



**BEDFORD
BOROUGH
COUNCIL**



Bedfordshire Clinical Commissioning Group



Bedford Borough SEND reforms phase 2

Children and young people with disabilities aged 0 to 25

Joint Strategic Needs Assessment January 2015

Introduction

This chapter covers the needs of children and young people with disabilities aged from birth to 25 years who have a special educational need or disability (SEND) and their families.

Definitions

The SEND code of practice defines four categories of SEND¹. These are:

Communication and interaction

Children and young people with speech, language and communication needs (SLCN) have difficulty in communicating with others. This may be because they have difficulty saying what they want to, understanding what is being said to them or they do not understand or use social rules of communication. The profile for every child with SLCN is different and their needs may change over time. They may have difficulty with one, some or all of the different aspects of speech, language or social communication at different times of their lives.

Children and young people with autistic spectrum disorder (ASD), including Asperger's Syndrome and Autism, are likely to have particular difficulties with social interaction. They may also experience difficulties with language, communication and imagination, which can impact on how they relate to others.

Cognition and learning

Support for learning difficulties may be required when children and young people learn at a slower pace than their peers, even with appropriate differentiation. Learning difficulties cover a wide range of needs, including moderate learning difficulties (MLD), severe learning difficulties (SLD), where children are likely to need support in all areas of the curriculum and associated difficulties with mobility and communication, through to profound and multiple learning difficulties (PMLD), where children are likely to have severe and complex learning difficulties as well as a physical disability or sensory impairment.

Specific learning difficulties (SpLD), affect one or more specific aspects of learning. This encompasses a range of conditions such as dyslexia, dyscalculia and dyspraxia.

Social, emotional and mental health difficulties (SEMH)

Children and young people may experience a wide range of social and emotional difficulties which manifest themselves in many ways. These may include becoming withdrawn or isolated, as well as displaying challenging, disruptive or disturbing behaviour. These behaviours may reflect underlying mental health difficulties such as anxiety or depression, self-harming, substance misuse, eating disorders or physical symptoms that are medically unexplained. Other children and young people may have disorders such as attention deficit disorder, attention deficit hyperactive disorder or attachment disorder. Previously, this was sometimes referred to as behavioural, emotional and social disorders (BESD).

Sensory and/or physical needs

Some children and young people require special educational provision because they have a disability which prevents or hinders them from making use of the educational facilities generally provided. These difficulties can be age related and may fluctuate over time. Many children and young people with vision impairment (VI), hearing impairment (HI) or a multi-sensory impairment (MSI) will require specialist support and/or equipment to access their learning, or habilitation support. Children and young people with an MSI have a combination of vision and hearing difficulties. Some children and young people with a physical disability (PD) require additional ongoing support and equipment to access all the opportunities available to their peers.

Scope

This paper has a very wide ranging scope. A high level summary of the population in scope and their needs is provided in the “What do we know?” section below. In this section we have limited the information presented to an overview of the population and their current and projected needs. A great deal more detailed data and information has been sourced but it is not presented here unless it is required to support a recommendation or finding.

This chapter, because of its wide scope, overlaps with other chapters in the JSNA. We have not duplicated findings or analysis in these areas in this chapter. In particular there is overlap with the following chapters:

- 12 Child and Adolescent Mental Health
- 23 Children Looked After
- 24 Children in Need
- 32 Adults with Learning Disability
- 33 Adults with Autism
- 38 Housing

This is also the first time that a JSNA has been prepared specifically for children and young people with SEND. Therefore there are no previous recommendations or data to draw upon.

Context

This paper is prepared in the light of new legislation, the Children and Families Act which outlines legal requirements on Education, Health and Care providers. It also specifies what they must do individually and how they must work together both strategically and operationally. The code of practise makes specific reference to the role that the JSNA plays in this regard².

In Bedford Borough, the council (BBC), Bedfordshire Clinical Commissioning Group (BCCG) and the Parent Carer Forum (BBPCF) are working together to plan and implement the requirements of the Children and Families Act. A target state and workplan has been agreed and distributed to the Health and Wellbeing Board. A number of the recommendations in this report will be addressed in this programme of work.³

Data available

There are a number of factors that need to be highlighted with regards to the data and information that is presented here.

Types of data and information available

There are four types of data and information that have been referenced in this chapter. Each has its relevant strengths and weaknesses.

1. Actual data from commissioners / services providers

This is the most reliable form of data in that it is sourced locally and can be fully reconciled back to individuals in Bedford Borough. However, this data tends to be very narrow and specific in nature and is often compiled using different bases (e.g. age groups). Therefore, it does not provide a complete picture of the population in scope for this paper.

2. Projected / predicted numbers

These have been prepared based upon the hard data sourced as above to fill in gaps where hard data is not available. Whilst this is based on real local numbers, any projections or predictions are clearly only as good as the assumptions made. All assumptions are made explicit when using this data.

3. Prevalence data

This sourced from national archives and analysis and is based upon an understanding of how national trends would apply to Bedford Borough. However, given the relatively small size of Bedford Borough such statistical estimates based on national trends may be only directional in nature.

4. Focus groups and anecdotal feedback

This can type of information is useful for highlighting and confirming trends and themes that may not otherwise be evident from the types of data above.

Incomplete / unavailable data

This is the first time that a JSNA for children and young people with SEND has been prepared. Therefore, a good deal of time has been spent understanding what data is available and how it can be reliably sourced. There are a number of areas where more analysis is required. In particular:

1. There are overlaps and gaps in the data in the 16-25 age group. This is because this is the point at which children's services end and adult services begin. Different agencies hand over at different ages between 16 and 19. In addition adult services do not always break down information between those under and those over 25.
2. Children's social care in Bedford Borough is in a process of transition. We have been able to source very little data from this group.
3. Financial information about how much each service spends on each area of SEND has been difficult to source in all but a few areas.

