



Barnsley Children and Young People's Trust believes that every child should be born and grow within a healthy, safe and resilient family, and that children and young people are effectively enabled to develop throughout their early years, become school ready, and achieve their full potential in learning, work and life.

Start Well

Live Well

Age Well

Local Need, Context, and Aspirations

Giving children the best start in life is a fundamental part of improving health and reducing health inequalities. Our ambition is that Barnsley Children and Young People sustain strong and positive relationships and feel valued by those around them. CYP have a strong role to play in shaping their local environment and Barnsley's future. We want them to be proud to live and feel safe within their community. They should be able to access good housing, and more and better employment opportunities locally, or be enabled to explore their ambitions beyond Barnsley whilst maintaining a strong local identity and always having a place to call home

Every child in Barnsley should be able to attend a school or setting which is graded good or outstanding by Ofsted and receive an inclusive education experience, within their local community that supports need at every level, develops skills for life, and provides great opportunities to meet their aspirations and get involved within their community.

"Young people are Barnsley's future they should be able to influence what it looks like and what it does." Barnsley Young Person aged 14.

Mid-year estimates 2019 show that there are 53,556 children aged between 0 and 18 years in Barnsley. The school population in Barnsley has been increasing year on year since 2011. In January 2020, there were 34,761 pupils on roll in Barnsley schools. 73.9% of pupils in Barnsley LA are attending a good or outstanding school, 77.8.9% of schools in Barnsley LA are good or outstanding, and 99% of Early provision is good or outstanding. 333 children and young people are looked after by the local authority. Our OFSTED rating is good. Education standards and attainment are a vastly improving picture in Barnsley, supported by Barnsley's Sector led Partnership approach to driving educational standards within the borough alongside a strong economic and employment strategy which is impacting positively for Barnsley.

Inequalities in children's development originate in multiple disadvantages, which compound to affect children's long-term outcomes, undermine the development of human potential where children from disadvantaged families quickly fall behind. Barnsley is the 39th most deprived Local Authority in England; there are 326 Local Authorities in total. This does not mean that we don't have a lot to celebrate and enjoy in Barnsley or that we have low aspirations as a Town. This ranking is calculated based on seven areas of deprivation, these include; Income, employment, education, skills & training, health deprivation & disability, crime, barriers to

housing & services and living environment. The healthy life expectancy gap between the most and least deprived areas in the UK is 18 years. Physical, emotional and mental wellbeing are significantly shaped by social determinants which impact health and our local economy.

Studies also show that 50% of children in areas of social disadvantage start school with language delay, i.e. with language that isn't developed enough for the next stage of learning. Making 'Every child a Talker' is an ambition for all our services. Barnsley jointly commissions its SALT provision and is working sub-regionally with partners to develop a coherent strategy and training offer across South Yorkshire supported via the DfE Early Outcomes Fund. This approach is also enabled by a strong early education and Early Help/O-19 community health offer. Implementing a localised, equitable and integrated health, care and education offer substantially increases opportunities to reduce social and economic inequalities, improving health and wellbeing outcomes for all our families.

The pandemic has had, and will continue to have for some time, an impact on CYPF outcomes, on schools, settings and services who have carried out significant work to maintain provision during this difficult period. Staff report that multi-agency working has never been stronger than during the pandemic as professionals across services try to maintain service continuity for Barnsley residents, children, young people and families.

Collective action and delivery across our organisations to address the root causes of poor outcomes, maximise public resources, and prevent escalation of need, is now more important than ever and a key driver for joint commissioning, wider integration, and service transformation, as highlighted within the NHS Long Term Plan, Children and Families Act and via this strategy.

A high-level commissioning review between the LA and the CCG is currently taking place to outline our future plans for further Service integration against shared objectives and outcomes which reflect a place-based commissioning approach across all ages and phases of community life. A Joint review of CYP's Joint Commissioning was completed in January 2021 and has been used to inform this strategy alongside the intelligence which we gathered when recently producing our SEND Strategies. The aim of the children's commissioning review was to explore current arrangements, identify existing good practice, and improve, where needed connectivity, efficiency, best value, service delivery and most importantly outcomes for CYP across the Children and Young People's Trust.

A summary of outcomes and findings from the joint commissioning review include:

- A stronger understanding of the statutory legislation that underpins need and outlines arrangements for joint commissioning across education, health and care.
- A shared commitment for sharing data and intelligence to inform a local needs analysis to support commissioning to be taken forward by the Best Start Partnership.
- A shared understanding of the different children's panels operating across the system, and identification of required improvements to align processes and the Trusts graduated response.
- A better shared understanding of children's commissioned services and identification of services which need to be reviewed.

