

Accelerated Working Group: systematic information and data sharing across agencies, including digital solutions to support good quality individual advice

1. Introduction

As part of the DfE Delivering Better Outcomes Together contract, the Council for Disabled Children was commissioned to facilitate a series of national Accelerated Working Groups that brought together local commissioners, parent carers and representatives from national programmes to identify solutions to the key challenges in implementing the SEND reforms at a local level. Feedback from local areas during regional workshops, sub-regional events and bespoke consultancy support led to the following issues being prioritised for discussion in the Accelerated Working Groups:

- Systematic information and data sharing across agencies
- Personalisation, including the development of personal budgets and Integrated Personal Commissioning
- Commissioning for outcomes across services, including effective mechanisms for joint commissioning and contract management approaches
- Ensuring alignment of key change programmes relevant to the SEND reforms
- Transition to adulthood (facilitated by National Development Team for Inclusion)
- Leadership (facilitated by National Development Team for Inclusion)

Data relating to children and young people with special educational needs and disabilities aged 0-25 and their families is not held in one place, is difficult to access and analyse and includes significant gaps. Historically, there has not been a consistent approach in the NHS to coding impairments, meaning that it is difficult to obtain an accurate picture on the number of disabled children and young people living in a particular area. Challenges remain in enabling all NHS providers to complete their data returns for the Children and Young People's Health Services Data Set, now known as the Community Services Data Set. The lack of a unique identifier for children makes it very difficult to track progress of children across multi-agency pathways and obtain a clear understanding of the true cost of delivering a pathway across different agencies. The data collected from monitoring services is often based on



outputs, rather than outcomes, making it hard for commissioners to answer the question how do you know you are making a difference? There remains significant interoperability challenges around how different local authority and NHS IT systems join up and talk to one another, resulting in professionals across education, health and social care not having a full and clear picture on a child's and family's needs and progress on key outcomes. Commissioners are also having to use low tech work arounds to pull different data sets together to understand local need, trends and issues.

A key question for the Accelerated Working Group to consider was what can we do to create a single source of the truth for commissioners across education, health and social care? The answer that the Accelerated Working Group came up with was to create a local multi-agency 0-25 SEND dashboard.

The Accelerated Working Group identified three key lines of enquiry to enable local areas to obtain a single source of the truth through establishing a multi-agency 0-25 SEND dashboard:

- a) Define the governance arrangements
- b) Define the scope of the dashboard
- c) Identify the indicators and reporting requirements

2. Using Mark Friedman's Results Based Accountability Model to create a common language for measuring performance

A key part of the governance framework for creating a local multi-agency 0-25 SEND dashboard is to have a common understanding of the terms used to measure the performance and impact of a service, project or programme of work.

[Mark Friedman's Results Based Accountability Model](#), also known as the Outcome Based Accountability Model has been used by NHS and local authority commissioners across the country and internationally for a number of years to establish a common language on measuring the performance of a service, project or programme of work.

Category	Definition
Result/outcome	A condition of wellbeing for children, adults and communities. E.g. children are born healthy, children are ready for school or children are safe.
Indicator/benchmark	A measure that helps to quantify the achievement of the result/outcome. E.g. rate of low birth rate babies, percentage of children ready to enter school at Year R, or crime rate amongst children.
Performance measure	A measure on how well a service, project or programme is performing, answering the following questions: <ul style="list-style-type: none"> • What did you do? • How well did you do it? • How do you know you have made a difference/is anyone better off?

Table 1 to show the definitions used by Mark Friedman in “Trying hard is not enough – How to produce measurable improvements for customers and communities”, Fiscal Policy Studies Institute

3. Using a logic model to develop a shared understanding on the scope of a multi-agency 0-25 SEND dashboard

Logic models have been used as part of NHS England’s New Care Models programme and internationally to create a common understanding amongst a range of key stakeholders on what needs to change and how that change process can be achieved. Logic models are one of the tools used to implement the [Theory of Change](#). Logic models and the Theory of Change provides a framework by which local commissioners can work collaboratively with providers, disabled children, young people and their parents/carers to prioritise and create a set of performance measures that can be used to evaluate the impact of the change programme.

Logic models can help to provide a clear description on a single page of the inputs/enablers, activities and outputs that will required to achieve the changes that are required. The changes are described through a series of short term outcomes, broader population based outcomes statements (Impact statements) and the final goal.

