Strategic review of support, services and provision for children and young people with high needs in Wiltshire

Final report

Summer 2019

ISOS partnership

Wiltshire Council
Where everybody matters

Introduction

Background to the review

- In the spring of 2019, Wiltshire Council commissioned an independent strategic review of support, services and provision for children and young people with special educational needs (SEND) and high needs. This was prompted by growing pressure on the high needs block (the stream of funding within the Dedicated Schools Grant for the local area to support children and young people with high needs), and the need to develop a new, shared strategic approach to ensuring this collective resource is used to best effect to support young people within additional needs in Wiltshire.

- The review was led by Ben Bryant (from Isos Partnership, an independent research and advisory organisation, with a track-record of carrying out national research and fast-paced reviews of inclusion and SEND) and Karina Kulawik (an independent consultant specialising in inclusion and SEND). They were supported by Beth Swords (Isos).

Scope of the review

- This was a strategic review, with a focus on how well the current arrangements in Wiltshire supported children and young people with SEND and high needs, and what was needed to build a shared strategy for the future. The review was not intended to provide an "inspection" of aspects of day-to-day operational practice in Wiltshire.

- When we talk about "the local system of support, services and provision for children and young people with SEND and high needs", we mean –

  - ✓ children and young people aged from birth to 25 (referred to as 'young people' in this report for brevity);

  - ✓ arrangements to support them that include support in mainstream education settings and universal services, targeted services to support inclusion and specific needs, and specialist provision; and

  - ✓ support that is provided from a range of agencies including education, health and care.

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Introduction

Aims of the review

- The aims of the review were to:

  1. build an evidence base and collective understanding of how effectively the local system supports young people with SEND and high needs;

  2. engage a broad range of partners to build consensus, harness collective expertise and shape solutions; and

  3. work co-productively to develop a shared strategic approach for the future.

Our approach

- We approached the work in three distinct phases.

  ✓ Phase 1: Initial scoping (Jan-Mar 2019) – we undertook some desk-based work to review key data (published national datasets and internal data) and local strategic documents to build up a picture of the current context in Wiltshire and identify themes to explore further through further evidence-gathering activities.

  ✓ Phase 2: In-depth evidence-gathering (Apr-May 2019) – we undertook a range of visits and individual conversations with schools, early years settings and key services, workshops with parents and carers, and discussions with strategic leaders from the local authority (LA). We also undertook an online survey, which was completed by 56 parents / carers (referred to as 'parents' in this report) and 160 professionals.

  ✓ Phase 3: Testing findings and shaping recommendations (June-July 2019) – we facilitated five workshops for parents, professionals and strategic leaders to share and test our findings and shape recommendations.

- We are grateful to all colleagues who have contributed to this review, both in terms of sharing their perspectives and helping to shape solutions. We hope the process of the review and this summary report provide the foundation for a robust and effective shared strategy for supporting young people with SEND and high needs in Wiltshire.

Contents of this report

Part 1: The current context of support for young people with SEND and high needs in Wiltshire
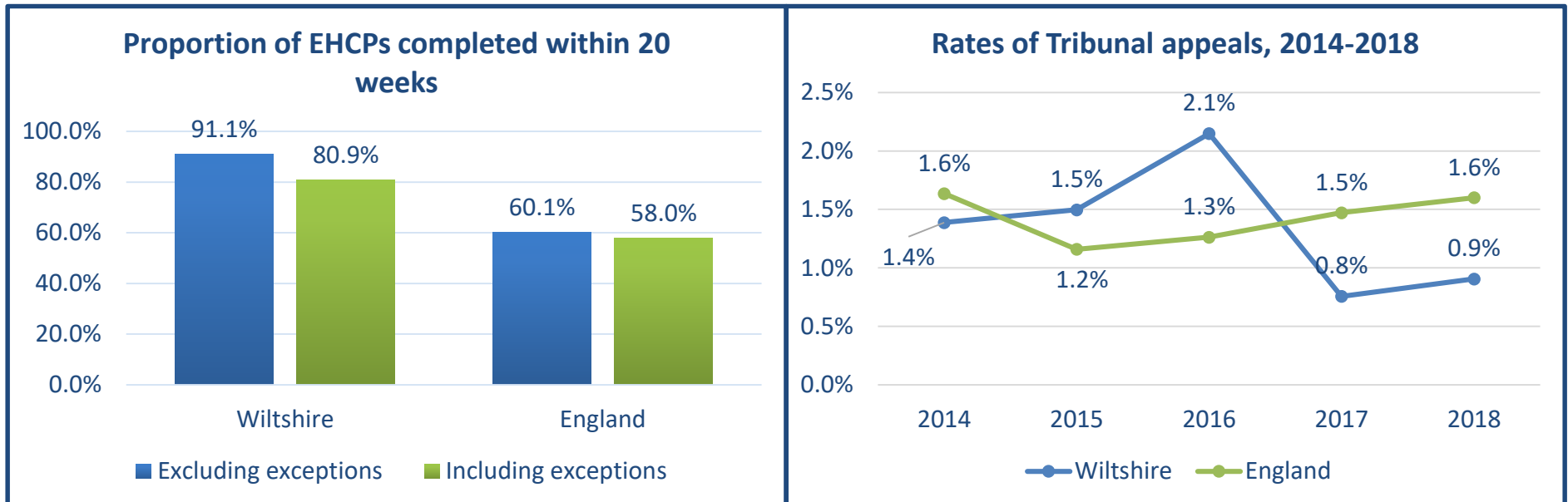
Part 2: Six themes that this review has explored – key findings and recommendations

Part 3: Implications for the use of the high needs block

Conclusion: Overarching messages and taking this agenda forward

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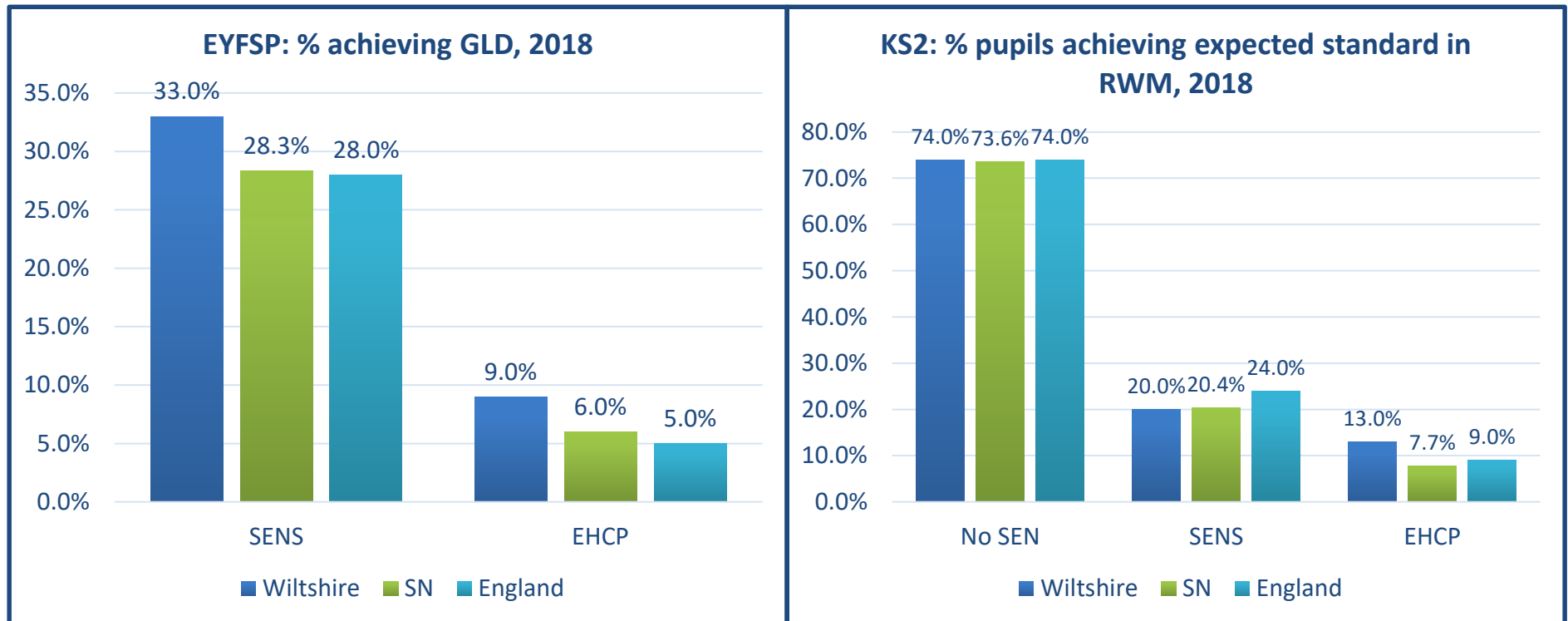# Part 1: Current context – (a) system performance and outcomes

In this section, we provide a brief overview of the local system in Wiltshire, with key points drawn from internal and published data. This provides the context for the findings from this review, while also allowing us to benchmark Wiltshire against similar local areas and national trends. We have structured this section into three main areas: (a) system performance and outcomes, (b) the level and profile of need, and (c) resources and the financial context.

Proportion of EHCPs completed within 20 weeks

- Excluding exceptions
- Including exceptions

Wiltshire: 91.1% (Excluding exceptions), 80.9% (Including exceptions)
England: 60.1% (Excluding exceptions), 58.0% (Including exceptions)

Rates of Tribunal appeals, 2014-2018

Wiltshire: 1.4% (2014), 1.5% (2015), 2.1% (2016), 0.8% (2017), 0.9% (2018)
England: 1.6% (2014), 1.2% (2015), 1.3% (2016), 1.5% (2017), 1.6% (2018)

Wiltshire completes a high proportion of EHCPs within 20 weeks – over nine in 10 excluding exceptions, and eight in 10 including exceptions. This is an important foundation for a local SEND system. Wiltshire also has a low rate of appeals to the Tribunal – both in absolute and proportionate terms, appeals and mediations have fallen since a peak in 2016. Tribunal appeals have fallen from 57 in 2016 to 25 in 2018. At the same time, the number of so-called "appealable decisions" (statutory assessments refused, decisions not to issue education, health & care plans (EHCPs), numbers of plans, numbers of plans ceased) in Wiltshire has increased from 2,018 in 2014 to 3,422 in 2018.

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Part 1: Current context – (a) system performance and outcomes

EYFSP: % achieving GLD, 2018

- SENS: Wiltshire 33.0%, SN 28.3%, England 28.0%
- EHCP: Wiltshire 9.0%, SN 6.0%, England 5.0%

■ Wiltshire ■ SN ■ England

KS2: % pupils achieving expected standard in RWM, 2018

- No SEN: Wiltshire 74.0%, SN 73.6%, England 74.0%
- SENS: Wiltshire 20.0%, SN 20.4%, England 24.0%
- EHCP: Wiltshire 13.0%, SN 7.7%, England 9.0%

■ Wiltshire ■ SN ■ England

Children in the early years and primary-age pupils with SEND achieve well in Wiltshire compared to the averages of similar LAs (statistical neighbours, abbreviated to 'SN' above) and across England. A higher proportion of children with SEN support (SENS) and EHCPs achieve a good level of development (GLD) in the early years foundation stage profile (EYFSP) than their peers in similar LAs and nationally. Similarly, a higher proportion of pupils with EHCPs achieved expected standards in reading, writing and maths (RWM) at Key Stage 2 (KS2) than their peers (although a smaller proportion of those with SENS achieved the expected standard than is the case nationally). Primary pupils with SEN also make more progress in reading, writing and maths at KS2 than their peers in other areas.
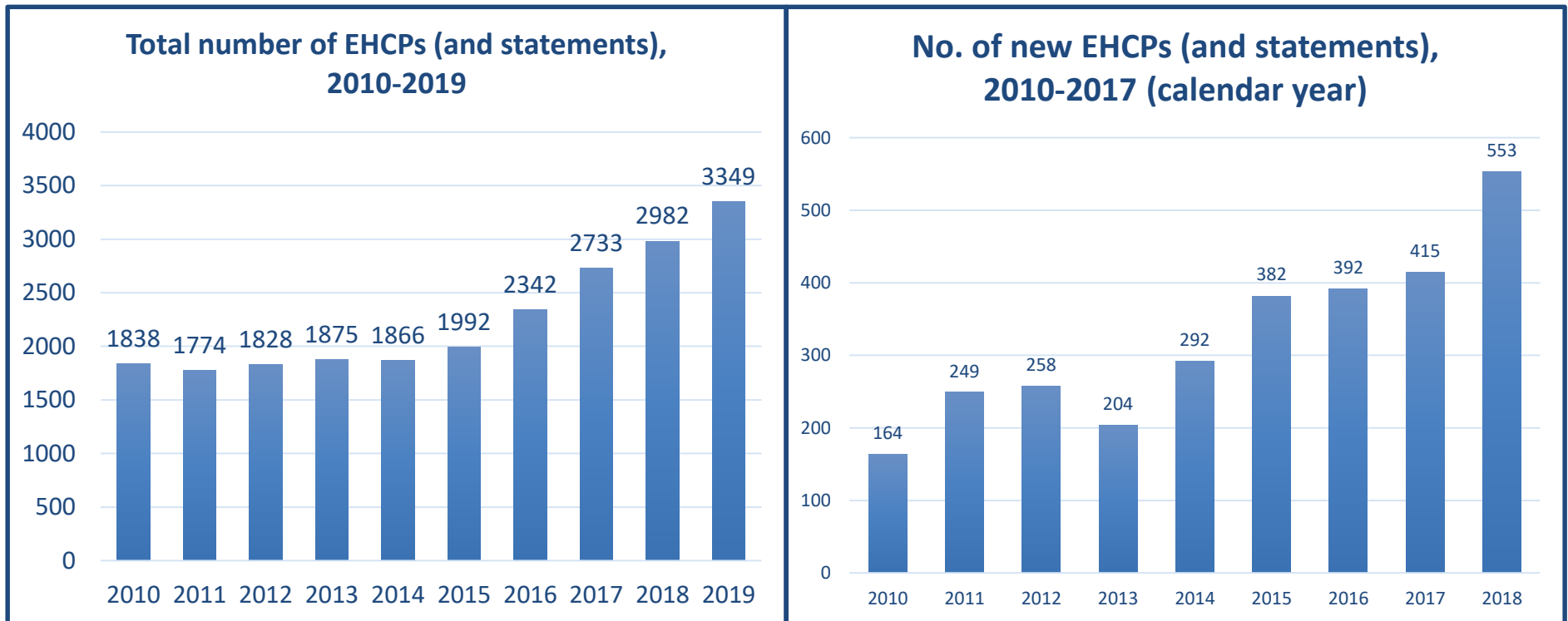
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Part 1: Current context – (a) system performance and outcomes

KS4 progress, 2018

	No SEN	SENS	EHCP
Wiltshire	0.11	-0.39	-1.15
SN	0.1	-0.43	-1.05
England	0.08	-0.43	-0.05

Legend: ■ Wiltshire ■ SN ■ England

Post-KS4 destinations: % staying in EET, 2017

	No SEN	SENS	EHCP
Wiltshire	96.0%	90.0%	93.0%
SN	95.7%	89.6%	91.4%
England	96.0%	88.0%	91.0%

