

REVIEW OF THE LOW INCIDENCE NEEDS SERVICE – REPORT

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Introduction

The last few years, particularly since 2011 has been a period of change for Local Authorities and their SEN duties.

The Local Authority statutory duty is to ensure there are sufficient and suitable resources and expertise for hearing and visual impairment, for children and young people aged 0-25¹ working with other educational partners, health and social care as set out in Part 3 of the Children and the Families Act 2014 and the new Special Educational Needs Code of Practice.

Schools and education authorities also have a duty to provide reasonable adjustments under the Equality Act 2010.

Section 22 of the Children and Families Act 2014 requires that the LA identify children who have a disability as well as those who may or may not have a SEN.

The review has taken place within the context of the changing national and local context which includes:

The SEN reforms – which have extended SEN provision from birth to 25 years of age. The new system extends rights and protections by introducing a new Education, Health and Care plan. Recommendations take account of five key areas in the SEND Code of Practice, to ensure the needs of children with sensory impairments are met.

- Data Collection (Section 3.28 and Section 3.27-3.30 of the SEND Code of Practice).
- Consultation, Involvement and participation in service development and improvement (Section 4.9)
- Local Offer Development (Section 4.8)
- Identification of needs to inform targets, strategies and plans in consultation with qualified specialist teachers (Section 9.49)
- Regional Commissioning (Section 3.68)

The Children's and Families Minister, Edward Timpson invited OFSTED, on 17 December 2014, to formally inspect local areas on their effectiveness in fulfilling the new SEN duties.

Funding – the Dedicated Schools Grant (DSG) high needs funds this provision. As reported at the School Forum meeting on 13 January 2015, it is clear that unless future years DSG grant allocations are increased then it will be difficult to balance the budget.

Monitoring – it is necessary to have a contract and detailed specification in place for all DSG funded services. This will allow the School Forum to monitor the service in future years.

¹ The School Finance regulations state that the DSG should be used to fund educational support for under 2's.

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Service Objectives and Vision

The objectives for the service have been set to ensure that children and young people with low incidence needs:

- make good educational progress and reduce or close any attainment gap that was existing between them and their peers on entry to school;
- are happy at school, feel included and fully participate in the life of the school;
- move successfully on to a new school, or transition to post 16 which may be further education and colleges.

All Children and young people should expect to be educated in their local mainstream school. Therefore all mainstream schools should have the capacity, competence and confidence to provide for pupils with additional educational needs and/or disabilities, with resources allocated to ensure maximum value for money. Services should be focused, flexible and responsive to local needs, they should be fit for purpose, monitored for impact and performance, and open to change where needed.

The Dedicated Schools Grant (DSG) high needs funds this provision. As reported at the School Forum meeting on 13 January 2015, it is clear that unless future years DSG grant allocations are increased then it will be difficult to balance the budget without the need for reduction in provision in some budget areas.

The School Forum have recognised the value of the SEN support services funded through the Dedicated Schools Grant, and have commissioned a review of these, including the Low Incidence Needs Service.

Review Methodology

The initial stage of the review required that in order to fully understand the needs of children requiring these services, a range of information and papers were considered, including national articles, guidance and previous review reports and case studies (listed at end of this report).

A range of research techniques were employed in order to gain as wide an understanding as possible. These include:

- desk based research;
- work shadowing and observational visits to schools;
- interviews with a range of staff and who hold key roles within services;
- interviews with heads of schools to gain views;
- meetings with other partners including Public Health; NHS England Commissioning; County Darlington and Durham NHS Foundation Trust;
- meeting with Parents Forum.

The officer has spent time to support the services to complete the 'service review' forms (presented to the School Forum in October 2014), in order to summarise performance,

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evaluate success and consider key learning points. This has provided a summary benchmark of the current service position, and fed into development of current service specifications.

Initial themes and areas of concern were highlighted which have been further investigated, alongside a review of service indicators, budget and a consideration of national and local data.

Service Description

The service supports children and young people ages 0-16, with visual and hearing impairment. Children with Down Syndrome and children with a physical and/or medical need receive support from ages 5-16.

These children are 'low incidence' but often have a high need. Most mainstream teachers and staff will not have gained training or have recent experience in teaching children with low incidence needs, therefore qualified teachers and specialist workers support these children on an outreach basis primarily in mainstream, some in special provision.