As the Accelerated Working Group can testify the process by which a logic model is developed needs to follow the principles of co-production and collaborative working, bringing the views, skills and expertise of a range of key stakeholders together to understand the following:

- What is working well, not so well in our area?

- What does good look like from the perspectives of government policy, research, evidenced based practice and local/regional/national experience?
- What is our final goal?

Once these questions have been answered, the process of developing the logic model can begin. The scoping phase of the project may identify a range of final goals, requiring a logic model to be developed for each of them.

Building upon existing relationships, or using the process to establish new collaborative relationships between partners and stakeholders is an essential part of the change process and will support local delivery of the logic model, once it has been adopted through local governance processes. This has been one of the key success factors in the delivery of the New Care Models programme¹.

In 2017 the Social Care Institute for Excellence published "[Developing an integration scorecard: A model for understanding and measuring progress towards health and social care integration](#)". This resource provides an evidenced based approach to identifying a range of national indicators and local performance measures that can be used to track a local area's progress in integrating health and social care services. A key part of the methodology was to create a new national logic model for integrated care. Whilst the resource is focused on integrating adult health and social care, the Accelerated Working Group has received feedback from local areas that the national logic model for integrated care is already being used to look at how it can be interpreted for use in implementing the government's SEND reforms.

The Accelerated Working Group set itself the challenge of creating a complementary national logic model to promote an integrated approach to raising aspirations and achieving improved outcomes for children and young people with special educational needs and disabilities aged 0-25 years.

In developing the new national logic model for raising aspirations and achieving improved outcomes for children and young people with special educational needs and disabilities aged 0-25 years, the Accelerated Working Group applied the following key learning points from the project undertaken by the Social Care Institute for Excellence:

- Include a mix of national and local priorities.
- Adopt a holistic approach to defining the enablers and activities/ components of an integrated approach to implementing the SEND reforms. Consider alignment with other government programmes e.g. CAMHS transformation, Integrated Personal Commissioning, Transforming Care, Healthy Child Programme and Maternity Transformation.
- Use TLAP's and National Voices' I Statements to create some of the outcome statements to ensure improving the experience and quality of support offered to children and young people with SEND and their

¹ Sterling A. (2017) *Some assembly required: Implementing new models of care. Lessons from the New Care Models programme.* The Health Foundation.

parents is at the heart of the change process. Consider additional outcome statements linked to service improvement and system leadership.

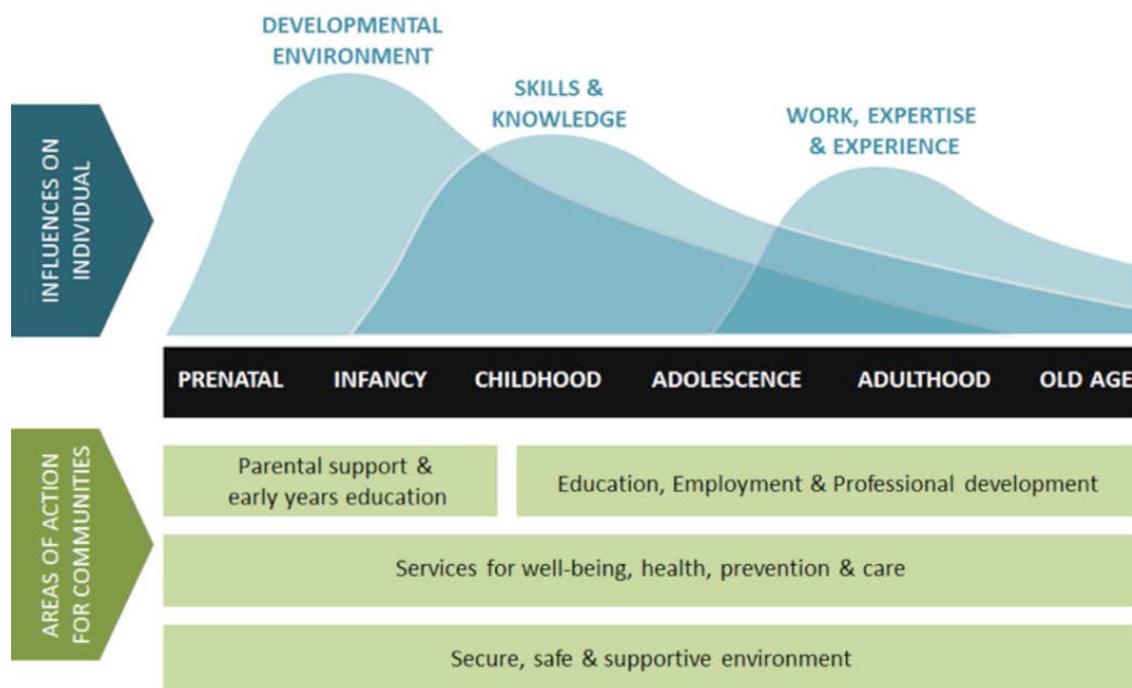
- Consider using any population based outcome statements for children in the Impact column.

