



Department
for Education

Special educational needs and disability: supporting local and national accountability

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Introduction

Since September 2014, we have been working closely with local areas to implement the special educational needs and disability (SEND) reforms and discussing with partners longer-term plans to support local and national accountability.

This document supports, and should be read in conjunction with, the overall [Accountability system statement for education and children's services](#). Building on the key elements of accountability set out in the Children and Families Act 2014 and the [SEND Code of Practice: 0-25 years](#), the purpose of this document is to:

- describe the vision for the whole SEND system, and the roles and responsibilities of local and national organisations in delivering the requirements in the Children and Families Act 2014;
- look ahead to the data and analysis that will enable us all to judge how well the new arrangements are working and to compare delivery across areas; and
- provide information about new arrangements for independent assessment, including the proposed Ofsted/Care Quality Commission (CQC) inspection framework.

Our intention is that the combination of local accountability measures; data and analysis; and independent inspection will show how the SEND system is performing, which parts are working well and less well and whether outcomes are improving for children and young people.

The majority of statutory duties in relation to SEND rest at a local area level, predominantly with local authorities but now also with Clinical Commissioning Groups (CCGs). As the principal responsibility for delivery is held in local areas, we plan to work with relevant partners and wider stakeholders to develop a set of agreed success measures to support local and national accountability. In particular, we intend to explore with local areas how they are:

- collecting feedback from children, young people and their families and using this to improve services and delivery;
- using data and intelligence to measure progress and success; and
- working with other local areas to identify issues or trends and to learn from each other.

Section 1: Vision for the overall SEND system

The vision is of children and young people with SEND achieving well in their early years, at school and in college; finding employment; leading happy and fulfilled lives; and having choice and control over their support.

Achieving good outcomes for children and young people with SEND is integral to the Department for Education's (DfE) wider aim of a highly educated society in which opportunity is equal for children and young people, no matter what their background or family circumstances. It is also integral to the Department of Health's wider aim to help people live better for longer – by leading, shaping and funding health and care in England, making sure people have the support, care and treatment they need, with the compassion, respect and dignity they deserve.

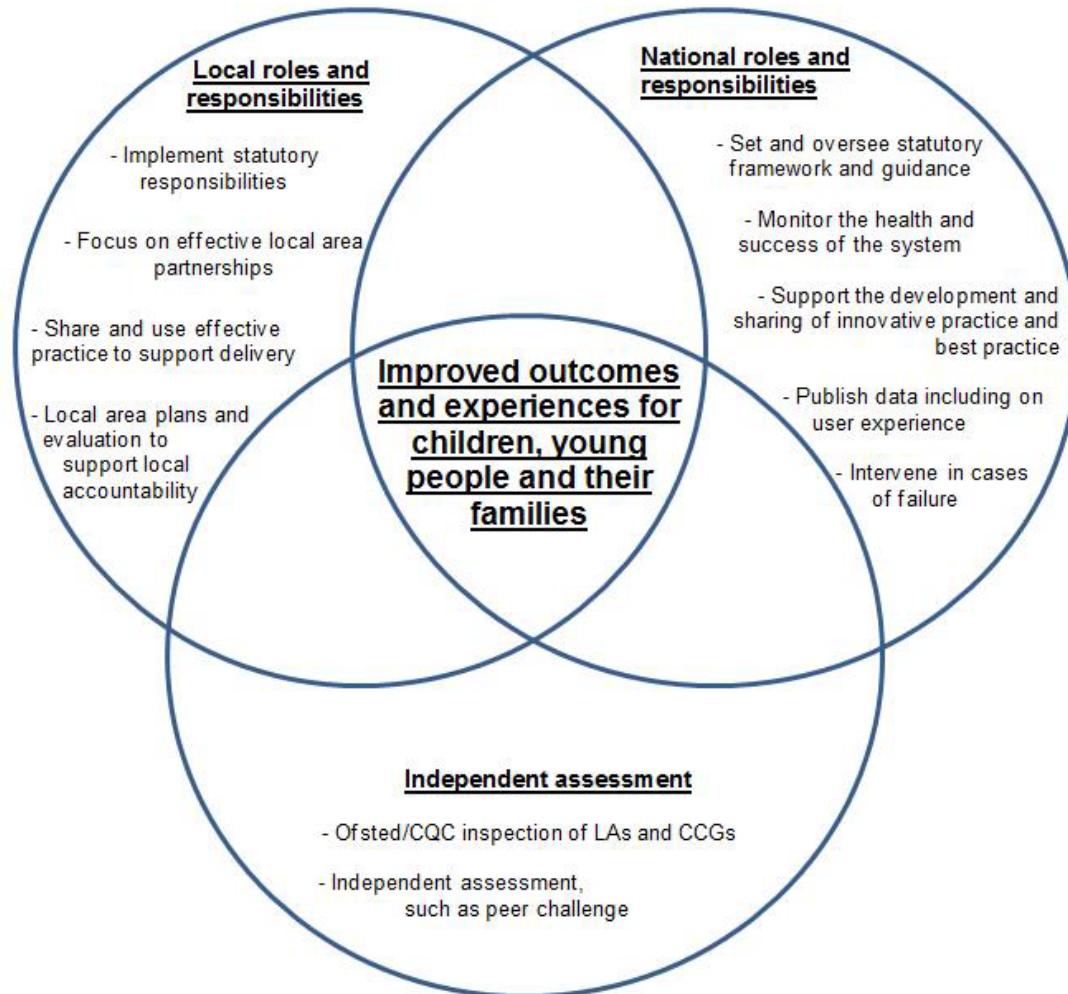
The components of a successful SEND system include:

