

SEND ANNUAL REPORT 2020/21

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Designated Clinical Officer for CYP with SEND



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Executive Summary

The information contained within the report is intended to be used as assurance that the Designated Clinical Officer (DCO) for CYP with Special Educational Needs Disability (SEND) is ensuring that the CCG is meeting its statutory responsibilities with respect to SEND. The post is hosted by Lincolnshire CCG and supported by the Director of Nursing, Lincolnshire CCG.

Background

In 2014 the Children and Families Act¹ was updated to incorporate reforms for Children and Young People with Special Educational Need and Disability (SEND). The SEND Code of Practice (2015)² means that professionals from Education, Health and Social Care services have to work more closely together to give children and young people from 0-25 with special educational needs or a disability, the support they need. Children and young people will have more say over what support and services are offered in their local area, and more help will be available for young people as they prepare for adulthood.

Some children or young people with more complex educational needs receive support through an Education, Health and Care (EHCP) plan. The EHCP is a legal document that describes a child or young person's special educational, health and social care needs and is the document that has replaced Statements of SEN and Learning Difficulties Assessments for children and young people with special educational needs. An EHC plan can only be issued after a child or young person has gone through the process of EHC needs assessment. At the end of that process, representatives from Education, Health (the DCO team) and Social Care have to collaboratively make a decision, either to issue an EHC Plan or not. The aim is to bring all services together to work in close partnership to enable CYP with SEND to live their best lives.

However the aim of the Children and Families Act (2014) is not just to bring separate services together, but to reorganise and integrate the delivery of these services at a strategic level. The Designated Clinical Officer (DCO) plays a key part in implementing the SEND reforms and in supporting joined up working between health services and local authority. The DCO and Associate DCO (ADCO) for SEND in Lincolnshire have achieved a number of key actions in 2020/21, this activity supports the continued areas of work that focus upon delivery of our statutory duties and are detailed in the narrative of this report.

Impact of Covid 19

The DCO role was deemed business critical throughout the Covid 19 response and exempt from redeployment by Ministerial Order. Whilst a number of key projects were placed on hold, an exponential rise in the number of Education, Health and Care Plans dictated that activity was redirected to support that work stream. Despite a relaxation in the statutory time line, the Lincolnshire system SEND team maintained its compliance in managing the EHCP process throughout.

¹ [Children and Families Act 2014 \(legislation.gov.uk\)](https://www.legislation.gov.uk/ukpga/2014/6/contents/enacted)

² [SEND code of practice: 0 to 25 years - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/426271/SEND_code_of_practice_0_to_25_years_-_GOV.UK.pdf)

However the ADCO was redeployed to support a number of Covid 19 cells therefore work on a number of key projects was delayed or impacted. Key work streams were reinstated in December 2020 and the ADCO has continued to support the DCO in the delivery of statutory responsibility.

Assurance

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The CCG is committed to providing assurance via an assurance framework database developed by NHSE in partnership with the CQC, Ofsted and Council for Disabled Children. This framework forms the basis of peer reviews and inspections. The responses are collated under the following themes or subject headings. Therefore activity in the report will be annotated in this document by * followed by the relevant theme.

1. Leadership
2. Joint arrangements
3. Commissioning
4. EHCP
5. Engagement
6. Monitoring and redress

DCO Statutory functions

SEND Legislation (SEND Code of Practice 2015) outlines that CCGs must:

1. work with the local authorities to contribute to the Local Offer of services available
2. commission services jointly for CYP (up to age 25) with SEND, including those with EHC plans
3. have mechanisms in place to ensure practitioners and clinicians will support the integrated EHC needs assessment process

The following section will provide an overview of activity within the three statutory areas and compliance with these requirements is identified in Appendix 1.

1. Local Offer * *Joint arrangements, engagement, commissioning*

The Lincolnshire SEND Local Offer is an online resource for families, children and young people with special educational needs and disability (SEND) aged 0 to 25. The Local Offer in Lincolnshire provides information about education, health and care services. It includes advice about health, education and social care for:

- children and young people from birth to 25 years old with SEND
- parents and carers of children with SEND
- professionals working in health, care and education
- providers of services for children and young people

The DCO sits on the Local Offer steering group (supported by the ADCO) who ensure the content shared within the Local Offer is accurate, accessible, and appropriate and adds value to the lives of CYP with SEND. The Local Offer is under constant review however during Covid 19 - whilst the Local Offer was very much available the development programme was slowed but has recently been restored.