What is commissioning and how do we drive it via implementation of the commissioning cycle:

Analyse and develop local insight:

- What is needed the most to maximise population outcomes?
- What does our local data and intelligence tell us?
- How do we benchmark against others?
- What needs to change?
- What works?
- What is our statutory responsibility?
- What resources do we have, what resources do we need and, what resources can we afford?
- How can commissioning inform and support related local and national strategy?
- What do our CYPF think and experience?

Effectively Planning:

- Review and plan how to use resources better.
- Map and fill resource gaps, achieve best value, and improve quality via service reviews and commissioning recommendations.
- Decide key priorities to achieve the outcomes we need.
- Build a shared understanding and collaborative approach to commissioning via the facilitation of a strong CYPT partnership, shared/coproduced strategies and collaboration across services, organisations and Sectors.
- Shared outcomes and continuous improvement frameworks building on our JSNA, CCG Outcomes Framework and LA performance data.
- Develop strong service specifications.

Implementation:

- Procure services, provider frameworks/Dynamic Purchasing Systems and develop the market in line with specifications, contracts and presenting need. Work in partnership with Central Commissioning and Procurement, the Region and Services.
- Monitor progress and contracts – manage quality
- Collect Service user feedback
- Model and drive service transformation in line with Strategy and Place
- Develop pathways and remodel services
- Facilitate Resource Allocations and Personal Budgets

Reviewing:

- Assess impact on social value and against statutory frameworks designed to ensure compliance and effective outcomes which establishes levels of service effectiveness and reach.

Commissioning, Governance and Partnerships

The Children and Young People's Trust is a partnership that demonstrates strong commitment from a range of agencies. It is well established and has a Section 75 arrangement in place to facilitate Joint Commissioning between the LA and NHS Barnsley Clinical Commissioning Group. Joint commissioning arrangements which commission for outcomes are an essential requirement of statutory function across Children's and Family Services and are maintained via Barnsley's established Children and Young People's Trust Executive Group (TEG), and the Children Executive Commissioning Group who together drive continuous improvement in line with CQC, OFSTED frameworks and Nice guidance.

Further alignment with other more specialist regional boards across the 0-19/25 agenda are supported to drive local and nation development and policy. The Transforming Care agenda is a key area of development for the Children and Young People's Trust and is supported by the Calderdale, Kirklees, Wakefield and Barnsley Transformation Care Partnerships. The Trust is guided by the CCG in relation to this agenda which seeks to ensure that children and young people with a learning disability, autism or both have the right to the same opportunities as anyone else. Care, Education and Treatment Reviews (CETRs) are essential to this process.

CYP Trust Partners include:

- The NHS
- Schools/Barnsley Schools Alliance
- Police
- Healthwatch Barnsley
- Barnsley Council

In addition to our own governance and commissioning arrangements, the White Rose Framework, of which Barnsley is a member works together to commission a single contract for education, and residential care for children and young people with SEND and children who need local authority care to keep them safe. The White Rose Partnership works together to outline a common vision for the delivery of these services. A vision for a productive partnership between Yorkshire and Humber authorities and contractors who deliver outcome focused support responding to the individual needs of children and young people. It provides:

- A standardised complimentary process and mechanism for purchasing placements.
- Clearly defined requirements and common levels of service specification,
- Defined service standards enabling effective contract management to be carried out.
- High quality placements supported by robust contract management and quality assurance processes.
- Ensures placements delivered provide value for money and reduce off-contract placements.
- The ability to benchmark costs and service standards regionally and nationally.

This is implemented alongside the LA's SEND and LAC Sufficiency Strategies which are needed to meet statutory requirement, provide provision locally, drive quality, and where

possible keep children with their families in the case of the LAC strategy. Finally, they are responsible for enabling greater financial balance across Service budgets and the Council.

Setting the context for children's Joint commissioning in Barnsley

In Barnsley we commission for quality and excellence in Children's Services. Achieved by working in partnership and building responsive and sustainable services to improve life opportunities for our children and young people.

Key Joint Commissioning Principles:

- To commissioning for outcomes
- Take a whole life prevention approach
- Sufficiency and Best Value
- Collaboration & Partnerships
- Continuous Service Improvement and Quality
- CYP Focused Services
- A personalised and strengths-based approach recognising and respecting the individual
- Use of data and intelligence to inform decision making
- Reduced health inequalities and focus on population health
- System leadership to the management of risks and benefits
- Transparency in decision making
- A democratic voice in commissioning

CYP Quality Standards developed by CYP and adopted by the CYP Trust and Joint Commissioning.

