

Data Bulletin No. 3

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Introduction

Welcome to CDC's third data bulletin.

I'm sure I'm not alone in feeling that 2021 has got off to a very busy start, what with a third national lockdown, schools closed again and unprecedented pressures on the NHS. I hope you and your families are keeping safe and well through all this.

This bulletin focuses on SEND integrated outcomes frameworks. This may sound like jargon, but the concept is simple and important. As Philippa Watts explains in our first article:

Instead of asking 'what am I doing for children?', we are pushed to ask ourselves 'am I making a real difference, on the things that matter most to our children and their families?' We send a clear message that children and young people are at the heart of all our work - and we make ourselves accountable for that.

A growing number of local areas are demonstrating the value of this approach, not least in strengthening communication and partnership-working between agencies and with parent-carers, and in ensuring a clear, shared focus on improving outcomes for children with SEND.

Integration has been a key focus of CDC's 'DBOT' (Delivering Better Outcomes Together¹) consultancy over the past five years, funded by DfE to support local partners to make progress in realising the ambitions of the 2014 SEND reforms. This work has been led by the Health team at the Council for Disabled Children and a crucial part of this has involved helping local areas (17 so far) to develop a shared outcomes framework. Philippa Watts, a key member of the team draws together lessons and insights from CDC's experience of supporting local areas on this journey (using a methodology developed by CDC with NELCSU), in the first two articles of this bulletin.

This is followed by in-depth case studies from Bradford and Middlesbrough, two areas which have made great progress in developing robust multi-agency data on children with SEND, and co-producing a common outcomes framework with parent-carers and young people. They are now at different stages of piloting the use of Annual Reviews to collect the new outcomes data, to flow to their SEND data dashboards for strategic monitoring and review. We are very grateful to them for sharing their experience with us, particularly at such a busy time.

At the end of this bulletin, you will find links to useful resources developed by CDC to support outcomes-based approaches.

We hope you will find something of interest here. Please let us know what you'd like to hear more about in future and please do get in touch to share your innovations in SEND data, which others might learn from. Last but not least, keep safe and well through these challenging times.

Anne Pinney, True Colours Data Champion CDCDataChampion@ncb.org.uk

1 https://councilfordisabledchildren.org.uk/our-work/whole-child/e-learning/delivering-better-outcomes-together

1. Why develop a SEND integrated outcomes framework?

By Philippa Watts, CDC Senior Programmes Officer (Health)

There is much to recommend having a local integrated outcomes framework, not least the strong message in the SEND Code of Practice that:

"Local partners should identify the outcomes that matter to children and young people with SEN or disabilities to inform the planning and delivery of services and the monitoring of how well services have secured those outcomes."

0-25 SEND Code of Practice, 3.31

While this is a legal 'should' rather than a 'must', the Ofsted/CQC SEND inspections continue to highlight areas which do not have clearly defined outcomes for their SEND population at a strategic level, and to look positively on those who have made progress with this. We have heard repeatedly from the areas supported by CDC (through Delivering Better Outcomes Together 'DBOT'2 consultancy) that communication and relationships between local agencies and importantly, with parent carers, have been strengthened by developing a shared set of outcomes.

Ultimately, an integrated outcomes framework helps professionals to better support children and young people with SEND. The whole spirit of the 2014 reforms is to enable our children and young people to live positive and fulfilling lives, but how can we know if we are achieving that? An integrated outcomes framework draws all partners (including children, young people and parent carers) together to agree, in broad brushstrokes, what a good life for a child looks like and how we can measure progress towards this, through the data we collect.

Instead of asking 'what am I doing for children?', we are pushed to ask ourselves 'am I making a real difference, on the things that matter most to our children and their families?' We send a clear message that children and young people are at the heart of all our work - and we make ourselves accountable for that.

An integrated outcomes framework provides a clear, shared picture at the highest level (what we want to see for all our children and young people), but areas who have really grasped this approach are also bringing it to life in local pathways, services and in the lives of individual children.

