

## Committee: OVERVIEW AND SCRUTINY PANEL

**Date: 24 July 2017**

Wards: All

**Subject: Education Health and Care Plan Performance Update**

Lead officer: Yvette Stanley, Director of Children, Schools and Families Department

Lead members: Cllr Katy Neep, Cabinet Member for Children Services

Contact officer: Jane McSherry, Assistant Director for Education

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### Recommendations:

A Members of the Panel to discuss and comment on the contents of the report.

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## 1. PURPOSE OF REPORT AND EXECUTIVE SUMMARY

1.1. The report provides members of the Panel with information on Education Health and Care Planning processes and performance. It also provides the Panel with background information around the resident population and increase in demand for statutory assessments.

## 2. DETAILS

### RESIDENT POPULATION WITH A STATUTORY ASSESSMENT FOR SPECIAL EDUCATIONAL NEEDS

- 2.1 The resident population with a statutory assessment for special educational needs (a Statement of SEN or Education Health and Care Plan (EHCP)) has increased by 16% between 2012 and 2016 (1078 children and young people in 2016). Over the same 5 year period, the Merton resident population (0-18) has grown by 2%, whilst the Merton resident population (0-25) has decreased by 2%. Over the last 5 years, the increased number of the resident population with a statutory assessment for special educational needs can be attributed to a higher volume of cases at primary and post-16 phases, whilst the secondary population has remained the same. The number of post-16 cases has nearly doubled since 2012. This could be linked to the changes implemented following the Children and Families Act 2014 in which the Statement of SEN for 0 -18 year olds was replaced with Education Health and Care Plans for 0 – 25 year olds.
- 2.2 The majority of Merton resident children and young people with a statutory assessment for special educational needs start their Statement of SEN or EHCP between the ages of 3 and 6 (56% of cohort; 601 children as at January 2016).
- 2.3 Three-quarters of Merton resident children and young people with a statutory assessment for special educational needs are male (74% of cohort as at January 2016). Over the last five years, the number of males with a Statement of SEN or EHCP has grown at a faster rate than their female equivalent. Although the number of White British children and young people within the SEND population has increased slightly over the last five years, a greater number of children and young people from Black and Minority Ethnic backgrounds have a SEN Statement or EHCP.

- 2.4 ASD (Autistic Spectrum Disorder), SLCN (Speech, Language and Communication Needs (SLCN) and Moderate Learning Difficulties (MLD) are the most prevalent primary needs amongst Merton resident children and young people with a statutory assessment for special educational needs. Growth has been most pronounced for ASD (52 percentage point increase over the last 5 years).
- 2.5 The majority of Merton resident children and young people with a statutory assessment for special educational needs attend mainstream schools or state funded special schools. However over the last five years there has been an increase in the use of independent provision. Over the last five years, the proportion of Merton resident children and young people with a statutory assessment for special educational needs attending provision within Merton Borough boundaries has remained stable (74-76% of cohort attending Merton provisions). Whilst most mainstream school, Special School and ARP provision for resident children and young people with a statutory assessment for special educational needs is located in Merton, the majority of independent/non-maintained provision is situated out of borough. There has been a 9% proportional increase in the number of Merton resident children and young people with a statutory assessment for special educational needs travelling 2.5 miles or further for a day use school placement over the last five years.
- 2.6 The number of residential placements used for Merton resident children and young people with a statutory assessment for special educational needs has nearly halved over the last five years. The vast majority of placements are for day usage only.

## **EDUCATION, HEALTH & CARE (EHC) ASSESSMENT & PLANNING**

- 2.7 From September 2014 Merton has implemented the new statutory 20 week pathway for Education Health and Care (EHC) assessments and plans as stipulated in the Children & Families Act 2014. Multiple partner agencies contributed towards the development of the pathway and the current EHC plan. In addition to the local authority staff engaged in EHC planning, commissioners agreed that co-located health staff would join the EHC planning team in the Special Educational Needs and Disabilities Integrated Service (SENDIS) and the team is now fully recruited and embedded.

