Leicester City Special Educational Needs and Disabilities (SEND)

Accelerated Progress Plan

July 2021

Leicester City Council

CLASS
City of Leicester Association of Special Schools

The Leicester Primary Partnership

Leicester Secondary E.I.P.

BIG FORUM!

NHS Leicester City Clinical Commissioning Group

Leicester City Parent Carer Forum

Introduction

Pupils with SEND frequently have more limited life chances than their peers. Good commissioning and effective integration between services lie at the heart of improving health and wellbeing outcomes for children and young people with SEND. The Code of Practice (COP) 2015 for SEND sets out the commissioning responsibilities across partners and the expectation that joint working and planning occurs, and we follow this Code in delivering the Leicester Leicestershire and Rutland (LLR) Joint Commissioning strategy for Children and Young people with Special Educational Needs and/or Disabilities (SEND).

The impact of the Covid pandemic has had a detrimental effect for many children and young people's mental health and wellbeing. There are likely to be long-term effects and setbacks for children with SEND in their learning from readiness for school right through to adulthood which may also have an impact on their health needs. Through this plan we intend to make an impact on their outcomes for the future. For children, young people, families and carers, having agencies work together will help them to navigate an often-complex system of support. By aligning and understanding each other's worlds, we can support families holistically and ensure that every child can reach their full potential.

We want our schools and educational settings to deliver the best education possible and for children and young people with SEND to ***learn, thrive and achieve*** their potential, to improve their life opportunities through access to high quality services which are effective, efficient, response and inclusive.

We want to improve early identification of health and learning needs and to be a community that gives children and young people with SEND in Leicester City the support and opportunities to have better lives. Better lives mean more than just meeting special educational needs in schools, it is a lifelong commitment that goes beyond education and includes broader health and wellbeing so that children with special needs can live and learn in their local communities.

Purpose of this progress plan

Ofsted and Care Quality Commission (CQC) revisited Leicester in May 2021 to assess whether the local area had made sufficient progress in addressing the five areas of significant weakness detailed in the Written Statement of Action (WSOA) issued in 2018.

Despite the impact and duration of the Covid-19 pandemic in Leicester, the redeployment of Local Area resources to related to closure of schools, restrictions on movement and support to vulnerable children and young people, the Local Area has maintained a clear focus on Transforming SEND.

As a result of the SEND revisit, inspectors judged that significant progress had been made in four of the five areas but there was more work to be done to see the impact of actions taken to deliver the improvements in area 4.

Area 4: The lack of joint commissioning of services to support young people's health needs post 19

1. Lack of Joint Commissioning
2. Young people experience delays in accessing services when they become a young adult
3. There are no clear pathways for young people to access support, which delays their treatment during this transition
4. Colleges do not get appropriate support from health or social care to support the transition process

This progress plan sets out how we will make accelerated progress in this area. The Local Area Lead for this plan is Jane Young, Designated Clinical Officer (CCG) who will drive a working group of people responsible for key actions to be completed in 3-month milestones (September, end of December 2021) and continuing from January 2022.

Our Governance Structure

We have close partnership working which fosters a culture of Inclusion where SEND is everybody's responsibility in meeting the needs of Children and young people with SEND. This involves many aspects of cross- agency and cross-system working at locality with partners and families to support better access to services for families, support with medical needs in schools, access to therapies and transition to adulthood pathways. The SEND IMPROVEMENT BOARD (SENDIB) includes representatives from the Leicester City Parent Carer Forum (LCPCF), Health, Social Care & Education Services, SENDIASS and representatives from education settings.