2. What works?

By Philippa Watts, CDC

Insights from local areas worked with through DBOT consultancy

Since the start of the 2019/20 contract, CDC has supported 17 local areas on their journey to an outcomes-based approach, with several more in the pipeline. Some were just starting out, others were already working on a framework and brought CDC

 $2 \ \underline{\text{https://councilfordisabledchildren.org.uk/our-work/whole-child/e-learning/delivering-better-outcomes-together}\\$

in to help bring it to life. The areas who have made the most headway have shown the same key elements:

- **Strong leadership** motivated and enthusiastic leaders drive this culture shift from the top, demonstrating their support and actively seeking opportunities to bring others on board.
- A positive mindset and willingness to change an outcomes-based approach requires a significant cultural shift, which is as much about attitudes as practice.
- Meaningful involvement of children, young people and parent carers throughout – we cannot understand what a good life looks like for our families, or if we are enabling them to achieve that, without inviting their involvement in all stages and levels of commissioning.
- Proactive use of qualitative and quantitative data making use of the
 data available to us and filling data gaps, particularly around lived experience,
 equips local areas with the evidence of what works to make tangible change in
 children's lives.
- **Multi-agency engagement** each professional holds a piece of the jigsaw of supporting our children and young people. Taking shared responsibility for the achievement of outcomes brings the puzzle together.
- **Open communication at all levels** positive, honest relationships between local partners are both an enabler for, and a positive result from, outcomesbased approaches. Sharing, listening, challenging and being challenged in a solutions-focused way are key to the collaborative approach required.

Making it work in practice and 'giving it teeth'

In operational terms, the following factors help to make the most of an integrated outcomes framework, embedding the outcomes in strategic planning, commissioning, monitoring and review:

- **Strong data systems** which enable key data (outcomes, waiting times, compliance etc) to flow routinely, without the need for additional paperwork or duplicative data entry. For example, Bradford and Middlesbrough (described later in this bulletin) are using the Annual Review process to record progress towards the high level outcomes.
- Robust multi-agency data, regularly reviewed by strategic leaders using a SEND Data Dashboard³ or similar. Local examples include Bradford and Middlesbrough, also Bedford and Plymouth, as described in Data Bulletin #2 here.
- Putting the outcomes at the heart of strategic planning and review.

³ CDC's SEND multi-agency data dashboard (available here), co-produced with local partners, brings together a wide range of national data which is regularly refreshed.

Examples: <u>Bedford Borough Joint SEND Strategy</u> and the universal Children and Young People's Plans developed in <u>Leeds</u> and <u>Essex</u>.

• Embedding the outcomes in contracting and reporting mechanisms. Examples: <u>Camden Alliance Agreement case study</u> and <u>Stockport Outcomes Based Commissioning case study.</u>

3. Case study: Bradford's SEND data dashboard and integrated outcomes framework

By Anne Pinney, True Colours Data Champion

Between June 2019 and January 2020, Bradford Council recruited a small SEND Transformation and Compliance team to help them to move forward at pace in implementing the 2014 SEND reforms. Improving data on the SEND cohort was a priority, to inform strategic planning and joint commissioning. They also recognised the need for a clearer focus on outcomes and strengthened co-production, to put the views and experiences of children and young people with SEND and their families at the heart of their improvement drive.

Live SEND data dashboard

"Hard data to understand our different cohorts has been fundamental to this journey."

The new team worked closely with the Information Management Team to develop a live SEND dashboard that brings together a wide range of data in an easy-to-use online platform (Microsoft Power BI). Using UPNs (unique pupil numbers) as unique identifiers, data on the SEND cohort now flows from their education, social care and youth offending information systems, with health data available soon. As a live dashboard, most of the data refreshes overnight.

Users can interrogate the data at different levels, for example, looking at a particular school, ward or parliamentary constituency and exploring variables such as type of SEN, placement type, gender or ethnicity. They can drill down to individual level, although access to personal data will be restricted when the dashboard is rolled out more widely⁴.