The recommendations section below indicates those areas in which more analysis is required.

Directional information

These factors mean that it is impossible to pull together a single, holistic picture of the population covered by this analysis. However, some very clear directional messages, trends and themes emerge that provide a clear set of recommendations for the design, commissioning and delivery of services in Bedford Borough.

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What do we know?

Facts, figures and trends - General

50000

The number of young people aged 0 to 25 in Bedford Borough⁴. This is predicted to grow to 54300 by 2025⁵

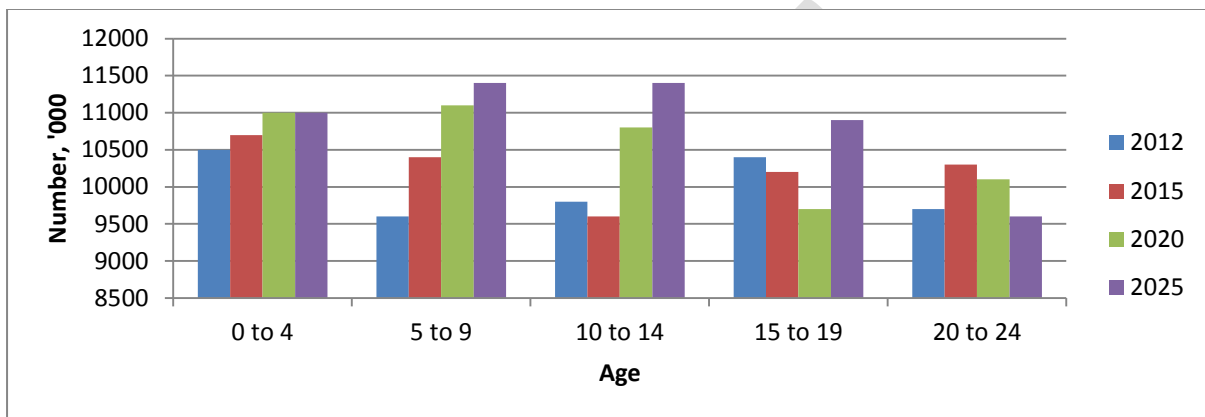


Fig 1. Source: Office of National Statistics 2012

7115

The estimated number of young people living with longstanding illness or disability in Bedford Borough of which 3944 are boys and 3171 are girls⁶.

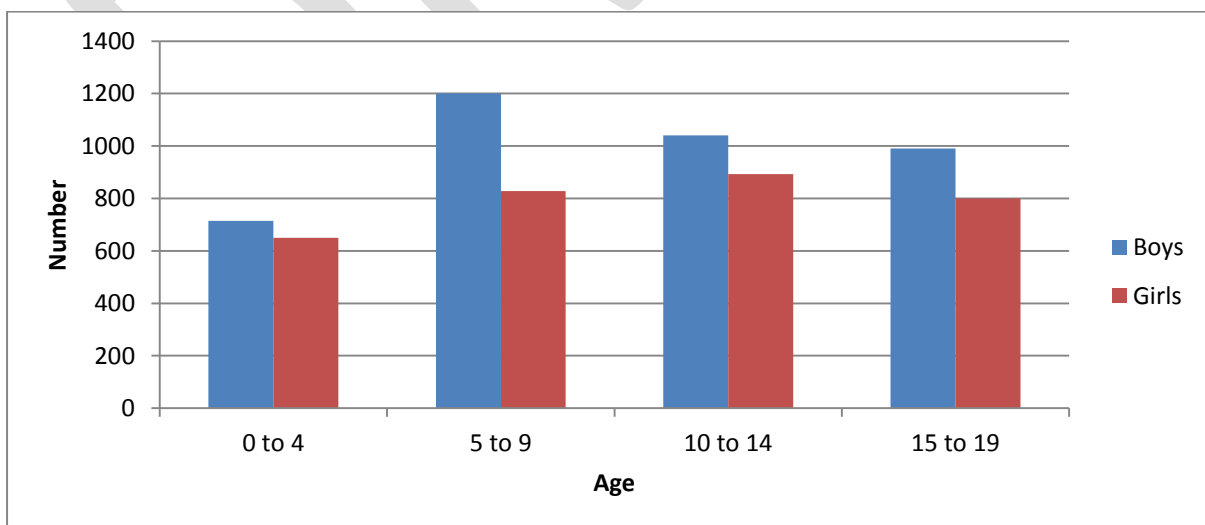


Fig 2. Source: ChiMat, Disability Needs Assessment, Bedford Borough

The key available outcome indicator for disabled children is the parental experiences of provided services undertaken in 2009/10 for which the overall score for Bedford Borough was 62.0, with a higher score indicating greater satisfaction. The overall national indicator score for 2009-10 was 61 out of 100. The overall score is based on an average of fifteen sub-indicators which each cover one of the five elements of the Aiming High for Disabled Children Core Offer (see note 1 at the end of this report for further details) in one of the three broad service areas of health, education and care & family support. The five elements are: good provision of information,; transparency in how the available levels of support are determined; integrated assessment; participation of disabled children and their families in local services; accessible feedback and complaints procedures.

	Health	Education	Care & family support
Information	64	65	67
Assessment	73	78	74
Transparency	97	91	93
Participation	66	48	62
Feedback	10	20	17

Fig 3: ChiMat Disability needs assessment, Bedford Borough.