- Consideration
- Acceptance
- Consistency
- Fairness in all things
- Kindness
- Quality

Our focus on families, children and young people should begin during early pregnancy by providing a targeted and personalised approach to service delivery and commissioning. The first 1,001 days between a woman's pregnancy and her child's 2nd birthday offers the perfect opportunity to build healthier futures for our children across our Children's Partnership. Barnsley has recently implemented its Best Start Partnership to enable and coordinate support across all relevant organisations. Studies show that nutrition, relationships/attachments, communication with people they love, and the world around them, shapes their future outcomes.

Barnsley is also collectively trying to develop and implement a seamless provision route into adulthood supporting our most vulnerable young people until the age of 25. Preparation for adulthood and support through key transitions phases ensuring connectivity and consistency of Service pathways is essential to Barnsley's approach and development. This development

will be supported by a range of commissioning reviews to be monitored and driven via the Executive Children's Commissioning Partnership to ensure our local pathway meets the needs of children, young people and families at the level required up until the age of 25 for our most complex young adults. This area for development is also covered within the Preparation for Adulthood Strategy.

The impact of adverse childhood experiences on our vulnerable children and young people informs us we must ensure that children have the best start in life, sustaining good outcomes throughout childhood and adolescence, so as adults they will live well and stay well. Managing complex adolescent risk via strong systems leadership and the right service provision is also essential. Workforce development and multi-agency learning from complex cases is key. Joint commissioning ensures a holistic approach to meeting the needs of our most complex/vulnerable children and families along the service continuum and into adulthood. It also incorporates community capital and coproduction of services, and the effective setting and evaluation of individual and collective outcomes to measure progress and develop services.

The emotional mental health and wellbeing of children and young people is just as important as their physical health, especially within the current climate of the coronavirus pandemic. Good mental health allows children and young people to develop the resilience to cope with life's situations, thrive and grow into healthy adults. Young people express their concerns in relation to mental health and have chosen mental health as a national and local priority for action for the last two years via the Make Your Mark Campaign.

The LA and CCG work together to commission Autism assessment and ongoing pre and post diagnostic support which has been enhanced via a single pathway led by BHNFT and a stronger and more targeted Early Help offer. Barnsley has a CYPT Autism Strategy Group which is currently developing Barnsley's Autism Strategy in-line with the national specification and existing service pathway mapping. Support is also provided by a number of local services which include Inclusion Services, Occupational Health, SALT, the 0-19 Service and the Disabled Children's Team.

The CCG are the lead commissioner for ADHD, which is supported via the CAMHS offer, however plans to develop a joint pathway for ADHD and ASD are being developed and monitored via the SEND Improvement Plan/Group. Our SEND Service is also working proactively with School leaders to develop their ADHD and EHWP response. The CCG are working with CAMHS and General Practice to enhance its response to provide medication for CYP with ADHD due to service waits on this particular pathway which impacts CYPF and education outcomes.

NHS England's Intensive Support Team were jointly invited in 2019 by NHS Barnsley CCG and the CAMHS (Child and Adolescent Mental Health Service) service provider SWYPFT (South and West Yorkshire Partnership NHS Foundation Trust), to undertake an independent service review of the Barnsley NHS Specialist CAMHS service. A key recommendation of the service review was for partners to co-produce a clear, robust CAMHS Service Specification.

This has been completed by the Partnership and Barnsley CCG, LA and schools have invested significant funding and strategic/operational effort into developing a strong response to supporting CMH and wellbeing across Sectors and the Partnerships workforce. Key areas

for development have been identified and are being addressed demonstrating a decline in waits for service and a wider programme of mental health and wellbeing support for children and young people to access.

Following the end of the Future in Mind Programme, the CCG Governing Body and Elected Members collaborated in a joint event to develop and agree a Boroughwide vision for emotional health and wellbeing provision for children and young people. The CCG and LA Public Health have jointly funded an Emotional Health and Wellbeing Lead post to provide Borough wide strategic leadership in the design, implementation and integration of children and young people's services to improve emotional health and wellbeing outcomes. A mapping exercise to understand the current landscape of Children and Young People's Emotional Health and Wellbeing services through detailed scoping of current service provision across the Borough has been completed which details recommendations and suggested next steps to inform service commissioning and delivery. As part of the Government's commitment to provide additional support through schools and colleges to reduce CAMHs waiting times, three mental health support teams have been established to work across schools in our most challenging areas. Plans are in place to create one overarching Team. The focus of CYPMHTs is more vulnerable CYP, this includes the LGBT community and home schooled CYP. This resource is deployed against local needs data.

