Westminster Strategy for Children and Young People with Special Educational Needs and Disabilities aged 0 - 25

2018 - 2021
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Introduction

Westminster City Council and North West London Collaboration of CCGs have high ambitions for all children and young people, including those with special educational needs and disabilities (SEND).

We firmly believe that children and young people, including those with the most complex needs, should have access to good local provision and every opportunity to achieve good outcomes, whether this be education, employment, independent living, participation in their community or being as healthy as possible.

Our ambition is to support all children and young people in their journey to adulthood with underpinning principles of early help, personalisation and inclusion and enabling them to achieve their chosen outcomes.

Our vision

Our vision for children and young people with special educational needs or disabilities (SEND) is that they achieve well in early years, at school and at college, and lead happy and fulfilled lives. This supports the vision of our Health and Wellbeing Board “that all people in Westminster are enabled to be well, stay well and live well, supported by a collaborative and cohesive health and care system.”

For children and young people with SEND this means:

- having the opportunity to attend local good quality education settings with seamless transitions
- having access to short breaks or respite that is fun and helps to develop independence whilst giving parents/carers planned breaks from their caring duties
- having support to develop the skills necessary for independence, in learning, in work and to have high aspirations for their lives
- having access to support to get and keep hold of a job
- being able to choose where to live and support to live as independently as possible
- having relationships and social networks
- having a healthy lifestyle and where required their health needs identified and met
- being safe from hate and mate crime and discrimination
• living in a society where people understand, respect and accommodate differences.

What children, young people and parent/carers have told us

The local Parent/Carer Forum has worked with the council and CCG to develop more parent-friendly approaches to co-production that support the involvement of a broader range of local parents in the work to implement the SEND reforms, develop our Local Offer and make a real difference to family lives.

To this end, in 2017 the Westminster Parent/Carer Forum organised termly thematic focus groups around the age of the child, setting or theme which covered Early Years, Mainstream, Specialist, Post 16, Health, Short Breaks and High Functioning Autism.

Over 80 parent/carers attended the Focus Groups where key professionals discussed with them their experience of local services. A log of all key themes, actions and lead officers was maintained and informed our ‘We Said; We Will’ Action Plan and which captures our progress in improving not only our Local Offer, but the trust that parent/carers have in the Local Authority, the CCG and other key stakeholders.

The key issues as identified in those Focus Groups are summarised below.

Early Years
• Parent/carers would like to see greater transparency around effectiveness of SEND funding in early years settings and across all schools and colleges.
• Parent/carers feel that some early years settings could improve their inclusion practice further and this exacerbates the perception that children may need an Education, Health and Care Plan (EHCP).
• Parent/carers would like someone early in the process to help them navigate the SEND system, providing consistent advice, support and key working.

Mainstream Schools
• Parent/carers would like to have a better understanding of what can be expected of mainstream schools in supporting all children and young people with SEND, what funding they receive and any other additional funds they can access.
• Parents would like more visual representations within School SEN Information Reports of how they support children and young people with SEND, including case studies, available in accessible ways e.g. including easy read formats.
• Parent/carers would like to see more training in some schools as to the needs and behaviours of young people with high functioning autism.
• Parent/carers report that there are some good SENCOs, but given staff turnover, they are also keen to ensure that new SENCOs are supported in their new roles by parents, their schools and the LA.
• The Parent/Carer Forum would like to continue to be involved in delivery of training for school staff in relation to SEND.
EHC Needs Assessment Process
- The Parent/Carer Forum would like continued regular updates from the SEND Service about improvements, key staff changes etc.
- Parent/carers report that they welcome timely communications from EHC Coordinators and building relationships remains important. Parent surgeries have been set up to support communication.

Health and Therapies
- Some parent/carers report that waiting times for some services could be further improved.
- Parents would like to know more about the outcomes of the speech and language therapy (SaLT) transformation work at the Parent/Carer Forum.
- Parent/carers would like to better understand what speech, language and communication support including therapy they can expect from different settings and as their child moves from school to college.
- Parent/carers believe more training is required for health professionals to support or signpost parents following a diagnosis. Parents welcome as much information and support as possible.
- Parent/carers would like increased support from CAMHS and other stakeholders supporting schools with children who are self-harming, depressed or with challenging behaviours.
- Transition pathways between Health Visitors and School Nurses, and children’s and adult services need further strengthening.
- Dental and vision assessments taking place in Special Schools would be welcomed.

Social Care Provision
- Parent/carers would like the strong short breaks offer in north Westminster to be replicated in the south of the borough. Consequently, a new offer is being piloted for families in the south.
- Parent/carers would like Social Workers to have a consistently good understanding of the EHC needs assessment and planning process, the development of shared outcomes and the legal status of an EHC Plan.
- Parents would like short breaks and after school clubs co-ordinated with transport timetables.
- Parent/carers would like more services for children who are high functioning if they don't have a EHCP, a needs assessment or a Care Plan.

Post 16 Settings
- Parent/carers would like greater understanding about how Further Education Colleges can meet the needs of young people with complex needs and associated medical conditions.
- Parent/carers would like to see strengthened post 16 outcomes, building on consistent Year 9 reviews and Preparation for Adulthood.
- The Supported Internship model is a good one and further development would be welcomed.

The Local Offer
- Parents would like everyone to use and understand the Local Offer more,
including children and young people.

**Education, Health and Care Surveys**

We also conducted EHC surveys in the spring 2018 to inform the development of this strategy; one survey for children with SEND and one for their parents/carers. The number of responses was as follows: 23 children and young people and 3 parents/carers. We can see from the responses from the children that they were generally satisfied with the support they were receiving. Whilst they had not previously been aware of the Local Offer website, they found it to be useful and interesting. We know we need to do more targeted work with young people on the ongoing promotion and development of the website.

Here are a few quotes in relation to areas for development from people who responded to the survey:

“Don’t make children too dependent on adults, give them the chance to try new things and protect them in case they get hurt. Be helpful towards them if they have any questions/doubts about anything.”

“I would like to meet up with people like me going through the same things - so we can talk about them.”

“I would like sessions where someone can help me work out how to explain myself better.”

“Please do not judge, and be please polite.”

We would like to thank everyone who took the time to respond to the survey and we plan to conduct annual surveys to ensure we continue to engage with families in as many ways as possible.
The aim of this strategy

The overarching aim of this strategy is to improve the outcomes for children and young people with disabilities and those with special educational needs. By this we mean their ability to:

- achieve the best they can in education;
- get a job (with support as necessary);
- live as independently as possible (with support as necessary); and
- be a healthy, active and visible part of their local community.

Our journey so far

Since 2014 we have been on an improvement journey to implement the reforms as described in the Children and Families Act and the SEND Code of Practice. We have developed our partnership working with parent/carers and other stakeholders to drive improvements across the area. We recognise that we have more to do and are committed to continuing this journey to improve outcomes for children and young people with SEND.

We have in place a rigorous approach to self-evaluation across the local area and we are clear about our progress so far and our next steps.

1) Overall outcomes for pupils on SEN Support and those with EHCPs in Westminster schools are among the highest in the country, as shown in school performance and post 16 data. Every special school and resource base school in the borough is currently rated as good or outstanding by Ofsted. 98% of all state funded schools in the borough are rated either good or outstanding. We want to build on this and improve outcomes for children with SEND even further, recognising that there are still some achievement gaps and that we need to reduce exclusions.

2) We have a good relationship with the Westminster Parent Participation Group (WPPG), the parent/carer forum, which is well established and meets regularly with parents locally in north and south Westminster. Co-production is a priority and new services, including the SEN Service, have been designed jointly with parents and local Head teachers and both were closely involved in the recruitment of staff. All new communication including letters are co-produced with parents. The WPPG has worked closely with Children’s Services on the Perfect Pathways project, developing new provision for 0-5 year olds locally.

