

Surrey Local Area
Written Statement of Action following SEND inspection
10 March 2017

As local leaders we are committed to pursuing improvements for children and families in order to ensure children are living, learning and growing up well in Surrey. Our driving ambition is to provide support to children and families earlier to ensure better outcomes for them, and to prevent escalation of their needs where possible. To achieve this, we need to agree collectively what is holding back progress on these outcomes, what good looks like and respond swiftly to lift the quality of our practice consistently across the county. The Surrey SEND Written Statement of Action sets out how we are doing this.

The local area of Surrey was inspected by OFSTED and CQC from 17 – 21 October 2016 to judge the effectiveness of the area in implementing the disability and special educational needs (SEND) reforms as set out in the Children and Families Act 2014. The Chief Inspector determined that the local authority and the area’s clinical commissioning groups were required to submit a Written Statement of Action because of significant areas of weakness in the local area’s practice.

This Statement sets out a clear vision for how the local area will address the five key weaknesses raised in the inspection and sustain improvement for children and families at scale and pace. It explicitly defines all roles and responsibilities and shows clear lines of accountability.

This Statement was developed with the contribution of partners in schools and family representatives as members of the SEND Partnership Board. It has been endorsed by the Children’s Services Improvement Board. It was also subject to the scrutiny of the Council’s SEND Scrutiny Task Group. It will inform the refresh of the Surrey SEND Development Plan to ensure the actions and changes delivered are sustained through the Partnership’s longer term improvement plan.

A background document has been produced that confirms our learning from the inspection and the commitment of the local area leaders to pursue improvements for children and families in order to ensure children are living, learning and growing up well in Surrey. Some key actions taken since the inspection have already achieved some tangible improved outcomes for families and children. The document provides a summary of leaders’

self-evaluation of the root-causes of the weaknesses identified in the inspection, the rationale for the actions underway and what leaders expect to be different as a result.

The local area has been driven by the vision for children and young people set out in the SEND Code of Practice and has used this to guide the development of the Written Statement of Action. Partners have made five key commitments in order to drive improvement. At the heart of this plan is a dedication to changing culture and practice, listening to families, children and young people and ensuring that they are able to participate as fully as possible. Local leaders understand the urgent need to make a difference to families, children and young people. We recognise that developing, equipping and empowering staff is key to improvement.

Our vision “Supporting children and young people to achieve well and lead happy and fulfilled lives” (SEND Code of Practice, January 2015)		
Our Key Priorities	Priority 1: The timeliness, suitability and quality of statutory assessments and plans, including when statements are transferred to education, health and care plans.	Our key commitments <ul style="list-style-type: none"> • Embedding a consistent process, person-centred approach across the assessment and planning for and with children and families • Creating and maintaining a strong performance culture where information drives planning and improvements in services and practices • Collaborating and engaging a wide group including families, children and young people in the planning and evaluation of our services • Working in partnership to integrate services to meet the needs of children and families closer to home and within their local communities • Integrating services to provide a welcoming front door and better support early identification and support for children with SEND
	Priority 2: The under-developed and often limited involvement of parents and carers, and the narrow range of those included, in planning, monitoring and evaluating services. The ineffective promotion of the local offer, and the incomplete statutory transition plan.	
	Priority 3: The inefficient management and coordination of area information, in administrative processes, to inform evaluation of services and outcomes, and to hold leaders and staff at all levels to account for rapid improvement.	
	Priority 4: The relatively low identification of need at school support level, indicating inefficiencies in the early identification of special educational needs and/or disabilities.	
	Priority 5: The increasing rates of absence and exclusion experienced by children and young people who have special educational needs and/or disabilities in mainstream schools.	

Monitoring and Evaluation

The **Children’s Services Improvement Board** - chaired by the Deputy Leader of the Council and composed of the Lead Member for Children and Families Wellbeing, the Director of Children’s Services, the Surrey CCG Collaborative Directors of Safeguarding and Commissioning for Children, School Leaders, the DfE improvement adviser and other statutory partners - will provide formal oversight of delivery of the actions in this Statement. It will review progress quarterly.

