

To: Cambridgeshire Schools Forum
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From: Janet Dullaghan - Head of Commissioning, Child Health and Well-being, Joint Commissioning Unit

DEVELOPING A MODEL OF DELIVERY FOR CHILDREN AND YOUNG PEOPLE WITH SPEECH, LANGUAGE AND COMMUNICATION NEEDS (SLCN) IN CAMBRIDGESHIRE

Summary

To inform Schools Forum of the outcome of the latest review of the Speech, Language and Communication Needs (SLCN) service and the proposal to develop a jointly commissioned model for this service between Cambridgeshire County Council (CCC) and the Clinical Commissioning Group (CCG).

Through a jointly commissioned model this service will promote a cohesive and seamless approach to meeting the SLCN needs of Cambridgeshire’s children and young people. An equitable and needs based provision will be delivered across universal, targeted and specialist levels, across the age range from birth to a young person’s nineteenth birthday.

Background

The Speech, Language and communication needs Service (SLCN), commissioned by the CCG is currently delivered by two providers. Cambridgeshire and Peterborough Foundation Trust (CPFT) deliver services in Peterborough, and Cambridgeshire Community Services (CCS) deliver services in Cambridgeshire. A review of this service was commissioned by the Joint Commissioning Unit (JCU) due to the increase in demand. There is also an inequity in the delivery of the service across the county, along with two differing models of delivery and boundary issues resulting from the different services and pathways. The outcome of the review was to develop a core service specification, with consistent and appropriate pathways across both areas, with a focus on early identification and support.

The Joint Commissioning Unit commissioned this work through Marie Gascoigne, Better Communication CIC, who is extremely experienced in the subject area and has a track record of successfully completing similar reviews in other areas.

The support commissioned was to provide:

- A robust and independent needs assessment;
- Analysis of the data using an evidence framework;
- A service specification that is based on the best understanding of how to support children and young people with speech, language and communication needs.

Key Findings

SUMMARY OF RESULTS
Based on population and deprivation statistics – there is a higher need for speech and language provision in Fenland area.
The predicted levels of SLCN show that Fenland are not meeting the levels of needs expected for the area based on population and deprivation statistics.

South Cambridgeshire are identifying need higher than the predicted level expected for the area
The current workforce in Cambridgeshire while meeting the required need for Health. cannot fully fulfill the SEND responsibilities for children. This is currently commissioned on an ad hoc basis
No jointly commissioned model between the CCG and Cambridgeshire county Council (most other areas have a jointly commissioned Model)
Inconsistencies in data collection. Data across Peterborough and Cambridgeshire need to be aligned and consistent in line with agreed Key Performance Indicators and contract requirements.
Access, referral and clinical pathways not consistent across the county.
Increasing Demand for SLCN

Methodology

The review used the Balanced System® framework, developed over 15 years to provide a practical, holistic solution to the challenge of meeting the needs of children and young people with speech, language and communication needs (SLCN). It provides a framework and suite of tools and templates that can be used to improve the commissioning and delivery of services which benefit from an integrated approach to delivering outcomes.

A wide range of stakeholders were invited to participate in the survey and stakeholder events including:

- All secondary, primary and special schools
- All Early Years Settings
- Children's Centres
- Employees at Cambridgeshire County Council including the SEN and Early Years practitioners
- Employees of CPFT and CCS
- Parents

Parents' Views

Family Voice and Pinpoint supported access to parents through the stakeholder engagement and disseminated the parental survey. The online survey for parents was completed by 80 parents and carers responsible for children and young people. The highest response rates were from parents of children aged between 3 – 4 years and 5 – 10 years. 80 parents participated in the parental survey in Cambridgeshire. There were a range of views, comments and requests. Key areas are outlined below:

- Information about the SLCN service available for children and their parents, carers – how to access the service and timescales
- Reduced waiting times and support in the interim periods
- Consistent SLCN provision across Early Years and school aged – often more in the Early Years
- SLCN support in educational settings including special schools, specialist provisions and colleges (up to 25) – can be less support in specialist settings than in mainstream
- Choice of where the child is seen
- SLCN based upon needs of the individual not what “most” children need – currently seen as one approach fits all
- Regular therapy which might include one to one and group work with clear targets, outcomes and review of progress.
- More multi agency and integrated working which involves parents, especially for children with complex SLCN
- More SLCN staff

- Regular and on going support for parents and families

Funding arrangements

CCC is one of the few areas who do not Jointly commission a SLCN service together with health. The current service is commissioned by the CCG with ad hoc purchasing of packages of care and input to Education, Health and Care Plans (EHCP) and Tribunal outcomes by CCC.

The Code of Practice for SEND 0-25 and the Children and Families Act require the development of a Local Offer which is jointly commissioned by health and education partners to meet the needs of all children and young people with SEN whether or not they have an Education, Health and Care Plan.

