered jointly to develop an integrated model for targeted and specialist community child health services.
- Development of services for children and young people with Autism, including the joint funding of a Coordinator's post and a Parent Support and Short Breaks service following competitive tender.
- Children's Continuing Care packages are commissioned jointly by the LA and CCG following the Department of Health's National Framework.
- Redesign of CAMHs focusing on the most vulnerable children and young people, including enhanced psychological therapies model for those with long term conditions.
- Enhanced offer from Children's Community Nursing Team, including extended working hours to seven days a week, and a paediatric liaison model working jointly with the children's ward.

#### ***The Communication Trust: Speech Language Communication Needs (SLCN) Guidance (New)***

Through the 2014 SEND reforms, the central importance of joint commissioning for all SEND support has been really highlighted. In Speech Language Communication Needs (SLCN) provision, joint commissioning has been a focus for a long time.

In February 2014 The Communication Council facilitated a conference to support local and national decision makers in commissioning cost-efficient, effective SLCN provision in light of the SEND Reforms using the evidence gathered through the Better Communication Research Programme (BCRP).

The event supported commissioners to understand and plan for need locally, work in partnership to commission for improved outcomes and also looked at evidence based approaches to SLCN. The Communication Trust will be disseminating learning from this event via their website this spring. You can access the presentations from the event [here<sup>xxii</sup>](#) and a full write up will also be available on this page shortly.

#### **Better Communication Report**

Though produced before the reforms, **the Royal College of Speech and Language Therapists publication 'Better Communication'**

**provides a comprehensive review of good practice in commissioning for improved outcomes for children and young people with SLCN.** It includes a number of detailed case studies from areas with effective approaches to joint commissioning. The themes and practical examples running through this report are useful for any professional trying to get a better understanding of what makes for effective and joined up commissioning practice.

**The report can be accessed by clicking [here](#)<sup>xxiii</sup>.**

Another resource created before the 2014 reforms but which continue to have relevance in the current context are the **SLCN commissioning tools developed by the Commissioning Support Programme.**

Published in 2011, the tools provide **specific advice for commissioners and service providers to help improve both systems and services.** The advice and principles outlined in the tools remains pertinent, though the policy context has moved on.

**You can find out more and access the tools by clicking [here](#)<sup>xxiv</sup>.**

### *Schools as commissioners - A Chance to Talk Guidance (New)*

*A Chance to Talk* was a successful pilot initiative which improved the communication skills of 4-7 year olds in primary schools with impact on pupil outcomes. *A Chance to Talk* was developed, piloted and evaluated by I CAN, working with The Communication Trust, supported by the Every Child a Chance Trust. It **provides a model of commissioning support for all children's speech, language and communication across a cluster of primary schools.**

The model of support outlined by the project is pulled together for a schools audience in the document 'Guidance for schools commissioning services for SLCN'. The guide supports schools through the 'understand, plan, do and review' structured commissioning model to be aware of their increasing role in the commissioning of services and **presents an accessible outline of what schools will need to do and how they'll need to do it to commission effectively for SLCN provision.** This report is freely available though users are required to complete a short registration form to access it the first time. **You can find more information about the project and download the commissioning guidance by clicking [here](#)<sup>xxv</sup>.**



#### **Key outcomes of *A Chance to Talk*:**

- Children made, on average, 50% more progress in reading.
- Over 80% of the children with delayed language caught up with their peers.
- Children with delayed language made significant progress after the Talk Boost intervention in language tests. Gains ranged from between 9 and 18 months progress following the intervention.
- 100% of parents of children with SLCN were highly satisfied with the *A Chance to Talk* school-based model.