## **EHCP PROCESS FOR NEW REFERRALS**

- 2.8 When a referral is received into the service the 20 week statutory process immediately starts. The referral is processed in line with the SEN Code of Practice. Statutory professionals are advised of the referral and depending on the referrer either the school or the parent/carer is written to, to give them an opportunity to provide any further evidence before it goes to the first Assessment Panel. All referrals will go to Assessment Panel within six weeks of the referral being received. The Assessment Panel will either agree a yes or no to assess. A "yes to assess" will pass to the allocated Senior Case Officer to process. A "No to Assess" will pass to the Early Intervention Team who will make contact with the parent/carer to explain the decision and possible signposting/options. This is followed up by written confirmation. Information about reasons for 'no to assess' are also discussed through the SENCo Forum and used as a training tool. Work is on-going to support schools and families making a referral for an assessment for an EHCP to include relevant information of the appropriate quality. This will reduce the need for re-referrals.
- 2.9 SENDIS processes and procedures are currently being streamlined and new paperwork/referral packs are being developed to assist with meeting the increasing demands on the team. The administrator in the health team is responsible for checking

Health databases to establish if the child/new referral is known to NHS health services and if known which professionals are involved so that they can be targeted with the requests to provide reports. This is helping to speed up the process which is currently, in many cases, being delayed and contributing to assessments taking in excess of 20 weeks.

- 2.10 All pupils now have electronic files which can be accessed by all members of the team. This system is being added to gradually as paper files are scanned and added to the system, but all electronic documents now received into the department are automatically added to the online files. This has enabled a more flexible working pattern and allowed people to complete work in a variety of locations.
- 2.11 Merton is committed to working within a person centered framework and the co-producing EHCPs with parents to produce robust, holistic assessments. This process can be time consuming but the positive aspect of this decision is apparent through the reputation the team is building for itself in the wider community and through very low incidents of cases going to tribunal.

TRIBUNAL YEAR	TOTAL NUMBER OF APPEALS	TOTAL NUMBER OF APPEALS YET TO BE HEARD
2012/2013	29	
2013/2014	25	
2014/2015	17	
2015/2016	14	
2016/2017	10	5

**Breakdown of New Referrals for an Assessment for an Education, Health and Care Plan by Academic Year**

Academic Year	No. of Referrals Received	+/- on Previous Year
2014/2015	169	
2015/2016	220	+51
2016/ June 2017	249	+29 (YTD)

- 2.12 New referrals are continuing to increase and there has been a significant increase since February 2017. There are currently new 160 cases within the system including those from referrals to finalisation of a Plan. The table below shows the volume of referrals by month for this academic year and the percentage of referrals which go onto a full assessment process.

**Number of referrals for an assessment for an Education, Health and Care Plan received September 2016 – June 2017**

	<b>No. of Referrals</b>	<b>No. of Referrals where decision was "No to Assess for ECHP"</b>	<b>No. of Referrals where decision was "Agreed to Assess for an EHCP"</b>	<b>Percentage of Referrals where decision was No to Assess</b>
<b>Sep-16</b>	6	2	4	33%
<b>Oct-16</b>	18	1	17	6%
<b>Nov-16</b>	17	1	16	6%
<b>Dec-16</b>	26	5	21	19%
<b>Jan-17</b>	18	8	10	44%
<b>Feb-17</b>	25	6	19	24%
<b>Mar-17</b>	39	9	30	23%
<b>Apr-17</b>	25	3	22	12%
<b>May-17</b>	46	3	43	7%
<b>Jun-17</b>	29	2	27	7%
<b>TOTAL</b>	<b>249</b>	<b>40</b>	<b>209</b>	<b>16%</b>

