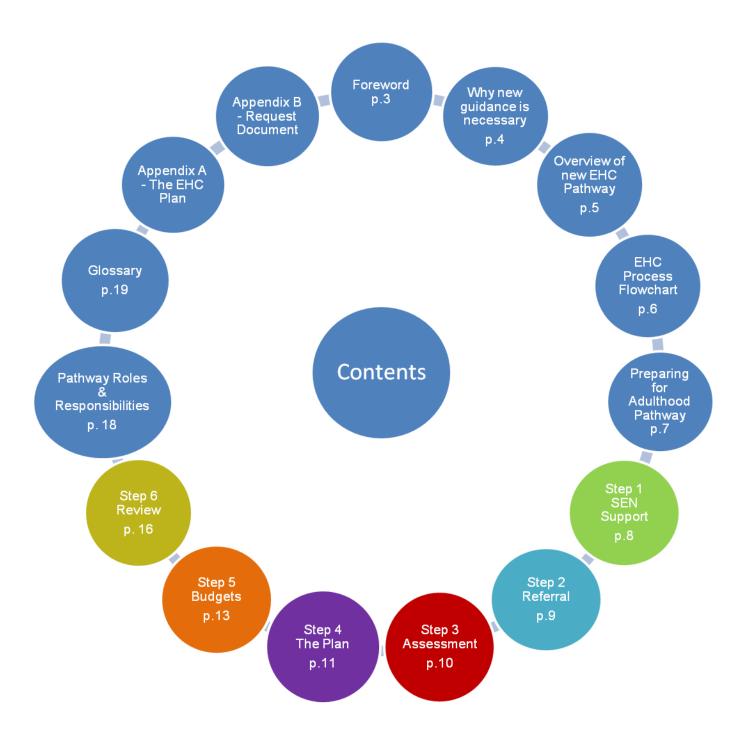
# Barking and Dagenham Education, Health and Care Plan Pathway Guidance Document









"Barking and Dagenham Council is ambitious to secure excellent outcomes for **all** our children, in line with our Borough vision. In response to the newly issued Children and Families Act 2014, the London Borough of Barking and Dagenham has worked in coproduction with a range of parents and professionals from education, health and social care to develop the Education, Health and Care Pathway.

Underpinning this new pathway are the key principles of early support, which include valuing the uniqueness of children, young people and their families, multi-agency working and continuity of care. Through the pathway, families are empowered to make informed choices in order to shape, develop and evaluate the services they receive. Please take the time to familiarise yourself with this new guidance."

# Helen Jenner-Corporate Director of Children's Services

The London Borough of Barking and Dagenham's Vision One Borough; One Community; London's Growth Opportunity

# **Encouraging civic pride**

- Build pride, respect and cohesion across our borough
- Promote a welcoming, safe, and resilient community
- Build civic responsibility and help residents shape their quality of life
- Promote and protect our green and public open spaces
- Narrow the gap in attainment and realise high aspirations for every child

#### **Enabling social responsibility**

- Support residents to take responsibility for themselves, their homes and their community
- Protect the most vulnerable, keeping adults and children healthy and safe
- Ensure everyone can access good quality healthcare when they need it
- Ensure children and young people are well-educated and realise their potential
- Fully integrate services for vulnerable children, young people and families

# **Growing the borough**

- Build high quality homes and a sustainable community
- Develop a local, skilled workforce and improve employment opportunities
- Support investment in housing, leisure, the creative industries and public spaces to enhance our environment
- Work with London partners to deliver homes and jobs across our growth hubs
- Enhance the borough's image to attract investment and business growth

# Why is this new guidance necessary?

In 2011, the Department for Education (DFE) published a Green Paper entitled 'Support and Aspiration': A new approach to SEN and Disability'. The Green Paper introduced a range of proposals in response to concerns from parents, carers and professionals about the special educational needs statutory assessment and statement system. The paper suggested positive changes to the way in which children and young people's needs are assessed, planned and provided for.