#### ***I CAN and SE7 Pathfinder Case Study - High Quality teaching: a minimum offer for children with SLCN (New)***

I CAN & SE7 have developed a minimum offer for children with SLCN to ensure high quality teaching. This has been summarised below:

**High-quality teaching is when all pupils are included so they can do well at school.**

This means:

- Pupils know and understand what is expected in the lesson – what they are going to learn but also how they should behave. So the rules for talking and working are made clear
- Staff are confident in supporting all children's learning and communication and in identifying those who have difficulties
- During the lesson, staff will point out what's going well e.g. "when Sammy was talking it was good that you looked at her to show you were listening". Praise can really motivate pupils if it is used well
- Staff tell pupils what next steps would be, for example "that was interesting information... it would be even better if you also told us how you worked that out"
- Staff will carefully explain new words and ideas, and check pupils have understood. They use charts, pictures, gestures – anything that helps pupils really understand.
- Teachers get the balance right between how much they talk, and how much pupils talk, and set up the lesson so that pupils talk to each other or in groups. This means pupils have time to think and are not pressurised by too much information.
- Teachers will also ask questions which help pupils to think, and demonstrate what helps, or suggest ways of learning or talking e.g. "I usually need time to think, and talk things through in my head" or "what you could say is 'can you say that again please?'".

- Pupils are encouraged to ask questions when they don't understand – the classroom is 'asking friendly'
- At the end of the lesson, pupils will know how they have done, and how they can make this better

Visit I CAN's Local Offer guidance page by [clicking here<sup>xxvi</sup>](#) to find more **practical ideas to include all pupils, and ways to change teaching practice so it helps pupils communicate and learn.**

### *Better Communication Research Programme - Involving children and young people and their families (New)*

The [Better Communication Research Programme<sup>xxvii</sup>](#) produced a report into the perspectives of children and young people who have speech, language and communication needs, and their parents. The report outlines essential information about the ways provision is most effective from the perspective of children and their families.

It presents a number of key findings around meaningful engagement with children, young people and their families at all stages of support and provision- from early identification through to pathways to independence and inclusion. Based on these key findings, the report lists a series of implications that services and professionals need to engage with to improve the meaningful involvement of children, young people and their families going forward.

### **Implications:**

- Practitioners need to check and make themselves aware of the perspectives of children and young people, particularly in terms of their views on their own social acceptance and emotional well-being.
- Understanding the perspectives of children and young people is also fundamental to the process of developing relevant, meaningful, functional and motivational targets that are shared with and by the children and young people.
- Parents need easy access to information about developmental indicators of speech, language and communication development and the factors which practitioners recognise as cause for concern.
- Prospective research is needed to investigate the early concerns of parents to inform our understanding of the early developmental trajectories of children with SLCN.
- Parents need better ongoing information, not just at the time of assessment of special educational needs, about what is happening with their child, who is seeing the child, and when.
- Parents also need improved information about the evidence underpinning intervention decisions so that they can be real partners in planning discussions and can make evidence based choices.
- Services should systematically collect evidence of children's and young people's outcomes that can be shared with parents;

importantly, the outcome data collected should reflect the concerns of parents.

- Research to investigate the effectiveness of interventions should include measures of outcomes relating to independence and inclusion.
- Since there will be differences of interpretation of the two higher level outcomes (independence and inclusion) for particular children and young people, an explicit discussion of the targeted outcomes for any intervention, whether in a practice or research context, should take place with children and young people and their parents.

**Download the report in full by clicking [here](#)<sup>xxviii</sup> and find out more about the Better Communication Research Programme by clicking [here](#)<sup>xxix</sup>.**

### *Joint review (New)*

Local authorities and their partners will need to maintain their ability to review their joint commissioning activities reflecting upon changes in needs and the impact upon outcomes. This process will be informed by the feedback from the local offer as well as parent/carer and professional feedback more generally. The governance arrangements should set out how the review process will be carried out.

### *Wigan's 'An Audience with....' Events (New)*

Wigan has set up a series of events promoted as an 'Audience with ...'. Two have been held in 2013 and there is a commitment to continue to host every 6 months and allow opportunity for parents and carers to raise questions with relevant health professionals.

Wigan Parent Partnership and Participation Service maintain a SENDS (Special educational and Disability) data base with almost 900 families registered. 480 families have provided and consented to contact via email. It was possible therefore to invite questions and attendance of 480 families.

