

High Needs Block – Planning Ahead

Prudent forecasting and early action

- High Needs has not yet to overspent (nor has done for past 8 years)... and might not this year
- Early forecasting carried out and action has been taken at an early stage
- £800k+ taken out in 2015-16
- Significant growth in demand at present
- Alarm caused by flagging up 'worst case' scenario
- Absolutely aim to re-balance HNB to be self-sustaining
- Set out short term... and strategic

Analysing the issue – what we know and don't know

- Growth in mainstream high needs top-ups, mainly attached to EHCPs
- Growth in hospital school places
- Growth in special school places – SEMH places might be out of step
- Growth in independent special schools
- Greater pressure on PRUs incl. incr. PEx

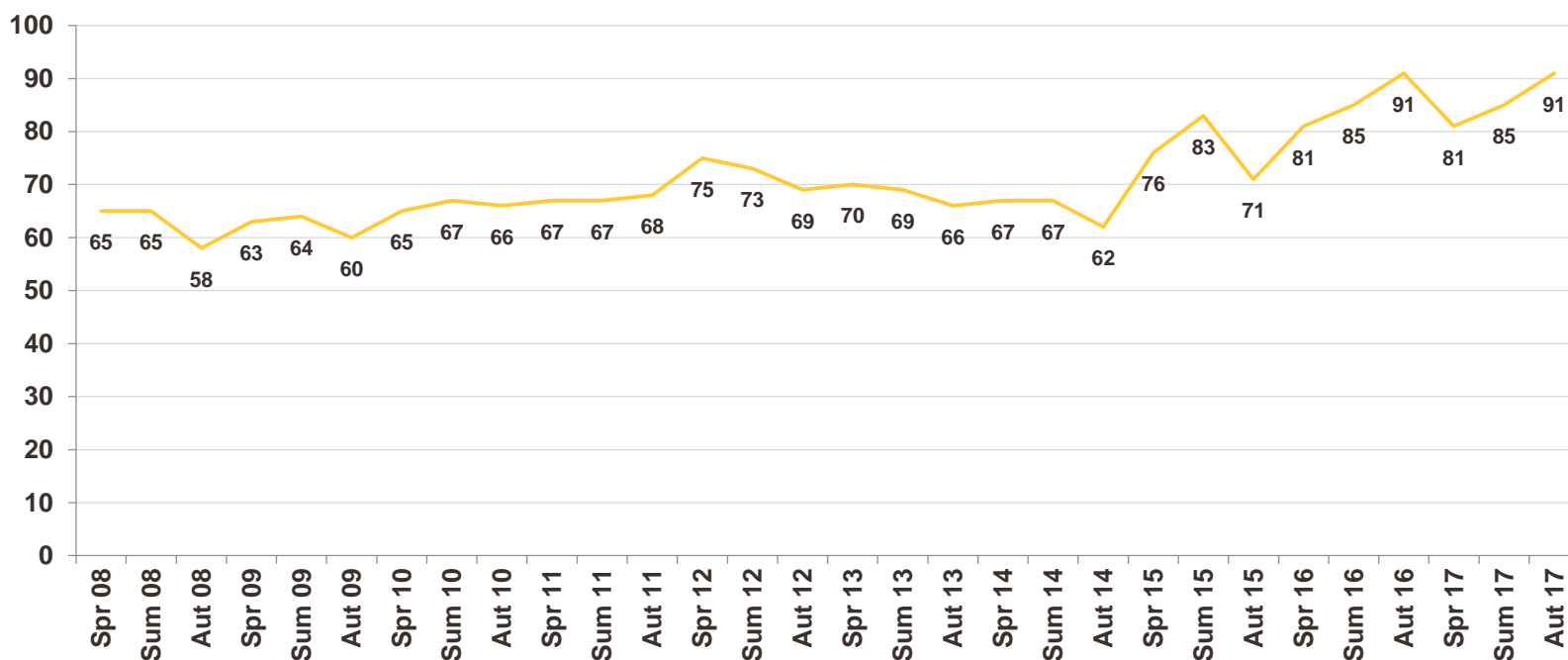
Lots of evidence that we are experiencing very similar patterns of growth to national picture

Additional Unfunded Pressures

- Post-16 Extension of EHCPs to age 25
- Hospital School duties
- Education for Tier 4 mental health in-patients
- Growth in EHC Plans
- Growth in Tribunals

Evidence of demand

Number of Pupils on Brookfield School Roll
(Data Source: School Census)



Evidence of demand

Over past three years, Hospital and Home Teaching Team

Numbers Rise in numbers from 18 to 46 learners
80% emotional and mental health presentation

All agreed as not being able to attend school by
CAMHS

Cost of providing the service £129k to nearly £273 k

Ensuring point of entry to system is strong

- Added H/T representative
- Poorly completed applications returned – insufficient evidence
- Set out clearly what schools are expected to have done for each type of need
- Graduated response must be evident
- Delay in re-applying
- Additional layers of checking, e.g. Principal EP
- Re-working the descriptors in the matrix (summer)

Central Services

- £188k savings over past 5 years – 15%
- No cost-of-living increase – further 15-20%
- Vacancy savings always returned at year end
- Services free at point of delivery – what will be the buy-back? Unseen children
- Can only be taken once
- Keeping specialist staff
- Lag time in making changes – redundancy

Happy to review but needs to be informed debate

Strategic Approach

- The whole system is interrelated
- Collective responsibility
(Schools/settings/LA/Partners)
- Need to re-connect with a fully inclusive ethos – *‘not turn our back on any child’ H’fdshire Guiding Principles*
- Can we develop a system of partnerships to take responsibility?
- Investment in training/skills/coaching
- Important to understand consequences of actions and not to create perverse incentive

Cost of High Needs Services