Progress will be monitored monthly by both the **SCC and CCG Leadership Teams**, and the lead officers will report progress every two months to the **SEND Partnership Board** for review. Lead SCC officers will be held accountable for progress through monthly meetings with **the Lead CSF Cabinet Members**, and the **SEND Scrutiny Task Group** will provide scrutiny of both the Council’s and CCG’s performance on a quarterly basis.

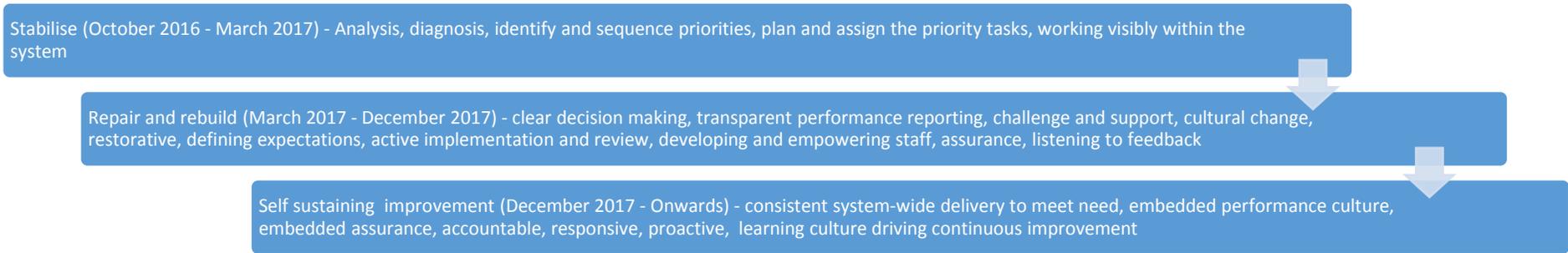
Quarterly meetings with the Regional Schools Commissioner will provide a basis to consider place planning, absence, exclusions, inclusion, achievement of outcomes, and early identification of need. It will also provide a forum for challenge and support the implementation of the wider plan.

In September, the local area will take stock of improvements to date, their pace, scale and impact. Emerging themes and learning will be identified and the plans reviewed in order to ensure they are fully effective.

See Annex A for a key to the leads from the Council, CCG and statutory partners.

Phases of improvement

Our work has been structured into three key phases to ensure that we embed a self-sustaining improving system.



Actions to be taken to address the key improvement points from the inspection:

The following section sets out the planned detailed actions in order to address the five key weaknesses. Annex B contains draft performance measures which will be agreed by the SEND Partnership Board in March alongside targets. These will form the basis for monitoring reports.

Priority 1: The timeliness, suitability and quality of statutory assessments and plans, including when statements are transferred to education, health and care plans.				
Actions to be taken	Lead	Resources	Timescale	Success Criteria/Measures
Increase capacity and efficiency to improve timeliness				
<p>1.1 Extend contracts for SEND caseworkers and recruit additional staff to increase capacity in EHCP assessment and transfer processes and improve staff retention.</p> <p>Complete a capacity review for 2017-19, plan for recruiting additionally identified staff utilising the SEND Reform Grant.</p>	AD		<p>April 2017 – completed</p> <p>June 2017</p>	<p>Detailed performance measures and targets will be agreed by the Surrey SEND Partnership Board in March. These will cover the timeliness, suitability and quality of</p> <ul style="list-style-type: none"> • statutory assessments and plans • statutory transfers
<p>1.2 Routinely agree education placement settings as part of the EHCP process - including annual reviews - through discussion facilitated by the caseworker with the SCC school placement team, school and parents/carers.</p> <p>Ensure SCC school placement teams provide on-going support for placement of children with EHCPs and monitor delivery and impact of provision.</p> <p>Remove Secondary and Primary Placement Panels from the Decision Making Framework as no longer required.</p>	HSO / HSCA		May 2017	<p>Performance will be monitored using both quantitative and qualitative data.</p>
<p>1.3 Ensure continuous improvement of the efficiency, consistency and quality of SEND processes by:</p> <ul style="list-style-type: none"> • Establishing a multi-agency practice group chaired by HSO to oversee process improvements. • Reviewing processes to ensure all relevant health agencies are contacted to provide 	HSO/ HCS	Representatives from SCC, Schools, Health and Family Voice Surrey	March – July 2017	