- a person-centred and joined-up approach to identifying and meeting the needs of children, young people and their families;
- engagement and participation of young people and families so that they have greater choice, feel that they are in control and are being listened to and their concerns are resolved swiftly;
- a clear understanding of what support, services and provision are available and how to raise concerns or seek redress when there are concerns;
- use of effective practice, data and wider intelligence and independent assessment to drive improvement; and
- clearly-defined and understood roles, responsibilities and accountability.

A framework for SEND

The framework has three parts, which, when they work together, provide the structure for improving outcomes and experiences for children, young people and their families. It will show how the system is performing, hold partners to account and support self-improvement.

The three parts are: local roles and responsibilities; national roles and responsibilities; and independent assessment.



Measuring success

We intend to develop a set of key indicators which will enable the progress and impact of the SEND reforms to be monitored at both local and national levels.

Table 1 sets out how we propose to measure success at a national level through data on improved outcomes and user experience across three broad areas: positive experience of the SEND system for children, young people and their families; improved outcomes for children, young people and their families; and effective preparation for adulthood.

Table 1: Measuring the success of the SEND system

	Positive experience of the SEND system for children, young people and their families	Positive outcomes for children, young people and their families	Effective preparation for adulthood
What does success look like?	<ul style="list-style-type: none"> - Parents, children and young people get right support at right time; feel that they are listened to and in control - Planned and well-managed transition at key points - A joined-up, transparent and accountable system 	<ul style="list-style-type: none"> - Improved progression and attainment at all ages - Clear and appropriate expectations and aspirations leading to fulfilled lives - More resilient families 	<ul style="list-style-type: none"> - Increased employment - Choice and control over living arrangements / Independent living - Participation in the community - Health outcomes based on need and aspiration
Examples of data and intelligence	<ul style="list-style-type: none"> - SEN appeals and outcomes - Education, Health and Care Plans (EHCPs) completed on time - Local authority and parent survey data - Children and young people's Personal Outcomes Evaluation Tool (POET) pilot - Feedback from Independent Supporters 	<ul style="list-style-type: none"> - Attainment data - Outcomes for looked after children - Destinations after Key Stage 4 & Key Stage 5 - School absence and exclusion rates 	<ul style="list-style-type: none"> - Employment status for adults with learning difficulties and disabilities (LDD) - Accommodation status for adults with LDD
When do we expect to see an impact?	Short/medium term: From Sept 2014 to Sept 2017	Medium/long term: 3 to 5 years' time	Fully emerge: 5 to 10 years' time

We will work with local areas and partners to test these indicators and how well they support local accountability. We will also explore opportunities, through further analysis of national datasets, to understand better the wide range of performance and outcomes from different cohorts of children and young people.