A 'vulnerable' tab brings together key data on children and young people known to social care or the youth offending team, as well as those home educated, not in education, employment or training or missing from education. This is regularly reviewed by operational managers and has been used during the pandemic to keep a strategic overview of vulnerable children and young people with SEND. Other tabs bring together headline data on the SEND cohort (those with EHC plans and those on SEN support), health, attendance, exclusions, attainment, out of area placements and post-16.

Ten key performance indicators [see text box] are reported to the SEND Strategic

4 Current dashboard users are all LA employees who already had access to personal data in their existing role.

Partnership Board every month with a short narrative report from the relevant service managers. The Partnership Board can also request 'deep dives' e.g. looking more closely at the YOT data.

"They (the strategic managers) are really keen to understand the cohort better... (Before) there was silo working and SEND wasn't on the radar as much as it should have been."

Improvements are also being made in the health data, thanks to data-sharing agreements and a comprehensive Data Protection Impact Assessment, developed during the Summer between the local authority (as the 'data owner'), the CCG and health providers. Using NHS numbers (already held by the local authority) as unique identifiers, flags were added to health information system on all children with EHC plans, as well as information on their primary SEN⁵. This will enable key health data (e.g. waiting times, access to therapies or CAMHS) on the

KPIs reported to the SEND Strategic Partnership Board

- 1) 20 week compliance
- 2) New EHCPs issued
- 3) EHCP Cohort
- 4) Permanent Exclusions for children with EHCPs
- 5) Persistent Absence for children with EHCPs
- 6) CME (children missing education) with EHCP
- 7) EHE (elective home education) with EHCP
- 8) Children in Care with EHCP
- 9) Child Protection Plans with EHCP
- 10) CIN (children in need) with EHCP.

EHCP cohort to be extracted regularly for inclusion in the Data Dashboard.

EHC plans and updates are shared on a weekly basis with the Single Point of Contact at the CCG. Explicit consent to sharing information with health is sought from all families at the start of the SEND statutory assessment process.

Data on children and young people with SEND in receipt of Early Help is also planned.

The Dashboard has progressed in phases, rolled out first to Strategic Managers and then to operational staff within the local authority, allowing it to be tested and refined iteratively. Bringing the data together also shone a spotlight on data quality issues in each dataset, prompting improvements in service level data.

Integrated outcomes framework

In parallel, great effort has been invested in co-producing an integrated outcomes framework with parents, children and young people in Bradford. Taking the outcomes statements from CDC's SEND data dashboard⁶ as a starting point, they worked with local families and young people to whittle down the list of key outcomes from 13 to 8 and finally 6.

Feedback from young people prompted further work with their young 'SEND Ambassadors' and 'Youth in Mind Apprentices' to refine the outcomes, so that they better reflect the language and priorities of young people in Bradford, as shown in the box on the next page.

5 Using the NHS number <u>here</u> 6 Available <u>here</u>.

Original Outcomes	New and Improved Outcomes
The people who love and care for me are enabled to do this	I am loved and cared for by those around me and supported if and when I need it.
I feel supported and safe	I feel supported and safe
I am confident and able to achieve my dreams	I am confident and able to achieve my dreams
I feel valued, included and accepted	I am valued and accepted in society
My voice is heard and I have control of my life	My voice is heard and I'm able to live my life to the fullest
I enjoy good health and wellbeing	I try to remain positive and stay healthy

These six high level outcomes have been agreed by the Strategic Partnership Board. They will be embedded in their Joint Commissioning Strategy and in the new Children and Young People's Plan. They are also looking to integrate the outcomes into contracting and reporting mechanisms, which they hope to work on with CDC in the coming months.