<p>advice/assessment so that they can respond within 6 weeks and see consistency of quality in statements and interventions.</p> <ul style="list-style-type: none"> • Putting in place standardised templates for providing advice/ assessment including clear timescales and outcome focus. • Putting in place a consistent approach for regular communication with families throughout the process so that families are aware of progress. • Involving families early in outcomes focused planning. • Improving the timeliness of the decision making process through analysis of causes of delay and develop a plan to remove barriers to effective decision making. • Designing and rolling out new guidance and training materials for SEND staff. 				
<p>1.4 Capture families' experience of the EHCP process.</p> <p>Review tribunal data regularly to identify trends and themes for improvement.</p>	<p>HSO</p>		<p>Roll out from June 2017</p> <p>Quarterly</p>	
<p>Systems changes to reduce delays and backlog</p>				
<p>1.5 Implement a new county-wide contract for Children's Community Health Services.</p> <p>Key performance targets are embedded to enable us to continue to build in the progress to reduce waiting times to access therapy services and improve timely completion of medical advice for SEND.</p> <p>Identify and resolve health causes of delay to the EHCP process.</p>	<p>DoC (CCG)</p> <p>DMO/ DCO</p>		<p>April 2017</p>	<p>As above</p>

Ensure suitable QA systems are in place to moderate health assessments to ensure good quality outcomes.			June 2017	
1.6 Ensure all outstanding cases seeking a school placement in transition years are identified and concluded.	HSCA		May 2017	
1.7 Establish monthly System Leader Case Panels with senior Leaders from the CCGs and County Council chaired AD. Bring complex cases monthly to the Panel for resolution. This will be an opportunity for leaders to work with caseworkers to identify and resolve system issues that are causing delay and establish a mechanism for case reviews.	AD/ DoC (CCG)		First panel – March 2017, then monthly	As above
Use information and insight to drive quality				
1.8 Roll out new performance management tools to all frontline staff and managers (Tableau) to help improve performance management. Specifically to include performance on new EHCP requests and transfers. [See Priority 3 for roll out timetable for full performance data]	HII		April - May 2017	As above
1.9 Implement a consistent quality assurance approach across SEND Hold Quality Standards workshops drawing on expertise from Children's Services to agree the approach. Workshops to involve parents' representatives and health and care colleagues. Building on the workshops, put in place robust QA systems for all SEND processes including: <ul style="list-style-type: none"> Auditing cases monthly Identifying themes for improvement. 	HSO DMO/ DCO	Identify lead to scope and complete QA framework (informed by best practice in other areas) Time and people	May 2017 QA systems plan complete June 2017	As above

<ul style="list-style-type: none"> Strengthening supervision of casework and management oversight. Using customer feedback data and correspondence to identify specific reviews/deep dives. Commissioning SCC Internal Audit resource to target specific reviews. Identifying 'named owners' for timed follow up action. 		identified to implement QA	Implementation from June 2017	
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Priority 2: The under-developed and often limited involvement of parents and carers, and the narrow range of those included, in planning, monitoring and evaluating services. The ineffective promotion of the local offer, and the incomplete statutory transition plan.

