






Support and aspiration: A new approach to special educational needs

Pathfinder Application Form

*This completed application form must be sent to
SEND.contracts@education.gsi.gov.uk by Midday, 15 August 2011*

I – Applicant details

Name(s) of local authority/ authorities Cornwall The Isles of Scilly	Signature of Chief Executive(s) LA(s)  
Cornwall The Isles of Scilly	Signature of Director(s) of Children's Services  
Name(s) of PCT(s) Cornwall and Isles of Scilly Primary Care Trust	Signature Chief Executive Officer(s) of PCT Cluster (s) 

II – Background information

Please provide figures below for each LA area in the pathfinder

Number of children and young people (aged 0 to 19): Cornwall - 116,900 Isles of Scilly - 440	% and number of children and young people with Statements of SEN As at 28/06/11: Cornwall - 2,181 (1.9%) Isles of Scilly - 7 (1.8%)
% and number of Looked After Children Cornwall - 472 (0.4%)	% and number of Looked After Children placed out of area Cornwall - 52 (11% of total number of

Isles of Scilly - 0	looked after children in Cornwall) Isles of Scilly – 0
% and number of Looked After Children placed in your area 506 (89% of total number of looked after children in Cornwall)	% and number of Children in Need Cornwall - In the 2011 CIN census (financial year 2010/11): 6,868 (5.9%) Isles of Scilly – 13 (2.8%)
Number of Tribunal cases and % successful Cornwall - 01.04.10 to 31.03.11: 20 Tribunals registered; <ul style="list-style-type: none"> • 12 have been mediated and settled before the hearing • 3 are still in progress Therefore of the 5 that have gone to a hearing 3 were found in favour of the parents and 2 in favour of the LA (60% successful)	% SEN statements completed in 26 weeks Cornwall: NI 103a (excluding exceptions): 100.0% NI 103a (including exceptions): 97.9% Isles of Scilly: NI 103a (excluding exceptions): 100.0% NI 103a (including exceptions): 100%
Please state whether this pathfinder is an NHS early implementer NO	Please state whether any partner in this pathfinder is already engaged in: a) piloting personal health budgets NO b) Piloting DfE Individual Budgets NO

Please describe the socio-economic make-up of your area (max 100 words)

Cornwall and the Isles of Scilly has a population of 501,267 with 27% of the population living in the strategic urban centres, 29% live in larger villages (over 3,000 in population), and 44% live elsewhere.

During 2010, unemployment levels in Cornwall jumped above the national levels for the first time in 8 years with very high levels of self employment and 10% of the population live in the most deprived areas in England.

Distance and more particularly the high cost of travel mean that the Isles of Scilly population is required to be self-sufficient for all day to day services.

III- Basic Information (see section x)

Describe how this pathfinder demonstrates the basics. Text must include all the headings listed:

Partnership arrangements:

NHS Cornwall and Isles of Scilly is the primary care trust for both Local Authorities. There is a very strong commitment to develop a stronger framework and support for

continuing healthcare from childhood to being an adult. An Associate Director of Community Health sits on the Children Schools and Families Directorate Leadership Team delivering a commissioning strategy for 2012/13 >. The Consultant Community Paediatrician from the Royal Cornwall Hospital Trust attends LA's SEN advisory panel.

Early Support (ES) in Cornwall is a local authority and health funded programme which has been rolling out in Cornwall since September 2007. ES works closely with the full range of children's health, education and social care teams for children and young people aged **0-19 years**. The TAMHS project in Cornwall is a further example.

Formed since 2005, the Parent Carer Council (PCC) is an umbrella organisation for disabled children working with all service providers.

Work with a range of front line services:

We intend to test and develop green paper proposals for front line services. The PCT, LA, Health providers, schools and the voluntary sector partners will develop this work. This builds on the very considerable investment that has been made to ensure the universal adoption of the common assessment framework to get a complete picture of a child's additional needs at an early stage.

A team around a child (TAC) meeting is convened whenever a common assessment identifies a child / young person as vulnerable and would benefit from the support of additional services. A TAC meeting is also convened for children whose families have requested 'Early Support' as it provides a vehicle for the co-ordination of the range of services which may be supporting disabled children and their families.