Facts, figures and trends - Education

823

The actual number of statements and Education Health and Care plans (EHC plans) in Bedford Borough.⁸

This can be analysed by diagnosis or category of SEND as follows:

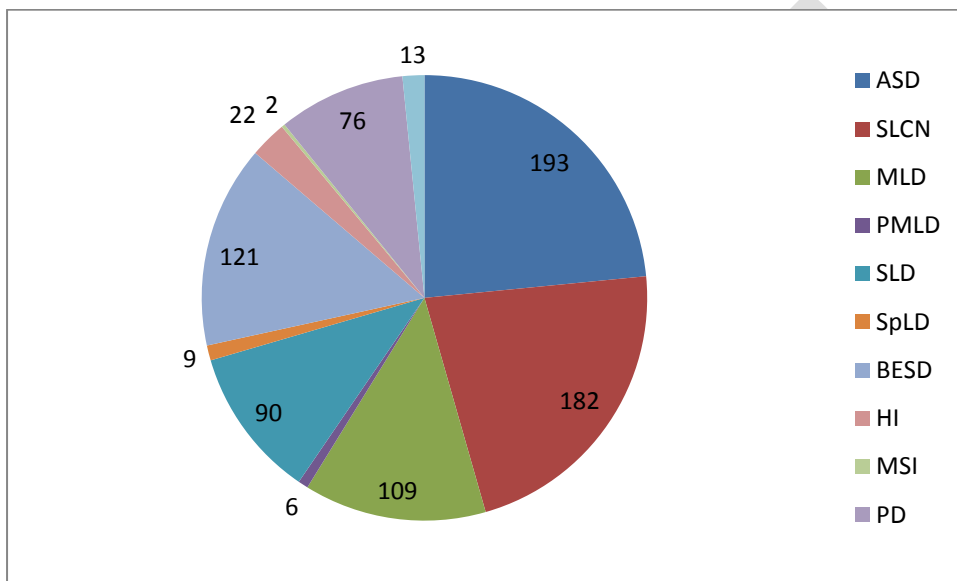


Fig 4. Source: Bedford Borough SEND Team

2.8%

The percentage of school age young people (3 to 19) in Bedford Borough (and nationally) that have a statement.⁹

1400

The predicted number of EHC plans in Bedford Borough if the 2.8% above is applied to the total population of young people eligible aged 0 to 25. This grows to 1520 by 2025.

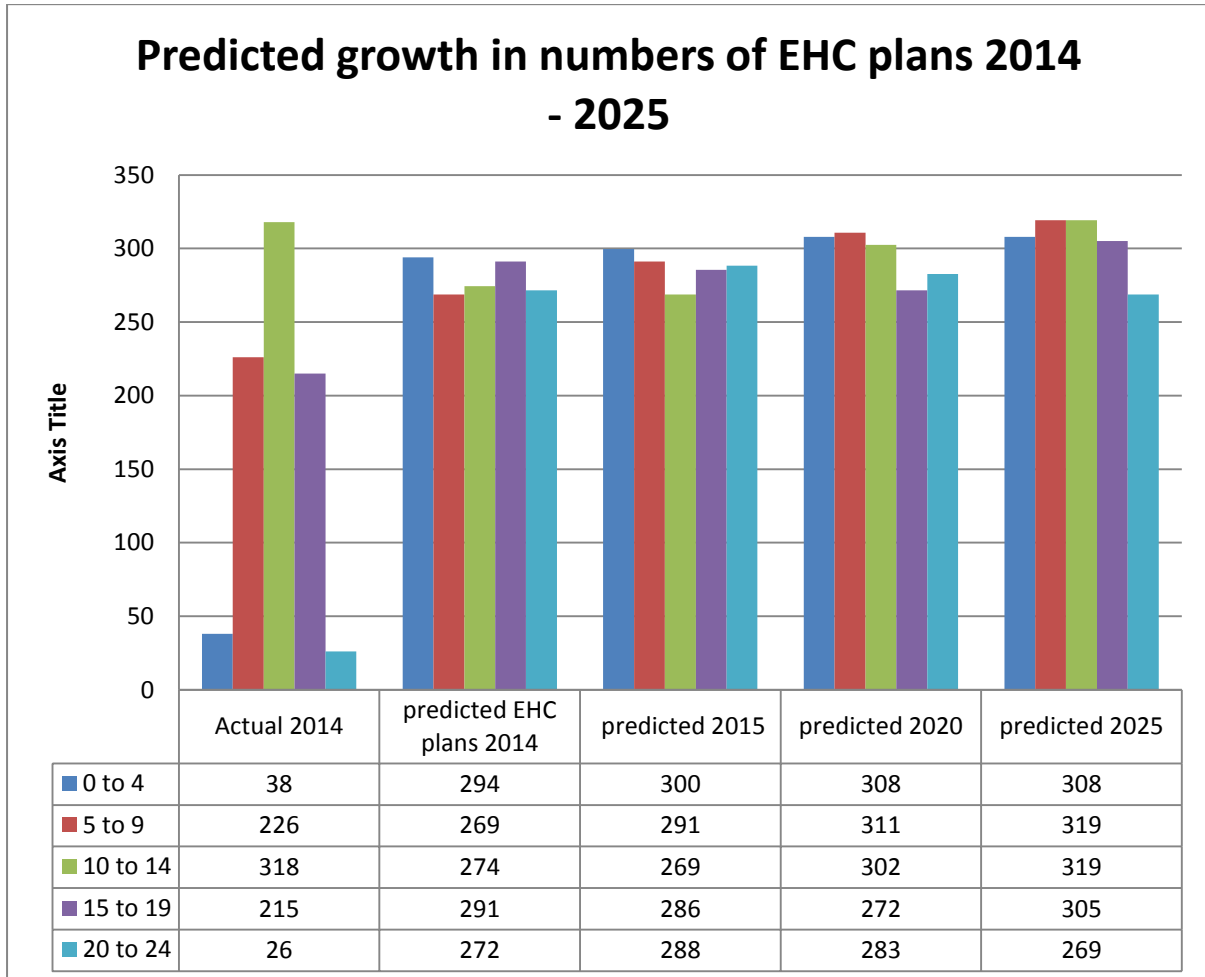


Fig 5. Calculated data based on 2.8% as above applied to ChiMat demographic projections