Actions to be taken	Lead	Resources	Timescale	Success Criteria/Measures
Embed a person-centred approach within SEND (as defined by the principles in the SEND Code of Practice, page 19)				
<p>2.1 Promote a person-centred approach across everything we do, building on examples of good practice.</p> <p>Develop a new practice model for SEND drawing on and consistent with person-centred practice:</p> <p>Ensure all teams discuss and agree how they will embed the person-centred approach into their practice (e.g., engagement with families, assessment, monitoring, supervision and appraisal) and identify barriers and support required.</p>	AEO		<p>May 2017 – person-centred approach video viewed and discussed by all area and specialist teams</p> <p>June 2017 - team plans developed and moderated by Operation Lead</p>	<p>Detailed performance measures and targets will be agreed by the Surrey SEND Partnership Board in March. These will cover</p> <ul style="list-style-type: none"> the participation of parents, carers and children in planning and decision-making timely access to therapies <p>Performance will be monitored using both quantitative and qualitative data.</p>
<p>2.2 Build capacity for change through four SEND Practice Champions:</p> <p>Identify and train 4 Practice Champions within the SEND Service to deliver ongoing training and support to staff with a key role in SEND, including potentially partners in Schools and Health.</p>	AEO	Training the trainers course places	May 2017 – 4 SEND Practice Champions complete training the trainers course	

<p>2.3 Ensure key service leads at managerial and supervisor level from across the SCC Schools and Learning Service to attend the 2 day awareness course followed by 5 day Practice Leads course.</p> <p>Explore with schools and health providers the opportunity for integrating into the training on the person-centred model.</p>	AEO	Staff will need to be released to attend 5 day course.	December 2017 September 2017	
<p>2.4 Ensure Practice Leads provide training and support on key developmental needs of teams to embed person-centred practice.</p> <p>Develop and ensure induction materials for all new SEND staff include person-centred practice.</p> <p>Develop a CPD Programme for SEND staff, including potentially all professionals with a role in SEND across Surrey.</p>	AEO HSO HSO		From September 2017	
<p>2.5 Develop performance measures that reflect the improved outcomes for children and families.</p> <p>Using learning from Children's Services improvement to identify and monitor performance measures which will reflect culture change within SEND and outcomes for children</p>	HII		From April 2017	
<p>2.6 Put the voice of the child at the centre of our practice through:</p> <p>Developing SEND Voices (our children and youth participation scheme) to hear from a broader range of children and young people about their needs and experience.</p> <p>Ensuring discussion at every supervision session provides a focus on the views, wishes and feeling of the</p>	AEO		From April 2017	

child and young person, what children are saying is important to them and how well their needs are being met.				
Collaborate with families and engage a wider group of families in the planning and evaluation of our services				
<p>2.7 Support Family Voice Surrey in its role as the representative voice for all families with children with SEND in Surrey –</p> <ul style="list-style-type: none"> widening participation and representation in terms of geography, age and needs Routinely seeking out parents' views (via surveys, case studies, engagement events) to provide an evidence base Agreeing a memorandum of understanding which underpins the implementation of the co-production policy jointly agreed. 	AD DoC (CCG)	FVS FVS SEND Collaborative partners	FVS SEND Collaborative –; quarterly meetings Quarterly monitoring meetings	Achievement of Performance targets set out in the Memorandum of Understanding
<p>2.8 Develop a strategy to ensure parent and carers, and their representatives, effectively participate in strategic reviews and the evaluation of services and co-produce services with commissioners.</p>	AD DoC (CCG)	FVS	June 2017	<p>FVS participating in SEND Commissioning Plan workstreams</p> <p>FVS continue to participate in SEND, Health, Care service oversight and improvement bodies</p> <p>FVS embedded in District/ Borough Family Hubs</p>
<p>2.9 Co-design with Family Voice Surrey and implement the Family Communication and Engagement Strategy to hear the experiences of families and continue to learn from them, at both individual and strategic level, including through a range of different channels such as:</p> <ul style="list-style-type: none"> Webinars Customer satisfaction surveys Outreach to family groups Developing and promoting the local offer 	HCS / HMS	FVS	July 2017	As above for 2.1 -2.6