The Accelerated Working Group was also able to draw upon the following key learning points on developing new performance measures from the Social Care Institute for Excellence:

- Consider how existing data reporting requirements can be aligned to populate the dashboard.
- Get a balance between quantitative and qualitative measures.
- Avoid creating perverse incentives.
- What are the key questions that need to be asked to support strategic decision making?
- Identify the benefits of bringing a range of data sets together from different parts of the system into a single place to promote more transparent and focused ways of working.

4. Establishing a common understanding of the influences and actions along a life course as part of a holistic approach to developing the logic model and multi-agency 0-25 SEND dashboard

Figure 1 to show the influences and actions along the life course²



² Davis S. (2012) *Annual report of the Chief Medical Officer 2012, our children deserve better: prevention pays*. Department of Health.

Figure 1 on previous page is from the [Annual report of the Chief Medical Officer 2012, our children deserve better: prevention pays](#). Where it is acknowledged that the Marmot Review Life Course Model highlights the impact that a range of activities, actions and policies can have on an individual's health and wellbeing and provides a framework for selecting a range of indicators and performance measures that could be used in a multi-agency 0-25 SEND dashboard.

The diagram highlights the impact that influences on an individual or actions by organisations/community can have on individuals across the life course. It highlights the need for early intervention, robust transition planning at all key stages and the need for the Preparation for Adulthood outcomes to be implemented from an early age.

5. Adopting a robust approach to information governance

The [Information Governance Alliance](#) has produced a series of resources to safely and securely share information between health and social care organisations. The learning from applying robust approaches to information governance when commissioning new models of care can be used to support the governance process around creating a local multi-agency 0-25 SEND dashboard.

In 2017 the Information Governance Alliance published "[Information sharing for integrated care/new models of care: A 5 step blueprint](#)". The following learning points can be applied to the development of a local multi-agency SEND dashboard:

Leadership

- Ensure that the strategic vision and objectives for the project have been signed off by the Health and Wellbeing Board and relevant joint commissioning board.
- Identify a lead agency for collating the data to populate the SEND dashboard.

Governance and principles

- Establish a project group with clear terms of reference to oversee the implementation of the SEND dashboard.
- Involve IG Leads from all relevant organisations at an early stage and undertake a Privacy Impact Assessment on the project.
- Review existing information sharing agreements/create a new Tier 1 information sharing agreement or Data Controller Agreement signed by all participating organisations. If the plan is to use performance data from health, education and social care providers then there may be a need to create a Tier 2 information sharing agreement to describe in more detail the specific nature of the data that will be shared and how it will be securely stored.