Local areas are already working in partnership, regionally and with nearby areas, to identify issues and trends and to learn from one another. This includes drawing on a range of sources including the [local authority interactive tool \(LAIT\)](#); health data from the [National Child and Maternal Health Intelligence Network](#) (ChiMat); schools performance data from [RAISEonline](#); and [LG Inform](#), the Local Government Association's (LGA) benchmarking data service, which pulls together a wide range of data covering numerous topics.

In the early stages, much of the available information will be process data. In summer 2015, data on transition from statements and Learning Difficulty Assessments (LDAs) to EHC plans; EHC needs assessments completed on time; and appeals to the First-tier Tribunal will indicate early progress with implementing the reforms. The data will be made available in the LAIT, which will support transparency and enable local benchmarking across a range of education, health and care services. A data publication schedule will also be available in the LAIT.

This will widen, in the medium to long term, to focus on outcomes (including destinations, attainment and employment). Increasingly, user experience data and feedback will provide evidence of the quality of service delivered and the experience of the child, young person or their family.

Plans for a national survey of users' satisfaction are underway. Our intention is for survey results to be available in summer 2016 and these will enable local area benchmarking on a range of measures against national results. User experience information becoming available in 2015 includes:

- **Spring:** In Control's report on the Personal Outcomes Evaluation Tool (POET) for Children and Young People with SEND. The parents, young people and practitioners involved in the pilot have reported positive experiences of the EHC planning process; and, for families, the potential positive impact of EHC plans on outcomes in both their children's and their own lives;
- **Summer:** SQW's report on the early impact of the reforms on outcomes for families, children and young people, based on over 700 interviews with families and 50 case studies; and
- **Autumn:** 'User Journey Mapping' research to help better understand children, young people and families' experience of the new SEND system and ideas of how to improve that experience will be completed. A simple mapping tool that can be used by DfE, local areas and other partners to track customer satisfaction and make improvements to their service will also be available.

Section 2: Local roles and responsibilities

Local accountability

The majority of statutory duties in relation to SEND rest at a local area level, predominantly with local authorities but now also with Clinical Commissioning Groups (CCGs). It will be the performance of local partners and settings which will underpin the successful delivery of the reforms set out in Part 3 of The Children and Families Act 2014. The Act strengthens local authorities' key duties in respect of children and young people with SEND across the 0-25 age range, regardless of where they are educated. It places duties on health and education settings to use their best endeavours to meet the needs of children and young people with SEND; and requires local authorities and other listed bodies to have regard to the statutory guidance set out in the [SEND Code of Practice: 0-25 years](#).

Table 2 is based on the Code of Practice and sets out the high-level responsibilities and accountabilities of the main partners in the system. It emphasises the need for effective partnership working across education, health and social care.

Table 2: Accountability and key responsibilities

Agency	Accountability and key responsibilities
Local authority	<p>Lead Member for Children's Services and Director for Children's Services (DCS) are responsible for leading integration arrangements for Children and Young People with SEN or disabilities.</p> <p>Children's and adult social care services must co-operate with those leading the integration arrangements for children and young people with SEN or disabilities to ensure the delivery of care and support is effectively integrated in the new SEN system for children and young people aged 0-25.</p>
Health and Wellbeing Board	<p>Membership of the Health and Wellbeing Board must include at least one local elected councillor, as well as a representative of the local Health watch organisation. It must also include the local DCS, Director of Adult Social Services (DASS), and a senior CCG representative and the Director of Public Health.</p> <p>The Health and Wellbeing Board must ensure a joint strategic needs assessment (JSNA) of the current and future needs of the whole local population is developed. The JSNA will form the basis of NHS and local authorities' own commissioning plans, across health, social care, public health and children's services. This is likely to include specific needs of children and young people with SEN or disabilities.</p>

