



Havering
LONDON BOROUGH

High Needs Review

2017



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1. Our Vision

In Havering we want all children and young people to thrive and develop the skills, characteristics and knowledge which prepares them for adult life.

Our vision is for children and young people with special educational needs and disabilities (SEND), and other additional needs, to enjoy their education in the most inclusive environment possible and be supported in participating as fully as they can in the lives of their schools and local community, throughout childhood and into adulthood.

This vision and shared understanding with our partners and stakeholders will be a key part of our published local offer of SEND (special educational needs and disabilities) provision and services.

We launched our Strategy for Children and Young People with Special Educational Needs and Disabilities in December 2015, following the introduction of the Children and Families Act 2014. The strategy recognised that Havering is experiencing increasing demand on its SEND services due to rising numbers of children and young people in the borough with SEND, as well as a rise in the complexity of needs amongst those with SEND. Five key priorities were set out:

1. The establishment of a new ARP (Additionally Resourced Provision) for pupils with Autism Spectrum Disorder (ASD) to support mainstream schools
2. The creation of capacity in special schools for growth in predicted pupil numbers over the next 5-10 years for those with ASD, through transfers of pupils with moderate learning difficulties (MLD) to ARPs in mainstream schools
3. A reduction in the number of pupils with ASD placed in out of borough provision, including planned returns of some pupils considered able to benefit from more local provision through placements in Havering special schools, once their capacity has been increased
4. The setting up of specialist facilities for pupils with behavioural, emotional and social difficulties (BESD) to support mainstream schools
5. A planned reduction and, where possible, a return of pupils from out of borough BESD placements to Havering's BESD resources.

The 2015 strategy has been a helpful vision and guide for the past two years. However, in Havering we have changing and growing demands on our resources.

We want to ensure that our strategy is a 'live' document which can adapt and flex to meet those changing needs. As such, we wanted to review our strategy to:

- involve key stakeholders such as early years' providers, schools, academies and colleges, as well as children, young people and parents and carers

- create an attractive offer for children, young people and parents
- include young people with SEND up to age 25
- prepare children and young people for their adult lives
- provide a flexible strategic approach which will meet changing requirements and demands
- ensure we can respond quickly and confidently to government initiatives which provide additional support or opportunities for children and young people with SEND
- be clear how we will balance available funding with increasing demand
- reflect that getting our provision right has to involve significant input across education, health and social care.

We envisage the result of this review will be:

- A strategic plan for high needs provision that makes sure there is an attractive offer for parents and young people which will meet the needs of future cohorts, at a cost that is sustainable. Including, for example:
 - measures to support mainstream schools in meeting the SEN of a wider range of pupils, for example through workforce training or clear routes to access specialist expertise;
 - changes to the focus of existing specialist places, to cater for different or more complex needs;
 - the creation or expansion of specialist provision attached to mainstream schools (special units or resourced provision);
 - identification of the need to create or expand special schools, and
 - strategic engagement with specialist providers in the non-maintained and independent sector, to make sure that the places they are offering reflect the changing needs of children and young people.

The High Needs Review sets out how we went about reviewing our provision and what our findings were.

It is based on what children, young people, parents and carers have told us; what early years, schools and post-16 institutions tell us is working well and where improvements are needed; and is also based on what our data and future projections demonstrate.

The new strategy will set out a clear vision for where we want SEND provision and services to be for children and young people aged 0-25 years and beyond, into adulthood.

2. National and local policy context

2.1 National policies

There are a number of national policies and guidance documents which have given context to the scope of the review.

- Rochford Report 2016
- Children and Families Act 2014
- Care Act 2014
- Think Autism 2014
- Children Act 1989/2004
- Working Together to Safeguard Children, March 2015 (reviewed 2017)
- Children with Special Educational and Complex Needs 2014
- Supporting Pupils with Medical Conditions at School 2015
- Department of Health: Research on funding for young people with special educational needs, research report, July 2015

2.2 How the High Needs Strategy aligns with Havering's Corporate Plan and Havering's Children's Vision.

Havering's corporate plan 2017-18 has four overarching aims:

Communities

We want to help our residents to make positive lifestyle choices and ensure a good start for every child to reach their full potential. We will support families and communities to look after themselves and each other, with a particular emphasis on our most vulnerable residents.

Places

We will work to achieve a clean, safe environment for all. This will be secured through working with residents to improve our award-winning parks and continuing to invest in our housing stock, ensuring decent, safe and high standard properties. Our residents will have access to vibrant culture and leisure facilities, as well as thriving town centres.

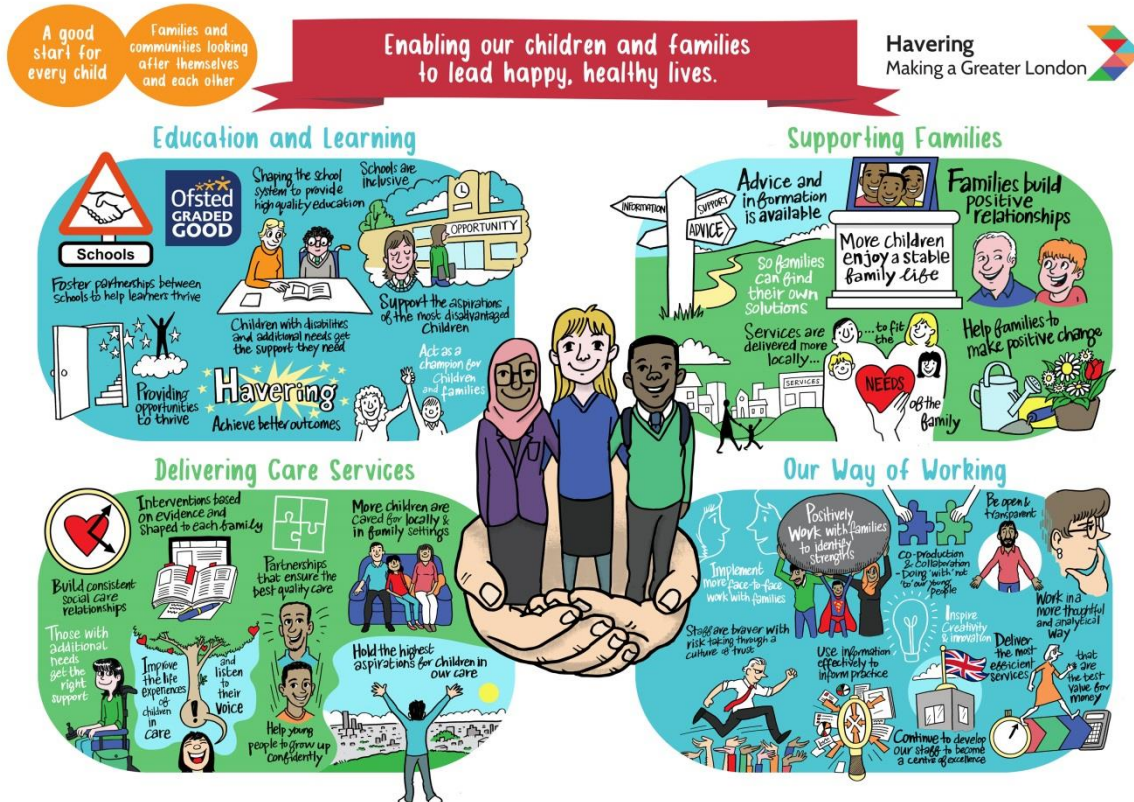
Opportunities

We will provide first-class business opportunities by supporting the commercial development of companies within the borough, as well as being a hub for start-ups and expanding businesses. We will ensure sustainable economic growth that generates local wealth and opportunities, as well as securing investment in high-quality skills and careers.