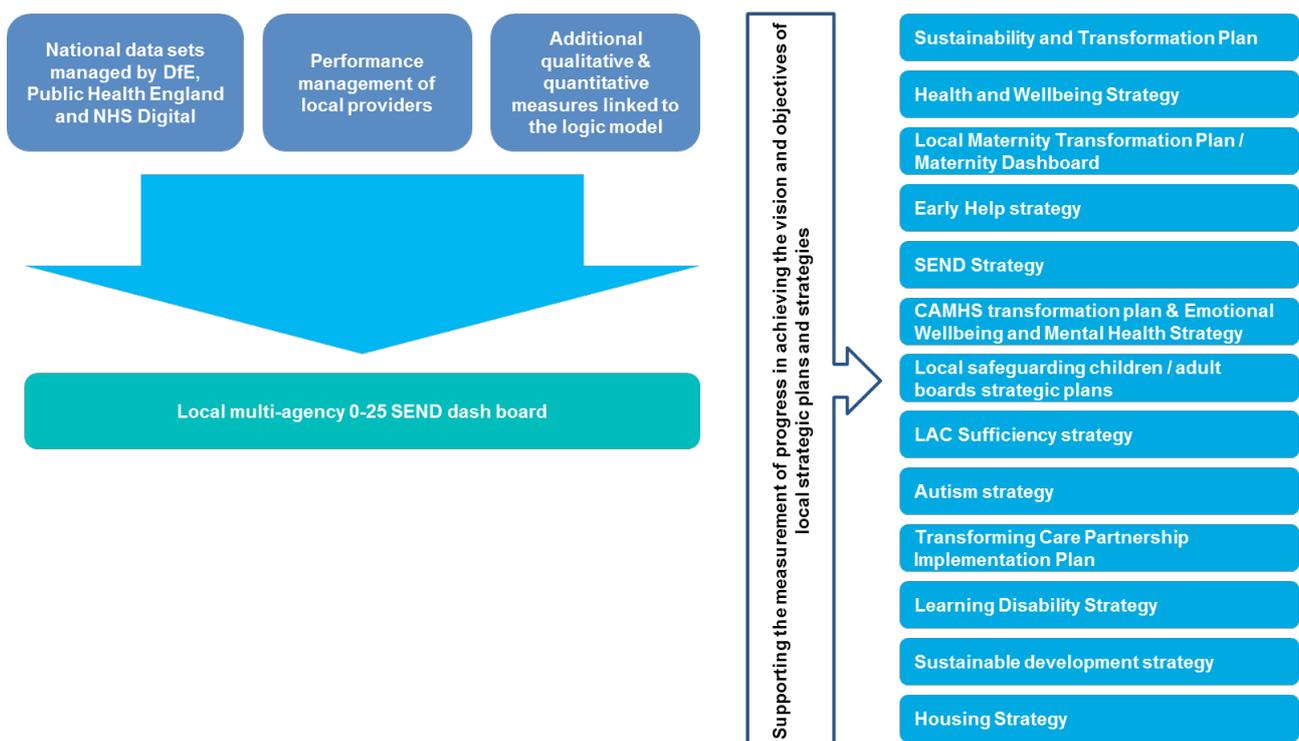
- Establish a communication and engagement strategy for the project.

Technology solution

- Identify how the lead organisation will collate and analyse the data.
- Will there be real time information reporting for some of the indicators?
- How often will reports be generated and in what format?
- How will different organisations access the data reports?

6. A single source of the truth will promote a collaborative approach to achieving local strategic priorities

Figure 2 to show how range of strategies and plans can benefit from a local multi-agency 0-25 SEND dashboard



With reference to Figure 2 above, the learning from the Social Care Institute for Excellence’s project into developing an integration scorecard suggests that a local multi-agency 0-25 SEND dashboard will be able to draw from a range of national data sets and local performance measures from contracts, but commissioners may also need to develop additional local qualitative and quantitative measures that are linked to the logic model. Figure 2 also highlights the opportunities to achieve efficiencies through bringing together a range of national reporting requirements into one place and also using the multi-agency data set to support the measurement of progress against a range

of strategic priorities in local strategies and plans.

7. Using population based outcome statements for children and young people

In researching the development of the local multi-agency 0-25 SEND dashboard and logic model, the Accelerated Working Group was able to draw upon two best practice examples on how local areas had created population based outcome statements for children and young people to inform their strategic planning.

Table 2 to show the outcome statements for children and young people developed in Leeds and Hertfordshire

Five outcome statements from <u>Leeds</u>	Hertfordshire's <u>six outcome B's</u>
<ul style="list-style-type: none"> • Be safe from harm • Do well at all levels of learning and have skills for life • Choose healthy lifestyles • Have fun growing up • Be active citizens who feel they have voice and influence 	<ul style="list-style-type: none"> • Be happy • Be independent • Be ambitious • Be safe • Be healthy • Be resilient

8. Using the logic model and Results Based Accountability Model to review whether we are asking the right questions

Developing a local multi-agency 0-25 SEND dashboard will enable local areas to review the questions that are asked as part of national data reporting requirements, local performance monitoring arrangements, CQC/Ofsted inspections and local strategic planning to identify any gaps, or amendments to support a new approach to outcome based commissioning.

