

Special Educational Needs and Disabilities (SEND) Place Strategy 2019-2023
for children and young people aged 0-16 years old,
with education, health and care plans, on the Isle of Wight

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Introduction

This document sets out the Isle of Wight Council's strategy for a continuum of Special Educational Needs and/or Disabilities (SEND) provision for children and young people from 0 to 25 years. The report identifies trends in current SEND populations on the Isle of Wight and projects trends in demographics which may impact on future SEND provision. The document recognises the strengths of SEND provision on the Isle of Wight and outlines priorities to further develop specialist provision within mainstream and special schools over the next four years. The sufficiency report forms the conclusion of a strategic review of specialist education places for children and young people (CYPs) with Education, Health and Care Plans (EHCPs) undertaken with stakeholders on the Isle of Wight from January to July 2019.

The strategy for a continuum of SEND specialist places will be reviewed on an annual basis. This will ensure any significant changes can be identified, and planning undertaken at the earliest opportunity. The strategy focuses on pupils and students with SEND who are resident on the Isle of Wight and who have an Education Health and Care Plan (EHCP).

The purpose of the strategy is to:

- build capacity within mainstream schools and colleges to better meet the needs of children and young people with EHCPs;
- forecast the number of pupils and students requiring a specialist placement, (i.e. resourced provision or special school placement) in order to plan and develop sufficient and appropriate places;
- ensure efficient use of resources.

Vision

Our vision is to provide education for children and young people with SEND that maximises opportunities for them to secure good outcomes and ultimately to live as independently as possible when they move into adulthood. In developing this strategy, the following principles were identified and applied when shaping the proposals.

The Isle of Wight Authority will meet the needs of children and young people with special educational needs and disabilities who have an education health and care plan by:

- providing education within an inclusive mainstream setting wherever possible and as appropriate;
- providing education within the child or young person's local community, or as close as practicable;
- finding effective ways for the child or young person with SEND to have their voice heard;
- working in partnership with parents and carers to ensure best outcomes for their child;

‘SEND provision works well when you can make recommendations on support for your own child and have this recognised.’ (Parents Voice event February 2019)

- Education, Health, Social Care and private and voluntary sector organisations working in collaboration to provide a holistic approach to meet need, where possible within one setting. *‘Parents/carers and child care providers all need to take ownership of their role in developing the child’s independence appropriately, relative to the child’s needs.’ (Public Health professional)*
- having a clear focus upon best outcomes for the child/young person, in relation to education, wellbeing, skills for life and independence; *‘don’t forget that our children CAN learn and have the right to work to their potential’ (Parents Voice event February 2019);*
- reviewing individual children’s needs regularly and within statutory timeframes to ensure the most appropriate provision is in place. This may include recommendations for changes to provision when a child’s development demonstrates reduced or increased need.
- developing flexible provision that is focussed on meeting a range of individual needs
- building on the unique position of the island to promote and embrace the diverse strengths and needs of the population; becoming an Autism Friendly Island and an Attachment Aware Island, to the benefit of all.
- ensuring that all children have a right to full time education according to need.

The intended outcomes of this strategy, would be by 2025, to have built amongst stakeholders;

- Greater trust in processes and pedagogy for pupils and students with EHCPs
- Increased confidence in provision and outcomes for pupils and students with EHCPs
- Understanding, knowledge, skills and resources in SEND, in school and college workforce
- Capacity to meet needs and to deliver to a consistently high standard
- Cohesion across and within stakeholder organisations

‘Let’s not fit square pegs into round holes: Remember these are children. We mustn’t forget the quiet child with high needs– or the child with high needs with the quiet parents. Let’s meet the individual needs holistically and work on what a child or young person can do, rather than what they can’t do.’ (Local Headteacher)

The following areas are highlighted as priorities for development, as a result of increased need, (current and projected) identified within the report;

- An early years’ specialist hub provision with both mainstream and specialist places for pre-school children with high needs to meet increased needs projected within early years
- Specialist outreach support to increase the capacity of mainstream schools to meet the needs of pupils with high needs more effectively, including children and young people with SEMH and ASD

- Increased knowledge and understanding to meet a broader range of needs associated with ASD, within specialist resourced provisions
- Increased provision within existing special schools at primary and secondary phase
- An integrated provision for secondary aged pupils with high needs, who are vulnerable as a result of high anxiety and complex mental health needs
- Strengthened commissioning arrangements to improve quality and consistency in education within non maintained, independent and alternative education providers.

Isle of Wight context

Population and EHCP trends

The Isle of Wight has a lower child and young person population than the national average, which is predicted to further reduce over the next generation. (See tables 1, 2 and 3)

Table 1

The child population in this area			
	Local	Region	England
Live births (2017)	1,230	99,108	646,794
Children aged 0 to 4 years (2017)	6,600 4.7%	533,200 5.9%	3,384,900 6.1%
Children aged 0 to 19 years (2017)	27,900 19.8%	2,156,600 23.7%	13,169,100 23.7%
Children aged 0 to 19 years in 2027 (projected)	27,800 19.0%	2,272,400 23.5%	13,904,800 23.7%
School children from minority ethnic groups (2018)	1,217 7.5%	305,158 24.8%	2,544,753 32.3%
School pupils with social, emotional and mental health needs (2018)	472 2.8%	30,591 2.4%	193,657 2.4%
Children living in poverty aged under 16 years (2016)	18.8%	12.9%	17.0%
Life expectancy at birth (2015-2017)	Boys 79.8 Girls 83.6	80.6 84.0	79.6 83.1

Source: Public Health England Child Health Profile 2019
<https://fingertips.phe.org.uk/>

Table 2

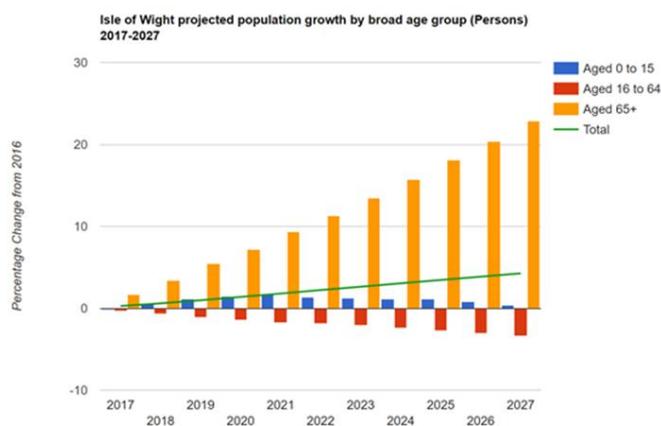
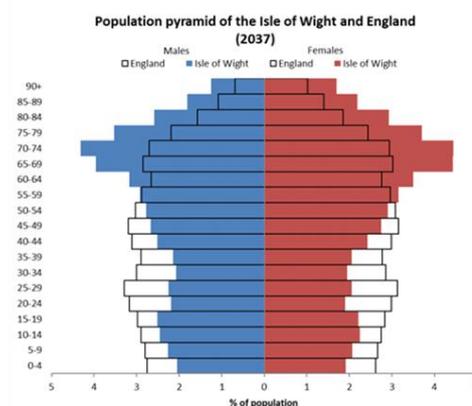