3) The borough has recently managed successfully the transition from a tri-borough to a bi-borough Children’s Services Department and many high quality staff have been retained. There is strong Cabinet Member support
for SEND including investment in local specialist and mainstream provision, as part of the Local Offer, thereby reducing reliance year on year on the independent and non-maintained sector. Despite rising demand and increasing complexity of need, Westminster’s High Needs Block remains within budget and there is strong support from Schools Forum in ensuring that SEN provision in mainstream and in specialist provision is appropriately funded.

4) We implemented a new assessment process in 2014 in response to the new legislation and Code of Practice and we set out our plans to complete the transfers from Statements to EHCPs by 31st March 2018. We have had some challenges in relation to timely completion of new assessments for a variety of reasons and in 2017 we undertook a review of our performance and introduced new ways of working. This has resulted in significant improvements in our ability to complete good quality EHCPs within 20 weeks and we completed 99.8% of the transfers by 31st March 2018. The percentage of new EHCPs issued within 20 weeks (excluding exceptions) increased from 7.4% in 2015 to 63% in 2017 and we have set ourselves an ambitious target of 90% by the end of 2018.

5) A small number of parents and families report a lack of confidence in the ability of some mainstream settings to meet their child's needs. This means that EHC needs assessments and Plans can be seen as the only way to get support and this may be one of the reasons why the demand for EHCPs increased in 2016/17. We have previously provided guidance to schools on the 'assess, plan, do, review' cycle but we will revisit this and provide further guidance and will improve access to advice, guidance and outreach support for pupils at SEN Support.

6) We have developed a joint commissioning plan, with clear governance arrangements to deliver a number of work programmes which align with this strategy. In particular, we know we need to strengthen speech, language and communication support in early years settings and schools; develop an integrated occupational therapy service; build on the CAMHS Transformation programme to ensure that the emotional health and wellbeing needs of children with SEND are met; and develop comprehensive support for 0 – 25 in the community.

7) We have reviewed the diagnostic pathways and we jointly recognise the need to improve further the pathways for children with ASD/ADHD, particularly by reducing waiting times and ensuring that support is available via the Local Offer and specialist services. We are committed to co-producing an all age ASD Strategy and this work has started by building on current local best practice, which raises awareness and improves early recognition of autism; ensures relevant professionals are aware of the local
autism pathway and how to access diagnostic services; supports smooth transition to adult services and ensures local data collection and pathway audit. In response to a recent training needs audit, we developed a separate support package for ASD and Girls. The main objective of the initiative is to improve the emotional wellbeing of the girls with ASD by enhancing schools’ knowledge of ASD indicators in girls leading to early intervention and reducing the risk of misdiagnosis and inappropriate treatment/management.

8) We have a good range of specialist educational provision in the borough. Although the number of children and young people with EHCPs attending independent and non-maintained schools is lower than the national and London averages, we believe this can be further improved. We know there are implications for the family lives, friendships and future expectations for children who have to attend school away from home. We are opening a new ASD resource base at All Soul’s C of E Primary School in the summer term 2019.

9) We have a range of local Outreach Services which help to increase and promote inclusion through workforce development and offering specialist advice to staff in mainstream schools. This includes language/communication, autism and sensory support. The Outreach Service is currently under review, with the aim of extending its capacity to work with a broader range of children including those on SEN Support. The Outreach Service also provides advice and support to SENDCOs by:

- running the termly Bi-borough SENDCO Forum (designed to brief SENDCOs, signpost them to relevant support services and keep them informed of the latest developments, research, local initiatives and examples of good practice);
- introducing a termly Westminster SENDCO Network (designed around the SEN Support Toolkit with opportunities to network with other SENDCOs to share and develop good practice).

10) We acknowledge that some early years providers, schools and colleges require specialist input to enable them to successfully include children with a wide range of special needs and our SEN Support Action Plan champions multi-agency workforce development activities. Our aim is to ensure all our educational settings are skilled and confident in their contribution to our Local Offer.

11) We are currently working collaboratively to produce Autism friendly pages on our Local Offer which support young people with autism and their families at every stage of their journey to adulthood. We
recognise that we have rising numbers of people diagnosed with autism in the borough, but some elements of our existing pathways for children and young people with autism and particularly those who are high functioning require further development and co-production.

12) We have reviewed our Short Breaks Statement, which is published on the Local Offer website. We are also working to ensure that our short breaks offer meets the needs of a wide and varied cohort of children and their families and includes a more differentiated approach.

13) Our local colleges have a strong track record of delivery for a diverse range of young people with SEND and more recently Westminster Kingsway has led on further development of their specialist provision for young people with complex needs at the Alexander Centre. City of Westminster College has opened their new Maida Vale site, also supporting some of our most complex young people. Both colleges are offering innovative opportunities to support young people into work, through traineeships, supported internships and apprenticeships. We will utilise this expertise to grow our employment pathways with local employers and internally within both the Council and across the NHS.

14) 9.2% of adults with learning disabilities in receipt of long term services from adult social care are in paid employment in Westminster compared to 6.3% across England. However, we recognise we need to do more and we reviewed the way in which we support young people with SEND and their families in the journey from childhood to adulthood throughout 2016 and 2017 and there is more work to do with young people with SEND to co-produce the Preparing for Adulthood (PfA) section of our Local Offer, making best use of social media. Our PfA workstream, jointly chaired by Adult Social Care, has recently strengthened the local transition protocol and is developing new supported employment pathways for 16-25 year olds.

15) We are developing a new early notification pathway to make sure that children who are identified by health professionals as possibly having special educational needs or a disability are brought to the attention of the local authority and are provided with the appropriate support as early as possible.

16) We are continuing to ensure that professionals' understanding of developing shared outcomes, as championed within the SEND Code of Practice 2015, is embedded and we are developing additional training packages for the wider Education, Health and Care workforce which will champion our SEN Support Toolkit and further refine each stakeholder 'Local Offer'.

17) We commissioned a Joint Strategic Needs Assessment of children and
young people with SEND to inform our ongoing journey. This detailed assessment has informed this strategy and helped identify gaps in the Local Offer, as well as key priorities for action.

Overall, whilst we feel we have made considerable progress since 2014, we are confident that we can do more to improve the outcomes for children and young people with SEND in the borough and this strategy establishes our key priorities going forward.

**The Local Offer**

The Local Offer is the local area’s publication of all the provision, services, pathways which are available across education, health and social care for children with SEND and their families, whether or not they have an EHC Plan. It is a web based tool and should provide clear, comprehensive, accessible and up to date information about the available provision and how to access it.

In Westminster, the Local Offer was redesigned with families in 2016 and it remains subject to ongoing development to ensure it provides good quality information and that the offer itself meets the needs of local families.

The Local Offer can be found here [Westminster City Council](https://www.westminster.gov.uk/services/SEND/local-offer).

Parents and children tell us that we need to do more together to promote and seek feedback on the Local Offer and we will continue to work with parents, using the Local Offer Parent Champion model, to increase usage of the Local Offer and support its further development.
Where we are now

Some Facts and Figures

In 2018, the Greater London Authority estimates our population aged 0 to 25 to be 71,600. Using housing-led projection estimates, this population has been projected to increase by to 72,600 by 2021 (an increase of 1,000), rising to 73,500 by 2025 (an increase of 1,900).

Since 2014, the number of children with Statements / EHC Plans in the Borough has fluctuated but remained at just over 1000. This currently represents around 1.4% of the resident 0-25 population with 1,035 children and young people.