Submission of questions was not dependent on ability to attend the meeting and vice versa, parents could attend without having to submit a question.

Parents were encouraged to submit questions in advance to allow sufficient time for Health professionals to consider and provide a response on the day. Issues to date have largely focused on continence service and products, wheelchair services, and improving effectiveness of medical appointments.

The events were promoted and facilitated by Parent Partnership and Participation Service and health representation has included the Children's Service Manager for Targeted and Specialist Commissioning from Wigan Borough CCG, (CYPS) Integrated Families Manager and the Head of Continence Services from Bridgewater NHS.

**Key Outcomes:**

- Questions and issues raised and the responses provided were circulated via the Data hub following the events.
- As a result of the discussions at the events, it was agreed to run a pilot around personal budgets for continence products and work is ongoing to trial and evaluate this from a service user and service provider perspective.
- Health have committed to participating in these events every 6 months as part of their ongoing review.

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<sup>i</sup> SEND Pathfinder website available at [www.sendpathfinder.co.uk](http://www.sendpathfinder.co.uk)

<sup>ii</sup> Children and Families Act 2014, Section 25 'Promoting Integration' and Section 26 'Joint Commissioning arrangements'. The Children and Families Act 2014 can be accessed via the following link: <http://www.legislation.gov.uk/ukpga/2014/6/contents/enacted>

<sup>iii</sup> The updated draft Special Education Needs (SEN) Code of Practice: for 0 to 25 years can be accessed via the following link:

<https://www.education.gov.uk/consultations/downloadableDocs/SEN%20Code%20of%20Practice1.pdf>

<sup>iv</sup> Consultation on transition to Education, Health and Care plans and the local offer:

[https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/251879/SEN\\_-\\_Transitional\\_arrangements\\_document.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/251879/SEN_-_Transitional_arrangements_document.pdf)

<sup>v</sup> Implementing the 0 to 25 special needs system: advice for local authorities and health partners, April 2014.

[https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/301779/Implementing\\_a\\_new\\_0\\_to\\_25\\_special\\_needs\\_system\\_LAs\\_and\\_partners\\_-\\_April\\_2014\\_v2.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/301779/Implementing_a_new_0_to_25_special_needs_system_LAs_and_partners_-_April_2014_v2.pdf)

<sup>vi</sup> Draft Special Educational Needs (SEN) Code of Practice: for 0 to 25 years

[https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/251839/Draft\\_SEN\\_Code\\_of\\_Practice\\_-\\_statutory\\_guidance.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/251839/Draft_SEN_Code_of_Practice_-_statutory_guidance.pdf)

<sup>vii</sup> Consultation on DRAFT 0-25 Special Educational Needs (SEN) Code of Practice, Regulations and Transitional Arrangements, Section 4.1 -

[https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/251832/SEN\\_consultation\\_document.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/251832/SEN_consultation_document.pdf)

<sup>viii</sup> Implementing the 0 to 25 special needs system: advice for local authorities and health partners, April 2014.

[https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/301779/Implementing\\_a\\_new\\_0\\_to\\_25\\_special\\_needs\\_system\\_LAs\\_and\\_partners\\_-\\_April\\_2014\\_v2.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/301779/Implementing_a_new_0_to_25_special_needs_system_LAs_and_partners_-_April_2014_v2.pdf)

<sup>ix</sup> Implementing the 0 to 25 special needs system: advice for local authorities and health partners, April 2014.

[https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/301779/Implementing\\_a\\_new\\_0\\_to\\_25\\_special\\_needs\\_system\\_LAs\\_and\\_partners\\_-\\_April\\_2014\\_v2.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/301779/Implementing_a_new_0_to_25_special_needs_system_LAs_and_partners_-_April_2014_v2.pdf)

<sup>x</sup> Page 8 (number 15) Implementing the 0 to 25 special needs system: advice for local authorities and health partners, April 2014.

