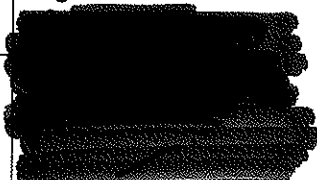




Support and aspiration: A new approach to special educational needs

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 Gateshead Council	Signature of Chief Executive(s) LA(s) 
	Signature of Director(s) of Children's Services 
Name(s) of PCT(s) Gateshead PCT	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 43,800 (under 19 years old) of which 27,127 are school age	% and number of children and young people with Statements of SEN 1.8% (of whole 0-19 population) 827 (as at Jan 2011)
% and number of Looked After Children 0.87% (385)	% and number of Looked After Children placed out of area 0.07% (32)
% and number of Looked After Children placed in your area 0.80% (353)	% and number of Children in Need 1.6% (718)
Number of Tribunal cases and % successful	% SEN statements completed in 26 weeks

12 Tribunal cases (2008 – 2010) 1 case was fully upheld (8.3%)	100% (2010/11)
Please state whether this pathfinder is an NHS early implementer YES	Please state whether any partner in this pathfinder is already engaged in: a) piloting personal health budgets NO b) Piloting DfE Individual Budgets YES

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

Population is around 190,800, (213,000 in 1980s) (ONS Midyear population estimates 2009).

43,500 young people (0-19), comprise 23% of total. 40,230 are dependent children (HMRC estimates).

- 24.3% children live in poverty.
- 450 (8.3%) 16-18 year olds are NEET.
- In 2009/10 79.9% pupils achieved 5+ GCSE's (Grades A*-C) and 51.1% including English and Maths.
- 66% residential properties are privately owned. Rented properties include 23% (Gateshead Housing Company), 6% (Registered Social Landlords) and 5% (private).
- Life expectancy is 76.2 (males) and 80.5 (females).
- Crime rate in 2005/06 was 100.6 per 1,000 population and 69 in 2009/10.

(100 words)

III- Basic Information (see section x)

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

Partnership arrangements:

A Pathfinder project board has developed this bid and will continue to oversee the project during implementation. There is representation from Senior Managers within Education, Social Care, Health and Children's Commissioning. The board will lead on developing and implementing the Pathfinder and ensure sufficient management and leadership capacity to develop the Pathfinder at a strategic and operational level.

It will report progress to Gateshead's Children's Trust which has representation from the LA, and partners including the VCS, parents, Strategic Health Authority, PCT, NHS Trusts, GPs, Schools, Academies, Colleges, YOT, Probation, Job Centre Plus, Police, Housing and Adult Services.

Robust arrangements will be put in place to ensure continuous strong partnership working with the VCS, independent sector and with children, young people and their families. We will ensure our operational procedures are strongly aligned across all

sectors in order to provide a streamlined service for our young people and families.

(149 words)

Work with a range of front line services:

To ensure that the new system works well at an operational level, we realise it is imperative to involve front line services across social care, education and health. During the development and delivery stages of the Pathfinder, we will engage a range of front line services in testing out, monitoring and evaluating different ways of working. This will involve social workers, educational psychologists, specialist teaching staff from mainstream and independent schools and nurseries, special schools including liaison teachers, special educational needs assistants and health staff including occupational therapy, speech and language therapy, physiotherapy, nutrition, dietetics and community nursing support.

Our Children's Commissioning Team will support and work with providers, including the VCS and private sector, to stimulate and transform services into a diverse, flexible marketplace for service users, offering choice, quality and minimising risk. Our provider list will be expanded and shared as appropriate with families.

(146 words)

Role of VCS sector:

As an IB pilot site, we have already begun to test the VCS role in co-ordinating the single assessment process/plan and supporting families to navigate their way through the system. We are commissioning a VCS provider to support young people and families' inclusion in decision making processes. We will expand this to help achieve impartiality, increase transparency and enhance parental confidence. We will investigate how best to maximise our current contract with a VCS provider (delivering our Parent Partnership Service) to assist with this support role. The service offers independent information and support to parents/carers about their child's SEN.

Through delivery of our IB pilot extension, we are commissioning the VCS to work directly with families and circles of support to develop person-centred plans and train practitioners to roll out person-centred support planning across Gateshead. Our Children's Involvement Worker will ensure that disabled young people fully participate in the process.