Connections

We want to capitalise on our location with fast and accessible transport links both to central London and within the borough. Likewise, we will continue to make Havering a digitally-enabled borough that is connected to residents and businesses. Enhancing our connections will strengthen the borough's offer as a Greater London hub for business.

Havering's Children's Vision 2017:



The table on the next page shows the link between these plans.

Havering Corporate Plan Key priorities	Children's Vision	High Needs Strategy priorities
Communities – a good start for every child to reach their full potential.	Act as a champion for Havering's children and families to constantly strive for improvement. Ensure our schools are inclusive and support our most vulnerable children.	Investing in workforce training to ensure staff across all schools feel confident in supporting pupils with additional needs to achieve. Supporting parents to help their child reach their potential.
Places – ensuring decent, safe and high standard homes and access to vibrant culture and leisure facilities, as well as thriving town centres.	Services are delivered more locally to fit the needs of the family.	Delivering the right specialist support at the right time across all early years' settings, schools and post-16 provision.
Opportunities - ensure sustainable economic growth that generates local wealth and opportunities, as well as securing investment in high-quality skills and careers.	Support the aspirations of the most disadvantaged children. Provide opportunities to thrive.	Developing clear pathways to adulthood so that parents and young people know what is possible and planning starts early across education, health and social care.
Connections – creating a digitally-enabled borough that is connected to residents and businesses.	Support Havering's children and families to lead happy, healthy lives and to reach their full potential.	Maximising resources and opportunities within the borough to improve the lives and prospects of children and young people with additional needs.

2.3 Principles that underpin our work with children and young people with special educational needs and disabilities

Our four principles, guiding this review and the development of our strategy, are:

Partnership – we will work in partnership with children, young people and their parents and carers, involving them in decision-making and supporting them to develop their independence and autonomy through to adulthood. We will also work in partnership with schools, health, social care and other partners to build clear pathways for multi-agency support.

Participation – ensure that children and young people with high needs can participate in family, school and community life, making effective use of available

resources and have the same opportunities as their peers, who do not have additional needs.

Personalisation – we will develop services so that they can flex as much as possible to meet the individual needs of children, young people and their families.

Preparing for adulthood – we want to encourage children, young people, parents and professionals to be realistic and aspirational for their lives. We want these conversations to start early and for children and young people to be encouraged every step of the way to build their confidence, resilience and independence.

2.4 Scope of the review

This review is not just looking at provision for children and young people who have an EHCP, it is also for those who require SEN support (previously school action or school action plus) or for those who have other additional needs, such as those with high medical needs or those excluded from school and/or accessing alternative provision.

The High Needs Review has incorporated children and young people who are known to both the Children and Adults with Disabilities Team (CAD) and the Education Inclusion Support Service (EIS). Not all children known to these services have an EHCP but many of them require funding from the High Needs budget in order to access education.

The Children and Adults with Disabilities Service

The CAD Service was established in Sept 2015 as a response to the implementation of the Children and Families Act. It brought together the Special Educational Needs teams and the children with disabilities social care team. The CAD Service is responsible for carrying out statutory educational needs assessments and for planning the process and provision of ongoing support, in an integrated way, to keep children and young people safe through their life stages.

The Service is made up of four small teams:

- **Assessment and Placement Team**

The Assessment and Placement team receive requests for Education, Health and Care assessments and make decisions on eligibility for EHC plans. They coordinate assessments and oversee the development of EHCPs. The team works with both parents and educational settings to identify appropriate educational provision. They respond to issues which destabilise school placements - advising and problem-solving to ensure that children and young people are able to achieve the outcomes as set out in their EHC Plans. Annual reviews are also carried out by the team.

- **0-5 Support Team**

The 0-5 Support team works in collaboration with colleagues in education, health, social care and the voluntary sector as well as with early years' settings, schools and parent/carers to provide appropriate support packages and early intervention. The team coordinates access to specialist support, teaching, assessment and family support for children with SEND and their families. They also work with children who require specialist early intervention.

Staff within the team include Area Special Educational Needs and Disabilities Coordinators (SENCOs), Keyworkers, Specialist teachers, an Educational Psychologist and a Social Worker.

- **5-19 Support Team**

The 5 -19 Team offers support to children and young people with a range of difficulties, as well as to their schools, settings and families. There are a range of disciplines within the team; covering Educational Psychologists, Social Workers, Family Support Workers, Specialist Advisory Teachers, Specialist Assistants and a Mobility and Habilitation Officer. All team members work flexibly and will visit children and families wherever they are; at home, out of borough, in school, nursery or clinic. Despite being a 5 – 19 support team, the specialist teachers involved in sensory impairment work from point of diagnosis, often birth, onwards.

- **Preparation for Adulthood (PfA)**

The Preparing for Adulthood Team was established in May 2016 and consists of a PfA Manager and PfA Social Workers (some from children's services and some from adult's services). This multi-agency team aims to support young people with EHCPs, and their parents, through the transition period from age 14 up to 25. The team assess young people to establish what support they may be eligible for from children's and adults' services. They will then ensure that this is provided in a timely way to maximise the young person's independence and their ability to achieve their life aspirations.

Our vision for the future of the CAD service is to continue to develop an integrated way of working, keeping children and their families at the centre of what we do. We will develop systems to improve the EHC assessment and planning process and the delivery of high quality support, responsive training and effective advice to educational settings. We will work on joining social care, education and health interventions more closely. We will develop the current Short Breaks offer to meet the needs of our children with high and complex needs and we will ensure robust planning for our most vulnerable children who are at risk of being, or are, in the Care system

- In **early years**, we will continue to focus on earlier introduction of EHCPs; to increase the number of under 5's receiving an EHCP in order to better prepare them for school. We will look at ways to cost in support in PVI settings & match the support children receive in schools. We will work to further improve transitions into school
- In **5-19**, we will continue to support children and young people in their current settings, providing interventions aimed at maximising their abilities through use of effective strategies and, where appropriate, technology and equipment. The team will be active in problem-solving and supporting inclusion. We will work with new provision such as ARPs and the Special Free School to ensure positive skill-sharing and effective comprehensive support is delivered
- In **Assessment & Planning**, we will be leading the implementation of the EHC Hub ensuring that its benefits are realised and that more efficient and transparent assessments and EHC planning processes are in place. We will be working with schools and health providers to ensure the review processes are robust and support in place is effective and achieving the outcomes set. We will be seeking to ensure high quality EHC plans are in place with clear outcomes that have been created with parents and young people. We will be

seeking to achieve that at least 90% of EHC plans are completed within the 20 week requirement

- In **Preparing for Adulthood**, we will be developing further the transition process within CAD by establishing dedicated transition workers. We will take a lead in giving advice and information to children, parents and schools. It will be our responsibility to develop support plans and carry out assessments to smooth the transition to post-18 services, determining eligibility for Adult Social care support. We will encourage aspiration and help young people gain skills to maximise independent living, and where appropriate, employment, in their local communities.