This investment links to the dissemination of information through Extended Leadership Team briefings which includes multi-agency service representation.

Role of VCS sector:

A short break provider network forum has been established which includes approximately 40 statutory and independent sector providers of short break services. Parents have participated in all stages of the commissioning process. Exciting collaborative partnerships have developed, for example, Barnardos working with the Eden Project to deliver an inclusive "Muddy Shorts" service to 140 disabled children and 230 non-disabled children.

Building local capacity for Personalisation in Cornwall involves 'The Foundation for People with Learning Disabilities' which has been leading on the 'Taking Person Centred Planning Forward' in Cornwall since December 2006. They also began the development and implementation of 'Get A Plan' in Cornwall in February 2008 with support from Adult Care and Support and Cornwall People First.

Early Support in Cornwall has strong links with voluntary agencies such as Face to Face and the Parent Carer Council. Their expertise provides independent advice to the agencies and families regarding support.

Engagement of parents:

Cornwall was a pilot authority for the Disabled Access to Child Care Project known as 'DCATCH' and in April 2010 hosted the National Learning Conference at the Eden Project, where families from all over the country attended to share learning from each

of the pilot authorities.

Cornwall has built on a solid foundation of consultation with disabled children, young people and parents and carers; for example, during 2010/11 extensive consultation meetings happened jointly with parents and professionals on a range of topics. Traditionally Cornwall's annual Aiming High consultation events are held in October. Last year there were three events organised. In addition there was an annual transition event; last year's event was held on 18th September 2010 at Truro College. The Aiming Higher conference this year will be on 6th October 2011, entitled, "*The Big Conversation*", with smaller transition events being organised through school sites.

Engagement of children and young people:

From January 2011 children and young people have attended the Children's Leadership Group (CLG) meetings and have a planned agenda item. Such engagement is coordinated by the Voice, Influence and Participation (VIP) group which consists of youth 'reps' from a wide range of organisations and services inclusive of vulnerable groups.

The Barnardo's Advocacy Service is commissioned specifically to deliver an advocacy support service for Looked After Children and disabled children.

On the 12th February 2011 Cornwall held a one-off Aiming High celebration event at the Eden Project with over 800 disabled children and young people, to say "thank you" for the contribution that people had made in Cornwall to the success of Aiming High. Approximately 3,000 people attended the day in total. *Together for Disabled Children* and the *Council for Disabled Children* stated that the celebration event in Cornwall was one of the best in the country (see attachment).

Capacity to test and innovate:

Of significant importance is the level of positive commitment of the NHS Cornwall and Isles of Scilly to partnership working. The PCT continues to attract national recognition for the innovative ways in improving health locally. It also involved in a number of influential projects and pilots.

One of the most pressing issues is to maintain a focus on progression for all children. Existing data is widely valued as it provides comprehensive evidence and analysis.

The pathfinder developments will push existing boundaries in terms of data sharing particularly in relation to the breadth of multiagency services. It is worth noting that all schools have signed up to share data (including academies). We firmly believe that using such evidence opens dialogue about how we can continue to do things better and show impact across agencies and providers. We are well placed to 'test and innovate' new models.

Project plans:

Three projects are planned:

1) Raising the profile of Early Support, particularly in identified areas where Early Support is underdeveloped (NB: Early Support is non-invasive and is parent-led across the 0-19 age range).

2) Involving a small number of extended families where a family member has an identified SEND **and** referrals are indicating that a new/additional family member may require a multiagency assessment. The project would focus on devising a single assessment process utilising prior parent/family knowledge to help enhance the arrangements combined with building a brokerage model related to Personal Budgets.

3) Targeting Y9 transition planning to span the 14 to 25 age range. This project places young people at the heart of decision making linked to the construction of an Education, Health and Care Plan.

We are keen to establish multi-disciplinary teams to jointly assess needs and to plan and deliver supports on a collaborative basis.

Evidence base.

