

16th September 2019**Agenda Item: 10****REPORT OF THE SERVICE DIRECTOR, EDUCATION, LEARNING AND
SKILLS AND THE SERVICE DIRECTOR, COMMISSIONING AND
RESOURCES****PROPOSAL TO RETURN THE HEALTH RELATED EDUCATION TEAM AND
THE PHYSICAL DISABILITY SUPPORT SERVICE TO CHILDREN AND
FAMILY SERVICES (INTEGRATED CHILDREN'S DISABILITY SERVICE)****Purpose of the Report**

1. This report seeks Committee agreement that the extension of the commissioned contract for the Physical Disability Support Service and Health Related Education Team with Fountaindale Special School is not renewed on 31st March 2020.
2. The report also seeks Committee approval to return the Physical Disability Support Service (PDSS) to Council teams with the proposal that the PDSS would be a directly managed service within the Integrated Children's Disability Service (ICDS) with effect from 1st April 2020. It is further proposed that the Health Related Education Team (HRET) would be directly managed within the Education Access and Partnership with effect from 1st April 2020.

Information**Physical Disability Support Service**

3. Since 2014, Fountaindale Special School has been commissioned to deliver the Council's HRET and PDSS services. The remit of the PDSS is to:
 - carry out assessments relating to the equipment needs of children and young people with physical disabilities attending Nottinghamshire early years provision and mainstream schools
 - provide advice to settings, where this is requested by the setting, on:
 - moving and handling assessments, including provision of a safe system of work for carers
 - specific moving and handling plans for children and young people; and
 - intimate care plans; and

- offer training on the implementation of this advice as a sold service.
4. Historically the PDSS not only undertook assessments but also provided the specialist equipment identified as being needed through those assessments. The ways in which the PDSS managed this process led to:
 - some items of equipment being purchased which were not the most cost-effective solution to an identified need
 - some items of equipment being stored in ways which resulted in the equipment becoming unusable
 - some items being purchased on behalf of the Local Authority (LA) when it would have been appropriate to have expected the school itself to have purchased the equipment.
 5. As a consequence, the responsibility for the management of equipment has since been rationalised by the LA utilising the existing contract with the Integrated Community Equipment Loan Service (ICELS), which complies with all regulations relating to equipment services. However, this has resulted in a fragmentary service in that assessments continue to be completed by the PDSS, whilst the budget for the equipment is overseen and managed by the LA.
 6. There has always been an inherent complexity arising from the LA commissioning Fountaindale School to deliver against the remit of the PDSS in that there are overlapping responsibilities around the provision of advice, assessment, equipment and monitoring and quality assurance which sit across the LA, Health, and schools/settings. Pressures on the High Needs budget, early years funding arrangements, and a Special Educational Needs & Disability (SEND) population presenting with an increased severity and complexity of need, has resulted in:
 - the need for the LA to have more direct influence on how the service is being delivered, including its ability to monitor and quality assure the service being provided
 - the need for greater clarification of the roles and responsibilities across the LA, health, and schools and early years settings, including the processes by which these responsibilities are enacted, and
 - the need to address unintended inequities in the funding of equipment, depending on whether the child or young person has a physical need, or cognitive/sensory need.

Health Related Education

7. [Section 100 of the Children and Families Act 2014](#) places a statutory duty on governing bodies of maintained schools, academies and pupil referral units to make arrangements at school to support pupils with medical conditions. A child's mental and physical health should be properly supported in school, so that the pupil can play a full and active role in school life, remain healthy and achieve their academic potential.

8. There are a wide range of circumstances where a child or young person has a physical or mental health need but will receive suitable education that meets their needs without the intervention of the LA, for example:
 - where the child can still attend school with some support
 - where the school has made arrangements to deliver suitable education outside of school for the child; or
 - where arrangements have been made for the child to be educated in a hospital by an on-site hospital school.
9. Nottinghamshire County Council makes funding available through Additional Family Needs, High Level Needs and Partnership funding processes, as well as support and advice through the Schools and Families Specialist Service and Social, Emotional and Mental Health Services to support schools in meeting this requirement.
10. Schools do not have to wait for a formal diagnosis by a medical practitioner before providing support to pupils. If the condition is unclear, the head teacher has to make a judgement about what support to provide to the pupil, based on medical evidence available at the time that the school is made aware of an issue. In exercising this judgement, the head teacher must not ignore the views of the child or their parents, or ignore medical evidence or opinion. However, the head teacher can challenge the evidence if appropriate. Pupils should not be penalised if their absence from school is related to their medical condition.
11. The LA is not expected to take a lead role in co-ordinating these arrangements unless:
 - it has reason to think that the education being provided to the child is not suitable or
 - while otherwise suitable, is not full-time or for the number of hours the child could benefit from, without adversely affecting their health, or if the pupil's absence is expected to be for more than 15 days.
12. The Local Authority is then under a duty to ensure that the child receives as normal an education as possible while he or she is absent. The Local Authority must start arranging the education from the first day that the school receives notice of the length of absence. A range of options could include home teaching, a hospital school or teaching service, or a combination of those options.
13. In order to fulfil these duties the LA established the Health Related Education Team (HRET), which was originally based within the LA's Pupil Referral Unit, and which since 2014 has been based at Fountaindale Special School, under the direct oversight of the Head teacher. Members should note that since 2014, all of Nottinghamshire's Pupil Referral Units have closed.
14. In Nottinghamshire the HRET provides an initial period of 12 weeks home education or tuition at the HRET base on the Fountaindale School site. This allows schools the time to identify and put in place appropriate long-term pathways and, where needed, to secure the funding to do so. There are two main categories of pupils in receipt of provision:

- those with a physical or medical condition which prevents them from attending school. This could be due to post-operative recovery or life-limiting conditions (such as cancer), or an illness lasting more than 15 days
 - those experiencing severe anxiety about attending school. This might include those with a psychological, neurological or mental health issue.
15. In addition, children of school age admitted to King's Mill Hospital receive daily provision if their stay is expected to be longer than three days. Following discharge provision continues at home, where appropriate. Since January 2017 the number of children supported at Bassetlaw Hospital has decreased due to the fact that the hospital has closed its children's ward to overnight patients.
16. The LA is committed to delivering its SEND services increasingly through a locality model. Whilst it is acknowledged that the HRET's two locality coordinators are embedded in this way of working, the wider HRET staff are less well integrated into locality working. With increased numbers of children and young people accessing HRET, presenting with an increased severity and complexity of need, together with pressures on the High Needs budget, there is a need for:
- the LA to have more direct influence on how the service is being delivered, including its ability to monitor and quality assure the service being provided within localities; and
 - greater clarification of the roles and responsibilities across the LA, health and schools, including the processes by which these responsibilities are enacted.
17. This would enable the service to be delivered in a coordinated, efficient, and cost-effective way, and thereby for the LA to discharge its statutory duties in respect of the following:
- have a named officer responsible for the education of children with additional health needs, and parents should know who that person is
 - have a written, publicly accessible policy statement on their arrangements to comply with their legal duty towards children with additional health needs. The policy should make links with related services in the area – for example, Special Educational Needs and Disability Services (SEND), Child and Adolescent Mental Health Services (CAMHS), Education Welfare/Attendance Improvement Services, educational psychologists, and, where relevant, school nurses
 - review the provision offered regularly to ensure that it continues to be appropriate for the child and that it is providing suitable education
 - have clear policies on the provision of education for children and young people under and over compulsory school age.

Other Options Considered

18. The option to extend the commissioned contract with Fountaindale Special School beyond 31st March 2020 has been considered in relation to both PDSS and HRET services.

Reason/s for Recommendation/s

19. The rationale for the proposal that the PDSS service should become a directly managed service from 1st April 2020 is that it would allow the LA to have more direct influence on how the service is being delivered, monitored and quality assured. It would allow for greater clarification of the roles and responsibilities of PDSS and their inter-relationship with other parts of the LA, as well as health, schools and early years settings. It would also enable unintended inequities in the funding of equipment, depending on whether the child or young person has a physical need or cognitive/sensory need to be addressed. As the staff in the PDSS are already employed directly by the LA, there would be no TUPE considerations.
20. It is proposed that the HRET becomes a service directly managed by the LA from 1st April 2020 because it would enable the work of the team to become more embedded in locality ways of working. The LA would have more direct influence on how the service was being delivered, monitored and quality assured within and across localities. There would be greater clarification of the roles and responsibilities across the LA, health and schools, including the processes by which these responsibilities are enacted. As the staff in the HRET are already employed directly by the LA, there would be no TUPE considerations.

Statutory and Policy Implications

21. This report has been compiled after consideration of implications in respect of crime and disorder, data protection and information governance, finance, human resources, human rights, the NHS Constitution (public health services), the public sector equality duty, safeguarding of children and adults at risk, service users, smarter working, sustainability and the environment and where such implications are material they are described below. Appropriate consultation has been undertaken and advice sought on these issues as required.

Financial Implications

22. Both PDSS and HRET functions, staffing and work base costs will continue to be funded through the High Needs Block allocation.

Human Resources Implications

23. Nottinghamshire HR Service will oversee the transfer of the line management of the staff. TUPE will not apply as the staff are already employed by the Council and their terms and conditions of employment will not change.

RECOMMENDATION/S

That the Committee agrees that:

- 1) the commissioned Physical Disability Support Service and Health Related Education Team contract which ends on 31st March 2020 is not renewed
- 2) the Physical Disability Support Service becomes a directly managed service within the Integrated Children's Disability Service with effect from 1st April 2020.

- 3) the Health Related Education Team becomes a directly managed service within Education Access and Partnership with effect from 1st April 2020.

Marion Clay
Service Director, Education, Learning
and Skills

Laurence Jones
Service Director, Commissioning and
Resources

For any enquiries about this report please contact:

Karen Hughman
Group Manager, Strategic Planning and Admissions
T: 0115 9772572
E: karen.hughman@nottsc.gov.uk

Jill Norman
Group Manager, Integrated Children's Disability Service
T: 0115 9932566
E: jill.norman@nottsc.gov.uk

Constitutional Comments (EP 02/09/19)

24. The recommendations fall within the remit of the Children's and Young People's Committee by virtue of its terms of reference.

Financial Comments (SAS 03/09/19)

25. The budget for the current PDSS & HRET service contracts is £1.136m and funded from the High Needs Block of the Dedicated Schools Grant. Further work is needed to assess the full financial implications of bringing the services back in house including the identification of any implementation costs e.g. new ICT devices. If there are any costs over and above the allocated budget provision these will have to be met from the High Needs Block.

HR Comments (BC 03/09/19)

26. Appropriate consultation will occur with affected staff and the recognised trade unions to ensure a smooth transition to the changed line management arrangements.

Background Papers and Published Documents

Except for previously published documents, which will be available elsewhere, the documents listed here will be available for inspection in accordance with Section 100D of the Local Government Act 1972.

None.

Electoral Division(s) and Member(s) Affected

All.

C1285