2.10 Develop with partners and family representatives, children and young people and launch the SEND Commissioning Plan 2017-22	HMS/ DoC (CCG)/ FVS		July 2017	Jointly owned Commissioning Plan. Plan sets improved outcomes. Plan sets approach to agreed savings.
Improve timeliness, accessibility and equitability of local provision				
2.11 Bring speech and language therapy for education and learning within the local authority, re-shaped and aligned to areas of priority needs.	AD/HA SEN		April 2017	Establish baselines for performance reporting from April 2017. As above 2.1 - 2.6
2.12 Review and relaunch the County Autism pathway, including services for 19-25 year olds with all stakeholders.	AD/HS O/DD- ASC		Implement new pathway – May 2017	
2.13 Review and consideration of investment in the BEN pathway (Behaviour Pathway for children with Neurodevelopmental Disorders) to address the gap in provision within Surrey Downs CCG area.	DoC (CCG)		Review – April 2017 CCG to consider investment in new pathway – May/June 2017	
2.14 Implement a new county-wide contract for Children’s Community Health Services. Key performance targets are embedded to enable us to continue to build in the progress to reduce waiting times to access therapy services and improve timely completion of medical advice for SEND. Health causes of delay to EHCP process identified and resolved if necessary. Ensure suitable QA systems in place to moderate health assessments to ensure good quality outcomes can be framed.	DoC (CCG) DMO/D CO		New contracts implemented April 2017 June 2017	

2.15 Work with schools to use KS1 results and other progress indicators to inform school improvement systems design. (This will also inform the SEND Commissioning Plan.)	Schools lead / AD CYPP		Ongoing	
Promote the local offer				
2.16 Implement the refreshed Local Offer Communications Plan, with targeted, multi-channel campaigns	HCS		June 2017	Local Offer traffic and user satisfaction increases
2.17 Ensure continuous improvement of the online Local Offer by: <ul style="list-style-type: none"> Conduct a usability study on the SEND Local Offer website and implement improvements. Enhance EHCP guidance on the Local Offer website. Publish examples and case studies to assist parents / practitioners to understand the process. 	HCS HSO HSO	Web and Digital Team	June 2017 July 2017 July 2017	Detailed performance measures and targets will be agreed by the Surrey SEND Partnership Board in March. These will cover <ul style="list-style-type: none"> the participation of parents, carers and children in planning and decision-making the provision of timely and relevant information and support Performance will be monitored using both quantitative and qualitative data.
Update the Statutory Transition Plan				
2.18 Update the Statutory Transition Plan following consultation with parents and carers, to include a review of 2015/16 performance and reference to statutory guidance, in line with the statutory Code of Practice.	HSO		August 2017	Clear process and accountability is in place for updating the transition plan going forward to the statutory timescales. The plan clearly sets out actions and milestones to meet statutory requirements for transition to Education, Health and Care Plans.

Priority 3: The inefficient management and coordination of area information, in administrative processes, to inform evaluation of services and outcomes, and to hold leaders and staff at all levels to account for rapid improvement.				
Actions to be taken	Lead	Resources	Timescale	Success Criteria/Measures
3.1 Drive a strong performance culture across SEND service through visible leadership.	AD		March 2017	Establishment of a strong performance culture and decision-making focussed on outcomes for children and families. Features of the new system will be:
3.2 Establish a new Information Management Programme Board chaired by the Assistant Director for Strategy and Performance across the CSF Directorate to oversee performance of outcomes for children and families.	HII	Existing CSF Resources Support from AD Strategy and Performance	Programme Board established January 2017 Agree reporting processes and products for regular production by May 2017.	Performance information is available to frontline staff, managers and systems leaders and used to inform decision making. Caseworkers have the necessary information to manage their caseloads and use this to support their supervisions and appraisal.
3.3 Ensure timely and comprehensive access to SEND data in EMS One including assessment casework, transfers and absence and exclusion through the establishment of a set of scheduled data extracts.	HII		Assessments - Completed by February 2017 Transfers – Completed by March 2017 Absences & exclusions – completed by April 2017	Planned monitoring and evaluation activities relating to the local area's improvement priorities are implemented efficiently and the impact on outcomes is evaluated effectively leading to sustained improvement. The local area identifies what is working well and what makes a difference to the outcomes for children.
3.4 Articulate expectations of the roles and responsibilities of SEND team leaders and caseworkers in inputting and use of data, supported by training.	HII		April 2017	Quarterly monitoring of actions and the evaluation of outcomes leads to ongoing revision and refinement of the SEND development plan.
3.5 Improve the quality of SEND data through a cleansing of the last three years' worth of data with regular maintenance and spot checks to ensure data quality.	HII		Completed March 2017 Ongoing data quality reporting from May 2017	