Legend: ■ Wiltshire ■ SN ■ England

While pupils with SEND achieve at KS4 at a similar level to their peers in similar local areas and nationally (attainment 8 scores for Wiltshire pupils with EHCPs are slightly higher than the national average and similar LAs, but slightly lower for pupils with SENS), pupils with EHCPs make less progress (progress 8 scores shown in the left-hand table above) than their peers in similar local areas and nationally. After KS4, a higher proportion of pupils with SEN (both SENS and EHCPs) go to stay in education, employment of training (EET) after the end of KS4. Not shown on the chart above, but a higher proportion of pupils with SEN and with no SEN achieve Level 2 qualifications by the age of 19 than is the case in similar local areas and nationally.
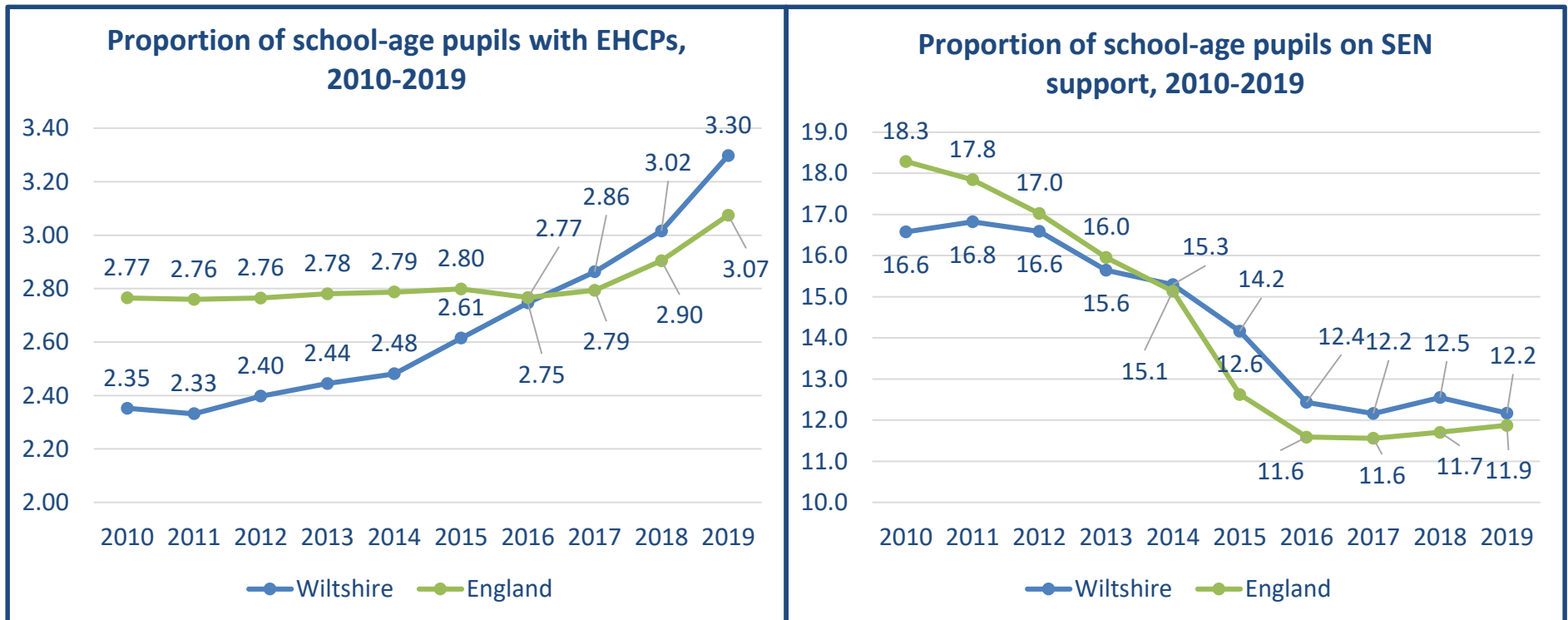
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Part 1: Current context – (b) level and profile of identified need

Total number of EHCPs (and statements), 2010-2019

Year	Total
2010	1838
2011	1774
2012	1828
2013	1875
2014	1866
2015	1992
2016	2342
2017	2733
2018	2982
2019	3349

No. of new EHCPs (and statements), 2010-2017 (calendar year)

Year	New EHCPs
2010	164
2011	249
2012	258
2013	204
2014	292
2015	382
2016	392
2017	415
2018	553

Wiltshire has seen a significant increase in the number of EHCPs (or previously statements) since the introduction of the SEND reforms. While this is a trend seen nationally, the rate of increase has been more pronounced in Wiltshire. Nationally, EHCPs have increased by 52% since 2013, whereas Wiltshire has seen a 79% increase. In terms of the number of new EHCPs made each year, the rate has increase by 68% nationally, but by 171% in Wiltshire. The right-hand chart above shows that the number of new EHCPs made has increased significantly in the last calendar year (2018) – the rate of increase in Wiltshire was 33%, compared to 16% nationally. In other words, while England as a whole is experiencing rising numbers of EHCPs, the rates in Wiltshire are increasing faster than is the case nationally.
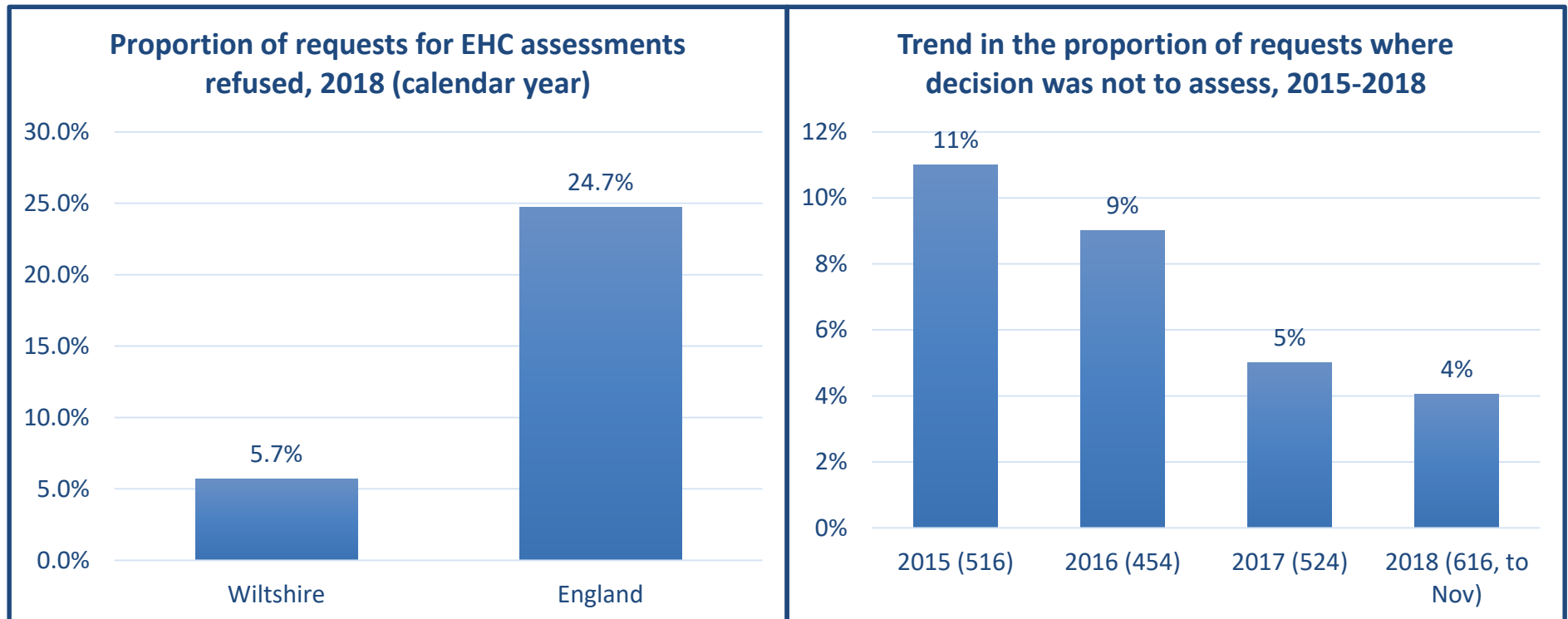
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Source: *Statements of SEN and EHC plans 2019*.

Part 1: Current context – (b) level and profile of identified need

Proportion of school-age pupils with EHCPs, 2010-2019

Wiltshire: 2.35, 2.33, 2.40, 2.44, 2.48, 2.61, 2.75, 2.86, 3.02, 3.30

England: 2.77, 2.76, 2.76, 2.78, 2.79, 2.80, 2.77, 2.79, 2.90, 3.07

Proportion of school-age pupils on SEN support, 2010-2019

Wiltshire: 16.6, 16.8, 16.6, 15.6, 15.3, 14.2, 12.4, 12.2, 12.5, 12.2

England: 18.3, 17.8, 17.0, 16.0, 15.1, 12.6, 11.6, 11.6, 11.7, 11.9

Turning to consider the proportion of school-age pupils with SEN, the data show a similar story. With regard to pupils with EHCPs, the rates have increased nationally over the last two years, having previously hovered around 2.8% of pupils, now rising to 2.9% and 3.07%. Rates in Wiltshire were previously below the national average, but have increased at a faster rate since 2016, overtaking the national average and rising to 3.02% in 2018 and 3.3% in 2019. Wiltshire has followed the national trend of a decline in the proportion of pupils with SEN support, but the decline has been slightly slower. Currently. Wiltshire has a slightly higher proportion of pupils with SEN support (12.2%) than England (11.9%).

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Part 1: Current context – (b) level and profile of identified need

Proportion of requests for EHC assessments refused, 2018 (calendar year)

- Wiltshire: 5.7%
- England: 24.7%

Trend in the proportion of requests where decision was not to assess, 2015-2018

- 2015 (516): 11%
- 2016 (454): 9%
- 2017 (524): 5%
- 2018 (616, to Nov): 4%

Published data shows that in 2018 Wiltshire refused to carry out assessments in a smaller proportion of requests for EHC assessments than is the case nationally (5.7% compared to 24.7% nationally). These trends were similar in the previous calendar year (in 2017, Wiltshire refused 5.7%, the average for England was 22.6%). One might expect a lower rate of refusing to assess to be linked to a higher rate of refusing to issue plans, but in fact Wiltshire also has a lower rate of refusal to issue plans (5% compared to 5.2% across England in 2018). Internal data show that the rate of refusal to assess has decreased at the same time as the total number of requests has increased (from 516 in 2015 to 616 in 2018).
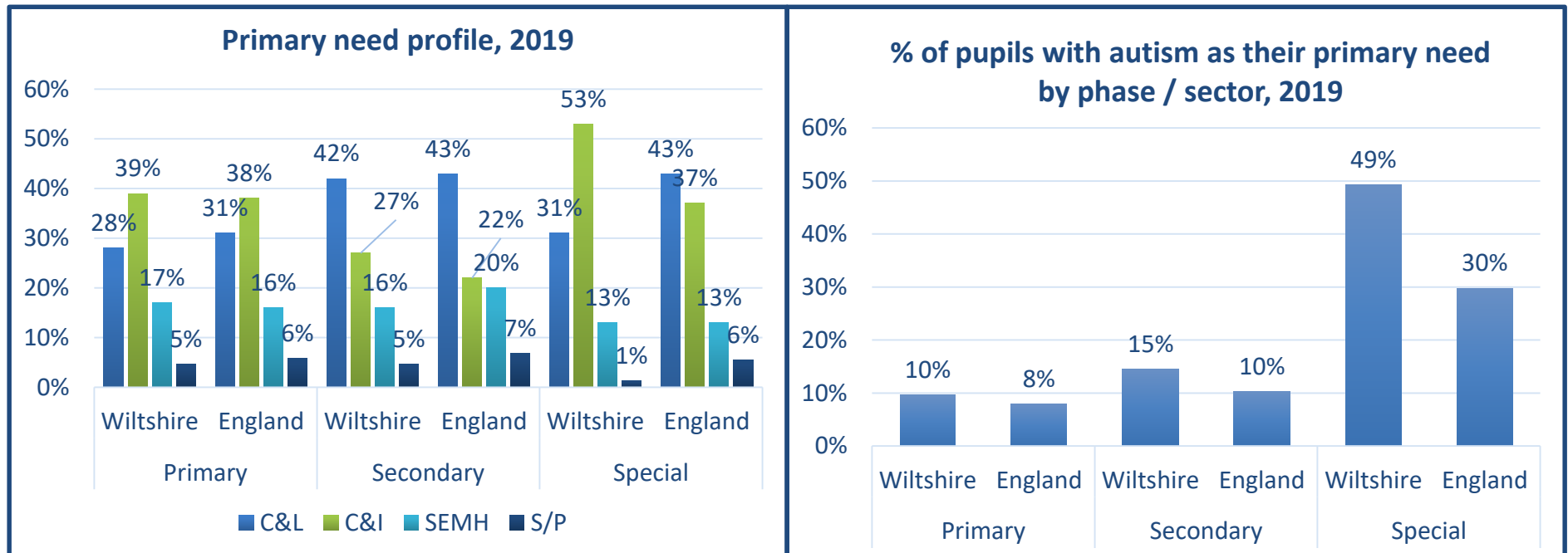
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Part 1: Current context – (b) level and profile of identified need

Age breakdown of young people with EHCPs, 2019

Age	Wiltshire	England
Under 5 years of age	5%	4%
Aged 5-10	40%	33%
Aged 11-15	34%	36%
Aged 16-19	18%	22%
Aged 20-25	2%	5%

Legend: ■ Wiltshire ■ England

Proportion of pupils with EHCPs and SENS by phase, 2019

	EHCPs	SENS	Total SEN
Primary – Wiltshire	2.9	13.8	16.7
Primary – England	1.6	12.6	14.2
Secondary – Wiltshire	1.9	10.6	12.5
Secondary – England	1.7	10.8	12.4

Legend: ■ EHCPs ■ SENS ■ Total SEN
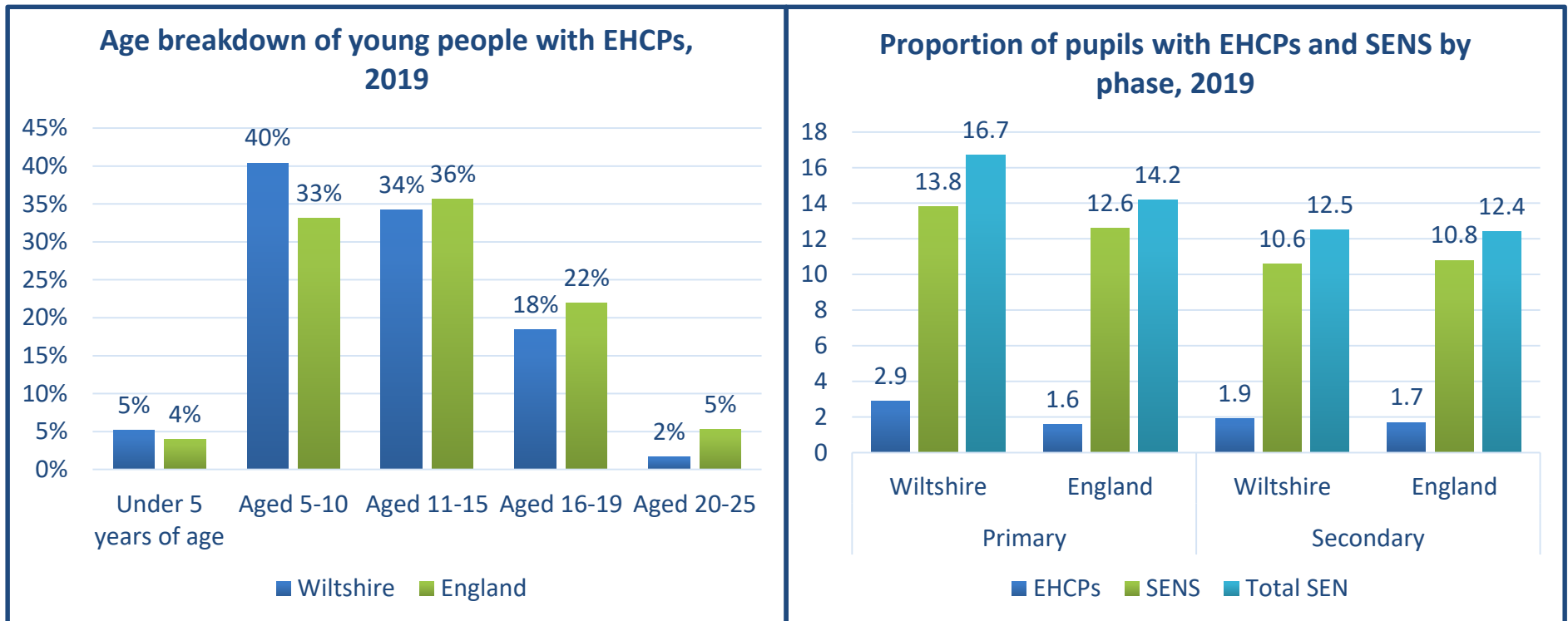
As well as having numbers of EHCPs growing at a faster rate than is the case nationally, Wiltshire also has a higher proportion of younger children with EHCPs. This is shown in two ways above. On the left, the data show the age breakdown of the cohort of all children and young people with EHCPs. In Wiltshire, a higher proportion of children and young people with EHCPs are in the 5-10 age-bracket (40% compared to 33% nationally) and under 5 (5% compared to 4% nationally). In the chart on the right, the data show the proportion of all pupils in primary and secondary schools who have EHCPs. Wiltshire has almost double the proportion of primary-age children with EHCPs (2.9% compared to 1.6% nationally). If this trend continues, it could cause considerable pressure on local resources, support and provision.
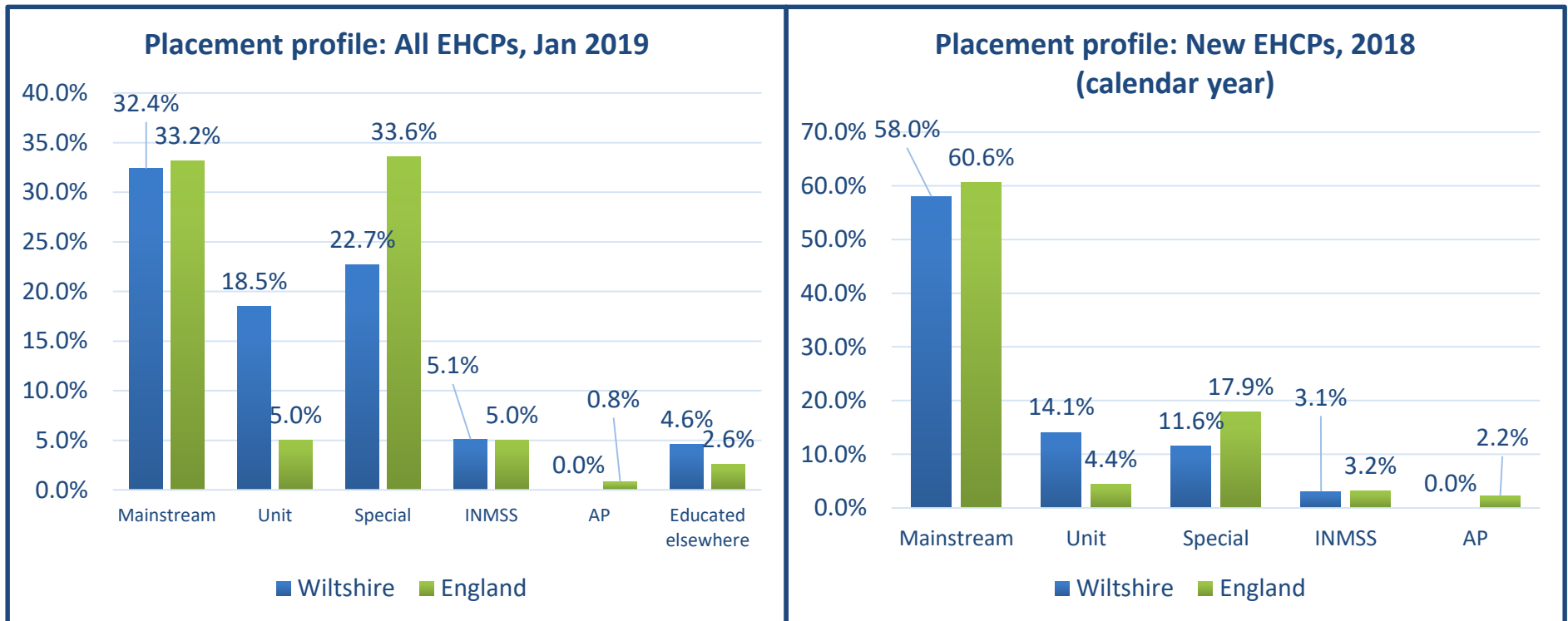
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Part 1: Current context – (b) level and profile of identified need