The projected number of young people with categories of SEND can be analysed as follows:

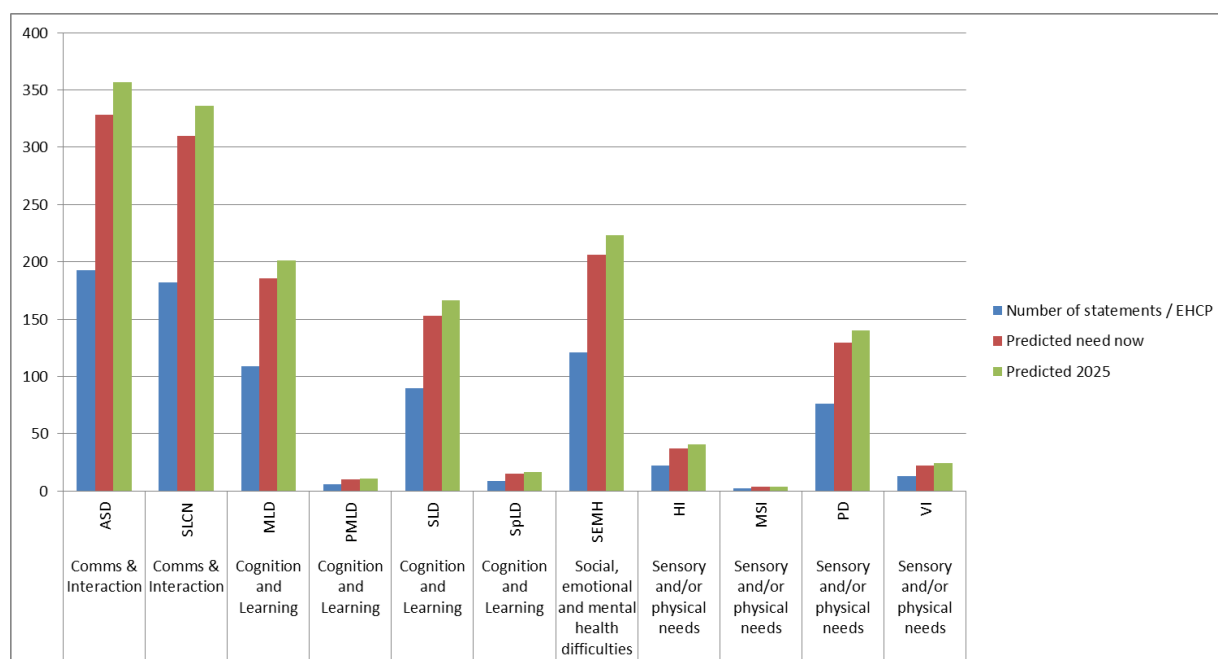


Fig 6. Calculated data based on current prevalence levels in Bedford Borough applied to ChiMat demographic projections

100

The estimated number of additional special school places that Bedford Borough will need by 2025. The current number of school age statements and EHC plans in Bedford Borough numbers 759, of which 40% attend special needs schools. This is projected to grow to 943 by 2025. This generates an increase of 73 places in 10 years. In order to accommodate demand from other areas this is likely to grow to 100 places.

	ASD	SLCN	MLD	SLD	SEMH	SpLD	PD	PMLD	MSI	HI	VI	Total	Bedford Borough pupils	Top up Funding (BB pupils only)
Grange	9	6	81	1	0	0	0	0	0	2	0	99	91	320,675.08
St Johns	53	12	4	66	0	0	9	7	1	0	0	152	134	1,457,795.72
Ridgeway	1	0	0	1	1	0	61	0	0	0	0	64	45	493,316.19
Independent OOB	3	1	3	2	22	0	0	0	0	1	0	32	32	2,131,739.29
Totals	66	19	88	70	23	0	70	7	1	3	0	347	302	4,403,526.28

Table 1: Analysis of special school pupils by school and diagnosis¹⁰

32

The number of young people in out of borough school placements. This is at a cost of £1.9m per annum¹¹.