<p>3.6 Introduce near live (overnight refresh) interactive dashboards for performance information accessible to all SEND team leaders and caseworkers on</p> <ul style="list-style-type: none"> • EHCP transfers • EHCP timescales <p>Introduce interactive dashboards based on termly Census data for SEND exclusion and absence</p>	HII		April – May 2017	<p>Senior leaders ensure accountability for progress and improved outcomes.</p> <p>Senior leaders discuss and agree the main features that emerge from quarterly monitoring and evaluation activities and share outcomes and actions with all stakeholders.</p>
<p>3.7 Introduce near live (overnight refresh) interactive dashboards for performance information accessible to all SEND team leaders and caseworkers on</p> <ul style="list-style-type: none"> • mediation, appeals and tribunals • timeliness of professional advice 	HII		Initial dashboards available July 2017 then ongoing refinement	
<p>3.8 Introduce regularly updated dashboards for performance information accessible to all SEND managers, caseworkers and frontline staff on customer satisfaction data.</p>	HII		Completed September 2017 then ongoing refinement	
<p>3.9 Monitor and report monthly on waiting times for education speech and language therapy accessible to all SEND managers, caseworkers and frontline staff.</p>	HII		May 2017 – establish baseline	
<p>3.10 Monitor and report monthly on provider performance data on timeliness of health advice in EHCP process, to be triangulated with performance data collected by SEND caseworkers.</p>	DoC (CCG) / HSO		May 2017 – establish baseline	
<p>3.11 Monitor and report monthly on waiting times for access to Occupational Therapy and Physiotherapy.</p>	DoC (CCG)		May 2017 - establish baseline	

Priority 4: The relatively low identification of need at school support level, indicating inefficiencies in the early identification of special educational needs and/or disabilities.				
Actions to be taken	Lead	Resources	Timescale	Success Criteria/Measures
<p>4.1 Identify the root causes of the relatively low identification of need at school support level and how that manifests in different areas, ages and settings.</p> <p>Include a routine review of transitions throughout the life course of a child to ensure they are managed smoothly and do not create a barrier.</p> <p>Share the findings with Schools to test the hypothesis and identify local solutions.</p>	AD DoC (CCG) School Lead	Research and analysis	<p>Research and analysis – April 2017</p> <p>June 2017 Area-based workshops to share findings – May – June 2017</p>	<p>Detailed performance measures and targets will be agreed by the Surrey SEND Partnership Board in March. These will cover</p> <ul style="list-style-type: none"> • achievement in end of key stage assessments • exclusions and absences • SEND identification and response • timely access to therapies <p>Performance will be monitored using both quantitative and qualitative data.</p>
4.2 Co-design with families, early years providers, schools and health partners' opportunities and pathways to identify and respond more effectively to SEND early on in a child's life.	HCS AD DoC (CCG) School Lead	Families Schools Health providers	July 2017	
4.3 Work with the London Leadership Strategy to implement the tools developed for schools to provide peer to peer support for SEN support following identification of local need.	AD School Lead	Schools	July 2017	
4.4 Develop a graduated response to early identification of need and intervention, removing any identified barriers.	AD School Lead	Schools	July 2017	

