

SEND Strategic Commissioning Plan 2020-23:

**a roadmap to integrated
commissioning for children and
young people with Special
Educational Needs and Disabilities in
Sunderland**

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Introduction

This strategic commissioning plan supports **Shaping Sunderland's Future Together: Integrated Strategic Commissioning Strategy Statement of Intent for 0 – 25 year olds in Sunderland**. It is informed by that strategy's vision to “deliver inclusive, needs based, outcome focussed care for 0 – 25 year olds and their families” and builds on the strategic priorities set out in Sunderland's SEND Strategy: **Working together for children, young people and families 2019 – 2022**, with clear read-across to associated strategic plans, including the **Sunderland Children and Young People's Mental Health and Wellbeing Transformational Plan**.

The plan has been developed in partnership with children with special educational needs and disabilities (SEND) and their families. It is owned by Together for Children (TfC), Sunderland Clinical Commissioning Group (SCCG) and Sunderland City Council. It addresses the commissioning of services and support for children and young people aged 0 to 25 with SEN or disabilities, both with and without Education Health and Care (EHC) plans to ensure we are meeting our commissioning responsibilities as set out in the Children and Families Act 2014, SEND Code of Practice 2014 and Equality Act 2010.

Our aim in developing this plan is to provide a roadmap to personalised, integrated support that delivers positive outcomes for children and young people. This will involve bringing together support across education, health and social care from early childhood through to adult life and improving planning for transition points such as between early years, school and college, between children's and adult social care services, or between children's and adult health services.

Strategic objectives

The objectives of the plan are to:

- ensure that there is sufficient education, health and social care provision to meet demand in relation to the identified needs of children and young people with special educational needs (SEND) and their families;
- ensure the needs of children and young people with SEND are met through high quality, relevant commissioned services which deliver positive outcomes, offer value for money and are focussed on support which intervenes early to prevent needs escalating, wherever possible;
- improve the effectiveness of integrated commissioning arrangements.

Integrated commissioning for SEND is a cycle of continuous improvement; the Code of Practice is clear that partners may need to shift the focus of their activity as the needs of the local population change and delivery of services improves. As such, this strategic plan will be regularly monitored and reviewed to ensure that it

addresses changing needs and that services continue to improve outcomes for children and young people with SEND.

Our approach to integrated commissioning

The commissioning cycle has been adapted and included in the SEND Code of Practice as the basis for joint commissioning:



This cycle frames our approach to integrated commissioning and has been used to develop our key priorities as set out in our plan below.



How do we work together to plan and commission services for children with SEND?

Working with partners

Our approach: Having worked collaboratively in delivering children’s services across Sunderland, we are working to transform this learning into a more formal arrangement. In July 2019, SCCG and TfC created an integrated children’s commissioning function. This transformation is not just about the realignment of resources and structural re-organisation, but it is about the potential that true integration can bring in reducing silo working, facilitating more effective decision making, eradicating any overlapping or duplication of investment, and seizing opportunities for joint ventures. The new function will provide economies of scale combined with integrated delivery around individuals and families as set out in our and statement of intent ‘Shaping our future together’.

Impact: We have reviewed and re-invigorated our Children’s Integrated Commissioning Group which will provide real opportunities for organisations and partners to ensure that the children’s services budget, the children’s public health budget and SCCG funding for children in Sunderland is used as efficiently as possible to improve the lives of our 0–25 year olds. We have also formalised our arrangements through a section 75 agreement.

Our governance arrangements have been further strengthened by the development of a SEND Strategic Commissioning Group which is tasked with driving the delivery of the SEND Strategic Commissioning Plan. The group has established links with other relevant groups, including the CAHMs partnership and the SEND Strategic Partnership to inform intelligence, planning and integrated commissioning.

