



Implementing the SEND Code of Practice (0-25)

Implications for SLCN

Marie Gascoigne
19th June, 2015

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2005
General
Election

2015
General
Election

- RCSLT Position Paper 2006
- Universal, targeted and specialist
- Pooled or aligned budgets

ECM (2003)

2001
General
Election

Better
Communication
Action Plan (2008)

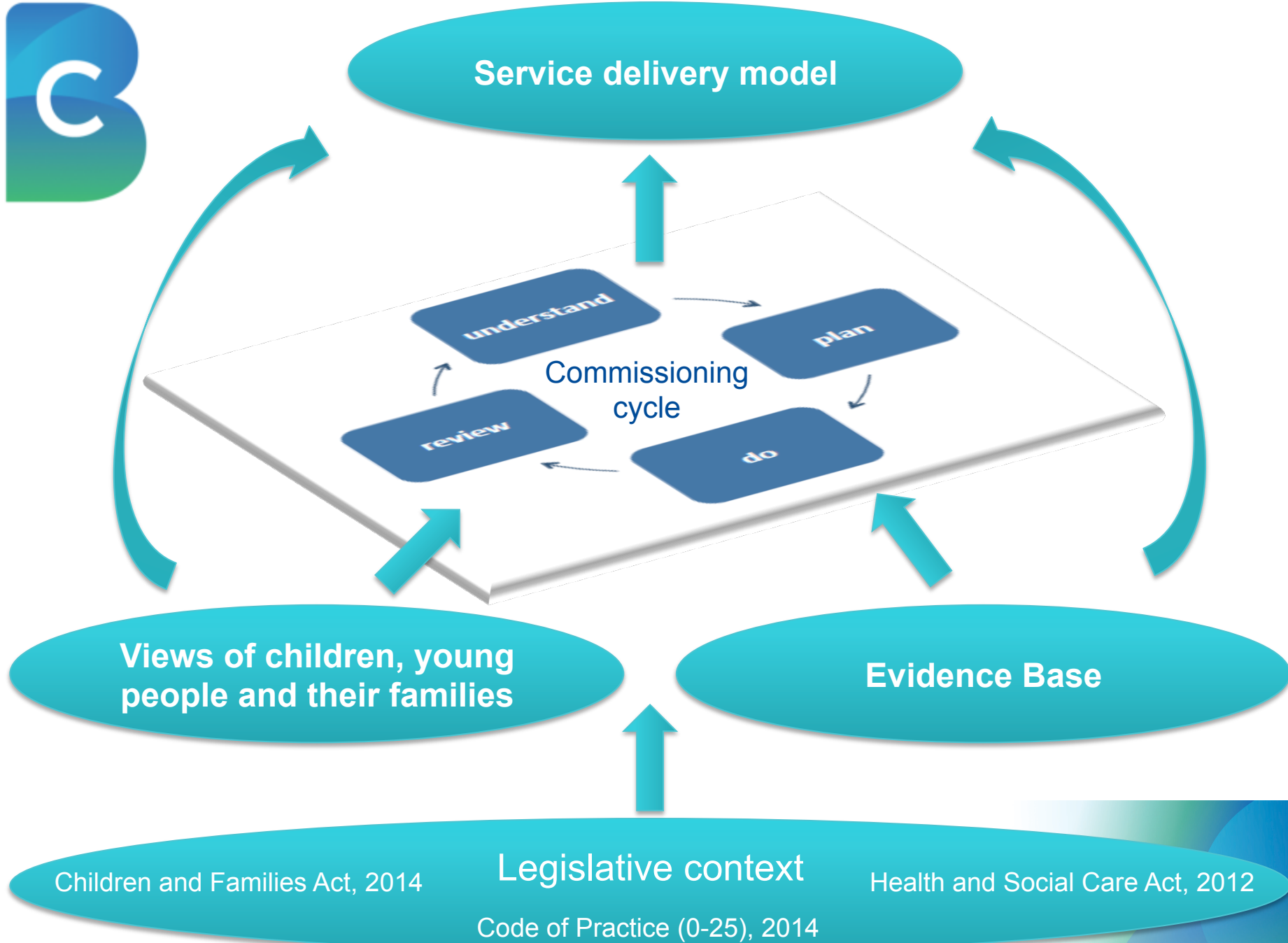
- Bercow Review (2008)
- Better Communication Research Programme (2012)