Children and Young People's Plan Priority Areas for Action 2019 to 2022 Outlined in the Barnsley CYP Plan.

To ensure the Partnerships' efforts are targeted appropriately to achieve key areas for development and commissioning the CYPT have chosen five key priority areas to progress during 2019-2022:

- Inclusion and Engagement
- Continued development of Early Help
- Access to specialist and targeted Support locally.
- Improved life outcomes for children and young people with Special Educational Needs and Disability (SEND) and Transitions at all key life stages
- Increase levels of coproduction

How are commissioning and delivery partners achieving CYP Plan priorities:

- Co-produce well-planned, integrated, quality provision for children and young people with SEND from birth to age 25.
- Key agencies and services are taking shared responsibility for development and outcomes and implementing key actions within the SEND Continuous Service Development Action Plan.
- Working together to proactively meet resourcing and financial challenges via sufficiency strategies.
- Ensure commissioning arrangements provide for multiple and complex need and are personalised to the individual.
- Ensure sufficient, good quality services within the borough in line with our local needs assessment/profile and sufficiency strategies to ensure children and young people can access provision locally.

- Intervene early to provide the right support maximising opportunities for independence as we prepare our children and young people with SEND for adulthood.
- Barnsley will deliver services in a way that ensures the voice of children and young people is at the centre of all our practice.
- Ensure service pathways are connected, market provision is enhanced, and organisational strategies aligned.
- Focuses on the whole child and creating stronger families.
- Manage adolescent risk in complex and uncertain circumstances
- Commission a range of community-based provisions to support the delivery of health and care function at a universal and targeted level.
- To make sure the needs of CYP are understood and aspirations of CYP are supported.
- Children's Commissioning provides advice and support re. all commissioning functions and works with services across education, health and care.

The Voice of CYP In Children's Joint Commissioning

- The voice of CYP should be at the centre of everything we do and commission as a Children's partnership.
- Children and young people should be involved at an individual level in plans and services which affect them.
- The views, wishes, and feelings of young people should be encouraged at every opportunity.
- CYP and professionals should coproduce documents together, put them in place together and evaluate them together.
- Young People are key to service and workforce development and can play a vital role in the delivery of training to staff and peers to drive change by sharing their lived experiences.
- As many opportunities as possible should be created for CYP and professionals to work together. This should be well planned and timed to ensure it comes at the beginning of a piece of work and not at the end when there is less opportunity to influence it. It should align with the Participation and Engagement Strategy.
- CYP should be more involved in the development of service specifications, service reviews, staff interviews and tenders.
- Commissioners link with established local youth forums to engage CYP in key activities and understand local/national youth agendas such as Make Your Mark.
- CYP are given opportunities to meet with senior leaders and be part of key meetings.

Children's Commissioning alongside our Targeted Youth Support Service, coproduced Barnsley's Children and Young People's Plan and SEND Plan with the Youth Council and SEND Youth Forum. Commissioning has also worked alongside our Targeted Youth Support Service to gain the views of children and young people about Joint Commissioning in addition to what was learnt during consultation on the above strategies. Their feedback has been used to inform this strategy and develop plans about how to consistently engage CYP in Joint Commissioning of services in addition to the governance and strategy work now embedded.

Discussions were based on:

1. How CYP could be more involved in commissioning (commissioning arrangements and purpose explained during the workshop)?
2. What needs to change across Barnsley, and how good commissioning can help?
3. What their vision for Barnsley is?
4. Should we have young commissioners and how would this work?

As always engagement was excellent, and the following feedback was provided:

- One young person suggested that they would like to meet with the Chief Executive on a monthly basis to discuss key youth issues, what is happening for children and young people in Barnsley, and how they can influence this.
- To be able to access therapeutic support such as arts projects not therapy sessions. They would like therapeutic support that works for them as an individual and they feel comfortable attending.
- One young person said she would just like to be able to access mental health support without being passed around services due to her disability. She said services should be consistent and inclusive. She just needed help with her mental health, she asked for help, and was referred to another service because she did not meet the services criteria.
- To feel that community assets are for them, such as more community gyms they can attend where they live. All new development and money go to the town centre. This is no good for a child who lives in the Dearne and likes going to the gym.
- They would like to know how the Council and Local Area Councils spends their money and be part of making these decisions. They are often consulted on what they would like to be commissioned within their community but are not then engaged in reviewing the spend or the provision.
- Young people are Barnsley's future they should be able to influence what it looks like and what it does.
- They should be able to access services when they need them not at a point when their problems have become critical.
- They welcomed the idea of young commissioners. They would like to attend training and understand what the eligibility criteria and the role would be. They would like to have specialist commissioners in a number of key areas. They were really keen to have young commissioners for mental health. The LA youth commissioner programme would complement the young commissioner programme commissioned by the CCG and delivered by Chili Pep which was initiated as part of the CCGs Future in Mind response.

Youth participation forums have been aligned with wider Council structures and strategy, which has developed a step change in practice and culture ensuring CYP voice is front and centre within the Trust and what we commission. CYP regularly attend the Trust Executive group and are a valued partner at the annual Trust and Safeguarding Partnership event which is always held on Children's Takeover Day.

The work completed with CYP regarding the SEND Plan is being built upon by our Safeguarding Partnership to address how children and young people with SEND feel about negative interaction with peers and professionals and to address a cultural change in tackling

hurtful and discriminatory behaviours by developing a standardised approach, recognising the accumulative impact of one off incidents of bullying, longevity of impact and damage to self-esteem and confidence.

The next step is to develop a Youth Commissioner Programme to allow CYP to work alongside the Children's Commissioning Team to take part in all aspects of the commissioning cycle being given the opportunity to shape and review local services and provision.

Our Children's Joint Commissioning Approach further defined:

- Focus on commissioning for outcomes which support long-term changes where we know change is required, evidenced by good quality performance and needs data.
- To promote social value by placing social, education, health, environmental and economic outcomes at the heart of everything we commission in line with local plans and strategies.
- To demonstrate knowledge of the local and national market working collaboratively across the region to support procurement, commissioning and quality assurance frameworks to create economies of scale, best value, maximise impact, influence the market and ensure quality outcomes.
- To support greater integration and collaboration opportunities across services and organisations to achieve transformational change which includes influencing effective workforce development opportunities across the CYP Trust and by co-commissioning services and pathways in line with national statutory guidance.
- To promote co-production to make services, plans and strategies more effective, transparent and collaborative increasing levels of choice, control and making the most of Barnsley's social youth capital.
- To place children and young people at the heart of everything we commission and involve CYP in all stages of commissioning and governance.
- That commissioning seeks to develop a multi-sector approach which creates a strong mixed service economy that takes account of evidence-based practice and promotes a strengths-based approach to collectively achieving outcomes along the continuum of need.
- To demonstrate impact via robust performance frameworks and effective market management to ensure outstanding service delivery and service pathways that work effectively and efficiently to meet need.
- Commission to secure equality of opportunities and outcomes for our most vulnerable CYPF and enable effective transitions to adulthood. To work with adult commissioners to ensure all age sufficiency.
- To work as part of a three-phase approach across services and organisations to implement a start well, live well and end well approach to commissioning for Barnsley residents.
- To deliver and maintain strong Governance frameworks which support the delivery and activity of the Barnsley CYPT.
- To commission in line with the Children and Families Act and SEND Code of Practice.

The overriding obligation on local authorities and Clinical Commissioning Groups, is to work together to ensure children's needs are considered and addressed holistically to advance the health and welfare of their populations. This duty is expressed throughout statutory guidance,

most prominently; The Children and Families Act 2014, which imposes a range of duties in relation to co-operation including a requirement for joint commissioning arrangements to be in place (section 26).

Section 26 Duties:

1	The education, health and social care provision reasonably required by local children and young people with SEN and disability; how this provision will be secured and by whom.	<i>This information has been provided within the SEND Strategy, SEND Improvement Plan, SEND Sufficiency Strategy and Joint Commissioning Strategy, EHCP and Inclusion Guidance, Accessibility Strategy, Short Breaks Statement and Local Offer Website. Schools should define their graduated support offer and how they will make reasonable adjustment. The Designated Clinical Officer/CCG support schools to meet health needs and define their support offer for complex children based on health assessment and Children's Continuing Care Guidance. The DCO also supports children social care and links with SENDIASS as required.</i>
2	What advice and information should be provided about education, health and care provision and who is responsible for providing this advice.	<i>Advice should be provided to families in relation to specific need by the most appropriate agency</i> which would usually be a child's school (SENCO), Early Years Setting, Health Visitor, Family Support Worker, GP, the Children's Disability Team, SEND Team and Community Health Providers (SALT, CAMHS, Occupation Therapy etc... would then provide specific information. Information about their provision, and referral criteria, which is provided on the Local Offer Website and links to Provider Websites. SENDIASS and the Designated Clinical Officer within the CCG can also provide IAG. Post 16 information is provided from the Targeted Information Advice and Guidance Team, within the Education, Skills and Employment Team. Adult Social Care Teams and the Adult Continuing Care Health Team will also be able to provide information