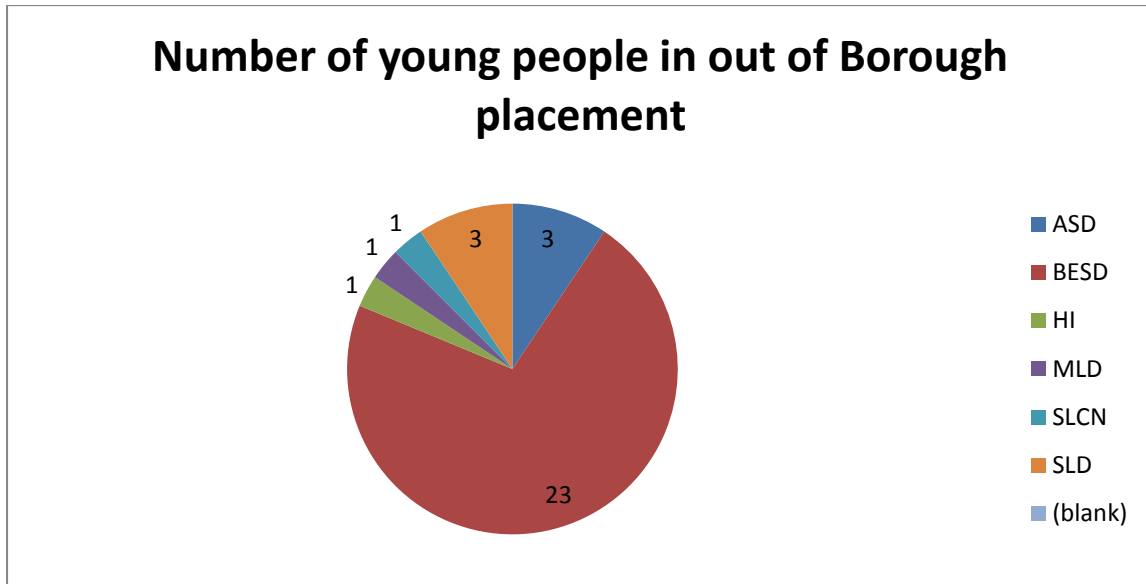


Fig 7: Source Bedford Borough Council SEND team December 2014

Top 10%

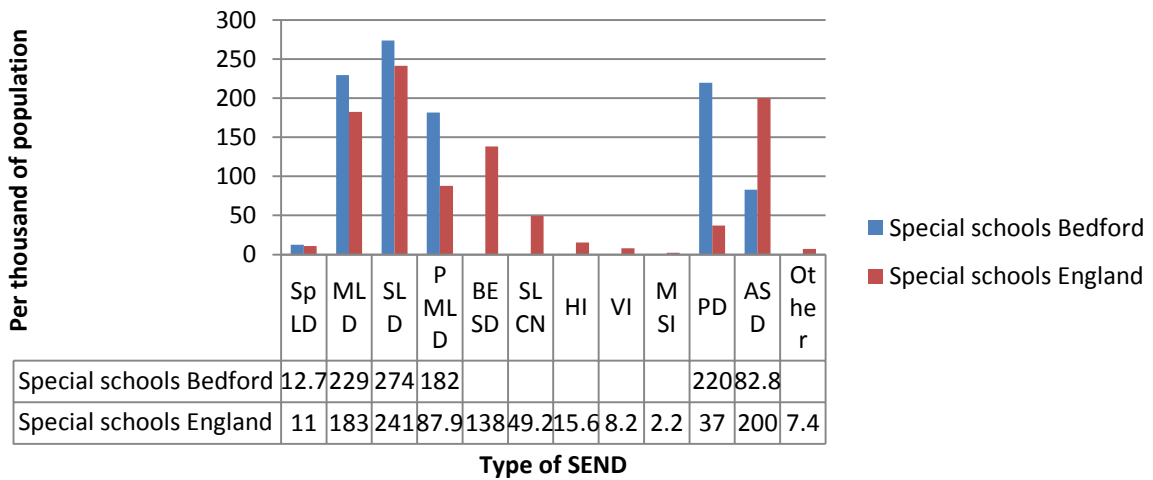
The ranking for Bedford Borough for numbers of SEND tribunals every year.

Bedford Borough has had 22 SEND tribunals since April 2009. This equates to 1.61 tribunals per 10,000 of school age population each year (school age population is approximately 30,000). This is in the top 10% of local authorities nationally. Typically the number of tribunals per annum per 10,000 of school age population range from 3 to 20. The worst performing local authorities have up to 140 per 10,000 of population per annum.¹²

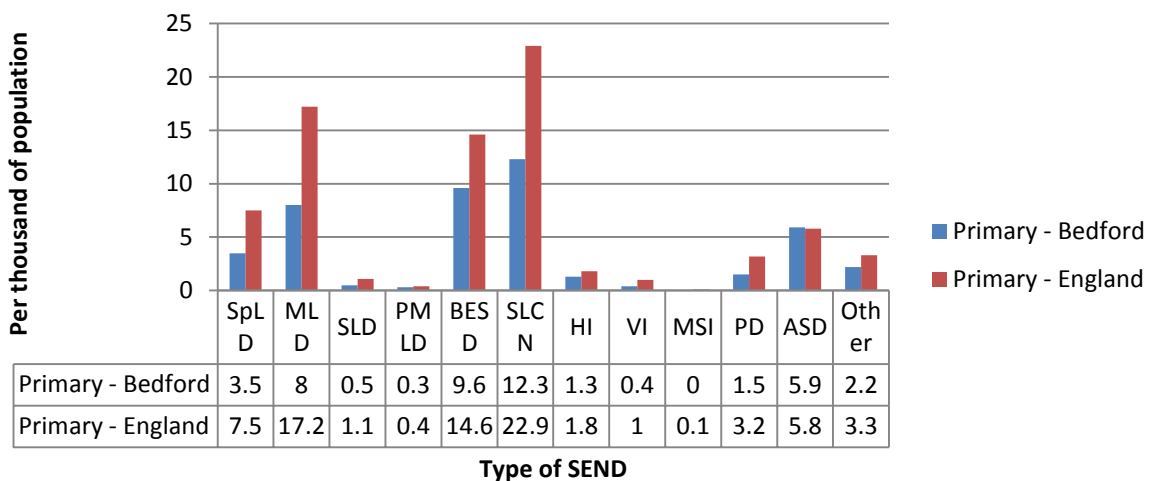
594%

The percentage the special school population in Bedford Borough with a physical disability compared to the national average. Statistics show that inclusion rates in Bedford Borough are much lower than nationally with the exception of young people with autistic spectrum disorder.¹³