Working with children and young people

Our approach: As noted in our Children and Young People’s Plan, Sunderland has always had a strong culture of participation and engagement of children and young people in specific activities. We know that we must find innovative ways to ensure the voice of children and young people with SEND is consistently listened to when we design and evaluate services as well as when we are

“Nothing about us
without us”

working with them to meet their individual wishes, aspirations and needs. We have appointed a SEND Participation and Engagement Officer who is skilled in using innovative engagement tools so that children with a range of communication preferences can participate.

Impact: In the summer of 2019 we undertook a programme of engagement activities to encourage children and young people with EHC plans to share their experiences of their daily lives: their schools and colleges; support networks; social activities; health and wellbeing; and hopes for the future. 63 children participated, including some children who communicate in ways other than speech. One of the themes they highlighted was the importance of youth clubs in preventing social isolation and their sadness the difficulty with accessing provision over the summer holidays. As a result, we are working with one of our short breaks providers to reshape the service and extend availability over summer.

Working with parents and carers

Our approach: Our partnership with the Sunderland Parent Carer Forum is strong and the forum is involved in all that we do. They are involved at a strategic level in implementing the SEND reforms and seek the views of a wide range of parents so that we can use this valuable information to help to improve provision together. Parent carers are key members of the SEND Integrated Commissioning Group and the SEND Strategic Partnership. Our terms of reference ensure that meetings and events take place at times when parents of school-aged children can attend.

Impact: In order to make our Local Offer easier for families to access, Sunderland Parent Carer Forum are working with us on the redevelopment of the website in a family focussed way. As a result, we are procuring a digital partner to build a Local Offer site focused on delivering the outcomes of this consultation. Parents, children and young people will work alongside digital partner to create the new Local Offer format and to help manage the content. The original site will continue until the completion of new offer which will be designed and built by Summer 2020.

Working with providers

Our approach: Developing services delivered by the external market is a key element of our integrated commissioning strategy. Achieving market change is not a quick or challenge-free process; if we want to ensure value for money, we need to manage down costs wherever possible and manage up outcomes for children. We are developing strong relationships with providers to ensure that they are part of this journey to define and introduce new models of service with lower cost and higher impact, which may require them to restructure individual services or business models.

Impact: In response to an identified gap in educational provision for our most complex KS4 pupils, we have worked in partnership with a local charitable organisation, Hope Spring, to develop an innovative yet cost-effective solution. Hope Spring have now opened a 12-place school on a former residential home site which delivers an evidence-based therapeutic model for young people who are at risk of, or have already been, excluded from school or from alternative provisions.

Working across geographical boundaries

Our approach: We recognise that in order for us to have the best opportunity to shape and drive the market, we need to collaborate regionally on procurement solutions. The Strategic Children's Commissioning Group has been established as a subgroup of the Directors of Children's Services group to address the shared concern about the adverse market conditions for services for some of the most vulnerable children across the region. The group is developing a collaborative commissioning strategy, including a focus on growing internal resources and developing the external provider market.

Impact: The NE12 is the result of a collaborative procurement exercise on behalf of the North East Procurement Organisation (NEPO), its Member Authorities and their Clinical Commissioning Groups. Providers are appointed to a Flexible Procurement Agreement for delivery of placements for children and young people at independent special schools and colleges, residential children's homes and residential short break services.

Whilst the prevailing market forces mean that there are continuing challenges with the engagement of all providers in this solution, some efficiencies have been generated through the operation of a shared process for contract management; using our collective resources means that we can more effectively share monitoring data and assess how well contracted services are having a positive impact for individual children.

What we need to do next:

1. **Embed governance arrangements for integrated commissioning of SEND:**
 - Ensure there is sufficient senior leadership and management across key agencies to support integrated commissioning of SEND and help overcome blockages.
 - Further consideration of the appointment of a Designated Clinical Officer for SEND within the CCG to complement the DMO role currently undertaken by a Consultant Paediatrician.
2. **Strengthen coproduction with families:**
 - Agree our integrated procedure for all children and young people with

SEND and their parents and carers to be fully involved in creating and monitoring the services we provide, which sets out how we will work together from the start to the end of any commissioning activity.