The team comprises of a Qualified Teacher for Vision Impairment, two Teachers of the Deaf (TOD), one Hearing Impaired Family Support Worker, and an Advisory Teacher for Down Syndrome. The SEN Code of Practice cites Teachers of the Deaf (TOD) as key professionals that could be involved in educational provision for deaf children (para 5.16). TOD are teachers with an additional specialist mandatory qualification.

Provision for 0-16 low incidence needs is available up to transition but does not extend beyond 16 to all providers. Transition support includes reporting on students and attending transfer annual reviews for pupils with a statement and liaising with FE and sixth form colleges before transfer offering in-service training to tutors. The service provides some support to young people 16-19 following transition, but this is on a case by case basis and capacity is limited to extend this to all providers.

All advisory staff provide necessary training, resources and support to school staff. They work closely with parents and the wide range of professionals from Education, Health and Social Care.

The service is primarily provided in mainstream schools where LIN is the child's primary need, however, support is provided at Beaumont Hill Academy, Primary and Secondary, for children as they often require specific support.

An outreach service from Beaumont Hill is provided for children below statutory school age with complex needs and supports the work of the Early Years advisory teacher. The service supports staff and children at Beaumont Hill Academy.

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Children with complex hearing impairment (with statements), may attend out of authority provision (Sunnyside Academy Resource Base²).

Day to Day Support - Summary

Early Years

Support for babies and pre-school children from the LINS may include all or some of the following as appropriate:

- visits to the home or pre-school setting
- joint visits with other early years agencies such as Early Life Stages Service or local speech and language therapy services
- liaison with key workers and SENCOs in early years settings
- advice and training on individual hearing losses and discussion regarding clinic appointments
- advice and training on individual vision impairment and strategies for making the most of vision which does exist.
- help with hearing aid care and maintenance
- advice on strategies for successful hearing aid use and development of language and listening skills
- provision of written information and signposting to agencies and organisations which support
- information regarding communication options and support to develop communication skills through the preferred communication modes of families
- assessment of speech, language, listening and communication skills
- opportunities for families to meet other parents and hearing impaired children
- advice on school entry including information on any local resource provision
- support and advice for the Statutory Assessment process if appropriate
- close liaison with receiving schools before transfer to Year R
- advice on equipment / toys that may be beneficial for visual impairment

School Age

Support for a child or young person at school may include all or some of the following as appropriate:

- providing in-service training for school staff to promote understanding and appropriate classroom and individual support
- helping pupils to understand their impairment and its effects and providing awareness sessions for other pupils
- testing and monitoring use of hearing aids and other audiological equipment such as radio aids
- regular discussion and review of pupils' needs with teachers, SENCOs, Learning Support Assistants (LSA's) and the pupil themselves if appropriate
- observing pupils in whole class/small group/one-to-one sessions
- working with a pupil on an individual basis to model ways of working with LSAs
- carrying out regular listening and language assessments
- contributing to target setting in Individual Education Plans (IEPs)

² All Children who attend the base are integrated into mainstream but may be withdrawn for individual lessons in Braille, mobility etc

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- providing reports for Annual Reviews and attending review meetings
- contributing advice to support the Statutory Assessment process if appropriate
- liaising with other professionals.
- assessment for suitable equipment and training in the use of Low Vision Aids where appropriate
- access to information about accessing large print and materials in alternative formats
- advice and training to staff in the preparation of learning materials, and alternative reading and recording methods
- Fine motor skills assessment
- Touch typing advice
- Gross motor skills assessment/general advice regards inclusive PE.

Transition

Support for transition to post 16 may include all or some of the following as appropriate:

- reporting on individual students and attending transfer annual reviews for pupils with a statement prior to starting college
- liaising closely with further education (FE) and sixth form colleges before transfer
- offering in-service training to tutors and peer awareness session
- Mobility and Independence Skills assessment: training for child and school staff

Moving and Handling

LINS provide training to ensure staff involved with Moving and Handling (M&H) children have appropriate knowledge about safe M&H and are able to undertake dynamic Risk Assessments Working with staff to ensure there is a safe system of work in place; guidelines suggest this is updated when there is a new piece of equipment or annually whichever is sooner. Liaison with the Occupational Therapist and Physiotherapist to help ensure the child's safety.

