

Lambeth's Local Area SEND & Inclusion Strategy 2021-2024

Introduction:

This SEND and Inclusion strategy is endorsed by, and central to, the goals of leaders in Lambeth Council, the Children's Clinical Commissioning Group and our partnership organisations. In Lambeth, we are aspirational and ambitious for all our children and young people, but due to some of our vulnerable learners' needs we also know that we must be systematic and deliberate in our identification and support of them. This strategy is about fully inclusive education for all our learners in Lambeth.

The strategy is cross partnership and multi-level: this means strategic, operational and frontline staff in education, health, care and our parent advocacy groups are working together for vulnerable learners to ensure our vision is realised. A fully inclusive education offer means that all our children and young people, whatever their circumstance or need, have equitable access to learning opportunity and that all children and young people's learning is seen as equally important.

Lambeth's Local Area SEND Inspection (Jan 2020) by Ofsted and CQC, recognised our progress with implementing the SEND reforms and highlighted our strong leadership and partnership working. Our progress with supporting children with SEND and their families has been achieved because of the efforts and commitment of senior leaders to create an ethos of partnership working and co-production with families. This remains central to our ethos. We continue to focus our efforts on improving the opportunities for our children and young people with special educational needs to learn, develop and go on to lead satisfying lives as independently as possible. We continue to improve the educational potential of our children and young people by focusing on the inclusion of vulnerable learners in this strategy so that no child or young person falls through the gap. This strategy uses the inspection evaluation and our own evaluation to inform our 7 priority areas of focus. In this way we show our ability to listen, reflect and act in the best interests of our children and families.

For our families to trust that we have their best interests at the heart of our practice and that we will act for, with and on behalf of them, we need to have strong accountability structures in place. We believe that we do have those structures in place in Lambeth. Cllr Edward Davie, Lead Member for Children and Families, has set out his passion for improving the lives of vulnerable learners in his forward to this document. The Local Authority (LA) and the NHS Clinical Commissioning Group (CCG) are the accountable bodies for ensuring that duties under the Children and Families Act 2014 are delivered in the local area. Together the LA and CCG have established the SEND Strategic Partnership Board which has the responsibility for overseeing the programme of change and improvement. The Board has benefited from the full and active partnership of Education, Health, Social Care, Youth Offending Service and, very importantly, Lambeth families through Parent Carer Forum representation and engagement.

We have been working to deliver Lambeth’s ambitious Children’s and Young People’s Plan¹ (2018-2022), towards our shared vision for making Lambeth one of the best places in the world for children and young people to grow up. Through the Plan, we have delivered targeted programmes to improve outcomes for children and young people – from the Better Start programme for children aged 0-5 to our improved locality-based community Early Help offer. The success of the Lambeth Made initiative has resulted in new employment and training opportunities for children and young people through collaboration with businesses, community groups and the voluntary sector. Lambeth Made offers a strong foundation to build on, as we work to ensure equitable opportunities for all children and young people with a focus on vulnerable learners.

We have strengthened our joint commissioning arrangements and embedded co-production in our governance. The SEND Strategic Joint Commissioning and Engagement Board brings together partners from across education, health and care with parent carer representatives to ensure effective support is designed in meaningful partnership with children, young people and families.

The priorities in this new strategy are informed by our evaluation of Lambeth’s Area Strategy 2017-20 that took place December 2019 and the results of Lambeth’s Local Area SEND Inspection (13th – 24th January 2020) and its subsequent main findings:

Strengths

- Self evaluation is accurate
- Local leaders make a positive difference to the experiences and outcomes of children and young people with SEND
- Information is shared well
- We are delivering an improved offer from education, health and social care partners to meet the mental health needs of children and young people
- Parents appreciate the opportunities to meet and discuss
- A range of therapists have good impact
- Leaders are diligent in co-production

Areas for development

- Children who do not attend pre-school settings experience delay in assessment
- Oversight by CAMHs leaders of those who have EHCPs is limited
- We are not far enough on in helping children and young people with SEND prepare for adulthood
- The local offer website has had only limited success in ensuring that more parents know about it and find it useful
- Reviews of plans do not consistently ensure that they keep pace with the current stage of development of children and young people with SEND

This strategy has also been developed based on research and data. Using both public health data and education data, we can target cohorts of children who need support to make good progress and learn well. By knowing who is most vulnerable we are then able to ask why and act. From research carried out by our Education Research and Statistics team² published in 2018, we developed the Raising the Game programme to improve the outcomes of our underachieving Black Caribbean boys. Using an evidence-based approach we have already seen an impact in this cohort of students in Lambeth. We will use this approach to continue to identify populations and respond in ways that will have impact for our children and families.

