



Education, Health and Care Plan Desktop Review

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1 Introduction

- 1.1 In December 2022, Facilitate Consultancy were commissioned by Jean Stephens, Assistant Director of Wirral Council's Adult Social Care to conduct a comprehensive review of disability services across Wirral. The recommendations for workstreams following this review were approved by the Adults and Health Committee in June 2023, and a programme implementation plan developed.
- 1.2 Facilitate were recommissioned in 2023 to complete a desk review of Education, Health and Care Plans (EHCPs) for those aged 14-18, assessing coverage of the following areas:
 - (a) Any evidence of input from Adult Social Care
 - (b) Plans for training, volunteering and employment
 - (c) Plans for housing options once 18 years old
- 1.3 While this review was not focused on input from health care, individuals health needs and their care and support services were recorded to ensure a comprehensive understanding of the individual and the support they may require as an adult.
- 1.4 The aim of this desktop review was to enable Wirral Council to establish a baseline of current practice and identify tangible opportunities for age-appropriate improvement in line with the incoming All Age Disability Strategy. Furthermore, through analysis of costs of care and support packages for individuals, this review explores and forecasts potential opportunities for cost avoidance.
- 1.5 As of December 2023, there were 1293 young people aged 14-18 with an EHCP in Wirral. This report details the background, methodology, and analysis of this desk review of a sample of EHCPs and reviews from 25 young people (5 per age group).

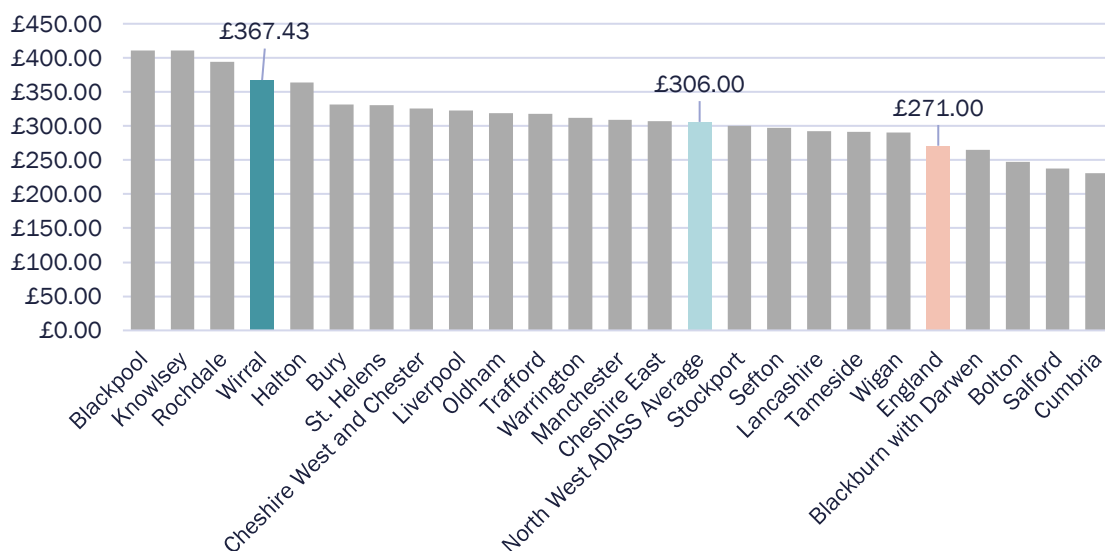
2 Background to the desktop review

- 2.1 **Disability Services in Wirral**
 - 2.1.1 Wirral are a high-spend local authority on adults with disabilities, and outcomes for people are not optimised. Total EHCP caseloads are forecasted to grow by up to 48% between 2023 to 2028¹. As these young people grow and transition into adulthood, there is likely to be an increased demand on Wirral's adult social care.
 - 2.1.2 A recent presentation from NW ADASS highlighted the findings from the annual Adult Social Care Activity and Finance Report. This showed that on average, the NW spends 12% more than the England average (£306 vs £271) for care for younger adults. Average spending per younger adult in the region also increased by 11.4% this year, more than for England as a whole (9.7%) with no evidence to suggest that spending is linked to deprivation.

¹ Delivering Better Value (2023) Wirral DBV diagnostic: Evidence summary

2.1.3 Chart 1 shows the average spending per adult 18-64 by local authority. As shown, spending varies across the region and Wirral, along with Blackpool, Knowsley and Rochdale, are high spenders, with Wirral averaging £367.43 per person, which is nearly £100 more than national average.

Chart 1: Current expenditure on long and short term care for adults 18-64 (2022/23)



2.2 The legal requirements of EHCPs and support to prepare for adulthood

2.2.1 An EHCP is a legal document, produced by a local authority, which describes the special education, health and social care needs of a child or young person up to the age of 25, where their needs cannot be met by some additional support within a mainstream education setting. EHCPs set out the support required to meet those needs as well as the desired outcomes.

2.2.2 The requirements for EHCPs are set out in the Special Educational Needs and Disability Regulations 2014². Regulation 12(1) describes what an EHCP (and any appendices) should include, summarised as:

- (a) The views and aspirations of the child/young person and their parents/carers;
- (b) Their special education needs, and any health care and social care needs relate to their special education needs;
- (c) The outcomes sought;
- (d) The special educational, health care or social care provision required;
- (e) The type of school to be attended;
- (f) Any details of a direct payment; and
- (g) A list of the people who have provided advice to contribute to EHCP development.