Following on from the initial green paper, the Government has now issued the Children and Families Act 2014, which contains new special educational needs and disability legislation, as well as a new SEN and Disability Code of Practice. This is statutory guidance for organisations who work with and support children and young people with SEN and disabilities. This new Code of Practice makes a number of changes to the initial SEN Code of Practice published in 2001. The main changes are summarised below:

# **Changes from the Code of Practice 2001**

- The Code of Practice (2014) covers the 0-25 age range for those still in education and includes guidance relating to disabled children and young people as well as those with SEN
- A clearer focus on the participation of children and young people and parents in decision-making at individual and strategic levels
- A stronger focus on high aspirations and on improving outcomes for children and young people
- New guidance on the joint planning and commissioning of services to ensure closer co-operation between education, health and social care
- New guidance on publishing a Local Offer of support for children and young people with SEN or disabilities
- New guidance for education and training settings on taking a graduated approach to identifying and supporting pupils and students with SEN (to replace School Action and School Action Plus)
- For children and young people with more complex needs, a co-ordinated assessment process and the new 0-25 Education, Health and Care plan (EHC plan) replace statements and Learning Difficulty Assessments (LDAs)
- A greater focus on support that enables those with SEN to succeed in their education and make a successful transition to adulthood
- Information on relevant duties under the Equality Act 2010
- Information on relevant provisions of the Mental Capacity Act 2005

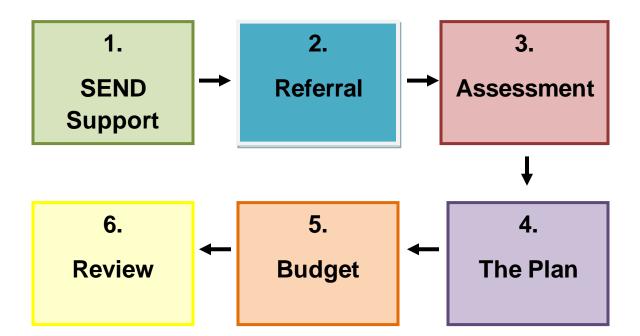
As a result of these changes, a new Education, Health and Care Pathway has been developed for Barking and Dagenham. This has been developed to provide information on the six key steps that make up the new pathway. It is designed to be a living document, updated periodically as we reflect on our work with local families, children/young people and professionals. Electronic copies of this guide can be downloaded from the Local Offer where specific resources relating to the pathway as well as national information on the Special Educational Needs and Disability reforms are located.

# Overview of the new Education, Health and Care Plan Pathway

There are 6 steps on the Education, Health and Care Plan Pathway which can be accessed by the child/young person and family. These are:

- 1. Early years setting/school SEN support
- 2. Referral
- 3. Assessment
- 4. The Plan
- 5. Budget
- 6. Review

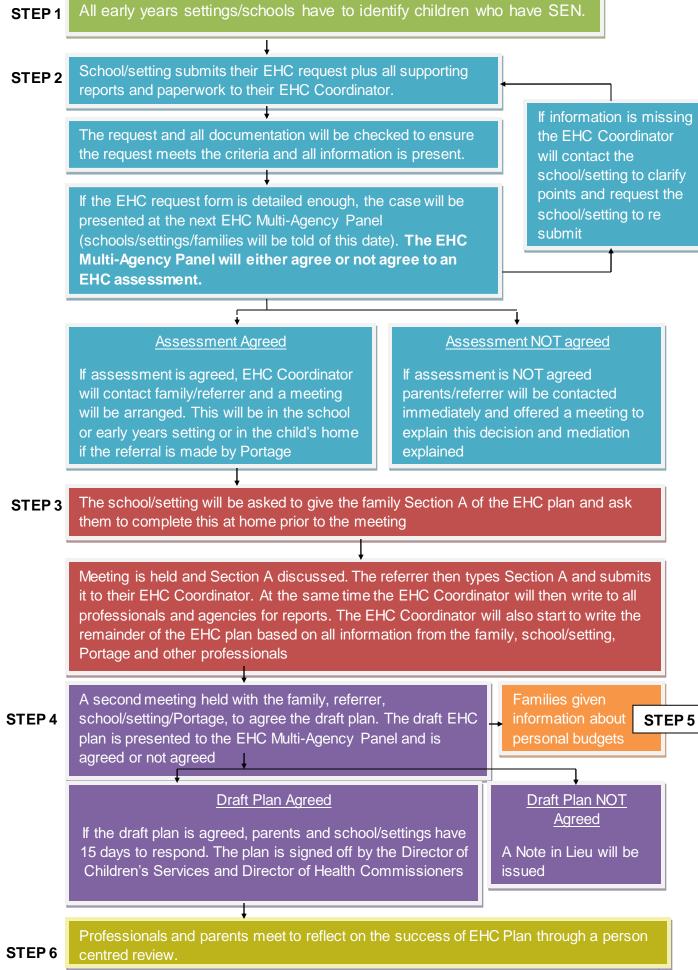
The Barking and Dagenham pathway follows a person centred approach so that the child/young person is at the centre of the process and their views and wishes are considered throughout.