2010
General
Election

- SEND Code of Practice 0-25 (2014)
- Communicate the Code (2015)
- RCSLT Guidance (2015 in progress)
- Guide to Commissioning using evidence from the BCRP (2015 in progress)

Children Act 2014

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SEND Code of Practice: 0-25 years

- Statutory guidance

“for organisations who work with and support children and young people with special educational needs and disabilities”

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local authorities

the governing bodies of
schools and FE Colleges

the management
committees of pupil
referral units

Youth Offending Teams and relevant
youth custodial establishments

the proprietors of academies (including free
schools, University Technical Colleges and
Studio Schools

independent schools and independent specialist
providers approved under section 41 of the
Children and Families Act 2014

clinical commissioning groups (CCGs)

all early years providers in the
maintained, private, voluntary and
independent sectors that are funded by
the local authority

The First-tier Tribunal
(special educational
needs and disability)

the NHS Commissioning Board

NHS Trusts & NHS Foundation
Trusts & Local Health Boards

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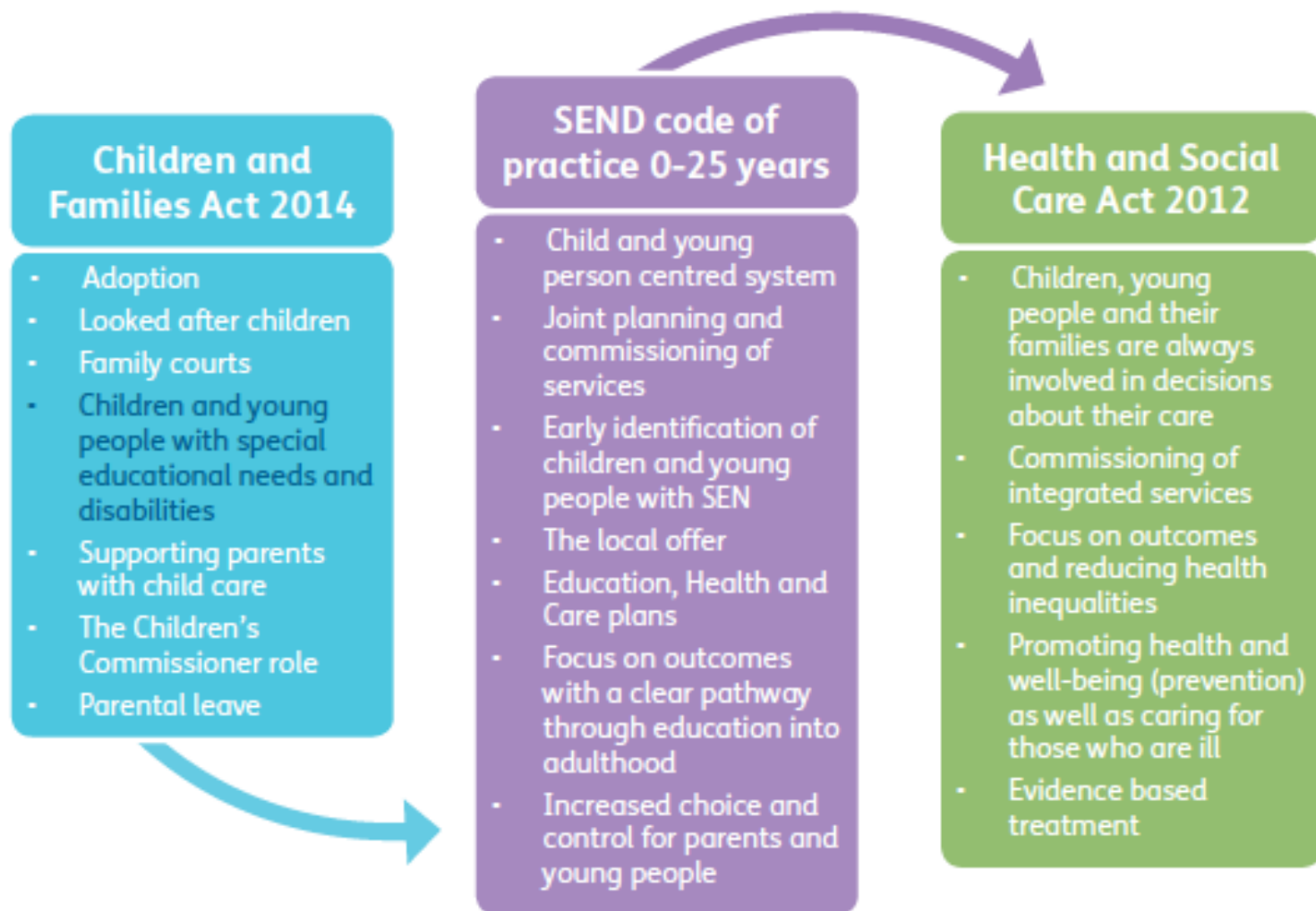