It is the hope that the new logic model to promote an integrated approach to raising aspirations and achieving improved outcomes for children and young people with SEND aged 0-25 years will be provide local areas with the flexibility to undertake the following:

- Identify specific questions that are being asked of commissioners/providers as part of a national data return that could be used in the multi-agency dashboard.
- Identify gaps in national/local data reporting and create local qualitative

and quantitative measures.

- Seek to work collaboratively at an STP and regional level to create a core set of questions that can be reported on and the results compared across the STP/region.
- Align relevant datasets from existing regional dashboards e.g. Healthy London Partnership’s Mental Health Dashboard, or regional approaches to evaluation e.g. SE of England’s Early Help Evaluation Framework.

Figure 3 to show how Mark Friedman’s Results Based Accountability Model can be used to support local areas review the questions that it is asking of its providers³

	Quantity (No.)	Quality (%)
Input effect	<p>How much did we do?</p> <p>How much service did we deliver?</p> <p>E.g. Number of children supported in early years settings and Year R through an accredited SLCN programme.</p>	<p>How well did we deliver it?</p> <p>E.g. % early years settings accredited to deliver the targeted and universal levels of the SLCN programme.</p>
	<p>How much change / effect did we produce?</p> <p>E.g. No. of children accessing the accredited SLCN programme whose parents go onto request a statutory assessment.</p>	<p>What quality of change / effect did we produce?</p> <p>E.g. % of children known to speech and language therapy who access the accredited SLCN programme no longer require ongoing speech and language therapy in school.</p>
<p>Is anyone better off? / How do you know you have made a difference?</p>		

One of the benefits of using Mark Friedman’s Results Based Accountability model is shown in Figure 3 above. It supports local areas to review the current set of questions it is asking of its commissioned providers through contract reporting and to ensure that there is a balance between quantitative and qualitative performance measures in the contracts. It also helps commissioners move towards more outcome based performance measures that answer the question “is anyone better off following the intervention?”

9. Logic model to promote an integrated approach to raising aspirations and achieving improved outcomes for children and young people with SEND aged 0-25 years

The national logic model to promote an integrated approach to raising

³ Friedman, M. (2009) *Trying hard is not good enough*, Fiscal Policies Institute

aspirations and achieving improved outcomes for children and young people with SEND aged 0-25 years can be found in Appendix 1. It provides a summary of the enablers, activities and outputs required to deliver change, as described through the outcomes and impact statements.

The ambition of the Accelerated Working Group was to create a high level national logic model that stimulated discussion amongst commissioners, professionals, providers, children, young people, parents, carers and other key stakeholders on how the final goal of “children and young people with SEND are supported, safe from harm, have learning opportunities and have the skills for life leading to meaningful paid employment and fulfilment in their lives” could be achieved in their areas.

The logic model can also be used as a tool to support a local areas’ review of their self-assessment on implementing the SEND reforms, and/or strategic planning around how key elements of the government’s SEND reforms could be delivered across a broader Sustainability and Transformation Partnership geographical footprint. It also aims to bring together some of the key deliverables from national programmes such as the SEND reforms, Transforming Care, CAMHS transformation and Integrated Personal Commissioning into a single change process.

In developing the logic model the Accelerated Working Group was able to identify a series of enablers that should already been in place, or with further collaborative working could be in place to support the change process. Many of them are drawn from existing government policy or evidenced based practice.

Whilst the logic model does enable reader to look at the components of the change process from left to right, the enablers may relate to more than one activity and the activities to more than one output.

A key learning point from the Accelerated Working Group was that people found it easier to start by thinking about the impact and outcomes statements and then work backwards to identify the outputs and activities required to achieve the change.

10. Next steps

During 2018/19 the Accelerated Working Group will work collaboratively to review existing national data sets and indicators that could be included in a local multi-agency 0-25 dashboard, as well as any best practice local performance measures that could be tested out. The Accelerated Working Group will also seek to review whether the multi-agency dashboard needs to be separated into two sections:

Section A: Understanding local need – data on prevalence, characteristics and trends in demand for services.

Section B: Quality and outcomes – data on efficiency, effectiveness and achieving outcomes.

Integrated approach to raising aspirations and achieving improved outcomes for children & young people with SEND

Goal: Children and young people (CYP) with SEND to be supported, safe from harm, have learning opportunities and have the skills for life leading to meaningful paid employment and fulfilment in their lives.