At the time of writing this strategy we are all living through the Coronavirus Pandemic. This global event led to our education settings closing their doors. The national lockdown and

¹ <https://www.lambethccg.nhs.uk/our-plans/Documents/LambethMadePlan.pdf>

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https://www.lambeth.gov.uk/rsu/sites/www.lambeth.gov.uk/rsu/files/black_caribbean_achievement_executive_summary.pdf

the impact that this is having will be felt for a long time. We have acted quickly in Lambeth to support our families and settings to continue to provide education and care to those who are most vulnerable. However, we are keenly aware that our most vulnerable learners are the ones at most risk of falling further behind. This means that we must be more systematic and more deliberate than ever in raising up our vulnerable learners.

This strategy will help us to continue the journey of ensuring inclusion for all, build on the good work already put in place, help us to remain vigilant for new needs and ensure we are investing resources into the right places. To enable us to do this, we have established design principles that we will use to guide our strategic approach and operation of the vision for our children and young people in Lambeth.

Design Principles:

1. A person-centred approach to service design and delivery.

Person-centred approach means we involve young people and families of vulnerable learners in making decisions about the type and form of services that are for them. We recognise that the only way we can design and deliver effective support for young people is by working with them as equal partners. We must listen to young people directly to ensure that services respond to the varied interests, needs and strengths of our vulnerable children and young people.

2. A systematic and proactive approach to identification of need.

We will use our integrated structures and our good cross-partnership working relationships to jointly collect, analyse and understand data about our children and young people's strengths and needs. This will inform our decision making with regards to directing resources to increase capacity to identify and meet needs. We will encourage joint working between specialist services and universal and mainstream settings to ensure vulnerable learners are included in all settings.

3. A professional development approach to building workforce capacity to meet the needs of all children in all settings

We will promote an ethos of continuous professional learning in our LA children's and adults' services, our health services and our educational settings from early years to further and adult education. We will promote the importance of evaluating the impact of training on the children's workforce capacity to respond knowledgeably to vulnerable learner's needs. All training will be evaluated through an anti-racist lens before delivery to ensure that we do not perpetuate oppressive practices through education of our workforce.

4. An integrated and evidence-based approach to service interventions and approaches

We will use evidence-based research to inform our professional practice and support for settings tasked with meeting the needs of our vulnerable learners.

5. Pro-active building of alliances with the voluntary and community sector

We value the range of local knowledge and skill in our voluntary and community sector and will continue to innovate with this rich resource through Lambeth Made and other organisations.

6. Equity of access to digital solutions to build capacity and community connections

The coronavirus pandemic has demonstrated the importance of digital access. It has also demonstrated the inequality of access to this rich resource. As we build digital frameworks to support connectivity with our children and families in Lambeth, we will keep sight of and mitigate against further exclusion of children and families from involvement and support in accessing support by ensuring that our design is not ‘one size fits all’.

7. A communication approach that ensures our offer to children and families is accessed in an equitable way

We will plan first how we will communicate with young people and families our innovations and new designs for services. We will develop a co-produced and evidence-based communication strategy on how to reach all our communities so that Design Principles 1-6 are acted upon in an equitable way.

Who are the vulnerable learners that this strategy supports?

There are specific cohorts of children and young people whom we think of when referring to vulnerable learners.