**Timescales of EHCP Plans from referral to finalisation September 2016 - June 2017**

	<b>No. of Plans Finalised within 20 weeks</b>	<b>No. of Plans Finalised 21-26 weeks</b>	<b>No. of Plans Finalised over 26 weeks</b>	<b>Total No. of Plans</b>	<b>% of Plans Finalised within 20 weeks</b>	<b>% of Plans Finalised 21-26 weeks</b>	<b>% of Plans Finalised over 26 weeks</b>
<b>Sep-16</b>	4	11	12	27	15%	41%	44%
<b>Oct-16</b>	1	9	7	17	6%	53%	41%
<b>Nov-16</b>	1	6	5	12	8%	50%	42%
<b>Dec-16</b>	2	9	8	19	10%	47%	44%
<b>Jan-17</b>	1	4	11	16	6%	25%	69%
<b>Feb-17</b>	3	3	9	15	20%	20%	60%
<b>Mar-17</b>	2	2	9	13	15%	15%	69%
<b>Apr-17</b>	6	7	2	15	40%	47%	13%
<b>May-17</b>	10	1	5	16	63%	6%	31%
<b>Jun-17</b>	7	3	8	18	39%	17%	44%
<b>TOTAL</b>	<b>37</b>	<b>55</b>	<b>76</b>	<b>168</b>	<b>22%</b>	<b>33%</b>	<b>45%</b>

2.13 During the financial year 2016/17 19% of new requests for EHC plans were completed within 20 weeks, this is below the national benchmark. 50% of plans, however, were completed within 21-26 weeks. Since April 2017 to the end of June 2017 our year to date completion rate within 20 weeks has increased significantly to 47%, 20% higher than the same time last year. We have seen a significant increase in new requests for EHCPs, alongside an ongoing challenging agenda, set by central government, to transfer all existing Statements of Special Educational Needs to Education Health and Care Plans (EHCPs) by March 2018. In response to the demand issues we are using

SEN Implementation Grant to increase the capacity within the SEND team, reconfiguring roles and streamlining business processes to enable improved performance and recruiting additional staff.

- 2.14 The above table breaks down the timescales for the completion of EHCPs by the number of weeks. During this academic year 55% of all EHCPs have been completed within 26 weeks.

#### TRANSFERS FROM STATEMENTS TO EHCPs 2014 – June 2017

- 2.15 The breakdown of timeframes in transferring Statements to EHCPs is set out below:

	No. of Plans Finalised within 20 weeks	No. of Plans Finalised 21-26 weeks	No. of Plans Finalised over 26 weeks	Total No. of Plans	% of Plans Finalised within 20 weeks	% of Plans Finalised 21-26 weeks	% of Plans Finalised over 26 weeks
Sept 2014 – August 2016	118	27	23	168	70%	16%	14%
Sept 2015 – August 2016	135	45	25	205	66%	22%	12%
September 2016 – June 2017	170	62	44	276	62%	22%	16%

- 2.16 The above table highlights that during the period 2014 – June 2017 there has been a significant focus on transferring Statements to an EHCP. There are currently 347 Statements left that are currently in the process of a transfer to an EHCP and these must be completed 31<sup>st</sup> March 2018. The DfE have stated that there will not be an extension given to any Local Authority beyond this timeframe to transfer Statements. We are on target to meet this timeframe and Merton is currently performing well, ranked 8th in London. The DfE have expressed a positive interest in Merton's performance in delivering to the statutory transfer timeframe against a context of other local authorities across the country reporting that they will not meet the deadline.
- 2.17 649 Statements have been transferred since 2014.
- 2.18 We have recently agreed with schools that we will only attend Year 5 and Year 11 reviews to start the transfer process to try and reduce the pressure on the system. The paperwork and reports will then be returned to the Local Authority who will draft the draft transfer plan and consult with parents as outlined in the SEN Code of Practice.
- 3. APPENDICES – THE FOLLOWING DOCUMENTS ARE TO BE PUBLISHED WITH THIS REPORT AND FORM PART OF THE REPORT – NONE**
- 4. BACKGROUND PAPERS - NONE**

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