Table 3



Source: ONS 2016-based Mid-year population projections

Table 4

Compared with benchmark: ● Lower ● Similar ● Higher ○ Not compared

Indicator	Period	IoW		PHE Centres (2015)		England		England	
		Count	Value	Value	Value	Lowest	Range	Highest	
Children with Moderate Learning Difficulties known to schools	2018	703	39.8	23.5*	28.9	9.6		73.8	
Children with Severe Learning Difficulties known to schools	2018	99	5.60	3.34*	3.74	0.58		9.70	
Children with Profound & Multiple Learning Difficulty known to schools	2018	33	1.87	1.00*	1.26	0.13		3.96	
Children with Autism known to schools	2018	262	14.8	14.0*	13.7	5.3		28.0	
Children with learning difficulties known to schools	2018	835	47.3	27.8*	33.9	11.3		81.7	
Adults (18 and older) with learning disability getting long term support from Local Authorities	2017/18	545	4.70	3.29*	3.38	2.12		6.56	
Learning disability: QOF prevalence	2017/18	1,004	0.7%	0.4%*	0.5%	0.2%		0.8%	

Learning Disability Profile, Public Health England 2019 www.fingertips.phe.org.uk

Learning disability is defined in Valuing People as the presence of:

- a significantly reduced ability to understand new or complex information, to learn new skills (impaired intelligence), with
- a reduced ability to cope independently (impaired social functioning)
- which started before adulthood (under the age of 18), with a lasting effect on development.

<https://www.nhsemployers.org/-/media/Employers/Documents/Primary-care-contracts/QOF/2018-19/2018-19-QOF-guidance-for-stakeholders.PDF>

These graphs demonstrate the projected shift in population, showing a significant reduction in the percentage of children and adults under 65 in favour of an aging demographic. The second graph shows how the Isle of Wight projected population distribution varies significantly from the national profile. ‘Coastal communities are undergoing continuous socio-demographic upheaval, with highly transient and seasonal workforces, young people leaving and older people arriving.’¹

¹ Deplege, M.H. Lovell, R, Wheeler, B.W. et al, (2017) Future of the Sea: Health and Wellbeing of Coastal Communities. Government Office for Science

Latest predictions from the Office for National Statistics (2018 data)² for the Isle of Wight, also predict a minimal rise this year in live births, (20 additional births to 2018), followed by a fall over the next ten years.

This is in the context of a pupil and student population with a higher than average number of special educational needs, which is predicted to increase.

The Department for Education (DfE) SEN2 data from January 2019 shows 12.7% of the Isle of Wight pupil population has identified special needs without an EHCP (SEN support), compared to 11.9% across England and 4.4% of the pupil population have an EHCP, compared to 3.1% across England.

The rate of EHCP's has increased over time but the child population is projected to decline. These factors offset each other to some extent. Nevertheless table 5 shows that the numbers of pupils with EHCPs is projected to grow year on year.

Table 5

Midpoint data between current EHCP growth and population decline for school age children

	2016	2017	2018	2019	2020	2021	2022	2023	2024
	618	638	726	772	789	821	853	883	910
EHCP	3.5%	3.6%	4.1%	4.4%	4.4%	4.6%	4.7%	4.9%	5%

This suggests that by 2024 there will be approximately 138 more pupils with EHCPs. Typically, 30% of these will require specialist placements. Therefore, there will be a need to develop 35 additional placements by 2024. Some children's current mainstream placements will not be able to be maintained and increasing specialist provision on the island will support more children and young people to remain in educational placements on the island. Therefore, forecasts indicate the need to develop 64 additional specialist places. 26 in the primary phase, four per year group and 38 in the secondary phase approximately eight per year group.

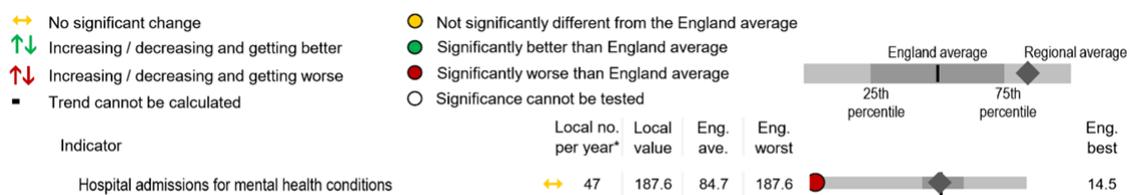
Type of need

The Public Health England Child Health Profile 2019, shows that the Isle of Wight has significantly fewer children from minority ethnic groups and a higher than average number of children, under 16, living in poverty. The number of children registered with Health Services as having a social, emotional and mental health need is higher than average

Whilst generally the Isle of Wight is presenting with an improving picture of childhood health, even in relation to areas where they have been below a national average in the recent past, i.e. obesity and admissions for alcohol-specific conditions for under 18 year olds, Public Health England statistics show the worst rate in England for

hospital admissions for mental health conditions for young people aged 0-17, in 2017/18.

Table 6



Source: Public Health England, Child Health Profile 2019

Public Health fingertips data also reveals a picture of significant special educational needs on the Isle of Wight for children and young people. Whilst this is self-reported (or parent/carer reported) data, it is useful in reaffirming the level and types of need. This demonstrates a higher than average level of most needs, with the exception of Autism. This is accounted for by a historically poor response times to the assessment and diagnosis of Autism on the Isle of Wight, which is currently being addressed.

As well as higher levels of learning difficulties within the school and college populations, there is evidence that young children on the Isle of Wight have a higher prevalence of learning needs, particularly in relation to communication and language needs. This will impact on the level of provision needed in schools within the next academic year (20/21) and beyond.

The Ages and Stages questionnaire (ASQ-3) is undertaken between 24 and 36 months by a health professional and a parent or carer. Local returns from October 2017-March 2018 found that only 70% of children met the requirements across five key development areas.

Fortunately, early years support and support within year R will positively impact upon this as currently 83% of children have an expected or greater level of development in communication and language.

Nevertheless, this pattern is also highlighted in current data relating to the level of need in school aged children and young people on the Isle of Wight. Whilst there is a need to improve the consistency of data collection from schools in relation to SEND, the table below shows the % of pupils, categorised by need on the Isle of Wight, relative to figures across England.