2. Education Health and Care Plans

** Leadership, Joint arrangements, Commissioning, EHCP, Engagement, Monitoring and redress*

Education, Health and Care (EHC)P assessment is a twenty week statutory process. SEND legislation states that health organisations must co-operate with the LA when asked to contribute to the EHCP process. The legal requirement is to provide this information within 6 weeks and have mechanisms in place to ensure that practitioners and clinicians will support the integrated needs assessment process. Effective systems are in place with a regular annual review of effectiveness. In 2020 this annual review of the process was not undertaken due to Covid, however requests for health advice to support the EHC process, continued as business as usual and all statutory functionality was maintained despite a relaxation in SEND legislation that provided temporary amendments by the secretary of state. This ended on the 25th September 2020; ceasing the best or reasonable endeavours to be put in place in respects of provision detailed in EHC Plans and reinstating the duty. However in Lincolnshire new models of working were adopted and the DCO worked in collaboration with IMPower (See below) to improve the effectiveness of the process. Where services are not commissioned – the DCO has endeavoured to work collaboratively to develop bespoke solutions using Personal Health Budgets, spot purchasing and Out of Area Treatment panel routes.

The EHCP digital Hub (Open Objects) has been commissioned by the LA, following feedback from parent/carers requesting a need for a more transparent electronic system. However there have been a number of delays due to operational issues around software integration across the system and implementation has been pushed back. The DCO team continues to work with the LA on operationalising the system and with clinical teams in the support of quality assuring evidence provision for EHCP needs assessments and the EHC plan annual review and work is continuing in developing an improved process.

3. Tribunal and Single Route of Redress (SRR)

** Leadership, Joint arrangements, Commissioning, EHCP, Engagement, Monitoring and redress*

In 2018 the Government extended the powers of the SEND Tribunal to make non-binding recommendations about the health and social care aspects of education, health and care (EHCP) plan as a part of two year national trial. This trial was extended in August 2020. Before the trial it was only possible to appeal the educational aspects of EHC plans. The trial gives new rights to request recommendations about health and social care and provision in EHC plans in addition to the educational aspects when making a SEND appeal. The SEND Tribunal can make recommendations about aspects of health or social care and this is not legally binding – however the LA or health commissioner is generally expected to follow recommendations. Where recommendations are not followed the reasons must be set out and explained to the Local Government and Social Care Ombudsman or Parliamentary Health Service Ombudsman. Whilst there has not been a rise in the number of tribunals per se, there have been a higher number of tribunals involving health. The ADCO maintains a database of SRR activity and whilst cases are often complex, the DCO has worked with a wide variety of clinicians very closely and who have provided excellent support to the SRR. The DCO team is planning to deliver a series of virtual educational workshops specifically around Single Route of Redress in 2020/21 in collaboration with the East Midlands DCO Network and LA SEND team.

Key areas of non-statutory activity:

1. Impact of health service provision and changes to legislation.

**Joint arrangements, Commissioning, EHCP and Monitoring and Redress*

The Government Minister for SEND has sent open letters throughout the pandemic and has noted the impact on CYP and their families. This was initially a result of the Prioritisation within Community Health Services document (NHSE/I April 2020). The document did not refer to SEND legislation or requirements but did identify segmentation in therapy and community paediatrics, with the need to prioritise only urgent care needs and to stop medium and lower priority work. This had a direct impact on CYP with SEND, as provider services ceased non-urgent home visits and school interventions were ceased due to school closures. Feedback from CYP and their families have reported that they felt there was a lack of clear communication of what the local provision was at that time, adding to the increased pressures that families were experiencing already. Services eventually were reinstated via phased business continuity plan offering alternative arrangements to meet the needs of CYP with SEND. In Lincolnshire, therapy, nursing and community paediatric services have continued using virtual platforms or by wearing appropriate personal protective equipment and this has been the catalyst for new ways of working with parents and carers reporting increased satisfaction in being able to access clinical support more readily in some cases.