(150 words)

Engagement of parents:

We recognise that in order to enable parents to feel confident in the new system we need to fully involve them early on. Parents in Power, our forum for families with disabled children are signed up to our pathfinder bid and we will utilise our close working partnership with them to fully involve parents in the development and delivery stages.

We will maximise our current contract with a VCS provider to deliver the Parent Partnership Service so as to ensure that parents feel fully supported and involved throughout all decision making processes. This includes explaining the assessment process, helping parents prepare for and supporting them at meetings, listening to concerns or worries etc. Through our IB pilot, we are also commissioning the VCS to

test out the key worker role; engaging and supporting parents to enable them to easily navigate through the system which in turn will increase parental confidence.

(150 words)

Engagement of children and young people;

We are committed to and believe that working closely and meaningfully with children and young people from the very beginning will increase their confidence in the new system.

Our person centred support planning approach places children at the heart of the decision making process and our Children's Involvement Worker will continue to play a key role in supporting disabled children and young people to fully participate. We will build on our innovative engagement work commissioned through the VCS to ensure that severely disabled children with complex communication needs are empowered to inform and influence decisions. We have well established mechanisms we will use to engage with children and young people including engagement forums for disabled young people.

We will commission the VCS to work directly with children and their families to navigate them through and involve them in the assessment, support planning and review stages.

(145 words)

Capacity to test and innovate;

We have a track record of delivering pathfinders/pilots, most recently "Short Breaks" and "Budget Holding Lead Professional". As an IB pilot site, we are a leading change agent for personalised approaches. We are making excellent progress in transforming how families access support, putting them at the centre of the planning process and acknowledging they are best placed to understand their own needs and how to meet them.

NHS SOTW is a pathfinder organisation for the North East Transformational System. This methodology supports the organisation to test new ways of working through innovation. It is about the removal of unnecessary waste and the maximisation of value within processes, as defined by the customer. It is through this System that we are improving care and services for people who live in Gateshead.

We will commit substantial management and operational resources to the Pathfinder so we can test out innovative ways of working.

(150 words)

Project plans;

We have included a project plan in the Appendix. The plan outlines how we will ensure there are sufficient resources and capacity to deliver the Pathfinder on a strategic and operational level.

Evidence base;

Our IB Pilot and Short Breaks programme have provided local evidence of impacts

for families:

- 86% parents who took part in our local evaluation felt 'very supported' through the support planning process.
- We reached more vulnerable children by using our early intervention model via CAF and Team around the Family processes to develop joint support.
- We developed innovative support packages involving two families whose disabled children were friends in joint support planning, resulting in pooling together their budgets.
- We have reduced the cost for disabled children in high cost residential placements by 78.5% through tailoring services to our needs analysis.
- 77% families who receive our minimum local entitlement to Short Breaks felt less stressed and 78% felt their child's emotional wellbeing had improved.

We have developed an SEN approach based on an inclusion model, reducing the need for statements and out of borough placements.

(149 words)

(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);

We will work closely with a range of partners across all sectors who work with our children and young people aged 0-25 years so we can identify a cohort of children and young people that will allow us to test out how the new assessment process and plan works across the age range and for those with different support needs.

We have an existing caseload of 30 families currently using both Individual Budgets and Early Intervention packages. As part of the IB pilot extension, we are aiming to recruit 10 additional families with children aged 0-7 years old. This is to test out how the use of Individual Budgets can support young children at key transition points in the early years, for example starting nursery or school. Families will be engaged via Early Years Teams, a special school and a mainstream school. We will explore whether the families already involved in IB's would be suitable or would like to be involved in the pathfinder project. We will also aim to recruit additional families from the Orthodox Jewish Community, as our experience in years one and two has shown that families from this faith community have found IB's particularly useful in meeting their culturally-specific support needs, and we are working with community representatives to identify and develop new models of SEN provision

We will scope current pathway processes to support for children and young people with a range of needs including assessment through the Health-led Child Development Team, the NETS methodology in relation to implementing the Continuing Care Framework, the statementing SEN process, the Common Assessment Framework, Social Care assessments, Post 16 Placement process and Learning for Living for Work assessment etc to identify how a single planning process could be used in a range of circumstances. We will ensure a holistic approach is adopted to provide a seamless approach for families. We will work closely with the professionals involved in these assessment processes to identify cohorts of children and young people to demonstrate how the new assessment and plan can be used in

a range of circumstances. We will ensure throughout the duration of the Pathfinder that all current statutory duties continue to be complied with.