As of January 2018, the 1,035 children and young people with an EHCP or Statement of Special Educational Needs who were the responsibility of Westminster City Council were based at the following settings:

- 620 attended mainstream schools
- Of those, 79 attended resourced provision within mainstream schools
- 270 attended maintained special schools
- 42 attended special free schools or academies
- 52 attended non-maintained or independent special schools
- 27 were in further education or other post 16 settings
- 13 attended alternative provision/ pupil referral units (AP/PRUs)
- 4 attended early years settings
The SEN Support Toolkit assists schools with ensuring accurate recording of primary need and the SEN Service will focus on ensuring the primary need recorded is reviewed for each child through their annual review, where needed.

The largest proportion of primary need amongst children with EHCPs is those with autism with just over a third.
However, when we consider the primary need of children on SEN Support, the profile of primary need changes. Autism is less than 10% of the need it was for children with EHCPs with 2.6%. The most prevailing needs are now speech, language and communication needs with over a third and those with social, emotional and mental health difficulties with a quarter of SEN Support. We know that in the primary sector speech, language and communication is identified most highly with a change to social, emotional and mental health needs at secondary. This suggests that we need to support secondary schools to understand the needs of pupils with speech, language and communication needs. It is also evident from our JSNA that children with speech, language and communication needs are less likely to continue to college education and employment. Speech, language and communication needs therefore feature highly in our joint commissioning plans.

Children on SEN Support show a higher percentage of specific learning difficulties with 8.6%. Those categorised as ‘other’ are also higher with 5.5% and 3% are categorised with no specialist assessment. Again, this suggests that we need to support schools to ensure they are confident to identify the primary need of a pupil on SEN Support and our SEN Support Toolkit aims to do this.

In Westminster:
- 60% of children and young people with EHCPs attend mainstream schools compared to 51% in London and 44% in England;
- 7.6% of children with EHCPs attend a resource base in a mainstream school.
compared to 5.1% in London and 3.6% in England;
• 6.2% of children with EHCPs attend non-maintained or independent schools (mainstream and special) compared to 8.6% in London and 6.3% in England.

LA figures SEN2 Jan 2018, regional and national figures from DfE Published SEN2 Jan 2017 data.

Across all London schools, the proportion of pupils with statements or EHCPs ranges from 0.8% to 4.2%. In Westminster schools this is 2.6%, compared to 2.9% in London and 2.8% nationally (DfE January 2017 School census).

For pupils on SEN Support the proportion for all London schools ranges from 6.5% to 15.0%. In Westminster schools this is 13.5%, compared to an average of 11.4% in London and 11.6% nationally.

In Westminster 16.2% of pupils have an EHCP or are receiving SEN Support, compared to a national average of 14.4%. Whilst higher than the national average, we believe this is an accurate reflection of the cohort attending the borough’s schools.

The current age profile of children and young people with EHCPs based on the 1,035 recorded in January 2018 is as follows:

We will continue to monitor this age breakdown as it is our aim that the majority of children are identified in the younger age groups.

Local Special Education Settings

Westminster has 3 local special schools, College Park, Queen Elizabeth II (QEII) and St. Marylebone Bridge. College Park and QEII are all through schools including 16-19 year olds. St. Marylebone Bridge is age 11-16 only. Beachcroft AP Academy also has specialist provision for children aged 5-16 with social, emotional and mental health difficulties.
The range of pupils attending our schools has changed over the years. QEII was originally a school for children with severe/profound and multiple learning difficulties but has increasingly taken children with associated medical and mobility needs.

College Park was originally a school for children with moderate learning difficulties (MLD) including autism. With greater mainstream inclusion of pupils with MLD, the school is now admitting a broader range of learners with more severe autism and physical/sensory needs.

St. Marylebone Bridge was set up to provide for pupils with speech, language and communication needs and to support the high number of pupils leaving the primary resource base at Churchill Gardens who needed an appropriate secondary provision.

Westminster currently has 5 resource bases for children with SEND situated in local mainstream schools at Churchill Gardens (for children with speech and language difficulties); Edward Wilson and St Augustine’s (both for children with sensory impairment); Millbank (for children with autism) and Pimlico Academy (for children and young people with expressive and receptive language difficulties and associated literacy difficulties). We are opening an additional primary resource base for children with autism in the summer term 2019 in response to the rising numbers of children with autism.

<table>
<thead>
<tr>
<th>Setting</th>
<th>Primary need</th>
<th>Age range</th>
<th>Places</th>
<th>Current pupils</th>
<th>Top Up Funding</th>
</tr>
</thead>
<tbody>
<tr>
<td>Churchill Gardens</td>
<td>SLCN</td>
<td>5 - 11</td>
<td>40</td>
<td>24</td>
<td>£15,158</td>
</tr>
<tr>
<td>Edward Wilson</td>
<td>VI</td>
<td>5 - 11</td>
<td>9</td>
<td>4</td>
<td>£21,630</td>
</tr>
<tr>
<td>St. Augustine’s</td>
<td>HI</td>
<td>11 - 16</td>
<td>10</td>
<td>9</td>
<td>£17,000</td>
</tr>
<tr>
<td>Millbank</td>
<td>Autism</td>
<td>5 - 11</td>
<td>10</td>
<td>11</td>
<td>£16,338</td>
</tr>
<tr>
<td>Pimlico Academy</td>
<td>SLCN</td>
<td>11 - 16</td>
<td>10</td>
<td>12</td>
<td>£14,088</td>
</tr>
<tr>
<td>College Park</td>
<td>Autism and learning difficulties</td>
<td>5 - 19</td>
<td>100</td>
<td>100</td>
<td>£13,300</td>
</tr>
<tr>
<td>QE11</td>
<td>SLD/PMLD</td>
<td>2 - 19</td>
<td>70</td>
<td>71</td>
<td>£21,000</td>
</tr>
<tr>
<td>St. Marylebone Bridge</td>
<td>SLCN</td>
<td>11 - 16</td>
<td>60</td>
<td>52</td>
<td>£10,000</td>
</tr>
<tr>
<td>Beachcroft AP Academy</td>
<td>SEMH</td>
<td>5 - 16</td>
<td>14</td>
<td>12</td>
<td>£25,000 to £36,000</td>
</tr>
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In working with parents/carers, we know there is more we could do to enhance the local provision particularly for pupils with autism. Our Capital Plan, which is published on our Local Offer, sets out that during 2018/19 a two-class, specialist
provision for children with autism will be established at All Soul’s C of E Primary School. We will also undertake significant alterations and improvements to outdoor learning environments and interior redesign at College Park and Queen Elizabeth II. From September the roll will increase to 105 places being available at College Park and 75 at QEII. This is in response to the demand for local placements.

Independent and Non-Maintained Special Schools and College

The data shows that 52 children currently attend independent or non-maintained special schools (INMSS) and colleges. This number has reduced steadily since 2014. These schools are often out of the local area and this means children can have long distances to travel to and from school each day. For some children this means that they have to attend school on a residential basis. In 2017/18 there were 22 pupils with EHCPs attending residential settings, of which 13 were at schools and 9 at post 16 colleges.

We know we need to collect more information about attendance rates for children placed in INMSS and we aim to do this in 2018 via the annual review process and individual contact with schools. We closely monitor the schools attended to ensure they are good or outstanding wherever possible.

We anticipate the number of children travelling to INMSS out of the borough further reducing over time as we address the need for more local provision.

Local Health and Community Learning Disability Services

Children and young people’s health needs are met by a range of health providers locally including Central London Community Health NHS Trust, Central North West London Foundation Trust and multi-disciplinary teams based in the two Child Development services, Cheyne and St Mary’s.