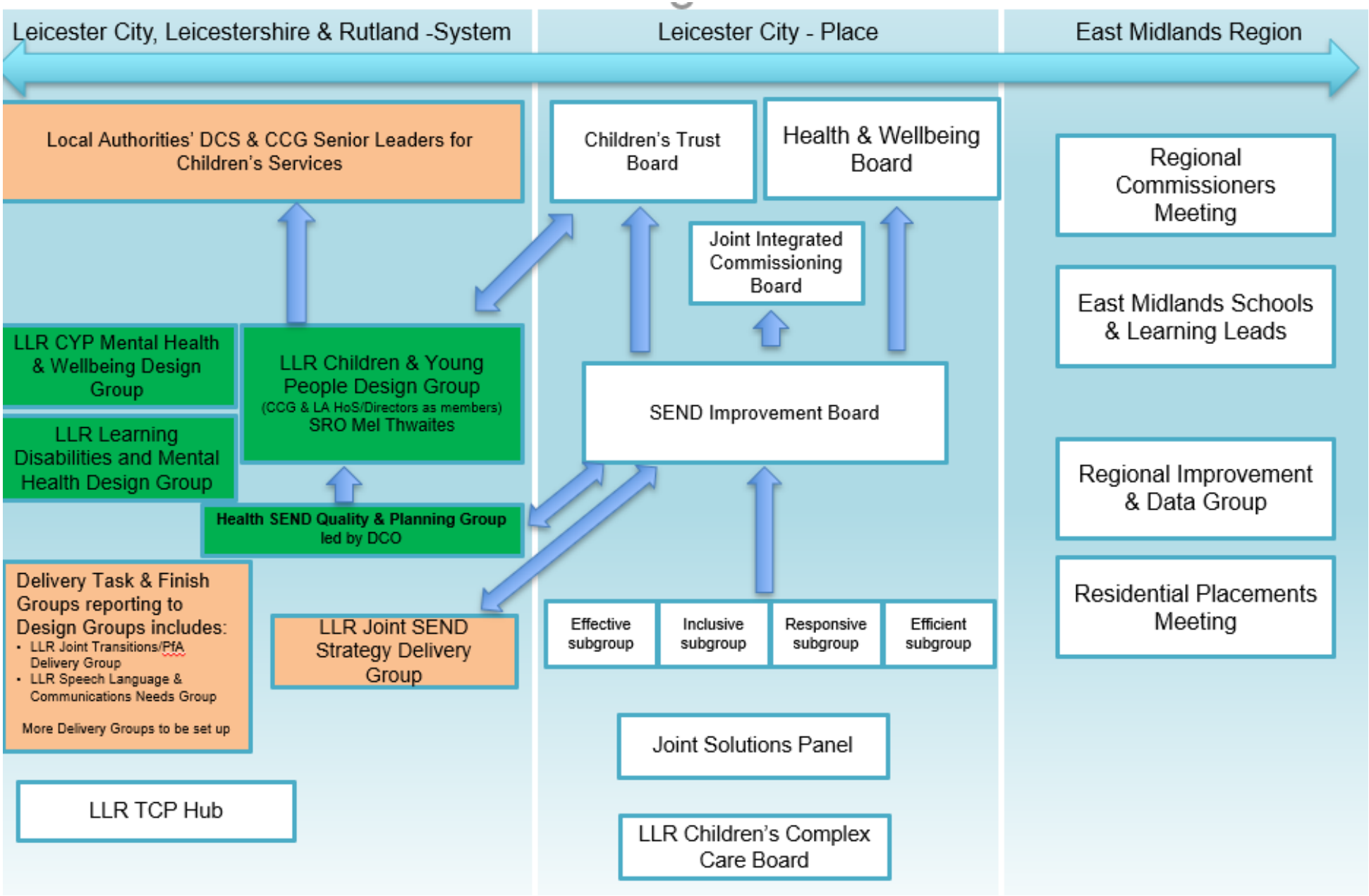
The Leicester City Parent Carer Forum (LCPCF) has over 500 members made up of parents and carers of children who have a variety of special needs, ranging from challenging behaviour to complex medical needs, learning or physical difficulties and more.