- Children and young people who have been identified as having a Special Educational Need and/or a Disability (SEND).
- Children in Need (CiN)
- Children and Young People who are on a Child Protection Plan
- Children Looked After (CLA)
- Children and Young People who are Black, Asian or from an ethnic minority in our borough who may be disadvantaged by the curriculum and unconscious bias in education putting them at additional risk of exclusion, serious youth violence and future opportunity for education, training and employment
- Children with hidden disabilities who may not fit easily into SEND or diagnostic categories, but who are disadvantaged by not having their needs understood, e.g. neurodiversity needs
- Children and Young People who have emerged as vulnerable learners following the Coronavirus pandemic

To ensure meaningful inclusion of diverse groups in the delivery of our strategy, we must ensure a strong focus on our children and young people’s voices and experiences at every stage. It is important that we work to understand and engage vulnerable learners in ways that work for them, responding to their varied strengths, needs, aspirations and interests. We recognise that vulnerable learners are not “hard to reach” but services can sometimes be hard to access. This means we need to be creative, ambitious and person-centred in our thinking.

The national context

This strategy sits within, and complements, national expectations in relation to SEND and inclusion. These include the SEND Code of Practice, the Children and Families act and the Care Act (detail in appendices).

It is noteworthy that the Education Inspection Framework 2019 has a clear emphasis on the importance of inclusion and strong outcomes for all pupils, including those with SEND.

The strategy was developed during the COVID 19 pandemic, and as Great Britain left the European Union ('Brexit'). These national and international events inevitably create uncertainty and, in particular the pandemic, present challenges in terms of strategic planning and operational delivery.

The local context

At least 303,000 people were recorded as living in Lambeth, including approximately 66,000 children and young people under the age of 20 (ONS Census 2011). A further 26,700 were aged 20-24. Projections for 2021 forecast the borough population to be 340,000, with the number of under 20s rising to 70,000 and those aged 20-24 falling to 23,000 (GLA projections 2016).

A slightly higher percentage of pupils in Lambeth are identified as having SEND than the national or Statistical Neighbour averages. In January 2020 13.7% of pupils were identified as having SEND compared to our Statistical Neighbours at 13% and national average of 12.1%. The top three categories of need are Speech, Language and Communication Needs (SLCN), Autistic Spectrum Disorder (ASD), and Social Emotional and Mental Health (SEMH) – in line with the national picture.

We have a strong profile of schools across the borough with 97% of schools being good or better and almost half being graded as outstanding. We pride ourselves on being an inclusive borough with nearly half of our children with an EHCP attending mainstream settings. This compares very favourably with national and statistical neighbour averages.

Educational outcomes for SEND children are strong at all key stages. For example, at primary age more children with SEND reach expected standards than the national average. By secondary age attainment for children with EHCPs is in the top 20% of boroughs in England and in the top 25% of local authorities for children with SEND support. There are now more young people who are in education, employment or training between the ages of 16 and 18.

Most children and young people with SEND attend a mainstream Early Years, school or college setting. However, some children with more complex needs benefit from more specialist provision.

We have invested in increasing the range and number of specialist settings in Lambeth so that children with complex needs can attend school locally and in their community.

There are 6 special schools in the borough, which provide education for a range of needs including severe, profound and multiple learning difficulties; social communication needs; and autistic spectrum disorders. Lambeth has also invested in 8 primary and 4 secondary Resource Bases (RBs), with more opening in the coming years to support growing need.

The number of EHCPs in Lambeth, across all age ranges, is at or above local and national averages. This indicates the high need and demands in the borough.

Some of the factors driving the increase and need for EHCPs include:

- The extension of age range 0-25 under Children and Families Act 2014.
- An increase in the accuracy of diagnosis and earlier identification of SEND across settings.
- The financial pressures faced by schools are in some cases leading them to apply for EHCPs more readily than previously in order to ensure needs are met
- Increase in the number of young people presenting with Autism Spectrum Disorders (ASD) and Social Emotional Mental Health (SEMH) needs.

The council and its partners, including schools, are all facing increasing budget deficits. Although there has been some increase in the funding from the government for high needs, this is in the context of increasing demand and growing complexity of needs over several years. We need to continue to work closely together to find innovative ways of achieving more with less funding. We must ensure that resources are targeted effectively and this strategy identifies key priorities for development and improvement.