[https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/301779/Implementing\\_a\\_new\\_0\\_to\\_25\\_special\\_needs\\_system\\_LAs\\_and\\_partners\\_-\\_April\\_2014\\_v2.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/301779/Implementing_a_new_0_to_25_special_needs_system_LAs_and_partners_-_April_2014_v2.pdf)

<sup>xi</sup> Children and Families Act 2014, Section 26 'Joint Commissioning arrangements'. The Children and Families Act 2014 can be accessed via the following link:

<http://www.legislation.gov.uk/ukpga/2014/6/contents/enacted>

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- <sup>xii</sup> Draft Special Educational Needs (SEN) Code of Practice: for 0 to 25 years  
[https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/251839/Draft\\_SEN\\_Code\\_of\\_Practice\\_-\\_statutory\\_guidance.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/251839/Draft_SEN_Code_of_Practice_-_statutory_guidance.pdf)
- <sup>xiii</sup> The Draft Special Education Needs (SEN) Code of Practice: for 0 to 25 years can be accessed via the following link (p.28):  
[https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/251839/Draft\\_SEN\\_Code\\_of\\_Practice\\_-\\_statutory\\_guidance.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/251839/Draft_SEN_Code_of_Practice_-_statutory_guidance.pdf)
- <sup>xiv</sup> The Draft Special Education Needs (SEN) Code of Practice: for 0 to 25 years can be accessed via the following link (p.30):  
[https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/251839/Draft\\_SEN\\_Code\\_of\\_Practice\\_-\\_statutory\\_guidance.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/251839/Draft_SEN_Code_of_Practice_-_statutory_guidance.pdf)
- <sup>xv</sup> The Draft Special Education Needs (SEN) Code of Practice: for 0 to 25 years can be accessed via the following link (p.30):  
[https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/251839/Draft\\_SEN\\_Code\\_of\\_Practice\\_-\\_statutory\\_guidance.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/251839/Draft_SEN_Code_of_Practice_-_statutory_guidance.pdf)
- <sup>xvi</sup> Link to UK Parliament website <http://services.parliament.uk/bills/2013-14/childrenandfamilies.html>
- <sup>xvii</sup> SEND Pathfinder website available at [www.sendpathfinder.co.uk](http://www.sendpathfinder.co.uk)
- <sup>xviii</sup> Rochdale's Joint Commissioning Strategy Children's Services 2013-2015, available at  
[http://democracy.rochdale.gov.uk/documents/s16955/Report\\_Childrens%20Joint%20Commissioning.pdf?sm\\_au=iHVgkN6tWJ5nrVWj](http://democracy.rochdale.gov.uk/documents/s16955/Report_Childrens%20Joint%20Commissioning.pdf?sm_au=iHVgkN6tWJ5nrVWj)
- <sup>xix</sup> Rochdale's Health & Wellbeing Strategy, available at [http://www.hmr.nhs.uk/attachments/article/81/jointhealthwellbeingstrategy12-15.pdf?sm\\_au=iHVgkN6tWJ5nrVWj](http://www.hmr.nhs.uk/attachments/article/81/jointhealthwellbeingstrategy12-15.pdf?sm_au=iHVgkN6tWJ5nrVWj)
- <sup>xx</sup> Rochdale's Joint Commissioning Strategy Children's Services 2013-2015, available at  
[http://democracy.rochdale.gov.uk/documents/s16955/Report\\_Childrens%20Joint%20Commissioning.pdf?sm\\_au=iHVgkN6tWJ5nrVWj](http://democracy.rochdale.gov.uk/documents/s16955/Report_Childrens%20Joint%20Commissioning.pdf?sm_au=iHVgkN6tWJ5nrVWj)
- <sup>xxi</sup> Rochdale Council 2013-15 Joint Commissioning Strategy for Children's Services, available at  
[http://democracy.rochdale.gov.uk/documents/s16955/Report\\_Childrens%20Joint%20Commissioning.pdf?sm\\_au=iMVbZHHqM9qsn4SR](http://democracy.rochdale.gov.uk/documents/s16955/Report_Childrens%20Joint%20Commissioning.pdf?sm_au=iMVbZHHqM9qsn4SR)
- <sup>xxii</sup> The Communications Trust's 'Preparing for September 2014: Commissioning through the prism of speech, language and communication needs' event materials and links, available at [http://www.thecommunicationtrust.org.uk/about-the-trust/what-do-we-do/send-reforms/support-around-joint-commissioning-for-slcncfebruary-2014-conference/?sm\\_au=iMVbZHHqM9qsn4SR](http://www.thecommunicationtrust.org.uk/about-the-trust/what-do-we-do/send-reforms/support-around-joint-commissioning-for-slcncfebruary-2014-conference/?sm_au=iMVbZHHqM9qsn4SR)
- <sup>xxiii</sup> The Communication Trust's 'Better Communication: Shaping speech, language and communication services for children and young people' report, available at:  
[http://www.thecommunicationtrust.org.uk/media/17889/better\\_communication\\_report\\_-\\_rcslt\\_and\\_jean\\_gross.pdf](http://www.thecommunicationtrust.org.uk/media/17889/better_communication_report_-_rcslt_and_jean_gross.pdf)
- <sup>xxiv</sup> The Communication Trust's SLCN Commissioning Tools, available at <https://www.thecommunicationtrust.org.uk/commissioners/slcncommissioning-tools.aspx>
- <sup>xxv</sup> I CAN's A Chance To Talk Pilot webpage, available at [http://www.ican.org.uk/achancetotalk?sm\\_au=iMVbZHHqM9qsn4SR](http://www.ican.org.uk/achancetotalk?sm_au=iMVbZHHqM9qsn4SR)
- <sup>xxvi</sup> I CAN's Local Offer guidance, available at <http://www.ican.org.uk/localoffer>