The Local Offer includes universal, targeted and specialist services available in education, health and social care from 0-25 years. A child only progresses to a referral if their needs cannot be met within universal and targeted services. All settings and schools have a range of support and resources to meet the needs of most children who have special, educational needs and disabilities. The Local Offer also includes additional resources available to schools to support children with more complex and significant needs and allow them quick access to services without the need for a statutory education, health and care assessment.

Overleaf, is a flowchart detailing simply the multi agency Education Health and Care Pathway Process. The remainder of this document details each of these 6 steps in full.

# The Multi Agency Education Health and Care Pathway Process



# Barking and Dagenham's Preparing for Adulthood Pathway

For many people with special educational needs and disabilities the transition from teenage years into adulthood can be challenging as well as exciting. In Barking and Dagenham, young people, parents and professional from Health, Education and Social Care have come together to jointly develop a *'Preparing for Adulthood Pathway (PfA)'*. This lays out, in clear and accessible language and format, what support, advice and options are available at different stages between the ages of 14 and 25.

The Preparing for Adulthood processes are exactly the same as the 0 to 14 processes, however the support and options available for a young person changes continually between the ages of 14 and 25. The PfA lists at what stages services become available such as:

- Careers advice at the ages of 14, 16, 18 and 24.
- The Department of Work and Pensions benefits advice from the age of 16.
- The Availability of Adult Social Care assessment from the age of 18.
- The transfer to Adult Health Services at 18.

More detailed information on the Preparing for adulthood pathway is published in a separate document '*The Preparing for Adulthood Pathway Explained*'. This can be located on the Local Offer website.

Based on the experiences of young people and families, the Pathway aims to raise aspirations and expectations for fulfilling lives for young people as they move into adulthood by making sure that everybody knows how to support all young people to achieve positive life outcomes in the areas of, employment, maximizing independent living, good health, friends, relationships and community participation.

# Step 1 - SEND Support

#### Early years/school support

All early years settings/schools have to identify children who have SEND. Early years settings/ schools should take action to remove barriers to learning and put effective special educational provision in place using the graduated approach. We recommend that a CAF should be initiated at the point of identification of SEND.

Schools and settings must work closely with parents and follow a 4 stage approach as shown below:



- Assess Schools/settings should assess the needs of the child to establish what
  the barriers are to their learning and development. This could include the
  involvement of external agencies e.g. the Educational Psychologist or Speech and
  Language Therapist.
- 2. Plan Schools/settings should plan with relevant external professionals, child/young person and family the support that is required to meet their special educational needs or disability. This should take the form of a plan or provision map including the outcomes, interventions and provision.
- **3. Do –** Schools/settings should put in place the agreed support/interventions required.
- **4. Review –** Schools/settings should review the support/interventions three times per year and this should involve both the child/young person and the parent/carers.

Early years settings and schools need to follow the graduated approach and use the available resources in the Local Offer that are both universal and targeted across education, health and social care needs. This allows a holistic support plan to be implemented to best meet the needs of the child/young person.

More detailed information can be found in the SEN and Disability Code of Practice <a href="https://www.gov.uk/government/publications/send-code-of-practice-0-to-25">https://www.gov.uk/government/publications/send-code-of-practice-0-to-25</a>

# Step 2 - Referral

Referrals can come from parents, young people (over the age of 16), schools/settings and professionals. In order to know whether a referral is required, it is helpful to consider the following.

Does the child/young person:

- Have severe and/or complex long-term needs that affect their everyday life?
- Require provision and resources that are not normally available in early years/school/college setting?
- Require intensive help and support from more than one agency (e.g. Education, Health and Social care)?
- Made limited or no progress despite appropriate levels of support and
- Despite the evidence of a graduated response from the school/setting; i.e. appropriate interventions, support and resources available through the Local Offer, the expected progress has not been made.