We will be looking at the collection of the following evidence:

- Parental/family CYP satisfaction levels are recorded;
 - Confidence in expressing views
 - Such views are recognised
 - Shared understanding of the issues
 - Where terms are used they are clearly expressed and consistently applied
 - Reductions in the number of meetings
 - Voice of the child/young person is captured
 - Outcomes are clear, unambiguous and involve the CYP in their design
 - Challenges of resource allocations are resolved locally
 - Satisfaction with the services recorded
 - Choice and purchase power are recognised
 - VfM is more evident
 - Services can cite benefits in relation to securing a single assessment process; 'Education, Health and Care Plan' and greater engagement of the voluntary sector
 - All can evidence a move to resolve differences.

(max 150 words per heading)

IV – Core testing areas (see section x)

Describe how this pathfinder will test key areas of reform. Text must include reference to all the headings listed:

Impact on children and young people of all ages (0-25);

Impact will be:

- Better continuity and progression
- Improved data and information sharing
- Greater personalisation
- Improved outcomes
- Increased rates of parental satisfaction

Central to this approach will be a focus on consultation with children and young people together with respective families to establish meaningful outcomes.

We are struck by the national evidence set out in the Progression materials (2010-11) where children and young people are working below national levels of expectation. Along with our school leaders we want to widen the use of national and local evidences to share with and encourage children and young people to set aspirational yet achievable targets. This focus, we believe, underpins the three projects encompassed in this bid. In practice we expect this would be shown as clear **practical** targets which will be informed and prioritised by health, care and educational considerations which are relevant and pertinent to the age of the child/young person. The link we are seeking to make here is that the support planned with the family, child/young person directly relate to these targets and are used by front line services to inform, for example, the teaching and learning programmes and/or health related service inputs required to effect change.

We aim to devise and test on a more personalised basis a new birth through to 25 assessment methodology and thereby contribute to the establishment of a single plan. We believe, in keeping with the Green Paper, that the SEN process has become unwieldy and has lost its meaning. We are keen to explore how, through a more localised arrangement, impact and focus remains on and includes the child and respective families

Projects 1, 2 & 3 provide sufficient scope to personalise the arrangements as we are looking to divest both resource and responsibilities using a localisation agenda. We acknowledge that SEN statutory arrangements apply and though our intended projects related to this Pathfinder bid we are confident of pinpointing how an inclusive and streamlined assessment process, which encompasses statutory and regulatory duties, can be achieved. We have learnt lessons from an earlier initiative (Joint Assessment Process) which will inform this development.

In addition to the three projects outlined above we are exploring initially with schools the opportunities of working within and across a defined 'area' to localise assessment and provision for children and young people with special educational needs and their families.

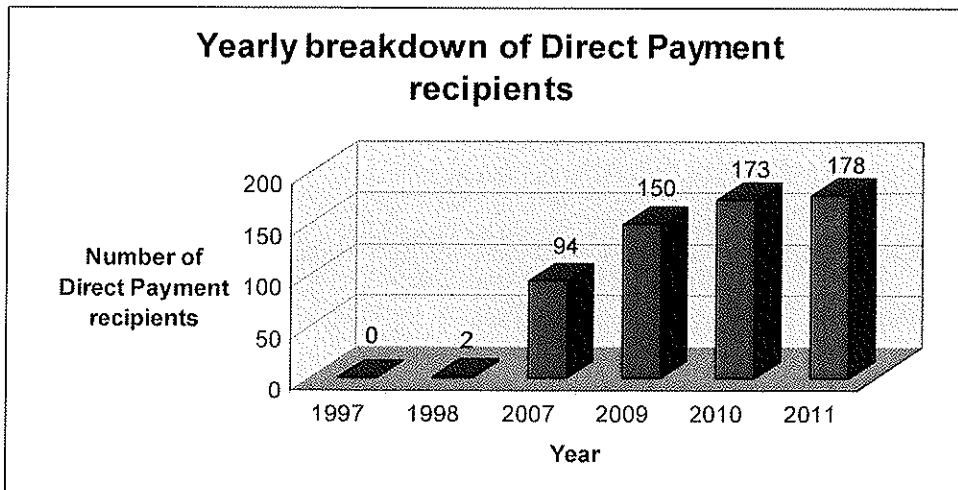
person-centred planning approach:

We have good and proven experience in relation to person-centred planning. These require an unrelenting focus on:

- 1) Re-calibrating our vision, approach and practice to place the child/young person and their family at the centre of what we are doing and why we are doing it
- 2) A drive to sharpen and improve outcomes for children and young people across the full extent of well being indicators **to include** personalised attainment and progression targets.