2.2.3 Under these Regulations, local authorities have a clear duty to assist young people in preparations for adulthood, particularly in review from Year 9 onwards. Regulation 12(3) states:

² <https://www.legislation.gov.uk/ukxi/2014/1530/contents/made>

“Where the child or young person is in or beyond year 9, the EHC plan must include within the special educational provision, health care provision and social care provision specified, provision to assist the child or young person in preparation for adulthood and independent living.”

2.2.4 The duties of adult social care services are then set out within the Care Act 2014 and explained by the SEND Code of Practice³. This Code of Practice is statutory guidance setting out what preparing for adulthood support should practically look like, and states that local authorities are required to co-operate between children and adult services to strategically plan (p. 122) and promote the integration of care and support so that young adults are not left without care and support as they transition to adult services (p.52).

2.3 The benefits of preparing for adulthood planning

2.3.1 Individualised planning and preparations for adulthood bring enormous benefits to individuals, boosting their self-esteem, independence, and outcomes more broadly⁴. A National Audit Office report⁵ demonstrated that – in addition to quality-of-life improvements – equipping a young person with skills towards greater independence and employability could reduce their long-term support needs, and reducing long-term needs could decrease costs to the public purse by around £1 million per person over their lifetime (p. 10).

2.3.2 Based upon the Regulations, NDTI Guidance and the findings of the National Audit Report study, the EHCP and review sample were reviewed for evidence of:

- (a) any involvement from a representative of Adult Social Care.
- (b) planning for education and employment towards preparing for adulthood
- (c) planning for independence and thinking about housing options towards preparing for adulthood

2.3.3 By reviewing the EHCP sample across these 3 areas, we aim to establish alignment with the SEND Code of Practice and identify where there are opportunities for improvement in how Wirral support young people to prepare for adulthood. This will ultimately improve outcomes for individuals and reduce long-term needs and thus cost to adult social care in the long term.

3 Methodology

3.1.1 This review took place between October 2023 and January 2024.

3.1.2 As agreed in the Statement of Work, a sample of 25 EHCPs were reviewed, five from each age cohort between 14 and 18. As many EHCPs were from several years ago, annual reviews for each young person were also considered.

³

https://assets.publishing.service.gov.uk/media/5a7dcb85ed915d2ac884d995/SEND_Code_of_Practice_January_2015.pdf

⁴ <https://www.ndti.org.uk/resources/preparing-for-adulthood-all-tools-resources/pfa-case-studies-stories>

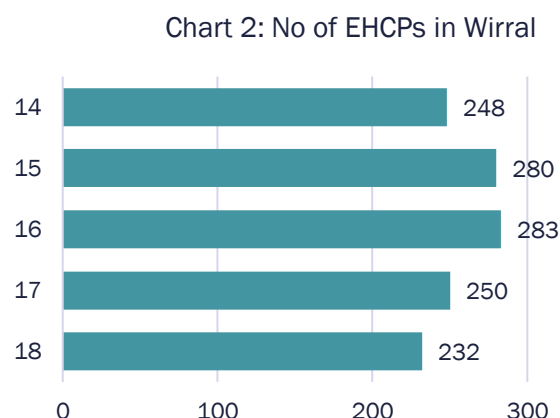
⁵ <https://www.nao.org.uk/wp-content/uploads/2012/01/841303f2-e9b3-4916-b217-583edffe633a1.pdf>

3.2 Data Gathering

- 3.2.1 It was initially planned that Wirral Council would supply a sample of 25 anonymised EHCPs. However, due to capacity constraints within the Council, providing an anonymised sample was not feasible, and so an alternative plan was developed. Under this new approach, Facilitate virtually met with the Systems Lead Officer for Children’s Services to enable Facilitate to capture the data required for the review without handling any identifiable client information. Data for those aged 15-18 was collected over 4 sessions. The data for five 14-year-olds was provided in the form of anonymised case review files that were developed as part of an ongoing review of EHCPs within Children’s services.
- 3.2.2 This approach required that a Data Protection Impact Assessment (DPIA) be developed. The DPIA agreed that Facilitate would not handle or store any identifiable information about the young people. All other data that was collected was to be stored securely and require two-factor authentication to access.

3.3 Sampling

3.3.1 As of December 2023, there were 1,293 young people aged 14-18 with an EHCP in Wirral. Chart 2 shows a breakdown by age. The sample of 25 young people was therefore 1.93% of the total people within the cohort with an EHCP.



3.3.2 Purposive sampling⁶ (as opposed to selecting cases at random) was used to ensure alignment with the aims and objectives of this review.

3.3.3 We firstly aimed for a diverse range of primary and secondary support needs, then next looked to ensure a range across demographic factors, such as gender, ethnicity, location, and school type. To ensure a range of needs and demographics, many sampled young people were assigned to a cohort based on their age at review, rather than age as of today. A breakdown of sampled cases is available in Appendix 1. This sample was not intended to be representative of the broader population, rather to reflect the diverse range of experience and offer insight into potential opportunities across the area.

