

DSG-Task and Finish Group Report

Developing an Effective Support Service

September 2024

Task and Finish Group participants

Headteachers/SENCo:

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Officer Support:

- Charlotte Jones, Clair McNeill, Daria Silver

Context:

The SEND system is broken. Changes in legislation in 2014 were not properly resourced resulting in the vast majority of Local Authorities' SEND budgets being overspent. In Solihull, the accumulated overspend has now reached £27,621 million.

In January 2024, a group of Headteachers from all school phases met with Tim Browne, our Assistant Director of Education, Inclusion & Additional Needs. Discussions focused on how schools and the LA could work together to try to reduce the deficit in the High Needs Block. As a result of these meetings, three T&F Groups were established to look at three areas where potential savings could be made:

- AP Provision
- ARP/ARC Provision
- Support Services

Through Headteachers' Partnership meetings, Heads have had opportunities to discuss what is working well and what we could do differently; this has been fed into T&F Group discussions. This report focuses on the third of these T&F Groups.

Before going into the detail of this, it is important, and right and proper, to acknowledge the huge amount of work that our current support service do. Throughout the three meetings, colleagues spoke positively about the impact that individual staff from SISS had made on the children, families and staff in their schools. However, this is not the case in all schools.

Purpose of the Group

The Task & Finish Group was asked to explore the following areas:

1. What services do schools need to support them in being inclusive and ensuring all children have a good education? (NB This could include support for setting up school-run ARPs, having SEND Audits etc as well as targeted support for individuals)
2. Could services be divided into collaboratives/localities with a small central team to oversee?
3. How could the outreach model being led by Lynn Clark be developed to become part of the support service offer?
4. Are the right pathways in place? Do they work?
5. Schools have talked about having clinicians in schools – who do we mean?
6. How do we progress this? How do we move from one system to another?
7. What happens in other LAs?

Summary of meetings:

The T&F Group have met three times, two face-to-face meetings and one online meeting. The group's first meeting focused on gathering information about Solihull's current Support Service, SISS; this was led by Charlotte Jones. A summary can be found below:

Team	No.of Staff	Cost	Income
Autism	10.7 fte	£0.5 million (free to schools)	N/A
SPI (Statutory Requirement that the LA has to provide this team)	13.4 fte	£0.6 million (free to schools)	N/A
CLD, including SLCD	12.6 fte	N/A (fully traded)	£0.6 million
SEMH (including High Needs Pathway)	21.2 fte	£0.5 million	
Totals:	57.9 fte	£1.6 million	£0.6 million

Apart from 0.4 play therapists (linked to Refresh), all of the staff are teachers or ISPs. Teaching staff are paid on Teachers Pay and Conditions. By contrast, teaching staff in the Early Years Team, who have a similar role, are not paid on Teachers Pay and Conditions and questions were raised about the equity of this.

Based on the information above, colleagues talked about whether or not they felt the right teams were being traded and frustrations were shared about some of the pathways, waiting times for ASD diagnosis' in particular, and the impact this then had on accessing support from the ASD team. Colleagues unanimously agreed that children's SEMH needs were causing the most challenges in schools and that going forward they would like to see the SEMH team being accessed free of charge. Frustrations were shared about the CLD Team in that the team was primarily used by schools to complete standardised assessments of children as part of the evidence gathering for possible EHCP requests. Colleagues asked that schools be trained in how to do these, so specialist staff could be freed up to work with children and staff.

Colleagues felt that training provided by SISS was very expensive particularly in light of many courses being repeated year after year. Sometimes, training focused on the theoretical with very few practical ideas for implementing back at school. Colleagues also commented on the impact of the AET training schools accessed every three years; they felt that this was now fully embedded into practice in schools and that future AET training needed to focus on supporting the needs of our most complex autistic children.

Some initial discussions also took place about how our current service differed from others; it was reported that many other support services are much smaller and have a focus on upskilling school staff, rather than working directly with children.