The work of the local area in relation to SEND and inclusion in Lambeth has many strengths. This strategy will sustain and further develop these areas. Educational outcomes for children and young people, including those who have SEND, are looked after or face additional challenges, are consistently improving. Co-production with parents, carers and children and young people is well established, and there are many examples of joint commissioning of services across health, education and social care. This makes a positive difference to the experiences and outcomes of children and young people in Lambeth. School exclusions are reducing and the refresh of Fair Access processes is leading to improved understanding of the needs of children and young people, promoting inclusion. Young people have told us how much they value their education, access to information and support.

However, there continue to be challenges that this strategy aims to address. Young people have told us they want more opportunities and support to share their views so that services are responsive, meet their needs and the needs of their families.

Whilst the proportion of children accessing an early years offer has increased in recent years, we know that children who do not attend early years settings need to have their needs identified much earlier. Waiting times for assessment for ASD are too long. Some children and young people known to YOS, or who are looked after, wait too long to have their needs assessed. Although exclusions have reduced, more needs to be done to reassure parents and carers of the effectiveness of local strategies to develop the resilience of young people so they are not drawn into anti-social or criminal activity.

EHCPs are increasingly clearly worded with a focus on children and young people developing social skills as well as educational outcomes, but we know that reviews of EHCPs are too variable in quality. This means that plans do not always remain relevant to the current needs of children and young people. Health and social care workers need to be consistently

involved in the reviews of EHCPs. CAMHS need to ensure that they are aware of which of their clients have EHCPs.

Although the local offer is compliant with the expectations of the SEND code of practice, it needs significant development to improve accessibility. The profile and availability of the local offer needs to be raised so that all parents and carers are aware of its existence. This will support the engagement of children and young people with social and leisure activities including after school and holiday clubs.

There are gaps in services for adults with SEND. For example, those with ADHD and/ or ASD. Transition pathways for children and young people with complex health needs need to be developed so that they receive seamless support as they move from the community children's nursing team to the care of primary health care, including GPs. Young people have told us that they want more support and information for themselves and their families so that they can prepare for adulthood and achieve independence. More could be done to support young people into employment, education and training, such as opportunities for young people to access supported apprenticeships. More adults with learning disabilities could be facilitated into employment

In order for the strategy to be successfully, the ongoing development of the workforce across all partners is essential. We will support our workforce to understand better how to identify, assess and meet mental health needs, including those with EHCPs. Toolkits and resources kits will be made available to support preparation for adulthood, and for secondary schools to better support those with ADHD and other attention difficulties. We will evaluate the impact of training so that the offer can be refined and improved even further.

Our Vision:

We believe that all children and young people with a special education need and/or disability and all those who are vulnerable learners due to their life circumstance, have the right to a fulfilling adulthood. A life with equality of access to opportunities that improves life chances and empowers them to be the best they can be.

Appendix 1:

The Children and Families Act 2014 introduced a set of significant reforms across education, care and health services. The overall purpose of the reforms is to bring about better outcomes for children and young people with SEND by:

- implementing a new approach to joining up support across education, health and care from birth to 25
- ensuring help is offered at the earliest possible point
- ensuring children and young people, parents and carers are fully involved in determining their own aspirations and participate in the decisions about the type of support they need to achieve these
- establishing more efficient ways of working.

The specific requirements of the reforms are outlined in The Children and Families Act 2014 and the guidance on implementation is detailed in the revised SEND Code of Practice 2014.

Summary of main requirements of the legislation on local authorities	
<ul style="list-style-type: none"> • To involve young people and children with SEND and their parents, carers, and families, in shaping the provision of services for those with SEND. 	<ul style="list-style-type: none"> • To produce a 'Local Offer' which details all the services to support children and young people with SEND and their families in a clear and transparent way so they can understand what is available.
<ul style="list-style-type: none"> • to develop closer co-operation with partners, including early years providers, all types of schools and colleges; health providers; children's and adult social care services and introduce a duty for joint commissioning to ensure joint responsibility for providing services. 	<ul style="list-style-type: none"> • To provide an entitlement for parents, carers, and young people to have a personal budget to extend their choice and control over the education, health and social care services they receive.
<ul style="list-style-type: none"> • To undertake joint assessment, planning and commissioning of services between education, health and social care to ensure more streamlined and integrated support through a single assessment process and single plan (EHC Plan) covering a child and young person from birth to age 25. 	<ul style="list-style-type: none"> • To ensure positive transitions at all key stages from birth to age 25, especially in preparing for adulthood. Providing greater powers for the Local Authority to continue services beyond 18 and introducing new protections for young people aged 16-25.