If a referral is considered, the next step is to hold a person centred meeting to look at all the current interventions and strategies being used to support the child/young person and the expected impact on progress. This must include the family as an equal partner.

The meeting will look at what's working, how much progress towards the outcomes has been made, what's not working, what support is in place and how effective the support is in meeting the child/young person's needs.

A representative from the Local Authority (Inclusion Adviser or Educational Psychologist) should be consulted to confirm whether it is appropriate to request an Education Health and Care Plan (EHC) assessment.

#### Completing Section A of the EHC Plan

The 'All About Me' section or 'Section A' of the EHC Plan is concerned with the collection of views, quality information and advice. For this section, children/young people will be asked to 'tell' their story using appropriate tools and strategies, e.g. Makaton, Picture Exchange System (PECS), or ICT packages that support communication. Some children/young people who may have significant special educational needs, particularly in terms of communication, will need their family or professionals working closely with them to interpret their feelings, likes and needs. This will enable them to share their story.

Part A must be completed within 6 weeks from the date of the decision letter to proceed with an Education, Health and Care assessment. The EHC Coordinator and the referrer will support the family to complete the 'All about Me' (Section A) of the EHC Plan.

This uses a person centred approach to highlight the child/young person's relationships, describe their strengths, needs and current levels of support. It looks at what is working well, what is not working so well, what is important to and for them. It focuses on their hopes and aspirations for the future. This can be completed by the child/young person/parent, referrer and EHC Coordinator. Additional advice and support can be obtained from Parent Partnership Services and/or Independent Parental Supporters.

Key to completing this part of the EHC plan is the voice of the child/young person not the views of the professionals supporting the family.

## **Professional reports**

At the same time the 'All About Me' information is being completed by the family and referrer, professionals will be asked to make their assessments and provide specialist advice. Joint assessments should be arranged where possible to minimise the amount of assessments that families have to undergo. The EHC Coordinator will write to all the professionals who will be asked to complete a report. The reports must be completed within 6 weeks of the date of the request. The EHC Coordinator is responsible for contacting the professionals, collating the responses within the time limits and chasing outstanding contributions if necessary.

#### **Outcomes**

Professionals will need to recommend outcomes which are within their own professional remit. They will need to ensure that the outcomes are achievable within a timeframe e.g. by the end of a particular year or key stage. The outcomes must link with the child/young person's needs and aspirations. The report should recommend the interventions required to help the child/young person make progress towards the outcomes.

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# Step 4 - The Plan

Once the professional reports are gathered, the EHC Coordinator will start to write the remainder of the plan describing clear outcomes for the child/young person. The EHC Coordinator will then convene a second meeting with the family, child/young person and referrer to discuss the draft EHC plan.

The objective of the meeting is to agree a personalised EHC Plan which contains information on the child/young person's strengths, needs and aspirations; agreed outcomes for the child/young person and the resources required to deliver the outcomes across Education, Health and Social Care.

The family will be offered information about personal budgets which they can apply for in step 5 of the pathway.

# Naming an early years setting/school or college

At the meeting to develop the draft plan, parents/carers will be asked about preferences for an educational setting to be named in the final EHC Plan. There will be a full discussion about the range of provision available locally through the Local Offer.

Educational placements which are the parent/carer preference will be consulted regarding their ability to meet the child/young person's needs. Educational settings will be given a **maximum of 15 working days** to respond to the consultation.

# **EHC Multi-Agency Panel – Decision Making**

The EHC Multi-Agency Panel will meet fortnightly and consider a range of multi-agency decisions across education, health and care.

Membership of the panel will include:

Group Manager Disabled Children's Team	Therapy Representative
Education Health and Care Team Manager	Group Manager Early Years
Education Health and Care Coordinators	Head teacher representative
School Inclusion Adviser	SENCO representative
Paediatrician	Child and Adolescent Mental Health Services
Educational Psychologist	
Clinical Commissioning Representative	

The panel will consider:

- referrals for EHC assessments;
- new arrivals into the country/local area with complex needs;
- provision and placements for EHC Plans
- review existing SEN Statements and EHC plans.

The panel will consider cases 0 - 19.

It is recognised that the EHC Plan may contain a combination of delivered services and those commissioned through a personal budget. In due course, while the SEND reform processes embed it is envisaged that the range of options available to be taken as a direct payment will increase.