Table 7

% of school aged pupils (YR-11) with Special Educational Needs, including Education, Health and Care Plans, categorised by primary need January 2019

	Specific Learning Difficulty	Moderate Learning Difficulty	Severe Learning Difficulty	Profound & Multiple Learning Difficulty	Social, Emotional and Mental Health	Speech, Language and Communications Needs	Hearing Impairment	Visual Impairment	Multi-Sensory Impairment	Physical Disability	Autistic Spectrum Disorder	Other Difficulty/ Disability	SEN support but no specialist assessment of type of need	Total
IoW % Primary	11.1	22.7	0.4	0.2	17.3	34.6	1.0	0.5	0.4	2.3	5.8	2.8	0.9	100.0
England % Primary	9.5	20.9	0.6	0.3	16.3	30.6	1.7	0.9	0.3	2.8	7.9	3.9	4.3	100.0
IoW % Secondary	22.7	23.7	0.5	0.0	21.1	12.7	0.7	1.2	0.2	2.1	9.8	1.3	4.0	100.0
England % Secondary	20.6	22.0	0.5	0.1	19.6	11.5	2.3	1.4	0.2	3.0	10.3	5.9	2.6	100.0
IoW % Special	1.5	13.3	27.4	7.8	2.7	25.3	0.0	0.0	0.3	1.5	19.3	0.9	0.0	100.0
England % Special	1.6	12.8	21.6	6.9	12.8	7.3	1.1	0.7	0.3	3.4	29.8	1.7	0.1	100.0

IOW data higher than England average
 IOW data significantly higher than England average
 IOW data lower than England average
 IOW data significantly lower than England average

Source: LA SEN 2019 DfE

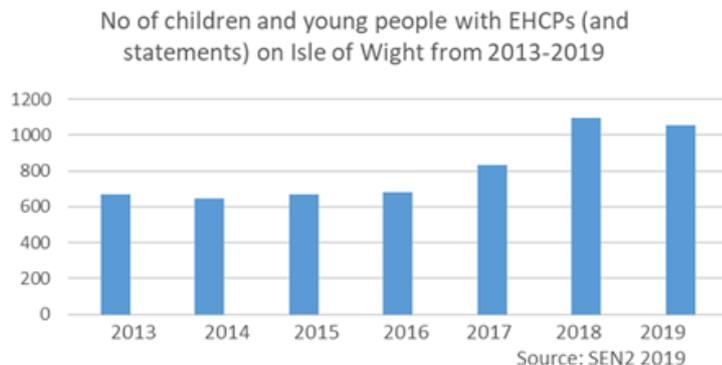
Highlighted areas show:

- A much higher percentage of pupils with Speech Language and Communication needs than nationally (England), including in special schools.
- A significantly higher percentage of pupils with severe learning difficulties in special schools. As the figures within mainstream schools are broadly consistent with national figures, this suggests a higher number of children on the Isle of Wight with severe learning difficulties.
- Higher levels of moderate learning difficulties across all sectors, than nationally.
- All these disproportionate types of need account for the increased levels of EHCPs on the Island.
- The data also suggests that significantly lower numbers of children with Autism within the special school sector on the Isle of Wight than across England and lower percentage of children with Autism than nationally. This may relate to lower diagnosis, which is currently being addressed. It is also likely that Autism may not have been recognised as primary need in some EHCPs.
- Significantly lower numbers of pupils with social, emotional and mental health needs in special school than across England as a whole.

This may relate to the percentage of children who are home schooled with special educational needs may account for some discrepancies in the data, i.e. a higher number of children with Autism and SEMH needs are home schooled on the Isle of Wight than is the case across England.

The Current Profile of EHCPs on the Isle of Wight

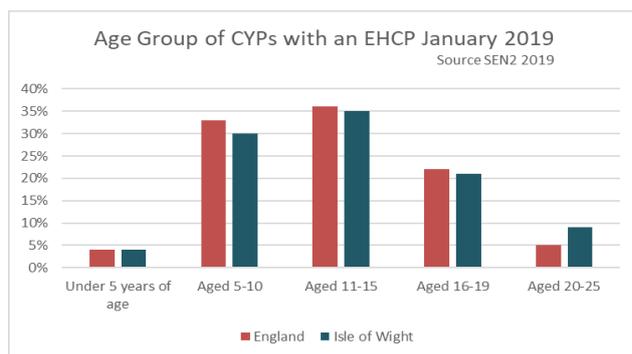
Table 8



A 36% increase in EHC plans from 2013-2019 is broadly in line with statistical neighbours and national (England) over same period (34%). Some increase can be accounted for by inclusion of 18-25 year olds following legislative changes to Children and Families Act 2014. Other factors include increased awareness of need by families; higher expectations for pupils with SEND, with subsequent demand from schools for effective support to impact on those standards; increase in number of tribunal appeals nationally and greater acknowledgement of SEND within society.

Due to an improved system for responding to requests for assessments in the last year, a backlog has now been addressed and the current figure (September 2019) of EHCPs is 1162.

Table 9



The distribution of EHCPs amongst age groups is broadly in line with national data, except there are higher percentage of young people aged 20-25 with EHCPs on the Isle of Wight.

Figures from SEN2 2019, show that 31% of pupils with EHCPs were in special school or specialist resourced provision in January 2019. A pilot primary resourced

provision for pupils with social emotional and mental health needs is currently offering 8 places, which doesn't show in this data set.

The current picture for children and young people with EHCPs who are not in school

Table 10

by LA Jan 2019

Early years	10
Mainstream school (all types)	407
Resourced provision secondary	20
Special primary	93
Special secondary	172
INMSS Indep. Non Maintained Special	30
Independent mainstream	4
Independent special	10
FE colleges	236
INMS XIForm	6
PRU	6
NEET Not in Ed. Employ. or Training	11
Educated elsewhere incl EHE	51
Total	1056

Source: SEN2 2019

Elective Home Education

Elective Home Education (EHE) on the Isle of Wight has risen over recent years, which reflects a national trend. There were 240³ children and young people home educated in 2015 which increased to 448 in July 2018, however, local data shows this number to have remained static over the last academic year. At 2.6% of the school population aged 5-16 years, the Isle of Wight has the highest rate of EHE children in England⁴, although as an island authority the data is likely to be more reliable than some local authorities, as there is limited cross border movement and good local information.

The number of EHE children with an EHCP in July 2019 was 27. This equates to 6% of the EHE population having an EHCP, which is a higher percentage of pupils with specialist needs than in the primary and secondary school sector, where 4.4% of pupils on the Isle of Wight have an EHCP. There is concern that whilst the Isle of Wight Local Authority recognises that parents have a choice to Electively Home Educate, there are concerns expressed by some parents who educate their child at home, that they feel they have no choice. Some parents each year request a statutory assessment and in 2018-19, parents of 16 young people applied for an EHCP, of which 7 were approved. 4 young people received a personal budget and 4 transferred to a special school, an ASD Unit or a bespoke educational package within a mainstream school. However, there are significant numbers of children who are home educated with high levels of need, not yet recognised by an EHCP. At the end of July 2019, data collected by the local authority categorised 93 home educated children (21%) as K-SEN Support whilst at school and a further 30 (6.7%) were reported by parents as having significant additional needs including physical and/or mental health issues, ASD, Dyslexia or Dyscalculia. Our sufficiency strategy suggests some growth in specialist provisions as a result of the number of children being EHE with EHCP where parental preference would be specialist provision and also suggests measures to increase mainstream schools' capacity to be more flexible in meeting need.