The LCPCF chair has a positive and active role in supporting and advising parent carer peers and in the development of services that affect children with special educational needs and/or disabilities. Parent/carers are represented on the Resource Access Panel, the SEND Improvement Board (SENDIB) and various other delivery groups. The LCPCF's approach is a balance of both challenge and support to the local area partners.

The SENDIB was reconfigured in early 2020 and a chair appointed to inject pace into the response to the SEND Written Statement of Action. The SENDIB is chaired by the Health Clinical Commissioning Group, supported by the Strategic Director of Social Care & Education in the local authority.

Our improved governance arrangements will ensure our joint Transformation plans continue to progress with rigour and pace to enable our schools and educational settings to deliver the best education possible and for children and young people with SEND to ***learn, thrive and achieve*** their potential.

The diagram below sets out our SEND governance arrangements and, the role and relationships of our strategic partnership.



Tracking, challenging and checking progress

The action plan will be delivered across the partnership and supported by lead officers including service heads and project management support. Progress, including risks or issues, will be reported to the SENDIB which meets monthly. The LA has also engaged Peter Foster Chief Executive of Northamptonshire Children's Trust as a peer critical friend.

The revisit highlighted that the local area had made insufficient progress in area four around Commissioning Health needs post 19. This action plan sets out how the local area partnership will make significant progress in not just the actions, but the impact and outcomes to improve area 4. This action plan is a standalone plan which links to the overall SEND Transformation plan and more widely at a system level including that of the LLR Joint SEND Commissioning Strategy and the developing LLR Transitions/ Preparing for Adulthood Collaborative Commissioning Strategy. The SEND Transformation plan therefore continues to focus on:

1. A single system working together across education, health and social care for joint outcomes.
2. Getting it right first time: appropriate, effective and timely joint assessment, planning and review of need that is personalised to the child or young person with SEND.
3. Talking to, listening to and involving children, young people and parents and carers.
4. Use effective monitoring and quality assurance procedures to challenge, support and develop provision.

BRAG summary, risk register and mitigation plans

The SENDIB will oversee the checks and balances documentation to assess and evidence progress of the plan. This includes a BRAG summary, exception reporting and a risk register to be published alongside this report as an Appendix.

Collecting and analysing impact of actions

There are three main ways that the Local Area collects and analyses impact:

1. **Quality Assurance Performance Framework**: The framework is reviewed and updated on an annual basis as necessary.
2. **SEND Improvement Board Dashboard**: The Dashboard is updated monthly/quarterly/yearly depending on frequency that local, comparator and national measures are updated. This set of measures enables the SENDIB to have oversight, check and challenge on performance and progress.
3. **Engagement, Feedback & Surveys**: We continue to improve the ways in which we engage with and receive feedback from parents, carers and young people, alongside the views of professionals. The SEND 2021 survey to be launched in Autumn 2021 will provide baseline

information from feedback and views across a range of stakeholders. This will provide us with a better understanding of the impact of our activity and will inform the new SEND Transformation strategic documentation.

Stakeholder engagement and feedback

The ways in which we communicate and exchange views with stakeholders, parents and carers makes a big difference to how effectively plans and services are shaped. We are committed to continuing the development of SEND improvement in partnership with families and young people and to make sure developments are communicated effectively. We have a clear focus on embedding robust quality assurance processes within our SEND statutory work and in conjunction with partner services and parents.