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<sup>xxvii</sup> Better Communication Research Programme webpage, available at [http://www2.warwick.ac.uk/fac/soc/cedar/better/?\\_sm\\_au=iMVbZHHqM9qsn4SR](http://www2.warwick.ac.uk/fac/soc/cedar/better/?_sm_au=iMVbZHHqM9qsn4SR)

<sup>xxviii</sup> Department for Education Report: 'The perspectives of children and young people who have speech, language and communication needs, and their parents', available at [https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/219633/DFE-RR247-BCRP7.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/219633/DFE-RR247-BCRP7.pdf)

<sup>xxix</sup> Better Communication Research Programme webpage, available at [http://www2.warwick.ac.uk/fac/soc/cedar/better/?\\_sm\\_au=iMVbZHHqM9qsn4SR](http://www2.warwick.ac.uk/fac/soc/cedar/better/?_sm_au=iMVbZHHqM9qsn4SR)

# Glossary

Term	Meaning
CoP	Code of Practice
CCG	Clinical Commissioning Group
CYP	Children and Young People
DH/DoH	Department of Health
EHC plan	Education, Health, and Care plan
ES	Early Support
FE	Further Education
FIS	Family Information Service
FSD	Family Services Directory
ISP	Independent Specialist Provider
Joint Commissioning	Commissioning arrangements that are coordinated or integrated across agencies or groups
JSNA	Joint Strategic Needs Assessment
LA	Local Authority
LDA	Learning Difficulty Assessment
NEET	Not in Education, Employment or Training
Personal Budgets Accelerated Testing Group	A group of the SEND Pathfinders asked to produce a set of case studies on work with families who have received SEN Personal Budgets.
PfA	Preparing for adulthood (both the theme and DfE SEND Delivery Partner - <a href="http://www.preparingforadulthood.org.uk/">http://www.preparingforadulthood.org.uk/</a> )
SE7	South East 7 – a consortium of 7 local areas in the South East of England, acting as a SEND Pathfinder.
SEN	Special Educational Needs
SENCo	SEN Coordinator (based in educational settings)
SEND	Special Educational Needs and Disability
VCS	Voluntary and Community Sector



# RESOURCES

In addition to the resources outlined within the information packs, below are links to additional resources linked to the SEND Pathfinder Programme.