³https://www.whatdotheyknow.com/request/463285/response/1118790/attach/3/FOI%20iw1826221.pdf?cookie_passthrough=1

⁴ adcs.org.uk Elective Home Education Survey November 2018

Education Other Than at School

The needs of some children and young people may be such that they are unable to access their education within a traditional institution such as a school or college. This is often due to their very individual complex needs, such as high levels of anxiety and/or social, emotional and mental health needs. For these pupils, specialist packages of support may be provided. These may include home tuition or alternative provision, where the focus may include outdoor education, teaching life skills or activities more linked to practical skills leading to employment, including apprenticeships. In these cases, the interventions and support are often provided as part of a longer-term plan to reintegrate the pupil into school within their community.

Although data for children educated other than at school is not currently collated by the Department for Education, in part because of the constant change to the figures across a school year, local data at July 2019 accounted for 42 pupils receiving EOTAS through the Isle of Wight SEN service, the majority of whom have an EHCP: less than five have an EHCP pending. 17% of these were due to transition back in to school. A third of these pupils are on a school roll and receiving a package of support through the SEN service. A directory of accredited off school site provision has been collated to ensure appropriate selection of support and value for money. Parents or carers of a few children who are currently home educated (where there is perceived to be a lack of choice) request EOTAS, but this is not currently a service for which parents can opt in. Ways to improve the educational provision for children and young people who find schooling a challenge, due to medical or mental health needs, are being considered as part of this strategy.

Parent Voice

Parents and carers of children with high needs, including with EHCPs, have an active Parent Carer Forum in Parents' Voice on the Isle of Wight. Many of their views are echoed by parental submissions for the current Parliamentary Education Committee's Special Educational Needs and Disabilities Inquiry, which is ongoing. SENDIASS provide an independent service for parents seeking support with EHCP statutory processes.

Looked After Children

The Isle of Wight has a higher than average proportion of looked after children, with a large number of carers living on the Isle of Wight and other local authorities, such as Portsmouth, regularly placing children in care on the island. Whilst the numbers of children in care changes regularly, as a snapshot there were 195 school age children who are looked after (aged 4-18) in June 2019: 1% of the school population, however this figure has already risen by 12% to 218 by the end of September 2019. Of these 195 in June 2019, 42 children had an EHCPs (22%) and 61 children were recognised as having a special educational need, without an EHCP (SENk; 31%).

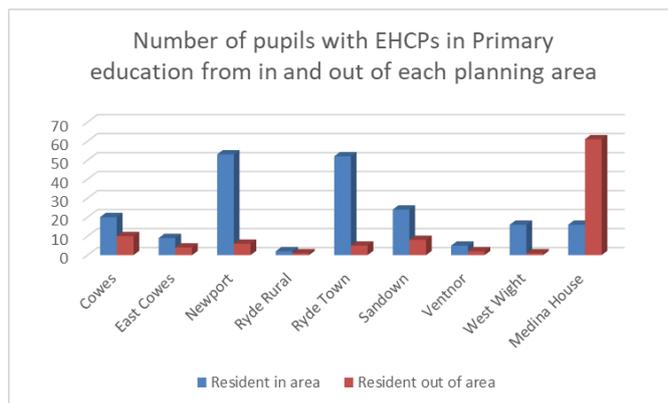
For those LAC not at a special school, the primary area of need is SEMH. Whilst the roll out of Attachment and Trauma training and the use of the PEP toolkit is happening across the Isle of Wight, the Virtual School (VS) is aware of the need for more emphasis on schools to better identify poor behaviour as a communicative function and to better understand where this is a special educational need. This should be recorded within the child or young person's personal education plan (PEP), from where the VS collect their SEN data. In June 2019, there were two children looked after who were being educated other than at school (EOTAS). The educational outcomes of looked after children are a prime concern for local authorities and the requirement to meet the special educational needs of this group of children requires skill, training and a tenacious approach by all stakeholders. There are also high numbers of children who were previously looked after, (PLAC) on the Isle of Wight. Out of 145 children and young people previously looked after, 39 had an EHCP (27%) and 30 were SENk (21%), (Local data, June 2019).

A key priority for the strategy, and one shared by professionals across the Island, is the wellbeing of looked after children in the Isle of Wight, many of whom have high needs relating to their social, emotional and mental health. These needs often have an impact on their education and care. Recently there has been investment in training and support for schools in terms of attachment aware training, evidence indicates that this is having an impact however further work is required to develop educational settings offering consistent therapeutic support for pupils with SEMH needs. Foster carers have received ongoing support from educational psychologists and many work using a therapeutic approach, however there are currently no specialist therapeutic foster care placements. It is paramount to address the SEMH needs of this vulnerable group of children and young people. The Virtual School would want continued investment in ongoing training to enable better recognition of underlying needs, which poor behaviour may be masking. Speech, language and cognition can be proven consequences of neglect. This strategy therefore prioritises the development of SEMH provision.

Funding Implications

This growth over recent years has inevitably led to a significant increase in spend on specialist provision resulting in unsustainable pressure on the High Needs budget which funds SEN provision. The cost of the different types of provision varies considerably, with the cost of Independent non-maintained special school provision (INMSS) being significantly higher than the cost of maintained provision. The difference in average costs between a maintained special school place and an INMSS place is £43k (September 2018). This additional cost combined with the increase in INMSS placements, highlights that this is one of the costliest areas for the Local Authority and an area of spend that needs careful management. A small number of children are educated off the island and there is the additional cost of boarding pupils with high needs, in instances where the child would be unable to manage a daily journey. In January 2019, there were 19 pupils and students educated off island. The needs of these children include visual impairment, SEMH, Autism and Speech, Language and Communication needs.

Table 11



The cost of transport within the island is also a high cost, as pupils with EHCPs need to be transported distances across the island to Newport to all specialist provision and to mainstream schools, where this is deemed the most appropriate schooling. This chart (taken from PIVOT data Jan 2019) shows movement from in and out of planning areas, but the planning areas cover

more than three miles, so children resident in the area, may still require transport. This strategy therefore proposes an increase in Isle of Wight provision to reduce the reliance on off-island provision.