(366 words)

person-centred planning approach:

A number of our current assessments across Education, Health and Social Care put the child / young person's / family's views right at the heart of the planning and review processes and we are fully committed to build on and continue this good practice.

Through our delivery of the Individual Budgets Pilot in Gateshead, we have developed the use of person centred support planning and review processes to work with families and circles of support to develop holistic person-centred plans based on the integrated assessment of need. We will ensure the sustainability of this approach by using the VCS provider to up skill social workers, lead practitioners etc to be able to deliver person-centred support planning. The aim is to develop a simple and easy pathway that enables children, young people and their families take control of their lives, their futures and the support they need.

Key to the process is putting the child at the centre of their plan. All of the children / young people involved in the IB pilot have been present during their support planning sessions, regardless of their age, communication preferences or learning needs. Gateshead's Children's Involvement Worker spends time with children at their schools before the planning sessions, and attends a number of plans to support young people to express their views. Plans are facilitated in a range of community venues, including schools, homes and children's centres; each child is encouraged to choose a location and to choose their favourite music and activities to accompany the session. As a result, support planning takes place in an environment where they feel comfortable and able to participate on their own terms. Using this model, young people and their families are able to increase their control over the ways in which support is delivered and benefit from a broker to develop a package of support that suits them.

We are developing our approach to the provision of SEN to create more choice, based on the development of a clearer offer of mainstream, additional resources and special school provision. Support for parents is provided through our Parent Partnership service delivered by the VCS.

(355 words)

links between planning and assessment:

We understand that it is essential that sufficient support and provision must be in place when children and young people need it. We will therefore put clear plans in place which will ensure that planning and assessment processes are linked to the core offer of provision which will be developed and communicated to children, young people and parents / carers.

We currently use information from the Joint Strategic Needs Assessment and Children's Trust Needs Assessment to ensure that appropriate provision is in place in order to achieve agreed outcomes for our children, young people and families. We will ensure that aggregated information from individual assessments will be fed into future needs assessments so that this informs the levels of provision that is required

and that this is linked to our commissioning processes.

Our Children's Commissioning Team will take the lead on supporting and working with providers to stimulate and transform services into a diverse, flexible marketplace for service users that will offer them more choice and quality. Our Children's Commissioning Officer will work closely with the Project Manager to assist in the identification of resources and provision in order to plan the pattern of service delivery in a comprehensive, transparent and efficient way. Gaps in service will be identified and fed back into the commissioning cycle to be addressed.

We will also link the review of individual support delivery with a rigorous monitoring framework so that any shortfall in quality of provision can be addressed. We will continue to work with partners and providers from the public, private and voluntary sectors to develop services on a sub-regional, regional or national basis where this can offer an effective way to support the development of specialist services to meet lower levels of demand and also achieve value for money. We are part of an active SEN/LDD regional hub with representatives from the 12 local authorities in the north east. Similarly within health and social care and the voluntary and community sector we work hard to share best practice and facilitate effective collaboration between authorities and other agencies. We have also already made links with the national SEN Third Sector Consortium and look forward to working in partnership with them to develop innovative solutions that will achieve measurable outcomes for our children and young people in a cost effective way.

(387 words)

plans for more transparency about what is provided:

We have developed a core offer for short breaks which we will expand into a full menu of available services and support which will be based on the needs of children and young people with SEN / disabilities. This will also take into consideration the needs of hard to reach groups which may have specific cultural needs, such as BME groups like the Orthodox Jewish Community. The core offer will include information about how to access services that are on offer from a range of public, private and VCS providers such as early years educational, health and support programmes, mainstream, independent and special schools and nurseries, academies, colleges, alternative education provision, health / therapy provision, short break care provision and play and leisure provision. This information will be designed with the full involvement of children, young people and parents so that it is clear, concise, easily understood. This information will be communicated to children young people, families and professionals in a timely and accessible way. Our Children's Commissioning Team will lead on working closely with providers to ensure our services are diverse and flexible for service users. Our provider list will be expanded and shared with families to improve transparency.