The outcome being an expansion of the personalisation agenda including an improved direct payment infrastructure, the introduction of a direct payments 'decision making tool' to improve transparency around decision making in terms of allocation of resources, and a 58% increase in direct payments for families providing a platform for the development and introduction of individual budgets. As a result of the increase in direct payments we have been able to negotiate a decrease in the cost of employer liability insurance by stimulating competition between insurance providers, thereby improving value for money for families. The table below demonstrates the increase in direct payments for disabled young people and families

over the last five years in Cornwall.



More information is available on our proposal for the development of personal budgets.

In addition we intend to focus the three projects (noted above) within a locality pilot and, where applicable in Project 3, we are keen to include person-centred planning to include young people currently placed out of County; the intention being to improve arrangements and strengthen commissioning of services and provisions accordingly.

We want to widen the use of national and local evidences to share with and encourage children and young people to set aspirational yet achievable targets (see later section).

A number of strengths in terms of LA and PCT planned coordination have been identified relating to the Foundation for People with Learning Disabilities involvement in Cornwall. This includes developed and tested curriculums which provide the necessary skills and knowledge development related to person-centred approaches. A targeted outcome has been to support the development of 'best practice' in transition by working with local schools, young people and their families on developing positive futures through person centred approaches and personal budgets. In addition a 'Learning for Leadership Development programme for Adults' and the 'Learning 4 Leadership at Transition Development programme' have both been run in Cornwall with a new course due to begin in October 2011 for young people in Transition.

links between planning and assessment:

One of the main reasons for submitting this bid is to connect a third element of **resource/intervention** alongside **planning** and **assessment**.

We are have noted 'The Bew Report on KS2 testing' which states in relation to SEN the following:

*'We are aware that ensuring the progress and attainment of pupils with Special Educational Needs is maximised is an extremely complex challenge, The report goes on;
'We do not believe this challenge can be tackled effectively through the*

statutory assessment system in isolation.'

We agree, but given the amount of time spent on the process, we propose that within both projects 2 & 3 we will be able to focus specifically on how, through the statutory assessment process, we can and should (in our view) concentrate on aligning this work. A very considerable amount of time and energy is spent on statutory arrangements with little direct correlation to improvements in outcomes (Ofsted 2010). We have reviewed how much of the existing SEN statutory assessment process has focused on Special Need yet largely failed to pick up on the educational aspect which we believe most schools and settings actually concentrate on.

If successful in this bid we intend to use the Pathfinder grant for the purposes of reforming systems and processes. We currently estimate that 15% of the Grant would be spent on CPD to support front line staff and approximately 15% would be directly linked with and through the VCS sector. The remainder will be targeted to unpick exactly where and at what point within the assessment, communication and related timescales does actual divergence occur due to technical, regulatory and or other constraints apply. Much of this focus will be concentrated on aligning timescales to identify wherever possible how a single assessment could be functionally achieved. Our aim will be to make recommendations to shorten timescales involved.

We are keen to explore success of multi-disciplinary working particularly for children <2y which focuses on diagnosis and intervention/support/treatment. As Multi-Agency Identification & Support in Early Years (MAISEY) arrangements are coordinated, an outstanding issue is one where a child with considerable and long term medical and 'expected' educational needs is identified and at what point does future educational provision/placement start to enter the discussions. This also links to the deployment of Health colleagues to attend TAC meetings given numbers and locations. The benefits are clear so this relates to exploring more fully the practicalities involved in 'streamlining' assessment arrangements.

plans for more transparency about what is provided:

We have emerging evidence of successful practice in relation to the trading of SEND&I services. This revolves around the publication of a Services Directory in Cornwall which is widely distributed. This is a new venture for both LA services and schools. It is already showing how we can move away from simply recording and reporting when and how a service has been delivered to a much more ambitious plan to secure the link as to whether the support/intervention was effective in terms of its impact.

Very recently we have seen that 98% of parents and carers praise the quality of Children's Centres in Cornwall. We consider that such evaluations reinforce how effective our combined working practices are.