In adult services there are local community learning disability teams that are integrated with social care and health staff (CLCH), the key roles are:

- LD Nurses
- Physio
- OT
- SALT
- Psychology
- Psychiatry
- Transition workers – Social Work

People with learning disabilities often have difficulty in recognising illness, communicating their needs and using health services. They often have poorer physical and mental health than other people. This doesn’t need to be the case. The Annual Health Check scheme is for adults and young people aged 14 or above with learning disabilities who need more health support and who may otherwise have health conditions that go undetected.

Research shows that regular health checks for people with learning disabilities often uncover treatable health conditions. Most of these are simple to treat and make the
person feel better, while sometimes serious illnesses such as cancer are found at an early stage when they can be treated.

The Annual Health Check is also a chance for the person to get used to going to their GP practice, which reduces their fear of going at other times.

Annual Health check data is identified below for the 14-25 age cohort:

<table>
<thead>
<tr>
<th></th>
<th>CL CCG 2017/18</th>
<th>WL CCG 2017/18</th>
</tr>
</thead>
<tbody>
<tr>
<td>QOF register</td>
<td>81 (22%)</td>
<td>144 (24%)</td>
</tr>
<tr>
<td>LD Team register</td>
<td>48 (37%)</td>
<td>84 (41%)</td>
</tr>
<tr>
<td>LD Health checks</td>
<td>18</td>
<td>35</td>
</tr>
<tr>
<td>Mortality rates</td>
<td>1</td>
<td>0</td>
</tr>
</tbody>
</table>

This tells us that the chances of having an annual health check from your local GP practice are low for children and young people, and that there is not necessarily an increased likelihood of having a health check as you move in to adulthood.

There remain health inequalities even as people with Learning Disabilities move in to adulthood with 24% of QOF registered patients and 41% of patients on the register of the Learning Disability Team accessing an annual health check from a West London CCG GP practice.

Between 22% of QOF registered patients and 37% of patients on the register of the Learning Disability Team accessed an annual health check from a Central London CCG GP practice; the national average is approximately 50% for all ages (including all adults).

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<thead>
<tr>
<th></th>
<th>CL CCG 2017/18</th>
<th>WL CCG 2017/18</th>
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<tbody>
<tr>
<td>QOF register</td>
<td>432 (24%)</td>
<td>627 (37%)</td>
</tr>
<tr>
<td>LD Team register</td>
<td>327 (32%)</td>
<td>410 (56%)</td>
</tr>
<tr>
<td>LD Health checks</td>
<td>105</td>
<td>232</td>
</tr>
</tbody>
</table>

The number of health checks over the whole age group including all adults is significantly improved in West London CCG, but similar in Central London CCG over the same period; albeit with a significantly higher sample size.

**Black and Ethnic Minority Groups**

Using resident ethnicity data from the January 2018 school census, we know that the ethnicity breakdown of pupils with EHCPs is broadly in line with the breakdown of all pupils. 87% of pupils with EHCPs are not White-British compared to 88% of all pupils.
There are smaller variations across ethnic breakdowns. Children with an EHCP with black ethnicities account for 18% of all those with EHCPs compared to 15% of all pupils. Mixed ethnicity children account for 11% for both, whilst Asian ethnicity children account for 17% of those with EHCPs and 15% of all pupils and so these groups are all representative of the wider population. Children with ethnicity as White Other (predominantly European) are slightly under-represented with 10% of all those with EHCPs, yet 15% of all pupils. The largest individual ethnic group was 'Any Other' which accounts for just under 30% of all children; however, this was also in line in terms of representation.

We will keep these figures under review to ensure there is no under or over identification taking place within particular community groups.

Vulnerable Groups

We know that children who become looked after by the local authority can sometimes also have special educational needs and disabilities and this means they are a particularly vulnerable group. Looked after children are defined as those looked after by the local authority for one day or more.

There are currently 201 looked after children who are open to the virtual school who are of school age up to age 18; 16 are younger than 3, less than 5 have turned 4 in the last two months. Of these, there are 7 who are Unaccompanied Asylum Seeking Children (UASCs) who remain the long term responsibility of Westminster and 18 who are currently placed for transfer on the National Transfer Scheme up to the age of 16. Between age 16-18, there are 60 UASCs. There are therefore 116 indigenous children and of these, 28 have an EHCPs = 24.1%. However, if we are looking at those indigenous looked after children of compulsory school age i.e. 0-16 then 17 out of 90 have EHCPs = 18.88%.

There are only 12 children on SEN Support in their schools and 2 Post 16, which equals 12% of the total cohort. Out of the 85 UASCs less than 5 are on SEN Support. This relates specifically to their trauma. The total figure including UASCs for SEN Support is 6.96%.

In relation to the achievement/progress of those children with EHCPs:
- For 5 out of 17 children their attainment is at age related expectations = 29%
- For 6 out of 17 children they are making expected progress = 35%.

In relation to the achievement/progress of those children on SEN Support:
- 2 out of 14 children up to 18 their attainment is at age related expectations = 14%
- 8 out of 14 children up to 18 making expected progress = 57%.

In relation to the attainment/progress of UASCs up to 18 this is much harder to quantify. Many who are currently placed for transfer are receiving education either via 1:1 tuition, through the refugee council or CARAS if they are on the Transfer Scheme or who have come into care in the last 20 days. The progress figures therefore cannot be quantified in the same way. However, those who remain the
responsibility of Westminster are all making progress, albeit not in line with age related expectations.

Children in Need are defined in law as children who need local authority services to achieve or maintain a reasonable standard of health or development, to prevent significant or further harm to health or development, or are disabled. In all London Boroughs, 25.5% of Children in Need are on SEN Support and 24.1% have a statement or EHCP. In Westminster, 27.5% of Children in Need are on SEN Support and 22.5% of Children in Need have a statement or EHCP.

In Westminster, 10.5% of school-age Children in Need have a disability, compared to 13.1% in all London Boroughs.

Some children and young people have complex health needs arising from disability, illness or accident that cannot be met by existing universal or specialist services alone but require an additional package of health support that is agreed following a comprehensive assessment using national criteria. This is known as Continuing Health Care (CHC). There are currently 13 children aged 0-18 in Westminster who receive a CHC package.

There are a very small number of children with SEND who also have a child protection plan.

Any young people with SEND who are also known to the criminal justice system are monitored closely to ensure appropriate planning is in place to improve their outcomes. Westminster currently has no young people in custody with an EHCP; however, where a young person has an EHCP prior to being detained, the LA and CCG know that they have a duty to continue to arrange the provision as set out in the EHCP. The LA will also consider any requests for Education, Health and Care needs assessments for young people who are already detained.

There are currently a small number of children with SEN in the borough electing to receive home education and those flagged as missing education. Their families receive an offer of support from the Access to Education Service. These requests are monitored closely to ensure parents are choosing to home educate for the right reasons and it is not because they feel there is no suitable local educational provision.

**Achievement and Progress of Children with SEND**

All SEND children and young people in the borough placed in a special school and resource base have access to education that has been rated by Ofsted to be good or outstanding. 97% of all maintained schools in the Borough attended by all SEND children is also either good or outstanding. The overall outcomes for SEN Support and EHCP children and young people in Westminster primary and secondary schools are good and compare well with comparative national school performance and post 16 data. However, there is a need to reduce fixed term exclusion levels in secondary schools.

Schools, the local authority and other local education partners have the highest
aspirations for our children and young people with SEND and want to build upon these strengths to narrow gaps in achievement further. We want to address areas that still require further improvement; including reducing exclusion levels and ensuring effective engagement and communication with all parents about their child’s learning needs.

In meeting our education achievement aspirations, we aim to make sure that all education providers have access to the support and guidance they need in addressing the learning needs of all children. This includes a programme of commissioned outreach support from our Westminster Special schools, a professional development programme of training and support, regular the SENCO network meetings and opportunities for the sharing of best practice. Support in addressing attendance and exclusion issues is also available through the commissioned support services from TBAP in managing behaviour issues and from the Local Authority Early Help service in working with families. This provision is regularly evaluated to ensure that the support needs of education providers are being met and the commissioned SEND outreach support programme was recently subject to a borough wide review. In responding to the feedback from our parent groups, stronger links are being established between parent forums and school SENCO meetings.