<p>4.5 Build capacity and good practice within settings to identify SEN early and provide appropriate support, including for behavioural issues leading to absence or exclusion, by appointing an experienced SENCO or School leader, seconded to the County Council and jointly funded with the CCG, to work with settings.</p>	<p>AD DoC (CCG) School Lead</p>	<p>Schools</p>	<p>Secondment agreed – March 2017</p>	
<p>4.6 Strengthen the SENCO network through a programme of school activity to develop and better use the skills of SENCOs.</p>	<p>AD DoC (CCG) School Lead</p>	<p>Schools</p>	<p>Programme of School activity developed - April 2017 Programme implemented - from May 2017</p>	
<p>4.7 Ensure SEND pathways and support are built into Surrey's Early Help offer.</p> <p>Ensure Early Help acts as an effective front door to early support and identifier of SEND</p> <ul style="list-style-type: none"> • Enhancing language and communication outcomes in early years settings • Enhancing the role of health visitors in identifying early support needs of children • Signposting families to Family Information Service, Family Hubs and Self Help • Blending SEND services that are best delivered locally within the Early Help Hubs, developing wrap around support for families, CYP and Schools • Establishing a link Early Help Family Support worker for Special Schools and a link for all other schools through the Early Help Hubs. 	<p>AD / DoC (CCG) / HEH</p>		<p>From December 2017</p>	
<p>4.8 Agree with the Children and Young Peoples Partnership an approach to early identification and support.</p>	<p>AD</p>		<p>September 2017</p>	

4.9 Ensure SEND is a standing item at the Transforming Care Programme Board and Learning Disability Partnership Board by senior health and social care leaders and that the outcomes of those discussions inform the SEND Partnership Board and local SEND leaders' planning.	DoC (CCG) DD - ASC		SEND Partnership Board – March 2017	
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Priority 5: The increasing rates of absence and exclusion experienced by children and young people who have special educational needs and/or disabilities in mainstream schools.

Actions to be taken	Lead	Resources	Timescale	Success Criteria/Measures
5.1 Refresh 2015 guidance to schools on the process and pathway for a child at risk of exclusion who has SEND and ensure the Fair Access Process is working effectively for vulnerable learners with low level SEN.	ALPA / HSCA	Identify a sample of schools to check understanding	April 2017 for issue November 2017 for reporting on impact	Detailed performance measures and targets covering exclusions and absences will be agreed by the Surrey SEND Partnership Board in March.
5.2 Undertake an analysis of the data on exclusions and absences to identify the key hotspots for targeted interventions.	AEO / HII	Identification and agreement of targeted schools Action plans with schools agreed Plans reviewed	Jan / Feb 17 March 2017 Summer term 2017 Nov 2017	

<p>5.3 Review the policy and redesign the pathway and referral processes for schools for children with anxiety by embedding the changes in the new delivery model for the medical access to education service that was implemented in January 2017.</p> <p>Refresh guidance to schools for managing attendance for this cohort of children and a training offer designed for SENCOs through the SENCO networks.</p>	AEO / DD - LD	<p>A2E service leads Area leads, EWS (Education Welfare Service) CAMHS leads CCG leads</p> <p>Half day workshop 2 days Educational Psychologists (EPs) and Area Leads EWS and CAMHS</p> <p>Attendance at SENCO networks in Summer term</p>	<p>April 2017 – June 2017</p> <p>June 2017</p>	
<p>5.4 Review processes for placements where exclusion has happened at alternative provision for children with social, emotional and mental health (SEMH) needs.</p> <p>Establish agreed protocols and quality assurance with the alternative providers.</p> <p>Jointly fund and appoint the secondment of an experienced SENCO, Special School leader or Alternative Provision leader to maximise alternative provision and support for behavioural issues leading to absence or exclusion.</p>	<p>HSO</p> <p>AD DoC (CCG)</p>	<p>Ongoing work</p> <p>Secondment</p>	Sept 2017	
<p>5.5 Continue to support the ELSA (Emotional Literacy Support Assistant) programme for schools and encourage the establishment of transition groups to increase resilience and reduce anxiety.</p>	ALPA	<p>Training offer</p> <p>Supervision models established</p>	Ongoing	