We are interested in using the lessons we are learning through this approach and in relation to this Pathfinder bid to define, cost, commission, develop with others and deploy services as part of a new transparent approach. The crucial links are:

- Targets are truly personalised and have an unrelenting focus on outcomes
- Targets include wellbeing, attainment and progression
- Attention is directed to pin-point (or as sharply as we can) what is actually required to enable the child/young person to secure necessary success
- We consider that this focus is also more likely to evolve a 'common' language

which 'we' can all use. Targets which are centred on the child/young person will, by their very design, be more likely to secure buy-in.

- Working with parents/cares alongside children and young people we are confident that this approach will also enable us to define more clearly what is meant by the term 'local offer'.

The intention is to deliver greater transparency about what is provided to include all services operating within the cluster/area. We know that parents and the VCS sector will tell us where such detail is clear and/or where uncertainty persists as to exact meanings. The Family Information Service (FIS) has a fabulous online directory and is the main signposting and information service for the whole of Cornwall, for parents and carers of children and young people aged 0 to 20 or 25 if they have additional needs. Ideally we will, through the strength of our current partnerships, include the comprehensive range of services which genuinely become available to the family, child/young person. We will be able to sample and learn lessons which will inform the wider roll-out of our planned developments.

the key professionals who will support new planning regime:

Our intention is to devise three interconnected project plans at one and the same time as constructing with and through schools and services delivery of a locality pilot. Overseeing the plans will be an identified group of lead colleagues across services and partnerships to resolve practical issues to deliver:

- A re-focusing on pupil and student outcomes
- Reduction in duplicate assessments into a single framework.
- The development of clearer, measurable educational, health and social care indicators.

This group is based around the following:

- VCS - Parent Carer Council representations
- Health PCT/Designated Medical Officer
- Schools/provisions (representative across 0-25)
- SEND & I leads (specialist LA service groups)
- Social Care Services.

Across Cornwall and the Isles of Scilly there are high quality multi-agency practices which continue to evolve for young children who are disabled or identified as having a special educational need. One of the key issues for development is a need to apply this strength in the development of a clearer framework against which resources and services work together across the 0-25 age spread. This is particularly important where continuing health/social care and education support for children and young people with the most complex needs are found.

At the heart of this approach is our intention to work to secure pooled budgets, deliver a streamlined early assessment and early identification process and eradicate duplicate meetings. The national recognition given to our Early Support strategy provides a proven methodology which can be used to enhance the planning regime up to age 25 where so applicable.

We consider that project 2 will engage a small number of families (within a locality pilot) who have a good/some understanding of exiting arrangements and more importantly who are willing to work with us (alongside all necessary safeguards) to structure a single assessment process linked to a personalised plan. We intend to

work with a number of families in the first instance to share and explore the implications and practicalities found/likely to emerge in terms of education, health and care needs. We consider that this would sit well within the possible replacement to a Statement of SEN. We are interested in exploring what role voluntary and community sector organisations will play within these enhanced arrangements. Engaging and directly involving such partners would be an essential part of this work (hence Project 1).

new single plan with focus on outcomes:

This bid reflects our unrelenting drive to:

- Focus on specifying improved outcomes for all children and young people which builds on wide scale well-being indicators alongside improvements in both attainment and progression
- Build further on what we know, and can evidence, in terms of what works well to enable children and young people to achieve to their innate abilities so that they are, to the greatest extent possible, **'the author of their own life story'**
- Place parents and carers at the heart of our approach to reduce to the maximum extent possible administrative or 'SEN' processes which distance families from engaging and working with us to support their child(ren).

We have good evidence which shows how fixated SEN processes can be solely focused around securing sufficient resource for 1:1 adult/pupil support. Existing SEN resource strategies are weighted and to some degree overly dependent on the LA ascribing what in many cases can be very small levels of financial resource. The reality is that the vast amount of SEND resource is already delegated to schools. Through the locality pilot we hope to encourage confidence and 'trust' to free up the relationship between SEND resources and adult support. We want to encourage schools to re-visit how the totality of such resource is used in an area and to engage locality commission to evidence more clearly Value for Money (VFM) being more directly linked to outcomes.