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As schools have reopened, there have been some challenges, in responding to the differing national guidance lead by NHSE and the DfE. The workforce has responded to their own organisation requirements; (NHS the restoration for children and young people's community health services, whilst education and social care settings implement the ever evolving DfE guidance). This differing guidance resulted in partners having different expectations regarding local health provision restoration (in particular for therapy services, transport and for the level of PPE requirements not being mirrored). The DCO team has worked in partnership to ensure full understanding is shared across the networks.

2. IMPower High Needs Transformation

**Joint arrangements, Commissioning, Monitoring and Redress*

DCO has supported the implementation and development of a new 'virtual' hub working closely with LA SEND colleagues and Impower. Impower are an external consultancy engaged to support public service improvement and commissioned by the LA as a strategic partner. Between 2014 and 2019 number of new Education Health Care plans had risen by 173%. However in Lincolnshire we are not increasing at the same rate in 2020 to date; this could be due to Covid (although other areas have seen an increase) or we may be seeing the first changes in culture as a result of the introduction of a number of initiatives introduced by LCC which includes the introduction of Ask SALL (SEND advice line for SENDCOs).

The hub is a weekly virtual panel that supports the decision to either issue or decline an EHCP based on reports from professionals involved in the education, health and care of the CYP. Using new models of working developed by IMPower based on evidence based methodologies; the hub process has been refined provides consistent oversight and monitoring for the DCO and informs commissioning and provision of services across the SEND system. The SEND team are evaluating these over the coming months to assess impact. We did some trajectory work last year and, at this time, we are below our trajectory which is positive. (In 2014 there were 3,300 Statements of SEN (the precursor to and EHCP) in September 2014 and we now have 6,267 EHC Plans in 2021).

3. Development of Clinicians SEND Education Programme

**Joint arrangements, Commissioning, EHCP and Monitoring and Redress*

The Graduated Response /Approach explicitly states in the SEND Code of Practice (2015) that children and young people with SEND should have their needs met and outcomes achieved in a mainstream education setting however it also acknowledges that a specialist school may be a better choice for a child or young person. The Code of Practice key principals confirm that the views, wishes and feelings of the child, young person and the child's parents/carers must be sought. It emphasises the importance of the child or young person, and the child's parents, participating as fully as possible in decisions, and being provided with the information and support necessary to enable participation in those discussions. The Graduated Response follows four stages of action: Assess, Plan, Do, Review, as outlined in the SEND Code of Practice (2015). However evidence from Lincolnshire parent/carer survey 2020, suggested that use of the graduated approach is ineffective in preventing needs escalation or maintaining children's needs due to lack of understanding or clarity. This suggests that there are gaps in support and in the timeliness of delivering this support for a large percentage of children within Lincolnshire.

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Additionally following an audit of the quality of clinical report writing into Education, Health and Care Plans in collaboration with PHE, the Children's Integrated Commissioning Team and Local Authority, the DCO team have developed a service level agreement with LIAISE (Lincolnshire's Send Independent Advice and Support Service (SENDIASS)) to design and deliver a three tier training programme. The Clinicians SEND Education Programme aims to provide an increased working knowledge of the Graduated Approach, SEND system and EHCP process.

The programme covers:

- SEND law and guidance
- SEN funding
- The graduated approach
- Support services
- Reviews of SEN support
- When might a child/young person require an EHC Needs assessment?
- The Involvement of Health Services

The first Tier One session was recently delivered to the Community Paediatricians and evaluated very positively. It has now been opened up to other clinical groups with a positive response; additionally the second tier session will be delivered in June 2021. The ADCO has been working with the Community Paediatric team to design a new health advice template which aims to provide uniform SMART health advice to the EHCPs in line with the SEND Code of Practice and addresses areas for improvement highlighted in the CQC/ Ofsted report.