The meeting finished with feedback from the Headteachers' Partnership meeting and a brief discussion about the need for schools to have support from a wider range of external professionals, rather than teachers. Feedback from the Heads' Partnership Meeting is attached as an appendix.

The second meeting had a focus on what we would like an effective support service to look like. The group looked at the LA's recently developed Graduated Approach to support conversations around additional professionals needed to support schools. This was also linked to one of actions in the Joint Additional Needs Strategy about developing links between higher education providers training health professionals. Schools/Collaboratives could provide work experience placements for students who are training to be Occupational Therapists, Play Therapists, Speech and Language Therapists; this would benefit children and young people in schools and may reduce waiting times for health services.

The group also began to look at other support services, including those in Essex, Worcestershire and Wolverhampton. As was reported in the previous meeting, the teams were much smaller and inevitably structured differently. Outreach to schools in Wolverhampton was provided by colleagues in special schools; this is something that schools in Solihull have wanted to explore for a long time. The success of a recent outreach project with colleagues from Hazel Oak and mainstream schools has added to schools' desire to want to learn from colleagues who are working with children with SEND on a daily basis and who fully understand the current challenges of working in school. Colleagues also discussed the need for a small central team with the right skill set who would be able to provide effective CPD and help support and navigate schools to the right resources. Both of these elements would ensure that knowledge and skills were developed in schools and over time, reliance on support from some external professionals may reduce.

Colleagues discussed the importance of having regular support from Educational Psychologists and reflected on how this would impact positively on how effectively schools met the needs of their SEND children, as well as building expertise in-house.

Colleagues also discussed the effectiveness of the Connected Care Network. Schools state that this has been hugely successful in the north of Solihull with lots of positive outcomes for children and young people, and their families. Some concerns were expressed about whether or not this service, like many others, would become overwhelmed.

The meeting finished with a discussion around the various pathways that schools could access via our current service as well as what the new primary AP, Apollo, was going to add and how it was going to be different; this has not been included in the discussions that have taken place in the AP Task & Finish Group. Questions around the long-term success of the High Needs Pathway and Refresh were raised in order to ascertain whether these interventions were having a positive impact on schools. Both of these cost a lot of money and based on the experience of the group, the view was that they were not having the impact they should.

The final meeting took place at the beginning of the academic year and, due to the changed timescales, focused on the recommendations and opportunities for moving this agenda forward; these can be found in the table below.

Recommendations/Opportunities	Benefits	Further Comments/ Questions:
An external review of SISS to include: <ul style="list-style-type: none"> Whether or not SISS in its current format is fit for purpose and value for money An evaluation, backed up by data, about the success of the current pathways e.g. what has been the impact of the high needs pathway? Refresh? Staff pay and conditions to ensure transparency and equity with other teams in the LA 	This would help to confirm whether or not the service is fit for purpose and potentially result in some cost savings	Any recent evaluations of the service have been completed by the service themselves Not all schools pay into the service because they do not feel it is value for money
For schools to access free support from the SEMH team rather than the ASD Team	Schools would be better supported to meet the needs of our most challenging children and young people	Can this be implemented before September 2025? Would this result in the service costing even more money due to high demand?
For schools to receive AET training that meets our needs more effectively in supporting our most challenging children and young people; this includes practical implementation in the classroom as well as the theory.		Why has this not been considered by our current support service when they are fully aware of the challenges schools have been facing? This reinforces a view that our current service is out of touch
To train staff in schools to carry out Level 1 and 2 assessments to avoid the significant cost of external staff coming in to schools to administer them	Staff in the CLD team would be able to work directly with children and young people	
Long-Term Vision	Schools would benefit from working with	This requires a lot more discussion and thought with a