The Education, Inclusion & Support Service

The EIS service aims to support pupils to overcome barriers to educational success and to help prepare them for successful transition to adulthood. In order to achieve these aims, as well as working with the pupils themselves, the service works closely with a range of stakeholders: families, schools and support services such as CAD, admissions, social care/early help, police, health, voluntary sector as well as a range of alternative education providers.

There are four teams within the service:

- **Attendance, Behaviour and Traveller Support**
This team cover the statutory functions for school attendance, children missing from education, child licencing and elective home education. They also provide services supporting behaviour and traveller support which are non-statutory but relate to the local authority statutory duty of providing alternative education for excluded pupils.
- **Alternative Provision (AP)**
The work of this team supports the placement of pupils into alternative education settings where pupils are at risk of school exclusion or simply require a different educational approach to mainstream school. This involves quality assuring all providers, administering the Social Inclusion Fund and tracking/monitoring of pupils attending AP settings. The AP team has been fully traded since 2015.
- **Vulnerable Children's Team**
The Vulnerable Children's Team supports statutory functions relating to the Fair Access process and permanent exclusions from school. Officers provide help, advice and support to parents/carers and all schools in Havering in relation to pupils at risk of exclusion and/or not engaging in education. They coordinate the monthly IYFAP and Pre IYFAP (In Year Fair Access Panel) meetings which draw on multi-agency input. These officers also liaise closely with the Olive AP Academy.
- **Havering Virtual School**
The School carries out the statutory responsibilities around supporting, and promoting, better educational outcomes for looked after children. This includes help, advice and training for schools (mostly via designated teachers), through quality assuring individual PEPs (personal education plans), tracking the progress of individual pupils, allocating additional funds to schools and through arranging aspirational and celebration events for looked after pupils.

The vision for the future of the EIS service:

- Developing a more holistic approach to supporting schools in their dealings with challenging families including discussions with colleagues from health and early help services
- Building on the new partnership with Olive Academies Trust, clarify:
 - referral protocols (to and from Olive Academy)
 - intervention support; and
 - expected outcomes
- Developing provision for pupils with medical needs
- Maintaining our strong AP offer via a range of other alternative providers available to support intervention
- Continuing to offer and develop outreach packages and some AP support for our primary schools
- Building on, and disseminating, best practice
- Developing nurture groups and a new assessment facility in due course



3. Data – understanding levels and types of need

We gather data from a range of sources – from the school census (data which all schools, academies and free schools provide for central government); from records kept centrally by the Children and Adults with Disabilities Team (CAD) and other officers in the local authority; from nurseries and other early years' providers; and from colleges and post-16 providers.

This data is important as it shows us how many children we have in the borough, what age they are, whether they have any additional needs and, if so, what those needs are. Having accurate, up-to-date data means that we can plan services appropriately by projecting future demand.

How we gather data

The basis of our data, and subsequently our projections, is gathered from school census data which is recorded and submitted to the DfE (Department for Education) every year in January by each school or Academy. Accurate data means we can better project needs of children and young people as they come up through school which leads to better planning of provision for all ages and stages.

As we have been reviewing this data in order to make reasonable projections and assumptions, it became clear that there are very different interpretations of pupils' needs across schools. Therefore, we are developing a new protocol to clarify how data should be recorded on SIMS and on school census data. This protocol will cover moderation and standard measures of progress to ensure consistency. Once the protocol is finalised it will be appended to the High Needs Strategy.

We recognise that not all of these changes can be implemented overnight but we are confident that we can support schools and local authority staff appropriately to move towards more accurate data returns. This new way of recording data will provide consistency across the borough in how needs are reported and will allow for much more accurate planning and forecasting. We are also developing, within the local authority, a new database which will help us with more accurate recording of data and better planning for future provision.

In addition to developing consistency in recording data, we have also looked at how we use current data to predict future levels of need. We have produced a new methodology which works on averages over several years. This method reflects more accurately what staff report is happening in their day-to-day work with children and young people. All of this will enable us to improve our developments within children's services. It will also be used for planning for young people's services as they move into adulthood.

We record a range of needs, by primary need. This is the main need that a child has, where they have more than one.

We record:

- Cognition and learning needs, which includes: specific learning difficulties, moderate learning difficulties, severe learning difficulties and profound and multiple learning difficulties

- Communication and interaction needs, which includes: Autism Spectrum Disorder (ASD) and Speech, Language and Communication Needs
- Social, Emotional and Mental Health needs (SEMH) – some children in this category used to be recorded as BESD (Behaviour, Emotional and Social Difficulties)
- Sensory and Physical Needs, which includes: visual impairment, hearing impairment, multi-sensory impairment, and physical disabilities.

Our data collection, and therefore the data used in this review, is not as robust as we would like and we are putting in place a number of measures to ensure we record data more accurately. We want to be able to predict needs and levels of need; e.g. at the moment we may be able to predict numbers of children with ASD but not the complexity of their ASD. Two of the measures we will prioritise are: working with schools to improve accuracy around school census reporting and the development of a new database across children's services.

3.1 What our data tells us

Range of SEND

In Havering there are currently over 1,200 children and young people (aged 0-25) who have an Education, Health and Care Plan (EHCP) or a statement of need (2.4% of our population of school-age children and young people). There are a further 2,583 children and young people who have additional needs and receive SEN support but who do not meet the threshold for an EHCP.

Current data (2016/17):

(data taken from school census, CAD data and SEN2 data from gov.uk)

Primary need	Early Years (0 – 4 years)*	School-age (reception – Year 11)	Post-16 (16-25 years)	Total (0-25 years)
Cognition and learning needs	1	338	129	468
Communication and interaction needs	2	404	104	510
Social, Emotional and Mental Health needs	0	121	40	161
Sensory and Physical Needs	1	112	33	146
TOTAL	4	975	306	1285

* Early years' professionals also work with children in reception but these pupils have been counted in the school-age children figures.

The highest two categories are cognition & learning needs and communication & interaction needs. Within cognition and learning needs, around 80% have either moderate or severe learning needs. Within the communication and interaction category, it is almost evenly split, 50:50, between ASD and speech, language and communication needs.

The number of children and young people recorded as having sensory and physical needs may not be wholly accurate as many children with this diagnosis would not necessarily have additional learning needs and therefore may not be recorded here as they do not meet the threshold for an EHCP. The strategy includes how we plan to meet the needs of those children who have additional needs but do not have an EHCP.

Recent Trends

In Havering, we are seeing increasing numbers of children and young people with special educational needs and disabilities; in particular, those with communication and interaction needs. This encompasses those children with autistic spectrum disorder as well as those with speech, language and communication needs. Within this category, numbers have risen by over 40%; from 269 children in 2013/14 to 380 in 2016/17 (these figures do not include 0-4 years as the historical data was not available). This is an increase of 111 children in just three years.

Primary need	2013/14	2014/15	2015/16	2016/17
Cognition and learning needs	333	373	341	335
Communication and interaction needs	269	350	368	380
Social, Emotional and Mental Health needs*	107	78	79	93
Sensory and Physical Needs	85	102	109	111
TOTAL	794	903	897	919

(Data taken from school census information on www.gov.uk)

Data can be viewed on the Commissioning Plan for Education Provision:

[https://www.havering.gov.uk/download/downloads/id/1375/commissioning_plan_for_education_provision_201516 - 201920.pdf](https://www.havering.gov.uk/download/downloads/id/1375/commissioning_plan_for_education_provision_201516_-_201920.pdf)

(It is not a wholly accurate picture as is only based on children (aged 4-16) in Havering schools; i.e. children who live in Havering but go to out of borough schools are not counted)

* SEMH was only used from Jan 2015 onwards. The figure under 2013/14 is actually for those pupils recorded as BESD (behavioural, emotional and social disorders) which is not a 115n equivalent category. Therefore from 2014/15 onwards some of those who were recorded as BESD will be recorded within a different category; hence the drop in numbers from 2013/14 to 2014/15.