4. SEND Engagement Activity

**Joint arrangements and Engagement*

The DCO has attended various virtual engagements events and developed strong relationships with the Lincolnshire Parent Carer Forum (LPCF) which is funded by the DfE. Positive feedback was received from LPCF as the DCO team investigates numerous complex cases and provides detailed responses, clarity and solutions to a large number of multifaceted queries over access/ inability to access service provision. The DCO has been in regular attendance at a series of varied virtual

engagement events such as Signposting events/ Week of SEND with LPCF - more are scoped for 2021/22 including the DCO hosting a series of live chat sessions. The LPCF have also been instrumental the design operationalisation of the Sensory Processing Disorder Programme (see item 6).

'LPCF work very closely with the Designated Clinical Officer for CYP with SEND in the CCG. This has been demonstrated through the co-production of the Sensory Processing Difficulties project. The mutually supportive relationship, focussed on improving experiences for families, has enabled the LPCF team to play a "critical friend" role during the formulation of the project and also to take an active role in ensuring that the workshops were as accessible to parents as possible.'

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Our open, positive relationship with the DCO is further enhanced by his regular attendance at signposting events for parents during 2020-21 and also during our recently successful Week of SEND. LPCF appreciate the support and close working relationship we have with the Designated Clinical Officer.'

Coralie Cross, Chair of LPCF (2021)

5. Widening Participation

**Leadership, Joint arrangements and Engagement*

The aim of Lincolnshire Young Voices is: To provide Lincolnshire local area with a strategic group of young people who **'have a lot to say'** about improving services for children and young people (aged 0-25yrs) with special educational needs and disability (SEND) and their families in Lincolnshire'.

Lincolnshire Young Voices is a group of young people with Special Educational Needs and/ or Disability and who are Experts by Experience. This group has been developed for children and young people with SEND (0-25) to provide a voice and is part of the widening participation strategy. They are line managed by the Participation Team from LCC who are in turn supported by a SEND Locality Team Lead from the Local Authority and the Designated Clinical Officer.

LYV is now formally recognised across the Local Area system and the two co-chairs have now been recruited and have been in post since 2019. These posts are being used as development opportunities across the LA and NHS and take feedback from educational and NHS settings to provide assurance to the SEND system around provision of services for CYP with SEND. The two Joint Chair posts also coordinate the activity of an additional circa x10 volunteer posts.

Covid 19 has impacted on the ability to deliver on a number of work streams detailed in the LYV Service Delivery Plan. However the group undertook a number of audits of professional agencies such as Children's Centres around communication, approachability and sensory environment. Combined with an increasing call for improved training resources from the Council for Disabled Children and the GP network the group are now working in collaboration with a number of key stakeholders to develop online training resources for use across the system by professionals involved with CYP with SEND..

The training programme is being developed collaboratively as a web based training resource for staff working with CYP with SEND in collaboration with Lincolnshire Young Voices (LYV). Using the voice of the SEND community and national best practice to inform and guide the development of a learning resource to improve professional practice and support CYP with SEND to live their best lives.

It will be designed for use as part of an induction/ mandatory training programmes and on-going development to support the improve staff knowledge and skills. It is intended to improve the lived

experience of CYP with SEND, address health inequalities and improve access to services by using the lived experience of service users and experts by experience.



6. Sensory Processing Disorder Programme

**Leadership, Joint arrangements, Commissioning, EHCP, Engagement and Monitoring and Redress*

Sensory Processing Disorder (SPD) is a term used to describe dysfunction in the sensory integrative process. It is based on the relationship between the brain and behaviour, and is described as 'the organisation of sensory input'.

There are many general behaviours and traits that are associated with SPD, for example, low self-esteem, agitation, frustration, aggression, difficulty unwinding or sleeping and appearing out-of-sync with self or others and the environment. It varies between individuals in both characteristics and intensity: children may be born hypersensitive (over-responsive to stimuli), or hyposensitive (under-responsive to stimuli) – which may result in avoidance of an activity.

Historically there has been no commissioned service to support CYP with Sensory Processing Disorders in Lincolnshire despite an increase in number of requests for sensory integration therapy. However in collaboration with the Local Authority, Lincolnshire CCG has commissioned a two tier educational parent/carer mediated programme to support CYP with SPD. It is intended to upskill and educate parents, carers and professionals and to improve outcomes for CYP with SEND and SPD.

