

**Health & Social Care Board and Public Health Agency Response to  
DE Committee on Special Education and Disability (SEND) Bill**

Firstly can we thank the Committee for inviting us here today to discuss the proposals in relation to the Special Educational Needs Bill.

We think it may be helpful if we take the opportunity to briefly outline the context in which children's services are provided within Health & Social Care.

The provision of children's services in HSC is heavily prescribed by legislation and in particular the Children Order (NI) 1995. Central to this is the principle that services and support are provided on the basis of assessment of need. The principle has been continually reinforced by various pieces of case law and is contained within key policy and strategic frameworks for the delivery of HSC in NI including Transforming Your Care. The DHSSPS Families Matter Strategy 2009 recognised that needs exist along a continuum and the NI Family Support Model as contained within that strategy outlines a structured and tiered approach to provision of support along that continuum, while recognising that needs can be fluid in relation to circumstances and at points in time.

The NI Family Support Model is premised on the work of Pauline Hardiker and is acknowledged as an exemplar of best practice for planning in children's services.

Transforming Your Care clearly outlined the importance of partnership working and particularly across the statutory agencies involved with children and families. It may be helpful to provide a number of examples of ongoing joint working between HSC and Education such as the collaborative working in Sure Start projects , the cross departmental Early Intervention Projects , and perhaps most relevant to this discussion the current review of AHP support for children with

statements of special educational needs led by colleagues in the PHA. The Chair of the Project Board for this review is Dr Eddie Rooney, Chief Executive of the PHA

The project has involvement from DE, EA, PHA, HSCB, HSCT and a participation process for young people and parents. Indeed a number of members will have been invited to the recent engagement workshop in the Long Gallery outlining the work to date.

The ultimate aim of this child centred review is to agree a proposed regional model and implementation plan in order to best meet the AHP assessed needs of these children. The proposed model should represent value for money, ensure the most effective use of resources and ensure that the AHP assessed needs of children with statements of special educational needs are met, irrespective of where they live and what school they attend.

This review was initiated due to a number of queries about the levels of AHP provision, particularly from the special education sector. In discussions related to these queries there was anecdotal evidence that changes were required in order to meet the AHP assessed needs of these children/young people.

There has been significant stakeholder engagement and data collection in order to hear views and establish the current levels and models of AHP support for children with statements of SEN. This included engagement with parents/carers, children with statements of SEN, AHPs, teachers and other key stakeholders in order to gather qualitative and quantitative information.

Throughout this engagement and information gathering, some issues have been highlighted, common themes which will require focused attention have been identified and principles have been agreed. These principles and common themes will be integral to the proposed regional model.

Many of these themes aim to strengthen the culture of partnership working. They include the need for strengthening joint working with education colleagues, parents and children; the need to make the most effective and efficient use of current resource and the need for regional consistency in relation to services so that the child's needs are met, regardless of where they live or go to school.

Work on-going as a result of this review includes the development of Operating Principles and communication guidelines between AHPs and Teachers. The aim of these is to help improve outcomes for children by strengthening collaborative working. Other work identified by the review includes agreeing the best way forward in relation to AHP input to the statutory assessment and statement processes. The aim of this work is to achieve regional consistency and streamline the AHP input to these processes so that the AHP advice into the statutory assessment process is carried out in as effectively and efficiently as possible

In addition there has been close collaboration in the area of educational support for children in the Looked After System particularly in seeking to streamlining processes in areas such as personal education plans and statementing.

Representation at Chief Executive level of the Legacy Education and Library Boards was in place at the Children's and Young Peoples Strategic Partnership which is charged with the formulation of the Children's Plan for NI. Co-operation in areas such as safeguarding, early years and children's disability services including co-working arrangements in ASD occur on a daily basis at operational level.

In regard to the particulars of the proposed SEND Bill there has been some recent engagement with HSC and DE/EA but clearly as set out the particulars within the Bill are at a high level but we understand the key operational aspects and interfaces will be developed through the associated regulations and guidance. The HSCB/PHA/HSCT would be keen to continue to work with colleagues in Education to ensure there is synchronicity in developing in the context of HSC operational, legislative and policy directives. Clearly the environment for HSC has changed dramatically since the inception of the original SEN Legislation.

In the recent initial discussions with DE colleagues we have highlighted some areas which may require further clarification; in particular the proposed change in relation to article 14 of the 1996 order to be amended from "may request to shall request".

From data provided by NINIS in 2014 it is indicated that 2.9% of the primary and 4% of the post primary population are within the statementing system. From figures already cited to this committee that is

approximately 16,000 children and rising. Clearly while all will have special educational needs, not all will require HSC support in line with a HSC assessment of need. Given the particular processes in providing for clinical need, the activity in providing advice for children not currently receiving support or undergoing assessment for HSC specific services will clearly have resource implications and impact potentially upon capacity, especially in services where ministerial priorities in terms of waiting times are operational.

The impact on reviews and information for such from HSC given the prevalence rates for SEN and proposed changes is a further area for clarification which should be considered within any guidance given the fact that all children with an SEN will have at least an annual review with a request on each occasion for HSC information. Given the academic calendar is more compressed, this tends to see SEN requests to HSC also compressed with particular pressure points reflective of that academic calendar. Even allowing for a 10 month period noting the summer period this may equate to over 1600 requests to HSC per month and this does not guarantee a proportional rate of requests per month over that period.

The HSCB/PHA do not specify specific information in relation to requests re SEN activity but following the reviews into AHP workforce and AHP support to SEN this is an area which we will be taking forward.

The Committee will be aware that the current waiting time for assessment in AHP Services is 13 weeks. The proposals in relation to the SEN amendments are 20 weeks. So clearly matters may arise around where children are just referred to HSC and who are identified then within SEN.

The HSCB/PHA have indicated they will seek to assist colleagues in DE in matters relating to HSC in the drafting of the guidance to ensure the best outcomes for children but there is a need to ensure that these are fully achievable in the respective sectors. The wider environment in terms of the overall financial and processes will undoubtedly arise within that discussion. Hopefully however, opportunities for further collaborative working with potential for reduced bureaucracy, duplication

and with a focus on children's rights as well as an outcomes based model should be the goal but there will undoubtedly be challenges.

Clearly we have not reflected the developments in terms of the statutory duty to cooperate as contained within the revised Children and Families Act 2014 in England and Wales which promotes coordinated Education, Health and Care Plans but it may be useful to look at the implementation of this legislation in respect of any learning applicable to NI

In conclusion the HSCB/PHA clearly welcome the focus on children's rights in line with the UNCRC and UNCRPD to secure the best outcomes for children. There have been some recent useful discussions with education colleagues looking at process within an organisational services context and clearly discussion will require to continue.

The work in areas such as the AHP review referred to earlier should provide some reassurance that models for collaborative working have been and are in train and also reflects that on a day to day basis there is very positive and conducive working relationships between staff working at operational level within Education and HSC and that is sometimes a point which is overlooked but one which is central to providing positive outcomes for children in general and not just those with SEN.