These requirements became statutory obligations from September 2014. Some additional requirements related to supporting children and young people with SEND who are detained in custody became applicable from April 2015.

Transitional arrangements apply up to April 2018 while children and young people with Statements of Special Educational Needs or Learning Disability Assessments are transferred to Education, Health and Care Plans (EHCPs).

In addition to local authorities, a range of other public bodies are required to have due regard to the Children and Families Act and Code of Practice 2014. These include: schools, further education colleges, early years providers, NHS commissioners and provider organisations, local Health and Wellbeing Boards and Youth Offending Teams. An underlying tenet of the legislation and associated guidance is ensuring that all these bodies work more effectively together in the provision of support for children and young people with SEND, including ensuring that they experience better transitions, especially from children's to adults' services.

The specific responsibilities of other public bodies are underpinned by a variety of legislation and guidance, for example, the NHS Mandate. Through the Mandate, the Department of Health have provided a duty for the NHS Commissioning Board to ensure children and young people with SEND can access the services identified within their agreed plans and have the option of a personal budget.

From 1 April 2013 the Health and Social Care Act 2012 gave General Practitioner (GP) led Clinical Commissioning Groups (CCGs) statutory responsibility for commissioning health services for children and adults. This legislation also transferred responsibility for public health from health to local authorities. The relationships developed between local authorities and CCGs are therefore vital in establishing effective joint commissioning for SEND – something which both organisations are under a duty to deliver.

Under the same legislation local authorities were also required to establish Health and Wellbeing Boards. The role of these boards is to provide leadership to the development of local health and social care services and to ensure service provision becomes more integrated.

Appendix 2:

High level priority actions	
(References to actions in the Strategic Action Plan in brackets)	
Priority 1: Engagement with children and young people	
Establish a children and young people's engagement forum to provide a voice for the lived experiences of children and young people, ensuring they believe they are listened to, understood and can inform our plans for service development and design	(1.1)
A charter for Young People's Engagement is co-produced with young people, outlining our principles for working together to co-design and commission new services and initiatives	(1.2)
Implement a toolkit to measure the outcomes of the children and young person's engagement forum to monitor progress and ensure goals are met	(1.3)
Priority 2: Co-production and decision-making with families is an established part of commissioning, designing and delivering services for SEND children and Young People	
The SEND Strategic Joint Commissioning and Engagement Board oversees and shapes strategic commissioning and engagement initiatives to ensure that they are meaningfully co-produced with families	(2.1)
Ensure that engagement initiatives reach and involve families from a range of backgrounds and experiences, representing Lambeth's diverse communities	(2.2)
An effective SEND and Inclusion Communication Strategy ensuring Lambeth SEND partners have clear and transparent communications with parents about strategic developments and info is accessible to all parents, carers and families	(2.3), (2.4)
A 3 year SEND and Inclusion Strategy, coproduced with parents and carers that clearly reflects and addresses the needs of children and young people and the outcomes of the SEND inspection	(2.5)
Priority 3: A Local Offer that is accessible to all families and young people	
Development of the Local Offer Website and creation of a team to support the running of this site	(3.1)
Ensure accessibility and develop awareness of the Local Offer website among parents, carers and practitioners	(3.2)
Creating a continuous improvement and quality control process via consultation	(3.3)