We will commission the VCS to co-ordinate the new single assessment process and plan and support children young people and families to navigate their way through the system, including in decision making processes. We feel that this will introduce a level of impartiality and increase transparency, which in turn will enhance parental confidence which is a key issue as highlighted through the Lamb Inquiry (2010).

We will ensure that data sharing protocols are in place so that relevant information can be accessed and shared with not only practitioners but also with the child / young person and their families themselves. This data will be updated regularly, be written in plain English, be jargon-free and will clearly highlight how decisions have been

made during every stage of a child / young person's life. We will look at our current data management systems such as CareFirst, CAF and Education Management Information System (EMIS) and also investigate best practice in this area to develop a system that will work efficiently for all involved.

(370 words)

the key professionals who will support new planning regime:

A range of professionals from all sectors will be involved in supporting the planning process including senior managers, budget holders and decision makers from within Education, Social Care, Health and Children's Commissioning. We are beginning to test out how a range of planning processes can be integrated as part of our IB Pilot, and as part of our emerging work on modernising our SEN approach. We will use the experience learnt from this during the development and delivery stages of the pathfinder so that children, young people and their families receive a bespoke package of support in a timely, equitable and transparent way, reducing unnecessary bureaucracy wherever possible at all stages:

- Assessment
Social workers, teachers, educational psychologists, health specialists, Connexions and support workers and other lead practitioners, VCS navigators
- Planning
Circles of support (including professionals above), person-centred plan facilitators, advocates, VCS navigators
- Approval
Service Managers – Health, Education, Social Care, Legal Officers, VCS navigators
- Financial Support
Self-directed support advisors, Finance Officers, VCS navigators
- Review
Circles of support (including professionals above), VCS navigators

We are commissioning the VCS to engage and support children, young people and parents / carers in order for them to easily navigate their way through the system. The VCS will designate a lead professional (navigator/key worker) whose responsibility will be to co-ordinate the assessment, support planning, approval and review processes whilst keeping the child, young person and family informed on progress throughout and ensuring they are fully involved in decision making. Using the VCS to carry out this role will ensure objectivity in the process which in turn will enhance parental confidence in the system, whilst continue to meet statutory requirements.

Working in partnership with the VCS we will develop and roll out training programmes for the key professionals as mentioned above involved in assessment and support planning. We will also ensure that we have robust plans in place in order to assess the quality of assessments and support plans and we will use this information to inform future training and supervision requirements across the workforce.

(343 words)

new single plan with focus on outcomes:

The new single plan and assessment would bring together a range of areas and existing assessments for example, educational psychologists, speech and language

therapists, teachers, health specialists, child development, common assessment framework, children's social care core assessments, section 47 child protection assessments, youth offending, PEP/Pathway/LAC plans, post 16 processes such as the Learning for Living and Work framework and section 139a learning difficulty assessments, and as such would have a wide range of outcomes attached to it.

We would put in place a plan that focuses on and demonstrates what outcomes children and young people will achieve as a result of the support to be provided along with relevant indicators so that this can be measured, monitored and quality assured. This may include for example, data about a child's educational attainment and /or progress, targets on aspirations for the future such as their further education, training, career or housing, the child/young person's health and wellbeing, social, behavioural or physical targets, re-offending data etc.

We would also want to demonstrate what children / young people and their families think about the process and whether they have received the appropriate levels of support. As such we would put indicators in place that would enable us to measure against outcomes to ensure that the most vulnerable children and young people receive the level of support they need, that they have more choice and control about the provision they receive, that they are included in planning and decision making processes and that they receive relevant and timely information in a format that is accessible to them.

We will ensure that all commissioned services demonstrate measurable and achievable outcomes and we will work in partnership with providers to ensure that these are monitored and reviewed as necessary using our established quality monitoring framework.

(298 words)

alignment of resources:

As part of the IB Pilot we have successfully aligned Health and Social Care resources to give families choice and control of their support. We will build on this by aligning Education resources to improve transparency and to provide clarity for children, young people and their families. We will ensure that resources are aligned in order to allocate the different services / funding. We will investigate the potential for pooling some elements of budgets. Support has been allocated from the Local Authority and Health Financial and Legal Departments in order for this to be developed and co-ordinated across all areas.