- Create a participation group for children with special educational needs and/or disabilities or ensure that this cohort can meaningfully be included in existing groups.
- Develop a toolkit to support good participation and coproduction which will be available to partners and families as part of our Local Offer.
- Develop a process for all services and teams working with children, young people and young adults with SEND to complete an annual participation audit with a focus on improving participation.
- Review processes for the assessment and coproduction of EHC plans.

3. Engage with providers and regional partners:

- Work with providers to develop a local market which promotes sufficiency, diversity and sustainability.
- Produce a SEND market position statement which sets how the market will need to change to deliver the new strategic approach to integration, including promoting personalisation and the roll out of personal budgets.
- Work collaboratively with the Children's Strategic Commissioning Group to develop a regional / subregional approach to the SEND commissioning which identifies synergies and opportunities for improving provision by working across geographical boundaries.

Outcomes:

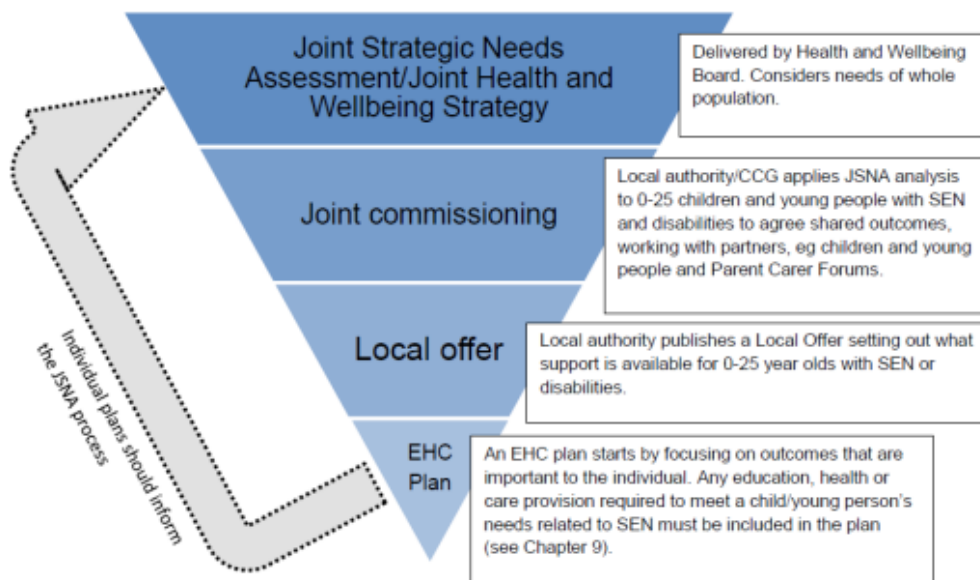
- **Clear and established processes in place for partners to work together strategically to plan, commission and fund services jointly for young people with SEND in Sunderland**
- **Children and young people with SEND and their families are provided with opportunities to influence decision making and work in partnership with leaders to plan, review and evaluate service delivery.**
- **Children and young people with SEND and their families are actively involved in the assessment process and the production of their EHC Plans. They have co-ownership of both the process and the decisions taken about how their needs will be met**



How do we understand the needs of our children and young people with SEND?