Support for Early Years’ settings, both in the maintained and PVI sectors, is through the Local Authority Early Help service. The Bi-borough school standards service also commissions training and support with best practice in early years’ curriculum and assessment.

In line with the local framework for school improvement, the Bi-borough school standards service undertakes a review of the achievement and progress data at an individual school level and works with school leaders on the key areas for improvement, including brokering support where required to address any areas of weakness in the progress and outcomes of any vulnerable groups of children. Specific support is available to schools to address attendance and exclusions issues from the early help and commissioned behaviour services (see exclusions and absences section below).

The attainment and progress data of children and young people with SEND in all the Key Stage assessments is closely monitored and will inform local strategic plans. Reports are provided to the local CFA Executive Board, Children’s Services Senior Leadership Team and Council Members. In further enhancing the range of data we have available in monitoring the achievement of children and young people with SEND, we aim to be able to track progress in other areas e.g. progress towards meeting the person centred outcomes set out in EHCPs. This work has already started via a newly implemented annual review process, which has been consulted on with schools and parents.

**Recent performance**

The key headlines from the current attainment and progress data from the 2017 school performance and the 2015/16 Post 16 national data releases are set out below:
In assessments for the foundation stage profile, the percentage of SEN children being assessed at a good level of development is above national figures, and the gap in performance of all SEN children relative to their non-SEN peers is better than the national average.

In comparison with their peers nationally, SEN children, both the SEN Support and EHCP cohorts achieve very well in Westminster primary schools at Key Stage 1 and 2, and benefit from the good/outstanding education provided by almost all local schools.

In comparison with their peers nationally, both the SEN Support and EHCP cohorts perform more highly in Westminster secondary schools at Key Stage 4. The performance of the SEN support cohort in English and mathematics is also well above national scores and above inner London.

The relative gaps in the performance of the SEN cohorts in comparison with their peers in Westminster primary and secondary schools is positive overall and compares well with national figures, however the ambition is to narrow the achievement gaps even further.

Progression rates from schools into sustained Education, Employment and training post 16 for SEN Support pupils are above national figures and the relative gap in progression for all SEN pupils with their peers is also slightly better than the national average. Progression rates for EHCP pupils is however below the national figures and is an area for improvement. Post Key Stage 5, progression rates for SEN/LLDD learners from schools and colleges is better than national averages.

The outcomes for young people with SEN aged 19 are well above national averages. The number of SEN support students achieving Level 2 and Level 3 qualifications is well above national figures and the outcomes for the EHC cohort were equally high relative to national.

Please see Appendix 4 for a full breakdown of both primary and secondary school attainment measures by EHCP and SEN Support.

**Education, Health and Care Plans**

We implemented a new assessment process in 2014 in response to the new legislation and Code of Practice and we set out our plans to complete the transfers from Statements to EHCPs by 31st March 2018. We have had some challenges in relation to timely completion of new assessments for a variety of reasons and initially struggled to meet the new 20-week timescale.

In 2017 we undertook a review of our performance and introduced new ways of working. This has resulted in significant improvements in our ability to complete EHCPs within 20 weeks and we completed 99.8% of the transfers by 31st March 2018. We have seen an increase in the number of requests for EHC needs assessments although at the end of 2017 this was beginning to stabilise. We will keep this under review.

The percentage of new EHCPs issued within 20 weeks (excluding exceptions) increased from 7% in 2015 to 60% by 2017 and we have set ourselves an ambitious target of 90% by the end of 2018.
We are aware that we need to continue to drive improvements and ensure that our practices are as person centred as possible and that all the EHCPs produced are of a good quality.

A new annual review process for all EHCPs has been introduced, following consultation with parents and schools.

**Mediation and Tribunals**

It is our aim to work in partnership with families and reach agreement wherever possible. However, sometimes this is not possible so we offer formal mediation services and on occasions we have to defend appeals to the Tribunal. Any learning from mediations and Tribunal appeals is used to support ongoing improvements in the Service.

The Service has been working with colleagues in health and social care to prepare for the national pilot on the single route of redress which means from April 2018 the Tribunal will hear appeals in relation to social care and health, provided there is an education reason to register an appeal. The Tribunal will be able to make non-binding recommendations which social care and health need to implement, or explain to parents why they are not going to do so.

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We have seen a reduction in appeals since we have improved our assessment processes, embedded co-production with parents and improved the quality of our EHCPs.
Exclusions and Absences

We are clear that children are less likely to make good progress if they are absent from school. We therefore closely monitor the absence rates for pupils with SEND and the rates of exclusion based on the data that we collect from schools. Currently we recognise that reducing exclusions is a key priority.

School leaders work with local partners in establishing effective strategies to promote good attendance and inclusion. An important focus is on making sure that schools are given the advice and support they need. All schools have access to Local Authority education psychology, early help, early years and SEN services, and the commissioned TBAP behaviour support services. The SEN and Educational Psychology Services work with schools in helping to make ‘reasonable adjustments’ to the behavioural policies and procedures in meeting the needs of children and young people with EHCPs and in avoiding the use of exclusion as a sanction. In managing behaviour issues, TBAP provide targeted intervention and support with individual pupils, reintegration programmes and guidance on effective behaviour strategies.

The Early Help Service also supports schools in working directly with families on persistent attendance matters. The Achievement for All initiative in a number of schools has strengthened the quality of engagement between schools and families on attendance matters, particularly those families with children with SEND.

Where the data is showing particular concerns regarding attendance or exclusions figures in a school, partnership meetings take place between colleagues the Local Authority Education services and school leaders. The purpose of these meetings is to clarify the current data, to see that appropriate action is being taken and to agree the support that is available from partners to address the issue.

Given the local priority, a specific focus is on working with secondary school leaders on reducing exclusion levels and reviewing and developing the support that is available from the local authority early help team and commissioned services.

Exclusions and absences – how well are we doing?
Summary based on current data (attendance 16/17 – Exclusions 15/16)

Attendance
Overall the attendance of children with SEND in Westminster primary schools is above national averages. The attendance of the SEN Support cohort was 95.0% compared with the national average of 94.7%. For the EHCP cohort attendance was 93.9% compared with 93.3%. The gap in the attendance levels of SEN children overall and their peers at -1.3% was better than the national gap of -1.7%. Rates of persistent absence in the SEN Support and EHCP cohorts were also lower than the available inner London figures.

In secondary schools, the overall attendance of children with SEND is above national figures. The attendance of the EHCP and the SEN Support cohorts were above national figures at 92.6% and 92.8% compared with the national figures of 92.4% and 92.5%. The gap in the attendance levels of the SEN pupils and their peers is
broadly in line with the national average at -2.8% compared with -2.7% but wider than the gap for inner London.

Exclusions
The percentage of primary school children at the SEN Support level and with EHCPs with one or more fixed term exclusion is below national averages at 2.38% and 0.85% (compared with 2.72% and 4.73% respectively). There were also no permanent exclusions of pupils with EHCPs. The percentage of SEN Support children permanently excluded was slightly above national figures at 0.25% compared with 0.15% nationally.

In Westminster secondary schools, fixed term exclusion levels for SEN pupils with EHCPs were below national averages: 6.72% compared with the national figure of 10.62%. There were also no permanent exclusions of pupils with EHCPs. For the SEN Support cohort, permanent exclusion rates were lower than national averages: 0.45% compared with 0.59%. Rates of fixed term exclusion for this cohort were however higher than national averages: 14.35% compared with 11.01%. This is a key priority area for this Strategy.