3.3.4 It is worth noting that the 14-year-old cohort all have comparatively fewer complex needs than the other age cohorts. This is because we were supplied with anonymised case review files and so had limited control over the sample in terms of looking for a range of needs.

3.4 Analysis

3.4.1 The analysis for this report has been modelled on the methodology of the National Audit Office’s study into SEND provision and potential cost savings (discussed in the introduction to this report). To do this, data on cost of care packages by age, primary support reason, secondary support reason, and hours of care each week was used to establish cost of care per service type by support reason(s) and level of need.

3.4.2 In consultation with a qualified social worker, we determined the likelihood of that person requiring care and support from adult social care, and then the level of need they will likely require. This was done by considering the young person’s High Need Funding Bands for

⁶ <https://journals.sagepub.com/doi/abs/10.1177/1744987120927206>

SEND, their primary and secondary support reason and needs descriptions. With access only to the EHCPs and review documents, the estimates of the qualified social worker are based on the information that was available, and thus are estimates for the purposes of this desk review.

3.4.3 Appropriate services for each young person were identified and hours of care quantified where needed. This was done first to project what support a person may need if the necessary preparing for adulthood planning is not done, and second to project what they may need if they transition to adulthood with considered planning.

3.4.4 Assumptions for Cost of Care Packages:

- (a) Where young people currently receive care and support from Adult Social Care, these care packages will, at a minimum, continue. Six young people have open packages of care with adults at an average cost of £249.86 per week, although many are still in education.
- (b) Care and support packages will change when a young person leaves education. 24 of the 25 young people are still in education, including 5 of the 6 young people who receive adult social care.
- (c) Projections of the support likely required is theoretical for the purposes of this review. However, it should be noted that there needs to be sufficient capacity within the market to meet demand if services were used as projected.

3.5 A note on systems and processes

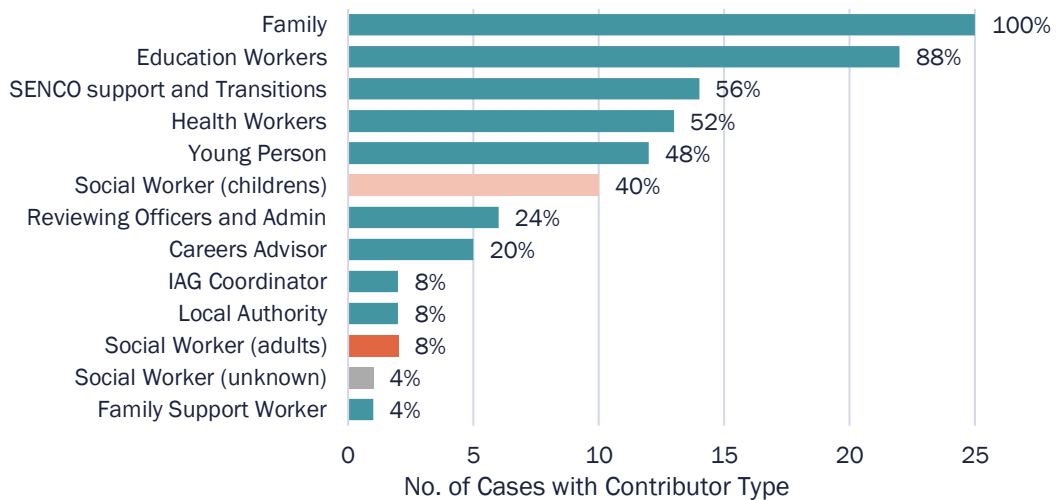
3.5.1 An assumption was made for the purposes of analysis that the documents were representative of the conversations had during assessments and review meetings. It is likely that on some occasions an outcome or action may not have been recorded despite being discussed. Due to this, the findings of our analysis may not accurately reflect the conversations. Regardless, recording practices ought to be comprehensive. Recording outcomes and actions is needed so everyone can look back at the next review and see if progress has been made – if there is no record of the conversation, progress is not going to be trackable.

4 Involvement from Adult Social Care

4.1 Two (8%) of the 25 cases had clear evidence of involvement from adult social care within an EHCP and/or a review. This was measured by the number of cases where a social worker from adults was included in the statutory list of contributors at any age. Both involvements from adult social workers were once the young person was already 18+. Chart 3 shows the number of cases that had at least one contribution from each individual/group listed.

4.2 It should be noted that there was one case where there was a social worker listed as a contributor, but they could not be identified as either adults or children's. Also, three cases have involvement of the 'Local Authority' but it was not clear from which area of the council they represented. 14 of the cases listed involvement from a SENCO or Transitions coordinator, although this planning appeared to be largely to do with transitions between educational settings with limited planning for transition to adulthood.