Once the plan resources are agreed, responsibility for delivering the Education, Health and Care elements of the plan will be each services priority. Individual teams/services will be accountable for their contribution to the plan.

#### Records of the decisions/recommendations

A record of the decision/recommendation will be made by the chair. The attendees will be asked to agree the aspects of the plan that apply to resources that involve their service. An example of this is Education will make decisions about resources for schools and naming schools. Social Care will agree resources for short-breaks and Health will agree therapy and health resources.

# Step 5 – Budget

This step describes the process by which families and young people will be offered a personal budget. Legislation places a duty on the Local Authority to prepare a personal budget when a parent/carer or young person requests one. The personal budget is offered for children/young people who will receive an Education, Health and Care Plan. An Education, Health and Care personal budget can include funding from one, two or all of the above services; however the scope of the budget will vary depending on the needs of the child/young person.

Two key values underpin the 'The Budget' stage of the pathway. These are:

- 1. **Transparency** everyone understands how decisions are taken about setting the allocation of a notional budget
- 2. **Participation** everyone who needs to take part is supported to do so and relevant documentation is simple, accessible and easy to use.

# What is a personal budget?

A personal budget is an amount available to obtain provision described in the Education Health and Care Plan (EHC). It is not an additional pot of money; it is the amount of money that statutory services spend on an individual for some services that an individual receives.

Personal budgets are one element of a personalised approach to supporting children and young people with special educational needs and disabilities. The EHC Plan will identify the resources that are over and above those normally available across education, health and social care services.

#### Who can request a personal budget?

The family of children and young people who may be eligible for a personal budget are residents of Barking and Dagenham who have a statutory EHC Plan. A young person over the age of 16 can request a personal budget in their own right.

# What is included in a personal budget?

Families who wish to have a personal budget will be provided with a breakdown of the costs that the Council/Clinical Commissioning Group (CCG) Partnership have identified in the EHC Plan, some of which may be converted into a direct payment to the family or young person. Personal Budgets are from spot purchase or individualised budgets. They are not from Universal Services or Block Contracts. Most services a child/family receives are universal services or, specialist services tied up in large block contracts. In these cases it is not practical to unpick large contracts and calculate Personal Budgets. Economies of scale would also mean that in most cases families who opt for a Direct Payment would end up being able to purchase less service.

## **Examples**

Services that can't be in a Personal Budget	Services that can be in a Personal Budget, but cannot be considered for direct payment	Services that maybe considered for a Direct Payment
GP Services	School placement costs	Domiciliary/home care
Acute inpatient services	Looked After Children's placement costs	Respite care
Community and mental health services		Home to school transport

# How will a personal budget be funded?

There are three main sources of funding for a personal budget:

- 1. **Education –** this funding will be drawn from the council's Education High Needs Block.
- 2. **Health –** will offer individual funding to fund children with complex health needs as established by the criteria set out in the continuing care decision making tool.
- 3. **Social Care** this funding will provide support to the child/young person to achieve the outcomes in the EHC Plan and for the family to have a short break. This is determined through the definition of whether the disabled child is in need as defined by the Children and Families Act and local eligibility.

The joint funding approach requires trust transparency and confidence between services so that a partnership approach is embedded.

The 4 ways in which a parent/carer or young person can choose to control a

- 1. Direct Payments Where the family or young person receive a cash to contract payment into their bank account and they purchase and manage services themselves.
- An organised arrangement where the council retains funds and commissions the support specified in the plan (these are sometimes called notional arrangements) and can also be used where contractual or funding arrangements mean that cash cannot be released as a direct payment or where economies of scale may be present.
- 3. Third party arrangements/nominees where funds are paid to an individual or another organisation on behalf of the parent/young person and they manage the funds.
- 4. A combination of the above

# personal budget:

# Preparing a personal budget

Where a child is eligible for an Education Health and Care Assessment at Step 3 families will be given information about personal budgets and a discussion will take place about the options available.

During the assessment process the EHC Coordinator will be working with the family to develop a clear understanding of the outcomes to be achieved and the possible resources required to meet them.

At Step 4 (The Plan) a person centred meeting will be held and at this meeting the plan will be drawn up the outcomes, interventions (actions) and resources required to meet their needs. The resources will form a notional budget.

