



SEND FUNDING PILOT

Piloting a new way of allocating funding.

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Version control

Date	Details	Updated by
20.01.23	Funding allocation pilot	Hannah Spencer
20.08.23	Funding pilot with options appraisal	Rachael Williams and Hannah Spencer

The context and intended outcomes

Torbay use a system of Element 3 called an ALF (Activity Led Funding) which is historical and in need review. The funding system currently used doesn't calculate group intervention and works on an individual basis. Schools have fed back that they do not feel the current allocation is consistent or predictable.

Funding allocation for EHCP's also 'rolls over' and isn't reviewed until Phase Transfer. This means that even if outcomes are met or increase, funding stays the same.

The objectives of the pilot are;

- To try and find a funding formula that supports ensuring the right Element 3 is attributed to the EHCP, the first time and that it is reviewed annually as part of the Annual Review process.
- To ensure that we are more equitable and consistent in decision making.

- If the new funding matrix will be beneficial to both decision making and best use of resources.
- If there are changes that need to be made to the Annual Review document to support making funding decisions

There will be no changes to funding as a result of the pilot.

A new Torbay SEND matrix has been developed by the SEND monitoring team with support from our SLIP Islington. The matrix is simple to use and clear for parents/carers and schools/colleges, when moderating, different professionals have been accurate in their estimations for EHCP's.

Who is part of the pilot?

- 4 schools with different base funding
- 1 Post 16 provider
- SEND monitoring team
- Senior Officer
- EHCP coordinator
- Educational Psychologist
- SEND Family voice

Pilot 1

Starting in Feb 23.

Barton school have been identified due to a large cohort of EHCP's, a more generous base funding and their recent request to work differently with SEND services.

A meeting will be set up to look at the EHCP's for their cohort of children and look at their current Element 3, the funds they receive and compare to the new matrix for funding.

The group will look at their current EHCP's, their Annual Reviews and the provision in situ.

Collectively we will look at the Annual Reviews to ensure that the right information is included to make budget allocations.

Pilot 2

Starting in March 23.

Galmpton school have been identified due to a low cohort of EHCP's, a less generous base funding.

A meeting will be set up to look at the EHCP's for their cohort of children and look at their current Element 3, the funds they receive and compare to the new matrix for funding.

The group will look at their current EHCP's, their Annual Reviews and the provision in situ.

Collectively we will look at the Annual Reviews to ensure that the right information is included to make budget allocations.

Pilot 3

Starting in March 23.

St Cuthbert Mayne school have been identified due to a low cohort of EHCP's and a generous base funding.

A meeting will be set up to look at the EHCP's for their cohort of children and look at their current Element 3, the funds they receive and compare to the new matrix for funding.

The group will look at their current EHCP's, their Annual Reviews and the provision in situ.

Collectively we will look at the Annual Reviews to ensure that the right information is included to make budget allocations.

Pilot 4

Starting in March 23.

Whiterock school have been identified due to a high cohort of EHCP's, a middle ground base funding.

A meeting will be set up to look at the EHCP's for their cohort of children and look at their current Element 3, the funds they receive and compare to the new matrix for funding.

The group will look at their current EHCP's, their Annual Reviews and the provision in situ.

Collectively we will look at the Annual Reviews to ensure that the right information is included to make budget allocations.

Pilot 5

Starting in April 23.

South Devon college currently have a funding system in which they determine the high, medium or low funding allocation. It is noted that this is not in line with other systems.

SDC have been identified due to a large cohort of EHCP's, a query on allocated ESFA/base funding and LA recent request to work differently with SEND services.

A meeting will be set up to look at the EHCP's for their cohort of children and look at their current Element 3, the funds they receive and compare to the new matrix for funding.

The group will look at their current EHCP's, their Annual Reviews and the provision in situ.

Collectively we will look at the Annual Reviews to ensure that the right information is included to make budget allocations.

The outcomes

Primary

Outcomes from Pilot 1 - Barton	Outcomes from Pilot 2 - Galmpton	Outcomes from Pilot 3 – Whiterock
Plus £801 on 13 children	Saving of £4949 on 6 children	Saving of £18,697 per annum on 7 children
<p>For ASC young people. Those with SLCN at a high level will have significant impact on weightings across the system, eg Will have needs in Cognition and learning and in semh – if they score a 4 in SLCN.</p> <p>SPLD/Global?</p> <p>If you put something in cognitive ability (4) in both boxes?</p> <p>Is this the process for access to Mayfield/ Combe Pafford/ERP's – how do we link?</p> <p>Lag on totalling. Some children need cognition support for attention and concentration. When you get to 3's for communication and interaction they don't work</p>	<p>Medical needs not being funded would impact significantly,</p> <p>EHCP's outdated</p> <p>Two children moving to cease and don't need the funding due to high quality interventions</p>	<p>There is a cultural thought of needing an EHCP, parent wont agree to concede despite excellent graduated response</p> <p>Expectation of having an adult with them all the time for some families</p> <p>Education are funding health needs in few plan</p> <p>Not funded for the adult time written in the plan</p> <p>Children have made significant progress at Whiterock through the graduated response</p> <p>EHCP's are out of date and funding not amended.</p> <p>Not auditory processing Autistic spikey cognitive profile</p>