Special schools tell us that in addition to the growing numbers of children with communication and interaction needs, the complexity of these disabilities is also increasing. This has significant implications on the support required in special schools and schools with ARPs and subsequently impacts on the budget to meet the higher levels of need.

3.2 Benchmarking

National data

Comparisons to our statistical neighbours can be useful in identifying how Havering compares in relation to need and how demand is met. Statistical neighbours are based on similar socio-economic characteristics. Our closest statistical neighbours are Bexley, Medway and Essex.

Indicator	Havering	Bexley	Medway	Essex
2-18 year old population	51,785	53,812	59,725	287,702
No. per 1000 with statement/ EHCP	20.4	25.5	28.1	25.3
Placement of pupils with statement/ EHCP (per 1,000 of 2-18 population) at:				
Mainstream	13.1	11.1	8.5	15.1
ARPs	0.2	1.7	1.8	0.7
Special schools	5.9	9.5	12.8	7.7
Non-maintained/ independent	1.0	2.1	2.6	1.1
Hospital schools/ Alternative provision	0.1	0.0	0.0	0.1
Post-16	0.1	0.8	1.7	0.1
Other	0.1	0.3	0.8	0.4
High Needs Budget per head				
Place funding	£82	£109	£165	£118
Top up funding (maintained provision)	£209	£252	£471	£165
Top up funding (non-maintained provision)	£51	£128	£0	£70
SEN support & inclusion services	£33	£48	£202	£55
Alternative provision	£3	£0	£46	£0
Hospital education	£2	£5	£0	£0

(Data from www.gov.uk)

We have slightly fewer children with EHCPs, per 1,000, than our statistical neighbours. However, we receive significantly less budget per child on almost all counts. This emphasises the need for us to find creative solutions to managing our budget and to ensuring the best provision for all of our children and young people.

Local data

As part of the review we wanted to look at demand for EHCPs, and our response to that demand.

Requests for statutory assessment:

	Jan 2015 – Jun 2015		Jan 2016 – Jun 2016		Jan 2017 – Jun 2017	
	Total requests	Total agreed	Total requests	Total agreed	Total requests	Total agreed
0-5 years	48	37	50	31	60	48
Primary	48	38	70	38	70	47
Secondary	9	4	18	10	19	10
Post-16	3	2	4	3	10	8
Total	108	81	142	159	159	113

(Data from gov.uk and CAD Service)

The figures show that as understanding of EHCPs became more widespread, the number of requests, particularly in early years and primary, has increased. The number of plans agreed has also shown an increase, although a much smaller one. It also demonstrates that the drive to undertake statutory assessments in early years has been successful thereby supporting children, and families, to get the right support as early as possible.

Issuing of EHC Plans:

Indicator	2012	2013	2014	2015	2016
New EHC Plans issued within 20 weeks, excluding exceptions	Data not available	Data not available	Data not available	68.57	79.67
New EHC Plans issued within 20 weeks, including exceptions	Data not available	Data not available	Data not available	64.29	79.67
SEN Appeals*	2.68	1.86	0.79	1.03	1.28

* these figures are for academic years 2011/12, 2012/13, 2013/14, 2014/15 & 2016/17

(Data from www.gov.uk)

These figures represent the timeliness of CAD Service support in delivering EHC Plans. There have been steady improvements in the number of plans issued within the statutory time frame. The figures also indicate that we are working better with families to develop plans, thus reducing the number of appeals, although there is still more work to do.

3.3 How do we meet needs now and in the future?

Special schools

291 children attend one of Havering's three special schools/ academies. These schools support pupils with PMLD, complex needs, SLD and MLD.

ARPs

There are three primary ARPs and three secondary ARPs in Havering.

Of the three primary ARPs, two specialise in supporting pupils with ASD and those with communication needs and complex needs, and the other supports pupils with hearing impairment. In total, there are 48 places in ARP provision for primary age pupils.

Two of the three secondary ARPs are for pupils with ASD, communication needs or complex needs, the third is for pupils with hearing impairment. In total there are 34 places available within secondary ARPs.

	Additionally Resourced Provision	Specialism
Primary		
1.	Clockhouse	Autistic spectrum disorder & communication/complex needs
2.	Hacton	Hearing impairment
3.	RJ Mitchell	Autistic spectrum disorder
Secondary		
1.	Hall Mead	Autistic spectrum disorder & communication/complex needs
2.	Redden Court	Autistic spectrum disorder & communication/complex needs
3.	Sanders	Hearing impairment

Out of Borough

125 of Havering's children aged 5-16 with a statement or EHCP are placed out of borough (44 of these are in high cost placements). Of these, most pupils have ASD and SEMH. 46% of pupils placed out borough have Communication and Interaction Needs (which includes ASD); while 30% of pupils placed out borough have SEMH needs.

Whilst we are expanding our provision in Havering, including ASD, many of our provisions have been full and therefore we have not been able to place pupils locally.

Our aim is to continue to develop and support in-borough provision to meet the needs of children and young people with SEN in Havering reducing the numbers of children and young people who need to go out of borough to receive appropriate education.

Alternative Provision

All local authorities have a statutory duty to provide alternative education for pupils who have been permanently excluded from school, or who cannot attend school due to long term medical illness. Until 1st September 2016, the provision for such pupils within the London Borough of Havering was via the Manor Green College, Havering Pupil Referral Service (PRS). The College was composed of four elements:

- Primary provision (James Oglethorpe campus)
- Green Vale Medical Needs Provision (based at the previous Birnam Wood site in Hornchurch)
- Birnam Wood key stage 3 site

- Manor Campus key stage 4 site (based at Albert Road, Romford).

An Ofsted judgement, in February 2015, placed all elements of the former Havering Pupil Referral Service (PRS) in special measures. This led to the appointment of Olive Academies Trust as the named sponsor for a new Alternative Provision (AP) Academy to replace the Havering PRS. The new Olive AP Academy Havering came into being on 1st September 2016 and provides a facility for up to 64 secondary aged pupils who have been permanently excluded, or who are at risk of exclusion and require intervention. Medical Needs tuition is commissioned from LIFE Education Trust and referrals are now being channelled via IYFAP.

With regards to primary provision, there is no longer a primary PRU. Instead there has been a focus on training, support and early intervention. An outreach team supports schools, working with pupils and families. Elm Park Primary School provides specialist intervention and training support. A new off-site facility has also been developed for September 2017 at the RJ Mitchell Primary School site. The LA will continue to provide outreach support and training for primary schools and referral for support will continue to be channelled through the Primary IYFAP process.

Our data shows that the number of excluded pupils is increasing which is in line with national data.