Primary need profile, 2019

Legend: ■ C&L ■ C&I ■ SEMH ■ S/P

Primary:
- Wiltshire: C&L 28%, C&I 39%, SEMH 17%, S/P 5%
- England: C&L 31%, C&I 38%, SEMH 16%, S/P 6%

Secondary:
- Wiltshire: C&L 42%, C&I 27%, SEMH 16%, S/P 5%
- England: C&L 43%, C&I 22%, SEMH 20%, S/P 7%

Special:
- Wiltshire: C&L 31%, C&I 53%, SEMH 13%, S/P 1%
- England: C&L 43%, C&I 37%, SEMH 13%, S/P 6%

% of pupils with autism as their primary need by phase / sector, 2019

Primary:
- Wiltshire: 10%
- England: 8%

Secondary:
- Wiltshire: 15%
- England: 10%

Special:
- Wiltshire: 49%
- England: 30%

Looking at the data on the primary need of school-age pupils – and we recognise this does not necessarily tell the full story in terms of the nature and combinations of pupils needs – we can compare the profile of identified needs in Wiltshire to the profile nationally. In terms of the four main categories of primary need, Wiltshire is broadly in line with the national profile in the primary phase (slightly lower cognition and learning (C&L), and slightly higher communication & interaction *C&I) and social, emotional & mental health (SEMH) needs, but within 1-3% difference). At secondary, Wiltshire has a larger proportion of pupils with C&I (27% vs. 22% nationally) and a lower proportion with SEMH needs (16% vs. 20% nationally). Underneath this data, the main trend that struck us was the fact that Wiltshire has a higher rate of pupils with SEN (SENS and EHCPs) with autism as their identified primary need, including almost half (49%, compared to 30% nationally) of all pupils in special schools.
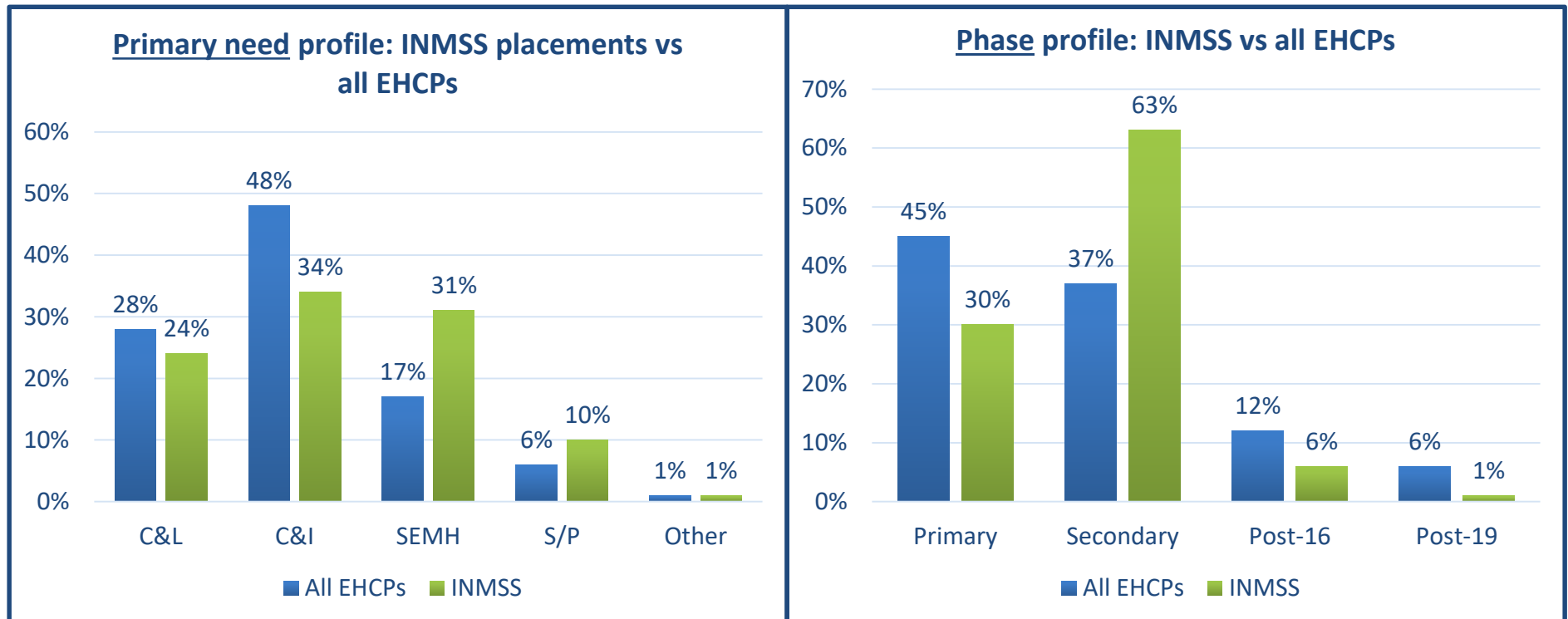
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Part 1: Current context – (b) level and profile of identified need

Placement profile: All EHCPs, Jan 2019

Mainstream: Wiltshire 32.4%, England 33.2%
Unit: Wiltshire 18.5%, England 5.0%
Special: Wiltshire 22.7%, England 33.6%
INMSS: Wiltshire 5.1%, England 5.0%
AP: Wiltshire 0.0%, England 0.8%
Educated elsewhere: Wiltshire 4.6%, England 2.6%

Placement profile: New EHCPs, 2018 (calendar year)

Mainstream: Wiltshire 58.0%, England 60.6%
Unit: Wiltshire 14.1%, England 4.4%
Special: Wiltshire 11.6%, England 17.9%
INMSS: Wiltshire 3.1%, England 3.2%
AP: Wiltshire 0.0%, England 2.2%

The data above show the breakdown of the types of provisions where Wiltshire young people with EHCPs are placed, both for all EHCPs (left) and new EHCPs made during the 2018 calendar year (right). Compared to the national average:

- Wiltshire places a similar proportion of young people with EHCPs in mainstream settings and schools;
- Wiltshire places a similar proportion in specialist provision – Wiltshire has a lower proportion in special schools, but has a higher proportion in units (this includes resource bases and enhanced learning provisions). The proportion placed in independent or non-maintained special schools (INMSSs) is similar, but has grown in previous years; and
- Wiltshire also has a higher proportion of young people with EHCPs educated other than at school (4.6% vs. 2.6%).

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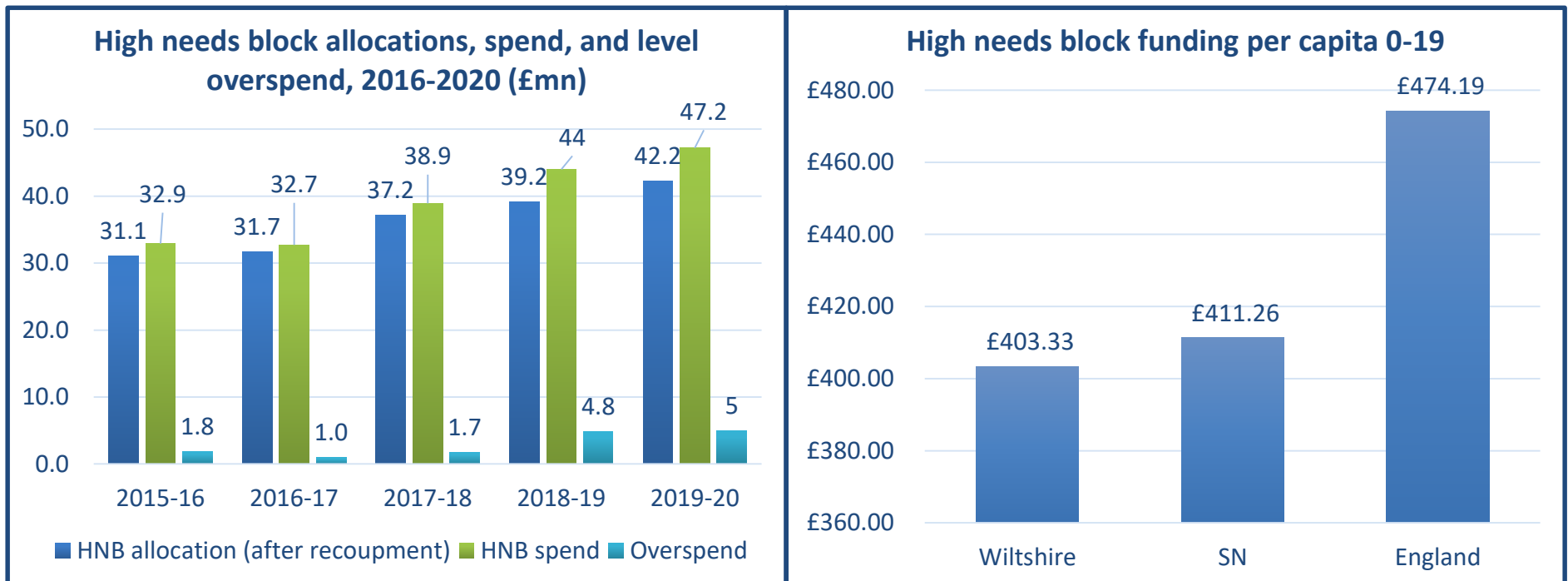# Part 1: Current context – (b) level and profile of identified need

Primary need profile: INMSS placements vs all EHCPs

Bar chart comparing All EHCPs and INMSS by primary need:
- C&L: All EHCPs 28%, INMSS 24%
- C&I: All EHCPs 48%, INMSS 34%
- SEMH: All EHCPs 17%, INMSS 31%
- S/P: All EHCPs 6%, INMSS 10%
- Other: All EHCPs 1%, INMSS 1%

Phase profile: INMSS vs all EHCPs

Bar chart comparing All EHCPs and INMSS by phase:
- Primary: All EHCPs 45%, INMSS 30%
- Secondary: All EHCPs 37%, INMSS 63%
- Post-16: All EHCPs 12%, INMSS 6%
- Post-19: All EHCPs 6%, INMSS 1%

Wiltshire currently has 182 young people placed in INMSSs (170 was the figure in January 2019, taken from the published data; 182 was the figure taken from internal data in February 2019). The data show that young people placed in INMSSs are more likely to have SEMH as their primary need (31%) than is the average for all young people with EHCPs (17%) and are more likely to be of secondary age (63% compared with 37% of all young people with EHCPs). (We also know that 73% are boys, which is the same as the proportion of all young people with EHCPs.) Wiltshire has seen a 32% drop in post-16 INMSS placements between 2016 and 2018, but a 50% increase in pre-16 INMSS placements. There has also been a small increase in residential placements (from 24% to 28%) during the same period (2016-2018).

Part 1: Current context – (b) level and profile of identified need

Children out of school (quarter 3, 2018)

Year	Educated at home	Educated other than at school
2016	11	9
2017	25	24
2018	48	42

Rates of exclusions, fixed-term and permanent, 2017-18

	FTX (Primary)	PX (Primary)	FTX (Secondary)	PX (Secondary)
Wiltshire	2.24	0.03	7.98	0.04
England	1.4	0.03	10.13	0.2
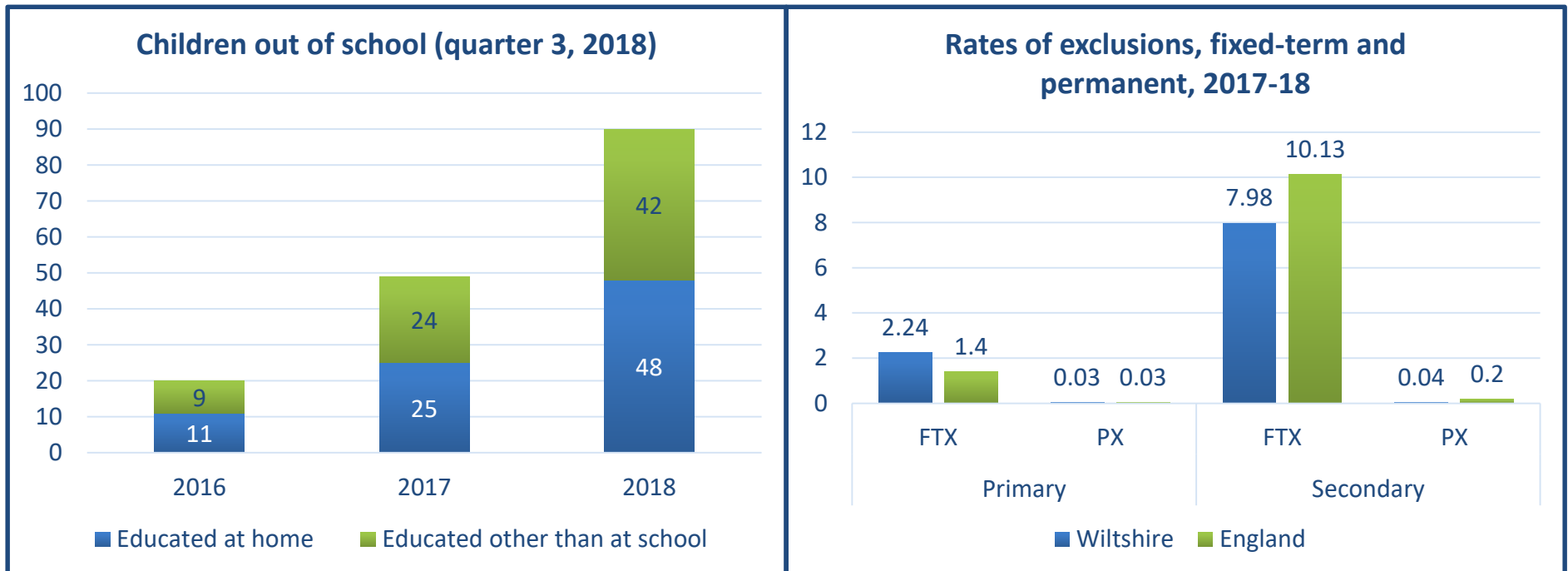
Building on the points from the previous pages, internal data (left) suggest that Wiltshire has also seen a rise in children with EHCPs being educated at home or other than at school (from 20 in 2016 to 90 in 2018). Wiltshire has an arrangement whereby funding from the high needs block is devolved to mainstream schools for pupils at risk of exclusion and who require support from alternative provision (AP). Published data (right) show low rates of permanent exclusion at both primary and secondary phases, although these have increased in the last academic year for which there is data: in 2017/18 and 2018/19, respectively there were 13 and 20 permanent exclusions at primary and 13 and five at secondary. The data also show that in Wiltshire pupils with SEN are more likely to receive fixed-term exclusions than their peers with no SEN at both primary and secondary.