Type of SEND per thousand of population in Special Schools



Type of SEND per thousand of population in Primary Schools



Type of SEND per thousand of population in Secondary Schools

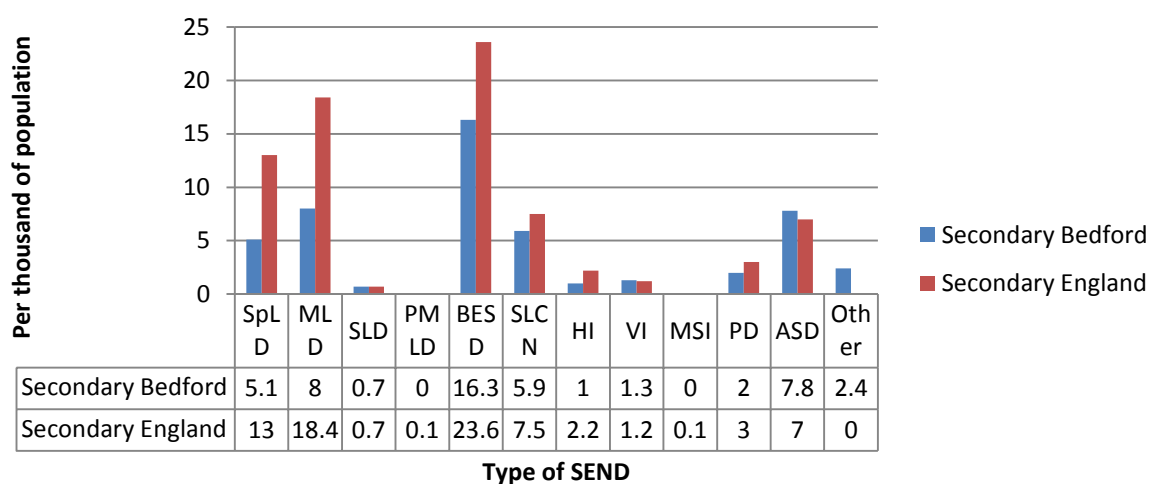


Fig 8,9 &10. Source: ChiMat Disability needs assessment, Bedford Borough

804

The number of people attending Bedford College that receive additional assistance as a result of SEND. This number includes Bedford Borough, Central Bedfordshire and beyond.¹⁴ This may also include people over the age of 25.

Year	2011-12	2012-13	2013-14
Dyslexia	137	221	225
Literacy and/or numeracy	208	140	41
Hearing Impairment	29	26	38
Other medical condition	39	31	45
Emotional/behavioural difficulties	11	22	43
Moderate learning difficulty	49	58	107
Dyspraxia	16	20	32
Mental ill health	9	15	21
Visual impairment	7	16	9
ADHD	27	28	27
Other physical disability	5	7	11
Disability affecting mobility	4	10	17
Aspergers Syndrome	35	53	63

Other specific difficulty	11	7	12
Dyscalculia	2	6	9
Temporary disability	1		1
ESOL	24	21	
Severe learning difficulty	3		12
Multiple learning difficulties	3	50	8
Dysgraphia	2	1	1
Autism	15	46	62
Multiple disabilities	1	3	7
Brain Injury	3	3	1
Cerebral Palsy	2	3	2
Downs Syndrome	1	8	5
Scotopic sensitivity	5	2	1
Speech and Language	3	3	4
Totals	652	800	804

Facts, figures and trends - Health

2197

The average number of monthly contacts by community health services supplied by Bedfordshire Clinical Commissioning Group in areas directly linked to SEND (note this is a number for Bedford Borough and Central Bedfordshire)¹⁵.

Community Health Services - average number of monthly contacts 2013-14

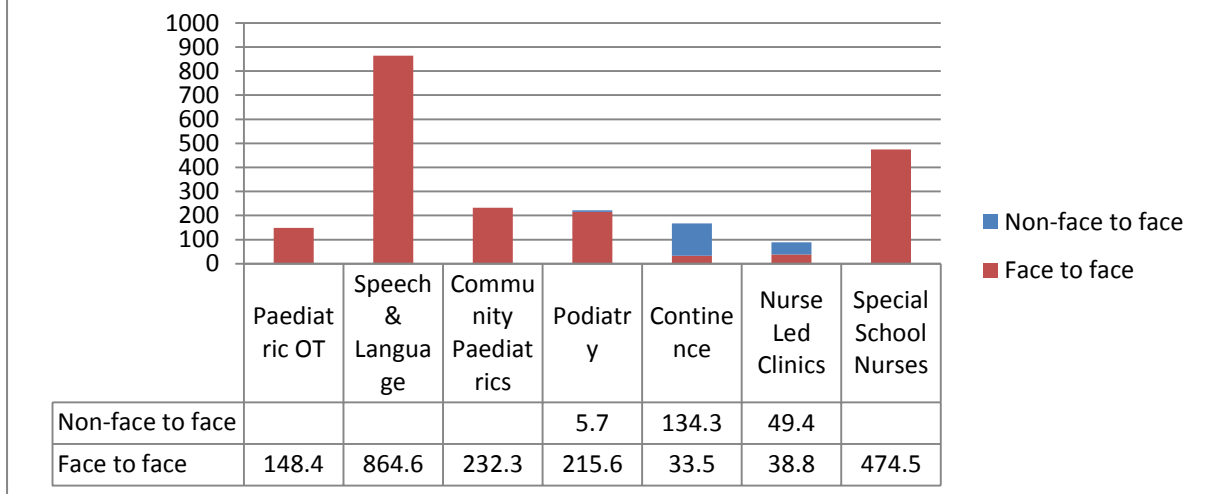


Fig 11. Source Children and Young People's service activity data, SEPT report January 2014

16

The number of young people in Bedford Borough receiving support from the continuing care team. 3 of these receive nursing support.