Figure 2: The common strands across education and health legislation



In the context of..

- Health and Social Care Act (2012)
 - Creation of GP led Clinical Commissioning Groups
 - Creation of Health and Wellbeing Boards to develop Joint Strategic Needs Strategies
 - Increased emphasis on Foundation Trusts

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And...

- Education Act, 2011
 - Establishment of Free Schools
 - New definition of Academy
 - Increased delegation of funding to schools
 - Schools as ‘commissioners’
 - Decreased maintenance of central LEA type functions including learning support services

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Children and Families Bill, 2014

- SEND Code of Practice 0-25
- Responsibility on LA and local Health structures for joint commissioning for those with SEND with EHCP and without EHCP
- Increased use of personal budgets
- LAs have responsibility to define the 'Local Offer' of provision
- Schools have responsibility to publish school information report online

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SEND Code of Practice 0-25

- Views of child or young person must be considered central to decision making
- Family centred system
- Joint commissioning across education, health and social care
- Local Offer
- Requirements of early years, schools, colleges and other education and training providers
- Assessments and EHC Plans
- Children and young people in specific circumstances
- Resolving disputes

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Key messages for SLCN

- The local offer and details published by schools about the SEN support they provide will be key to ensuring the full range of provision is jointly commissioned to meet the full range of SLCN
- Commissioners and providers need to be aware that speech and language therapy is almost always going to be special educational provision. The 2014 SEND code of practice 0-25 is clear that speech and language therapy will be special educational provision where it 'educates or trains' a child. This will be the default position. Cases where speech and language therapy is not special educational provision will be the exception.
- Clinical Commissioning Groups (CCGs) and Local Authorities need to share responsibility for SLCN across the range of provision and across the age range – for example ensuring the appropriate training for early identification as well as delivery of specialist interventions
- Schools need to understand their key role as commissioners of support for SLCN and how this interfaces with the local offer

Gascoigne, M.T. (2014)

“Implementing the SEND reforms: Joint Commissioning for children and young people with SLCN”

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Definition of SEN

- Have a significantly greater difficulty in learning than the majority of others of the same age