School and College Leaver Destinations
The DfE publishes data on the proportion of young people moving onto sustained education, employment or training destinations after Key Stage 4 (age 16) and Key Stage 5 (age 18). The latest data relates to the destinations of leavers from the 2015/16 academic year.

SEN children studying at Westminster schools and colleges perform in-line with the national picture with 89%, compared to 88% nationally, moving onto education or employment after Key Stage 4.

After Key Stage 5, 90% of SEN pupils at Westminster schools and 92% at Westminster colleges move onto higher education or employment which is above the respective national figures of 87% and 85%.

We continue to develop our pathways to adulthood to try to enable young people with SEN to have access to the opportunities they wish to access as they progress into young adulthood.

Young People who are Not in Employment, Education or Training (NEET)
In 2015/16, 16 year olds with an EHCP/Statement or on SEN Support were equally likely to progress to post 16 education or training at the end of Key Stage 4 (both 89%). However, for both groups the progression rate was below 16 year olds with no identified SEN (95%). This meant that 11% of residents with an EHCP/Statement or on SEN Support did not continue to participate beyond Year 11.

Recent participation data suggests some improvement. In July 2017 Westminster young people aged 16 or 17 with an EHCP/Statement remained less likely to participate in education or training (93.2%) compared with young people without SEND (97%). However, while the participation gap (-3.8%) was larger than the
London gap (-2.3%) it was positive that the percentage of Westminster residents with SEND who participated in education or training was above both the London (91.9%) and national averages (87.4%). This means that 7% of young people with an EHCP/Statement did not participate in education or training.

Moving forward it is important that young people with SEN benefit from high quality careers information, advice and guidance as outlined in the recently published national Careers strategy: making the most of everyone’s skills and talents (December 2017) and the requirements of the new statutory guidance - Careers Guidance & access for education & training providers (January 2018).

The council will continue to monitor progress in raising participation through the use of tracking data, including the September Guarantee. The council will work with schools and education and training providers to identify young people with SEN including those on SEN Support who do not have an offer to continue education or training for Year 12, Year 13 and beyond to develop the local offer, including the availability of supported internships.

**Employment**

In 2016/17 the percentage of adults with learning disabilities in paid employment was 9.2% compared to 6.3% across England and 6.1% in Inner London (source: NHS Digital, Measures from the Adult Social Care Outcomes Framework).

As part of the Council’s ongoing commitment to leading by example, being credible with local employers and demonstrating best practice supporting the local employment and skills agenda, we are taking forward the implementation of a bi-borough Supported Internship Programme, to be delivered from September 2018.

**Short Breaks**

We know that short breaks are a crucial part of our local offer as they allow parents/carers to have regular, planned breaks from their caring duties. Our short break statement sets out the current offer and has been reviewed and is on the Local Offer website. We are aware that parents tell us the current offer could be enhanced to meet the needs of a wider group of children and young people. We are piloting a new short breaks offer for parents in the south in response to this feedback.

The 2018 Short Breaks Statement for children, clearly describes the short breaks that are currently available and the route to access the current offer. Importantly however, the fundamental goal of this publication is to launch a period of review that is designed to achieve the widest possible range of stakeholder feedback to ensure the services, in-house, commissioned and voluntary, can meet the varied and changing needs of our local population on an ongoing basis. Feedback received so far clearly demonstrates the need for services that are sufficiently flexible and available to meet a wider range of needs without the need for formal assessment. It is also likely that one of the outcomes of the review will be to enhance the range of services that can be accessed through the provision of direct payments to increase the level of choice and control available to local families.
From age 17 years, after an assessment if there is an identified respite/short break eligible need Adult Social Care (ASC) offers a bed based service and/or outreach service. Introductory visits occur when the young person is aged 17 years and overnight stays can start at age 18 years. This adult short breaks service is shared with the Royal Borough of Kensington and Chelsea. The bed based service includes two residential settings; one for people with physical disabilities and learning disabilities (LD) and one for people with LD without mobility difficulties.

**Physical Activity, Leisure & Sport (PALS)**

We know that physical activity, leisure and sport is paramount to good health and well-being. The new ActiveWestminster Strategy 2018-2022, will help to highlight that being active is more attractive and accessible than ever before. An active and healthy life goes hand in hand with an improved quality of life. It helps with both physical and mental health. Getting out and being physically active can also reduce social exclusion and isolation.

Nearly one in four Westminster children entering primary schools are overweight or obese. But growing up active doesn’t just help fight obesity and expend the energy we get from food and to combat the various health problems associated with inactivity, it generates confidence, improves attitudes and builds mental resilience. Tackling inactivity requires a whole system approach across a wide range of issues and partnerships; from planning roads, to promoting cycling and maximising the use of open spaces. This whole cohort approach includes specific advice and support for schools in relation to their SEND population.

Our strategy provides a framework on how we will Activate Your City, Lives and Neighbourhoods – through the three strategic themes of ActiveCity, ActiveLives and ActiveNeighbourhoods.

The council believes that participation in physical activity, leisure and sport can be truly transformative, inclusive and inherently positive. It is now time to turn that belief into something tangible. The ActiveWestminster Strategy sets a bold, ambitious framework on how we might achieve this and seeks to highlight the value of taking part, building on what we have in place already and our previous successes whilst focusing on our challenges and areas of priority. Evidence shows us that if we engage more people, more often in physical activity, leisure and sport, a wider range of benefits will be realised. We will continue to consult with our schools and our parent carer forum on ways in which we can enhance the Local Offer in relation to physical activity, leisure and sport for all children with SEND.

**Disabled Children’s Social Work**

The Disabled Children’s Team provides specialist services to disabled children and their families. These include:

- Assessments to access complex needs support packages
- Emotional and practical support
- Advice and signposting
- Child Safeguarding Services
- Services to Looked After Disabled Children
To receive a service, families are referred to the Access Team who will collect the basic details including the purpose of the referral. Families can refer themselves, but we also receive referrals from schools, health professionals and a variety of other professionals. We will carry out an assessment to see where we can help, and this normally includes speaking with other who know the child, for example school teachers, health visitor, GP etc. so that we can build up a bigger picture and work with others involved to provide the best service possible.

Following this, depending on the child’s needs, it may be that we can provide a short break, or another type of care to help out. If this is the case, the Social Worker will talk the family through the options and a request will be made to a Panel for an appropriate package of care. Any care packages that are offered are reviewed with the family at least annually to make sure they are still required and that the most appropriate service is being offered.

In the rare occasions that children are unable to live with their parents, for whatever reason, we look for the best matching placement that a child can settle into. Often this is with a foster carer/family, which can offer the best kind of family environment. Very rarely, the best care can be provided by a residential placement of some kind. We always try to do this in close liaison with the family, maintaining family links wherever possible.

Where a child or young person is receiving a service from us in their teenage years, we liaise with Adult Services to prepare for adulthood. At age 18 a young person’s social care services may transfer to Adult Services, and we work to ensure that this transfer is as smooth as possible.

**Early Years and Child Care**

The council believes that early intervention is key to improving life chances for children with SEND. Health Visitors undertake 2-year-old development checks in children’s centres, currently achieving 79% against a target of 75%. The SEN Support Toolkit has been shared with all providers and this explains the responsibilities on early years providers in relation to identification and assessment of children with SEND.

There is an enhanced early years offer including an Inclusion Fund which is available for children accessing funded childcare from the term after they turn 3 and above for emerging or low level need. Additional funding is also available to the four nursery schools, three of which are judged to be outstanding by Ofsted, through the ‘early years enhanced offer’ which enables them to become centres of excellence in relation to offering provision for children with more complex needs and acting as a ‘resource centre’ providing advice and training to private, voluntary and independent settings and children’s centres.