		<i>and support in relation to transition cases and via annual review processes.</i>
3	How health services will support the identification of children and young people with SEN and disability.	<i>They target support to the areas where it is most needed which is establish via NHSE Public Health data and referral data from commissioned and universal health services. Consolidation of data is a primary objective of the CYPT Best Start Partnership who aspire to pull together data and performance information from all across the CYPT to inform education, health and care services across the Partnership. This is in addition to data received at a Service and Directorate level from data from the Business Improvement and Intelligence Team and the JSNA.</i>
4	The process by which local health services (including primary and secondary care) are able to inform the local authority of children, including those under compulsory school age who they think may have SEN and/or disability.	<i>Via Early Help Assessment, GP registers for LD and Autism, DCO, Community Nursing Team, Public Health 0-19 Service.</i>
5	Joint health, education and care arrangements for LAC.	<i>Universal service offers, pupil premium, CAMHS LAC Pathway- LAC Nurse, Virtual Head and Children's Resource Allocation Panels (IFR Panel, PSORP, CRAG or CCC Panel) if not able to be met by commissioned and universal services.</i>
6	How complaints about education, health and social care provision can be made and how these are dealt with.	<i>Complaints policies and protocols, the commissioned Disagreement and Conflict Resolution Service, Designated Clinical Officer.</i>
7	Procedures for ensuring that disputes between local authorities and CCGs are resolved as quickly as possible	<i>Via the CYPT Executive Commissioning Group and other establish partnership routes including Executive Teams discussions.</i>
8	How partners will respond to children and young people who need to access services	<i>Inclusion policies, charters, referral criteria.</i>
	Joint commissioning must also include arrangements and responsibilities for securing outcomes and personalised services, specifically:	<i>Initiated by most appropriate service, specific assessments are available for Education, Health (DST) Care (Children and Families Assessment and Carers Assessment for young carers and</i>

	<p>Securing Education, Health and Care assessments;</p> <p>Securing the education, health and care provision specified in EHC plans;</p> <p>Agreeing personal budgets</p>	<p><i>parent carers) Early Help Assessment EHA.</i></p> <p><i>EHCP and resource allocation process/panels.</i></p> <p><i>(Personal budgets can be agreed as appropriate by education – ORG Panel, health Children’s Continuing Care Panel and social care - Short Breaks Panel, combined budgets at the Children’s Resource Allocations Group. Personal Budgets Policy in line with national guidance.</i></p>
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The diagram below provides an integrated overview of the processes/children’s panels relating to health, education and care, at each tier.

	Tier 2	Tier 3	Tier 4
Social Care and Early Help	Early Help Assessment (EHA) / Panel / Early Help Action Plan / Team Around the Family Meetings, Review.	Child in Need (CIN) Assessment / Plan / CIN Action Plan / CIN Meetings/ Annual Review	Child Protection (CP) Assessment / CP Plan / CP meetings / I Review PSORP Panel – Foster Care & Residential placements
	Short Breaks		
Education	SEN Register / SEN support in School / SEN Support Action Plan School Inclusion Team/specialist assessments	Education, Health & Care Assessment / Education, Health & Care Plan (EHCP) / Annual Review ORG Meetings (provision need and resource allocation)	
Health	Mental Health Support in Schools Specialist EH offer to support ASD Universal offer via HWB Pathway	Support via YOT, Children’s Continuing Care / Checklist / Decision Support Tool (assessment) / Package of Care / Review, Universal and targeted offer. CCC Panel	
		Individual Funding Request (specialist equipment and medication)	

	Autistic Spectrum Disorder Assessment Team (ASDAT)	Care Education & Treatment Review
	Assessment for Children's Therapies (OT/ PT / SALT)	NHSE Specialised Commissioning (T4 Beds)
	Assessment for CAMHS	
Joint Funding Panel	All related assessment panels/support plans which provide a targeted response (outlined above)	Children's Resource Allocation Group (CRAG) (specialist multi-agency resource allocation) Governance ECG IFR (MH and Specialist Equipment (CCG and ratification at CRAG). Transitions Panel (Adult Services – CRAG as needed)

Collaboration across public services is widely recognised as the only possible effective, and essential, approach to securing better outcomes for people at an affordable cost. To ensure a collaborative approach to service development and delivery it is essential to have good knowledge of local needs, risk factors, services and priorities which is outlined with the information above and the suite of strategies and plans developed by Children's Services available via Barnsley's Local Offer Website. Children's Commissioners in Barnsley commission a mixed economy of provision across number of services across education health and social care alongside individual packages of care and support for our most vulnerable children with complex and multiple needs.