To date we have delivered one face to face pre-lockdown workshop to parents and carers which evaluated very positively however we were unable to deliver the remaining 7 due to lockdown. In response we designed a first tier online e-learning offering supported by the second tier 2 hour long workshop with a Behavioural Specialist. This is open to parents, carers and professionals across the education and health sector. However parents and carers reported difficulties in being able to access the virtual classrooms in lockdown as laptops and devices were being used for home schooling or they were busy caring for their CYP. Consequently the programme was postponed with dates now planned for spring/summer 2021.

Ambitions for 2021/2022

The DCO team are working with the LA SEND team to develop a set of Key Performance Indicators (KPIs) in order to improve oversight of EHCP compliance and monitoring of tribunal data. In addition our aspiration is to expand the quality assurance programme by developing an EHCP Review panel. Further updates to these work streams will be provided to the Quality team and overseen by the SEND Health Committee and CYP transformation Board.

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Summary

The DCO team for SEND in Lincolnshire will continue to develop and finesse the role and function that supports Children and Young People with Special Educational Needs and Disability in the county whilst sharing and developing best practice regionally and nationally. This will be through a continual process of challenge, monitoring and engagement and by coordinating services and agencies and developing networks. This is to provide assurance that the CCG's are meeting their statutory responsibilities and to ensure that the Children and Young People with SEND in Lincolnshire can access the support they need to in their early years, at school and in further education and leading happy, healthy and fulfilled lives and having choice and control over their support.

Russell Outen-Coe

Designated Clinical Officer for CYP with Special Educational Needs and Disability



Appendix 1

Statutory Duties	Risk	Mitigation
The Local Offer The duty is to ensure that information on health service provision is available for service users to access via the local offer websites. The LA is the lead for this duty.	There are no clear pathways in place to ensure that this is embedded within service areas at present and this is currently progressed by contacting service managers to ensure the information available is accurate and accessible.	DCO team are members of the Local Offer Development group. Key links within services areas need to be established to ensure that information on Trust websites are accurate, easily accessible to CYP and their families.
	LCC were undertaking a review of their local offer prior to the pandemic and this work has recently been restarted.	Lincolnshire's local offer can be found at The Local Offer – Lincolnshire County Council . The website has been updated for ease of use this year, following consultation with children, young people and their families. Advise the LA of any significant changes to health provision so that the website can be updated to contain accurate information.
	Information needs to be 'easy read' to enable access for service users with SEND	Working with services and LA to ensure adaptations are made for service users when accessing information.
Education Health and Care Plans; assessment, annual review and tribunal process EHC assessment is a 20week statutory process. SEND legislation states that health organisations must co-operate with the LA when asked to contribute to the EHCP process. The legal requirement is to provide this information within 6 weeks During the	Reporting- There is limited evidence available from providers or commissioners to determine if responses are being made within legal timeframes. The DCO works with the LA and neighbouring CCGs to track to be advised of missing health contributions that are breaching timescales to enable reminders to be issued Risk of not adhering to statutory duties if SEND is not a priority within health service provider's provision.	Attendance at the SEND Health Committee Meeting of SEND leads providing regular progress updates. Attendance at the SEND Steering group by the DCO. The DCO team work closely with the SEND team and to providers to ensure timely response and regular teaching sessions with clinicians to ensure teams are sighted on statutory responsibilities.
	Provider policies for SEND- Lincolnshire CCG wrote to the Chief Executive officers for each of the NHS trust provider to request that arrangements be put in place to support their	Health providers have engaged and participated in ongoing workforce development and improving systems in order to do this.