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Part 1: Current context – (c) resources

High needs block allocations, spend, and level overspend, 2016-2020 (£mn)

Legend: ■ HNB allocation (after recoupment) ■ HNB spend ■ Overspend

Year	HNB allocation (after recoupment)	HNB spend	Overspend
2015-16	31.1	32.9	1.8
2016-17	31.7	32.7	1.0
2017-18	37.2	38.9	1.7
2018-19	39.2	44	4.8
2019-20	42.2	47.2	5

High needs block funding per capita 0-19

	Funding per capita
Wiltshire	£403.33
SN	£411.26
England	£474.19

Wiltshire has experienced significant pressure on high needs block resources in the last five years. While the allocations in the high needs block (HNB) of the Dedicated Schools Grant, or DSG, have been increasing (shown above after recoupment, and including agreed transfers from within the DSG for 2019-20), these have not kept pace with increased spending on high needs. Spend has risen from £32.9m in 2015-16 to £44.9m in 2018-19. (Projections for the current financial year, 2019-20, are of a rising level of spend.) The overspend has grown from £1.7m in 2017-18 to £4.8m in 2018-19, and is projected to be around £5m in the current financial year. As the chart on the right shows, Wiltshire receives slightly less high needs block funding per capita that similar local areas and the national average (taking high needs block allocations before recoupment and dividing them by the number of young people aged 0-19).

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Part 1: Current context – (c) resources

Items of high needs block expenditure, 2016-2019 (£mn)
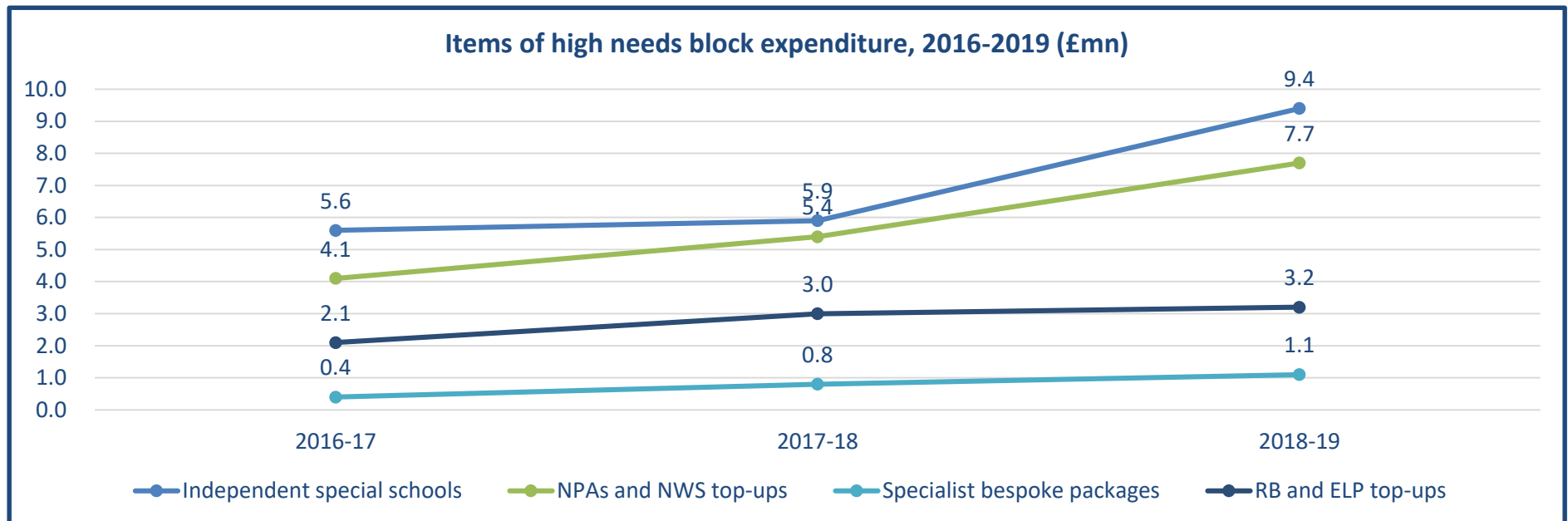
While Wiltshire is less well-funded than similar local areas and the national average, and indeed is due to gain under changes to the high needs funding formula, this should not detract from a focus on the areas and causes of pressure on the high needs block. The evidence we have gathered suggests that the overspend on high needs has not been caused by the fact Wiltshire is less well-funded than it ought to be, but rather that there are systemic trends and factors that are driving the increased expenditure, which need to be addressed. If these are not addressed, any gains in funding allocations are likely to be outstripped by increased demand. The chart above shows four main areas of expenditure that have grown over the last three full financial years – (a) placements in independent special schools, (b) top-ups in mainstream (named pupil allowances or NPAs) and non-Wiltshire schools (NWS), (c) specialist bespoke packages of support for pupils not in school, and (d) top-ups for pupils in resource bases (RBs) and enhanced learning provisions (ELPs). These are all areas that are driven by factors within the Wiltshire system.

Contents of this report

Part 1: **The current context of support for young people with SEND and high needs in Wiltshire**

Part 2: **Six themes that this review has explored – key findings and recommendations**

Part 3: **Implications for the use of the high needs block**

Conclusion: **Overarching messages and taking this agenda forward**

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Six broad themes that we are planning to use to structure our discussions and evidence-gathering

1. **Co-production with parents / carers and young people**

2. **Partnerships working across education, health and care**

3. **Information, identification and access to support**

4. **Building inclusive capacity in mainstream schools and settings, and providing targeted support for inclusion**

5. **Developing responsive, effective local specialist provision**

6. **Preparation for adulthood**

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Overarching messages

There are aspects of Wiltshire's local system for SEND and high needs that are highly regarded. Wiltshire has been at the forefront of key national developments relating to SEND and high needs, including the SEND reforms pathfinder programme and the National Exclusions Trial. Wiltshire recently received a positive report from Ofsted and the Care Quality Commissioning following its local area SEND inspection. There are aspects of Wiltshire's practice, including its work with the Wiltshire Parent Carer Council (WPCC) and in developing post-16 pathways, that we have featured in case studies of effective practice. As noted in the previous section, the data show that Wiltshire completes a high proportion of EHCPs within 20 weeks (which is key to avoiding disputes about support and placements) and that, on average, a higher proportion of younger children and young adults achieve good outcomes compared to their peers in other, similar local areas.

The system is, however, facing considerable pressures. While there are positives, these are not necessarily reflective of the day-to-day experiences of families and professionals. As the survey results show, there are significant concerns about how effectively the Wiltshire system works to support young people with SEND and high needs. As we described in the previous section, requests for EHC assessments and numbers young people with EHCPs are increasing. The fact that Wiltshire has a higher proportion of younger children with EHCPs suggests these pressures will continue to be felt throughout the system. Rising levels of EHCPs, and in turn rising numbers of specialist placements, are putting further pressure on the high needs block, which is now significantly overspent. These trends – rising numbers of requests for EHCPs, reducing rates of refusals to assess, rising numbers of EHCPs, greater spend on top-up funding (which rose from £12m to £16 between February 2017 and November 2018, with most of the increase coming in the lower bands), which the data suggest date to 2016, when a new structure and banding framework were introduced – are unsustainable, and should prompt a rethink of the local system.

There is a willingness to forge a new, collective ethos, strategy and relationships around inclusion and support for high needs. The appointment of a new Director of Education and Skills, and the willingness to engage professionals and parents has been welcomed, but colleagues also stressed the need to develop a new shared vision and strategy and to build confidence in the rigour, consistency and effectiveness of the local SEND and high needs system in Wiltshire.

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Overarching messages

In the course of this report, we make a series of recommendations – both immediate and longer-term actions – under our six main themes. Here, we want to emphasise three overarching points that underpin many of the recommendations we make.

1. **There is the need to build strong, strategic and co-productive relationships and partnerships with all key partners in the local system**. It would be a mistake to see the overspend on the high needs block as something that results from poor financial planning or is the responsibility of any one organisation. Instead, the factors that are driving the pressures giving rise to the overspend are multiple and complex. By the same token, taking forward an agenda of strengthening inclusion and support for young people with SEND and high needs will require a genuine partnership approach. There are some areas of strong partnership working within Wiltshire, but there are not systematic, strategic engagements with parents, schools and settings, and partner agencies to build shared ownership of the issues the system is facing, and develop a shared vision and strategy for how the local system will support young people with SEND and high needs.

2. **There is the need to ensure core processes that govern the day-to-day operation of the system are working effectively, are transparent, and have the confidence of families and professionals**. Throughout this review, we have heard concerns about a lack of confidence on the part of parents and providers in the consistency of some of the core process that cover access to support. This includes requests for EHC assessments, the issuing of EHCPs, and the provision of banded funding, and centre around a perceived lack of consistency in chairing, application of criteria, and decision-making, as well as an absence of peer-level moderation, on the main SEN panel. This panel oversees the use of c.£40m of public money: it is important to get this right. At the same time, changes are also needed with regard to the leadership structure around SEND. The current separation of operational, commissioning, funding and strategic leadership has not helped to foster a coherent and effective oversight of the system. Aligning these functions and establishing robust system governance are much needed.

3. **There needs to be a strategically planned continuum of SEND and high needs support, services and provision**. This will involve ensuring that there are clear and complementary roles for all forms of support, services and provision, how they contribute to the overall strategy and outcomes for the system, which keep pace with changing needs and deliver consistently.

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Overarching messages

'Overall, the current offer of support, services and provision for SEND and high needs in Wiltshire works well.'

Providers: 1% Strongly agree, 38% Agree, 41% Disagree, 11% Strongly disagree, 8% Cannot say

Parents: 5% Strongly agree, 14% Agree, 34% Disagree, 39% Strongly disagree, 7% Cannot say

Legend: Strongly agree | Agree | Disagree | Strongly disagree | Cannot say

'Overall, the current offer of support, services and provision for SEND and high needs in Wiltshire works well.'

Providers: 39% Agree, 53% Disagree

Parents: 20% Agree, 73% Disagree

Legend: Agree | Disagree
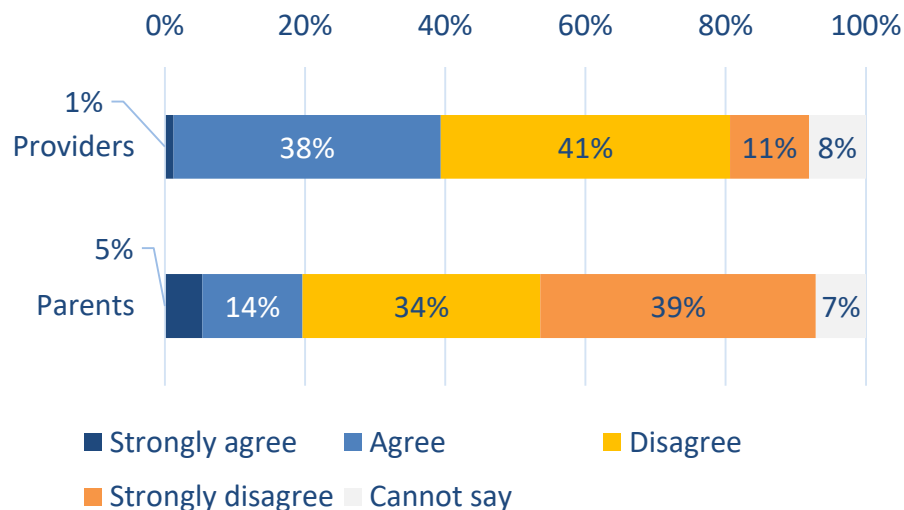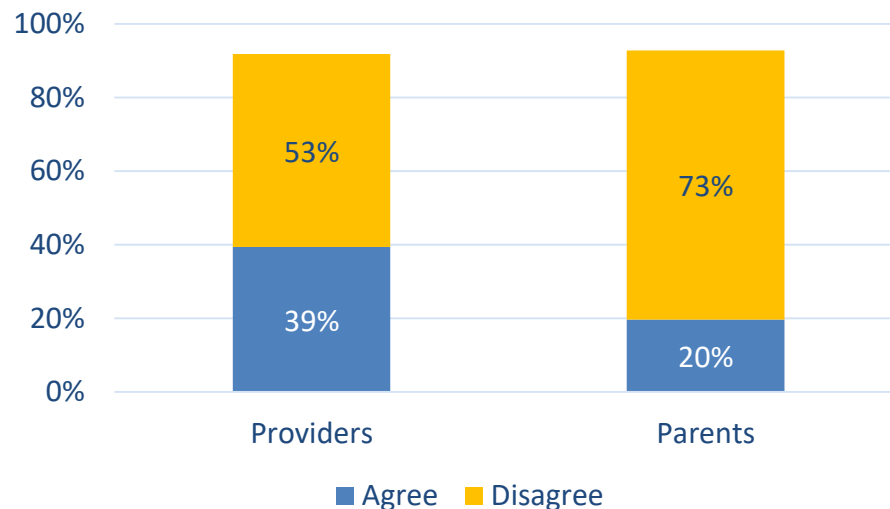
In our online survey (160 responses from professionals – early years providers, schools, colleges and other services; 56 responses from parents and carers), we asked whether respondents agreed with a statement to the effect that, overall, the current offer for SEND and high needs in Wiltshire worked well. The responses show that over half (53%) of providers disagreed (either 'strongly disagree' or 'disagree') with this statement, while almost three quarters (73%) of parents disagreed with this statement. This pattern of more negative responses from parents was replicated across the three similar statement-style questions we posed in the survey. As we have noted, while there are positive aspects of the local system in Wiltshire, this is not necessarily reflected in how families and professionals experience the system.

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Source: Survey data collected during the review.

Co-production with families	EHC partnership working	Information, identification, & access	Building inclusive capacity	Specialist provision	Preparation for adulthood

There is a strong mechanism for strategic engagements with parents, through WPCC. WPCC is highly regarded, both by the LA and by other providers. It is seen as an example of forward-thinking and strategic investment in building the capacity of an organisation to enable parents to act as strategic partners in the local system. It is also highly valued by the parents who responded to our survey and attended our workshops (organised by WPCC) as a valuable source of information, advice and support. In parallel with this review, parents have been involved in a consultation about the future shape of specialist provision in Wiltshire. Involvement with the consultation may have reduced the numbers of parents who contributed to this review. Nevertheless, it will be important to ensure that a broad group of parents and carers continue to be directly involved in shaping how the findings of this review are taken forward.

Parents raised concerns about the quality and consistency of communication. There was positive feedback from parents about communication with some key individuals, including SEN workers and within education providers. There were, however, two sets of concerns that parents raised. First, there was concern about a lack of transparency and poor service-to-family communication (a number of parents of older children were critical of communication from adult services). Parents reported that they did not feel listened to by professionals and services. Second, there was concern about a lack of service-to-service communication. Parents argued that professionals could provide information about their service, but had a lack of knowledge and were less able to provide advice about other parts of the local system. Parents described how they had to 'battle', 'project manage' and act as a 'lynchpin' of the system when seeking to get services to work together.

