

SPECIAL EDUCATIONAL NEEDS

Performance against National Indicator 103



Introduction:

National Indicator 103 reports on the local authorities' performance in issuing statements of Special Educational Needs (SEN). This indicator has two separate elements;

- The number of final statements of special educational needs (SEN) issued within 26 weeks excluding exception cases as a proportion of all such statements issued in the year
- The number of final statements of special educational needs (SEN) issued within 26 weeks as a proportion of all such statements issued in the year.

There are exceptions which permit the period of 26 weeks to be exceeded in certain limited circumstances, for example, delays in receiving health advice or parental request for extra time to amendments to the proposed statement.

Our local performance has been a cause for concern as demonstrated in the table below. An action plan was put in place in October 2011 to improve performance.

	National 2009-10	Plymouth 2009-10	National 2010-11	Plymouth 2010-11	National 2011-12	Plymouth 2011-12
26 weeks excluding exceptions	95%	45% (76/168)	95%	66% (133/201)	N/A	80% (98/122)
26 weeks including exceptions	87%	44% (74/168)	88%	60% (121/201)	N/A	75% (92/122)

Background:

The current Team Manager rejoined the Special Services Team in September 2010 and was appointed to the Team Manager role in October 2012. A review of challenges for performance was undertaken and an action plan agreed. The action plan addressed a number of systemic problems leading to inadequate performance. These were related to both PCC internal processes and requirements from other agencies to contribute to the process of assessment.

Since taking over the role, the Team Manager has introduced the following measures to address this situation:

- Monthly team meetings: report on PI's presented each month.
- PI's a priority in team Action Plan with activities allocated to named staff.
- Regular 1:1 supervision undertaken with all team members where PI's are discussed.
- Termly meeting of senior officers which focuses on team priorities and tries to problem solve.
- Casework team asked to drill down on individual cases if deadline missed and report on what caused this at team meetings.

- School Medical Officer (SMO) now attends Single Multi-Agency Panel; this has raised awareness and SMO now regularly updates team on situation with medicals.
- Agreement reached with SMO that reports can be sourced direct from Health Professionals involved with the child, whether Child Development Centre, CAMHS or Derriford Acute Paediatricians. If no Health Professional involved, SMO will arrange medical.
- All new assessments now allocated to a named officer who has responsibility for ensuring timescales are met and case presented at appropriate Panel.
- Final statements to be issued during school summer holidays if due date occurs during this period.
- Team manager has introduced written procedures for Statementing Officers to ensure consistency of approach.

As a result of these actions significant improvements in team performance have been achieved, as demonstrated in the above table.

A further action has been agreed to progress the relationship with Health. Children's Integrated Disability Service Manager and Team Manager to attend Paediatric Interface Meeting (provider/commissioner meeting) in September 2012 to discuss issues regarding provision of reports by CAMHS and Speech and Language Therapists.

Current position:

There has been a significant increase in requests for statutory assessment since April 2012. 191 requests have been received in the period 1st Jan – 31st August 2012, representing a 41.48% increase in requests for assessment compared to the same period last year. Of these, 144 have been initiated, 26 refused and 21 await consideration. This has had a significant impact on the workload of the team and will continue to do so if this trend continues.

During the period April-August 2012, the number of Statements drafted and issued compared to the same period last year shows an increase of 57% from 53 to 83.

With regard to medical advice, although new agreements have been reached with main health professionals we need to monitor whether these work in practice and become embedded. In particular, the CAMHS service has not yet been able to engage in our process to date. This is an important factor as there are a high number of pupils undergoing statutory assessment are being seen by the CAMHS service. We are still therefore exposed to the possibility of late medical advice impeding our ability to issue Proposed Statements.

Action required:

1. Continued management oversight of performance against NI 103 in order to achieve performance targets.
2. Single Multi Agency Panel to continue to scrutinise requests for Statutory Assessment of SEN.
3. Monitoring the impact of increased numbers of requests for Statutory Assessment and risks reported to Single Multi Agency Panel on a 6 monthly basis.
4. Work with Health Commissioner to improve engagement with CAMHS and Speech and Language Therapy Service in order to access statutory advice within timescale.

Jo Siney
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