The Child Development Team is a strong multi-disciplinary team including Paediatricians, therapists, clinical psychologists and clinical nurse specialists. Parents report positive feedback of attendance at a range of groups offered by this team.
Sensory Needs

We know that children with sensory needs can require very specialist support at different points in their life. Children are often diagnosed through early screenings from birth and evidence shows that early intervention can make a significant difference to their life outcomes. Westminster is fortunate in having specialist VI provision at Edward Wilson Primary School and secondary HI provision at St Augustine’s High School, which enables needs to be met locally.

Currently, the WCC Sensory Needs Service directly supports 110 children with hearing impairment and 106 with visual impairment.

The service runs the Children’s Hearing Services Working Group (CHSWG)- a group ensuring that deaf children and their families have good quality local support which meets their needs. The CHSWG includes representatives from health, education, local authority services, the National Deaf Children’s Society and parents of deaf children, who have a unique overview and experience of those services.

We are reviewing our outreach services for schools to ensure they continue to provide what is required to support children to achieve good outcomes, particularly for children on SEN Support, and to support and train mainstream school staff.

Educational Psychology Service

The Educational Psychology Service (EPS) is a Bi-Borough team working across Westminster and The Royal Borough of Kensington and Chelsea. The EPS provides a core funded statutory element largely linked to children requiring statutory EHC needs assessments. In addition, all local schools, including academies, receive 3 core EP visits a year. It also delivers a significant amount of traded service to education settings across the borough supporting them with their strategic developments as well as more in-depth work with individual children.

The EPS also offers Traded EP visits e.g. the provision of generic packages of EP sessions commissioned and funded by the borough’s schools. This can include consultation, assessment, intervention, training and research. EPs have expertise in education and the application of psychology to improve the learning and well-being/mental health of children and young people up to the age of 25 years. The service has strong and positive links with schools and with other council and partner agencies, children’s and adult’s social care and health, as examples.

EPs are involved typically with around 300 pupils in WCC state-maintained schools in a school year. In 2015/16, 29% of these pupils had a statement or EHCP, 57% had other targeted SEN support from schools and 14% involved other concerns. EPs were involved in consultations over concerns relating to:

- Cognition and Learning 41%
- Communication and Interaction 34%
- Social, emotional and mental health 21%
- Sensory and/or physical 3%.
Preparation for Adulthood

We have established a multi-agency Preparation for Adulthood group to help us to improve the experiences of young people as they reach adulthood. This is focussing on employment, good health, education and training outcomes, independent living and social inclusion. Parents/carers and young people will help to co-produce our work in this area through a series of additional focus groups.

We have Standard Operating Procedures in place in relation to the transition processes and these are being reviewed. There is an expectation that young people who require an assessment by adult health or social care services will be offered this prior to their 17th birthday such that by that time they have an indicative plan in place setting out any support they are likely to be able to access when they turn 18. This will also allow time to focus on additional support they require during their childhood years to further develop their skills for independence, in line with the expectations set out in the Care Act. It is also aimed at providing a more seamless experience for young people and their families. Adult services have introduced a performance measure to ensure these assessments are closely monitored.

Independent Living

Westminster is committed to offer local opportunities for supported living for any young person who has ongoing care and support needs and cannot or does not want to live with their family/carer. Most housing and support provisions within Westminster are supported living schemes rather than residential placements. The support is provided based on an individual’s assessed needs and can vary from a few hours to 24/7 support in someone’s own flat or in a shared living scheme. In addition to these schemes, we have 7 nominations yearly for priority offers of mainstream one bedroom or studio flats with City West Homes.

As part of the strategic planning, we track young people coming through in bi-monthly tracking meetings which are attended by all partners involved in the ‘preparing for adulthood’ process. The information we gather at those meetings in relation to future housing and support needs feeds into the housing strategy as well as our housing data base, which identifies every customer who is in need of housing and support. We work closely with our local housing and support providers to ensure that most people who are in need of housing and support are offered a local provision.

It is acknowledged that we need more local housing opportunities for young people with a learning disability and autism, particularly those who have very complex needs and behaviours that may put themselves and others at risk as well as young people who have a learning disability and additional very complex and at times life limiting health conditions. We are working in close partnership with colleagues in commissioning and housing to develop opportunities and increase the availability of numerous different supported and mainstream housing opportunities for our customers, particularly for those with the most complex needs.

At present, we are not able to accommodate everyone with complex housing and support needs locally and do place people out of borough at times, due to the lack of
a suitable provision locally. We aim to find placements as close to Westminster as possible to enable close family contact and always explore opportunities of offering something more local in the future.

We are working with the Northwest London Transforming Care Partnership (see below) on a joint housing strategy for people who are in Assessment and Treatment Units (ATUs) or at risk of being admitted to an ATU, which includes young people coming into our service, with the aim of addressing some of the difficulties in finding local solutions for this cohort.

Please refer to below table for priorities outlined in our housing strategy which also incorporates the transforming care agenda.

| Increase of high support services in borough | To meet the needs of people with the most complex needs and behaviours that challenge services referred to the Westminster Learning Disability Team and to meet the needs of those in existing supported housing schemes |
| Increase of accessible accommodation | To meet the needs of those known to the service who have a physical disability, are ageing and those with more complex health needs |
| Increase of autism specific supported housing in borough with appropriate accommodation | To meet the needs of the increasing numbers of young people transitioning to adult services who require specialist autism services |
| Work force development | To meet the needs of more complex people and those who display behaviour that challenges services. To prevent where possible hospital admissions and protracted stays in Assessment and Treatment Centres |
| Pathways to independence | Offer young people preparing for adulthood and their families and carer’s a clear understanding of their housing and support options and move on to independent living wherever possible |

**Transforming Care Programme**

The Building the Right Support (ADASS, LGA, NHS England, 2015) national plan sets out requirements to reduce inappropriate inpatient admissions and stays for people with a learning disability and/or autism who display behaviour that challenges, including those with a mental health condition. The aim is to reduce and/or prevent new admissions, readmissions and reduce the time spent in inpatient care by providing alternative care and support. The intention is to shift money into community services reducing usage of inpatient provision 2016 to 2019. The aim is to combat the over reliance on inpatient treatment for people who could, given the right support, be at home and close to their loved ones.
West London CCG and Central London CCG (along with local authority partners of the Royal Borough of Kensington and Chelsea and Westminster City Council) are part of the North West London TCP, comprising 8 CCGs, 8 local authorities and NHS England Specialist Commissioning. This is intended as a system wide approach including people with learning disabilities, family and children services, carers and providers.

It is also important to acknowledge that the programme includes people on the autistic spectrum who do not have a learning disability so strong partnership working arrangements will be essential between Learning Disabilities, Mental Health and the wider autism offer.

The new joint work on the Preparing for Adulthood Workstream as part of the SEND Local Area Governance will support an integrated approach across adult and children’s services in the context of the Transforming Care Programme.

**Personal Budgets**

The Borough’s Personal Budgets Policy is on the Local Offer website and offers personal budgets within 4 main areas:

- Home to school travel assistance
- Personal care
- Short breaks
- Equipment and disposables.

Children and adults with social care packages may be offered a direct payment for some or all of their provision. This is managed through personal budgets, direct payments and personal health budgets and is intended to provide individuals with greater choice and control over how they are able to meet their needs.

For children with an EHCP, the council will consider any request from a parent/carer for a personal budget/direct payment provided that this relates to provision which is specified in the child’s EHCP and is aimed at achieving the stated outcomes. There are currently a limited number of SEN personal budgets in place and work will take place to ensure more information is provided to families, that the systems used are as straightforward and joined up as possible and that the number of SEN personal budgets increases.