Chart 3: Contributors to the EHCPs and Reviews



- 4.3 Ten of the young people (40%) had children’s social workers listed as contributors to at least one EHCP and/or review. In addition, 14 young people were, at some point in their lives, known to children’s social care, for example the Children with Disabilities Team, as a Looked After Child or they had a Team Around the Family. As of December 2023, seven young people have open packages of care with adults.
- 4.4 Appendix 2 visualises both adults and children’s social care involvement for each of the 25 young people. This shows that all of the seven young people open to adult services (with adult social care needs) were known to children’s social care at some point in their life. SCIE⁷ suggests that many young people who come to the attention of adult social care at or post-18 are already known to children’s services. This is concurrent with our sample of 25. It would therefore be presumed that at least seven cases ought to have involvement from ASC while 14-18, as they were likely to have eligible needs for ASC. As shown in Chart 3, only two EHCP and/or reviews in fact documented adults social care involvement.
- 4.5 Given the requirements for collaboration between children’s and adult services in the SEND Code of Practice, this finding represents a clear opportunity for improvement. SCIE⁸ discuss how early identification of young people who will likely require adult social care can ensure an authority has time to put services in place, so care and support best meets the needs of the young person. If this does not happen, care and support can sometimes come at a greater financial cost to the local authority than if transitions have been planned in advanced.
- 4.6 SCIE⁶ outline a range of practice examples for how authorities can work to proactively identify young people, and how social work teams can realise the change required to bring this into their practice. It is recommended that these practice examples are incorporated in a Transitions Protocol for Wirral that sets out the roles and responsibilities of organisations and services to ensure young people are made known to adult social care.

⁷ <https://scie.org.uk/care-act-2014/transition-from-childhood-to-adulthood/early-comprehensive-identification/>

⁸ <https://www.scie.org.uk/care-act-2014/transition-from-childhood-to-adulthood/early-comprehensive-identification/#:~:text=In%20current%20practice,the%20adult%20statute>

4.7 Finally, it is worth noting that less than half (12/25) of cases evidenced the voice of the young person as contributors to their EHCP or review. Again, this may be due to recording issues, however as Wirral moves towards strength-based practice within adult social care, it is important all assessments and reviews are coproduced with the individual, so they have control over their day-today life⁹.

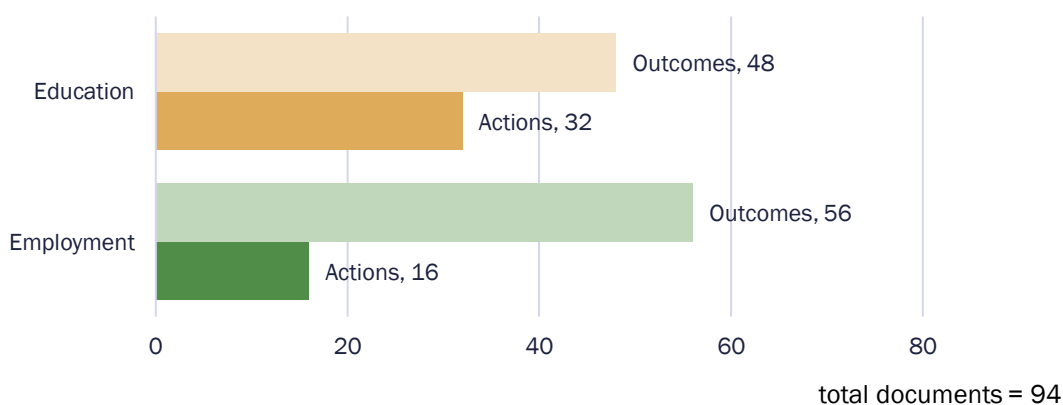
5 Education and Employment Planning

5.1 The EHCP and review documents were assessed for evidence of outcomes and actions towards supporting the young person in education, training, and employment. Any reference to an outcome or an action was accepted as being in line with the ability and age of the individual. The education, training and employment outcomes and actions for each individual are visualised by age in Appendix 3.

5.2 As shown in Chart 4, 48 of the 94 documents described educational or training outcomes, however, only 32 of these also described actions towards achieving these outcomes.

5.3 Similarly, only 16 of the 94 documents described actions towards gaining employment, whereas 56 described employment outcomes. In terms of cases, this means 11 young people saw no actions towards their employment outcomes despite the outcomes being recorded.

Chart 4: Documents Describing Education and Employment Outcomes and Actions



5.4 Five of the cases had careers advisors listed as a contributor to an EHCP and/or review at some age (denoted in Appendix 3 as a green star), however this did not appear to have had an impact on the level detail included in the review documentation, again highlighting the need to emphasise good recording practices.

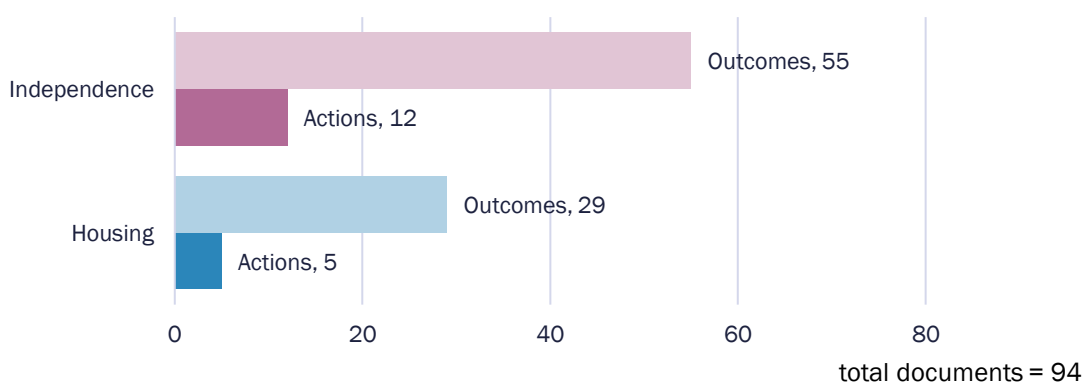
⁹ <https://www.legislation.gov.uk/ukpga/2014/23/part/1/crossheading/general-responsibilities-of-local-authorities/enacted>