There are opportunities to strengthen co-productive working with parents through this review. The parents we engaged through this review, as well as describing their experiences of the system, had clear ideas both about what was needed to improve the experience of families in seeking and receiving support. These included improving communication, the quality of information, consistent expectations of mainstream schools, and pathways into adult life. Parents emphasised the importance of taking these areas forward through genuine coproduction with parents, as well as other partners.

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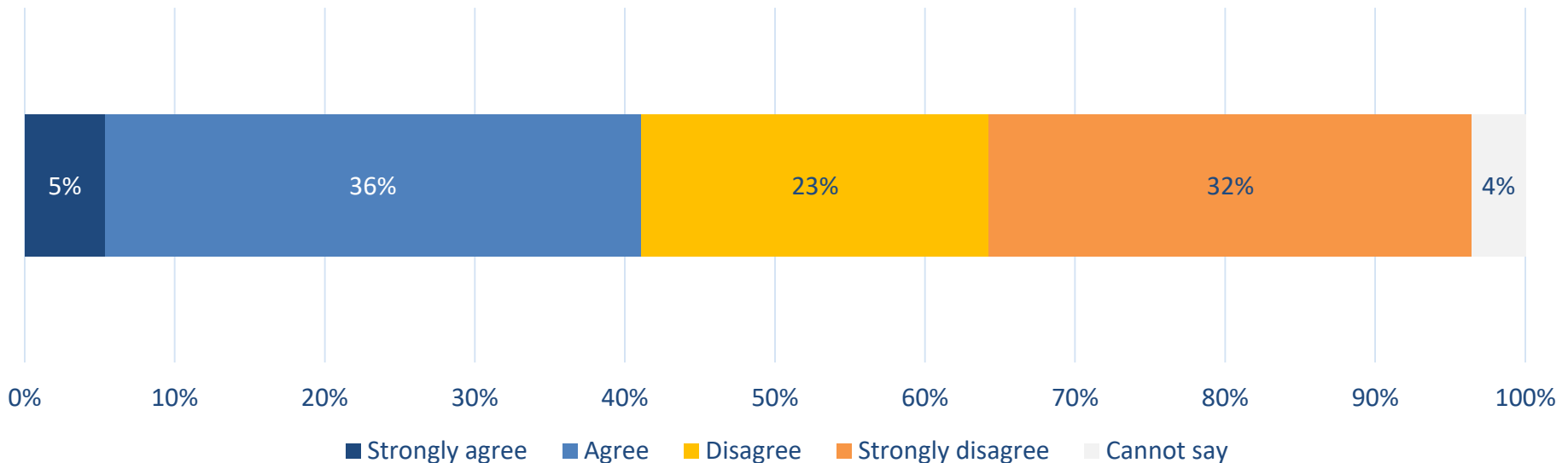| Co-production with families | EHC partnership working | Information, identification, & access | Building inclusive capacity | Specialist provision | Preparation for adulthood |

'Overall, I have been able to access right support that has met the needs of my child.'

Strongly agree	Agree	Disagree	Strongly disagree	Cannot say
5%	36%	23%	32%	4%

■ Strongly agree ■ Agree ■ Disagree ■ Strongly disagree □ Cannot say

We asked parents whether they agreed or disagreed with the statement 'Overall, I have been able to access the right support that has met the needs of my child'. We found that 41% of parents agreed with the statement, and 53% disagreed (4% could not say). It is noteworthy that a higher proportion of parents agreed with this statement (41%) than with the statement about whether the overall offer worked well (20%). This suggests that a higher proportion of parents feel that the support they have eventually received has met the needs of their child, but the process for accessing this (as we show on an subsequent page) and their experience of the system overall has felt less satisfactory.

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Source: Survey data collected during the review.

Co-production with families	EHC partnership working	Information, identification, & access	Building inclusive capacity	Specialist provision	Preparation for adulthood

Under each theme, we set out our recommendations in terms of quick wins (actions that can be taken and completed quickly) and longer-term actions (those that should be started now, but will require ongoing work to implement and see impact).

Recommendations: Quick wins

- **Co-production** – start a series of discussions with parents about how to take forward the findings from this review. Build a broad understanding and ownership of the challenges facing the system (since the trends we described in the first section of this report affect parents and their children), confront the data about the pressures in the system, and work with parents to identify priorities where their expertise could be used to find solutions. Use this to strengthen the engagement of parents across the county, including but not exclusively those who are active within WPCC.

- **Young people's voice** – use existing networks of professionals, providers and families to identify "young people advocates", who can describe their experience of the Wiltshire system, and what did and did not work for them. Start to develop a network of young people who can be engaged on strategic developments and improvements to support.

Recommendations: Longer-term actions

- **Co-production** – identify some specific, dedicated co-productive projects to undertake with parents and carers. There will be plenty of opportunities to co-produce solutions to some of the challenges highlighted by this review. The feedback we gathered suggests that (a) introductory information about the local SEND system, (b) effective mainstream inclusion and (c) working with families to prepare for adulthood could be the focus of some initial co-productive projects.

- **Young people's voice** – linked to the 'preparation for adulthood' theme, develop a set of core routines for having systematic conversations with young people about their aspirations, capture this, and use this to inform planning of individual pathways as well as shaping future commissioning priorities.

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| Co-production with families | EHC partnership working | Information, identification, & access | Building inclusive capacity | Specialist provision | Preparation for adulthood |

There were mixed views about the quality of support provided across education, health and care. There were positive comments about the support from a number of services, including speech & language therapy (SaLT) and the educational psychology (EP) service. There were, however, three sets of concerns. First, there were concerns about services where the support provided was seen as good, but there were difficulties accessing support. This included SaLT (strong feedback, particularly from early years providers) and disability social workers (improving communication, but a lack of consistent understanding of the needs of autistic children). Second, there were concerns about the join-up with and lasting impact of support from certain services, including early help (the feedback from schools was that the family keyworker model worked well, but impact was not sustained after their involvement had ended). Third, there were concerns about services where access was difficult or there was a gap in the local offer, which included child & adolescent mental health (CAMHS), occupational therapy (OT, particularly around sensory needs) and physiotherapy (PT).

There is the need to strengthen joint commissioning across agencies at a strategic level. As noted above, colleagues highlighted gaps in commissioning of OT and PT services. Overall, parents and professionals argued that joint commissioning had become more fragmented, linked to the loss of the jointly-funded commissioning lead post across the LA and Clinical Commissioning Group. While there have been improvements in the autism diagnostic and support pathway, acknowledged by professionals, there were also concerns that there was not a clear pathway of jointly commissioning services for SEMH.

There is a perceived lack of join-up between services on a day-to-day level. This manifested itself in three ways. First, there were concerns about the input from health and social care services into the EHC process and into the diagnostic and referral tool (DART). Second, there were concerns about the consistency of messages about the local system provided to parents by some health professionals. Anecdotal examples of GPs advising parents that all children with SEN need an EHCP, or advising parents to "play the game" and push for a medical diagnosis, were relayed to us. Third, there is not a clear route for accessing support for young people with health needs but not SEN – at present, as a result, EHCPs are used to access support.

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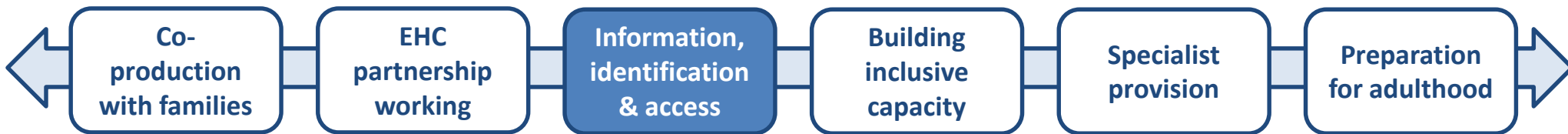| Co-production with families	EHC partnership working	Information, identification, & access	Building inclusive capacity	Specialist provision	Preparation for adulthood

Recommendations: Quick wins

- **The EHC process** – revisit and set out clearly how all agencies will contribute to EHC assessments, plans and annual reviews. Ensure this is agreed – or better still, co-produced – with parents and professionals. Ensure professionals from all agencies understand how their feedback, advice and reports are used to inform important decisions about a child's needs, potential future placement and package of support.

- **Consistent communication** – ensure that there is a consistent understanding of and messages about the local system and how it supports young people with SEND and high needs. Set out some clear messages about how the system seeks to support young people, and embed these across professions and services so that professionals are able to advise and signpost parents, and families receive a single set of consistent messages.

- **Support for young people with health-related needs** – develop and agree a protocol across agencies for how young people with health-related needs, but not SEND, can access additional support.

Recommendations: Longer-term actions

- **Joint commissioning** – strengthen joint commissioning in areas where there are identified gaps in the continuum of support, most notably SEMH, OT and PT. Building on the work that has been well received around the autism pathway, focus on "pathways" for specific needs. Does the local offer set out clearly the whole offer around emotional wellbeing and mental health support, regardless of which agency provides support? Is it clear to a parent or professional at what level and how they should access this? Use these questions as prompts to develop a seamless joint pathway of support.

- **Holistic family support** – strengthen the links between the early help offer and the offer of inclusion, SEND and high needs support, so that there is a clear offer of holistic support for families to avoid issues and needs escalating.

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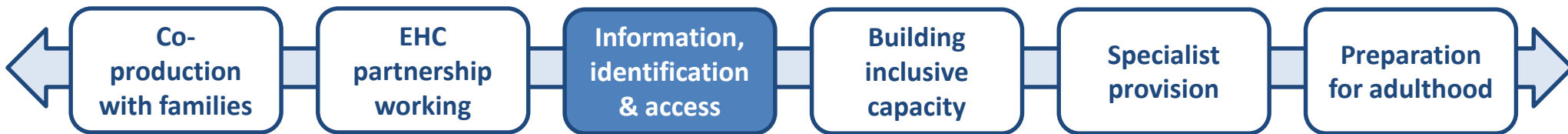| Co-production with families	EHC partnership working	**Information, identification & access**	Building inclusive capacity	Specialist provision	Preparation for adulthood

Professionals were positive about the quality of information, but parents less so. First, providers were largely positive about the availability of information through sources such as the local offer (as the survey results shown on the next page). Parents, however, were less positive. They considered that the local offer worked well if you knew what you were looking for, but did not necessarily provide an introduction to and overview of how the continuum of support sought to meet the needs of young people with SEND in Wiltshire. As noted earlier, parents also considered that professionals knew their own service, but were not in a position to inform parents about other parts of the local system. As a result, parents argued that it felt like "luck" whether you found the right support or service, and that information was "ad hoc" if you did not know what to look for.

There were some concerns about the core systems for identifying young people's needs. There were particular concerns about the consistency and accuracy of systems used to identify young people's needs. Many professionals raised concerns about the accuracy of autism diagnoses. They considered that many younger children were being diagnosed with autism (the research suggests it can be harder to differentiate autism from other needs in younger children), and there were examples described to us of young people having been diagnosed without full consideration being given to their school environment, and where the diagnosis of autism had been recorded as the child's primary need when it was not the main barrier to learning. As we noted in the preceding section, Wiltshire has higher proportions of pupils with SEN (SEN support and EHCPs) with autism as their primary need than is the case nationally. This includes almost half of all pupils in special schools – five of the six Wiltshire special schools cite autism as one of the needs in which they specialise. Given that international evidence suggests that the prevalence of autism is relatively consistent within geographical areas, the data and fieldwork messages suggest that there would be value in considering the inter-relation between access to support and autism diagnosis.

There were strong concerns that the system is geared towards accessing support through medical diagnoses and EHCPs. Parents acknowledged that medical diagnoses were a "hoop" they had to jump through to get support, and one summed it by saying 'everything seemed to fall into place when we got the diagnosis'.

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Co-production with families	EHC partnership working	**Information, identification & access**	Building inclusive capacity	Specialist provision	Preparation for adulthood

(Continued) Professionals, likewise, acknowledged that seeking EHCPs was the way settings and schools accessed support for young people with SEND, and that the statutory assessment process now largely driven by requests for additional funding. As one headteacher put it, 'a statement of SEND was a statement of need, an EHCP is a statement of funding'. Some schools acknowledged that they used the process for requesting an EHC assessment as a means of getting access to an EP (the service recently became traded). Professionals working in inclusion support services considered that, in some schools, a focus on EHCPs and extra top-up funding was replacing a focus on quality-first teaching and high-quality SEN support. Given the high and rising rates of EHCPs, it is hard to argue against these conclusions.

There was also concerns about the consistency, robustness and transparency of decision-making about access to support. A key means for ensuring that high needs resources are used effectively to provide access to support where it is most needed is the SEN panel. This panel is responsible for the use of around £40m of public money (what comes to the local area as part of the high needs block, after recoupment), and its decisions have implications for other budgets, such as transport, which is also under pressure. As such, it is vital that decisions it takes about EHC assessments, plans, placements and top-up funding are consistent, fair and transparent. We heard strong concerns that the current panel arrangements are not consistent or effective. The current banding framework (for calculating top-up funding) seeks to ensure parity across provider types, but the descriptors appear to be based on both provision and needs. Furthermore, the evidence we gathered suggests that the framework is not applied consistently. The chairing of the panel rotates, and we heard evidence that this leads to inconsistent decision-making. Decisions are not transparent, and there is a lack of moderation from SENCOs. (Moderation ended in 2016, when the new banding framework was introduced. The data suggest that this is the point where demand starts to rise.)

There were also concerns about the paperwork and processes for accessing support. Schools argued not for core processes to be made less exacting, but rather for paperwork to be made less duplicative and cumbersome (particularly the link between SEN support plans and EHCPs). There were also concerns about DART – that it was time-consuming, that not all services were included (e.g. SaLT), and that it actually made it harder to access support from a known single service.

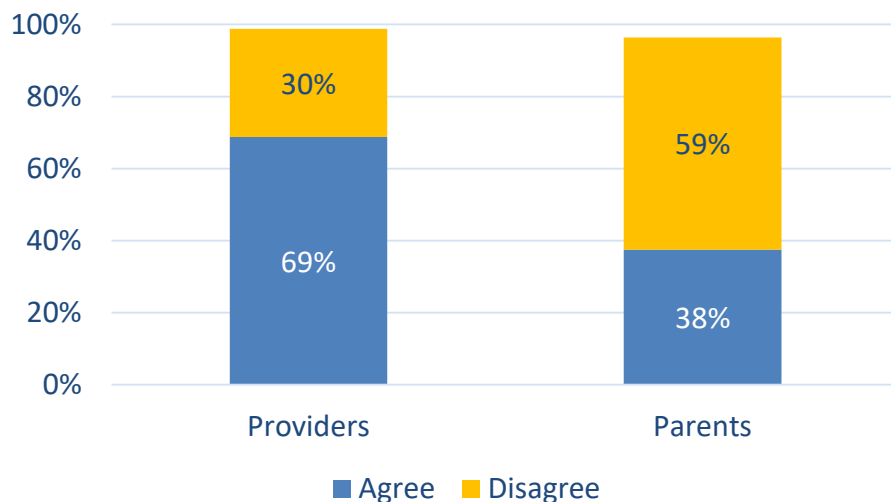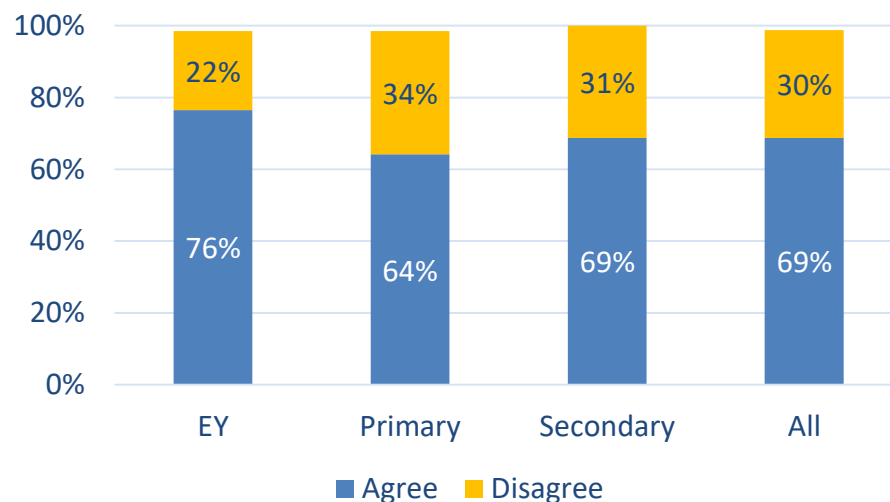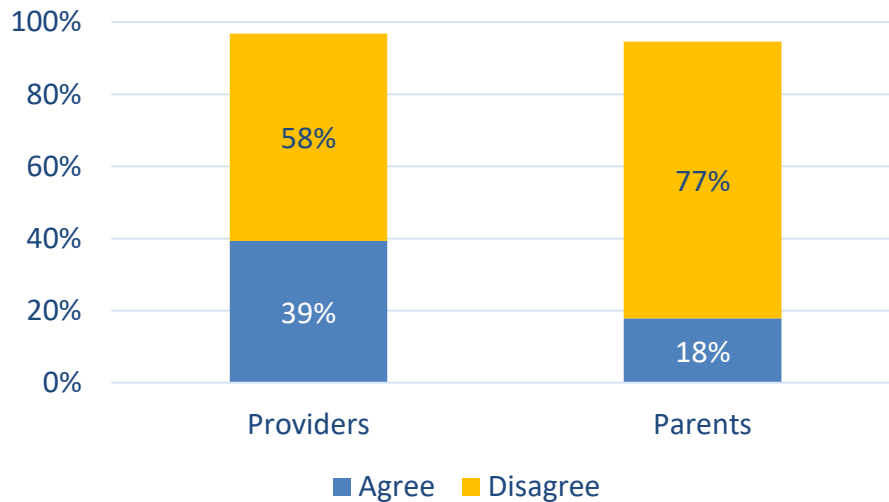| Co-production with families | EHC partnership working | **Information, identification, & access** | Building inclusive capacity | Specialist provision | Preparation for adulthood |

'There is clear and accessible information about available support.'