The approach we intend to take will involve:

- A full scoping exercise of current mainstream budgets to be included in the Pathfinder across the LA and PCT.
- Alignment of the budgets and agreement to manage the commissioning cycle for the aligned pot within an agreed forum
- Needs assessment, support plan completed
- Services newly commissioned or re-commissioned from aligned budget
- Quality assurance, monitoring and evaluation

Our (virtual) Joint Commissioning Support Team, which includes health, education and social care commissioners, has responsibility to coordinate reviews and ensure information is available to assess and evaluate current service provision to support joint planning and funding for future developments. The CST commissioned an

independent review of all services for disabled children and this approach has resulted in the delivery of integrated short breaks services and early years, health and social care funding is being aligned. We are working closely with the PCT to include additional health funding for enhanced children's community nursing services. We have arrangements in place for joint funding services for disabled children including those with complex health care needs where there is clear eligibility for continuing health care funding. Similar arrangements exist for SEN and we will work to integrate all three elements in a new resource model.

We are developing a single resource allocation system to identify indicative budgets. Our Self-Directed Support Social Worker is developing this based on the model we piloted for early intervention packages in the IB Pilot. We will develop a system which is understood by both professionals and families and allocates a level of resources which accurately reflects the family's level of need. A dedicated children's self directed support advisor will set up direct payments, to monitor budgets and follow up discrepancies. We will utilise these resources as part of the Pathfinder.

(401 words)

join-up between key agencies:

We recognise that for the new system to work efficiently and to ensure that children and young people are sufficiently safeguarded, the key agencies need to work jointly, and that this is particularly important at transition points and/or where support is transferred from one provider to another. We have developed a set of core standards built into a multi agency core pathway for families that not only provides a foundation for the core offer but also has a built in audit tool which we would be able to test through this pathfinder. Gateshead's multi-agency transition protocol ensures that disabled young people aged 13-25 years receive joined-up support from all key agencies.

Gateshead LA and PCT partners in the northern region have developed a joint health and social care funded contract with a VCS provider, St Oswald's Children's Service, who offer specialist overnight short break care for children with life limiting conditions in Gateshead. The Independent Review of Children's Palliative Care Services described these arrangements as 'one of the clearest and best co-ordinated contracts we found which forms an integral part of the partnership model in place in the North East'. As part of the joint health and social care funded contract with St Oswald's, we have clear care pathways in place, with designated staff in the PCT and social care taking responsibility for the joint assessment and referral process in place. Referrals are actioned quickly once it has been agreed they can meet the need and, given the commitment to joint fund, there are no delays in providing the service.

We work closely with schools to develop our SEN offer, including special schools and a number of Additionally Resourced Mainstream Schools.

We will build on our CAF and Team Around the Family approach and our lead practitioner role (working with and on behalf the child and family) to ensure that key workers have direct liaison with other authorities and agencies. We will build these important elements into our training programmes and supervision arrangements and will monitor how we are doing through performance management and quality assessments.

The current health reforms will support the integration and join up of key agencies by

strengthening commissioning at a local level with needs and outcomes clearly at the centre. Gateshead's Children's Trust Board will be responsible for overall governance and accountability and will act in a support and challenge role should any issues arise.

(400 words)

use of mediation:

We currently operate within a culture of close partnership working and open communication. We also feel that by utilising the VCS to engage with and work closely with children, young people and parents / carers in order to navigate them through the system and by giving parents more choice and control, this will negate the need for disputes to occur. We will aim to deal with concerns before they become formal complaints and will put in place a common procedure across all sectors and agencies involved to ensure a consistent approach is met when dealing with concerns from parents / carers.

We have a close working relationship with Parents in Power, our forum for families with disabled children, and we will ask them for advice, support and guidance around the best ways to engage and communicate with parents. We feel this will not only assist us in reducing the need for mediation but also provide in itself an informal mediation service. We would also welcome the use of advocates at any time during the process if this helps to introduce further independence for and increased confidence in the system for young people and their parents. We are fully committed to involving young people and their families through all stages of the process, including decision-making.