Current provision

Specialist provision for 2-4 year olds

Most of the youngest children who are identified early as having high needs are provided for within the private and voluntary sector of early years' education. The Isle of Wight has one maintained mainstream nursery schools. However, Medina House special school does have 10 nursery places allocated by the DfE for specialist placement for 3-4 year olds. Multi agency approaches to identifying and meeting the needs of children in the early years' sector are well coordinated and involve Public Health (e.g. Health Visitors, Speech and Language Therapy) and SEN specialists within the local authority's Early Years SEN Advisory Team, who provide training for the providers and close working with parents and carers.

Special school provision

There are two maintained special schools on the Isle of Wight, where the Cognition and Learning needs of the pupils are significant and complex, (as defined by the SEN Code of Practice), i.e. severe learning difficulties, profound and multiple learning difficulties. Pupils may have a range of needs and conditions in addition. These two schools have a good reputation for the quality of educational provision they offer to pupils with the most severe long term and complex special educational needs. Both are recognised as good by Ofsted. There is an independent non maintained special school catering for secondary and post 16 pupils, primarily with

speech language and communication needs. This is also recognised as good by Ofsted.

Table 12

Medina House Sept '19		St Georges Sept 19	
Year R	7	Year 7	23
Year 1	14	Year 8	27
Year 2	12	Year 9	29
Year 3	10	Year 10	30
year 4	18	Year 11	18
year 5	19	Year 12	26
year 6	10	Year 13	9
Total	100	Year 14	10
Agreed no	93	Total	172
		Agreed no	162

Both schools are over capacity and current figures show that large cohort sizes in current Years 4 and 5 will impact on the secondary sector with two years. Capacity in St Georges will need to be increased to meet the higher number of pupils with significant learning disabilities, including profound and multiple disabilities.

Specialist resourced provision

Many pupils with EHCPs, whilst requiring a higher level of support that can be provided within a mainstream school, do not necessarily require a special school place. They benefit from being within a mainstream environment but with access to specialist support. For these children, a resourced provision, which is a specialist unit placed within a mainstream school where there is a level of expertise and increased staffing ratios to meet the pupil's individual needs, is often the most suitable placement. There are two secondary schools with resourced provision for pupils with Autism and currently one primary school with a resourced provision for pupils with an Autism. There were formerly two primary resourced provisions, but the future of the primary resourced provisions forms part of this strategy. There is a need to extend the range of needs which can be met within the resourced provision model on the Isle of Wight.

Table 13

Current resourced provision on the Isle of Wight				
Name	Greenhaven	Rainbow	Cove	Einstein
School	Greenmount Primary	Hunnyhill Primary	The Bay	Carisbrooke
Area of need	ASD	SEMH (pilot provision)	ASD	ASD
Number on roll		6	8	12
				12

Resourced provisions are currently at capacity with the exception of one place remaining at Hunnyhill. The Einstein Centre has higher numbers within Years 7 and 8, currently, whereas the Cove has an even spread across the five year groups, so

there is no pattern of use. In theory, it can be advantageous to have higher numbers in resourced provisions in Y7 and Y8 and work towards greater integration within Years 9-11, but this is harder to effect in practice.

Concerns raised by leaders and governors at Broadlea, in relation to adequately meeting the needs of high needs pupils within the ASD resourced provision, resulted in a change of provision. The review has highlighted the importance of resourced provisions broadening the scope of need that they can meet, particularly in relation to children and young people's cognitive and social and emotional needs, which can be co-morbid with an autistic spectrum condition.

Some schools are developing teaching and nurture spaces for pupils with needs such as social emotional and mental health needs. Whilst there is potential merit in schools exploring a range of ways to meet the needs of the most vulnerable pupils, the standard of education needs to be monitored and the impact of excluding pupils from their peers in the name of inclusion, must be justified. Where this type of provision is most successful, is where the resources provided enable pupils to access full time education, mostly learning alongside their peers. It requires all staff across the school to be skilled in meeting their needs, providing the young people with safe spaces, clear boundaries, acceptance of difference and constant encouragement to learn and self-regulate. This requires a whole school culture and commitment to the pupils who present with the most challenges. Therefore, this strategy suggests the development of ASD expertise in resourced provision and an SEMH outreach offer.

Pupil referral unit

There is a pupil referral unit on the Isle of Wight, the Island Learning Centre (ILC) which had six pupils with EHCPs on roll as the sole setting. However, the majority of pupils are dual rolled with their mainstream school. A resourced provision for primary pupils with social emotional and mental health needs is in its pilot phase, which means that there should be no pupils of primary age on permanent roll of the ILC. There are a number of children each year (19 pupils in March 2019) who are not attending fulltime education within their mainstream school as a result of medical needs. These needs can include mental health needs, such as psychosis and eating disorders. Children at hospital school are also on the roll of the ILC.

The ILC provides inreach and outreach to primary pupils, through a paid service. Secondary school pupils are placed in the ILC by the SEN service, where schools are currently unable to meet the young person's SEMH needs or manage their behaviour appropriately.

The capacity of the ILC to educate young people is compromised by being the only place on the island where the children with the most challenging behaviour are taught together. Therefore, this strategy suggests the development of provision to support emotionally vulnerable pupils across the Island.

Provision for 16 – 24 year olds

Whilst there are a small number of pupils educated off island at special schools providing for the post 16 phase of education, the majority of post 16 pupils with EHCPs are placed within the mainstream further education (FE) college, the Isle of Wight College. Smaller numbers are placed in maintained special school 6th form provision; within the INMSS 6th form provision; or with private training providers. The Isle of Wight College provided education for 208 high needs students with EHCPs in 18/19 and 334 students with special educational needs, without an EHCP. Specialist equipment, improved accessibility and staff training has enabled the college to increase the number of high needs students, including those with disabilities.

As with school aged pupils, there is a growing demand for special provision with more students retaining their EHCP up to the age of 25. This is an area where plans exist for a even better joined up approach with partners who have a key focus on further and adult education and adult care, towards independence and employability.

This strategy does not propose any expansion of specialist provision on the Isle of Wight as the post 14 strategy is aiming to reduce the number of young people with EHCPs as more young people enter employment.

Personal Budgets

Most provision for pupils with EHCPs is funded by the local authority, but parents, carers and young people themselves (over 16) can request a personal budget. Personal budgets can be used only to fund the support set out in an EHC plan and only for provision beyond what a school or college can already provide. This must be agreed by the local authority for education and care support, and by the health authority for the health provision.

In 2018 there were 25 personal budgets agreed, 10 of which were direct payments to education, (SEN2 2019 DfE; Table 10). This is a higher rate than nationally, with no personal budgets for arrangements with social care or health. This may be an area that could be further developed.

Links to other developments

The implementation of this strategy needs to be aligned with other related work including the development of skills and capacity for mainstream schools to improve inclusive practice and the ability to meet the needs of pupils with SEND and the post-14 strategy for young people with SEND.