<p>5.6 Explore the impact of a range of local programmes aimed to address anxiety in children and young people to identify those to roll out more widely, e.g.:</p> <ul style="list-style-type: none"> • Cool Kids programme • Mindfulness 	<p>ALPA</p>	<p>Impact studies completed of current offer</p> <p>Agreed roll out offer publicised</p> <p>Champions model explored re boroughs / school partnerships for supporting children with SEND on SEN support</p>	<p>July 2017</p> <p>April 2018</p>	
<p>5.7 Implement a consistent model of attendance support to NMI and special schools including exploring solutions to collect data on a daily basis, building on good practice in the virtual school.</p>	<p>ALPS</p> <p>HII</p> <p>AEO</p>	<p>Review SLA with NMIS to check fit for purpose and amend where necessary</p>	<p>July 2017</p>	

ANNEX A

Key for Leads from the Council, CCG and Statutory Partners

Council	CCG	Wider Partners
<p>LM: Lead Member for Children and Families Wellbeing DCS: Director of Children’s Services AD: Assistant Director for Schools and Learning HSCA: Head of Schools Commissioning and Admissions HSO: Head of SEND Operations HASEN: Head of Additional and Special Educational Needs AEO – Area Education Officer ALPA: Area Lead for Psychology and Assessment ALSTIPS: Area Lead for Specialist Teachers for Inclusive Practice ALPS: Area Lead for Pupil Support HII: Head of Insight and Innovation HEH: Head of Early Help HMS: Head of Market Strategy HQE: Head of Quality and Experience HCS: Head of Customer Services DD – ASC: Deputy Director for Adult Social Care</p>	<p>DoC (CCG): Director Commissioning: Children, Young People and Maternity Services DMO/DCO: Designated Medical Officer/Designated Clinical Officer HoC: Head of Commissioning DD – LD: Deputy Director, Children and Adults Learning Disabilities</p>	<p>Family Voice Surrey (FVS): Co-Chairs – Andrea Collings and David Izatt</p> <p>Schools: PPCC: Primary Phase Council Chair SPCC: Secondary Phase Council Chair SSPCC: Special School Phase Council Chair</p> <p>Regional Schools Commissioners Office (RSC): Deputy Regional Schools Commissioner</p>

Annex B

Performance Measures – DRAFT Subject to SEND Partnership Board agreement in March 2017

No	Measure
1	Statutory transfers from Statement to EHCP compliant with the Statutory Deadline
2	Number of EHCPs in excess of 5 weeks over 20 week statutory target (unless exceptional circumstances persist and case reported to AD for review).
3	New EHCPs requested are completed on time (% due in month completed within 20 wks)
4	New EHCPs requested are completed on time (% completed within 20 wks in last 12 months)
5	Advice is received on time for new EHCPs: <ol style="list-style-type: none"> 1. Health 2. Care 3. Education
6	Outcomes are SMART within statutory plans.
7	Quality of assessment is improving, evaluated through moderation of assessments: <ol style="list-style-type: none"> 1. Health 2. Social Care 3. Education
8	Parents and carers are participating as fully as possible in decision making, and being provided with information and support.
9	Children and young people are participating in their planning and decision making and we understand their views, wishes, feelings.
10	Health advice is regularly accessed and timely for planning and decision making:
11	Access to therapies and CAMHS is timely
12	Achievement in end of key stage assessments improves for those with a statutory plan

N o	Measure
12 b	Achievement in end of key stage assessments improves for those receiving SEN support
13	Reducing exclusions for those with SEND across Surrey
14	Reducing the percentage of overall absence across Surrey for those in receipt of : <ol style="list-style-type: none"> 1. SEN Support 2. EHCP 3. Anxiety due to Autism
15	Developmental checks during early years increased
16	Higher proportion of pupils with SEND identified earlier in their life course.
17	Evidence of a graduated response

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