Facts, figures and trends – Social Care

1510

The number of young people (ages 0 to 25) in receipt of disability living allowance in Bedford Borough.¹⁶

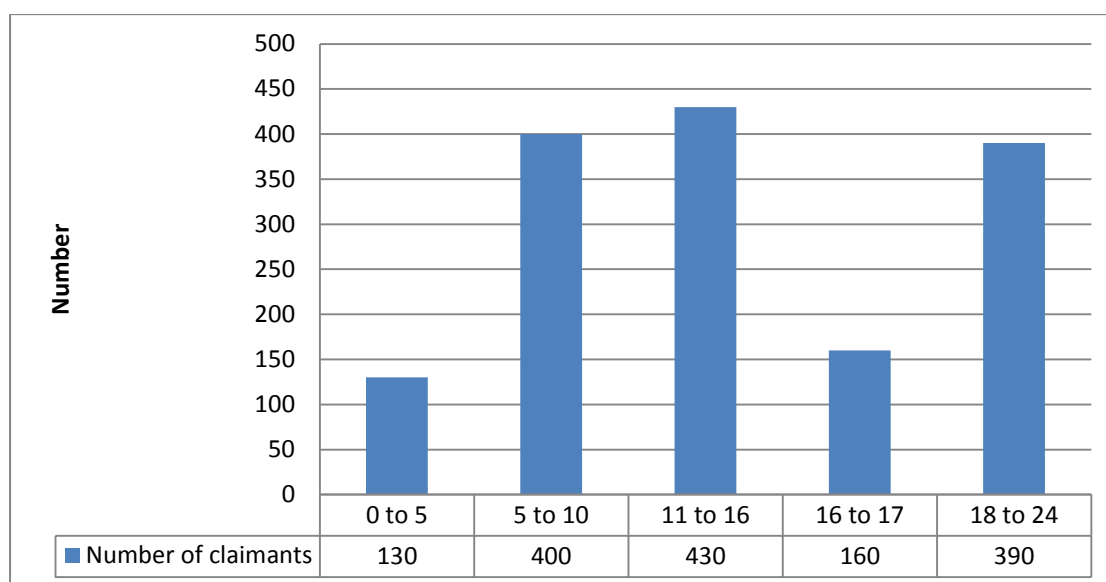


Fig 12. Source: Department for Work and Pensions

177

The number of identified children in need known to Bedford Borough social services because of a disability.¹⁷ This number covers ages 0 to 16.

121

The number of young adults aged 18 to 25 in receipt of social care services in Bedford Borough.¹⁸

Disability	Residential Care	Community Based Services	Grand Total
Physical disability, frailty and sensory impairment		26	26
Learning Disability	8	87	95
Grand Total	8	113	121

Table source: Bedford Borough Adult Social Care Team, SWIFT system

Of these:

67 receive personal budgets

33 receive direct payments

85 are in settled accommodation



The number of young adults aged 18 to 25 with SEND known to social services in employment



The number of young people aged 16 to 25 in care because of SEND. Of these 5 are in shared lives, 8 in supported living and 3 in residential care.

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Current activity and services

We do not provide an analysis of current activity and services in this document. This is because there are too many different services and provisions accessed by this section of the population.

The Children and Families Act requires that the local authority publishes a “local offer” of services that are likely to be accessed by young people with SEND and their families. The SEND code of practice outlines what the local offer must contain.¹⁹

Bedford’s local offer currently contains 419 services, policies and listings. There are gaps in this, both in services that are available but not yet listed and services that are required and are provided. Identifying and closing these gaps is one of the explicit requirements of the local offer and is being addressed under the SEND reforms phase 2 programme of work²⁰

Bedford Borough’s local offer can be found at <https://sendguide.bedford.gov.uk/>

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Analysis and recommendations

General

1. Early years

Figure 5 above shows that there is a gap between the number of children aged 0 to 4 years that have a statement and the number of children aged 0 to 4 years that we could expect to have an EHC plan if the local and national prevalence rate of 2.8% is applied to all children in the 0 to 4 age group. There are currently 28 children aged 0 to 4 with a statement, and we can expect 294 children in this age group to require an EHC plan. This represents a gap of 256 children.

Part of this is explained by the different criteria applied to statements and EHC plans (statements are predominantly for school age children whereas EHC plans are applicable from birth). However, more work needs to be done to ensure that children with SEND are identified and services and support are put in place early.

- Bedford Borough is reviewing its early years and early intervention approach at present, this recommendation should be addressed as a part of this work led by Frances Cox and Wendy Beeton-Townshend.
- In addition, we recommend that appropriate resources are made available to the SEND team to manage this increase

2. Preparing for adulthood

Figure 5 above shows a drop off in the number of statements for the 20 to 24 age group. We currently have just 26 statements for this group. Young people are eligible for an EHC plan up to the age of 25. If national and local prevalence data for the expected number of EHC plans is applied to the population of young people aged 20 to 24, we would expect there to be 272 EHC plans required. This represents a gap of 246 young people.

- We recommend that appropriate resources are made available to the SEND team to manage this increase.

Parents and carers of young people going through transitions and preparing for adulthood report that there are numerous issues and disconnects in the move between children's and adult services. In the BBPCF report into social care²¹, introductions and transitions was highlighted as an area of concern. Similarly, in the BBPCF open meeting on 12 December 2014 (report being drafted) the following concerns we raised about preparing for adulthood: availability of respite / holidays; better communication about what services are available; employment and training opportunities; supported and independent living; transitions between children's and adult services. In particular employment amongst this group is pitifully low.

- As a part of the SEND reforms phase 2 work, a preparing for adulthood work stream has been identified. We recommend that this work stream is established to address these concerns and appropriate resources made available.

- We recommend that the integration of adult services and children’s services at Bedford Borough currently proposed by Kevin Crompton should be used as an opportunity to embed best practise and address parental concerns about dis-connected services during the transition to adulthood.

