Wolverhampton Joint Strategic Needs Assessment

Children and Young People with Special Educational Needs and Disabilities

2019

Executive Summary
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i) Background

The Children and Young People with Special Educational Needs and Disabilities (SEND) in Wolverhampton Joint Strategic Needs Assessment (JSNA) 2019 focuses on children and young people aged 0-25 years who are residents of or who are educated within the city.

The JSNA aims to provide Wolverhampton SEND Partnership and Commissioning Board with an up to date understanding of the needs of local children and young people with SEND to:

- Inform the strategic, system wide priorities to improve independence and outcomes for children and young people with SEND, and their families, in Wolverhampton
- Inform commissioning at both strategic and operational levels, so that services and support are tailored to need and based upon the best available evidence
- Inform the wider system so that all relevant future plans in the city are considered through the lens of independence and inclusion, reducing the social and environmental barriers to living an ordinary life.

The JSNA 2019 is set firmly in the context of an Ordinary Life – defined by the Wolverhampton Challenge Board as:

‘Being valued as people first, as loving family members, as rebellious teenagers, as paid employees, as community leaders, as home owners and tenants, as neighbours, as friends and partners.

Where young people with the label of special educational needs and disabilities are seen in society and have active lives in society - not living in service land and hidden away from communities in segregated services with other disabled people.’

This JSNA recognises the importance of looking ahead, not just considering the needs of children and young people with SEND now but also seeking to understand more about their needs as they become adults.

This is underpinned by the principal of ‘preparing for adulthood’ – outlined by the SEND Code of Practice 2015 and centred around four key areas; higher education and / or employment, independent living, participating in society, and being as healthy as possible in adult life. The Code sets out the expectation that children and young people with SEND will be supported to be aspirational and plan and prepare for adulthood from an early stage.
The JSNA represents a collective commitment to improving the outcomes for children and young people with SEND in our city, and has been developed in conjunction with:

- Wolverhampton SEND Partnership and Commissioning Board
- Children and young people with SEND who are residents of or educated in the city
- Parents and carers of children and young people with SEND
- Professionals who work with children and young people with SEND.

ii) Summary of key findings

The following section presents a summary of the key findings from this JSNA.

Stakeholder views of an ordinary life

- Children and young people generally gave positive responses about their aspirations for the future and provided descriptions of an ordinary life that were rich and varied; full of a range of both fun and everyday activities, relationships and opportunities to make choices and take part in what they wanted to.

- Professionals focused on inclusion and equality, with inclusion commonly associated with access. This is primarily in relation to services and support but also communities, relationships and leisure – ultimately recognising the valuable contribution children and young people with SEND can make to society.

- The perception of whether children and young people already live ordinary lives differs quite significantly between children and young people themselves and the professionals who work with them. Professionals considered there still work to be done in order for this to be achieved.

- Being able to make and maintain connections with friends and the wider community, have a job and a family were key for both young people and the professionals supporting them. As part of this, it was felt that support should be tailored for each child or young person, and that this should be done as early as possible to help prepare them.

- Professionals in particular felt that a more coordinated network across SEND services and a clearer pathway for each individual to develop appropriate life skills, along with a better leisure, activity and housing offer were key to supporting young people into adulthood identified as key needs.

- Parents and carers felt that they would benefit from more support from services in Wolverhampton and that services themselves could work better together to support families. This would help families to not have to repeat their story many times.
• The need to review the leisure offer was reflected across all stakeholder groups to varying extents. Parents and carers felt particularly strongly that the leisure offer in the city was unsatisfactory.

• Parents and carers felt that it was difficult to get information about the services available to their family. This seemed to be reinforced by a lack of awareness about the Local Offer.

**Population of children and young people with SEND**

• The population of children and young people with special educational needs and disabilities in the city is dynamic and growing. There are currently 7,834 children with SEND in Wolverhampton, equating to 17.0% of the school population or one in every six children.

• There are 112.4 children with SEND per 1,000 children under 20 years of age in the city. East Park (161.1), Bushbury South and Low Hill (143.8) and Bilston North (139.9) had the highest rate of children with SEND in living locally.

• The most prevalent primary needs for children accessing SEN Support were Moderate Learning Difficulties (MLD), Social, Emotional, Mental Health (SEMH), Specific Learning Difficulties (SpLD), and Speech, Language and Communication Needs (SLCN).

• The most prevalent primary needs for children with an EHCP were Autistic Spectrum Disorder (ASD), Severe Learning Difficulties (SLD), MLD and SEMH needs.

• There are a number of categories of need that are notably different from the national presentation and this requires further exploration with key stakeholders. Locally, the prevalence of MLD is far greater, whilst SLCN, ASD and SEMH are much lower than seen nationally.

• Boys are significantly overrepresented in the cohort of children with SEND. Almost two thirds of children accessing SEN Support and almost three quarters of children with an EHCP/ Statement were boys despite making up less than half of the school population.