Collecting outcomes data - embedding in the Annual Review process

A small number of indicators are being developed to measure progress towards each of the high level outcomes. These include both qualitative ('soft' outcomes which capture people's experience) and quantitative ('hard' data) measures. For example, indicators for the high level outcome "I feel supported and safe" are likely to be:

Indicator	Data type & source
School attendance	SEND dashboard - Education data
Early Help/CIN/CP/CiC figures	SEND dashboard - Monthly Social Care data
CYP who feel that their EHCP supports them in achieving their outcomes (Yes/no/other)	Qualitative data gathered through Annual Review
CYP reporting feeling in safe: Do you feel safe most of the time? (Yes/no/ other)	Qualitative data gathered through Annual Review

The quantitative measures are already included in the SEND data dashboard. The qualitative data will be collected through Annual Reviews, using 2-4 standard questions for each high level outcome, with a drop-down menu of responses, to be recorded on the new SEND portal. This approach will enable individual outcomes data to be aggregated and analysed at a strategic level. It should also help to ensure that outcomes are at the forefront of discussions at Annual Reviews, while avoiding the need for surveys (Bradford are mindful that some families have suffered 'survey overload' during the pandemic).

The questions (shown in Annex A) are currently being piloted in the local authority's resourced provisions. Based on this experience, they will be integrated into the new SEND portal. It is hoped that live outcomes data from the Annual Review process will be available for strategic review from Summer 2021.

Co-production and engagement

"Listening to families, children and young people has been fundamental, listening to their stories and challenges and... getting an understanding of what they want. It's a continual two-way conversation."

There has been a concerted effort to strengthen co-production throughout the past year, working closely with the Parents Forum and young people.

SEND Ambassadors (young people and parents, in 2 separate groups) have been recruited, who meet regularly and play a key role in ensuring that the voice of the children and young people is included and captured correctly in all co-produced documents in Bradford. They also help service leaders to better understand the lived experiences of those with SEND.

Co-production is now embedded in their joint commissioning values. A flow-chart has been developed which explains what this means in practice. This includes using a "You said, we did" approach to show how people's views and experiences have been taken on board.

Taken together with the new data, it is hoped that strengthened engagement and dialogue with young people and families will help to drive further improvements in service delivery and outcomes for the children and young people with SEND in Bradford.

4. Case study: Middlesbrough's integrated outcomes framework

By Anne Pinney, True Colours Data Champion

Our first data bulletin (July 2019, available here) described the progress made in Middlesbrough to improve data on children with SEND, using NHS numbers as 'unique identifiers' to extract multi-agency data which is brought together in an integrated data dashboard. Having already invested in improving their data systems, they have been able to make rapid progress in implementing an integrated outcomes framework, developed in partnership with local authorities and health across the NE region.

Learning from research with parent carers & young people

"It's got to be manageable... don't overcomplicate it."

The SEND regional group (set up and chaired by Middlesbrough Council) set themselves the task of developing a simple outcomes framework which would be

meaningful to young people and their families and could be used to monitor progress at every level: individual, local authority and regional.

As a first step, they reviewed the wide body of outcomes-focused research which had taken place with families and young people locally, regionally and nationally, and resources such as the <u>Preparing for Adulthood Outcomes Tool</u>, to identify an initial set of high level outcomes.

"We needed something that lets families see real progress for their young person."

These outcomes were refined through a series of partnership meetings which included using feedback from a parents' conference, informal drop-ins and coffee mornings and importantly, workshops and events run for and by young people with SEND.

Using the Annual Review process to measure progress towards outcomes

A simple, high level outcomes framework emerged from this process [shown below].

Each partner who has been involved in this project is working at different stages, reflecting their own local priorities.

Within Middlesbrough, the framework has been embedded into the Annual Review process. Relevant EHC plan outcomes are recorded beneath each heading (if relevant), allowing it to be tailored to reflect each child's needs and priorities. Progress is reviewed during the Annual Review, using a drop-down menu of options to record progress made towards each outcome.

Schools in Middlesbrough have been trained and started to use the new system in September 2020. Despite some initial concerns about the new forms, feedback has been very positive. The new approach helps to ensure that outcomes are at the forefront of Annual Review discussions.

Monitoring outcomes at a strategic level

Through this process, outcomes data flow from the Annual Reviews to the local authority and can be aggregated to assess progress toward the high level outcomes at a strategic level. Multi-agency feedback on progress against the outcomes also ensures a more holistic picture of each child/ young person's progress overall. The outcomes data will be included in their SEND Data Dashboard, for regular review by the SEND Partnership Board. They anticipate that this will shine a light on gaps in provision and CPD priorities, amongst other things.