The key findings from the consultation for the strategic review of specialist educational places for children and young people with SEND on the Isle of Wight (Appendix 6) outlines further areas for development and aspiration. Initiatives from a range of agencies include:

- Virtual School Attachment and Trauma Aware Schools programme to all schools by end of 19/20

- LAACES project – rolled out across a range of agencies, including special schools over 3 years (local augmentative and alternative communication (AAC – communication means other than talking e.g. using a picture system or electronic device) services).
- Autism Education Trust training (DfE and Autism Centre supported and developed) available from accredited trainers based in Medina/St Georges. The schools are providing input to a range of schools and other agencies.
- PEACH – Peach partnership for educational attainment as part of children’s health and wellbeing. 33% of schools have achieved Bronze award so far with further capacity building in 19/20. This is a costed service
- Sensory and emotional regulation training to schools with children EHCPs from St Mary’s Occupational Health.
- ADHD awareness training by Barnardos (linked to St Marys Hospital)
- Development of a wellbeing offer to support children in mainstream schools with Social Emotional and Mental Health needs.
- Joint working between Health and Hampshire Primary Behaviour Support Service to identify and support the additional needs of those on the Autism waiting list.

Conclusion

This sufficiency assessment suggests that there is an above national average percentage of pupils with an EHCP on the Isle of Wight. This can be explained by the disproportionate numbers of pupils with SEMH, ASD, SLC and MLD.

Nevertheless, the Isle of Wight schools include more children in mainstream settings compared with national averages. This is in line with the principles in this strategy. However, it is acknowledged that schools need support to meet need effectively and that there is a need to develop expertise in specific areas of need such as SEMH, ASD and SLC. Additionally, the trend data suggests that in five years’ time there will be a need for 64 additional specialist places due to the growth in the number of pupils with EHCPs despite the declining population. Therefore, the following priorities have been agreed.

- An early years’ specialist hub provision with both mainstream and specialist places for pre-school children with high needs to meet increased needs projected within early years
- Specialist outreach support to increase the capacity of mainstream schools to meet the needs of pupils with high needs more effectively, including children and young people with SEMH and ASD
- Increased knowledge and understanding to meet a broader range of needs associated with ASD, within specialist resourced provisions
- Increased provision within existing special schools at primary and secondary phase

- An integrated provision for secondary aged pupils with high needs, who are vulnerable as a result of high anxiety and complex mental health needs
- Strengthened commissioning arrangements to improve quality and consistency in education within non maintained, independent and alternative education providers.

Appendices

Appendix 1

Data was collected by:

- Close working collaboration with Parents Voice members
- One to one meetings with more than 50 individuals across education, health, social care and voluntary agencies.
- Parents Voice event for 44 parents and carers
- Group meetings with Elective Home Education parents and young people
- Group meetings with Education Other Than At School parents and young people
- Group meeting with St Georges school council
- Over 50 people made comments on the questionnaires
- Email correspondence with stakeholders

Appendix 2

Relevant sections checked by:

Catherine Barnard – Commissioning Manager for Children’s Mental Health, Isle of Wight

Andrew Briggs - Post 16 Commissioning & Finance Manager, SEN, Isle of Wight

Christa Dilleyston – Member of Parents Voice, Isle of Wight

Barry Downer – Isle of Wight Senior Finance Business Partner

Anwen Foy - Executive Head Teacher Hampshire and Isle of Wight Virtual School for Children in Care

Helen Ley - Capital Programme Manager, Strategic Development

Kathy Marriott – Head of Strategy and Operations (Isle of Wight), Children’s Services Department, Children and Families Branch

Karen Nye – School Improvement Manager, Education and Inclusion, Isle of Wight

Chad Oatley – Public Health Senior Practitioner

Helen Percy – Data and Information Team

Karen Potheary – Inclusion Manager, Isle of Wight

Heather Slocombe – School Place Planning Information Officer

Natalie Smith – Isle of Wight School Improvement Manager

Kate Symes – SEN Service Manager, Isle of Wight

Louise Tatton – Isle of Wight Lead Officer for Elective Home Education

Appendix 3

With particular thanks to all those who contributed to the data collection for this report.

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Monique Belousoff General Manager, True, Windsor, Australia

Andrea Bevan 0-19 Public Health Nursing Service Lead

David Botell Chair Parents Voice, IW

Jackie Boxx HT Island Learning Centre

Andrew Briggs Post 16 Commissioning & Finance Manager, SEN, IW

Becca Burr Professional Lead for Children's Speech and Language Therapy, NHS, IW

Stewart Chandler Principal Contract Officer – Transport, IW

Debbie Connor SENCO Carisbrooke College and Medina College

Christa Dilleyston Parent of child with SEN, educated off island, member of Parents Voice

Suzy Dobson Head of Complex Needs CCGs, NHS

Carrie Drake SENCo, Outreach Lead & DDSL, Island Learning Centre

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Prof Jeremy Turk Consultant Child and Adolescent Psychiatrist
Phillip Walker County Education Manager, Skills and Participation, Hampshire
Rachel Weldon Principal St Catherines non maintained Special School, IW
Jo Wood Administrator, Coordinator Parents Voice, IW
Steve Woodford Childrens Rights and Participation Officer, IW
Medina House School staff and parents
Parents Voice Riverside Forum
Secondary Headteachers' Executive
All those who completed questionnaires or contributed in many ways

Appendix 4
SEND strategic review leaflet

Key questions

- Can you give an example of special needs education that has worked well?
- What does 'good' specialist educational provision look like for children and young people (CYP) with an EHCP?
- What barriers need to be overcome to improve educational provision for children and young people with an EHCP, on the Isle of Wight?
- Who can help in overcoming these barriers? What can they do to help? What could you do?
- How close to your definition of 'good' is SEND provision for CYPs with an EHCP on the Isle of Wight at the moment?

Responses will be collected throughout Spring 2019. If you would like help to arrange a group event, a meeting, or to make an individual response to these questions by email, please see [Local Offer](http://www.iow.gov.uk/localoffer); www.iow.gov.uk/localoffer

Or contact,

Email: <http://www.iow.gov.uk/Council/OtherServices/Local-Offer/SendMessage>

Phone: 01983 821000

It is important to have your say.



To the left of this picture we can see that the fruit on the tree cannot be reached by everyone, when they all stand on the same-sized box. On the right-hand side, we can see that when the children stand on boxes matched to their needs, they can be given an equal opportunity to pick the fruit. It is the same with education. But instead of a different-sized box to stand on, a child may need a specific type of support, such as provision in the classroom or the playground. A child with visual impairment may need their text size bigger; a child with high anxiety may need support to approach new learning; a young person with social, emotional and mental health needs may need a regular programme to better express their emotions; a child who finds it hard to remember their learning may need the support of a trained adult to help them start their task. Most children need individual support at some time in their education. For children with high levels of learning difficulties and/or disabilities, (recognised through an Education, Health and Care Plan), that support may need to be more frequent or specialist; in class, at playtimes and school trips, at home or in the community. Completing a strategic review of specialist provision on the Isle of Wight will enable parents, professionals and volunteers to work together, making a plan that will meet the specialist needs of our children and young people with EHCPs.