Or

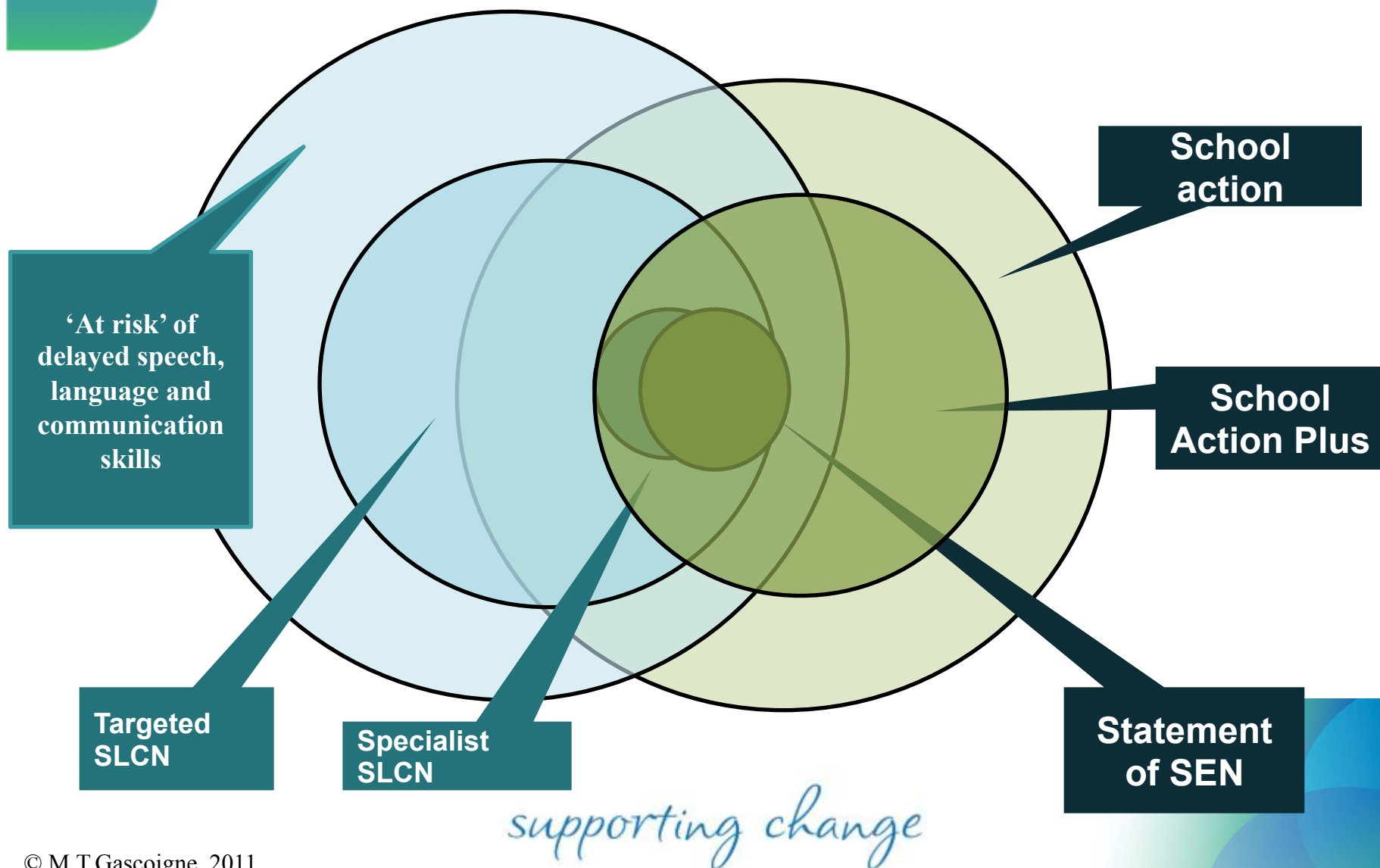
- Have a disability which prevents or hinders them from making use of educational facilities of a kind generally provided for others of the same age in mainstream schools or mainstream post 16 institutions
- Where a child or young person has a disability or health condition which requires special educational provision to be made, they will be covered by the SEN definition

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SLCN

SEN





SLCN

SEN

‘At risk’ of
delayed speech,
language and
communication
skills

Targeted
SLCN

Specialist
SLCN

School
Support

EHC Plan

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“Speech and language therapy must be treated as special educational provision where it ‘educates or trains’ a child unless there are exceptional reasons for not doing so”

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Impact for SLCN

- Child or young person views are central
 - Issues of participation in the process
 - BCRP evidence suggests that child and family desired outcomes are not always aligned
 - Professional view of desired outcomes often different again!