3. Multi agency working

One of the key tenants of the Children and Families Act²² is that different agencies should work together more closely to improve outcomes for young people with SEND. In order to do this we need to:

- implement a programme of workforce development across education, health and care providers to ensure they understand the legal framework for the new system and share the same ethos that will enable joint working.
- Remove the barriers that prevent effective cross agency working. All contracts should stipulate that attendance at multi-agency meetings is required, there should be joint management team meetings across services, there should be combined staff meetings where appropriate.
- Establish a process that enables services to be jointly commissioned together across service providers.

4. The local offer and gaps in services

The Children and Families Act²³ stipulates that one of the objectives of the local offer is that it should be used to identify gaps in local provision.

- We recommend that the appropriate resources and processes be made available to the SEND phase 2 local offer work stream to ensure this happens

Education

5. Inclusion rates

Inclusion rates for young people with SEND are significantly lower in Bedford Borough than across the country with the exception of young people with ASD where inclusion rates are higher than the national average. This is particularly prevalent for young people with physical disabilities. This supports anecdotal evidence from parents that they have found it difficult or a battle to get their children into mainstream schools. Barriers such as timetabling, inappropriate buildings and availability of special needs schools have been cited as reasons. There is a danger that young people with are being denied equal access opportunities to the educational settings of their choice.

- More research needs to be undertaken to understand the root causes of this significant discrepancy. Once causes are identified any causal issues must be addressed.

6. Number of special school places

As the school age population grows we estimate that up to 100 additional special school places will

be required by 2025. The schools and the council must ensure that adequate plans are in place to accommodate this increase in requirements. In particular, the Grange academy school be supported in its move to provide education up to 19 (currently it stops at 16) and capacity and building issues at St John's must be addressed.

This recommendation needs to be considered with reference to item 5 above and the findings there.

7. Provision for young people with SEMH

There are 32 young people in out of borough school placements from Bedford Borough (see fig. 7) at a cost of £1.9m per annum. Of these 23 are because of SEMH. The total cost of these 23 placements is in excess of £1m per annum. In addition to the financial cost there is clearly an additional emotional toll caused by the dislocation that many families and young people will feel as a result of an out of borough placement.

- We recommend we should investigate the options available to the Borough to set up an appropriate BESD provision. All avenues should be investigated with the Department for Education.

Health

8. Speech and Language therapy

Fig 11 shows that speech and language therapy (SALT) in Bedfordshire has over 850 contacts per month. There are 416 children in mainstream schools in Bedford Borough and 147 in special schools that receive speech and language therapy. Over the last 4 years there have been in excess of 1000 referrals to SALT across the whole of Bedfordshire each year²⁴. In addition, we are aware that many families engage independent speech and language therapists to work with their children. Anecdotally, schools, parents and therapists report an increasing pressure on services.

- Look at the commissioning arrangements for SALT in Bedford Borough to see how additional capacity can be created through renewed contracts and joint commissioning.

Social care

9. Children's social care team

Bedford Borough is currently conducting a review and re-organisation of its social care teams and is in the process of aligning the children's and adult services directorates. In March 2014 BBPCF published a report into social care provision for children with disabilities. Since then the anecdotal evidence suggests that there have been more issues with the children with disabilities team and the service provided to families.

- We recommend that the children's social care team works with parents and families to design, implement and communicate an improved service experience for users.
- We recommend that the findings of the report cited above are implemented.

10. Children's social care data

We have found it difficult to access certain key data about children's social care provision in Bedford Borough. Information such as an analysis of children with SEND known to social services, the type and severity of their needs, the type of support and services they receive has not been available.

- We will continue to work with the social care teams in Bedford Borough to access this information and incorporate it into this report.

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- ¹ Department for Education and Department of Health SEND code of practice: 0 to25 years June 2014 section 6.28 to 6.35
- ² Department for Education and Department of Health SEND code of practice: 0 to25 years June 2014 section 3.20 to 3.24
- ³ SEND phase 2 Target State document, BBC, BCCG & BBPCF
- ⁴ Office of National Statistics 2012
- ⁵ ChiMat Bedford Borough demographics report
- ⁶ ChiMat disability needs assessment, prevalence data
- ⁷ ChiMat Disability needs assessment, Bedford Borough
- ⁸ Data supplied by Bedford Borough SEND team as at November 2014
- ⁹ Bedford Borough Council, Children’s services, Business support report, September 2014
- ¹⁰ Bedford Borough Council SEND Team
- ¹¹ Bedford Borough Council SEND Team, out of borough placements data December 2014
- ¹² SEND Tribunal survey August 2014 and Bedford Borough figures from Bedford Borough SEND Team
- ¹³ ChiMat Disability needs assessment, Bedford Borough
- ¹⁴ Bedford College Self Assessment Report for Additional Support 2013-14
- ¹⁵ Children and Young Peoples Service Activity Data January 2014, SEPT
- ¹⁶ Department for Work and Pensions 2014
- ¹⁷ ChiMat, Social Care Report, Bedford Borough
- ¹⁸ Bedford Borough Adult Social Care team
- ¹⁹ Department for Education and Department of Health SEND code of practice: 0 to25 years June 201, chapter 4
- ²⁰ SEND phase 2 Target State document, BBC, BCCG & BBPCF
- ²¹ BBPCF Social care provision for children with disabilities February 2014.
- ²² Department for Education and Department of Health SEND code of practice: 0 to25 years June 2014 chapter 3
- ²³ Department for Education and Department of Health SEND code of practice: 0 to25 years June 2014 chapter 4
- ²⁴ Bedfordshire speech and language therapy team data December 2014