In early 2021, the Council worked with children, young people with SEND and their families, Social Care, Health and other partners to co-produce our Local Area SEND Transformation plan. We continue to encourage views from parents and carers in many different ways to help shape and keep plans current and active. Some examples of our engagement activity with stakeholders, children and parent carers:

- Our annual Local Offer Live event which also seeks to extend our reach to parent carers in the city who may not be part of formal networks or unfamiliar with what the SEND local area offers
    - At the May Local Offer live event, we held an interactive session with parents and carers about plans and progress to hear their views and remind us of what is important for parents and carers
- Our SEND newsletter responds to current themes, issues and concerns whilst also offering us a mechanism for sharing important information and updating families on events and work
- The Local Area Education and Local Authority partnership is strengthened through daily/weekly e-briefings, SEND newsletters, SENCo and education network and our education and social care cells
- Across Children's services, an approach to participation and engagement based on the Lundy Model of participation has been introduced. This model provides a way of seeing children's and young people's rights to participation, as laid down in Article 12 of the UN Convention on the Rights of the Child.
- The Children's Rights and Participation Service supports children and young people aged between 5 and 25 to express their opinions, concerns and views and have them listened to. The service aims to ensure that what children and young people say informs how their needs are met and the way services are provided.
    - Our Participation Strategy encompasses all children
    - Coproduction also through The Big Mouth Forum and other children and young people's participation groups guides progress
    - Young people with SEND are involved in recruitment to strategic roles in the SEND system.

- An increasing number of our strategies are created as easy read versions for those with learning disabilities
- Leicester City Parent Carer Forum (LCPCF) meetings are regularly attended by practitioners and leaders from education health and social care and these are valuable sessions which provide an opportunity to talk through emerging themes and address concerns from parents.

The pace at which we work in partnership, galvanised during the pandemic, has given us a number of real positives to take forward:

- As professionals we were receiving a routine understanding of the reality of life for children and young people with SEND which enforced our strong partnership
- Parent Carers from LCPCF say that they have more insight into how the local area “system” works and have been able to make new relationships that will be of benefit
- We will continue the work to improve our local offer to reflect the emerging needs of children, young people and their families and ensure that the support they need is easily signposted.

Training and development

This accelerated progress plan makes reference to the training and development of professionals across the local area and the system to increase awareness and enable professionals to appropriately help children and young people with SEND, and their parents to make use of the opportunities and support available.

Action plan progress

The following provides a brief summary of progress against each item of the action plan:

Status	RAG rating
Complete	
On track	
Minor delay	
Major delay	

Accelerated Progress Plan - Improvement Actions Summary

The lack of joint commissioning of services to support young people's health needs post 19

Ref	Area of remaining weakness	Action	Lead (Governance)	Progress Indicate if Complete & signed off by the SENDIB	Evidence – Output (completion of actions)	Action Milestone	Evidence – Impact (Demonstrated through case studies, qualitative and quantitative feedback). Evaluation of impact tools to be co-produced.	Impact Milestone	SENDIB Status / RAG rating: Complete; On track; Minor delay; Major delay
1	Lack of Joint Commissioning	1. Review local area joint commissioning strategy and action plan ensuring links to SEND and transition strategies	Clare Nagle/ James Hickman	The All-age commissioning strategy commits to support the implementation of the Leicester City transitions strategy. The LLR SEND Joint Commissioning Strategy presented to SENDIB in November 2020 was approved at SENDIB in June 2021. It is due for approval by the CCG in July. System sign off will be complete in August 2021. **CCG: Investment in the system** • core health services to meet the needs of children with SEND and their families. e.g. AHPs, Paediatricians, CAMHS, Transition, Care Navigators • Designated Clinical Officer non-statutory role. • SEND Senior Officer to lead operational aspects of the role, to allow the DCO more time to support joint commissioning initiatives at a strategic level. e.g. EOI in evidence folder • Children's Personalisation Commissioner to implement the health contribution for joint funding of support for C and YP. **Joint Solutions Panel**: co-ordinates support for YP who have very high-level complex needs who required support from all partners. **SEND Data Group** established to report to Health Quality & Planning Group and to SENDIB.	1. LLR SEND Joint Commissioning Strategy is published.	Dec 21	1. Professionals, parents, carers and children demonstrate awareness the strategy is in place and understand its key priorities for the first two years. 2. Survey of multi-agency professionals demonstrates positive impact of the DCO offer, which in their view will impact on improvements for CYP.	Dec 21 Mar 22 Mar 22	
1	Lack of Joint Commissioning	2. Establish a task and finish group to identify mechanism for delivering the strategy through JICB	Nicola Cawley/ Clare Nagle/ Sara Bailey	The JICB has taken the lead oversight of joint commissioning for children services. This is the agreed mechanism for delivering the Joint Commissioning Framework and joint commissioning opportunities. The Task and Finish Group is called LLR Joint SEND Strategy Delivery Group is in place to deliver the strategy. The action plan in place and is active.	1. Minutes and RAG rating of Action Plan of LLR Joint SEND Strategy Delivery Group available.	Dec 21	1. Case studies and quantitative data to demonstrate Personalised Joint Commissioning for 19-25 yr olds (from Midlands and Lancashire Commissioning Support Unit (MLCSU). 2. The evaluation of the LLR Joint SEND Strategy Delivery Group Action	Dec 21 Mar 22	