SEND Joint Strategic Needs Assessment (JSNA)

The [SEND Joint Strategic Needs Assessment](#) (JSNA) brings together a wealth of data and information to understand the needs of children and young people with special educational needs and/or disabilities in Sunderland. It is a live document and should be continually updated as new data and needs are identified. The JSNA was produced in January 2019; a review is currently underway. As stated in the SEND Code of Practice, there is a clear relationship between population needs, what is procured for children and young people with SEN and disabilities, and individual EHC plans. The importance of the JSNA in informing SEND commissioning is outlined below:



Other data sources which we use to determine needs and demand and which will inform the review of the JSNA include:

- a. [PHE child and maternal health statistics](#);
- b. [GP practice QOF registers of learning disability](#);
- c. **Provider contracts and performance measures**;

- d. [TfC's disabled children's register](#);
- e. [QOF national prevalence data on key conditions](#);
- f. [Schools census](#);
- g. [Annual special educational needs survey](#);
- h. [Child in need census](#);
- i. Engagement with the [Sunderland Parent Carer Forum](#) and with children, young people and their families;
- j. Feedback from GP practice members and from commissioned providers;
- k. Learning from analysis of EHC plans;
- l. Research projects, for example [the University of Sunderland's commissioned research around the prevalence of SEND in the city among children and young people aged 3-16](#);
- m. [Data outlining the diagnoses and health needs of children assessed in Sunderland Paediatric Disability Service's clinics](#);
- n. National initiatives to support local areas to understand their data relating to children and young people with SEND, such as the [Council for Disabled Children's SEND data dashboard](#).

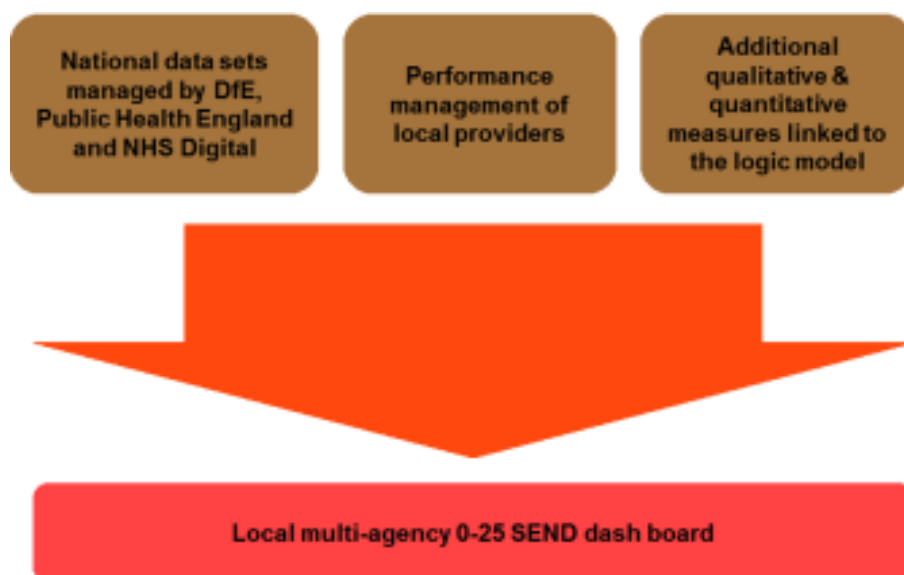
We recognise that currently, much of this data is gathered in silos; health, education and social care data is held in different places, captured by different parts of the system and used to provide assurance to individual agencies.

Scoping has commenced with colleagues from North East Commissioning Support (NECS) to develop a comprehensive data dashboard for Sunderland. The intention is that this would bring together datasets from across primary care, secondary care, mental health and community health services and match this with education and social care data using NHS numbers across the cohort of children and young people with SEND aged 0-25.

This work will be further strengthened by a research proposal from the University of Sunderland which builds on the successful work undertaken by Dr Karen Horridge in developing a paediatric dataset. The project will explore information governance of datasets and how challenges in sharing data could be overcome to improve information flow and aid understanding of childhood disability and trends.

Provision and service mapping

The development of a multi-agency 0-25 SEND dashboard for Sunderland will draw from a range of national and local data sets. However, we recognise that additional local qualitative and quantitative measures will be required in order to support the measurement of progress against the priorities identified in the SEND Strategic Commissioning Plan and associated strategies.