Partners and stakeholders; a co-production

The strategic review will seek views from:

Parents and carers of pupils with SEND, particularly those with children with EHCPs

Professionals working in: Education; Social care; Health, incl. CAMHS; Charitable organisations

Representative organisations such as Parents Voice, Autism Partnership Board, School Governors

Children and young people

Home educators and alternative education providers

In gathering information:

- Views will be listened to
- Methods for gathering views will be transparent, fair and accessible
- Feedback will be given at mid-point and at the conclusion of the process
- Where views do not result in direct action, reasons will be open and honest.

ENVISAGING EDUCATIONAL EXCELLENCE FOR PUPILS WITH SPECIALIST NEEDS AND DISABILITIES

A strategic review for 0-25 year olds with Education, Health and Care Plans on the Isle of Wight



This strategic review will take account of the number of specialist educational places available for 0-25 year olds with an Education Health and Care Plan (EHCP) in mainstream and special schools and other educational settings on the Isle of Wight. The review will also consider the suitability of these places to meet current and future needs of pupils and students with EHCPs across the range of special educational needs and disabilities.

The information will come from the views of people who live and work with children and young people with SEND and will include the opinions and experiences of children and young people themselves. Data and statistical analysis will be a key part of the review, as well as national research in SEND.

With a commitment to co-production with stakeholders, the strategic review will provide a report with clear recommendations for the development of future specialist educational provision on the Isle of Wight. The review will offer sustainable solutions for future planning for specialist places across the Isle of Wight.

The review process will:

- **communicate** clearly,
- **consult** meaningfully,
- ensure **participation** of stakeholders
- **deliver** a strategy that is readable and recognisable from the views and information gathered.

The review will gather information from January to May 2019 and will then be shared for further consultation from June to July 2019.

Key priorities from the current strategy for Children and young people with special educational needs and disability 0 to 25 years, 2017-2019

- ◊ **Partnership and co-production with parents/carers, children and young people with special educational needs and/or disability**
- ◊ **Early recognition of needs and appropriate intervention**
- ◊ **Strengthening inclusion and improving provision for children and young people with SEN in mainstream settings**
- ◊ **Ensuring local provision is responsive to and meets local need and improves outcomes**
- ◊ **Fair and efficient use of resources**

Appendix 5 Questionnaires used in the review

Strategic Review of specialist educational places on the Isle of Wight

- Can you give an example of special needs education that has worked well?

- What does 'good' specialist educational provision look like?

- What barriers need to be overcome to improve educational provision for children and young people with EHCPs, on the Isle of Wight?

- Who can help in overcoming these barriers? What can they do to help?



• How close to your definition of 'good' is SEND provision on the Isle of Wight at the moment?

As far from my idea of good as it could be

As close to my idea of good as it could be

• What could you do to improve this over time?

[Empty rounded rectangular box for text input]

Name (optional).....

Relationship to a child or young person with special educational needs, e.g. parent, carer, teacher, play therapist.....

If you are a child or young person, please tick here

I have experience of children or young people with needs associated with: **Communication and interaction**; e.g. speech or language difficulties or autistic spectrum conditions

Cognition and learning difficulties; e.g. moderate to severe learning difficulties, or specific difficulties such as dyslexia or dyscalculia

Social emotional and mental health difficulties; e.g. Attention Deficit Disorder, eating disorder or anxiety

Sensory and/or physical disabilities; e.g. Visual impairment, Hearing impairment, Crohn's disease

Age range of child or young person I know with SEN(D) (please circle)

0-4 4-7 7-11 11-16 16-18 18-25

If you would like to contact someone about the strategic review, please go to [Local Offer](https://www.iow.gov.uk/Council/OtherServices/Local-Offer/SendMessage) on <https://www.iow.gov.uk/Council/OtherServices/Local-Offer/SendMessage>

Or phone **01983 821000**

The data collected in this questionnaire will be used to inform the strategic review of specialist places on the Isle of Wight. Data will be kept securely for five years. Personal data will not be shared with third parties.



Give your views on education for children and young people with education health and care plans

What is working well? 

What is not working well? 

What would good SEND education look like?

What are the barriers? 

Who needs to be involved? 



.....
Name

Do you have an EHCP? Yes/No

How would you describe your special educational need?



Appendix 6 Key Findings from the consultation

Envisaging Excellence for Children and Young People with Special Needs and Disabilities

One big thing that we learned is that you have to please remember that we are human beings. We are not problems; we are not just disabled, or just SEND. We are human beings, the same as the rest of you. We might do it in our way, or do it a little bit differently, but remember that fact and go with it. We are this, not a problem, a puzzle or a jigsaw. Work with us—do not treat us as a problem

Q481 Parliamentary Education Committee's Special Educational Needs and Disabilities Inquiry 2019

What do we say can be done better by children and young people and for children and young people?

Develop better ways to have our voices heard in decision making that affects us.

Improve ways for us to request a review of the support we need to help us learn.

Use language and behaviour that we understand. Check with us whether we understand all the language you use in professional meetings and help us to know about the systems you are used to.

Help us to design an App for the Local Offer that can be used by us

If we are vulnerable help us to know more about keeping safe in ways that we can access and understand.

Encourage us to express our views to those that can make a difference about how we would like to engage with services, post 18.

Show us relevant resources, such as National Autistic Society's online training 'Finding employment'

Involve us in writing our EHCPs in a more meaningful way and write them so that we can understand them.⁵
(Young person centred EHCPs Exemplars by Council for Disabled Children)

What does independence mean for me? What do I want my EHCP to do for me once I am 18?

⁵<https://councilfordisabledchildren.org.uk/sites/default/files/field/attachemnt/EHC%20Exemplar%20yr%209%20and%20beyond%20-%20Final%20Draft.pdf>

Promote and share resources that have been made with us in mind, such as #UnderstandMore⁶

This was a revelation to us, as just for once the emphasis was about what James needed, not just putting up with what was available'

'...effective parental engagement will not happen without concerted effort, time and commitment of both parents and schools. It will not happen unless parents know the difference that they make, and unless schools actively reinforce that 'all parents matter' (Harris & Goodall)

7

What do we say needs to be done better for parents and carers and by parents and carers or children and young people with special educational needs and disabilities?

If we are in a parent/carer voice groups, we need to keep encouraging others to join in, or to share their views, including providing feedback when things work, as well as when they don't

Work together to produce a booklet which promotes the respectful relationships required to ensure parents are recognised as partners in their child's education

Meet with trainee teachers and early career teachers on the island each year to enable those new to the profession to have a greater insight into the challenges faced by many families

Share information that supports parents/carers view of child's early needs to have more emphasis, when engaging with health and other professionals, e.g. using tools such as Communication Trust's Talking Point progress checker

Educate yourself about your child's needs'

Connect with other parents who don't feel as able to access support; informally and through networks such as Parents Voice

Don't call me mum!