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				Strategy for SLC is in development. The first phase - SLC for early years - is in place in Leicester. Personalised Joint Commissioning is in place, the health aspect implemented on behalf of the CCG by Midlands and Lancashire Joint Commissioning Unit.			Plan, using the impact measures outlined in the header, demonstrates impact on professional knowledge, skills and practice. Where possible within the timeframe, it will also demonstrate impact on parent and CYP experience.		
2	Young people experience delays in accessing services when they become a young adult	1. Implement the transition strategy	Tracie Rees/ Chris West/ Janet Harrison	The **Leicester City Transitions strategy** has been implemented: • Established the complex transition case panel with better joint working of children's and adults' teams to problem solve outcomes for young people with complex issues • The established joint solutions panel (receives escalated issues from the complex case panel) uses Health and Local Authority partners to co-fund/co-work solutions • Development of information sheets/website information for parents and professionals to access appropriate and accurate details about key areas relating to transition and sits as part of an engagement programme with schools **<u>Ongoing Implementation of the developing ICS Transitions Strategy</u>** **LPT SEND Transition Lead:** Information for parents and YP: • This lead is working with Nathan Samuels from NHSE to look at developing benchmarking standards for transition to health services for YP with SEND. A stakeholder group is being established, including YP and their families. The developing work towards the national benchmark will be coproduced. • A map of transfer to adult services is now on LO website which will be further refined through co-production • A video is being developed for parents and YP explaining what to expect on transition. To be shared with parents and YP at key points and added to the LO by 1st week in September 2021 • In April 2021, a survey of 40 LPT staff (Baseline survey) surveyed their knowledge and confidence in implementing the transition process for YP. Their responses are informing the development towards the national benchmarking standard for transition to adult health services.	1. City Transition Strategy 2. LPT NHSE benchmarking progress.	Dec 21 Dec 21	1. Using the evaluation tools outlined in the header parent/carer, young people, college staff and Health staff tell us that their voice has been heard as part of the benchmarking work, and they have a good experience of pathways for YP moving into adult health services.	Dec 21 Mar 22	