Project 3 holds considerable advantage in our view in that the proposal includes the young person to contribute to how the totality of resource should be planned/commission and used. This is a particularly sensitive area of work. The reason we are seeking access to Pathfinder resource means that we will be better placed to reform systems and processes thereby enabling more efficient use of resources. The implications being that as a result we will be better placed to re-visit our formula funding around SEND.

Working partnerships with the VCS will be a vital component in the success of this project. They are already secure enough for us to concentrate on working together to better articulate what we mean by outcomes and work towards achieving them. We accept that our concept of outcome maybe challenged by what a family/young person considers/identifies and wants. We are prepared for this scrutiny and the journey ahead.

alignment of resources:

The developments around a locality pilot present an exciting opportunity to explore how and exactly what resources are being used and thereby to define how best and at what point they can be better aligned.

Our intention is to bring to the table an open exploration as to the totality of resources within a defined area (education, health and social care). This includes formula funding alongside additional funding delegated by the LA at one and the same time as exploring use of S.75 agreements. This would include Health and VCS resources. There is a key link here between devolving resource to multi-agency oversight alongside securing VFM and coherent monitoring of such resource. The investment in the PCT on continuing care for both children and young people beyond the age of 19 remains a significant focus of both commissioning and collaborative working. This also links to the need to invest in capacity in health to ensure that the important developments for children with continuing health and education needs continue.

We consider that identifying the totality of such resource within an area including front line services will enable the locality to be better placed to view the scope and extent of such resources. We expect this in turn to lead to a better alignment, more efficient deployment and hopefully more effective interventions and support as a result.

In scoping all three projects to test out the main components of the pathfinder specification we are hopeful of being able to concentrate such resources more efficiently and effectively.

It is expected that the detail will include:

- Sharing data and information
- Profile/incidence of need
- Sharing evaluations in respective impacts related to outcomes for pupils identified with SEND across the locality pilot
- Sharing of support/interventions (type and formation)
- Sharing expenditure(public domain)
- Including placements made outside of the locality/LA area
- Building on the success of our S.75 agreement related to the Integrated Equipment Service which is a joint Health, Social Care and Education provision across both children and adult resources. We consider that this IES model provides a solid foundation upon which we can build.

join-up between key agencies:

There is sustained and ongoing exploration, commitment and sign up to share a common understanding and approach relating to quality, impact and entitlement for children and young people with SEN. We have a shared vision that we should support local delivery and progress for children and young people with SEN to become more independent, higher achieving, happy and fulfilled people.

Such commitment is based on the principles of:

- Early Intervention
- Valuing diversity in all children and young people
- Ensuring children's entitlement to broad, balanced and relevant curriculum
- Working closely with parents and carers

- Treating children and their parents with dignity
- Being flexible
- Working in partnership with other agencies and working towards jointly funded services
- Adopting transparent funding policies for children with special educational needs
- Supporting good quality professional development for school and settings based staff and for specialist staff across all services and agencies
- Meeting statutory obligations for all children and young people in Cornwall
- Participation of children and young people and respective parents/carers.

These principles have formed the basis of extensive and continuing discussion with all key agencies. In delivering such principles we have welcomed the Green Paper without reservation. The related communication infrastructure which underpins our combined approach places the child, young person and their respective families at the centre of what we do and why.

We remain acutely aware of where significant weaknesses have been found in performance – past and present. We also know that many aspects of our work are both highly valued and nationally recognised as such, which includes the ways in which our combined services ‘join-up’ to improve life chances for children and young people identified with SEN.

We consider that we have much to contribute to the national debate raised in the Green Paper alongside a willingness and desire to share what we know and to learn with others how we can (and we are determined to) improve further. Securing this pathfinder bid will help to remove somewhat our potential isolation and to grow our practices for the continuing benefit of our respective communities.

value for money and assessment of cost;

Mindful of The Sutton Trust’s recent publication (May 2011) ‘a useful comparative toolkit to improve learning’ which notes that:

‘The challenge to establish a clear link between educational expenditure and pupils’ learning is harder than you would think....Our solution to the challenge of linking spending with learning is to focus on what the evidence indicates is effective in improving teaching and learning using typical measures and then working out what additional costs are associated with these approaches’.