2015/16	Permanent exclusions			Fixed term exclusions		
	Havering	Outer London	England	Havering	Outer London	England
Primary	x	0.01%	0.02%	0.68%	0.81%	1.21%
Secondary	0.16%	0.15%	0.17%	6.05%	6.38%	8.46%
Special	0.00%	0.07%	0.08%	1.07%	13.35%	12.53%
Overall	0.07%	0.07%	0.08%	2.93%	3.17%	4.29%

X = statistically negligible i.e. 1 or 2 pupils

Percentage of pupils receiving one or more fixed term exclusions 2015/16 (as a percentage of the school population)

2015/16	Havering	Outer London	England
Primary	0.37%	0.41%	0.56%
Secondary	4.12%	4.02%	4.26%
Special	X	4.35%	5.05%
Overall	1.94%	1.9%	2.11%

Havering Exclusions 3 year trend (as a percentage of the overall school population)

		2013/14	2014/15	2015/16
Permanent Exclusions	Primary	0.00%	0.00%	x
	Secondary	0.15%	0.23%	0.26%
	Special	0.00%	0.00%	0.00%
Fixed term exclusions	Primary	5.74%	5.6%	6.05%
	Secondary	0.54%	0.81%	0.68%

We are performing broadly in line with other outer London boroughs and generally better than across England in terms of permanent and fixed term exclusions. We are not complacent about these statistics and are aiming to work with schools to further reduce exclusions.

Currently there are 64 places commissioned at Olive AP Academy. The current pupil roll at the Academy is a mix of children, some with EHCPs, some not yet diagnosed but who are likely to meet the threshold for an EHCP and some who do not have, and do not need an EHCP. Some of these excluded pupils, generally those with EHCPs, would be better supported if they could remain in their school, with additional appropriate support.

Post-16

We currently have three options for young people continuing education in Havering:

- Havering College, Quarles Campus which caters for students with a range of additional needs and offers supported internships. Students are aged 16 years+
- Ravensbourne Sixth Form for pupils at Ravensbourne School who wish to continue their education at the school. This is for students aged 16 – 19 years
- Corbets Tey @ The Avelon for pupils from any school, who have finished Key Stage 4. From September 2018, the provision will also deliver courses for 19 – 25 year olds, focussed on year-long preparing for adulthood pathways.

Currently around 90% of our young people with additional needs are in full time education, training or employment (with training), both in borough and out of borough.

Future projections:

*Children aged 3-15 years**

Primary Need	2017/18	2018/19	2019/20	2020/21	2021/22	2022/23
Cognition and learning	349	360	370	381	393	404
Communication and interaction	418	430	443	456	470	483
Social, emotional and mental health	125	129	133	136	141	145
Sensory and physical	116	119	123	126	130	134
Total	1008	1037	1068	1100	1135	1167

From our projections we can see that the number of children and young people with communication and interaction needs will continue to rise, although not as sharply as we have seen in the past three years. However, we are expecting a 5% increase from 2016/17 to 2019/20, and in the following three years a further 9%.

Our projections also show a significant rise in numbers of children and young people with cognition and learning difficulties (15% over the next five years), the increase is particularly amongst those with moderate learning difficulties. We expect to see the same increase in children with sensory or physical needs.

The numbers of children and young people with social, emotional and mental health difficulties (SEMH) look likely to go up by around 16% over the same time period. This category used to be recorded as behavioural, emotional and social difficulties (BESD).

Overall our numbers of children and young people with special educational needs and disabilities is expected to rise by over 150, or around 15%, by 2022/23. This emphasises the need for us to develop more, local provision over the next 5-6 years in order to meet demand.

Young people aged 16-25 years*

Primary Need	2017/18	2018/19	2019/20	2020/21	2021/22	2022/23
Cognition and learning	146	143	143	145	148	152
Communication and interaction	117	115	115	117	119	122
Social, emotional and mental health	45	44	44	45	46	47
Sensory and physical	37	37	37	37	38	39
Total	346	339	340	344	351	360

** Projections are calculated based on historical school census data and CAD data.
Projections refer to the number of Havering residents expected to have a statement of SEN/EHCP for future years regardless of whether they attend school in Havering or not.*

Our projections for post-16 do not reflect the increases we are seeing in pre-16. The reason for this is that we have had a historical reduction in birth rate, and subsequently year group numbers who are now in secondary school. This cohort shows in our projections as then going through to post-16 provision. From 2020/21, we expect these numbers to follow a similar increase to that in pre-16. For that reason, we need to be mindful of what post-16 services we need to develop so that we can continue to support as many young people within Havering as possible.



4. What our consultations have told us

In order to review this strategy and how our high needs funding is allocated, we consulted with:

- Parents and carers, supported by Positive Parents via:
 - Parents Forum
 - Questionnaire on SurveyMonkey
 - Personal Outcome Evaluation Tool (POET – for those parents who have been through the EHCP process).
- Children and young people, via Advocacy for All consultations on:
 - short breaks
 - personal outcomes evaluation tool (POET – which asks about young people's experiences of getting an EHCP)
 - preparing for adulthood
- Early years providers via a focus group and a request to all providers to email any comments
- Schools and academies, including special schools via a focus group and a request to all schools to email any comments
- Post-16 providers and colleges via a focus group and a request to all providers to email any comments
- Local authority staff (from children's and adults' services) via two drop-in sessions, a request to email any comments and, for those involved in EHCPs, POET
- Health colleagues at the CCG, via face-to-face meetings

Themes from the consultations:

- A better offer and range of services (including more therapeutic interventions) would reduce the numbers of children and young people going out of borough for their provision
- Staff training is key – to ensure all staff are up to date on interventions, support and information (or where to go for information)

What's working well?

Parents

Following a meeting with the parents' forum, we sent an online survey to parents in the summer of 2017, about high needs support. We received 81 responses. 73% of parents were generally happy with how well their child is supported in school and with the process of EHCPs. From the POET survey (31 responses received), we learned that 70% of parents are happy with the quality of support for their child.

Between 60% and 75% of parents felt that their child's school supported their child's learning, progress, emotional wellbeing, sensory issues and behaviour, either fairly well or very well. More than 60% of parents thought their child's school performed well on communicating about their child's progress and are approachable in dealing with problems. 70% of parents thought schools did fairly well or very well at carrying out timely reviews and supporting parents to be involved.

Most parents thought they themselves were well prepared to talk to their child about adult life and support them in that transition; 62% reported they were very well or fairly well-equipped to have those discussions.

From the POET surveys (parents who have been through the EHCP process), 76% of parents reported that their views had been fully included in the EHCP and 68% said that their child's views had also been included in the plan. 70% of parents felt that the quality of support was good or very good.

Schools

Schools felt that there are some good areas of peer-to-peer support and some strong examples of good practice in supporting pupils with SEND.

Local authority staff

Children's and adults' services staff thought that identification of need works well, as does whole-borough provision for speech, language and communication needs. They also felt that supporting primary pupils without having a PRU building was a much better way to support children to remain in mainstream education.

From the POET survey, most practitioners (on average 84%) told us that EHCPs help them to put the child at the centre of planning, to work in partnership with parents and colleagues from other services and to understand the needs of the child in the context of home, family and school.

What needs to improve?

Children and young people:

Young people told us that they want more help in preparing for adulthood such as with getting a job, learning work skills, using money sensibly and having relationships. They would like more support from a range of trusted adults (such as social workers, careers advisors and staff at mainstream clubs and job centres) on finding a job, making new friends, living with their family and learning more.

Young people would also like more opportunity to access mainstream activities and clubs which they thought could be achieved by providing more befrienders to take them to clubs and by delivering [disability awareness] training to staff who work in mainstream provision.

