Evaluation of the SEND pathfinder programme

Process and implementation

Research Brief

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SQW
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Background

This report is the first of two volumes containing the evaluation findings from the first 18 months of the Special Educational Needs and Disabilities (SEND) pathfinder programme. Twenty Pathfinder sites, comprising thirty-one local authority areas were tasked to develop and trial: an integrated assessment process: a single, joined up ‘Education, Health and Care Plan’; and personal budgets across education, social care and health, and adult services as appropriate for children and young people from birth to 25 years.

This volume covers the process and implementation evaluation, which describes and analyses the new approaches developed over the course of the programme. The impact evaluation will be published in autumn 2013 and provide an assessment of the experiences and outcomes achieved by the initial cohort of families.

Key findings

The pathfinders have invested considerable resource to establish new processes including: the assignment of a key worker so that families have a single point of contact; the development of personal profiles through which families and young people can express themselves; adopting person centred planning approaches; and moving to a single EHCP document. The general feedback around each of these developments has been positive. Pathfinders appear to recognise the advantages of working differently, and are positive about the impact of the changes. Both the new process and the underlying ethos were seen as important.

The changed approaches were reported to have increased choice and control for families. In all cases they were involved in the development of outcomes and agreeing the plan to meet these outcomes. The challenge of a shift to focus on outcomes was clearly demonstrated, with many key workers reporting finding the development of outcome based plans challenging. Further workforce development and support for cultural change will be important moving forward.

Much has been done to involve families and young people in developing the new approach. Pathfinders have also worked increasingly well with Parent Partnership Services and Parent Carer Forums. Parents have also been involved as part of the assessment and planning process, through the use of person / family centred approaches and key working. However, there has been less progress in terms of the involvement of children and young people. We would expect more balance between the inputs of parents and children and young people moving forward.
There was some uncertainty at the start about the operation role of the VCS in the pathfinders. Increasingly this is focussed on supporting families.

For the new approach to work it is important that all services work together. This has improved over time at both strategic and operational levels. Although there are still some concerns, especially around health engagement, it was hoped that the clearer duty on Clinical Commissioning Groups would improve this situation. Pathfinders were able to report some examples of where joined up planning had led to issues being resolved or services being allocated more efficiently.

The long term effects on service receipt, how far it may change and in turn for commissioning are not yet clear. To date the changes reported were often fairly small. More change may be expected as families become more confident in participating in the new system, and as the pathfinder approach increasingly reaches new families rather than those already receiving services which had been agreed previously.

Working with new families will also push many pathfinders to fully test the integration of assessment processes. From the limited evidence to date efforts to improve coordination were focussed around the key worker understanding the range of assessments that may be required and joining these up where possible. Similarly, many pathfinders have focussed on particular age groups and require now to test their approaches with a broader spectrum of young people, including those aged 19-25 where some pathfinders seemed unsure about what support to offer.

The development of the local offer is also expected to lead families to identify different services. Progress on development had begun slowly, before gathering speed in the last six months as areas increasingly recognised its importance. Many areas had underestimated the level of resource required to develop their local offer, and remained unclear about what should be covered.

The take up of personal budgets and SEN direct payments was limited. This was driven largely by the challenges and complexities experienced by areas around the development of a robust process, including gathering information on the unit costs of services. In addition, demand for SEN direct payments amongst parents appeared low, although there was an appetite among parents to be involved in the decision making around support for their child, and to have choice and control.
Methods

This report contains data gathered through self-reporting of progress by pathfinders against the Common Delivery Framework (CDF) and in-depth case study work in 10 selected areas. In each case study we interviewed a range of people including: pathfinder leads; service leads; schools and colleges; the voluntary and community sector (VCS); parent carers; and key workers. The CDF data was collected quarterly throughout the programme. There were three sets of case study visits, the last of which gathered data between January and February 2013.

The existing systems

The existing system tended to be organised around services with very variable levels of integration. The pathfinders recognised the limitations of their existing systems and wanted to use the programme to begin to address some of these issues.

There were a few exceptions where pathfinders reported existing good practice. This included examples of joint/integrated working between services and personalised approaches. Many of the areas expected to build on their good practice, which aligned with the direction of travel set out in the SEND Green Paper.

Recognising the scale of the challenges involved, almost all of the areas intended to develop trials with a fairly small number of families. These trials would then inform their understanding of what needed to be taken forward over the longer term for a much larger group.

Organisational engagement and cultural change

Following a set up period of 3-6 months, there were usually good levels of strategic involvement in pathfinder governance structures from most parties. A common group of stakeholders had been engaged across the majority of pathfinders including: professionals from local authority education and children’s social care services (all 29 areas); parent carers (all 29 areas); the local VCS (26 areas); and professionals from health (27 areas), adult social care (25 areas) and schools (25 areas).

Project boards in the case study areas met on a regular basis and were reported to have been well attended. Exceptions to this general pattern included some variable attendance from health, education providers and representatives from the VCS. This was usually related to capacity issues and in the case of health to the lack of guidance around their role. It was hoped that recent policy announcements would help to address this.

The limited engagement of the VCS within many of the case study areas was also reported to be the result of an on-going lack of clarity amongst pathfinders and VCS.
organisations about possible roles. Increasingly, this was focused on supporting families.