Left chart (Agree / Disagree):
- Providers: Agree 69%, Disagree 30%
- Parents: Agree 38%, Disagree 59%

'There is clear and accessible information about available support.'

Right chart (Agree / Disagree):
- EY: Agree 76%, Disagree 22%
- Primary: Agree 64%, Disagree 34%
- Secondary: Agree 69%, Disagree 31%
- All: Agree 69%, Disagree 30%

We asked both parents and professionals if they agreed or disagreed with the statement 'There is clear and accessible information about available support'. As the chart on the left shows, over two thirds (69%) of professionals agreed with this statement, but over half of parents (59%) disagreed. As noted earlier, this was a theme throughout the three parallel questions we asked in both the parents and providers surveys. As the chart on the right shows, we see some differences between different providers, with early years providers more likely to agree (76%) with the statement than colleagues from primary schools (64%) and secondary schools (69%).

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PART 2: FINDINGS AND RECOMMENDTIONS

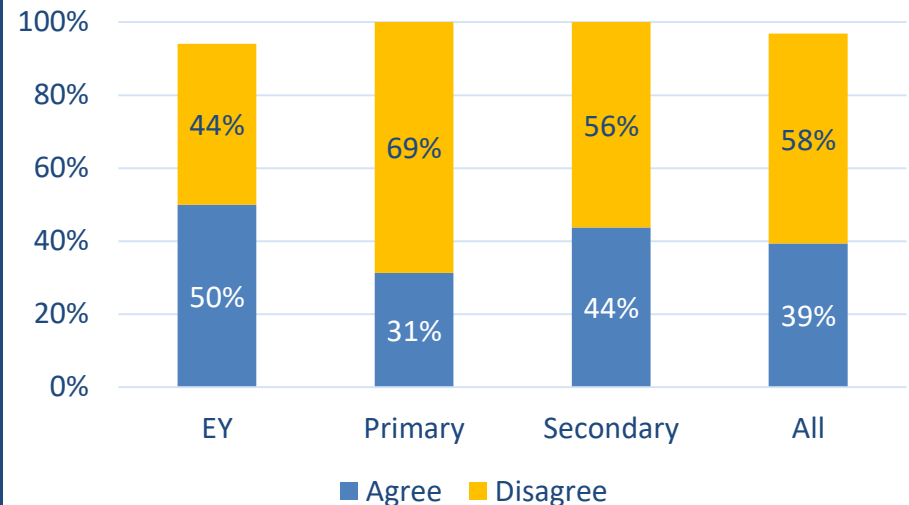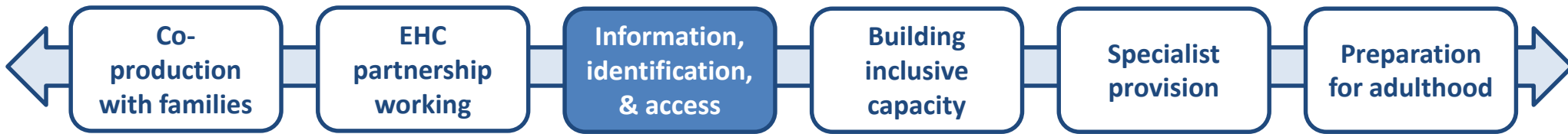| Co-production with families | EHC partnership working | Information, identification, & access | Building inclusive capacity | Specialist provision | Preparation for adulthood |

'The process for accessing additional support works well.'

(Providers) Disagree 58% / Agree 39%
(Parents) Disagree 77% / Agree 18%

■ Agree ■ Disagree

'The process for accessing additional support works well.'

(EY) Disagree 44% / Agree 50%
(Primary) Disagree 69% / Agree 31%
(Secondary) Disagree 56% / Agree 44%
(All) Disagree 58% / Agree 39%

■ Agree ■ Disagree

We also asked both parents and professionals if they agreed with the statement 'The process for accessing additional support works well'. Again, parents (77% disagreed) were more negative than professionals (58% disagreed), reflecting what we described in our summary of key messages under this theme: namely that professionals valued the local offer, but parents felt it was harder to be sure you had found information about the right service, both from the local offer and professionals, if you did not know what you were looking for. Again, amongst professionals, early years were more likely to agree (50%), while primary school colleagues were the most likely to disagree (69%). This pattern – more positive responses from early years, more negative from primary schools – is consistent across the survey responses.

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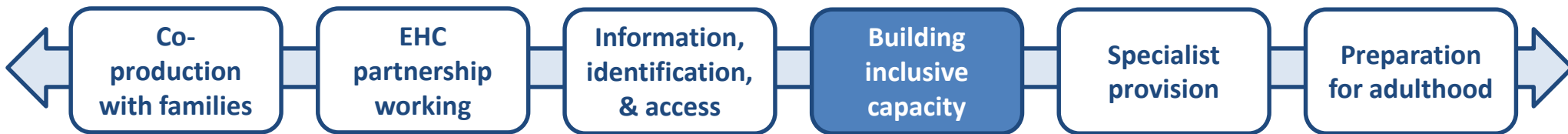| Co-production with families	EHC partnership working	Information, identification, & access	Building inclusive capacity	Specialist provision	Preparation for adulthood

Recommendations: Quick wins

- **Information** – while professionals were largely positive about the availability of local information, parents argued the local offer and advice from professionals did not always give them a clear or consistent overview of how support and services were organised in Wiltshire, what pathways of support existed, and what could be accessed and when. There is an opportunity to work with parents to co-produce a refined local offer that would build on the information that is already available, but would also provide a more strategic overview of the system to give parents confidence when navigating local support. This would provide further opportunities to co-produce and define what good inclusion and SEN support looks like, as well as clear pathways for how the system seeks to support young people with specific needs.

- **Access to support** – as we have noted, the panel that looks at EHC assessments, plans, placements and top-up funding is responsible for spending around £40m of public money each year. There are some immediate changes that we suggest are required to strengthen the panel's work – these include consistent chairing, refining and agreeing a consistent application of the banding descriptors, reintroducing peer-to-peer moderation from SENCOs, considering thresholds (particularly the low rate of refusal to assess), and the scope of DART.

Recommendations: Longer-term actions

- **Access to support** – in the longer term, we suggest further actions are required including refining the banding framework, developing routes to access time-limited top-up funding without an EHCP, and creating a more responsive support offer.

- **Identification** – undertake further focused work with health professionals and education providers, as well as other services, to consider what accounts for the high proportion of children with autism as an identified primary need and to ensure the autism pathway is operating effectively to identify young people's needs and bring in support at the right time.

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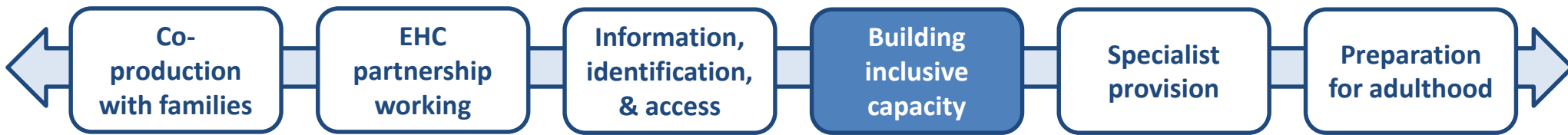| Co-production with families | EHC partnership working | Information, identification, & access | Building inclusive capacity | Specialist provision | Preparation for adulthood |

Fostering a consistently effective offer of mainstream inclusion

There are examples of positive approaches to inclusion in mainstream schools and settings, but the evidence suggests that this is not consistent. Parents and professionals described examples of holistic approaches to inclusion, led by skilled staff, identifying needs accurately, and putting in place effective support and adjustments. Our evidence suggests that this is not consistent across the county. Parents argued that approaches to inclusion varied between schools, depending on the attitude of the headteacher and skills of the SENCO. Some parents put this down to a lack of understanding of specific needs (autism, communication & interaction, mental health). Other parents and professionals, however, considered that there were instances of poor practice (a number reported some schools telling parents "we don't have children with SEN, so your child would not fit in here"), that were not being picked up and challenged. As a result, parents lacked confidence in the offer of inclusion support in mainstream schools and settings. The data suggest that this is one of the factors driving the rise in requests for EHCPs: requests from parents have risen in absolute terms from 48 in 2016 to 94 in 2018 (or 10% to 15% of requests).

Networks required to challenge poor practice and build inclusive capacity need to be strengthened. It is welcome that county-wide SENCO networks are being re-established. Without formal, co-ordinated and strategic SENCO networks, there has been no consistent engagements with the county's SENCOs to inform and drive a shared strategic approach, no systematic way of inducting new SENCOs into the practices and expectations of the Wiltshire system, and no means of ensuring a consistent understanding of and set of skills for responding to new and emerging needs. Likewise, there has been a lack of join-up between support for school improvement and inclusion, which is also now being addressed. In future, it is vital that there are systematic means for building the capacity of SENCOs and school leaders, as well as challenging poor whole-school inclusion.

Transition was also a concern. Secondary schools argued that primary schools "contained" children with high needs, who were consequently not ready for secondary school. Leaving aside the question of whether pupils need to fit secondary schools or schools need to adapt to pupils' needs, primary schools argued that the alternative to "containing" pupils was exclusion.

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Co-production with families	EHC partnership working	Information, identification, & access	**Building inclusive capacity**	Specialist provision	Preparation for adulthood

Access to targeted inclusion support to add to and build mainstream inclusive capacity

There was mixed feedback on the offer of targeted services that support inclusion. Some services were highly regarded, particularly those offering swift access to professional advice without a paper-based referral, preventative support, and sharing skills to build capacity. There were concerns expressed about some services regarding quality (schools being told to do things that they had already done, suggesting the "currency" of the offer of support had not kept pace with changing levels of knowledge in schools), difficulty in being able to access support (particularly therapeutic services), sustained impact (early help and family support) and cost (the EP service). There was also an overall concern that only one service (Specialist SEN Service) could provide support to pupils at SEN support – i.e. those without an EHCP or diagnosis, which is further evidence of the claim that support in Wiltshire is geared too much around having a formal plan and diagnosis.

- **EPs** – schools valued inputs from EPs, but felt the service had been priced at a level that was too expensive for them. Schools were having to prioritise EP time to support requests for EHCs, rather than in more developmental work.
- **Behaviour support** – this was highly praised for its holistic approach, capacity-building and impact.
- **SEMH** – overall, schools were concerned that they needed access to additional support that could maintain mainstream placements and build capacity. There are some individual projects, but these are not yet being systematically rolled out.

Overall, there is both the opportunity and the need to reframe the offer of targeted support. We noted earlier that Wiltshire invests a smaller proportion of its high needs block in targeted services than the national average. Providers clearly value services that provide swift access to professional advice (without having to complete a specific referral form), having a named point-of-contact, being able to access support and resource when required, and working with professionals that share skills and build capacity. Providers were also clear about the areas with which they are less confident – mental health and emotional wellbeing, trauma, attachment and challenging behaviour. We would argue that these steers should be used to re-develop the offer of targeted support for inclusion across education, health and care, with clear purposes, aims, roles and outcomes.

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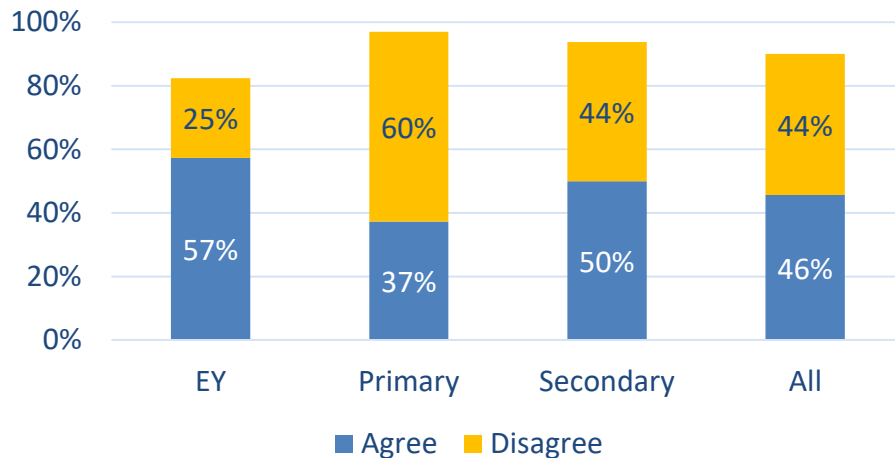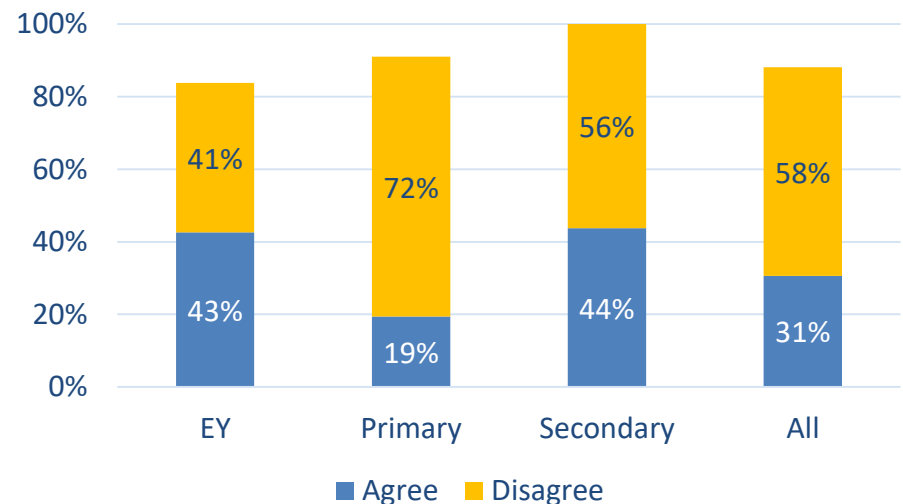| Co-production with families | EHC partnership working | Information, identification, & access | Building inclusive capacity | Specialist provision | Preparation for adulthood |

'There is currently a clear, consistent and effective offer of universal support in mainstream settings, schools and colleges.'
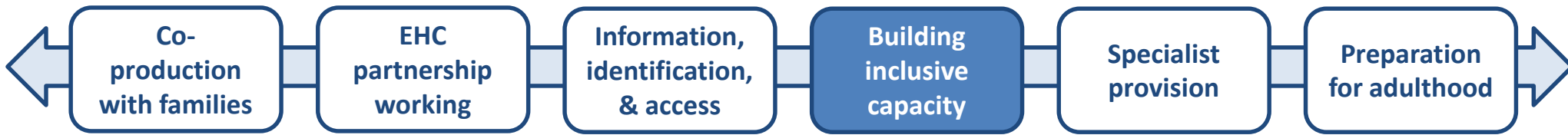
Chart — stacked bars (Agree / Disagree):
- EY: Agree 57%, Disagree 25%
- Primary: Agree 37%, Disagree 60%
- Secondary: Agree 50%, Disagree 44%
- All: Agree 46%, Disagree 44%

Legend: ■ Agree ■ Disagree

'There is currently the right offer of targeted education, health and care support.'