Explore a jointly commissioned model, between the Local Authorities and the Clinical Commissioning Group.

This would pull together all of the resources currently spent on SLCN to deliver The Balanced System® that identifies interventions for universal, targeted and specialist provision (see below).

Next steps

This review and options will be considered by the JCU and CCG for consideration and agreement on the way forward.

National and local context

The national policy and legislative context relating to the support of children and young people with SLCN cuts across government departments including Department of Health, Department for Education and the Ministry of Justice. The Children and Families Act (2014) places an ongoing requirement for a joint commissioning approach in respect of children and young people with Education, Health and Care needs. Local Authorities and Clinical Commissioning Groups are expected to jointly commission both a Local Offer for all children and young people with SEN and to ensure that appropriate joint commissioning arrangements are in place to meet the needs of children and young people with Education, Health and Care Plans.

Proposal

The Proposal is to develop a jointly commissioned model between the CCC and the CCG. Through a jointly commissioned model this service will promote a cohesive and seamless approach to meeting the needs of Cambridgeshire's children and young people. Equitable and needs based provision will be delivered across the range of universal, targeted and specialist levels, across the age range from birth to a young person's nineteenth birthday. The extension of provision for young adults up to 25 years of age with an Education, Health and Care Plan will also be considered within the specification, however baselining of need will need to be ongoing during the initial period of the specification.

The specification will be based on The Balanced System® (Gascoigne, 2008 - 2015)¹, an outcomes based approach to delivering integrated services for children and young people. It has been developed in line with national policy and legislation as well as professional guidance for speech and language therapists in response to the challenges identified in the Bercow Review (DCSF, 2008) and Better Communication Action Plan (2011). Schools, early years settings and FE Colleges will be key partners to the success of delivering effective multi-agency support across the range of universal, targeted and specialist need.