**Support offer available to local authorities and their partners in 2014-15 to help prepare for implementation of the SEND reforms:** On 8 April 2014, Edward Timpson (Parliamentary Under-Secretary of State for Children and Families) and Dr Dan Poulter (Parliamentary Under-Secretary of State at the Department of Health) [wrote to local authority and health leaders](#) with further information on transition arrangements in relation to the reforms. The Department for Education and Department of Health also recently published an updated [implementation pack](#) which outlines the vision for the reforms and contains useful information for strategic leaders.

**Strategic Reform Partner - Council for Disabled Children (CDC):** The Council for Disabled Children (CDC) is the umbrella body for the disabled children's sector in England, with links to other UK nations, bringing together the diverse range of organisations that work with and for disabled children to support the development and implementation of policy and practice. CDC has developed a number of useful resources which can be found on their website via the following link <http://www.councilfordisabledchildren.org.uk/resources/cdcs-resources>

**SEND Pathfinder Support Team (Mott MacDonald)** – Further information and case studies, together with details of the pathfinder champions, are available at [www.sendpathfinder.co.uk](http://www.sendpathfinder.co.uk)

## **Department for Education (DfE) SEND Delivery Partners:**

There are seven Delivery Partners focusing on the following areas:

- **The Bond consortium:** child mental health - [http://www.youngminds.org.uk/training\\_services/bond](http://www.youngminds.org.uk/training_services/bond)
- **The Early Language Consortium:** early language development - <http://eldp.talkingpoint.org.uk/>
- **The ES Trust with the National Children's Bureau:** early support and key working - <http://ncb.org.uk/early-support>
- **Contact a Family and the National Network of Parent Carer Forums (NNPCF):** parent participation - <http://www.nnpcf.org.uk/> & <http://www.cafamily.org.uk/>
- **The National Parent Partnership Network:** supporting Parent Partnership Services - <http://www.parentpartnership.org.uk/>
- **The National Development Team for Inclusion the Council for Disabled Children and Helen Sanderson Associates (Preparing for Adulthood):** preparing for adulthood - <http://preparingforadulthood.org.uk/>
- **The IMPACT consortium:** short breaks delivery - <http://www.shortbreaksnetwork.org.uk/policyandpractice/impact>

***Achievement for All***, a school improvement approach that was piloted in ten local authorities from 2009 - 2011, is also being rolled out nationally - <http://www.afa3as.org.uk/>

***Additional DfE-funded SEND Organisations referenced in these packs:***

***VIPER:*** VIPER is a three year project, funded by the Big Lottery to research disabled children and young people's participation in decision-making about local services with the aim of improving services used by disabled children and young people in England. The website can be accessed here: <http://www.councilfordisabledchildren.org.uk/viper>

***EPIC:*** EPIC are a group of 16 disabled young people from across the country who are supported by the Council for Disabled Children to advise the Department for Education on changes to the special educational needs and disabilities (SEND) system. Their website can be accessed here: <http://www.councilfordisabledchildren.org.uk/epic>

***In Control:*** In Control is a DfE SEND Grant Holder, is a charity supporting organisations implement personalisation. They are one of the organisations supporting the SEN Personal Budgets Accelerated Testing Group - <http://www.in-control.org.uk/>

***The Communication Trust:*** The Communication Trust is a coalition of nearly 50 VCS organisations with expertise in speech, language and communication - <https://www.thecommunicationtrust.org.uk>

***The Dyslexia SPLD Trust:*** The Dyslexia-SpLD-Trust is a collaboration of voluntary and community organisations with funding from the Department for Education to provide reliable information to parents, teachers, schools and the wider sector. It acts as the important communication channel between government, leading dyslexia organisations, parents, schools, colleges, teachers and the sector- <http://www.thedyslexia-spldtrust.org.uk/>