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Impact for SLCN

- Outcomes focus
 - Need to ensure that outcomes are what is identified and not inputs or processes
 - Outcomes need to be SMART
 - Different contributions will be essential to achieving a single outcome
 - Therefore outcomes cannot be agreed unilaterally

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Impact for SLCN

- EHC Plans
 - Can be in place up to 25th birthday
 - Duty on health to jointly commission for health needs
 - SLT needs will typically sit in section B and only less commonly in section C
 - Personalised budgets and direct payments

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Impact for SLCN

- The Local Offer
- LA must publish a local offer, setting out in one place information about provision they expect to be available for children and young people in their area who have SEN, ***including those who do not have*** EHC plans
- Must include,
 - Universal
 - Targeted
 - Specialist

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Impact on SLCN

- Crucial for the local offer to outline the best 'what good looks like'
- SLT continues to be vulnerable to being caught in the crossfire
- The contribution to all relevant outcomes for CYP with SLCN from all areas of the workforce need to be set out

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10 principles of a Local Offer in relation to SLCN:

A Local Offer should:

1. Enable families to easily locate what universal services are available for children and young people with SLCN.
 2. Enable families to easily locate what targeted services are available for children and young people with SLCN.
 3. Enable families to easily locate what specialist services are available for children and young people with SLCN and whether these services are available to be purchased if the family is in receipt of a personal budget.
 4. Enable families to easily locate what other resources are available or accessible within the community which may be of assistance to children and young people with SLCN, but are not funded by either the local statutory services or by personal budgets.
 5. Enable parents, young people and children with SLCN to engage with the local authority and local Clinical Commissioning Group (CCG) as they commission services.
- A good Local Offer for children and young people with Speech, Language & Communication Needs (SLCN) will include:
6. Speech, Language and Communication as a major topic within the Local Offer, which is easily found by families.
 7. A comprehensive section for families who are concerned about their child's speech, language or communication.
 8. A comprehensive offer of early intervention available for children and young people with SLCN.
 9. A description as to how services will work together jointly for children and young people with SLCN.
 10. Quality resources that are consistent across the Local Authority and can be accessed equally by families across the Local Authority.
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The Communication Trust (2015) Communicating the Code

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What does success look like?



From a practitioner's point of view:

- Our Local Authority has forged good connections across health, education and social care.
- We feel that our Commissioners know our local population and its needs.
- Commissioners respond to changes in provision required.
- We have effective models of service provision commissioned.
- Targeted and universal services are commissioned alongside specialist SLT provision.





Impact on SLCN

- Joint Commissioning
 - Requirement for joint commissioning arrangements overseen by Health and Wellbeing Board
 - JSNA key to informing the process
 - Provision to deliver EHCPs and the Local Offer must be jointly commissioned