We do believe, however, that it is important to consider formal mediation if it does become necessary, in order to foster better communication between all parties concerned. Ultimately it should eliminate the need for more formal procedures such as Tribunals. To this end, we will have a process in place where we spot purchase mediation should it be necessary to do so from external providers which may be independent or voluntary / community organisations. Mediation support exists for the SEN process through an independent provider and we will investigate how we can extend this approach wider. Whatever approach is taken, we will always co-operate to the highest degree in order to aim that any mediation results in an agreement that suits all concerned, therefore reducing the need for Tribunal. We will monitor whether our approach is successful or not based on the numbers of complaints and Tribunals.

(361 words)

transferability of plan:

We have a track record of working closely with neighbouring authorities and organisations, as well as those at a national level and across the country. In terms of education, we are part of an active SEN/LDD regional hub with representatives from the 12 local authorities in the north east. Similarly within health and social care and the voluntary and community sector we work hard to share best practice and facilitate effective collaboration between authorities and other agencies. We are part of a whole range of forums to improve the quality of and access to SEND services and provision.

We will maximise the opportunities offered by these partnerships to facilitate seamless transition of plans across boundaries. We will ensure that appropriate

protocols, procedures and accessible arrangements are in place to share information should a child/family move to another area. These should be consistent and provide clarity about roles and responsibilities of practitioners. We will use our model of lead practitioner (working with and on behalf the child and family) to have direct liaison with other authorities and agencies, where appropriate and to ensure timely transfer to and effective communication with colleagues in the new area/school etc. The needs of the child will remain firmly at the centre of the process. Similarly we will ensure robust arrangements are in place at key transition points for the child/young person such as those critical handover periods times when a young person transfers from early years to primary, primary to secondary school, school to college, child to adult health services etc. The transfer of information on individual children at this time is key to identifying and understanding and delivering on their needs.

Currently there is a common national format for statements. We will work with other Pathfinders and DfE to explore the possibility of developing a similar "single assessment format", which could be used more widely. This would simplify the overall process and ensure that no child or family falls through the net in receiving the help and support that they need, wherever they reside.

(340 words)

Value for money and cost of change to current systems

We will maximise value for money through ensuring agencies work together in a joined up way, offering a holistic approach to service delivery. Through simplifying and streamlining multiple assessment processes/eligibility criteria this will lead to an efficient and seamless service. It will eliminate duplication, increase focus on specific needs of the child/family and improve access to appropriate packages of support. It should achieve improved outcomes, creating efficiencies in both the short term (less bureaucracy) and long term (needs met with positive outcomes).

Flexibility to provide support to families in more creative and innovative ways will have potential to offer greater value for money than traditional models of service delivery. By engaging families in the process, they will be empowered to take control over their own support, find their own solutions and this will hopefully help prevent children from needing to come into care. Costs should be lower than if risks escalate without appropriate support.

As strategic commissioners, we will develop services that meet need through strategic planning. Where ineffective we will decommission services. In commissioning new partners (e.g. VCS) we will ensure that from the outset we gain value for money, by building in mechanisms to measure outcomes, guarantee robust monitoring, quality assurance and evaluation.

We will engage stakeholders (including financial colleagues) to identify costs needed to change current systems. We will audit current expenditure and set against a detailed plan of anticipated costs for future provision, incorporating the new ways of working with a view to achieving sustainability.

The changes will require a shift in culture and roles and responsibilities of existing staff. We will learn from experience in implementing our "Change for Children Programme", which involved integrating/aligning many of our services for families with additional needs. This included prioritising training in common processes (teams around the family/lead practitioners/common assessment framework) and staff currently work in a multi-agency way to provide more effective approaches to early intervention. This has led to partnership wide change management across children's

services and delivering cultural change is an integral part of our overall project management approach. Anticipated costs relate to:

- allocating staff resources (including management/operational input/commissioners in development of new processes)
- new accountability and risk-management processes
- Training to cover approach and associated culture change
- Awareness raising/understanding of the new approach
- Resources to ensure a range of support options for service users
- Costs linked to sharing of information

(400 words)

(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	1
Personal Budgets	1
Banded Funding	5
Age Range & Employment	3
Support to parents and young people	2
Support to vulnerable children	4

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	Gateshead 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

Name of local authority	Gateshead 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]

PCT 1

Name of PCT	Gateshead
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]