Chart — stacked bars (Agree / Disagree):
- EY: Agree 43%, Disagree 41%
- Primary: Agree 19%, Disagree 72%
- Secondary: Agree 44%, Disagree 56%
- All: Agree 31%, Disagree 58%

Legend: ■ Agree ■ Disagree

In our online survey, we asked professionals whether they agreed or disagreed with statements regarding whether there was (a) a consistently effective offer of mainstream inclusion support, and (b) the right offer of targeted support. We can see that providers were largely split on the question of the consistency of mainstream inclusion (46% agreed, 44% disagreed), but we can also see that early years providers were generally more positive (and commented on the fact the offer of support for their sector included access to advice, top-up funding and linked professionals), and primary schools were more negative. Providers were, on the whole, less positive about targeted services (58% disagreed), with a similar pattern of early years and secondary schools more likely to agree, and primary schools more likely to disagree.

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Source: Survey data collected during the review.

PART 2: FINDINGS AND RECOMMENDTIONS

Co-production with families	EHC partnership working	Information, identification, & access	**Building inclusive capacity**	Specialist provision	Preparation for adulthood

Recommendations: Quick wins

- **Mainstream inclusion** – start a co-productive dialogue with mainstream settings and schools, parents and carers, and other services about what the principles and hallmarks of good mainstream inclusion in Wiltshire should be – to provide a foundation for consistent practice and improving parents' confidence in mainstream inclusion. Embedding this will be part of a longer piece of work, but we suggest it is important to start this process and identify some foundational principles.

- **SENCO networks** – re-establish county-wide (although potentially locally delivered) SENCO networks, offering a rolling programme of induction, training in core processes, and practice enhancement around county-wide priorities for SENCOs and other leaders involved in supporting children with SEND. Ensure the work of the networks is centrally co-ordinated, professionally supported and informed by a shared strategy / priorities – co-produce this with SENCOs.

- **Whole-school inclusion** – through work that is already in train, agree processes for sharing intelligence and joining up support for school improvement and inclusion, so that there is a focus on whole-school improvement, and support and challenge to school leaders and governors around school effectiveness and inclusion.

Recommendations: Longer-term actions

- **Mainstream inclusion** – continue to develop a set of consistent expectations of mainstream inclusion across Wiltshire, and ensure this is set out on the local offer so that there is transparency about what families and professionals can expect to be consistent across all schools. (Leaders suggested creating a Wiltshire inclusion quality mark.) Build on this and existing networks to facilitate school-to-school working. Develop a rolling programme of whole-school inclusion support.

- **Targeted support** – consider the current offer of (and potential overlaps within) targeted support. Work with SENCOs and school leaders to co-produce a new offer, with clear aims, consistent models of support, and outcome measures.

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Co-production with families	EHC partnership working	Information, identification, & access	Building inclusive capacity	Specialist provision	Preparation for adulthood

Resourced provision

The model of "resource bases" for pupils with high needs in primary schools was seen as a strong feature of the SEND continuum. The provisions themselves are supporting young people with complex SEND. Without the bases, more pupils would require a special school place and transport away from their local area. There were concerns expressed about a lack of county oversight of the resource bases, a lack of strategic engagement about the development of the resource bases, and a lack of pro-active engagement around planning places. (The latter was a theme relevant to all forms of specialist provision.) Colleagues from the resource bases also described a lack of engagement from agencies – they considered that children we placed in resource bases and the assumption was that the resource bases would meet their needs, rather than there being any focused work form agencies on supporting cohorts of children with similar, complex needs. Primary school leaders argued that there needed to be something new, akin to the resource base model, but specifically for children with SEMH needs.

There were, however, concerns about the join-up with the "enhanced learning provisions" (ELPs) at secondary level, and about the clarity and purpose of the ELPs themselves. First, with regard to the question of "join-up", primary and secondary colleagues noted that there was not a consistent offer of support across the resource bases and ELPs – the ELPs did not provide an equivalent model of support to the primary school resource bases in a secondary context. Colleagues suggested that, as a result, secondary-age pupils who could be supported in a resource-base-style provision at secondary instead had to be placed in a special school. Second, there also appeared to be a fundamental lack of clarity about the purpose of the ELPs. The ELPs are funded as specialist provision (£10,000 per place plus per-pupil top-up funding). Our evidence did not suggest that, on the whole, ELPs were operating as specialist provision. Some schools were using the resource effectively, but overall there appeared to be a risk that high needs block resource is being used to subsidise mainstream inclusive practice in secondary schools. The evidence about transition from resource bases and the largely secondary-age cohort in INMSSs suggest that there would be value in considering a model more akin to a secondary equivalent of the resource bases.

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Co-production with families	EHC partnership working	Information, identification, & access	Building inclusive capacity	Specialist provision	Preparation for adulthood

Special school provision

Running parallel with our review has been a consultation about proposed changes to the shape of specialist provision in Wiltshire. Our review has not sought to cut across that consultation exercise. Instead, our review has sought to identify what needs to be in place to ensure that future specialist provision in Wiltshire, however it is organised, can be effective within the wider local SEND and high needs system. Overall, there was a strong message about the need for there to be a strong vision for special education in Wiltshire, and for there to be clarity about the role of specialist provision within that, rooted within a wider continuum of support for inclusion and a focus on long-term outcomes for young people with SEND.

In addition, there were four specific messages about current provision.

• First, special school leaders noted that levels of top-up funding for special schools were low compared to other areas, which made it difficult to support young people who required intensive 1-to-1, 2-to-1 or alternative high-level support.

• Second, there were concerns about the placement process – leaders considered there was too much focus on getting children into a provision, rather than whether it was the right provision. As a result, special schools reported that they had children rightly placed but wrongly banded, and rightly banded but wrongly placed in special school. As with the resource bases and ELPs, there was concern about the lack of pro-active engagement and strategic planning of specialist places.

• Third, there was a concern about the lack of formal mechanisms for supporting the reintegration of pupils from special schools into mainstream schools. Nationally, for every 2.5 children placed in a special school, 1 child returns to mainstream school. In Wiltshire, in 2018, 41 children moved from mainstream to special schools, but only 1 child moved from special to mainstream school. Put another way, nationally, as a proportion of all children who move from mainstream to special, the equivalent of 40.5% move the other way. In Wiltshire, the equivalent proportion moving from special to mainstream is 2.4%. Colleagues reported that there are no formal mechanisms for identifying and supporting pupils to make this move.

Co-production with families	EHC partnership working	Information, identification, & access	Building inclusive capacity	**Specialist provision**	Preparation for adulthood

Special school provision (continued)

- Fourth, as we show on the next page, there was a lot of dissatisfaction from colleagues from mainstream schools about the offer of specialist places. In particular, there were lots of concerns raised about there needing to be more places in special schools. As we noted in an earlier section of this report, when counting the resource bases and ELPs (notwithstanding our point that these are funded as specialist provision, but not necessarily operating as such), Wiltshire has a similar proportion of pupils with EHCPs in specialist provision. Furthermore, we would argue that seeing the issue simply in terms of the quantity of specialist provision does not do justice to the range of factors that are driving demand for EHCPs and special school placements. If more places are commissioned without addressing these pressures, those places will simply be filled and the pressures will continue. Returning to our initial point, it is vital that there is a clear and shared understanding of the role of specialist provision *within the local system of education, SEND and high needs*.

Alternative provision (AP)

At both primary and secondary level, there were concerns about access to alternatives to exclusion. Rates of exclusion in Wiltshire are low, but have been rising gradually over the last three full academic years for which there is published data (2015/16 to 2017/18) – primary exclusions have risen from 6 to 13 (and are now level with the national average; internal figures show exclusions have risen to 20 in 2018/19), while secondary permanent exclusions have risen from 0 to 13 (yet remain well below the national average; internal data suggest this has dropped to 5 in 2018/19). Primary school leaders reported being told "other schools would have excluded" when they asked for advice about alternatives to exclusion. Secondary school leaders expressed strong concerns about the range, quality and accessibility of provision to access from their devolved high needs block funding. There were also concerns about getting parents' buy-in to placements as alternatives to exclusion. Overall, in the context of Edward Timpson's review of exclusions and policy changes announced by the DfE, there is the need and opportunity for strategic engagements with school leaders to revitalise and reshape the use of AP in Wiltshire.

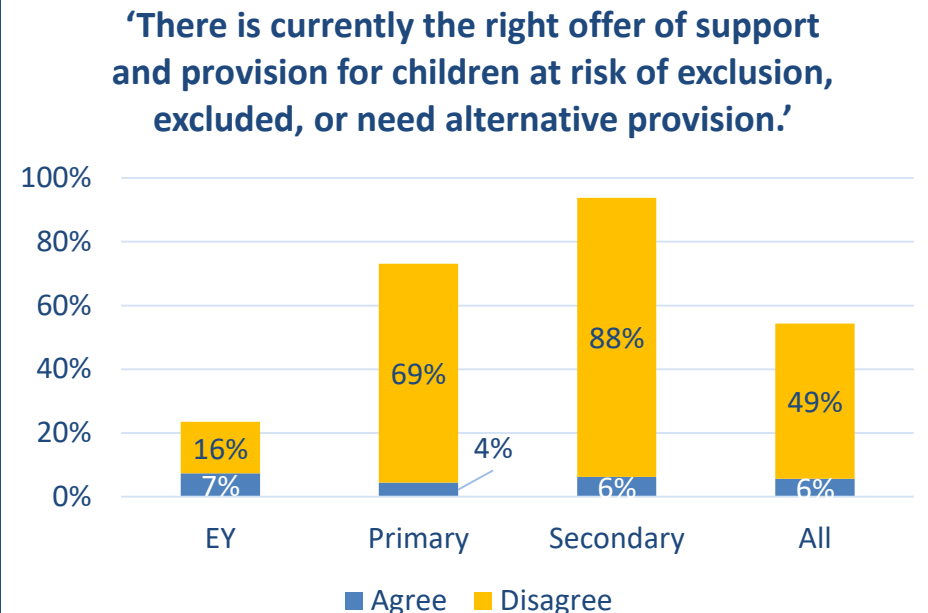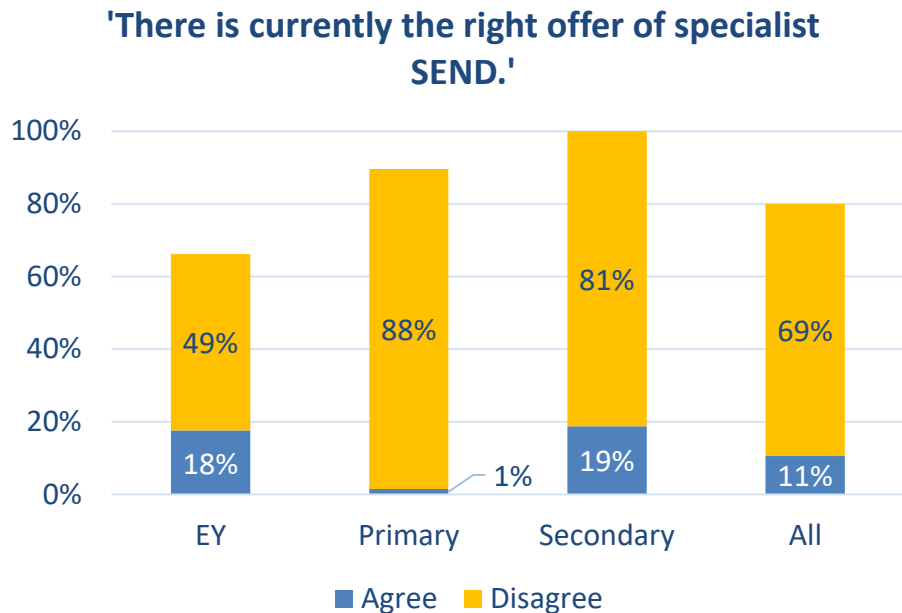ISOS
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| Co-production with families | EHC partnership working | Information, identification, & access | Building inclusive capacity | Specialist provision | Preparation for adulthood |

'There is currently the right offer of specialist SEND.'

EY — Agree 18%, Disagree 49%
Primary — Agree 1%, Disagree 88%
Secondary — Agree 19%, Disagree 81%
All — Agree 11%, Disagree 69%

■ Agree ■ Disagree

'There is currently the right offer of support and provision for children at risk of exclusion, excluded, or need alternative provision.'

EY — Agree 7%, Disagree 16%
Primary — Agree 4%, Disagree 69%
Secondary — Agree 6%, Disagree 88%
All — Agree 6%, Disagree 49%

■ Agree ■ Disagree

As noted on the previous page, the responses to the survey questions about the current offers of specialist SEND provision (resource bases, ELPs and special schools) and AP were stark. High proportions of primary and secondary school colleagues disagreed that there was the right offer of specialist provision (88% primary, 81% secondary). Tellingly, with 88% of respondents disagreeing, the question of AP was the one that received the highest proportion of negative responses from secondary schools, and where the proportion was higher than that for those disagreeing from primary schools. While there were a high proportion of early years colleagues who responded 'cannot say', almost half disagreed that there was the right offer of specialist provision.

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| Co-production with families | EHC partnership working | Information, identification, & access | Building inclusive capacity | **Specialist provision** | Preparation for adulthood |

Recommendations: Quick wins

- **Resourced provision** – start a discussion with secondary school leaders about the future of the ELPs. Link this to the discussion about expectations of mainstream inclusion, and seek to define the additionality a resourced provision in a secondary school should offer. Start to develop options for refining the ELP model to align it with the resource bases.

- **Special school provision and independent placements** – as part of the work looking at placement decision-making and banding, work with special schools to explore refinements to the placement process and banding framework that will enable special schools collectively to provide a strong, collective offer of support for pupils with the most complex needs. Ensure clear responsibilities and tighten time-limited, outcomes-focused commissioning of INMSS placements.

- **AP** – in light of the Timpson Review and DfE response, begin a focused discussions with primary and secondary schools about current AP arrangements, support options for pupils at risk of exclusion and with SEMH needs.

Recommendations: Longer-term actions

- **The role of specialist provision as a whole** – ensure that there is a clear vision about the overall role of specialist provision, and how the respective roles of resourced provisions and special schools (and the rest of the continuum of support) fit together, and clear processes for commissioning and adapting the offer of specialist provision based on needs. This will require co-productive work with schools to refine the ELP model and define a clear and consistent offer of resourced provision and special school provision that can support young people with the most complex needs. This will also require considering what will be needed, both from specialist provision and input from external agencies, to meet the needs of young people currently placed in or might require a placement in an INMSS, and those pupils who could be reintegrated from specialist provision into resourced provision or mainstream schools. Ensure this is understood by all professionals involved in placement decisions, and reflected in placement and banding processes.

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Co-production with families	EHC partnership working	Information, identification, & access	Building inclusive capacity	Specialist provision	Preparation for adulthood

Recommendations: Longer-term actions (continued)

- **Specialist provision (continued)** – ensure that there is a clear and consistent process for specialist providers, mainstream providers and other agencies to work together to identify pupils who could be reintegrated into mainstream school and to support a successful transition.

- **Independent placements** – first, strengthen individual placement commissioning – ensure that there is a consistent focus on outcomes, on the specific support that is being commissioned, and on transitions, so placements are not open-ended but focus on preparing a young person to move back to local provision at their next transition-point where this is appropriate. Second, develop a process whereby specialist providers and other services can come together to consider local, bespoke alternatives to independent placements where the latter may not be the most appropriate placement. Third, consider the current in-county offer of specialist provision for pupils with SEMH needs – these pupils are disproportionately represented in the cohort placed in INMSSs.

- **AP** – working with primary and secondary school leaders and other partners, revisit and refine current arrangements around preventing exclusion and the use of AP. We understand further work on this area is planned to start shortly. We would advise this is used to explore further how decision-making around the use of AP and the offer of preventative support and AP itself should be developed in Wiltshire to foster early support and inclusion, and prevent exclusions from rising.

- **Commissioning** – develop a process of regular, pro-active, strategic discussions with specialist providers individually and collectively about current and anticipated future trends and planned need for provision (not just an operational discussion about numbers of planned places).