Finally, young people would also like the Local Offer to be a hub of information for them on issues such as managing money and other 'useful stuff'.

Parents:

Parent satisfaction dropped to just over 50% in terms of well they felt the school coordinated health provision and social care services.

Parents reported that they felt less confident about how well their child's school was preparing them for adulthood, in terms of offering work experience, learning to look after themselves (such as, personal hygiene and cooking) and becoming more independent.

(However, parents felt that they themselves were well prepared to talk to their child about adult life.)

We asked parents what they thought of the local authority's support for themselves and their child. Only a third of parents responded that they thought the local authority did fairly well or very well in terms of this support. We also asked about how well they thought we coordinated social care and health provision, the response to fairly well or very well was 20% and 28% respectively.

From the POET survey, around half of parents thought the amount of support was good or very good and that the degree of choice and control over support was good or very good.

Early years

Feedback came from local authority early years' staff and from early years' providers.

- Modelling practices in settings would be helpful
- More support for early years' clusters is needed along with further development of peer support/ training, including whole-setting training
- Develop more support and training for parents in settings in early years but continuing throughout – parents need a transition too
- We need to renew our focus on early years' key working and clarify the role of Key Workers
- The EHCP process needs to be started as early as possible – particularly for those children who will definitely need a plan i.e. those with complex needs
- We need to provide better support and help for providers around completing forms and plans
- Transition to primary school: person-centred transfer for all children on register should be more consistently applied across borough to help schools prepare for needs of child
- We need to look at ways of ensuring a more equitable distribution of children with additional needs across all providers
- Provide more clarity about the funding arrangements across provisions and re-assess funding levels, including where children are accessing 30 hours per week
- Work with health staff to improve health support within settings and improve communications such as feeding back after the 2 year old health check
- More support is needed to develop speech and language interventions
- Early help is key and can make a significant impact on support costs further down the line. The budget for early help within early years' settings should be re-evaluated.

Schools:

Schools would like to see more consistency regarding managing behaviour/ exclusions and recording data. A particular concern was around developing a fairer funding system which recognises those schools (and those with ARPs) which are under pressure due to the size of their SEND population.

Although peer to peer support and challenge is happening, it would be helpful if that was more widespread and consistent and was supported by the local authority. Schools would also like to see the local authority drive a culture change around inclusion across all schools and nurseries.

Special schools:

Special schools agreed that the matrix for funding should be reviewed (as it is no longer fit for purpose) and look at ways to ensure the matrix was consistently applied. Special schools also offered to help in drafting guidance on the categories of need in the school census, again to ensure consistency across the borough.

From our data analysis, it looked increasingly likely that the number of places at some of our special schools would have to increase. However, there are significant numbers of pupils (such as those with MLD) whose needs could be catered for in an appropriate ARP, rather than in a special school. It was agreed that special schools should receive appropriate training and support to develop their provision to meet the needs of those pupils with more complex levels of need. To some extent, our special schools are already supporting pupils with more complex needs, so any developments would be focussed on disseminating best practice across schools and ensuring that appropriately qualified staff are recruited and retained.

Over time, reducing the number of pupils with moderate learning difficulties who attend special schools will create the places we need, without requiring expansion. However, we will continue to monitor this year on year to pick up any significant changes in projections.

Post-16

Post-16 providers told us that there needs to be a clear map within Havering and surrounding boroughs about the available pathways into adulthood. These pathways need to be explicit about the access criteria.

Providers said that the opportunities available across all four pathways need further development so that there is a real choice with flexible options for young people.

They also felt that there is currently insufficient health support for young people over 16 years old, particularly mental health support from CAMHS and adults' mental health services but also for speech and language therapy.

Children's and Adults' services staff

Staff would like to see all schools and professionals signing up to make Havering a non-excluding borough, they would like to see greater auditing and monitoring of provision to ensure interventions and support are effective. They would like to see services being better coordinated, with shared care management systems between relevant services and better information, particularly on the Local Offer.

Across the services, staff said they would like to see more person-centred opportunities for children and young people and more training for professionals to deliver person-centred reviews. They felt that there was insufficient information on preparing for adulthood and that services should work more closely together to join up provision (such as social care, alternative provision, Prospects etc.).

Health

Our local health teams want to work with us more closely to provide timely and coordinated responses to requests for health input.

Agreed protocols for joint funding between education, health and social care should be developed, particularly for children with the most complex needs. This will ensure that costs are apportioned consistently between partners.

The CCG will also be looking at developing pathways and processes for young people aged 18-25 years who have healthcare needs, and this will align and develop alongside the local authority's progress on the Preparing for Adulthood agenda. This will support a smoother transition into adulthood for young people with high needs. Any processes developed should start preparations early and provide supported progression into adult life, beyond education so that there is no 'cliff edge' for young people moving from children's services to adults' services.

Ideas for development

Parents endorsed the view that mainstream schools should support the majority of pupils with moderate learning difficulties, that more ARP provision should be developed across the borough and that we should increase provision in our special schools, where necessary. Parents also supported the suggestions that we should develop a new free special school for pupils with ASD and SEMH. We asked parents whether they thought that more training should be available to staff to improve their confidence in supporting pupils with SEND; 96% of parents approved this idea.

Local authority staff were generally in agreement with the ideas for development. They were clear that high quality workforce training would be vital to making any of these changes a success. Some staff expressed concerns about the proposed intake of the new free school – that those with SEMH may find it difficult to mix with those with ASD and vice versa.

As with schools, staff were keen to see more opportunity for schools to share learning and best practice with one another.



5. How effective is our provision and what are the gaps?

As part of the review of our high needs funding we wanted to know:

- How effectively current provision meets need
- How effectively current provision prepares young people for adult life

In order to evaluate our provision, we looked at the numbers of children and young people choosing to attend an out of borough provision as well as data on progress and attainment. We also took into account feedback from all of our stakeholders: parents, young people, schools, early years' providers, post-16 providers and both local authority and health staff (see section 3).

	Progress/ Attainment Indicator 2016¹	SEN without statement/ EHCP	SEN with statement/ EHCP	No SEN/ statement/ EHCP
Havering	KS2 attainment (RWM) Reading, Writing, Maths	20%	15%	75%
	KS2 attainment (GPS) Grammar, Punctuation, Spelling	36%	22%	80%
London	KS2 attainment (RWM) Reading, Writing, Maths	24%	9%	68%
	KS2 attainment (GPS) Grammar, Punctuation, Spelling	44%	20%	87%
England	KS2 attainment (RWM) Reading, Writing, Maths	16%	7%	62%
	KS2 attainment (GPS) Grammar, Punctuation, Spelling	32%	15%	83%

Our primary age children with a statement or EHCP perform better than their counterparts across London (inner and outer London) and in England as a whole. For those pupils without a statement or EHCP but who require SEN Support, we perform less well than London as a whole but better than across England.

These statistics also show that we need to do more to close the gap between those pupils without any identified SEN needs and those who require SEN Support or who have an EHCP/statement.