To support this, the SEND Integrated Commissioning Group is undertaking a mapping exercise to capture intelligence relating to existing commissioning arrangements. This will articulate: what support is available to, and how it is accessed by, children with SEND; who is accountable for the provision; how it is commissioned or provided; service contracts and expiry dates; measures of success; and any subsequent gaps in provision or areas for improvement.

This evidence base will be further enhanced by the roll-out of provision mapping across all education providers in Sunderland; from January 2020, individual education settings are required to submit details of costed SEND provision at an individual child-level to facilitate accurate provision costing and inform an understanding of outcomes and impact.

What we need to do next:

- 4. Develop a joint data set for children and young people with SEND aged 0-25:**
 - Identify datasets in scope and agree reporting outputs.
 - Identify a lead for collating data to populate the SEND dashboard.
 - Develop Comprehensive Information Sharing Agreement between partners

that sets out what information can be shared, with who, how to share securely and the legal basis for sharing.

- Develop and pilot the revised dataset.

5. Scope needs, data and related intelligence across partners

- Revise SEND JSNA.
- Complete service mapping exercise to identify the service, resources and investment profile across the SEND cohort.
- Review initial data from provision mapping across educational settings.

6. Develop baseline position

- Complete a gap analysis; map needs against existing provision to determine gaps and take this as the baseline from which to build a shared understanding of current and future needs to inform commissioning intentions and procurement planning.

Outcomes:

- **All partners are confident in sharing information appropriately, safely and legally.**
- **Systematic and timely information and data sharing across agencies.**
- **Datasets enhanced and consolidated to inform commissioning decisions and judgements about the adequacy and sufficiency of provision.**
- **Reduced duplication**
- **Needs mapped against existing provision as a baseline.**
- **Partners have a shared understanding of current and future needs.**
- **Commissioning decisions are based on evidenced needs.**



Key issues from our needs analysis

Our analysis of needs has highlighted a number of emerging key issues and challenges to inform our commissioning priorities, including:

- a. A 5-year consecutive rise in the number of children and young people aged 1-18 with an identified Special Educational Need (SEN) in Sunderland. In 2014/15, the number of children recorded as having an identified SEN was 5,099 (12.38% of the child population). In contrast, the number of children with an identified SEN in 2018/19 was 6,603 (approximately 15.94% of the child population), representing an increase of 3.56% over 5 years.
- b. An upward trend in the number of children diagnosed with autism spectrum disorder (ASD); from 710 children in 2014/15 to 1,198 children in 2018/19.
- c. An upward trend in the number of children with social, emotional and mental health (SEMH) needs; from 1,075 children in 2014/15 to 1,356 children in 2018/19.
- d. Increasing demand for EHC needs assessments; the percentage increase in requests between January 2014 and January 2018 was 21.95% and between January 2018 and January 2019 was 27% (from 311 to 396).
- e. Resource challenges in assessing, planning and reviewing EHC needs in a timely manner.
- f. Increase in exclusions of children with SEND (and a significant rise in exclusions of children with autism). In Sunderland, 128 (76%) of the 169 primary pupils who received fixed term exclusions in 2017-18 were receiving SEND support.
- g. A high proportion of children and young people with mental health needs (1 in 10) and evidence that mental health services for children with SEND are difficult to access.
- h. High demand for places in our special schools and units; 48.5% of children with EHCPs in Sunderland are placed in a special school compared with the NE average of 43.2% and national average of 34.8% (Jan 2018).
- i. Increasing demand for Speech and Language Therapy (SALT), Occupational Therapy (OT), and physiotherapy services, with provision fragmented across partners and providers.

- j. A lack of clarity relating to decision-making pathways and panel processes for some joint-funding arrangements for children with complex needs.
- k. A low number of children (3.78%) who have requested personal budgets as part of their EHC plan (60 out of a total of 1588 plans).
- l. Demand for social and leisure opportunities which meet the changing needs and preferences of young people with SEND.
- m. A lack of cohesion in support for young people transitioning from children's to adults' services.