• Children with SEND are more likely to be excluded from school. There are 3.5 times as many children with SEND in the excluded population compared to the number on roll.

• Young people with SEND are more likely to come into contact with the Criminal Justice System at an earlier age and are considerably less likely to receive an informal community resolution outcome.
Identification and assessment of need

- Children being ready to learn at two and ready for school at five are vital foundations for good health and development. Significant efforts have been made by the Healthy Child Programme 0-19 Service to increase the number of children receiving a 2 – 2.5 year review. In 2018/9, 61.5% of children received this important health and development check, and coverage continues to improve.

- When looking at the starting points for children with SEND entering the Early Years Terrific for Twos programme, the area where development was most affected was speaking. Here all children with SEND were below expected levels of development (100%). This was followed by managing feelings and behaviours, and health and self-care (both 86% respectively).

- The increase in birth rate along with an increase in life expectancy for children born with complex disabilities and congenital conditions, an increase in the age range to 0-25 years for children with SEND, along with improved tools for identification of need have all contributed to the doubling in the number of requests for initial requests for an Education, Health and Care Needs Assessment (EHCNA) over the past four years.

- Wolverhampton currently has a zero rate of refusal for initial requests for EHCNAs. This is the lowest rate in the West Midlands and is one of only four authorities in the country that passes all initial requests through for assessment.

- There is currently no regular thematic analysis of outcomes identified in EHCPs which could limit the level of timely planning that can be undertaken at a cohort level.

Services for children and young people with SEND

- There is a wide variety of commissioned services and support available for children and young people with SEND, and their families in the city.

- The co-ordination of services and support offered through the Child Development Centre is seen as good practice. For families with older children, navigating some areas of the system is likely to present some challenges for parents and carers, and other professionals as each service has its own eligibility criteria and access point.

- CWC Education, Public Health and CCG Commissioners are working together to align the commissioning cycles and decision-making processes for Education, Children’s Community Health and Healthy Child Programme services.

- There are opportunities to strengthen the health service offer for children in special schools through the co-ordination of provision between Children’s Community Nursing and School Nursing services.
There is variation in the age range for which some services are available. This is seen particularly at the upper age limit with some services offering support up to 18 years and others up to 25 years.

Children who attend school in Wolverhampton from out of area and have an EHCP remain the responsibility of their home authority and CCG. This presents a challenge for local SEND Community Health Services to proactively plan and deliver appropriate support.

Supporting independence

Findings from the Health-Related Behaviours Survey highlight variation in self-reported experiences for children and young people across the city. These variations ranged from being more likely to have good emotional health and wellbeing to being more likely to report experiences of substance misuse and controlling relationships.

Children and young people with SEND are significantly less likely to take up the local Free Swim offer. Self-reporting, staff recording, the bright, noisy environment, and limited awareness of the offer may have all contributed to this picture. When children with SEND do take up the offer, they appear to be more engaged, with a higher average number of swims per person than their peers of the same age.

Limitations in Primary Care clinical reporting systems nationally and locally inhibit the ability of General Practices to understand their registered population of children and young people with SEND. This presents challenges when planning, providing and making reasonable adjustments within universal health services.

Whilst uptake of Learning Disability health checks nationally and locally remains below the required levels set following the Learning Disability Mortality Review, there have been some positive improvements seen in Wolverhampton’s most recent figures.

In Wolverhampton, 85.8% of young people aged 16 and 17 with SEND were in education and training at the end of 2018. This is an improving picture compared to the previous year however remains lower than the proportion of young people with SEND in education or training at regional (91.0%) and national (88.6%) levels.

Wolverhampton has a higher rate of adults aged 18-64 years with a learning disability in paid employment (6.7%) compared to the West Midlands (4.3%) and England (6.0%)

The accommodation offer for adults aged 8-64 who have learning disabilities and receive long term support from the Local Authority requires improvement. The proportion of people in settled accommodation is significantly lower and unknown
accommodation status is far higher than that seen in national and regional comparisons.

**Special education provision for children and young people with SEND**

- City of Wolverhampton has eight special schools, 11 resource bases, four pupil referral units and 98 mainstream schools.

- Wolverhampton Special Schools are net importers of students which has implications for local education and SEND community health service provision; almost one in ten students educated in Wolverhampton special schools are from another local authority area.

- Sometimes it necessary to place local children with SEND in out of City or Independent provision to meet their needs. Understanding the characteristics of this cohort provides valuable information regarding gaps in local provision and supports the development of future commissioning priorities

- Wolverhampton’s SEND cohort is dynamic; the local education estate must respond to changes in need in a timely fashion to ensure the sufficiency, efficiency and quality of provision available to children and young people with SEND.

- Adopting a pro-active and strategic approach to the planning of educational provision will enable students’ needs to be met effectively and their potential to be fulfilled.