Children who meet Continuing Healthcare criteria are entitled to receive their support through a personal health budget. Very few families have chosen to take up this offer to date.

All young people after assessment and deemed eligible for a service from ASC are offered a personal budget and in ASC LD services this also includes those eligible for a Personal Health Budget. The budget can be received in a number of ways; Direct Payment to the person or nominated family member, Council Managed Direct Payment (this service is currently under review) and Individual Service Fund where an independent agency to the person/family and Council will hold the budget (this is still in its pilot phase at present).
Travel Assistance

The Home to School Travel Assistance Policy was reviewed and updated in 2016 with support from the Westminster Parent/Carer Forum. We would like to review our processes for parents/carers to apply for travel assistance, how we make decisions, how we develop Travel Care Plans and assess risks and how we support greater independence wherever possible.

Currently 325 Westminster resident pupils receive travel assistance to enable them to attend education. A recent review of alternative travel assistance has put a strong focus on the need for travel training to increase the independence of children and young people. College Park school is one such setting which will commence training for its pupils.

Parent/Carers and Young Carers

We know that siblings of children with SEND can often become young carers and need support in their own right. There are currently a small number of young carers known to services. Family support services provide assessment for young carers and link to a range of local community organisations.

Parent/carers are lifelong carers and we know that we need to do more to understand whether they can access support and information to enable them to maintain their own health and wellbeing. Parents tell us that we can focus too much on the children and do not always consider the needs of the whole family. This is a high priority for us to review and address over the lifetime of this strategy.
Joint Commissioning

The CCG and local authority are working together on developing a Joint Commissioning Plan to support the implementation of the key priorities identified in this Strategy. The Joint Commissioning Plan sets out shared priorities and gives an overview of the joint work programme for the next 12-18 months, as well as describing the governance arrangements that will be used to oversee joint project delivery and service outcomes.

The plan focuses primarily on the direct interface between the CCG and the local authority to make joint commissioning arrangements for education, health and care provision for children and young people. Engagement and partnership will be far broader than this when delivering each of the priority projects. In particular, parents/carers will be involved in any service developments, reviews and re-designs to ensure co-production is at the heart of the everything we do.

The purpose of the plan is to provide a commissioning approach to support the achievement of the vision identified earlier in this Strategy. This will be done through the following cross-cutting commissioning principles:

1. A comprehensive offer of local services accessible to all
2. High aspirations for all our children and young people
3. A focus on early intervention and preventing issues from escalating
4. Fairness and equality
5. Building services around the voice of the child, young people and family
6. An engaged and confident workforce

The initial priorities identified within the Joint Commissioning Plan relate to:

- Speech, language and communication needs
- Occupational therapy
- Preparation for adulthood
- Social and emotional wellbeing
- 0 to 25 Integration
- Westminster SEND system redesign including short breaks
- Development of a multi-agency autism strategy
Our commitments

In order to enable us to realise our vision and fulfil the aims of this strategy, as a partnership, we make the following set of commitments. Co-production with parents, families and young people is a key principle that runs through all of these commitments:

1. **To co-produce a Local Offer which is accessible and supports children and young people to achieve the best they can in education:**
   - support the development of excellent mainstream and specialist local education settings (including 6th form and Further Education);
   - reduce the number of children who attend school out of the area;
   - ensure smooth transitions between schools/colleges;
   - ensure clear information is provided from schools/colleges about their offer;
   - implement a new approach to travel assistance to maximise independence;
   - celebrate best practice in education, health and other settings;
   - review the information, advice and support service;
   - review the early identification and prevention services aimed at improving emotional and mental wellbeing of children and young people with SEND;
   - review and redesign outreach services for children and young people with sensory needs.

2. **To meet children and young people’s needs and outcomes via an EHCP process which is effective and in line with Code of Practice expectations and supports them to develop their independence:**
   - build our workforce capacity;
   - prioritise quality and co-production of health and care needs assessments, Plans and annual reviews.

3. **To provide comprehensive therapies which support children and young people to live and learn well so they can be healthy, active and visible in their local communities:**
   - develop pathways for children and young people with speech, language and communication needs;
   - address barriers to accessing support below the EHCP threshold;
   - develop an integrated local offer for occupational therapy.

4. **To support children and young people with SEND to prepare for adulthood so they are supported to live as independently as possible and to get a job:**
   - deliver the Preparing for Adulthood (PfA) workstream and action plan;
   - develop pathways to employment, work experience, traineeships, internships, apprenticeships leading to greater employment options;
   - develop pathways to supported and other accommodation;
   - improve transitions between children’s and adults’ services.
5. To provide evidence-based ASD, ADHD and LD pathways for children and young people so they can lead healthy, active lives with support to be as independent as possible:
   - work with the Physical Activity, Leisure & Sport (PALS) team via the ActiveWestminster Strategy to support children and young people with SEND to lead healthy, active lives;
   - review pathways for diagnosis and support, including interfaces between CAMHS and paediatrics;
   - develop and all age ASD Strategy;
   - ensure all information on the Local Offer is tailored to and accessible for children and young people with autism and their families;
   - implement the Transforming Care action plan to transform services for people with learning disabilities.

6. To support carers (including young carers) in their caring role and to have a healthy life outside of caring:
   - complete the review of short breaks to ensure the offer meets the changing needs of parents/carers;
   - review the offer for young carers who are siblings of children and young people with SEND;
   - review child care arrangements for children and young people with SEND;
   - review the support and information available to all carers of children with SEND to ensure they have the support they need to maintain their own health and wellbeing.

How we will know we are making progress

We are developing an outcome focused Action Plan based on our commitments in partnership with parents/carers. This will set out the priorities with lead officers and expected timescales. We will track our progress at the CFA Executive Board where all partners come together on a regular basis.

We will continue to develop our relationship with parents/carers and with our Parent/Carer Forum to implement our shared priorities, progress in meeting them and to update all stakeholders through regular communications.

This Strategy will be refreshed on an annual basis to ensure it remains relevant to the needs of our residents and we will conduct a full review in 2021.
## Appendix - Primary School Key Stage Results Data

<table>
<thead>
<tr>
<th>Primary School Achievement 2017</th>
<th>WCC</th>
<th>National</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>2017 Cohort</td>
<td>2016 Percentage</td>
</tr>
<tr>
<td>FSP Good Level of Development</td>
<td></td>
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<tr>
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<tr>
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</tr>
<tr>
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<td>1303</td>
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<td>31%</td>
</tr>
<tr>
<td>EHC</td>
<td>57</td>
<td>29%</td>
</tr>
<tr>
<td>SEN overall</td>
<td>222</td>
<td>31%</td>
</tr>
<tr>
<td>SEN GAP</td>
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<td>-43%</td>
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<tr>
<td>Non SEN</td>
<td>1303</td>
<td>82%</td>
</tr>
<tr>
<td>SEN Support</td>
<td>165</td>
<td>45%</td>
</tr>
<tr>
<td>EHC</td>
<td>57</td>
<td>35%</td>
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## Appendix - Secondary School Key Stage Results Data

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<tr>
<td></td>
<td>Cohort</td>
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<tr>
<td><strong>KS4 English Baccalaureate</strong></td>
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<tr>
<td>(standard pass 9-4)</td>
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<td>All Pupils</td>
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<td>34%</td>
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<tr>
<td>Non SEN</td>
<td>1127</td>
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<td>EHC</td>
<td>62</td>
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<tr>
<td>SEN overall</td>
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<td>11%</td>
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<tr>
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<td>(strong pass 9-5)</td>
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<td>n/a</td>
</tr>
<tr>
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<td>n/a</td>
</tr>
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<tr>
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<td>All Pupils</td>
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<tr>
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</tr>
<tr>
<td>EHC</td>
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</tr>
<tr>
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