5.5 In Wirral, 3.1% of adults with a learning disability were in paid employment in 2021¹⁰. This compared to 5.1% across England¹¹. NDTI’s published case study of Wolverhampton City Council sets out how they increased the percentage of those known to adult social care in paid employment, from 2% to 9.7% over 4 years. This was achieved through a comprehensive supported employment programme that allows for good support and fostered a culture of early planning. It is therefore recommended that a Supported Employment Framework for Wirral be developed.

6 Housing and Independence Planning

6.1 Independence outcomes included personal care and self-help skills, using public transport and problem solving in the community. Chart 5 sets out the number of documents that outline independence and housing outcomes or actions.

Chart 5: Documents Describing Independence and Housing Outcomes and Actions



6.2 Nearly half of documents (43/94) did not set out any actions to support independence despite independence outcomes being discussed. Developing the skills to live as independently as possible is a key enabler to people having independence in the future.

6.3 Of the 94 documents reviewed, 29 described outcomes towards housing, whereas only 5 described actions towards achieving these goals. There was little evidence to show aspirations for future housing requirements and there was little or no evidence of conversations about housing options for those with the most complex needs.

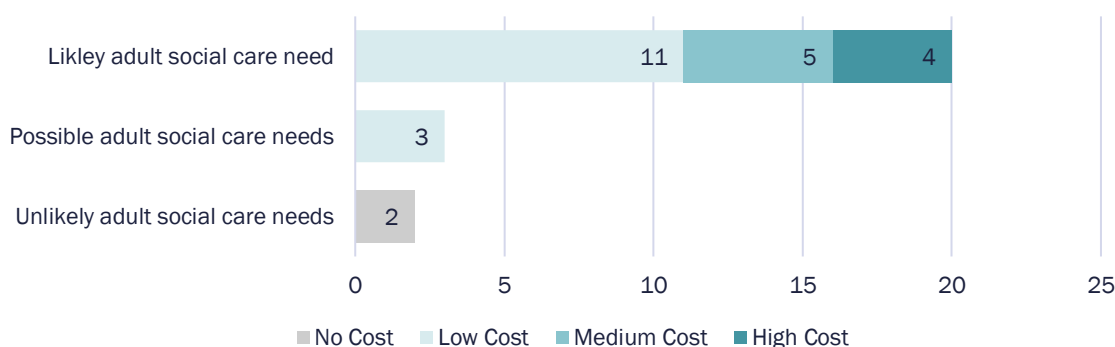
¹⁰ Wirral Intelligence Service (2021)

¹¹ Office for National Statistics (2022) Census 2021

7 Predictive Costings to Adult Social Care

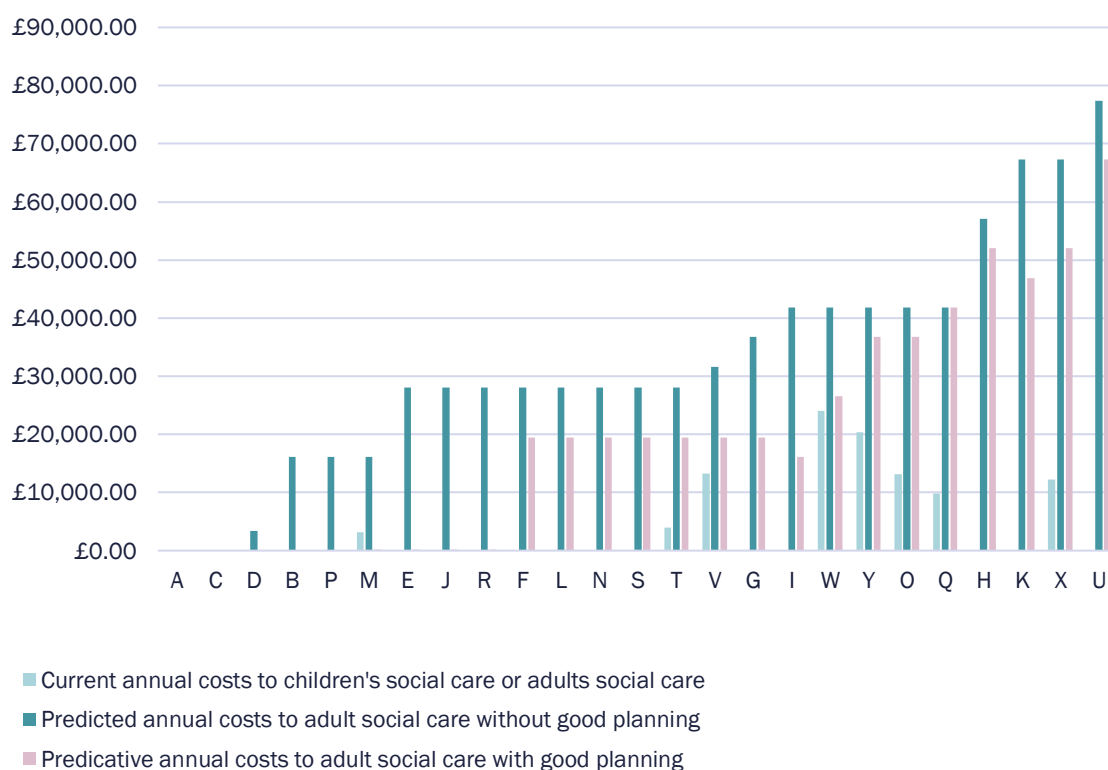
- 7.1 As described in the methodology section of this report, a qualified social worker was consulted to estimate the likelihood of the young people being eligible for adult social care after education, and the likely cost of their care and support package should they require it. As shown in Chart 6, 20 of the young people were estimated to likely require adult social care, with a quarter of these likely requiring high-cost packages of care and support. Two young people were estimated to need no adult social care.