Joint Commissioning and SEND

In Barnsley 4.0% of children and young people have an EHCP compared with 3.3% nationally, and 3.3% among our statistical neighbours. Children and young people with SEN Support in Barnsley totals 10.7%, nationally this stands at 12.1% and 13.1% amongst statistical neighbours.

This data tells us that SEND is not identified at the earliest stage possible, when SEN support needs to be put in place and therefore often a much higher resource needs to be allocated to meet needs. To enable a joined-up system and common understanding of this, cross agency work is being undertaken to promote consistency across education, health and social care provision to enable a much strong collaborated response to intervening early. The work is being driven by the Barnsley SEND Continuous Improvement Plan which is being driven at pace by Barnsley's Senior Children and Young People's Trust leaders.

Early Help and intervention are a key driver to success, an approach which ensures every child and family gets the right help, at the right time, by the right service preventing needs and service responses escalating via preventative approach. Children's Commissioning plays a key role in developing services along the continuum of need ensuring a graduated service response and appropriate governance frameworks. Resource allocation panels which meet statutory requirement are required to provide a timely response across services within the Local Authority/Public Health and via health services commissioned by NHS Barnsley Clinical Commissioning Group which are beyond the universal and targeted offer. It is essential that our services promote a strengths-based approach to encourage increased family and community resilience which we believe is key to experiencing good life outcomes and is an aspiration shared across all Barnsley public and voluntary sector organisations.

Barnsley's SEND Sufficiency Strategy was refreshed in March 2020 setting out its objectives to continue to address pressures within the SEND system placing a renewed focus on developing capacity locally to meet the needs of pupils with SEND. Under proposals contained within the SEND Placement and Sufficiency Strategy, creation of more education places for children and young people who have SEND within the local area over this year to date has resulted in a good range of provision to meet this year's placement needs and work has been done on:

- Progressing consultations for the schemes within the sufficiency strategy.
- Continuing to review and update previous and plan for future development, subject to approval on the revised revenue and capital costs.
- Continuing work with school place planning colleagues to explore long term plans and the viability of a new special school.
- Continuing to review SEND forecast data with business intelligence and use this to begin to formulate a follow-on sufficiency strategy.
- Holding further discussions with schools regarding LA resources in school settings and reviewing all available sites.
- Continuing discussions with schools on developing additional SEND capacity.
- Exploring further the need for the establishment of a new special school and how this can be taken forward through a cross council project as the scope involves implications across different Directorates.

Increasing local places to mitigate the number of children and young people having to go into independent and out of borough specialist placements has been a priority. Progress to date means that we have increased specialist places, as identified in the Sufficiency Strategy. However, it is important that efforts also continue, to ensure enough school places for pupils with SEND are available for subsequent years, given that the data tells us a rise in those coming into the system will continue.

To ensure provision is reflective of longer-term needs of the borough, as indicated in the Sufficiency Strategy, work has been done to project need over the next decade (to 2028 initially). This is enabling forecasting of the level of SEND we are expecting due to population growth and the anticipated annual rise in identified need (in line with national data). The projections are indicating that there will be a significant rise in children and young people with SEND and this will likely put continued pressure on the system.

The longer-term forecasting work analysing the projected growth in SEND up to 2028 has informed initial scoping for whether we need another special school in the local area to meet demand. Early indications are that a new special school would be required, which would require further exploration of the options available as opportunities to create special schools are limited due to the current structure, as prescribed by the DfE. The DfE sets out the process to apply to set up new schools in response to local authority specification.

Our recent Joint Commissioning Review tells us there are many links and connection across the domains and across the tiers, especially for highly complex cases. Step up and stepdown processes are well established in each domain but less so across the domains. For example, there appears to be some dis-connection across the domains in cases where the package of care has been developed using elements from several processes. There is a particular challenge around the alignment of timescales for EHCP, CSC and CCC assessment review which may impact allocated resource.