We are already in the process of constructing a specific VfM self-evaluation framework with an intention of identifying such indicators. Linked to these proposals we feel that there is merit in concentrating on the ‘additional costs’ issues. All three projects allow us the chance to explore these with our partners to better deploy and secure effective use of resources.

We consider that VfM is more accurately described where we can separate out the difference between what is **generally** available against **additionally** available in teaching and learning terms. We are at the early stages of constructing and applying the tool and consider that we are in a good position to separate out such VfM indicators with partner agencies as a result.

The reasons for this are two-fold:

- 1) The agenda for change is already evident in Cornwall. There are complex issues connected with Green Paper proposals. We consider that we can further improve how we support children and young people with SEN at one and the same time as attempting to reconstruct a number of related processes and practices. Central to this is our intent to transform approaches to the statutory SEN assessment and statement framework. We are not interested in simply maintaining the 'status quo' but rather see this as an opportunity to place the child/young person and their families at the heart of how we can improve locally and contribute to wider national developments.
- 2) We are wary of short term fixes which may have a profound longer term effect linked to statutory and regulatory implications. We do not intend to disrupt our excellent SEN casework work in this regard – rather to move the focus to outcomes.

use of mediation;

We have contracted an external provider to deliver (as required) a formal mediation service. This has been part of the South West SEN hub initiative. Great care has been taken to ensure that parents are signposted to a professional service. While contracting for six possible mediation cases in 2010-11 for Cornwall and one possible referral for the Isles of Scilly only two cases proceeded to the independent provider. Both cases related to Cornwall's arrangements and both cases were resolved with full agreement' reached as a result of the referrals.

Mediation has proved to be a helpful model. The process of mediation sits alongside our SEN processes to be called upon/referred too whenever the need is identified. Part of the reason for the exceptionally low take-up rate of mediation is probably due to the following:

- 1) We have Parent Partnership Services (which cover both Cornwall and The Isles of Scilly) which provide direct mediation support/services to parents to resolve both speedily and locally issues which may otherwise result in disagreement.
- 2) Successful mediation has a structure, timetable and dynamic that "ordinary" negotiation can often lack. It is for this reason that we have provided front line services with both knowledge and practical use of mediation skills through continuing professional development for use in direct discussions with and on behalf of parents.

We consider that our approach is a model of good practice which is embodied in the following:

- Formal disagreement is exceptionally rare
- Where disagreement is found front line services seek to resolve locally giving time and attention to parents to express views to tease out any issues upon which the disagreement is based
- Where mediation is used we always endeavour to learn lessons to inform future practice and communications.

This model provides us with a solid foundation upon which we feel best placed to explore with parents and wider services including voluntary services sector should any disagreements be found within any of the three projects forming part of this Pathfinder bid. We remain confident that throughout and across our services we are best placed to explore and ideally resolve any of the complex and seemingly

intractable difficulties which may be evident as we work to understand and resolve some of the issues as raised in the Green Paper – particularly in relation to establishing a single assessment process.

transferability of plan:

It is our intention to move with purpose and intent (as outlined in this bid) to:

- Establish locality pilots so that front line services, schools and related partners working through a common purpose (to improve life chances for children/young people and their families) are more likely to achieve desired outcomes
- Move with due diligence and great care to maintain what we do well at the same time evolving arrangements in line with Green paper proposals
- Establish the three projects ideally through a successful Pathfinder bid to dedicate additional short life grant funding so that SEN process and related practices targeted towards the child, young person and respective families are more engaging, less burdensome and less intrusive so that families tell us that they no longer 'feel the need to fight' to secure what is necessary
- Pick up opportunities emerging through the new health reform structures at one and the same time as we seek to evolve the three inter-related elements of:
 - Designing and thereby engaging with greater degrees of success the active involvement and participation of children, young people and respective families so that the process is inclusive giving greater weight to the 'child's voice'
 - A new birth-25 assessment process which links to a single plan involving health, social care and educational evidence
 - Actively engaging with both voluntary and community organisations to widen access to specialist expertise whilst at the same time ideally introducing more independence to the process.
- Move away from a fixation of 'need' and associated language to providing targeted interventions which work to support teaching and learning where judgements and professional scrutiny is moderated to effect change
- As part of a planned and well-orchestrated plan, to roll-out lessons from the Pathfinder for the benefit of all children, young people and their families in a timely and secure way
- Reduce the sense of isolation which can be evident in a diverse area such as Cornwall and The Isles of Scilly to learn and share practices and approaches on a national scale.

value for money and assessment of cost of change.