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				• The updated LPT Transition Policy directs practitioners to signpost to the LO. • LPT SEND Transitions Lead will include pathways for each service in the LPT Transition Policy which clarifies exactly what each practitioner needs to do when a young person is transitioning to adult health services. **LPT SEND Transitions Practitioner** LPT have a Transitions Practitioner for those with City GPs. City schools refer anyone with complex health needs to the LPT SEND Transitions Practitioner. An extension of the LPT SEND Transition lead and the SEND Transition practitioner post may form part of the recommendations of the **ASD and Mental Health** There is significant CCG investment in this area in 21/22, including, Transitions MH team. The aim is CAMHS practitioners will have a caseload of young people (16-25) and will continue to work with them until they are ready to be discharged rather than holding them whilst a service can be identified. Using the additional funding, the Youth Advisory Board will work with young people to co-produce a system-wide service **DCO:** offer to meet College staff to problem-solve if they experience any difficulties in relation to supporting YP's health needs when they transfer to college.					
2	Young people experience delays in accessing services when they become a young adult	2. Identify executive leads in each organisation to champion transition	Chris West/ Martin Samuels	Executive leads at senior levels champion transition: • Martin Samuels (Strategic Director) • Tracie Rees and Caroline Tote. • CCG: Chris West/ Sara Bailey • UHL: Dr Anne Wilmott(children) and Dr Laura Clipsham (adult) • LPT: Helen Thompson/Janet Harrison • Elected members: Cllr Russell, Cllr Cutkelvin and Cllr Dempster (as H&WB)	1. Minutes available	Dec 21	1. Case studies will demonstrate that YP entering supported independent living (Case Study – IDs Story of Hope) have a positive experience 2. Using the evaluation tools outlined in the header parent/carer, young people,	Dec 21 Dec 21 Mar 22	

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							college staff and Health staff tell us that their voice has been heard, and they have a good experience of pathways for YP moving into adult health services.		
2	Young people experience delays in accessing services when they become a young adult	3. Streamline the pathway for young people with EHC plans who will require adult health services to reduce the delay in accessing appropriate provision	Jane Young/ Janet Harrison/ Pauline Killoran	• See 2.1 **UHL and LPT Transitions liaison** • Pre-empt the transitions of young people and make consultants aware of continuing need re: acute adult services/SEND. • Work with Primary Care Liaison nurses to ensure that YP transferred back to primary care have a transitions plan / summary of care. **Liaison with Primary Care:** • A GP lead for LD is in place in each practice. • Paediatricians provide a summary of YP's needs to the receiving GP. • GP links with the Primary Care Liaison nurse to promote the Annual Health check to young people with defined Learning Disability (Exemplar Project). This may be extended to include ASD in the next year (national government initiative) • LPT SEND Transition Lead and DCO discussions with Primary Care Liaison Nurses, to more fully understand their role and remit, including links with Care Navigator and SEND Transition Practitioner. • Health is promoting take-up and awareness of LD annual review at Year 9 EHCP Annual Review. • DCO is part of NHSE Benchmarking Stakeholder Group and will supporting the representation of YP and parent/carer voices to inform work with GPs. **Developing awareness across the local area:** • Continuing Health Care training available to understand Continuing Care and Personal Health budgets to support referrers (Midlands & Lancs Commissioning Support Unit administer Continuing Care Funding on behalf of the CCG).	1. Exemplar Project – YP with LD annual health checks – project outputs 2. LPT NHSE benchmarking progress.	Dec 21 Mar 22	1. GP's survey/focus group identifies their understanding of their role in supporting YP with SEND reflecting progress in column 5 (to be developed) 2. Using the evaluation tools outlined in the header Parent/Carer/YP feedback demonstrates understanding of the pathways and good experiences in accessing appropriate health support.	Dec 21 Mar 22 Dec 21 Mar 22	