Priority 4: Early identification systems and processes are in place across partnerships so no child of any age is overlooked	
An Early Years SEND Strategy with a child and family focus. A joint strategy supporting families and the sector, aligning early years services and agencies and overseeing duties for early years outcomes, sufficiency and information are met	(4.1)
All Early Years children with SEND are identified through integrated pathways between health-education-care so that all children requiring SEND provision at school entry have had their needs assessed and a supported transition to Reception is in place.	(4.2), (4.3), (4.4)
Targeted support for all vulnerable learners in schools, including those with SEMH, neurodiversity, health and wellbeing and safeguarding needs and ensuring appropriate intervention from trained practitioners so that children remain in mainstream education	(4.5), (4.10), (4.11), (4.12)
Children at risk of exclusion have in place appropriate, timely support to mitigate exclusion and to develop resilience to anti-social or criminal activity for those who have been excluded	(4.6)
Looked After Children have health assessments and those with EHCPs have school places secured in a timely way when they are placed out of borough through a system of advocacy by the corporate parent.	(4.7), (4.8)
Vulnerable learners within YOS are identified and have their learning needs assessed and supported	(4.9)
Identify at risk cohorts of children in schools from different social and ethnic backgrounds to ensure educational equality, access to education and improvement in academic attainment	(4.13)
Post-16 young people with medical diagnoses are accurately assessed and identified for Learning Disabilities where appropriate.	(4.14)
Ensure that the borough's young people are accurately identified and tracked through Post-16, ensuring their needs are met and reducing the numbers of young people who become NEET	(4.15), (4.16), (4.17)
A transition pathway from hospitals to education settings for young people discharged from acute care (e.g. psychotic episode patients)	(4.18)
Priority 5: Building knowledge in our workforce so that vulnerability is recognised and needs are met	
Provide workforce development opportunities (with impact evaluations) in areas of trauma informed practice, neurodiversity, mental health and wellbeing to ensure accurate identification of need, assessment and provision that leads to full inclusion in education	(5.1)

Ensure all practitioners and services in the partnership recognise the part they play in identifying SEND needs and know how to record and share that information so that services can work together earlier to assess and meet needs.	(5.2)
Raise awareness of ant-racist/anti-oppressive practice and quality assure all training and workforce development opportunities to challenge discrimination in service delivery and/or access to services	(5.3)
Priority 6: Education and Health Care Plans reflect our complex learners over time	
Continue to establish and develop the EHC Hub with practitioners, parents and CYP to ensure EHC Plans are person-centred and outcomes are authentically co-produced.	(6.1)
Effective monitoring of EHC Plans and Annual Reviews to continue to improve meeting statutory timelines in step with national and local averages	(6.2)
Quality Assurance of EHC Plans to ensure that they reflect every child's strengths, needs and provision accurately over time, keeping step with maturity and developmental age appropriate outcomes.	(6.3)
Ensure Health, Social Care and Early Help assessments inform and influence outcomes and provision for children and young people with Education Health Care Plans, specifically focusing on use of CAMHS assessment and establishing pathways for Community Children's Nursing involvement in the content of EHC plans.	(6.4)
Ensuring that, from Year 9, EHCP outcomes reflect and support the aspiration that young people with all but the most complex needs will move towards employment or volunteering (that their plans will cease by age 21 at latest) and will seek to maximise independence for all	(6.5)
Priority 7: A pathway to adulthood that supports all vulnerable learners	
Develop a robust long-term PFA strategy with clear governance, partnership and leadership arrangements	(7.1)
A range of pathways from statutory education into work matched to the range of needs of young people with SEND	(7.2)
Set up a Supported Employment Partnership that will identify and deliver supported opportunities to enable young people with SEND and other vulnerable learners to move into paid employment.	(7.3)
Develop programme of cross-borough opportunities for young people to develop key life skills, e.g. travel, money management, self-care, healthy living and independent living	(7.4)

Join up SEND Transition so that there are clear pathways between children's and adult services and young people experience smooth transitions into adult services where needed and develop pathways and support for those who will not be supported by adult service	(7.5)
Create wider access to more inclusive social and leisure activities, including after-school/college and holiday clubs, for young people whose needs are currently not being met	(7.6)
Strengthening links between CAMHS and Adult Mental Health Services to support young people who will transition between the services and producing clear guidance about other services available for those who will not meet thresholds for Adult services	(7.7)
Identify and promote pathways for young people with complex health needs who are moving from Children's Community Nursing services into the care of primary health care teams, and improve understanding of the services available	(7.8)
Address the gap in services for adults with ADHD and ASD by establishing a pathway from Children's Services into appropriate community services	(7.9)
Creation of a toolkit of PfA resources to support young people, families and education, health and social care practitioners to improve understanding of and strategies to support preparation for adult life.	(7.10)