As a result, we have identified key priorities which will form the basis of our integrated commissioning intentions for the planning and delivery of services.

What we need to do next – our commissioning intentions:

7. **Build capacity in local education provision:**

- Review the level of school places to meet current and expected need within designated provision or special schools to reduce the number of pupils who are being placed out of area for their education.
- Revise agreements for commissioned special school places to ensure a clear service offer.
- Develop more effective and innovative ways to use high needs funding in mainstream schools.
- Review support services to schools to ensure consistency and clear pathways, including:
 - Autism Outreach
 - Language and Learning
 - Physical Disability
 - Behaviour Support
 - Sensory Services
 - Educational Psychology
- Examine alternative provision models for children with SEND.

8. **Develop new models to meet demand in relation to our SEMH and ASD cohorts:**

- Expand Additional Resource Base provision for children with SEMH needs.
- Work in partnership with Hope Spring to explore the potential expansion of the therapeutic education model for children with complex SEMH needs.
- Work in partnership with the Prosper Learning Trust to deliver specialist autism provision with integrated therapeutic support for up to 96 children aged 5-16 at the new Harry Watts Academy.
- Fully implement and review the ASD diagnostic pathway.

9. **Align pathways into services, including points of access and initial referral processes:**

- Review systems and processes in relation to EHC needs assessment to ensure they are clear and fit for purpose.
- Ensure referral pathways and provision for SEND in Health, Education and

Care is available on the Local Offer website.

- Support the CAMHS Partnership to design a Single Point of Access (SPoA) into mental health services.
- Develop a specialist diagnostic pathway to assess children and young people for foetal alcohol spectrum disorder (FASD).
- Review the Multi-Agency Preparing for Adulthood Protocol and Pathway for young people with SEND to ensure smooth, well-coordinated transitions.

10. Deliver high quality and timely commissioned services which are targeted to the needs of children with SEND:

- Agree key performance indicators, outcome measures and revised service specifications, putting in place contract variations where necessary, to formally recognise NHS Foundation Trust providers' contractual obligations in respect of:
 - Compliance with the SEND Code of Practice (2015) and Children and Families Act 2014
 - Provision of a named SEND contact for the provider organisation and clarity about the DMO role
 - Representation at the SEND Strategic Commissioning Group and SEND Strategic Partnership, if requested, including reporting of any service delivery updates and improvement actions.
- Ensure review of wheelchair and equipment services is resulting in accessible services which deliver required outcomes.
- Develop clear offer of preventative support for children with SEND in 0-19 and early help services.

11. Review and redesign the short breaks offer:

- Agree joint commissioning arrangements to expand the availability of short break provision during summer holidays.
- Work with regional partners to revise the service specification and recommission specialist short break provision for children with life-limiting conditions.
- Revise the service specification for overnight short breaks at Grace House to ensure children are assessed and introduced to the service in a timely way.
- Revise the short breaks statement to reflect the new offer.

12. Increase personalisation, including the uptake of personal budgets and integrated personal commissioning:

- Review the use of personal health budgets for children in receipt of continuing care funding and consider the extension of personal health budgets to a wider group of children and young people who have complex health needs and wheelchair users.
- Explore the development of social prescribing to support an asset focused, person-centred thinking and planning approach to understanding families' skills and knowledge, resilience, finances, social networks and involvement in community activities.
- Consider the viability of having a ring-fenced integrated budget for personalisation through top-slicing funding from existing budget lines and

block contracts across health, education and social care.

13. Improve NHS Continuing Care processes and arrangements for the joint assessment, commissioning and procurement of services for children with complex needs:

- Identify trends and themes to inform joint commissioning in relation to children eligible for NHS Continuing Care where commissioned services are unable to provide health interventions and support at an individual child level.