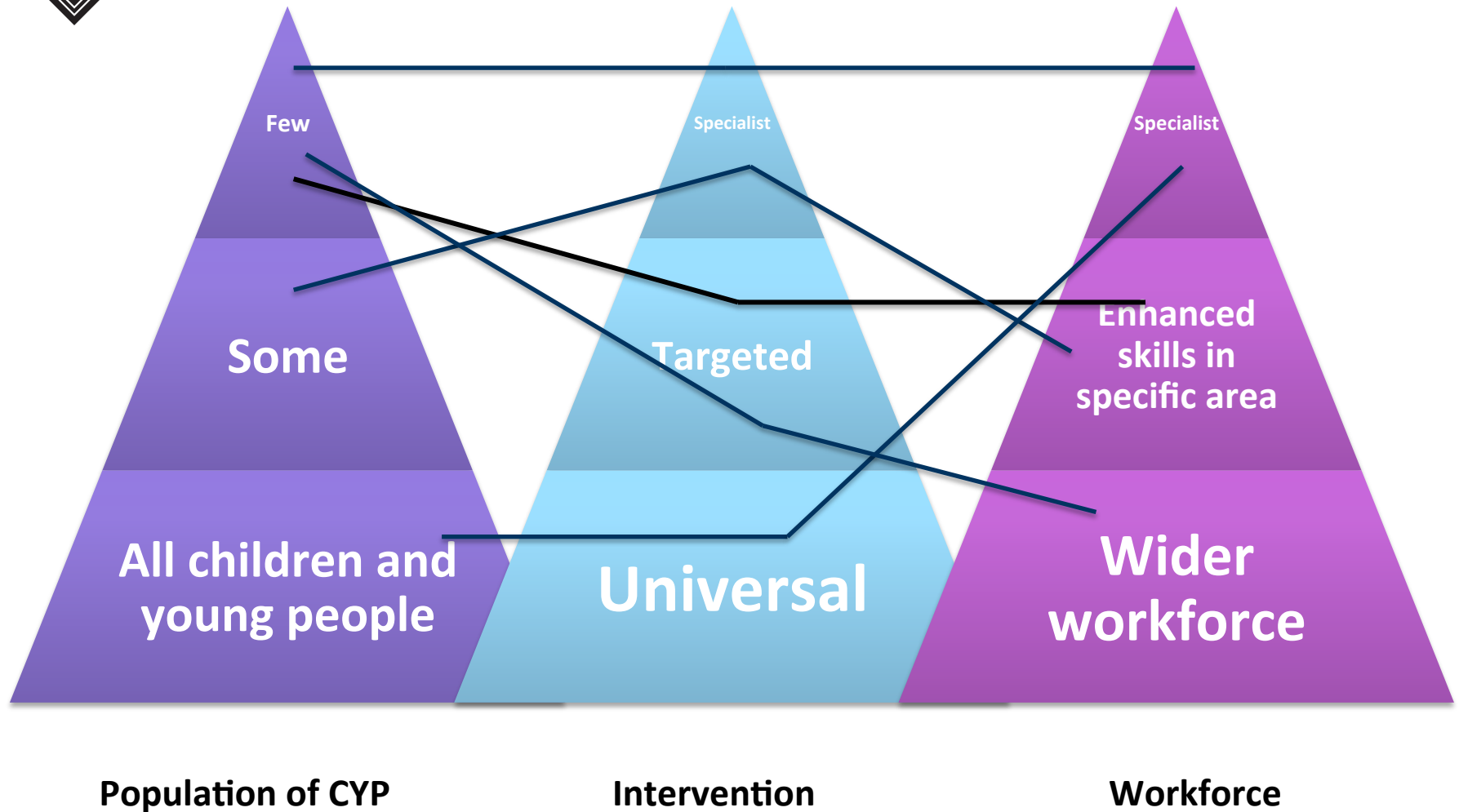
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SUMMARY OF KEY MESSAGES FOR COMMISSIONERS FROM THE BETTER COMMUNICATION RESEARCH PROGRAMME



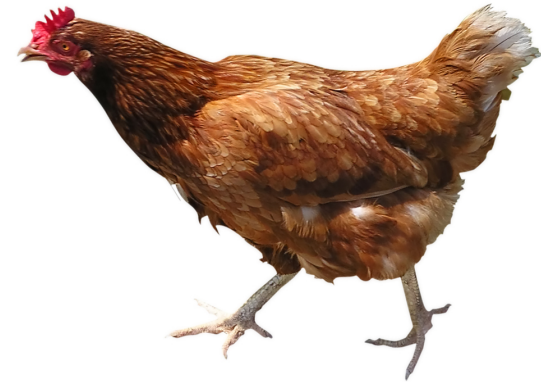
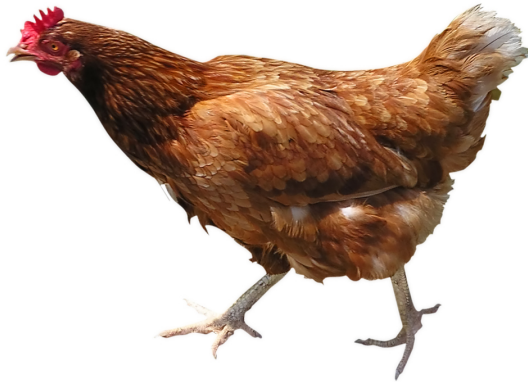


RELATIONSHIP BETWEEN POPULATION, INTERVENTION AND WORKFORCE





Commissioning specification,
outcome measures or service model
which comes first?



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Opportunities for SLCN

- Joint commissioning has the potential to address the multi-agency, multi-disciplinary barriers and put the child or young person at the centre of the workforce and provision
- There are clearer accountabilities for ensuring provision is made
- The roles of schools and settings as partners is clear

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Risks

- A degree of ambiguity remains around the provision of SLT within the range of provisions required to meet SLCN
- The austerity agenda continues to challenge
- The Local Offer is currently highly variable

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- Better Communication CIC is a not-for-profit organisation supporting change for children and young people by working with commissioners, providers and schools to improve services

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