<p>To develop a SEND Hub which enables schools to develop their capacity to support a range of additional needs; this could include:</p> <ul style="list-style-type: none"> • a small team of staff to lead and co-ordinate support for children, schools and families • an outreach service provided by our Special School and ARP colleagues • access to a range of therapies and external professionals (link to JAND Strategy) • access to early intervention and a tiered support package for schools • links to the services provided by the Family Hubs and Early Help 	<p>colleagues who have up-to-date experience of working with children with a range of additional needs; this learning would be applied to other children with similar needs which is likely to reduce the amount of in-house support schools would need. It is also likely that the team would be smaller which would reduce the cost</p>	<p>range of professionals. Its development is likely to depend on the outcome of the external review. The group were also painfully aware of the potential staffing costs in moving from one system to another e.g. possible redundancies. However, the outreach service provided by our special school and ARP/ARC colleagues is something that could be progressed with funding from the proposed top-slice being used to fund some of the set-up costs.</p>
<p>For every school to have half-termly access to a named Educational Psychologist</p>	<p>Schools would really benefit from the expertise of an Educational Psychologist</p>	<p>All schools used to have access to this level of support; SENCos felt very well supported and clear actions were identified in terms of supporting a range of needs as well as signposting to the right services. Again, funding from the proposed top-slice could be used to support the set-up of this</p>

Headteachers' Partnership Meeting, 14 March 2024

Feedback on developing an effective support service

<p><i>Start</i></p> <ul style="list-style-type: none"> • Devolve the whole system into localise teams that support schools on the ground • Use the money for schools to deploy staff • Use special schools to support schools – a model of continued support • Admitting and being honest if you don't have the strategies/support you can give • Even earlier intervention of support/direction • CDP in delivering interventions • Linking more closely to collaboratives • Greater Ed Psych capacity (we know the challenges with this request) • Training school staff to complete diagnostic profiles e.g. Boxall profile • 'Training, training, training' for school staff at a reasonable cost • Emergency response • Understanding the structure of our current service – how many people, roles and the size of the service compared to the size of Solihull and statistical neighbours • Use of health practitioners in training (e.g. play therapy) being offered placements • Clarifying how hours are calculated per school e.g. Autism team • Schools with specialist named complex pupils – 'ring-fenced hours' for additional support with like/similar schools • Staff from support service modelling strategies/approaches to class teachers and TAs • Getting to know the school and recognise it may not be the correct setting • Streamlining process/paperwork and communication • Making Section F of the EHCP personalised to THE child 	<p><i>Continue</i></p> <ul style="list-style-type: none"> • Maintain the few practitioners who do offer effective skill sets in school – use these in local teams and to train schools to complete their own assessments • Key skilled staff • Individual people – knowledgeable, flexible, supportive • Retain broadest possible offering
<p><i>Stop</i></p> <ul style="list-style-type: none"> • Having repetitive meetings – work with the child 	<p><i>Barriers</i></p> <ul style="list-style-type: none"> • More senior members of the team are not showing effective skills sets, supporting schools and be very defensive and/or patronising towards schools

<ul style="list-style-type: none"> • Giving, creating long forms e.g. relational support plans • Suggesting ineffective and impractical strategies • Some reports can seem very generic – what is the QA process? • Expectation that our support service will complete diagnostic profiles • CPD in isolation • Need on-going, planned support/CPD • Working with other school to share/reflect on practice • Writing Section F in a way that is designed to ensure children clearly in need of specialist receive a place in mainstream (i.e. schools cannot say no). Section F needs to address all the needs, not just those schools cannot argue with • Consulting with mainstream schools when all specialist reports indicate specialist provision is most appropriate 	<ul style="list-style-type: none"> • Higher needs pathway is not effective for the most complex needs • The members of the team on single panel referrals • Part-time SENCOs in school/class-based SENCOs • Communication to schools on current priorities • Service depends on who the lead for your school is • Cost/financing it from a school's perspective • Perceived lack of trust in professional view of the school staff • ASD team only work with children who have a diagnosis • Inexperienced colleagues (TAs) used for support – need more expertise • Clarity on who does what in the team, including hierarchy • Website – is it clear? • Attendance not being supported by the LA unless below 50%
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