The individuals leading the pathfinders most commonly came from an education background, in recognition that much of the programme focused around education and SEN.

The majority of areas reported they had fully established commitment to share education (23 areas) and social care (22 areas) resources to develop and deliver the pathfinder by the end of March 2013. Fifteen areas reported having achieved similar commitment to share health resources. In general, partners were more willing to commit staff time, rather than funding for development or service delivery.

Over time, the effective engagement of parent carers in the development had grown, becoming widespread by March 2013. This had included ensuring that this group were represented and appropriately supported to contribute to both the project board and as many of the local work streams as possible.

Although the effective engagement of children and young people with SEND in strategic developments was universally recognised as challenging, 10 out of 29 areas reported having fully implemented this activity by the end of March 2013.

Development of the local offer had begun slowly, before gathering speed in the last six months. However, many areas had underestimated the level of resource required to develop their local offer, and remained unclear about how comprehensive the offer should be and how consistently education and health providers would respond to requests for information.

Engaging and involving families

Recruitment of families to the new system increased in advance of the school summer holidays, plateaued over the summer holiday period and then ramped up from October 2012 onwards. In total over 800 families were recruited by March 2013.

This pattern reflects that the majority of referrals into the pathfinder came through education professionals working within schools or the local authority. As a result, most of the young people covered were of school age and already in receipt of services. The decision to focus on existing users often reflected areas wanting to work with those they knew and being concerned about the time it would take to develop new assessment pathways while still meeting their statutory duties.
**Setting up the pathfinder infrastructure**

There had been clear progress in mapping out the assessment and plan pathway by the end of March 2013. Almost two thirds of areas had reached ‘full implementation’, although the other third reported that they were still developing their approach.

Most areas had developed a similar pathway, with comparable stages and sequencing. This included family engagement, assigning a key worker, co-ordinating assessments / drawing together previous assessments, and single planning.

All areas have begun the new process with an initial family engagement stage, to formally introduce the pathfinder and start the development of a family-based profile. The development of a profile was reported by key workers to have been a positive experience for families. The provision of a single point of contact for the family from the outset of the process had also been well received.

Family engagement, while widely welcomed, also brought challenges around: the levels of understanding and confidence of some key workers; insufficient involvement from children and young people; and concern around the capacity of local areas to sustain and roll out their engagement strategy.

Most areas chose to focus on the single planning stage. This reflected many pathfinders focussing on existing service users, rather than newcomers to the system. A small number of pathfinders had looked more closely at integrating assessments for newcomers, but this was often at an early stage or outside of the case study areas.

Across the case studies there was a sense that the ‘ethos’ of the process was changing, resulting in the required movement to a more family-centred, outcomes-based and multi-agency approach. In addition, all of the case study areas had trialled the use of a single document combining both the results of the coordinated assessment/review and the plan.

Key working was viewed as a core part of the new approach. The role was widely welcomed, although in many cases the training requirements appear to have been underestimated by pathfinders and key workers themselves. The number of areas that had split the role, with two professionals delivering distinct elements (although different elements in different pathfinders), grew over time and many areas were considering splitting the role going forward.

There remained a number of points which would need to be tested and developed more widely beyond writing the plan around: the allocation of actions to different agencies; the resourcing of individual activities; and the sign off and approval.
process. This reflects that many plans were developed just as evaluation data was
gathered, and so the need to address these issues had only recently arisen.

Many areas had found it difficult to develop personal budgets. This reflected the
complexities to be worked through in terms of how resources could be calculated
and allocated, either for individual services or across all three. The accelerated
learning group established by DfE is intended to speed up progress on this element.

**Evaluation of the pathfinder support team**

The effectiveness of the Pathfinder Support Team (PST) (Mott MacDonald) was
reported to have grown over time. It was seen to organise useful events and to act
as a useful conduit between the pathfinders and DfE. As a result perceptions of the
importance of the PST had also risen, with three quarters of the areas reporting the
support to be fairly or very important to their success.

**Evaluation of SEN direct payments**

Across the 14 SEN direct payments pilot case study sites, a total of 290 SEN direct
payments had been approved. Over 270 of these cases covered home to school
personal transport. The others were supporting individual complex cases, and one
area was providing seven direct payments for early years nursery funding.

The limited take up was driven largely by the challenges and complexities
experienced by pilot sites in the design and implementation of the SEN direct
payments offer. The main challenges have been around identifying budgets and
funding streams (with personal transport budgets the easiest to disaggregate).

Demand for SEN direct payments amongst parents appeared low. More than half of
the families that were invited to participate in the pilot chose not to take up the offer.
However, there was an appetite among parents to be involved in the decision
making around support for their child, and to have choice and control. It was not the
direct payment itself that mattered, but the personalisation process that attracted
parents to the pilot.

Most areas had identified individual families where children had complex needs, or
where parents were generally dissatisfied with the current offer, to test the extent to
which the SEN direct payments offer could provide alternative and better solutions.
Since these are specific cases, areas are apprehensive about the extent to which
this testing could be rolled out to a wider population.
Conclusions and implications

Taken together the findings presented above are broadly positive. The pathfinders have travelled a considerable distance and learned much which can be shared with others. There is broad acceptance of the direction of travel, with considerable support for the new approaches being adopted. In the additional time that the pathfinders now have it is important that they address the remaining challenges so that the full benefits of the planned changes are realised.