

Newham's EHC pathway

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Newham - context

- High numbers of children and young people with complex needs compared to statistical neighbours
- Strongly inclusive approach – resource provisions attached to mainstream schools; two special schools
- Low statement/EHC plan – 0.7%. Around 1,500 high needs funding cases, of which just over 500 are statements/EHC plans



Key elements in our EHC pathway

Panels/meetings:

- EHC gateway panel – decision on whether to assess
- Person-centred (multi-agency) meeting with family
- Children’s Integrated Resourcing Panel (ChIRP) where multi-agency funding packages required

Key roles:

- Assessment and Commissioning Officer
- EHC facilitator

*****See handout – EHC assessment and planning – co-ordinated 20 week timeline*****

EHC PLANS PROCESS

- **Week 1** - request for an EHC Assessment received
- **Week 6** – Decision whether or not to proceed with assessment taken at EHC Gateway Panel
- **Week 13** - EHC Planning Meeting takes place
- **Week 20** – Final Plan issued

Quality assurance

Review processes (2015)

- Internal quality review meetings with 0-16 and 16-25 EHC teams
- Review meetings with Newham Parents Coproduction Forum
- Review meetings with CCG and health provider

Strengths	Challenges
EHC plans are good: -SMART outcomes, -person centred -well specified special educational provision	Health and social care input can be limited: - providing info at right time; attending meetings - too often EHC plan is not ONE plan
Parents much prefer them to statements! <i>See Newham Mag article</i>	Joint commissioning e.g. therapies, challenging behaviours
Parents report being fully engaged	Data sharing to support full integration

How are we improving?

- Late 2015 - training on **outcomes focused planning** across education, health and social care
- November/December - **awareness raising training** for social care (Triage and assessment) so they provide the right information for assessment and planning
- This term - audit of **health input** to EHC assessment
- **0-25 integrated SEND service** to launch in May 2016
 - integrate management structures to develop sharper accountability; quicker decision making, and improved joint working and information sharing ...for children and young people with complex needs 0-25

What's next?

- Developing our **SEND self-evaluation**, building on JSNA
- **Peer review later in 2016**, to help prepare for inspection
- Completing statement/LDA transfers – focus on post 16
- Jointly commissioning **integrated child health service** (from late autumn)
- Developing our SEND **early help offer**