We estimate that the cost of change will include:

1. 4 x area CPD sessions
2. Additional CPD provided to the self-selecting locality pilot area
3. Deployed via the VCS sector parent/family working across both Cornwall and the Isles of Scilly – rurality and demography being the key focus
4. 'Voice of the child' programme specially targeted within projects 1, 2 & 3 (again being devolved via the VCS sector)
5. Time to construct, consult, facilitate and monitor detailed project plans
6. Detailed and intensive solution focused work to support the process of reforming systems and processes

NB: 1 to 4 will assess approximately 30% of the grant with the remainder allocated to 5 & 6.

As part of our discussions around the Green Paper we have good evidence that statutory administrative arrangements are exemplary (performance judged against the previous National Indicator 103). The issue is not therefore about administration of the SEN process. It is rather about the evidence base upon which judgements and decisions are being made linked to their consequential impact on pupils with SEN and Disability and whether the investment is actually effective.

In 2010 the Cornwall maintained 2,118 statements of SEN and based on January 2010 SEN2 returns, this equates to 1.82% of the (SEN2) 0-19 population. The national figure in terms of the percentage of statements is 1.84%. Of note is that in 2010 the LA issued 240 new statements (in the previous year) which is a 6 year high. New statements issued for children aged under five years in the calendar year (January data from SEN2) in 2010 was 83 statements representing 34.6% of new statements issued by the LA. The national rate is 26.0% of all new statements issued.

We have scrutinised much of the documentation which has been drawn up as part of the statutory assessment process – in summary we find that by and large much of this information describes what the child can't do rather or what s/he needs yet has little, if any, information to explain or '*indicate (what) is effective in improving teaching and learning using typical measures*' (Sutton). We consider therefore, that much is to be gained to align even existing process to secure the later and move away from the former.

Above all we would genuinely welcome the chance to support Green Paper proposals.

(Max 400 words for each heading)

V – Optional areas (see Annex x)

Please rank from 1 to 5 (1= favourite to test, 5 = least favourite) the optional testing areas in order of preference. It is acceptable choose more than one 'favourite' option: please make sure your ranking reflects this. Please note that we will prioritise applications from pathfinders wishing to work on children's personal budgets. Please indicate how many additional options your pathfinder could reasonably test.

Number of options	All 5
Personal Budgets	1
Banded Funding	1
Age Range & Employment	1
Support to parents and young people	1
Support to vulnerable children	1

VI - Contact details

Please provide a lead contact for the pathfinder as a whole and for each local authority and PCT cluster engaged in this bid

Lead Pathfinder Officer

Name of local authority	Cornwall Council
Name of lead contact	[REDACTED]
Position of lead contact	[REDACTED]
E-mail of lead contact	[REDACTED]
Tel of lead contact	[REDACTED]
Address of lead contact	[REDACTED]

Local authority 1 (as above)

Local authority 1

Name of local authority	Cornwall Council
Name of lead contact	[REDACTED]
Position of lead contact	[REDACTED]
E-mail of lead contact	[REDACTED]
Tel of lead contact	[REDACTED]
Address of lead contact	[REDACTED]

Local authority 2

Name of local authority	Isles of Scilly
Name of lead contact	[REDACTED]
Position of lead contact	[REDACTED]
E-mail of lead contact	[REDACTED]
Tel of lead contact	[REDACTED]
Address of lead contact	[REDACTED]

PCT

Name of PCT	NHS Cornwall and Isles Of Scilly
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Name of lead contact	[REDACTED]
Position of lead contact	[REDACTED]
E-mail of lead contact	[REDACTED]
Tel of lead contact	[REDACTED]
Address of lead contact	[REDACTED] [REDACTED] [REDACTED] [REDACTED]