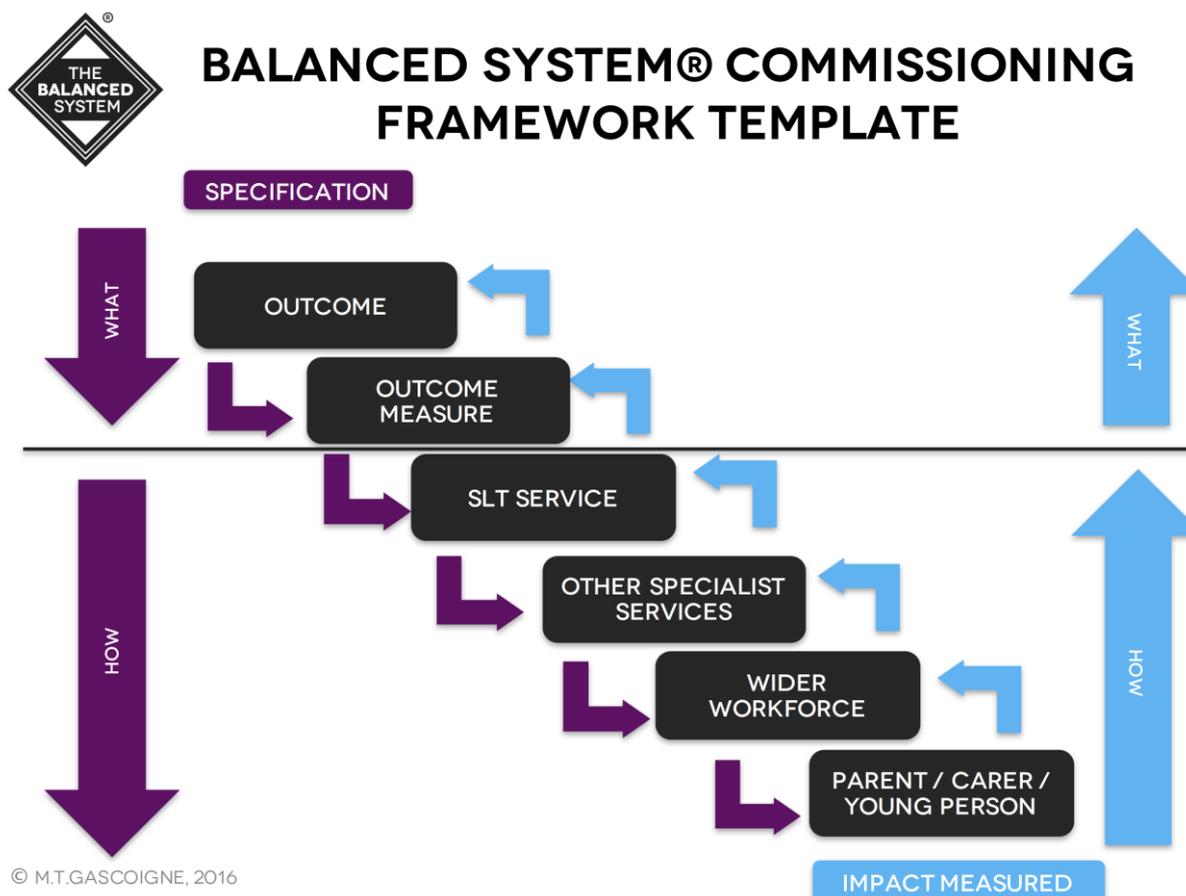


Figure 1: Balanced System Integrated Solution Commissioning Framework

Service delivery principles

The specification is seeking to ensure an outcomes based approach to delivering integrated services for children and young people.

The core principles which should underpin the service are:

- Speech and language therapy provision takes account of the whole system across universal, targeted and specialist levels
- Objectives at each level should be linked to: Supporting families, Environment, Workforce, Identification and Intervention
- Collaborative working is integral to achieve outcomes. Support for children's language and communication should be seen as a shared responsibility: parents, school, early years settings, SLT providers, the wider workforce. The Service will work in partnership

¹ More detailed information regarding the background to The Balanced System™ can be accessed via the following link: www.thebalancedsystem.org

with all providers of children and young people's services, including in health, education and social care

- Speech and Language Therapists (SLT) have an active but different role across the levels
- Children and young people are defined by their profile of need, not a setting attended or even necessarily a diagnosis or whether they have a Education, Health and Care Plan
- Pathways should be flexible to allow children and young people to access support from all levels (universal, targeted and specialist) meaning that access to interventions at each level should not be seen as mutually exclusive and children and young people might benefit from support drawn from one or more tiers simultaneously;
- Where possible SLT provision should be delivered in most functional settings for the child or young person;
- Functional goals should always be at the centre of interventions.

Through the Balanced System®, SLT service provision takes account of whole system across universal, targeted and specialist provision. Whilst delivery will be adapted to the specific needs of a given population, the core principles form the basis of the model.

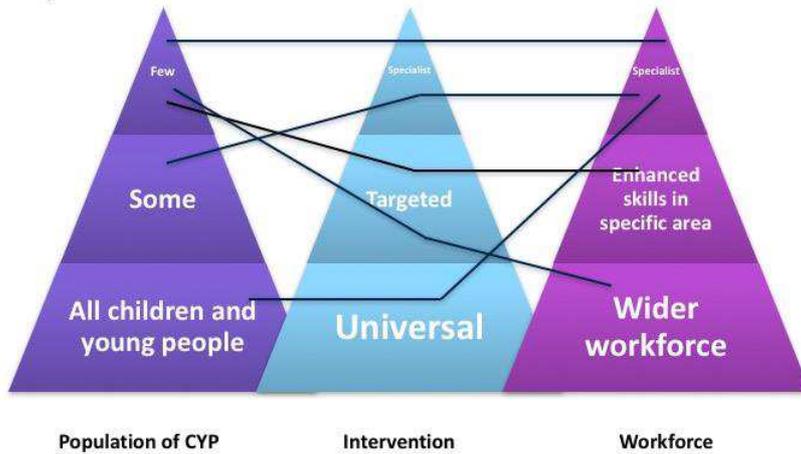
As an integrated service model, the Balanced System® requires input from registered speech and language therapists at all levels of provision, but the role and interface with the wider team of professionals and parents will vary from one level to another.

When considering the direct role of Speech and Language Therapists a number of important distinctions need to be made:

1. Not all children and young people with identifiable SLCN require direct intervention from a speech and language therapist, however, input from a speech and language therapist to the training and infrastructure development to allow others to support children at universal and lower-targeted levels is a fundamental part of the model.
2. There is no automatic 'read across' between children and young people who might be described as having complex or specialist needs in terms of an Education, Health and Care Plan and the requirement for specialist level speech and language therapy support. It is often the case that targeted support is appropriate for children and young people where SLCN is part of a wider profile of need. This is illustrated in figure WW below
3. Similarly, there will be children and young people with specific SLCN who may not otherwise be identified at a complex or specialist level of need who will require specialist SLT interventions in order to maximise their potential.
4. Finally, all registered speech and language therapists are able to provide some specialist level support as defined in this specification. Highly specialist SLTs will be required to provide specific specialist packages for some children and young people and the resource is calculated to allow for a range of skills to deliver the full range of provision.



RELATIONSHIP BETWEEN POPULATION, INTERVENTION AND WORKFORCE



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Figure 2: Illustrating the flexible relationship between complexity, intervention and workforce

Janet Dullaghan
Head of Commissioning
Child Health and well-being
Joint Commissioning Unit
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