National Hearing Screening Programme

Support to families of newborn's with hearing loss is provided by a Teacher of the Deaf, (TOD).

The LINS support the objectives of the National Hearing Screening Programme (NHSP³), monitored by the County Durham and Darlington Hearing Screening Group.

The aim of the NHSP is to ensure optimal development of language and communication in children born with moderate to profound permanent bilateral deafness. The objectives of the programme is, in part, to identify all children born with moderate to profound permanent bilateral deafness within four-five weeks of birth and to ensure

³ NHSP aims to identify moderate, severe and profound deafness and hearing impairment in newborn babies.

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the provision of safe, high quality age-appropriate assessments and world class support for deaf children and their families.

The service will be notified by the lead audiological clinician that there is a deaf child under two years of age, within one working day of confirmation and the service offers families a visit within two working days. This is available 52 weeks of the year.

Physical / Medical Needs

To ensure children with physical or medical needs can access the national curriculum, they and their teacher/teaching assistant/school SENCo, needs a variety of support including:

- Joint working with Health OTs to establish pupil needs for the purpose of accessibility and inclusion in all areas of the school;
- School environmental assessments for provision of equipment and adaptations followed up by reports with recommendations for schools to consider;
- Training in the safe use of the equipment supplied in schools;
- Support for schools to request specialist equipment ;
- Manual handling training and support in writing safe moving and handling profiles if needed;
- Advisory support in school risk assessments and pupil care plans,

Access and Referrals to the Service

Schools are requested to complete a 'request for involvement' form with the involvement of medical professionals in the case of HI or VI, together with a parental consent form.

When a child/young person is referred to the service, the level of need (mild, moderate, severe and profound sensory impairment), is assessed based upon the National Sensory Impairment Partnership (NatSIP)⁴ guidelines. The LINS support all children that meet every level of the criteria, from mild to profound. The guidelines set the number of visits children should expect, this drives staff requirements.

In a review of Local Authority provision⁵, 85% of all Local Authorities use NatSIP criteria as it is useful for benchmarking purposes. In the same review, it was shown that some LA's have withdrawn support from those children with mild impairment, and pupils with complex needs in special schools have had their service support reduced or withdrawn in some LAs over the past year. However, other LAs have increased support to certain groups of pupils including pupils in special schools.

⁴ In April 2013, NatSIP bid for and won a contract with the Department for Education (DfE) which includes an outcomes benchmarking workstream. This concentrates on the production of national annual benchmark results which provide reliable data for use by local authority Sensory Support Services to help evidence their impact against agreed national Quality Standards and to inform service development.

⁵ RNIB January 2015

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Data Review

Children and young people with low incidence needs do not necessarily have a SEN, but there is a significant overlap between disabled children and young people and those with SEN. Access to the service is not based upon whether the child has a statement, therefore some children supported by the service do not appear on school's SEN registers. On the other hand, some children and young people are included on the SEN registers but sensory impairments are not the primary need.

Schools may already be in receipt of SEN funding for these children and therefore there is a possibility of double funding.

Nationally only a quarter of deaf children have a statement⁶. Hearing or visual impairment is not always recorded as a SEN, but for the most severe cases, is likely to be. A very small number of children in Darlington have EHC Plans/statements for HI as their primary need.

The SEN national census data (Academic year 2013/14 - Spring 2014) indicates that in Darlington 4% are recorded as having Sensory Impairment as a primary need which equates to the national average. As a percentage, 1.4% of pupils on the SEN register are identified with visual impairment in Darlington, and 1.8% with hearing impairment.

The national SEN analysis 2014⁷ highlights that at KS1-KS2 and KS2-KS4 progression, out of all SEN primary needs, pupils with visual or hearing impairments were most likely to make the expected progress.

The Spring 2014 SEN data count of SEN primary need indicates that 4 children with VI and SI impairment were in Year 11, 3 in Year 10.

The LINS December 2014 caseload indicates that there are significantly more children supported with hearing loss than are on the SEN register, 10% of these children have profound or severe loss. For vision, data indicates that there is a correlation with the SEN register and 20% of the children supported have profound or severe loss. In both these cases, each child receives a high level of one-to-one support on a weekly basis. The largest proportion of the caseload is with children with moderate and mild visual and hearing loss.