¹ Data provided from gov.uk, SEN2 data

Progress/ Attainment Indicator²	2012	2013	2014	2015	2016	London 2015	England 2015
5 A*-C GCSE (incl. English & Maths) SEN Support, without statement/ EHCP	91.7%	83.1%	79.3%	77.6%	<i>Data not available</i>	82.8%	78.8%
5 A*-C GCSE (incl. E&M) with statement/ EHCP	53.4%	34.3%	43.3%	48.0%	<i>Data not available</i>	37.2%	36.1%
<i>For comparison: 5 A*-C GCSE (incl. E&M) with no SEN/ statement/ EHCP</i>	67.7%	68.6%	65.5%	61.6%	<i>Data not available</i>	68.6%	64.6%
Percentage of KS4 SEN Cohort in Education, Employment, Training at 17	86%	90%	90%	90%	<i>Data not available</i>	89%	88%
Percentage 19 year olds qualified to L2, incl. English & Maths, without statement/ EHCP	28.3%	38.7%	34.1%	27.8%	31.7%	44.9%	37.00%
Percentage 19 year olds qualified to L2, incl. English & Maths, with statement/ EHCP	8.8%	5.3%	13.1%	17.6%	14.3%	17.7%	15.3%
Percentage 19 year olds qualified to L3, without statement/ EHCP	25.9%	36.9%	28.4%	27.8%	21.7%	43.8%	31.2%
Percentage 19 year olds qualified to L3, with statement/ EHCP	13.2%	16.0%	16.7%	16.2%	15.7%	19.0%	13.7%

These statistics for pupils in secondary school and further education, show mixed results in comparison to London as a whole as well as England. Havering pupils with an EHCP or statement perform better at Key Stage 4 than their counterparts elsewhere; however those with SEN support needs but who do not have an EHCP/ statement are slightly behind those regionally and nationally. We are slightly ahead in supporting young people to remain in education, employment and training at 17 years old.

We need to make improvements to the numbers of 19 year olds, both with SEN support and with EHCPs, who achieve Level 2 and Level 3 qualifications. (Although we are slightly ahead of the number of 19 year olds with an EHCP/ statement who qualify to Level 3 than across England.)

² Data provided from gov.uk, SEN2 data

Our data also shows we need to do significantly more to close the gap between how well pupils with SEND progress compared to their peers without additional needs. This will be vital in ensuring pupils with SEND can progress onto a meaningful adult life. We also need to do more to ensure that all our 16 and 17 year olds with SEND stay on in education, employment or training until they are at least 18. Developing a clear map of provision and identifying any gaps will be a useful starting point.

Health

Clinical Commissioning Groups (CCGs) have a responsibility to work in collaboration with the Local Authority to provide a service that meets the needs of the local population.

The CCG commission NELFT (North East London Foundation Trust) to provide a wide range of health interventions to support children and young people aged 0-25 years and their families (providing that the child /young person reaches the threshold for that particular service or therapy). These services include school nursing, paediatrics, health visiting, therapies (speech and language, occupational and physiotherapy) and children and adolescents' mental health services (CAMHS).

Effective commissioning for such a small group of children and young people as those with complex needs can prove to be challenging. Often there are very few providers in a defined local area that are able to meet such needs.

5.1 Our conclusions

What we are doing well:

Early years

- There are some areas of very good practice in supporting young children with complex needs, across early years' settings
- Most early years' settings are managing to support young children effectively, despite the pressures on staffing and funding
- Early years practitioners are committed to ongoing development of their skills and knowledge to support the needs of children with SEND
- Children with complex needs and their families receive co-ordinated help and support at an early stage through Early Support Key Workers.

Schools, ARPs and special schools

- There are some areas of excellent practice in supporting pupils with SEND, across all our provision – mainstream, ARPs and special
- Schools, on the whole, are managing to support pupils effectively, despite the pressures on budgets

Children without EHCPs

- Children without EHCPs have been receiving support paid for through the High Needs block
- Olive Academy was established in September 2016 and now provides appropriate support to pupils who have been excluded (some pupils at Olive Academy have EHCPs)

- Having a virtual school for primary pupils who are at risk of, or who have been, excluded from school ensure pupils can continue to access mainstream education and therefore prevents further marginalisation.

Post-16

- The new Preparing for Adulthood Team has been established and social workers from both children's and adults' services have now been recruited
- A revised protocol and operations policy are in place for the team
- Data has been cleansed and tracking of pupils coming into, and out of, transition are being monitored
- The new provision, CT@TA is proving popular with 26 students on roll
- Planning is underway for development of the post-19 provision at CT@TA, opening in September 2018
- Havering College are already offering a range of supported internships
- Some mapping of provision & levels of need for post-16, including a curriculum map, has already been completed.

Workforce development

- Some early years' and school staff are embedding new approaches to supporting pupils, such as 5P (a behaviour management programme)
- CAD staff are already delivering training to improve the confidence and knowledge of early years' and school staff in supporting children with additional needs.

Health

- The mental health transformation programme is underway. It is focussed on:
 - earlier access through the development of a wellbeing hub
 - delivering an out of hours service
 - taking a holistic approach to mental health services for young people
- A CAMHS school link worker has been recruited to support the social, emotional and mental health of children and young people in Havering
- A mental health social worker in children's services has been appointed to provide signposting and support for relevant children
- Development of digital engagement for children and young people with mental health concerns as part of the prevention and intervention pathways
- In 2018 a '0 to Thrive' approach in early years will be implemented, which focusses on early intervention and positive parenting.
- The ELSA (Emotional Literacy Support Assistants) programme will be rolled-out. This programme delivers additional training to teaching assistants from educational psychologists. ELSAs will support children and young people in school to understand and regulate their own emotions whilst also respecting the feelings of those around them
- Development of a pilot for 2018 to jointly commission (between the CCG and the LA) mental health provision

Areas for improvement and development:

Early years

- Early years ASD support in particular needs to improve. Additional resources are required to better support early identification and intervention for under-5s with a diagnosis of ASD
- Look at increasing the funding in order to provide more support at the early stages, particularly around support and training for early years providers, delivery of evidence-based interventions and increased payments for children with additional needs
- Support all providers to deliver an inclusive setting and aim to have a more equitable distribution of children with additional needs across the borough; whilst recognising parents are free to choose the provision they want for their child.

Schools, ARPs and special schools

- Mainstream schools do not have sufficient funding in their delegated budget for SEND and there is an uneven distribution of pupils with SEND across the borough
- There are insufficient ARPs. A primary school ARP specifically for pupils with ASD is a priority. The other priorities for ARPs will be consulted on and agreed as needs arise
- Special schools need to be able to focus on pupils with more complex levels of need and, where necessary, should seek re-designation with the local authority's support
- We need to work more closely with schools to address the disparity in how challenging behaviour is dealt with so that exclusions (permanent or fixed-term) are consistent
- We need to ensure schools have the right support and training with an aim of significantly reducing the number exclusions amongst pupils with SEND
- We need to better understand the barriers to attainment and then target interventions to ensure that each child and young person is able to reach their full potential.

Children without EHCPs

- In Havering, we usually have around three pupils at any one time who have significant health issues which prevent them from going to school
- We currently commission LIFE Trust to deliver this provision on our behalf at The Bridge. Pupils are referred through the IYFAP (In Year Fair Access Panel), and The Bridge are expected to take any pupils referred unless there is a clear reason not to
- It is likely that this year, we will be tendering to formally procure a provider of education for pupils with medical needs
- We will ring-fence a small budget from the High Needs Budget to pay for equipment and support.

Post-16

- For post-16, better mapping of provision is necessary - it is not clear what is available and where.

- A wider offer needs to be developed, particularly at lower academic levels, with more opportunities for work-based learning leading to employment, ideally paid employment.