They are now considering how to monitor outcomes for young people on SEN support, especially those in receipt of high needs funding. It is likely that the outcomes framework will be used as a tool to improve planning and monitoring outcomes for this wider cohort, with a pilot project anticipated in Spring 2021.

	A	В	C	D	E	F	G	
1	SEND O	utcom	es Fram	ework				
2	Outcome Framework	Education Outcome	Progress -Education	Health Outcome	Progress - Health	Social Care Outcome	Progress - Social Care	
3	Making choices and decisions					▼		
4	Develop independence skills				Outcome achieved much better than expected Outcome achieved a little better than expected Expected outcome achieved Working towards expected outcome. Excellent progress Working towards expected outcome Good progress Working towards expected outcome. Little progress			
5	Be relaxed and happy							
6	Take part in education and learning							
7	Develop relationships with friends				No progress Regressed			
8	Be as fit and healthy as they can be				Regressed			
9	Happy with life at home							
10	Have a positive transition from school or college							
1	Have a positive transition towards adulthood							
3 4								
	Pathway	Employment	Independence	Community Participation and	Health & Wellbeing			
15				Inclusion				
	Please indicate which pathway or pathways the young person is following							
6						_		

Next steps: Challenge day and regional benchmarking

"Learn as you go along and learn from each other."

Within Middlesbrough, an outcomes 'challenge day' is planned for May 2021, when multi-agency partners will be able to delve into the first year's data and explore strategic implications. There will also be lessons about implementation, learning from the first year's experience to refine the system. Learning will be shared with other local authorities in the North East region, some of whom are working towards implementing the same approach in the new academic year. By using a common outcomes framework across the region, they hope to be able to benchmark progress in improving outcomes for children and young people with SEND.

5. Further reading: Useful resources from CDC to support an outcomes-based approach

- 1. CDC's multi-agency SEND data dashboard (co-produced with local partners)
- 2. Outcomes based commissioning and the SEND reforms background, process and impact

- 3. Joint Commissioning Bulletin on Applying an Outcomes Based Approach to Commissioning
- 4. of DBOT Webinar #2: Focus on Outcomes Based Commissioning

Local examples

- The Camden Alliance Agreement case study
- The Hertfordshire Outcome Bees case study
- The Stockport case study
 - o Stockport's outcomes at the heart of their SEND Strategy
- The Leeds Children and Young People's Plan
- Essex's Children and Young People's Plan

Other relevant resources

The RCSLT ROOT project

Annex A: Gathering qualitative outcomes data through Annual Reviews

This questionnaire is currently being piloted in Bradford's resourced provisions. Based on that experience, it will be incorporated in the SEND portal which is being developed, so that data can be entered once (live, during the annual review) and flow to local authority to provide a strategic picture of progress towards the six high level outcomes.

Pupil Voice - Annual Review

This document aims to capture your voice and your responses to these statements will provide the Local Area with a better understanding of whether the support you receive is helping you achieve Bradford's SEND Outcomes.

Statement	Your response (place a tick in the box)	Your voice
I feel supported by those around me.	Yes No Most of the time Now and then	Comments
I feel safe.	Yes No Most of the time Now and then	Comments
I feel my EHCP supports me in achieving my aspirations and outcomes.	Yes No Other	Comments
The adults in my life know what I want to be when I'm older? They are providing opportunities for me to reach my aspirations.	Yes No Other	Comments
I feel like I belong in the community.	Yes No Other	Comments

Statement	Your response (place a tick in the box)	Your voice
I can access the places I want to go and the services I want to use.	Yes No Other	Comments
I feel my voice is heard.	Yes No Most of the time Now and then	Comments
I feel I am able to make my own choices/decisions about my life	Yes No Other	Comments
I know and understand how to keep myself healthy.	Yes No Other	Comments
I know who to turn to when I am not feeling 100% positive.	Yes No Other	Comments

Student's	NI		
STHOOPTS	Mame		
Judenica	Nullic		



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 Advice and Support Programme
- Making Ourselves Heard
- Special Educational Consortium
- Transition Information Network



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