Outcomes:

- **There are enough local school places to meet the needs of children and young people with SEND which supports them to do well at school.**
- **Children with SEMH needs and ASD are supported to achieve good outcomes by services that have a good understanding of their specific needs.**
- **Children and young people and their parents and carers have access to the help and support they need so that they feel prepared when they move from one provider to another, or into adult services.**
- **Children and young people receive the right services, in the right place, at the right time and as close to their homes as possible.**
- **Children and young people are able to spend quality time away from their main carers; parents and carers are able to take a break from their caring responsibilities.**
- **Services are tailored to individual need, provide greater choice and control over packages of care and ensure children in transition to adult services have a clear pathway of care.**



Joint review to
improve service
offer

How will we know if we are making a difference?

We know that driving improvements in SEND services through integrated commissioning is not something that can be done and delivered once: it's an ever ongoing, iterative process and a journey that relies on the continuing support and commitment of everyone involved. We must work with providers and partners across the local area to continuously improve services and generate innovative ways of coordinating and delivering high quality, child-centred and cost-effective support to children with SEND.

Joint review is an essential part of our approach to integrated commissioning to build our evidence base of:

- how services are performing, including efficiency, productivity and value for money
- the contribution service are making to achieving better outcomes for children with SEND in Sunderland
- the impact of our strategic commissioning plan: is anyone better off?

What we need to do next:

14. **Develop an outcomes framework for joint commissioning:**

- Identify the existing outcome tools that services use to assess the difference that services have made in improving outcomes for children and young people.
- Agree the model for measuring and achieving outcomes from commissioned services.
- Ensure service contracts and specifications clearly articulate reporting and performance monitoring requirements in relation to outcomes for children and young people on a SEND support plan or an EHC plan.

15. **Develop processes for joint review of SEND services:**

- Establish a joint audit programme for EHC Plans and reviews with mechanisms for ensuring:
 - outcomes are collectively understood
 - funding responsibilities are clear
 - management oversight is clear and effective
 - families are involved in the process
 - findings are shared with partners and providers and used to identify gaps in provision and inform commissioning decisions.
- Agree responsibilities and methodologies for undertaking quality assurance activities with commissioned services, including visits to educational and clinical settings, where appropriate.