There is strong evidence that coordinated systems of case management and joint collaborative working that tailor approaches to the child and family's needs rather than trying to fit them into pre-existing structures is preferred by families and professionals. Numerous professionals from a wide range of disciplines become regularly involved with families where there is a child with complex health and care needs and further consideration is required into the options to imbed/support a 'complex case management' approach across the system and further develop personalisation.

The exploration of the relationship and inter-connectivity between panels revealed evidence that some panels are being 'overused', with referrals being made to problem solve complex cases. This is particularly the case for the Care, Education and Treatment Review CETR process and for the CRAG. Although this can be helpful and keep the system sighted on complex cases it can also cause delays and mean children stay on the agenda for some time while multi-agency assessment and plans are explored. This process should be frontload before escalation to CETR or CRAG. Panel TORS have been revised to address this and support pathways will be subject to ongoing continuous service improvement.

It is important to have a broad and shared understanding of children and young people's health and social care needs, not only to plan and inform service developments but also to evaluate impact and improve outcomes. There is a significant amount of data and intelligence in the systems that indicates current and future need for vulnerable children and young people, but the information is fragmented across many boards and partnerships and we aim to pull this together into a single and coherent document/approach.

Key priority actions established From CYP Joint Commissioning Review:

- Review Children's Health/Support Services and Pathways which include: Community nursing and community paediatric provision, therapies and LD support. Over-map LA and Public Health services to drive better service connectivity and mitigate against system gaps and system impact/ability to meet demand.
- To consider wider integration plans to inform the future direction of children's commissioning across the system. This will provide the opportunity to redefine current Joint Commissioning Arrangements and reconfirm Lead Commissioner arrangements. Updates to the Section 75 Agreements should be made accordingly.
- Continue to develop and implement health and resilience plans to reduce inequalities including developing Trauma Informed and Hidden Harm approaches.
- Continue to improve the quality of provision for young people with SEND as articulated within the SEND Continuous Improvement Plan.
- Continue to map and develop the pathway for Mental Health and Wellbeing including T4 and complex case management and ensure robust and timely therapeutic intervention for children who need local authority care. This needs to be a local and national approach with NHS England.
- To improve the Dynamic Risk Register, usage and service coordination to prevent case escalation to T4 CAMHS.
- To increase capacity for complex transforming care case management and capacity to deliver Care, Education and Treatment Reviews (CETRs) within children's services to ensure escalation to residential settings for CYP with LD or Autism is appropriate and provision cannot be provided within the community offer. Flexing and enabling commissioned services to meet need at this level.
- Further develop complex case management across the CYPT to ensure appropriate and timely delivery of specialist services. How we navigate the grey.
- To better connect children and young people's panel arrangements across education, health and care, aligning statutory functions and timescales to ensure resource is appropriately considered and recorded in EHCPs.
- To continue to develop the personalisation agenda in relation to health, education and short breaks. Outline level of complex support for families who meet CCC criteria.

- To ensure that all policies which relate to the joint commissioning of health, education and care align across adult and children's services to enable agreed provision to be delivered in line with a young adults EHCP.
- To consult on policy changes which impact CYPF.

Conclusion

As an all age partnership and via local commissioning practice we will need to continue to sustain and further develop our multi-agency arrangements. Equally, we will need to be outward looking and able to consider new ways of providing services delivered by a tenacious and skilled workforce that puts children, and families at the centre of services. This will ensure their voice is represented within coproduced local strategy and service delivery achieving, 'even better if' outcomes and sustaining public services. Strong governance structures exist within Children's Services and could be maximised further to establish a more inclusive integrated work programme to enable greater shared understanding of agendas and support. It is our collective ambition to go beyond a good OFSTED rating and deliver outstanding services as a strong CYP and all age Partnership.

A final word from our Children and Young People:

“Young people in Barnsley want to be heard, valued, and appreciated”.

“We want to feel safe and better supported to fulfil our career aims and life ambitions, being prepared for what life will throw at us.”

Related Documents:

- SEND CYP Plan
- SEND Strategy
- SEND Sufficiency Strategy
- SEND Improvement Plan
- SEND Engagement Strategy
- LAC Sufficiency Strategy
- NHS Long Term Plan
- Five Year Forward View for Mental Health
- PHE 'No Child left behind' / PHE Strategy 2020 – 25
- First 1000 days / Better Days
- The SEND Code of Practice 2015
- National Framework for Children and Young People's Continue Care
- NHS England Transforming Care Strategy

children young people families

BARNSLEY CYP TRUST