After the person centred meeting if the family or young person requests a personal budget the EHC Coordinator will contact the relevant service(s) across social care or health so that they can consider the request.

The personal budget will be finalised at the time that the EHC Plan is issued naming a school. It will be reviewed annually at the person centred review.

# Step 6 - The Review

All EHC plans must be reviewed at least annually using a person centred approach. In addition, if a child/young person's needs change significantly at any time an earlier review can be initiated by the educational placement, the family or the Local Authority.

The review will use a person centred approach to look at:

The views and wishes of the child/young person

What is working and not working for the child/young person

Progress towards the outcomes of the plan

From Yr 9 onwards young people should have transitional reviews to prepare for adulthood. The EHC Coordinator will attend the review meeting to support planning and discuss local options for further education, training, employment or adult social care provision.

# Timeframe for transition to Education, Health and Care Plans

It is recognised that converting the statements to EHC plans in a way that maximises the benefits that they offer will be a significant undertaking. We want to be sure that this transition happens at a pace that is achievable and which maintains the quality of support both to children and young people.

To allow a gradual and orderly transition to the new EHC plan for those with existing statements and LDAs, there will be a period during which both the new and the old systems operate in tandem.

The legislation proposes that:

- The conversion of all existing statements to EHC plans be completed by April 2018;
   and
- The conversion of LDAs to EHC Plans to be completed within two years.

We are proposing that in Barking and Dagenham the best point for the conversion to an EHC plan will take place at the time of the annual review/transition review. The Local Authority has produced a plan to transfer all Statements of SEN to EHC Plans in accordance with DfE guidance.

# **Disagreement Resolution**

This service is delivered by a provider independent of the Council or the education providers involved.

This service is to help resolve disagreements that parents or young people might have about:

- the special educational provision made for a child or young person by a school, early years setting or post-16 providers;
- the way public funded schools or colleges are carrying out their duties for children and young people with SEN;
- the use of the disagreement resolution service has to be with the agreement of both parties concerned.

# **Appeals**

If you are unhappy with a decision made by the council about a Statutory Assessment or decisions about an Education, Health and Care Plan the first thing you should do is ask to meet a council officer to discuss the issues.

If you cannot resolve issues through meetings with council staff then you can appeal to The Special Educational Needs and Disability Tribunal.

You will be expected to make your case in writing by a deadline date and then to go in person to a Tribunal hearing.

In some situations you will need a certificate from the mediator before you can appeal.

# Pathway Roles and Responsibilities

Child/young	Requesting help and support through education, health and care.
person and	Requesting an education, health and care assessment.
parent/carers	Working with their allocated key worker on their 'All about Me' story.
	Attending meetings about their child and contributing towards the EHC Plan.
EHC Multi-	Identifying children with complex needs who require an Education, Health and Care
Agency Panel	Assessment.
	Making decisions about referrals for an EHC Assessment according to the
	eligibility criteria.
	Ensuring that multi-agency staff are engaged in the process.
	Determining resources. Supporting the Local Offer.
	Providing information to commissioners in Education, Health and Care to
	support the commissioning of services to meet the needs of local families.
	Promoting partnership working across agencies for children with an EHC Plan 0-25.
	Contributing to the Joint Strategic Needs Assessment (JSNA).
	Working in partnership with NHS Commissioners in the Clinical Commissioning
	Group (CCG) and NHS England.
	Working with NHS Providers to ensure they understand the pathway.
Key worker or	Being the main point of contact for the family/child/young person.
Referrer	Providing support and signposting.
	Liaising with relevant agencies as necessary.
	Supporting parents at meetings.
Education	Administering the EHC assessment process.
Health and Care	Writing to parents and providing information about the EHC assessment
Plan Coordinators	process.
Coordinators	Advising parent/carers on support services available and signposting them.  Writing to education, health and care professionals to gather information as
	part of the EHC assessment.
	Ensuring the smooth running of the process within the statutory timescales of 20
	weeks.
	Presenting cases to the EHC Multi-Agency Panel.
	Working closely with the family and professionals to draw up the Education Health
	and Care Plan.
	Liaising with early years settings/schools/colleges and securing placement
	for children and young people.
	Liaising with multi-agency professionals.
	Liaising with the family around access to a personal budget.
	Attending person centred reviews and converting statements to EHC Plans.
Portage/ Early	Supporting parents through mediation if necessary.  Attending multi-agency meetings for Early Years children to consider the need for
Years	an Education, Health and Care Assessment.
Tours	Presenting cases to the EHC Multi-Agency Panel.
	Working closely with the family and professionals to draw up the Education Health
	and Care Plan.
	Liaising with multi-agency professionals.
	Liaising with the family around access to a personal budget.
Education	Presenting cases to the EHC Multi-Agency Panel for young people 16 – 25.
Health and care	Working closely with the family and professionals to convert statements/139a and
Plan	Learning Disabilities Assessment into Education Health and Care Plans.
Coordinator 16-	Liaising with schools and securing placement for young people in post 16
25 and Careers	pathways either work or appropriate courses.
advisers	Liaising with multi-agency professionals.