Darlington's NatSIP return for 2013/14 is due in February 2015 and the results will be published in July 2015. The cohort of children reported for the 2012/13 return is very small and in the cases of children KS1-2 with moderate hearing and visual loss, progression is better than the national average. For KS2-4 and above, progress varies from above to below the national average, but results are expected in line with circumstances and learning targets.

⁶ The National Deaf Children's Society – Advice for LA May 2013

⁷ DFE SFR 31/2014: Children with Special Educational Needs 2014: An Analysis

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Budget/Value for Money

The LINS budget is £214,000 (annual DSG budget of £196,000 plus uplift of £25,000 agreed in October 2014 as a result of the increasing HI caseload). 69% of the budget is allocated to staff costs, approximately 20% to premises and 11% for other resources including expenses, training costs and technician support.

The staff costs reflect the qualifications and experience employed and value for money is on a level with other DSG services that are currently being reviewed.

It is difficult to benchmark value for money of the LINS with that of other LA's as there is broad variation in the structure of services and the role of the staff, from advisory functions to direct teaching roles.

A total of 175 children and young people receive support in one form or another from the service which equates to excellent value for money at £1,222 per child.

Out of borough placements this year will cost in the region of £10,000 per child per Academic Year. These children have EHC plans or statements. These children require support attend resource base provision at Sunnyside Academy.

Risk

Because the service is very small and relies on key individuals to have the expertise to deliver each element of the service, the main risk to service delivery is staff retention and recruitment.

Issues and Gaps Identified in Service Provision

Support for transition 16-19 will at least remain the same for this Academic Year, but data indicates this will increase by 2016/17 and the service should be prepared for this.

The service does not provide for children and young people with down syndrome ages 0-2 and 16-25.

The service has provided dyslexia/dyspraxia assessments but to accommodate the recruitment of an additional teacher of the deaf in Summer 2014 to meet caseload requirements, the assessments were dropped as these are not statutory. When assessments were offered there was a high demand (46 children), which took up to 6 months to process, however, this was a one-off and may not be the case if offered again.

The service can offer other mobility/skills support such as independent living support, but is not core to the offer. Up to now, support has been provided on a case by case basis however this has the potential to cause inconsistencies and it may be difficult to manage expectations of both settings and families involved, as substantive roles may or may not have the capacity to do so in the future subject to the demand of statutory service provision.

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The recent changes to the Occupational Therapy service contract has removed the OT's assessment in a school setting. To date, one assessment has been required, and this necessitated that the LINS work with the health professionals to undertake the assessment. It is a necessity that the service deliver this. The demand for environmental assessments in school is low at present, and this should be monitored. For pre-school, the LA Early Years Inclusion service would identify if an environmental assessment is required in a PVI setting, and make provision funded through the early years panel arrangement.

Conclusions

The service is currently meeting national guidelines and sufficient capacity is provided to support children and young people with mild to profound impairment from the early years, including newborn hearing assessment throughout mainstream primary and secondary school.

The review of current delivery has led to production of a service specification to form the basis of the 2014/15 contract. This has been agreed with the Executive Head at Heathfield Academy Trust, and a review of the current contract is in progress with legal services. A continuous improvement plan has been agreed. Performance Indicators have been reviewed, new indicators set and agreed. These set the benchmark for review and monitoring going forward.

The current delivery model is built upon the staff skills and experience in post, and staff time driven by the structure set by NatSIP. There is sufficient delivery capacity to give the appropriate support *based on current demand* however it is not possible to increase the scope of the service from 16-25.

Support is provided for transition to FE and sixth form who then commission support for low incidence needs pupils however the service can provide specialist educational support when requested, however capacity does not allow for the service to support all 16-19 providers.

A service level agreement is in place with Beaumont Hill Academy. This will be reviewed with the Head Teacher and the LINS service.

Support and access to the service is based primarily on the national guidelines set by NatSIP.

Participation in the NatSIP benchmarking programme evidences that Children and Young People supported by the LINS are making, in the main, better or equal to the national average of progress.

SEN data cannot be relied upon to give a whole picture of the need in Darlington, however, we can be confident that all children with low incidence needs are identified via referral routes and recorded whether or not they have SEN.