<p>pandemic SEND legislation was provided temporary amendments by the secretary of state, this ended on the 25th September 2020; ceasing the best or reasonable endeavours to be put in place in respects of provision detailed in EHC Plans and reinstating the duty.</p>	<p>services area practitioners, to respond to National First Tier Tribunal appeals; Single Route of Redress and to provide W&C Board assurance of that. This was agreed in a Contract Variation in 2018.</p>	<p>Page 12</p>
	<p>Data accuracy- The accuracy of the data needs to be considered with caution as it is collated and inputted by the LA in locality areas, not CCGs and does not reliably reflect whether plans include health contribution or not.</p>	
	<p>EHC Process- Inadequate or poor-quality contributions to the EHC process results in EHC plans not being appropriate to meet the needs of the CYP with SEND; delaying progress in them meeting their identified outcomes/aspirations.</p>	<p>The CCG is currently represented on the panels by the DCO and supported by the Associate DCO.</p> <p>DCO team continue to work with providers around the quality of contributions to the EHC processes. In Lincolnshire SEND leaders are working collaboratively progress the SEND Quality Assurance EHCP improvement plan.</p>
	<p>Single route of redress (SRR)- Challenges can be raised by parent/carers who feel that provision is not adequate to meet the needs of their CYP giving rise to the National First Tier Tribunal; Single Route of Redress; resulting in financial and reputational impact of the CCG.</p>	<p>DCO has developed an SRR pathway for LA's to notify DCO Team of any appeals raised against health service provision. Guidance has also been developed to ensure that commissioners, health providers and SRO for SEND are notified and arrangements in place to ensure that Health professionals are able to respond to those emails within the legal timeframes.</p>
	<p>The EHCP digital Hub (Open Objects) has been commissioned by LCC , following feedback from parent/carers requesting a need for a more transparent electronic system. However there have been numerous delays due to operational issues around software integration across the system and implementation has been pushed back.</p>	<p>Continue with the current Hub which has been finessed in partnership with Impower and provider agencies.</p>

Glossary of terms

Academy: A state-funded school in England that is directly funded by the Department for Education, through the Education Funding Agency. Academies are self-governing and independent of local authority control.

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Annual review: the review of an EHC plan which the local authority must make as a minimum every 12 months.

Child and Adolescent Mental Health Services (CAMHS): These services assess and treat children and young people with emotional, behavioural or mental health difficulties. They range from basic pastoral care, such as identifying mental health problems, to specialist 'Tier 4' CAMHS, which provide in-patient care for those who are severely mentally ill.

Early Support Programme: The Early Support Programme co-ordinates health, education and social care support for the parents and carers of disabled children and young people from birth to adulthood. A key worker is assigned to families that join the Programme.

Early years provider: A provider of early education places for children under five years of age. This can include state-funded and private nurseries as well as child minders.

Education, Health and Care plan (EHC plan): An EHC plan details the education, health and social care support that is to be provided to a child or young person who has SEN or a disability. It is drawn up by the local authority after an EHC needs assessment of the child or young person has determined that an EHC plan is necessary, and after consultation with relevant partner agencies.

First-tier Tribunal (Special Educational Needs and Disability): An independent body which has jurisdiction under section 333 of the Education Act 1996 for determining appeals by parents against local authority decisions on EHC needs assessments and EHC plans. The Tribunal's decision is binding on both parties to the appeal. The Tribunal also hears claims of disability discrimination under the Equality Act 2010.

Free school: A free school is a type of academy, which is free to attend, but is not controlled by the local authority. Free schools receive state funding via the Education Funding Agency. Parents, teachers, businesses or charities can submit an application to the Department for Education to set up a free school.

Further education (FE) college: A college offering continuing education to young people over the compulsory school age of 16. The FE sector in England includes general further education colleges, sixth form colleges, specialist colleges and adult education institutes.

Graduated approach: A model of action and intervention in early education settings, schools and colleges to help children and young people who have special educational needs. The approach recognises that there is a continuum of special educational needs and that, where necessary, increasing specialist expertise should be brought to bear on the difficulties that a child or young person may be experiencing.

Healthwatch England: Healthwatch England is an independent consumer champion, gathering and representing the views of the public about health and social care services in England. It operates both at a national and local level and ensures the views of the public and people who use services are taken into account. Healthwatch England works as part of the Care Quality Commission.

Independent school: A school that is not maintained by a local authority and is registered under section 464 of the Education Act 1996. Section 347 of the Act sets out the conditions under which an independent school may be approved by the Secretary of State as being suitable for the admission of children with EHC plans.