Chart 6: Likelihood of being eligible for adult social care and predictive cost bracket



- 7.2 It was projected that good preparing for adulthood planning could support 15 of these 25 individuals into employment, and 17 into housing options with more independence, for example, general needs housing or Shared Lives. Through improved access to employment and independent housing, seven people saw their need for adult social care cease.
- 7.3 Chart 7 shows the predictive annual cost of care packages for each individual, without good preparing for adulthood planning, and then with. It also shows, for reference, current cost of social care packages where they are in place.
- 7.4 It is worth noting that 24 of the 25 young people are still in education and living at home so many of their needs are met by education and have no involvement from social care. Once these people leave education, some of these needs may require support from social care.
- 7.5 The mean average reduction in cost of care package following considered planning was 49%. This is an average annual saving of £13,300 per person per annum. In total, it is estimated that £3.35m in costs could be avoided over a ten-year period for this sample of 25 individuals concurrent to improving outcomes.
- 7.6 The largest annual reduction in cost of care packages was £27,090. This was calculated for number of individuals who have a variety of needs, who, without good planning, may living within Supported Living, which is likely not an optimal outcome. Based on the accessible information re needs, it is projected that these individuals may benefit from living in general needs housing with assistive technology and could maintain a job and be involved in their communities with the right preparing for adulthood support planning.

Chart 7: Actual and Predictive Annual Costs of Adult Social Care Care and Support



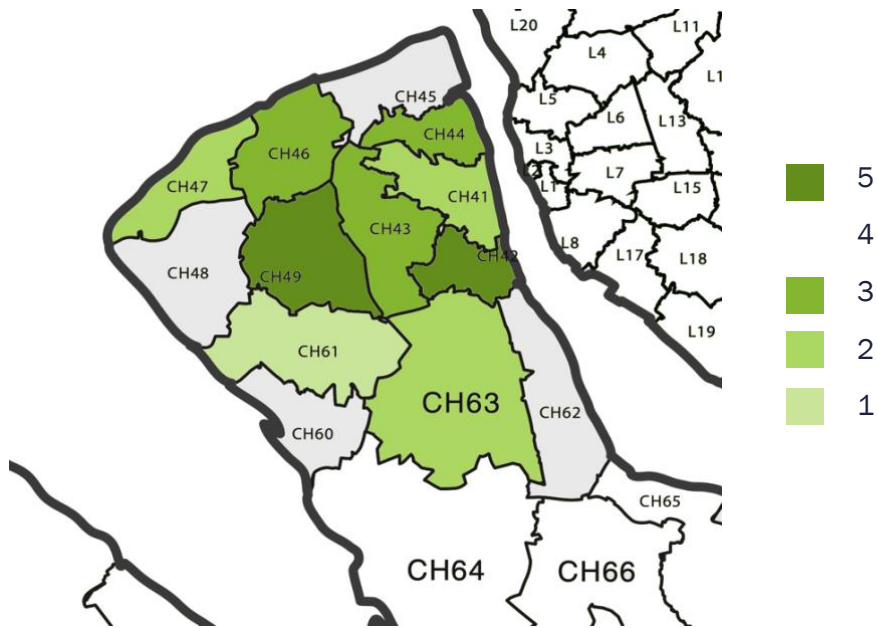
8 Recommendations

- 8.1 Whilst the sample size was small and not representative, additional data and evidence as discussed in the introductory sections of this report suggest there are improvements that can be made in preparing for adulthood and managing the transition into Adult Social Care where this is appropriate. This could have a positive impact both on the young person and provide cost-avoidance opportunities for Wirral.
- 8.2 The recommendations set out in this report should be considered to improve processes and engagement for both Children's and Adult Services enabling young people and their families to prepare for adulthood in a timely and effective manner. The recommendations of this report are to:
- (a) Coproduce a transition protocol for social care to outline more robust working arrangements between children and adult services, with a clear process to identify as early as possible those who will likely need adult social care.
 - (b) Revive the transitions operational group, reviewing terms of reference and developing and implementing a dashboard to ensure there is a clear and consistently used mechanism to identify young people likely to need support from adult social care and use the intelligence to plan and inform commissioning.