Enablers - why do we need to focus on integration?

- Local strategies, funding, workforce and demographics
- Robust accountability & assurance
- Legal framework, national policy & programmes
- Quality first teaching
- Access to apprenticeships & work based learning
- Bold and brave clinical & professional leadership
- Strategic approach to co-production & personalisation
- Flexible market that promotes choice & control
- Local Offer & Short Break Statement
- System champions a culture of learning, mentoring & peer support
- Outcome based approach to joint commissioning
- Access to multi-agency data sets
- Digital transformation
- Preparation for Adulthood from the earliest years

Activities - what do we need to do to get there?

- Senior accountability for delivery of SEND Strategy
- Local area SEND self-assessment monitored & reviewed
- Collaboration across education settings to raise educational standards & promote inclusion
- Audit SEND school offers
- Multi-agency EHC moderation process
- Increase the number of apprenticeships & work based learning opportunities
- A one plan approach to the graduated support offer
- Focus on early intervention & prevention
- Align Looked After Children and EHC plan reviews
- Joint commissioning frameworks
- Planned roll out of personal budgets
- Joint approach to building resilience in families & settings, & crisis management

Outputs of integration

- One vision, set of goals & golden threads that align local strategies
- Co-production imbedded in strategic planning & commissioning
- Empowered children and young people and young people & parent carers
- Children and young people with SEND can attend their local educational setting
- Consistent standard & approach to issuing EHC plans
- NHS & LA contracts used to increase availability of apprenticeships & work based learning opportunities
- Integrated support planning & review processes
- Reduced waiting times
- New integrated children's services established using outcome based contacting models
- Increased choice & control through using personal budgets
- Fewer out of area placements

Outcomes of integration at all levels

Children, young people & parent carers:

- I am supported to feel confident & develop my own dreams & goals
- I am supported to make progress with my studies & get the fullest education possible in a way that does not limit my later options
- I receive information as & when I need it in a format that enables me to make informed decisions
- My family works better and we are more resilient

Service outcomes:

- CYP and their families receive the right support, at the right time and place
- Families are heard, involved & consulted
- Jobs are created that CYP can apply for

Strategic outcomes:

- Professionals access the right information at the right time through integrated IT solutions
- New integrated models of care and support improve efficiency through reduced duplication, better information sharing & shared learning

Impact of integration

Learning & Employment

- Children and young people with SEND do well at all levels of learning
- More children and young people are in mainstream settings
- More YP with SEND are in paid employment

Friends, relationships & community

- CYP with SEND are happy and have friends
- CYP with SEND are included and play an active role in their local community

Good health

- CYP with SEND and their parents carers are confident in navigating the system and managing their health and care needs
- CYP with SEND are safe from harm

- CYP with SEND can access the services they need to keep them healthy

Independent living

- CYP with SEND have the skills for life into adulthood



About the Council for Disabled Children

The Council for Disabled Children (CDC) is the umbrella body for the disabled children's sector in England, with links to the other UK nations. CDC works to influence national policy that impacts upon disabled children and children with Special Educational Needs (SEN) and their families. The CDC Council is made up of a variety of professional, voluntary and statutory organisations, including disabled young people and parent representatives. CDC's broad based membership and extensive networks of contacts provide a unique overview of current issues. It also enables us to promote collaborative and partnership working among organisations.

CDC hosts the following networks and projects:

- IASS Network
- Independent Support
- Making Ourselves Heard
- Special Educational Consortium

About NEL Healthcare Consulting

NEL Healthcare Consulting is a consultancy by and for the NHS. As committed NHS professionals, we understand our clients' needs well and we share your mission of improving patient wellbeing, increasing access to safe and effective care, and demonstrating value for money.

Our clients range from CCGs, local authorities and STPs to NHS England, specialised commissioners, voluntary sector organisations, mental health trusts and providers. Our consultants are experts in delivering, supporting and advising complex programmes with different partners and stakeholders across multiple organisations.

Our consultants' expertise includes strategic service review and service reconfiguration planning and delivery, option appraisal, business case development, activity and capacity modelling, impact assessment, management of independent review panel processes and implementation planning and delivery.

June 2018



**Council for Disabled Children is hosted by the National Children's Bureau.
NCB is a registered charity no. 258825. Reg in England and Wales No. 952717**