Agency	Accountability and key responsibilities
Clinical Commissioning Group	<p>The CCG governing body and Accountable Officer have a responsibility to co-operate with the local authority in jointly commissioning services, ensuring there is sufficient capacity contracted to deliver necessary services, drawing the attention of the local authority to groups and individual children and young people with SEN or disabilities, supporting diagnosis and assessment, and delivering interventions and review.</p> <p>CCGs will be held to account by NHS England and locally to the Health and Wellbeing Board for how well they contribute to delivering the local Health and Wellbeing Strategy.</p>
NHS England	<p>The Secretary of State for Health is responsible for NHS England who commissions specialist services which need to be reflected in local joint commissioning arrangements (for example augmentative and alternative communication systems, or provision for detained children and young people in relevant youth accommodation).</p>
Health watch	<p>Local Health watch organisations represent the voice of people, who use health and social care, on the Health and Wellbeing Board.</p> <p>They are independent, but funded by local authorities. Local Health watch organisations are a key mechanism for enabling people to share their views and concerns – to ensure that commissioners have a clear picture of local communities’ needs and that this is represented in the planning and delivery of local services. This can include supporting children and young people with SEN or disabilities.</p>
Maintained nurseries and schools (including academies)	<p>The governing body and school leaders are responsible in mainstream schools and have duties to use best endeavours to make the provision required to meet the SEN of children and young people. All schools must publish details of what SEN provision is available through an information report and co-operate with the local authority in drawing up and reviewing the Local Offer.</p> <p>Schools also have duties to make reasonable adjustments for disabled children and young people, to support with medical conditions and to inform parents and young people when SEN provision is made.</p> <p>More information about the role of early years settings, schools and post-16 institutions is given in Chapters 5 to 7 of the Code of Practice.</p> <p>Accountability is through Ofsted and the annual report that schools have to provide to parents on their children’s progress.</p>

Agency	Accountability and key responsibilities
Colleges	<p>The governing body and college leaders are responsible in mainstream colleges and have duties to use best endeavours to make the provision required to meet the SEN of children and young people. Mainstream and special colleges must also co-operate with the local authority in drawing up and reviewing the Local Offer.</p> <p>All colleges have duties to make reasonable adjustments for disabled children and young people.</p> <p>More information about duties on the further education sector is in Chapter 7 of the Code of Practice.</p> <p>Accountability is through Ofsted and performance tables detailing areas such as destinations and progress measures.</p>

Source: Based on the SEND Code of Practice: 0 to 25 years

Early resolution of disagreements

The reforms place children, young people and their families at the centre of the SEND system, with a focus on ensuring their views, aspirations and concerns are taken fully into account at all stages. Providers, working closely together with parents and young people, should make decisions about provision for children and young people as soon as possible.

Where there is disagreement, an early resolution benefits parents and young people and can avoid unnecessary stress and expense. In most cases, it is best to resolve issues locally and local authorities are required, by the Code of Practice, to set out their disagreement resolution processes in their Local Offers. Where agreement cannot be reached, however, the Children and Families Act 2014 has made provision for parents and young people. Families will have access to voluntary disagreement resolution services, mediation (for education, health and care) and appeal. Rights to appeal and access to independent tribunal have been strengthened and extended to enable appeals to be made by young people over 16. Further details are set out in Chapter 11 of the SEND Code of Practice.

Information is also available in the guides for parents and carers; FE providers; schools and early years settings; and social care and health professionals. The local Information, Advice and Support Service (IASS) can provide access to support for parents and young people in arranging and attending meetings; and Independent Supporters are available to support families through the Education, Health and Care (EHC) plan process.