Information, Advice and Support Services: Information, Advice and Support Services or **SENDIASS** provide advice and information to children with SEN or disabilities, their parents, and young people with SEN or disabilities. They provide neutral and factual support on the special educational needs system to help the children, their parents and young people to play an active and informed role in their education and care. Although funded by local authorities, Information, Advice and Support Services are run either at arm's length from the local authority or by a voluntary organisation to ensure children, their parents and young people have confidence in them.

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Joint Strategic Needs Assessment (JSNA): Joint strategic needs assessments (JSNAs) analyse the health needs of populations to inform and guide commissioning of health, wellbeing and social care services within local authority areas. The JSNA's central role is to act as the overarching primary evidence base for health and wellbeing boards to decide on key local health priorities.

Local Offer: Local authorities in England are required to set out in their Local Offer information about provision they expect to be available across education, health and social care for children and young people in their area who have SEN or are disabled, including those who do not have Education, Health and Care (EHC) plans. Local authorities must consult locally on what provision the Local Offer should contain.

Maintained school: For the purposes of this Code, schools in England that are maintained by a local authority – any community, foundation or voluntary school, community special or foundation special school.

Mediation: This is a statutory service commissioned by local authorities which is designed to help settle disagreements between parents or young people and local authorities over EHC needs assessments and plans and which parents and young people can use before deciding whether to appeal to the First-Tier Tribunal about decisions on assessment or the special educational element of a plan. Mediation can cover any one or all three elements of an EHC plan and must be offered to the parent or young person when the final plan is issued, but they are not able to appeal to the Tribunal about the health and social care aspects of the plan.

NHS Continuing Care: NHS Continuing Care is support provided for children and young people under 18 who need a tailored package of care because of their disability, an accident or illness.

NHS Continuing Healthcare: NHS Continuing Healthcare is the name given to a package of care that is arranged and funded solely by the NHS for individuals aged 18 and over who are not in hospital but have complex ongoing healthcare needs. It can be provided in any setting, for example in the home or in a residential care home.

Ofsted: Office for Standards in Education, a non-Ministerial government department established under the Education (Schools) Act 1992 to take responsibility for the inspection of all schools in England. Her Majesty's Inspectors (HMI) form its professional arm.

Parent Carer Forum: A Parent Carer Forum (Lincolnshire Parent Carer Forum, (LPCF)) is a group of parents and carers of disabled children who work with local authorities, education, health and other

providers to make sure the services they plan and deliver meet the needs of disabled children and families.

Personal Budget: A Personal Budget is an amount of money identified by the local authority to deliver provision set out in an EHC plan where the parent or young person is involved in securing that provision. The funds can be held directly by the parent or young person, or may be held and managed on their behalf by the local authority, school, college or other organisation or individual and used to commission the support specified in the EHC plan.

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Special Educational Needs (SEN): A child or young person has SEN if they have a learning difficulty or disability which calls for special educational provision to be made for him or her. A child of compulsory school age or a young person has a learning difficulty or disability if he or she has a significantly greater difficulty in learning than the majority of others of the same age, or has a disability which prevents or hinders him or her from making use of educational facilities of a kind generally provided for others of the same age in mainstream schools or mainstream post-16 institutions.

Special Educational Needs Co-ordinator (SENCO): A qualified teacher in a school or maintained nursery school who has responsibility for co-ordinating SEN provision. In a small school, the head teacher or deputy may take on this role. In larger schools there may be a team of SENCOs. Other early years settings in group provision arrangements are expected to identify an individual to perform the role of SENCO and childminders are encouraged to do so, possibly sharing the role between them where they are registered with an agency.

Special educational provision: Special educational provision is provision that is different from or additional to that normally available to pupils or students of the same age, which is designed to help children and young people with SEN or disabilities to access the National Curriculum at school or to study at college.

Special school: A school which is specifically organised to make special educational provision for pupils with SEN. Special schools maintained by the local authority comprise community special schools and foundation special schools, and non-maintained (independent) special schools that are approved by the Secretary of State under Section 342 of the Education Act 1996.

Speech and language therapy: Speech and language therapy is a health care profession, the role and aim of which is to enable children, young people and adults with speech, language and communication difficulties (and associated difficulties with eating and swallowing) to reach their maximum communication potential and achieve independence in all aspects of life.