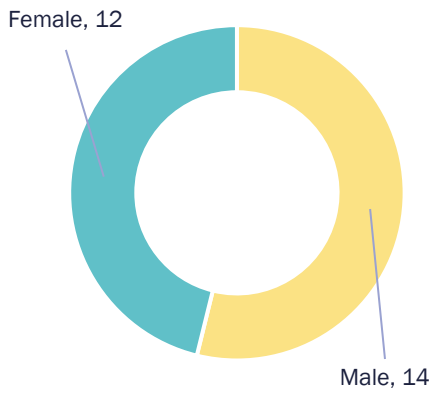
- (c) Review and refresh the EHCP and review document to provide a clear framework to evidence the engagement of a wide range of professionals in supporting young people to prevent, reduce and/or delay the need for long term care and to address the inconsistency in documents that became evident during this review.
- (d) Implement the Support Employment Framework to extend employment opportunities for disabled people.
- (e) Promote the housing strategy and implement the associated delivery plan to broaden the range of housing options for disabled people.
- (f) Further evidence the cost benefit of early engagement and planning by identifying a cohort of young people to capture their transitions journey into adulthood and evidence outcomes from an effective transitions process.

Appendix 1: Demographics of Case Studies

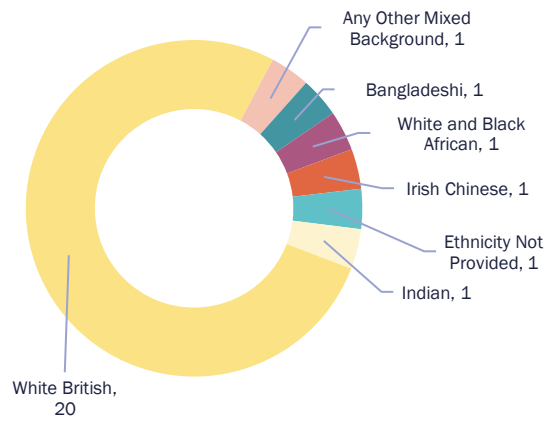
Location Density



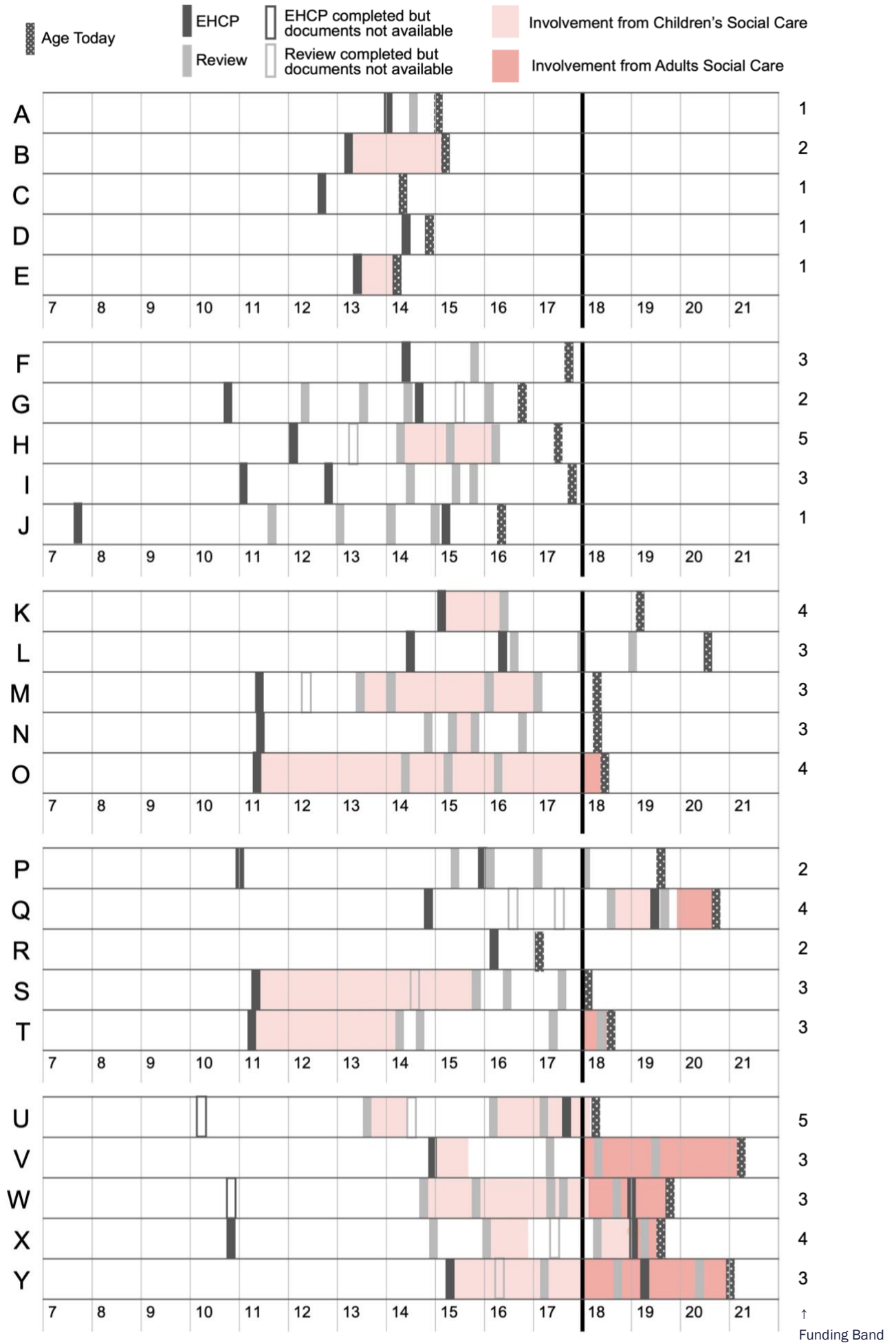
Gender



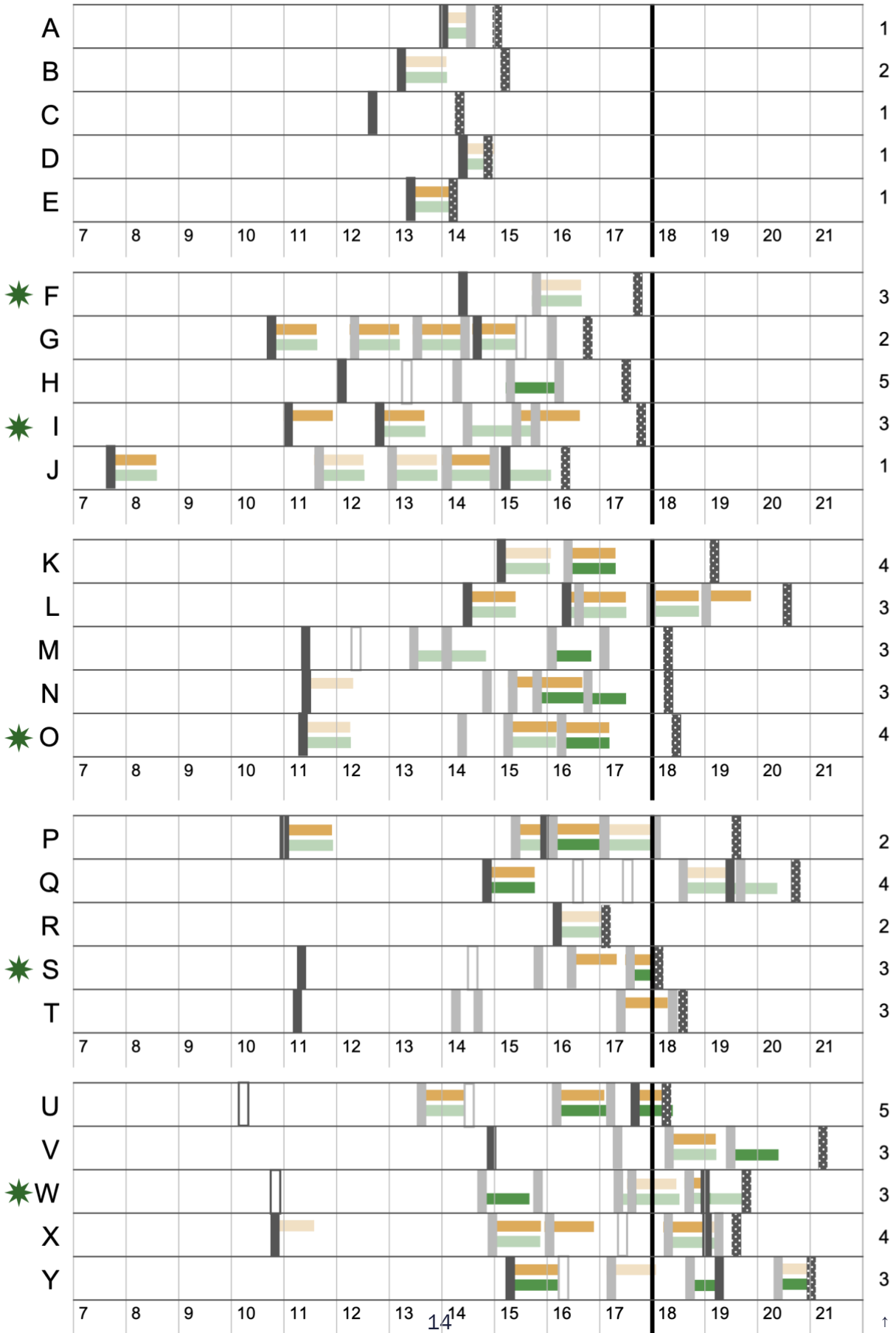
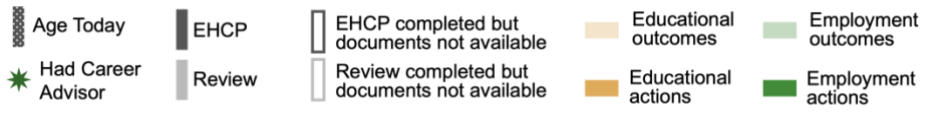
Ethnicity



Appendix 2: children's and adult social care involvement



Appendix 3: Education and Employment Planning



Appendix 4: Independence and Housing