Co-production with families	EHC partnership working	Information, identification, & access	Building inclusive capacity	Specialist provision	Preparation for adulthood

Strengthening and broadening options for young people preparing for adult life was one of the key areas of positive practice within Wiltshire. We heard a number of strong, positive messages from those involved in supporting young adults with SEND and high needs about the work that has gone into reshaping preparation for adulthood pathways in Wiltshire. There were positive comments about the dedicated leadership and co-ordination of this agenda from the local authority (this is something we have highlighted as a hallmark of effective preparation for adulthood practice within local SEND systems), and the development of strong, strategic relationships with Wiltshire College and other providers to plan pathways and study programmes for young people. This has resulted in a wider range of options being available to young people, and to the development of specific pathways like the supported internships scheme (52% of participants go into paid employment).

This remains a developing area, with ongoing work required to ensure the local area provides good opportunities for young adults with SEND and high needs. The positives highlighted above should not be read as suggesting that all young people with SEND and high needs now have the right range of options and are on good pathways into adult life. While recognising the work that has been done to develop options in Wiltshire – and this is often an area of the local system that is less strong in other localities – we would also highlight the ongoing need to broaden the offer to ensure that it is suitably flexible and responsive to the needs and aspirations of all young people with SEND and high needs. As one parent put it, it felt to them that options for young people with SEND and high needs seemed to narrow as they approached the end of their formal education, while for their peers options about further study, work and independent life seemed to widen. Some parents described a lack of flexibility within the offer for some young people with more complex combinations of needs. Furthermore, professionals reflected that there was further to go to strengthen the transition between school and college, so that young people were supported to make the transition from school to a more independent style of learning at the appropriate time. Professionals also reported a lack of early identification, planning and joining-up of an offer of support across adult services, children's services, SEND and education services for young people with the most complex needs.

Co-production with families	EHC partnership working	Information, identification, & access	Building inclusive capacity	Specialist provision	**Preparation for adulthood**

'The current continuum of support, services and provision is effective in preparing young people with SEND and high needs for a fulfilling, independent adult life.'

- **Agree** ■ **Disagree**
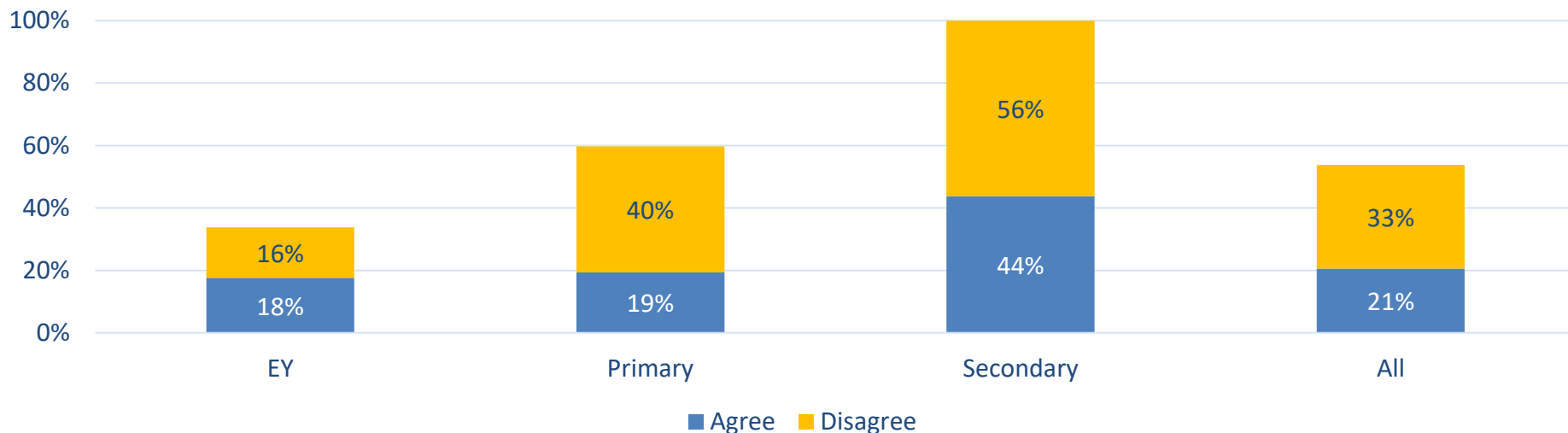
What is noteworthy first and foremost about the responses to the survey question about whether the current continuum of support is effective in preparing young people with SEND and high needs for adult life is the high proportion of "cannot say" responses – almost half overall, with particularly large proportions in the early years and primary schools. It is, perhaps, to be expected that professionals working with younger children feel less qualified to comment on how well the system prepares children for adulthood. Nevertheless, this does also suggest that, as a system, there are not the mechanisms for tracking through young people's pathways, capturing the overall impact of the system in enabling young people to make a successful transition to adult life, and ensuring the impact and learning is fed back into the system.

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Source: Survey data collected during the review.

| Co-production with families | EHC partnership working | Information, identification, & access | Building inclusive capacity | Specialist provision | **Preparation for adulthood** |

Recommendations: Quick wins

- **Developing pathways** – continue to build on the work that has been done so far in the context of education study programmes and supported internships. Continue to develop pathways and programmes that fit with the needs and aspirations of young people who are about to make the transition to young adulthood. Focus specifically on broadening routes into employment, strengthening the transition between post-16 education in special schools and college, and drawing in the expertise and offer from adult social care services.

- **Planning processes** – start to develop routines for identifying young people with the most complex needs, including those who are likely to require some additional transitional / ongoing support with their care needs. Start with young people in Years 9 and 10, particularly those in specialist provision and/or those who may require the most support with the transition to adulthood, and test / trial ways of capturing their aspirations and future plans – e.g. through annual reviews or specific, dedicated planning conversations.

Recommendations: Longer-term actions

- **Joint offer of support** – pull together a broader offer of joined-up, seamless support drawing on inputs from education, social care, health and community services. Ensure that this offer is well co-ordinated and jointly owned by professionals – rather than each individual service defining their offer but nobody taking responsibility for how these come together as a coherent package of support for a young person.

- **Young people's voice** – as we described under the 'co-production with families' theme, develop a set of core routines for having systematic conversations with young people about their aspirations, capture this, and use this to inform planning of individual pathways as well as shaping future commissioning priorities. Embed this process so that it is being used to drive planning of future pathways and the shape of the future preparation for adulthood offer in Wiltshire.

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Contents of this report

Part 1: The current context of support for young people with SEND and high needs in Wiltshire

Part 2: Six themes that this review has explored – key findings and recommendations

Part 3: Implications for the use of the high needs block

Conclusion: Overarching messages and taking this agenda forward

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Part 3: Implications for the use of the high needs block

How our recommendations link to the immediate focus on reducing the high needs block overspend

As we noted in the first section of this report, we recognise that high needs block resources in Wiltshire are under sever pressure, with and overspend that has been growing since 2016-17. In this report, we have made a series of recommendations that revolve around the themes of embedding a collective strategy and approach based on partnership working and co-production, strengthening core processes, and ensuring that there is a responsive, strategically planned and collectively understood continuum of support, services and provision.

None of these recommendations necessarily entail investing lots of additional resources; rather, their focus is on creating the conditions for a future strategy to be successful and how available resources could be used to best effect. This is because the overspend on the high needs block should not be seen as purely a financial matter. Instead, it should be understood as the symptom of a mismatch between expectations, demand and support, to which the solution is as much about partnership and strategy as it is about budget management.

Nevertheless, addressing the high needs block overspend should be a strategic priority for all partners in the local SEND and high needs system in Wiltshire. As such, in this penultimate section of the report, we have set out how strategic leaders and partners could address the high needs overspend. In so doing, what we have set out is not a set of projections for immediate cashable savings – the causes of the overspend are systemic, and will require a long-term, system-wide approach to turn around. Instead, we have sought to identify the areas of greatest pressure on the high needs block, on the basis that this is where there may be scope to reverse those pressures and address needs in a more cost-effective manner, and illustrate what would be required in order to bring the high needs block back into balance.

Part 3: Implications for the use of the high needs block

How our recommendations link to the immediate focus on reducing the high needs block overspend (continued)

To do this, as a first step, we have looked at areas of spend that account for a significant proportion of the high needs block and where there has been growth in spending the last three full financial years. This reveals four areas:

1. independent special schools (2018-19 spend = £9.4m; 67% increase in the last three financial years);
2. top-up funding for pupils in mainstream schools (2018-19 spend = £7.7m; 90% increase in the last three financial years);
3. specialist bespoke packages (2018-19 spend = £1.1m, 183% increase in the last three financial years); and
4. top-up funding for resource bases and ELPs (2018-19 spend = £3.2m, 51% increase in the last three financial years).

These are the four areas of pressure that we described on p.17, in Part 1 of this report. Taken together, these four areas accounted for £12.2m of spending, or 32% of high needs expenditure, in 2016-17. By 2018-19, spending had risen in absolute terms to £21.4m, and accounted for 46% of high needs expenditure. In total, these four areas combined have seen an increase in expenditure of 75%.

Many of our recommendations touch on these four areas, specifically:

- strengthening commissioning and develop local alternatives to independent special school placements;
- strengthening decision-making to address the high proportions of young people with EHCPs and top-up funding;
- addressing the fact that there are significant numbers of children with EHCPs out of school, and being funded with bespoke specialist packages as alternatives to accessing full-time, formal education; and
- addressing the inconsistencies in the offer of resourced provision, particularly the lack of clarity around the ELPs.

In focusing on these four areas, we have sought to illustrate what would be required to reduce the high needs overspend.

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Part 3: Implications for the use of the high needs block

	Scenario 1		Scenario 2	
	Young people	Amount	Young people	Amount
Top-ups	171	£ 1,047,033.00	250	£ 1,530,750.00
INMSSs	50	£ 2,351,250.00	70	£ 3,291,750.00
Specialist bespoke packages		£ 500,000.00		£ 500,000.00
ELPs		£ 250,000.00		£ 250,000.00
Total		£ 4,148,283.00		£ 5,572,500.00

The table above shows the four areas of expenditure on which we have focused. We have set out two scenarios to illustrate what might be required to address the pressure on the high needs block – these are illustrative, rather than predictive. Scenario 1 shows figures totalling £4.1m, while scenario 2 is more ambitious and totals £5.6m.

Top-ups

The average per-pupil top-up for a school-age pupil in Wiltshire is £6,123. Currently Wiltshire has 2,449 pupils who have EHCPs, which represents 3.3% of 74,862 pupils (as of January 2019). The national average is 3.07%. If the proportion of school-age pupils with EHCPs in Wiltshire matched the national average, there would be 2,298 school-age pupils with EHCPs in Wiltshire. This would be a reduction of 171. Scenario 1 illustrates that, if those children were supported through alternatives to an EHCP and top-up funding, that would be the equivalent of c.£1m of high needs block resources. Scenario 2 illustrates that reducing EHCPs by 250 (which would be the equivalent of having 2.96% school-age pupils with EHCPs) would equate to just over £1.5m. Our calculations above are an attempt to illustrate the impact on the high needs block pressures of bringing the proportion of school-age children with EHCPs into line with national average levels. (The alternative to reducing the *number* of top-ups would be to reduce the *average amounts* of top-up funding per pupil, which we do not think would be an effective approach.) We would argue that, as part of the future strategy, there needs to be a strong focus on ensuring there is robust decision-making about appropriate access to EHCPs and top-up funding.

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Part 3: Implications for the use of the high needs block

	Scenario 1		Scenario 2	
	Young people	Amount	Young people	Amount
Top-ups	171	£ 1,047,033.00	250	£ 1,530,750.00
INMSSs	50	£ 2,351,250.00	70	£ 3,291,750.00
Specialist bespoke packages		£ 500,000.00		£ 500,000.00
ELPs		£ 250,000.00		£ 250,000.00
Total		£ 4,148,283.00		£ 5,572,500.00

INMSS placements

Wiltshire currently has 182 young people placed in INMSSs, as described in Part 1. The average cost of a Wiltshire placement in an INMSS is £62,700, of which 75% on average comes from the high needs block. Based on our knowledge of other local areas, it is possible to reduce placements in the independent sector through a combination of tighter, outcomes-focused commissioning, and the development of local alternatives allowing pupils to be supported in less specialist forms of provision. We have suggested that it would be useful to think about a cohort of 50 children who could be supported in less specialist provision across the whole continuum. In other words, this would require the identification of 50 children in INMSSs who could, at an appropriate point, be supported in local specialist provision (special schools or resourced provisions) with the right support. This then requires thinking about the same number of children currently in specialist provision who could be supported in a resourced provision or a mainstream setting with intensive support. In other words, by taking a whole-system approach and thinking about specific cohorts of children who could be supported in less specialist forms of provision, it is possible to reduce unnecessary INMSS placements. Our suggestion here is not that this is a cost-free exercise – developing local alternatives may require some of the resource spent on INMSS placements to be recycled. Nevertheless, the table above shows that a reduction of 50 INMSS placements would equate to c.£2.4m of high needs block resources; for illustrative purposes, a reduction of 70 would equate to c.£3.3m.

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Part 3: Implications for the use of the high needs block

	Scenario 1		Scenario 2	
	Young people	Amount	Young people	Amount
Top-ups	171	£ 1,047,033.00	250	£ 1,530,750.00
INMSSs	50	£ 2,351,250.00	70	£ 3,291,750.00
Specialist bespoke packages		£ 500,000.00		£ 500,000.00
ELPs		£ 250,000.00		£ 250,000.00
Total		£ 4,148,283.00		£ 5,572,500.00

Specialist bespoke packages

Internal data from November 2018 shows that there are 90 children with EHCPs who are not currently in formal, full-time education. Published data from January 2019 suggests that 4.6% of all young people with EHCPs in Wiltshire (154) are 'educated elsewhere'. High needs block data shows the spend on specialist bespoke packages for young people who are not in school has risen from £380k in 2016-17 to £1.1m in 2018-19. The circumstances for each young person not in school will be different, and we would not argue for a blanket approach. Nevertheless, we would argue that it would be beneficial to focus on reducing the number of children with EHCPs who are 'educated elsewhere', securing them places in schools, and reducing high needs block on spend on these bespoke packages. In the table, we set out a c.50% reduction.

ELPs

As we noted in Part 2, there are some fundamental questions about the purpose and shape of resourced provision in the secondary phase. One option that could be considered is using the existing funding for ELPs in a way that both supports a stronger and more consistent offer of mainstream inclusion in secondary schools, while also creating a smaller number of specialist resource bases. It is difficult to quantify what this would mean in terms of reducing pressures on the high needs block. For illustrative purposes, in the table above, we have included the figure of £250,000, which is the equivalent of a reduction of 25 high needs funded places.

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Contents of this report

Part 1: The current context of support for young people with SEND and high needs in Wiltshire

Part 2: Six themes that this review has explored – key findings and recommendations

Part 3: Implications for the use of the high needs block

Conclusion: Overarching messages and taking this agenda forward

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Conclusion

We acknowledge that local areas across the country are facing rising demand and high needs cost pressures. We also acknowledge that Wiltshire receives less high needs funding than its statistical neighbours and the national average. Throughout this report we have cautioned against conflating these points with a distinct set of factors that are contributing to demand rising at a faster rate in Wiltshire than is the case across England. Unless these underlying issues that are driving demand, particularly for EHCPs and specifically for younger children, are addressed, the pressures the local system in Wiltshire is facing will only continue, and will only swallow up any extra resources that become available.

In this report, we have made a series of recommendations that revolve around the themes of:

- embedding a collective strategy and approach based on partnership working and co-production;
- strengthening core processes; and
- ensuring that there is a responsive, strategically planned and collectively understood continuum of support, services and provision.

These recommendations focus on creating a shared understanding of the current context and causes of pressures within Wiltshire, creating the conditions within which a shared strategy and stronger partnership working can be effective. We have argued strongly against interpreting the challenge of the overspend on the high needs block as a purely financial matter, and in favour of seeing it as something requiring a strategic approach, shared across all partners. Within this context, we have also highlighted four areas that should be the focus of strategic, partnership-based discussions about the use of resources and how to bring the high needs block back into balance. These are:

- strengthening commissioning and develop local alternatives to independent special school placements;
- strengthening decision-making to address the high proportions of young people with EHCPs and top-up funding;
- addressing the fact that there are significant numbers of children with EHCPs out of school, and being funded with bespoke specialist packages as alternatives to accessing full-time, formal education; and
- addressing the inconsistencies in the offer of resourced provision, particularly the lack of clarity around the ELPs.

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The team that carried out the review

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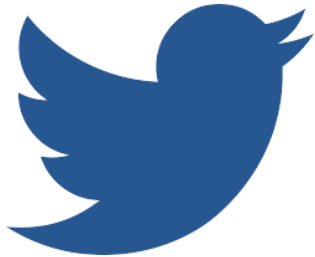
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