# Glossary

A I'	
Co-ordinated	The process of establishing what a child/young person's needs are. The
assessment	assessment has been designed to be a single point of entry for co-ordinated
	support from more than one specialist service.
	Assessments will be co-ordinated across education, health and social care, so
	that procedures aren't duplicated and information is shared appropriately.
	that procedures aren't adplicated and information is shared appropriately.
	The second instead precess is being introduced to avoid uppercease and duplication of
	The co-ordinated process is being introduced to avoid unnecessary duplication of
	assessments for children/young people with a wide range of needs and to ensure
	that relevant information is considered.
Common	The Common Assessment Framework (CAF) is a standard assessment that can
Assessment	be used by all services working with children and young people. It is particularly
Framework (CAF)	suitable for use in integrated early intervention work, where a child or young
,	person is experiencing difficulties.
	portion to experioring dimediates.
	The CAE helps practitioners to identify a shild or vouns person's atronaths, peeds
	The CAF helps practitioners to identify a child or young person's strengths, needs
	and goals. It can be shared between services and used as a starting point for
	planning coordinated multi-agency action.
Clinical	Clinical commissioning groups (CCGs) are NHS organisations set up by the
Commissioning	Health and Social Care Act 2012 to organise the delivery of NHS services in
Groups (CCG's)	England. They have replaced Primary Care Trusts.
,	
	CCG's are clinically led groups that include all GP groups in a geographical area.
	They operate by commissioning (or buying) healthcare services, with the aim of
	giving GPs and other clinicians the power to influence commissioning decisions
	, ,
0	for their patients.
Co-production	When a child/young person and their family are involved
	as an equal partner in designing the support and services they receive. Co-
	production recognises that the child/young person who uses education, health
	and care services have knowledge and experience that can be used to improve
	services.
	JOI VIOCO.
Conversions	
Conversions	The process to transfer children and young people with existing statements and
	The process to transfer children and young people with existing statements and Section 139a Learning Difficulty Assessments to EHC plans.
Direct payments	The process to transfer children and young people with existing statements and Section 139a Learning Difficulty Assessments to EHC plans.  Direct payments – where individuals receive cash to contract, purchase and
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Notional budget	The amount a school has within their overall budget for SEN support
Outcomes	Outcomes will be specified in the EHC plan and will describe the goals/ambitions/aspirations that a child/young person is looking to achieve
Personal budget (see also direct payments)	Personal budgets are available where a child/young person has an EHC plan. A personal budget is an amount available to obtain provision described in the plan which the young person or parents may be involved in securing.
Personalisation	A way of thinking about the support that puts the child/young person at the centre of the process of working out what their needs are, choosing what support is required and having control over their life. It is about the child/young person being considered as an individual rather than their needs being addressed as part of a whole.
Referral	A request for an assessment of a child/young person's needs.
Special	The term SEN is used for a child or young person with a learning difficulty or
educational needs (SEN)	disability which calls special educational provision to be made for them if they:
Special	a) have a significantly greater difficulty in learning than the majority of others of
educational	the same age; or
needs and	b) have a disability which prevents or hinders them from making use of
disabilities (SEND)	educational facilities of a kind generally provided for others of the same age in mainstream schools or mainstream post 16 institutions.
	A child under compulsory school age has SEN if they fall within the definition at (a) or (b) above or would do so if special educational provision was not made for them.
	The term SEN covers where a child/young person has a disability or health condition which requires special educational provision to be made.