Workforce development

- There are some barriers to workforce development mainly around releasing staff to attend training
- In early years, they were keen to have whole-setting training, rather than just individuals, to help embed practice
- Across all staff, it was felt that the key areas for development were developing practical skill sets and improving confidence in supporting children with SEND.

Health

- Mental health is a gap in our provision, particularly early support and preventative support
- Health provision, particularly therapies (physiotherapy, occupational therapy and speech and language therapy) is perceived to be a gap and is often the cause of parents choosing out of borough provision for their child. Following the joint review of therapies, the local authority and the CCG should consider joint commissioning some additional therapeutic provision
- Review data to ensure it is robust, which will improve service planning
- Focussing on development of services to support transitions into adulthood, in partnership with the local authority's Preparing for Adulthood developments
- Supporting the local authority to look at improving local services so that young people do not have to go out of borough to receive the provision they need.

Other

- A greater focus is required on invest to save across both children's and adults' services as well as health. Decision-makers need to look at the bigger picture.
 - We need to look at the reasons for cases going to tribunal and evaluate how we could improve our local offer
 - Out of borough (OOB) costs are high – there are some cases where consideration for creative use of funds could have met the child's need locally and avoided an OOB placement; some where we haven't (yet) got the right provision in borough.
- Reducing the number of children and young people who go out of borough for their education, will also have a significant impact on reducing travelling time for children, as well as reducing costs. The transport budget has not been included in the review as it does not come from the high needs budget.

6. Finance

The majority of the funding to support Havering's strategy for high needs provision comes through the Government's annual allocation of the Dedicated Schools Grant (DSG) High Needs Block. Provision is also supported from schools' delegated budgets to meet the first £6,000 of the costs of high needs provision. In the early years' sector there is a small budget to support children with high needs which is matched by an equal sum from the High Needs Block.

The high needs budget funds a range of provision including:

- Special schools
- Additional Resourced Provision (ARPs) in mainstream schools
- "Top up" element 3 funding for placements of pupils with EHC plans in mainstream schools and academies
- Placements in non-maintained special schools, independent special schools and out of borough special schools
- Post-16 provision up to the age of 25 in local provision and colleges, as well as out of borough colleges and in non-maintained and independent provision
- Alternative provision for pupils with challenging behaviour
- A range of support from central services for 0-5 year olds and 5-19 years olds

Funding Formula

The annual allocations of high needs funding to the LA are based on a methodology that relates to expenditure on high needs from 2012-13 and has not been adjusted by the DfE to meet changing levels of need. As part of the new national funding formula, the DfE will distribute high needs funding to local authorities according to a formula. 50% of this formula will again be based on historical spend, 25% on population and the remaining 25% on a range of deprivation factors. Based on the application of this formula to 2015-16 data, Havering would receive an increase in funding of 8.2%. However, there is a cap of 3% which will limit the additional funding we receive.

It was announced in September 2017 that this new formula will provide an additional £1m to Havering's high needs budget.

Budget pressures

Havering's allocation of high needs funding is under pressure each year from increases in the number of pupils requiring support and the increased complexity of need. A significant pressure also comes from the number of high cost placements in out of borough provision. We recognise that some areas within the high needs budget are under-resourced, across both mainstream and special schools.

In addition, there are a number of competing pressures on high needs funding. These include:

- An increasing number of pupils and students requiring EHC Plans within a growing pupil population;
- An increase in the complexity of need of children requiring placement in Havering schools;

- The revenue costs of funding a new special school for SEMH and ASD children;
- The revenue costs of more additionally resourced provisions in mainstream schools;
- Funding that recognises the pressures on schools with high numbers of pupils with EHC plans;
- The need for additional support within children's early years;
- An increase in post 16 provision up to the age of 25;
- Pupils with medical needs but no EHC Plan; and
- Additional training for school staff for children with SEND

Some of the pressures in the above list may not arise in the current or next financial year but it is clear from discussions with several schools that the requirement to fund the first £6,000 of support is placing a strain on budgets particularly when there are large numbers of high needs pupils in a school. One of the causes of this is that the hourly rate currently used to fund top up funding in support of EHC plans is £12.67 which also means that the first £6,000 is equivalent to 12 hours.

We have modelled the financial effect of increasing the hourly rate to £14.00. This would reduce the requirement on schools to fund the first 12 hours to 11 hours with the additional cost of 1 hour per EHC plan at £14 per hour falling to the central high needs budget. Based on current EHC plans this would cost £570k in a full year. In 2018-19 this could be met from the anticipated increase in high needs funding but ignores other pressures.

Further work will continue on meeting the costs of other pressures.

Invest to save

In Havering, we are committed to developing all of our provision to be the first choice for parents and children. As part of this we recognise the benefit of taking an 'invest to save' approach. This means looking at where we can spend money now in order to save money in the longer term. This may be through increasing funding to local provision or to individuals, or developing new provision, in order to support more children and young people to stay in borough.

We are improving how we work in order to deliver on this commitment and this is enshrined in our Children's Vision (see page 6). We are encouraging staff to be creative and develop innovative approaches and solutions in their work. We want staff to feel empowered to take risks through developing a culture of trust.

One successful example of the invest to save approach is Corbets Tey @ The Avelon (CT@TA), where we have funded development of new 16-19 provision. The provision opened in September 2016, with nine students; there are now 26 students on roll. A significant number of their students would have had to go out of borough to independent provision if CT@TA had not been set up. This is supporting these students to remain at home with their families and in their community.

We want to develop more of this kind of provision, to reduce the number of pupils going out of borough to expensive independent and non-maintained (I/NM) placements. We estimate that once we have developed the free school, we will be

able to save in the region of £40,000 per pupil. This is based on data of those currently attending I/NM placements whose primary needs is ASD or SEMH. This currently costs Havering over £1.6m per year. The average cost per place for pupils going out of borough is over £67,000 per year.

Not all of those who currently receive their education out of borough will want to come back to in-borough provision. However, these calculations provide an indication of the kinds of savings we can expect in the future as, year on year, the number of pupils placed out of borough reduces.



7. Next Steps

This review will inform a revised version of the High Needs Strategy 2015-2020. The new strategy will encompass all children and young people aged 0-25 years who have high needs, i.e. not just those with SEND.

This new strategy will form the basis of an action plan which will provide staff with a framework for implementing changes, schedule delivery of the changes and allow stakeholders to support the developments as well as ensure accountability of the council alongside our partners.



8. Glossary

Acronym	Meaning
AP	Alternative provision
ARPs	Additionally resourced provision
ASD	Autistic Spectrum Disorder
CAD	Children and Adults with Disabilities Services
CT@TA	Corbets Tey @ The Avelon (16-25 provision)
CCG	Clinical Commissioning Group
DfE	Department for Education
EHC	Education, health and care
EHCP	Education, Health and Care Plan
EIS	Education Inclusion Service
HI	Hearing impairment
ISP	Independent specialist provider
IYFAP	In-year fair access panel
LA	Local authority
LO	Local offer
MLD	Moderate learning difficulties
OOB	Out of borough
PD	Physical difficulties
PfA	Preparing for adulthood
PMLD	Profound and multiple learning difficulties
POET	Personal Outcomes Evaluation Tool
SEMH	Social, emotional and mental health (difficulties)
SEN	Special educational needs
SEND	Special educational needs and disabilities
SLCN	Speech, language and communication needs
SLD	Severe learning difficulties
VI	Visual impairment