<p>without cognition and learning.</p> <p>Descriptors for MLD - percentiles need looking at What happens below Year 1?</p> <p>EHCP's aren't as up to date as they should be which makes it hard to score</p> <p>Not all social communication is autism</p> <p>EHCP didn't have subheadings of social skills in SLCN for xxx</p> <p>Formula does note SLCN is a complex need</p> <p>Scoring a 4 on £1,000 for sensory and physical? PD Coming from education?</p> <p>Physical disability – nearly no funding?</p> <p>Link learning behaviour – attention and concentration (non engagement/distractibility)</p> <p>Weighting on 2 for sensory – increases the overall funding significantly?</p> <p>Using the level descriptors in the Annual Review paperwork and linking them</p> <p>Useful to understand weighting un subsection</p>		<p>Ability to apply the learning not in there</p> <p>Parity across the schools, felt that other schools were highly funded.</p>
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Outcomes from Pilot 3 – STCM

Saving of £24,791 per annum on 9 children

Areas of sensory and physical not consistent with funding.
Some plans with AR which indicate significant changes
Eating disorder not factored in Physical and sensory needs.
Epilepsy – where do they sit – is that health?
Eating disorder – need supervision but not provided in the EHCP.
Requires support with personal care – provision was life skills – where does that sit?
Where do sensory sensitives sit?
Learning behaviour should be under cognition and learning – the need is executive function skills.
Some receptive but not expressive – difficult to score in speech and language .
Weighting of SALT. Doesn't pick up nuances of language – increase weighting of language?
One child – no SEMH in her EHCP assessment last year, now PEXed!?
STCM give over and above provision identified
Needs in the plan which don't require provision (allergy)
Learning behaviour – should be linked to attention and concentration – (Executive function – would be for EP, working memory, retaining info)
Plan not representative of the child in multiple occasions, including new plans.
Danger and risk should be in social and emotional needs rather than in Physical and sensory.
No overarching needs associated – where there is not a diagnosed info.
Health information is old – not updated
EP information not available on some young people
Good use of baseline data from SENCO.
SEMH needs change regularly but plans don't reflect that.

Outcomes from Pilot 5 -SDC

Saving £13,310 for 10 children

PFA for personal care
Post 16 – is there a 3 day offer? Overall hours, funded lower rate than schools. Full time for them.
Funding formula breakdown of weighting – LW
Social communication scores 2 points.
Amended as poor in description of need for SLCN lacking to make a s
Specialist – AR's are nice but don't detail need
Social behaviour – needs to include vulnerability for Post 16
Significantly out of date EHCP for one young person with a DOLS
Epilepsy on the funding matrix – in Islington would be a 0 – mild disability wouldn't school, may needs PRN.
Chronic – fatigue?
Joint funding – Section G/ Section F.
Need to distinguish between often and frequent.

For ASC – can score in both social communication and social behaviour. Agreed in both

Need to add word prompting/ direction and then adult support in personal

Social communication 3 is based on provision

SDC reflection – mismatch between whats in the plan and the needs of the young person, robust process. Needs to be based on a strong evidence base.

Need not on provision, some cases 2:1 isnt reflected in the support.

Makes the process accuracy of the AR and EHCP, hard to make changes to funding, needs to be written to the language and evidenced. Talked about time and uncertainty of the reports concerns.

Whats the mechanism for exceptions?

Overarching themes:

- EHCP's are too outdated to effectively make judgements on the Section F required, there were significant differences between the EHCP document and the current presentation of the child/young person
- Islington model saved Torbay funding on Element 3 but it is without its yearly uplift
- The tool is useful but there are some adjustments required
- Some children' EHCP'S could cease
- There is significant cost differential – Torbay are equally over funding and underfunding pupils
- Doing funding alongside schools means the LA were less objective
- There is too often little health or social care update
- There were times were EP input was required but not available
- Annual Reviews are not specific enough
- HNB is funding provision that could be considered health provision (ie SALT, CBT, supervision for physical needs)
- The Islington model does not include provision which does not educate or train
- PFA was not factored into the matrix and needs amending (this has been completed)
- There may need to be exceptions

Risks	Benefits
School budgets (see option appraisal)	Fairer system
Out of date EHCP's will mean funding doesn't equate to what needs to be delivered	Improved Annual Reviews

	Element 3 will be distributed and aligned to higher needs children

Next steps

The outcomes from the Pilots with the four schools and college will be shared with SEND strategic board and Schools Forum.

There will then be a period of consultation with parents and families if the roll out is to proceed, we will do the consultation through the Family Hubs website and the SEND Family Voice website for a period of three weeks.

In future it would be beneficial to link to how we support SEP applications with the new funding formula.

A review of the Annual Review and EHCP documents which will be co-designed with parents and carers and professionals, the launch of both documents will be linked to the funding formula and launched at the beginning of January 2024.

This document can be made available in other languages and formats.
For more information please contact ****insert your team email or phone no
here****