Use of resources and effective practice to support delivery

Local area self-assessment and evaluation supports local accountability and improvement. Local areas can draw upon emerging innovative and effective practice; and a wide range of resources are available to help local authorities, families, health practitioners and education settings to understand the reforms and to work together to assess progress. These include:

- local, impartial [Information Advice and Support Services \(IASS\)](#), [Independent Supporters](#), Parent Carer Forums and the Contact a Family helpline (0808 808 3555). These can help families in a number of ways, including with disagreement resolution, EHC plans, and new assessments;
- [a series of guides to support understanding of what the reforms mean](#) for parents and carers; FE providers; schools and early years settings; and social care and health professionals, including what to expect from the system and further details on roles and responsibilities;
- a wide range of [briefings and support materials](#) covering all aspects of the Children and Families Act 2014 and [Information Packs](#) that draw together a number of helpful resources and effective practice to support co-production, transition plans and local offers;
- easy-read guides to the SEND reforms for [children and young people](#) and [parents](#) with learning disabilities, produced by Mencap with DfE, and [materials explaining changes to the SEND support system](#) co-produced with children and young people;
- best practice case studies for children and young people with SEN in primary, secondary and special schools, published as part of the [Nasen outstanding schools project](#) on 'outstanding' SEN education;
- best practice case studies for school leaders on managing and embedding the SEND reforms, produced by [Achievement for All \(3As\)](#);
- the [SEND Gateway](#) – an online portal offering education professionals free, easy access to high quality information, case studies, resources and training for meeting the needs of children with SEND in early years, schools and FE;
- [eight good practice examples of colleges](#) successfully implementing key elements of the reforms, published by the Association of Colleges;
- [nine SEND regional lead authorities](#) who will support implementation and encourage peer support between authorities and their partners; and

- [Disability Matters](#) – a new set of 57 learning modules aimed at raising disability awareness, which include a range of e-learning and face-to-face group training materials, covering topics such as: Understanding Disability; Family and Society; and Health and Wellbeing.

Section 3: National roles and responsibilities

National accountability

The DfE's accountability statement includes the role of the Department in supporting local communities and parents to hold local authorities to account for their performance. The Department will:

- set and oversee the statutory framework that underpins the SEND system and provide guidance to local authorities and partners on how to fulfil their responsibilities;
- monitor the overall health and success of the system;
- support the development and sharing of innovative and best practice;
- publish transparent and accessible data, including on user experience;
- review the distribution of SEND funding for high cost SEND, to make it more transparent and as fair as possible;
- invite Ofsted/CQC to inspect local areas on their effectiveness in fulfilling their new duties (further details are set out in Section 4); and
- intervene in cases of failure.

Our priority is to support and challenge local authorities and their partners to deliver high quality services. We will continue to do this in the coming year through our professional SEND advisers who work directly with local authorities, drawing on intelligence from a range of sources, including feedback from families and partners, surveys, data and local area self-assessment and evaluations.

Where the Secretary of State is satisfied that a local authority is failing to perform a relevant function to an adequate standard, they may exercise intervention powers under section 497A of the Education Act 1996.

Nationally, the Department of Health and NHS England have important oversight roles for the health elements of the SEND system and the legal duties applying to health partners. NHS England's mandate includes a clear objective that the NHS must ensure children with SEND have access to the services identified in their agreed plan and NHS England must be able to report against their delivery of this objective. CCGs are held to account by NHS England, which has powers of intervention, where a CCG has failed, or is at risk of failing, to meet its statutory obligations.

Section 4: Independent assessment

Independent assessment supports local accountability and offers an objective view of progress in order to identify improvements. Independent assessment involves a wide range of activity, including Ofsted/CQC inspection, independent audit and peer challenge.

Ofsted/CQC inspection of local areas

Following the advice provided to the Department for Education by Ofsted and CQC, in December 2014, on local areas' preparation for the SEND reforms, the Parliamentary Under Secretary of State for Children and Families asked Ofsted and CQC to inspect local areas on their effectiveness in fulfilling their new duties.

Inspections should be regarded as development opportunities for local areas, as well as reassuring families on progress with implementation. They may also provide evidence for local areas to receive appropriate external support and intervention.

All local areas will be inspected, with an inspection interval of up to five years. Inspection will look at effective identification of need; effectiveness in meeting needs; and local arrangements to achieve better identification and outcomes.