16. Revise, remodel and review:

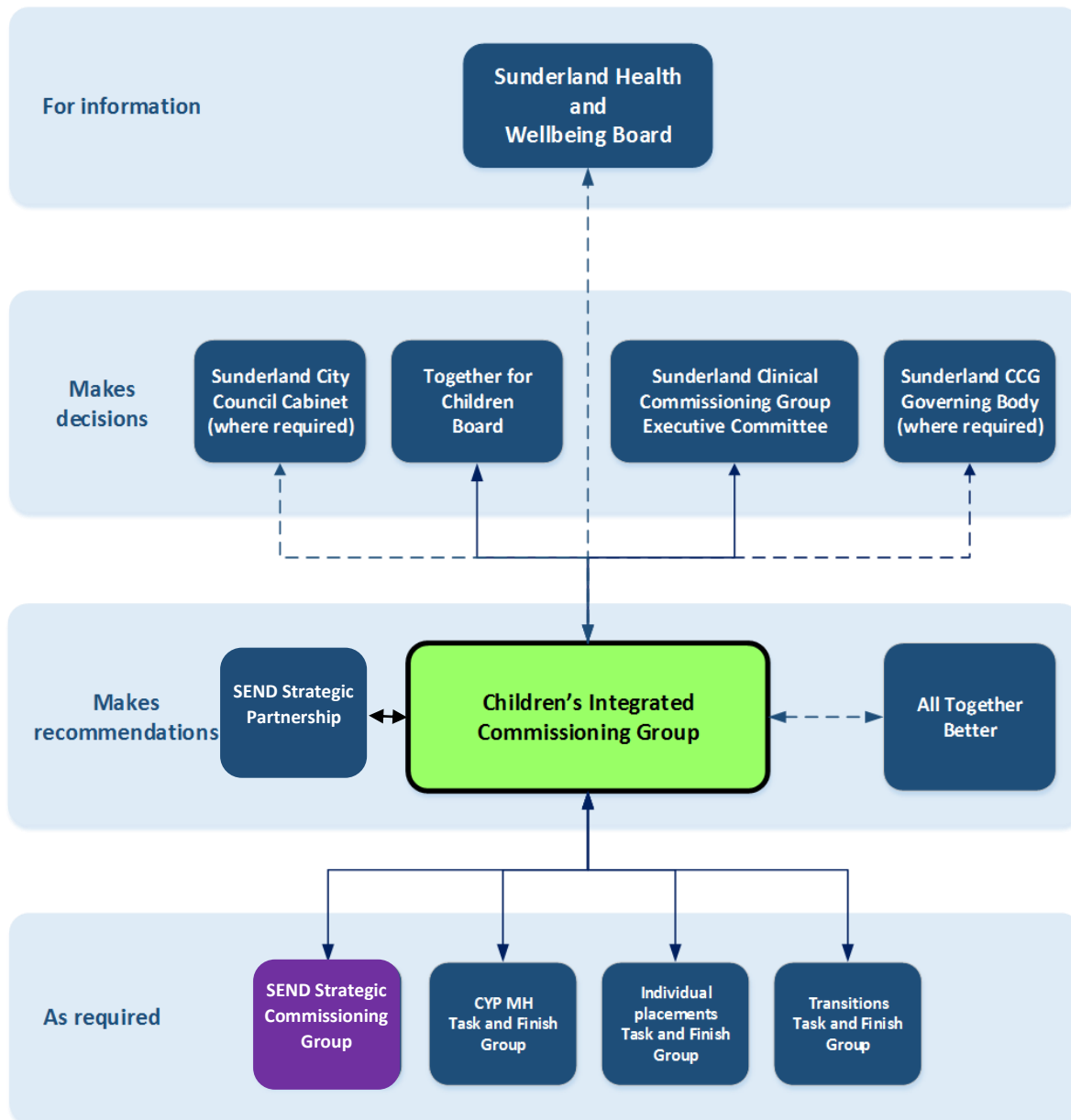
- Developing coproduction processes for reviewing, redesigning and recommissioning SEND services with and full stakeholder engagement.
- Produce a methodology for decommissioning services and mitigating any potential negative impact on children and families.
- Agree new or revised strategic priorities and activities to address changes in the needs of the local SEND population.

Outcomes:

- **Joint commissioning activities in our local area have had a demonstrable effect on improving outcomes for young people with SEND.**
- **All services have processes in place to monitor progress of outcomes as an individual, operational and strategic level.**
- **Outcome monitoring informs planning and joint commissioning.**
- **Services are designed to address changes in the needs of the local SEND population.**

Appendix 1: Governance Structure

The diagram below sets out the current reporting governance arrangements for the Integrated Commissioning Group and SEND Strategic Commissioning Group:



Appendix 2: Reference Documents

- [Children and Families Act 2014](#)
- Department for Education [Special educational needs and disability code of practice: 0 to 25 years 2015](#)
- Department of Health [National Framework for Children and Young People's Continuing Care 2016](#)
- LGA and NHS Clinical Commissioners [Integrated Commissioning for Better Outcomes: a commissioning framework](#) 2018
- Shaping Sunderland's Future Together: Integrated Strategic Commissioning Strategy Statement of Intent for 0–25 year olds in Sunderland
- [Sunderland Children and Young People's Mental Health and Wellbeing Transformational Plan](#)
- Sunderland Partnership [Joint Health and Wellbeing Strategy](#)
- Sunderland SEND Joint Area Inspection Self- Evaluation December 2019
- Sunderland SEND Joint Area Inspection Action Plan December 2019
- [Sunderland SEND Joint Strategic Needs Assessment](#)
- Sunderland SEND Strategy: Working together for children, young people and families 2019 – 2022