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				• Earlier identification of potential need, based on information already held. Eg special school curriculum pathways have mapped outcomes. Tools are being developed to further support • A referral pathway with clear actions for young people from age 14 to best support a well-planned transition from children's services and into adulthood.					
2	Young people experience delays in accessing services when they become a young adult	4. Each organisation to review and implement internal processes for supporting transition to adult and link to partners	Janet Harrison /Ann Willmott/ /Pauline Killoran/ Sharon Charles-Cockrill	See 2.1 and 2.3 above	See 2.1 and 2.3 above	See above	See 2.1 and 2.3 above	See above	See above
2	Young people experience delays in accessing services when they become a young adult	5. Establish a clear procedure which enables health professionals to forward plan the provision to respond to and meet the developing and changing needs of young people as they transition into adulthood.	Sara Bailey/ Janet Harrison/ Michelle Larke	See 2.1 **The Transforming Care Programme** for any young people with LD or Autism who may be at risk of admission and a 3-year (2021–2024) Road Map, led by Senior TCP Programme Manager has been based on the LLR vision. The 3-year delivery plan is based on the stages of a patient's journey with a total of twenty-nine different projects within the plan. The priorities identified for 2021/22 are: 1. Increased focus on co-production with people with LD and Autism 2. Admission avoidance for CYP and adults 3. Integrated team working – development of a TCP Hub – joint working across LLR 4. Continue to improve AHC completion rates – and reduce overmedication (STOMP) 5. Provide community and inpatient support for people with Autism without LD 6. Ensure learning from LeDeR – making real service changes 7. Provide better support for our LDA forensic cohort Separate project plans are being developed to take forward initiatives to address these 7 priority areas. Progress updates,	1. TCP 3 year road map 2. Data dashboard spotlights Post 19	Sep 21 Dec 21	1. Case studies to evidence jointly funded personal commissioning 2. Evaluation and case studies of Rix Wikki project evidencing the benefits of the tool 3. Using the evaluation tools outlined in the header parent/carer, young people, college staff and Health staff tell us that their voice has been heard, and they have a good experience of pathways for YP moving into adult health services.	Dec 21 Mar 22 Mar 22 Dec 21 Mar 22	

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				issues for escalation and evaluation reports from the LD/ND Design Board throughout the year will be reported to the SENDIB A new Autism service for YP14+ has been established in LPT. The Specialist Autism Team (SAT) will work in partnership with young people and adults (14 yrs+) who are autistic and (where appropriate) with their families, partners and/or carers to offer support and care respectfully. **CYP Respite and Unplanned Care** Learning and development sessions led by Lead Commissioner, Learning Disabilities, Autism and Care Homes for Leicester City Council and the Children's Personalisation Manager, LLR CCGs on CYP respite and unplanned care in LLR. The Local Area plans to commission two separate services: • Develop an (all age) rapid response wrap-around service to maintain C&YP and individuals in the community (24/7) – a highly skilled team to be deployed within 24 hours' notice to support the individual and their family/carers in their own home or in a community placement • Develop crisis accommodation/emergency respite to prevent admission – to provide urgent access to a non-hospital bed. **Individual commissioning – over and above core NHS commissioned services** CYP who are eligible for continuing care under the CCC framework are considered at the Children's Complex Care panel. In addition, children who are not eligible for CCC but who have health needs over and above those that can be met by core commissioned services can be taken to agree on further measures to support these children A one-off personal budget offer, available in 2021, has been reoffered in March 2022 to support mental health and well-being to facilitate hospital discharge and to prevent admission. These are available to adults and children to provide a personalised service to help the individual maintain their mental health and wellbeing in the community with measurable outcomes Leicester's Rix Wiki pilot project offers CYP with Autism or Learning Disabilities their own simple accessible secure and easy to build website. Wiki's can be shared with people so they can				

