Alun Davies AC/AM Gweinidog y Gymraeg a Dysgu Gydol Oes Minister for Lifelong Learning and Welsh Language



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Dear Lynne,

Thank you for your letter of 13 March requesting additional information on the additional learning needs transformation programme.

Costs in the Regulatory Impact Assessment on dispute resolution and independent advocacy

The information included in the Regulatory Impact Assessment relating to dispute resolution is based on data provided directly by SNAP Cymru. We have considered the evidence submitted to the Committee by SNAP Cymru and compared it with the information we received and officials are in contact with SNAP Cymru on the detail. My officials have scheduled a meeting with representatives from SNAP Cymru to discuss the relevant data and agree a way forward. This meeting will take place at the end of March. If this results in the need to make amendments to the Regulatory Impact Assessment, this will of course be done.

What I would say more generally on dispute resolution is that the evidence is clear and compelling in those authorities operating the approaches outlined in the Bill. There are fewer disagreements, because through the person centred practice model learners and parents are partners in the decision making process, with an equal voice and opportunity to raise concerns in real time. There is also a focus on resolving disputes quickly and locally, with a reduction in escalation of disputes to the Tribunal. Following the introduction of a new approach to dispute avoidance and resolution in Carmarthenshire, for example, they have seen a reduction from around 10 appeals to the Tribunal a year to around 1 appeal.

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Rydym yn croesawu derbyn gohebiaeth yn Gymraeg. Byddwn yn ateb gohebiaeth a dderbynnir yn Gymraeg yn Gymraeg ac ni fydd gohebu yn Gymraeg yn arwain at oedi.

We welcome receiving correspondence in Welsh. Any correspondence received in Welsh will be answered in Welsh and corresponding in Welsh will not lead to a delay in responding.

So, whilst I recognise and appreciate the reservations and nervousness, there is evidence that the new model works.

As regards, independent advocacy services under section 62 of the Bill. A similar provision is in place now under the current Special Educational Needs system (section 332BB of the Education Act 1996). There is no reason to believe there will be a notable difference in those wishing to access such services under the new system, particularly when you consider the effectiveness of the person centred practice approach. Therefore, there is no reason to believe there will be an increased demand on such services.

In terms of delivery of independent advocacy services on the ground, thought is being given to this on a cross-Government basis as part of our implementation planning work. .

## Pilot schemes undertaken in health boards on the role of the DECLO

I agree that the role of the Designated Education Clinical Lead Officer (DECLO) is crucial to the effective operation of the new system. We have to get it right. That is why we are working closely with partners to scope and co-construct the role and influence the wider context in which it will operate.

Work this financial year has focussed on developing pathways, through the Health Expert Group. The operational phase of the pilots will commence in the next financial year. I would like to take this opportunity to say a bit more about the Health Expert Group and our current thinking though.

The Group is made up of representatives from all health boards, from health professionals involved in supporting learners with ALN and from local authorities. It has been tasked specifically with advising us on the practical role of the health service in the new system and effective delivery of the new statutory requirements on NHS bodies, all of which will inform the next version of the ALN Code.

As regards the DECLO, the Group has advised that the role as set out in the current draft of the Code should be strengthened further by clarifying the strategic responsibilities of the role. The Group has recommended that the DECLO must be undertaken by a person directly under Board level to enable successful escalation of issues to Board level, have sufficient influence over Board decisions and the autonomy to champion ALN, and monitor compliance of the board's statutory duties.

The Group is clear that the DECLO should not be involved in delivery of day to day additional learning provision; these operational functions must be embedded in the whole service. The Group is currently setting out pathways for learners with ALN. This includes setting out the role of professionals in the delivery of additional learning provision. Significantly, it also includes recommending that health boards ensure a health coordinator is in place at the appropriate local level to signpost to the correct health professionals and act as a point of contact for schools, local authorities, parents and children and young people. I think this, in particular, has scope to have a real impact in practice.

The Group has advised that the whole model needs to be piloted at the same time. So we are working with health boards to develop projects to test this approach in the round during the next financial year. The Group are continuing to develop the detail, and are meeting again on 10 April.

I would be happy to keep the Committee updated on progress as we move into and through the operational phase of the pilots and as our thinking and plans develop in the light of the learning from the pilots.

## Pilot schemes for IDPs

There are no Individual Development Plan (IDP) pilots formally underway at present. The IDP pilots ended a number of years ago. However, the authorities involved in these pilots have continued to operate IDPs, they are now widespread in Carmarthenshire for example, and their uptake in other authorities is also increasing.

During the last 2 years, however, we have funded training and the production of resources to support the roll out of person centred practice, which is the approach underpinning IDPs. The intention being to prepare schools, FEIs and local authorities ahead of IDPs becoming a legal requirement. Uptake and feedback has been very positive.

An example of an IDP used in a live environment is included as an Annex to the current draft Code. The IDP Expert Group is considering best practice and the case for a standard template. As part of this it has called for evidence from all 22 local authorities. Again, I am happy to keep the Committee updated on progress in this regard.

Finally, I am pleased to inform the Committee that the *Supporting Learners with Healthcare Needs* guidance is being prepared for publication on 30 March. I have asked my officials to make arrangements for the Committee to receive an advance copy.

I hope this information is helpful. I look forward to discussing further with the Committee tomorrow.

Yours sincerely

**Alun Davies AC/AM** 

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