A three-person team comprising an Ofsted HMI, CQC inspector and a trained local authority inspector will review available national data, including within-area inspection outcomes from CQC and Ofsted, and local area self-assessment.

Field work will include visits and discussions with a wide range of people including: elected members; key local area officers from health, education and social care; and education and health providers, including leaders of early years settings, schools and colleges. The views of children and young people and their parents and carers are an important contribution to inspectors' judgements.

Reports will be published following all inspection activity, and the findings of the local area inspection will contribute to other CQC and Ofsted inspection activity.

Ofsted and CQC will engage with the sector, disabled children and young people and those who have special educational needs, and parents and carers throughout the development stage. Proposals will be put to public consultation in late spring and details on how to get involved will be available on [Ofsted's](#) and [CQC's](#) website.

Two sets of pilots have been proposed for late spring and autumn 2015. It is expected that the first inspections will take place early in 2016. Inspections will draw on local area self-assessment and evaluation.

Parents and families will also be able to utilise findings from Ofsted inspections of early years providers, schools and further education/skills provision. These

inspections will continue to consider how well provision meets the needs of those who are disabled and have special educational needs and this will contribute to the overall judgement for the provider.

Sector-led improvement

Sector-led improvement (SLI) is the approach to improvement put in place by local authorities and the LGA and is based on the principles that authorities are responsible for their own performance; accountable locally not nationally; and there is a sense of collective responsibility for the performance of the sector as a whole.

Peer challenge is a proven improvement tool which involves a small team of local government peers and other partners spending time at a local authority to provide challenge, identify strengths and areas for improvement and share learning. [Case studies are available](#) on how local authorities are using sector-led improvement.

An example of how peer challenge has been used for SEND is available below:

Yorkshire and Humber ADCS – Children’s Service Peer Challenge for SEND

The Peer Challenge process developed for Children’s Services across Yorkshire and the Humber builds on the peer challenge model that was developed by the Local Government Association (LGA). All 15 Local Authorities in the region are engaged in the approach.

As our experience of peer challenge grows and with it a confidence in the underpinning business model, local authorities are identifying other areas of activity in which it might be helpful to apply peer challenge.

In January 2015, Sheffield City Council was the first to have SEND as the focus of a peer challenge. The scope of the review was to assess the Council’s understanding, preparedness and progress in delivering the SEND reforms across the city. In particular, the Peer Challenge team was asked to identify what was going well, where there were areas for development and what were the key strategic and operational challenges that needed addressing.

Over three days a team of three senior officers – two from other councils and one from another Clinical Commissioning Group – along with a LGA appointed facilitator analysed all aspects of SEND across education, health and care.

They spoke to 60 people over more than 20 sessions, including parents/carers, schools, the Clinical Commissioning Group and Council officers. The team asked questions about the role of partners and Council services in various processes, about their understanding of the implications of the reforms, whether service design was appropriate and whether processes were effective and timely. The Review Team provided constructive feedback to senior management at the end of the three days and provided a final report in February that set out key strengths and areas for development.

Sheffield City Council’s view: The Peer Challenge process has been an extremely helpful sense check of progress with delivering the SEND reforms. Our experience is that it provides a strong mechanism for holding the Council and its Health partners to account; and for getting an informed, knowledgeable and impartial view of how much progress is really being made. The subsequent recommendations have been constructive and insightful providing a welcome degree of independent scrutiny and carefully considered, constructive challenge. The review process itself has helped raise the awareness and significance of the reforms across Council services and with external partners resulting in broad acceptance and ownership of the recommendations.

The review has helped us understand where progress was being made and where attention was needed in the immediate future. It also provided a real sense of how well the “culture change” we’re trying to achieve is taking hold and - because the team interview parents, schools, colleges etc. - it provides a good indicator of whether things are beginning to feel different for service users and providers. The Review Team also shared good practice from their own areas where that offered potential options for addressing recommendations as well as benefitting themselves from the good practice they identified during the Review.

We would strongly recommend other local authorities use this approach to provide independent scrutiny of the progress they and their partners are making in delivering the SEND reforms.



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