[/watch?v=rP1S8ip4VVE](#)

6
Do parents know they matter? Engaging all parents in learning, E... 3, 277-289, DOI: 10.1080/00131880802309424

Engage in campaigns to improve communication with your child, e.g. 'Reduce screen, reduce screams', in relation to mobile phone use whilst with young children

Training on Rights of young people into employment. Share knowledge and build understanding of Rights of the Child in relation to young people with EHCPs

Feel confident to share our names within meetings, if we are referred to

If a child can't learn the way we teach, maybe we should teach the way they learn.

Ignacio Estrada

We need a good balance of will and skill

What do we say needs to be done better for education professionals and by education professionals to better support children and young people with SEND?

Review Ordinarily Available Provision involving all stakeholders, so that there is a better shared understanding of how to provide for children with a range of SEND within inclusive settings⁸

Have a shared SEND Inset Day across island for 2021, with key speakers and workshops to inspire and provide practical advice

Support and training for more bespoke adaptations to achieve good outcomes for indiv. need

Annual Reviews to include a staff training plan for next year, for mainstream settings, to ensure key skills are maintained across transition to new staff and where new needs are identified preparations can be made in advance through training and resourcing

Explore Grants4Schools for small scale innovation in clusters of schools with EHCP pupils

Promoting more effective ways to engage parents in the education of their children when challenges need to be overcome

'Don't call me 'mum'!' Share the importance of using a parent or carer's name in meetings, rather than referring to someone as 'mum', or 'dad' in the third person

Potential for PEACH Award to encourage wider participation within communities in relation to support for pupils with high needs

Behaviour policies to reflect an understanding of SEMH, communicative function of behaviour and the importance of restoration and reflection

⁸ The best practice is in areas where they have been able to deliver that, [support for SEND pupils without EHCPs] so parents do not think, "The only hope for my child is an EHC plan, because otherwise there is no support for me". That is not good practice because it does not deliver for children or local authorities. Q832 Nadhim Zahawi; Minister for Children and Families, Education Ctee SEND inquiry 21.05.19

Develop a range of skilled and therapeutic provision within mainstream schools to meet needs of young people with SEMH at secondary schools

Hold structured interim review meetings related to needs when the behaviour of a CYP with an EHCP is causing concern

Develop and promote further safeguarding modules relevant to young people with EHCPs, e.g. Feel Safe App⁹

Train teaching staff in use of structured conversations with parents/carers of high needs pupils to complement work of EP service in person centred planning

Provide improved, relevant and aspirational careers guidance throughout school for SEND pupils

Training in 'repair and return' concept, to support reparative relationships in schools

What do we say needs to be done better by Children's Services and for Children's Services to better support children and young people with SEND?

Review the effectiveness of voice of the child in EHCPs, Annual Reviews and improve systems for capturing their say in the decisions that affect them (Article 12 UNCRC)

Promotion of the Isle of Wight as Attachment Aware and Autism Friendly
Further develop Local Offer to make it more accessible to young people and families

Develop more effective engagement of services for disabilities through use of personal budgets¹⁰

Provide greater emphasis on SEND in LA reports on care leavers

Continue to explore funding, such as Innovation and Reform

Appoint designated SEND case worker for LAC

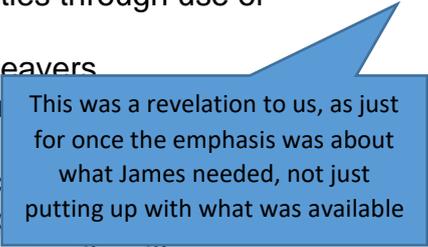
Develop clarity and accessibility of criteria for entry to specialist resourced provision and transition to mainstream, where appropriate

Development of an adapted setting for XI form education for pupils with learning difficulties

Development of an integrated nursery with a mainstream preschool and Medina House in an appropriate and adapted setting

Research and evaluate number of hours of educational provision across settings for children and young people with EHCPs from 2-19 years

Centrally appoint a team of specialist LSAs for HI and VI



This was a revelation to us, as just for once the emphasis was about what James needed, not just putting up with what was available

⁹ <https://focal.org.au/feel-safe-app-for-people-with-disability/>

¹⁰ Process for personalised planning and personal budget IW 19.05.15

Create an automatic review mechanism before any decision to home educate
Develop hubs for specialist needs across

We need to work together to ensure we all have aspiration for children with SEND and that we experience good collaboration; consultation and communication

Develop 'OffStream' provision for CYP with anxiety and mental health needs in particular, with regular access to an integrated setting and individualised curriculum

A designated lead for EOTAS within Children's Services

Monitor schools' training plans to look for trends, liaise with Inspection and Advice Service and provide centralised training where appropriate

Develop a consistent process and structure for interim reviews

What do we say needs to be done by agencies and organisations other than education, and for them, to better support children and young people with SEND?

Need for more joint commissioning and joined up services¹¹, including in mental health

Youth groups and community organisations to use Include Autism toolkit¹²

Consider joint assessments, or joint timing, for EHCP annual review and children's disability team annual assessments

Alternative Provision providers to develop apprenticeships and qualifications

Joint working to produce 'I may need...' cards which display accessible information about a child or young person to support them across other areas of their life, e.g. a child with SEMH has a card which supports them for hospital admissions, or at the dentist

Develop dual placement university courses in partnership with local mainland universities

Ensure all YR Health development reviews are in first term of schooling

Promote links with Health Visiting and School Nursing within Public Health and Early Help - Joint training with EY team on SEND

Create an outreach hub, including support and training which impacts on EHCP pupils, promoting commonality of approach and processes across areas of need, across agencies

Specialist Teacher Advisor Team for HI and VI to appoint a central bank of skilled and specialist learning support, with a role to also support the inclusion of HI or VI children within the mainstream class

Develop a joint SEMH strategy for IW, across Education, Health and Care

Local Universities to consider Masters level SEND specialism study as part of Early Career Framework

¹¹ 'The general principle is—the areas that do it well have a very simple formula, I guess, which is strong leadership, both in terms of political and officers, knowing the levers to pull to make sure the provision is there, joint commissioning on the ground and having a really strong assessment of what the local needs are of the local population.' Q756. Nadhim Zahawi, Minister for Children and Families, Ed. Ctee. SEND inquiry 21.05.19

¹² <https://www.ambitiousaboutautism.org.uk/include-autism-toolkit>

Local Universities to consider Masters level SEND specialism study as an apprenticeship
Improve coordination of transition team within Children's Services, to develop a wider offer towards adulthood and employment for young people with SEND, in post 16 education
CCG to undertake DfE's Link Programme to offer free training for secondary school staff to support the mental health of young people by spotting early signs and signposting¹³.

Appendix 7

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