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				learn more and better understand how they can support individuals to reach their goals and aspirations.					
2	Young people experience delays in accessing services when they become a young adult	6. Update health transition policies and associated Procedures.	Janet Harrison/ Anne Willmott	See 2.1 and 2.3 above	See 2.1 and 2.3 above		See 2.1 and 2.3 above		
3	There are no clear pathways for young people to access support, which delays their treatment during this transition	1. NHS commissioners and providers to agree and clarify the transitions processes in treatment services	Sara Bailey	See 2.1, 2.3 and 2.4 above Transition statement is in service specifications and SEND contract to ensure this is recognised and understood as a statutory responsibility for Health providers contracts and places the emphasis on transition planning from aged 14 for CYP with long term conditions and disabilities. A SEND statement is within standard operating contracts around Health statutory responsibilities towards CYP with SEND. LPT contributing Health advice for annual reviews when requested by placement and settings. Care navigators based in localities support settings to identify key health professional who can update health advice. The City Health Transitions Practitioner updates health care summary plans from year 9 onwards for YP with complex medical needs and smooths the transition process for those CYP	1. Examples of Training/advice packages for schools and FE colleges around CYP transitioning with medical needs 2. Audit process developed to track the success of transition for YP.	Dec 21 Mar 22	1. Parent/carer, young people, College staff and Health staff feedback demonstrates confidence and effectiveness of transitions into adult services 2. Audit outcomes evaluated and demonstrate clear pathways for YP to access support and minimal delays in access on transition.	Dec 21 March 22 Jun 22	
3	There are no clear pathways for young people to access support, which delays their treatment during this transition	2. Engage young people and families to understand what support and information they require as they prepare to move from children	Janet Harrison /Jane Young / Pauline Killoran/	LPT SEND Transition Lead Consulted with parents/carers at LO live. NHSE Benchmarking will include CYP and their parents/carers in their Stakeholder group and LPT Governance Manager – Patient Involvement and Experience will be working with CYP and their families to support confidence in sharing their voice. Health SEND Planning and Quality Group stablished work will include consideration of complaints and Tribunal information to inform future commissioning.	1. Regular attendance at LCPCF and SENDIASS by health and LA officers. Minutes available.	Dec 21	Surveys and focus groups with young people and their families demonstrate evidence of the support and information they accessed to enable their transition from children to adult services.	Dec 21 Mar 22	

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		services to adult services		Engagement with parents, carers children and young people in SEND Transformation plan in early 2021 identified some support and information which would be useful as they prepare to move to adult services					
3	There are no clear pathways for young people to access support, which delays their treatment during this transition	3. Develop and implement a joint plan to improve support and information available to support transition	Janet Harrison/ Pauline Killoran	See 2.1 and 3.2 above Transitions map summary on LO. Video in progress to explain transition to health services. Example video about transition from YP perspective in process of being put on LO LD Annual Health Check information leaflet posted on Local Offer and disseminated to practitioners to support parents/carers. Transition material has been co-produced with families and young people to ensure it meets their needs Continued involvement through NHSE Transitions Benchmarking Stakeholder Engagement	See 2.1 and 3.2 above	See above	See 2.1 above	See above	
4	Colleges do not get appropriate support from health or social care to support the transition process	1. Health and social care senior lead officers to engage with colleges and schools via the Tertiary Federation to understand what support and information they require to prepare young people with identified health needs for transition, at the EHC plan review in the year prior to a move to college	Pauline Killoran / Jane Young / Janet Harrison	SEND service to provide information to SENDIB about young people requiring and receiving updated EHCP in year prior to college (Head of SEND Integrated Services 0-25). Care navigators signpost schools and colleges to community health to access updated health advice for EHC plans LPT Transitions Practitioner smooths transition for children with complex health care needs. DCO offer for colleges to contact if they are experiencing difficulties. DCO will support joint problem solving. A network group across LLR meet 6-weekly (City, county and all colleges plus health) to address any on-going issues Additional Regional SEND funding awarded to colleges to map health transition needs.	1. FE College network minutes.	Dec 21	1. Outcomes of regional project funding demonstrate improved support from health or social care during the transition process 2. Using evaluation tools highlighted in the header, college staff and Health staff demonstrate confidence and effectiveness in support they receive from health as YP move into college.	Dec 21 Mar 22	

BRAG on a page

Area	Section	description	Actions	Action	Evidence	Completed	Impact	Sustained	
AREA 4 – Commissioning health needs post 19	1	Joint Commissioning of health needs post 19	1						1
			2						2
	2	Accessing services on becoming a young adult	1						3
			2						4
			3						5
			4						6
			5						7
									8
			6						9
	3	Clear pathways to access support	1						10
									11
			2						12
			3						13
	4	College support by Health and Social Care for transitions	1						14
									15