NHS
Bath and North East Somerset, Swindon and Wiltshire
Integrated Care Board

Designated Clinical Officer (DCO) for Special Educational Needs and / or Disability (SEND)

Annual Report 2024/25

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BSW ICB Designated Clinical Officers

Purpose

The purpose of this report is to provide an overview of the role and responsibilities of the Designated Clinical Officer's (DCOs) for Special Educational Needs and / or Disability (SEND) working at NHS Bath and North East Somerset, Swindon and Wiltshire (BSW) Integrated Care Board (ICB).

The report will provide assurance and inform Senior Leaders across BSW about functions and accountability of the Integrated Care Board (ICB) in relation to children and young people (CYP) aged 0-25 years with Special Education Needs and/or Disability (SEND) and provide commissioners with an indication of future resources that may be required for the ICB to fulfil its responsibilities in relation to SEND.

The reporting period for this report is April 2024 to March 2025. It should not be read or considered in isolation, and for ease, additional reading material and supporting documents have been included at the end, in the appendices.

Legislation and Guidance

The Children and Families Act (2014) introduced significant reform to the system for children and young people (CYP) with special educational needs and disabilities (SEND). It describes the requirement for Local Authorities (LAs) and health partners to collaborate both strategically and operationally to support improved outcomes for CYP with SEND, promoting the integration of education and training provision with health provision where this would support increased well-being for CYP with SEND, and establishing joint commissioning arrangements to ensure education, health and care services are planned, considered, agreed and jointly commissioned for individuals with SEND.

The Children and Families Act (2014) also requires the ICB to cooperate with the LA when undertaking Education, Health and Care Needs Assessments (EHCNA) and ICBs must agree the health provision specified in Section G of all Education, Health and Care Plans (EHCPs).

The strength and effectiveness of these local area arrangements in improving outcomes for CYP with SEND are reviewed and evaluated during a local area SEND Inspection which is carried out jointly by Ofsted and the Care Quality Commission (CQC).

The Health and Care Act (2022) transferred all relevant statutory duties for SEND from Clinical Commissioning Groups (CCGs) to ICBs and clarified that ICBs should continue to deliver the commissioner duties set out in Part 3 of the Children and Families Act (2014) and the SEND Code of Practice (2015) which included having an Executive Lead for SEND to ensure statutory duties are given sufficient focus and scrutiny at Board level, and in BSW ICB this role is undertaken by the Chief Nurse Officer (CNO).

The SEND and Alternative Provision (2022) Green Paper identified three current challenges facing the SEND system: poor outcomes for CYP, negative experiences and poor value for money. The SENDAP Improvement plan that followed (2023) aimed to strengthen the accountability of health services who are responsible for delivering support for CYP with SEND and a commitment to continue to review and bring together the existing functions of Designated Clinical Officers and an updated DCO Handbook developed by the Council for Disabled Children (CDC) is currently awaiting publication.

The Role of the Designated Clinical Officer (DCO)

The role of the Designated Clinical Officer (DCO) was established through the send reforms and described in the SEND code of practice (2015) which intended to support and facilitate stronger joint working across LAs and ICBs (previously Clinical Commissioning Groups) to ensure improved outcomes for CYP with SEND whilst also fulfilling statutory duties.
Whilst fundamentally the DCO duties remain the same, there has been significant change over the last decade, with wider policy transformation influencing and impacting on the role. For example, the Health and Care Act (2022) which saw 106 Clinical Commissioning groups (CCGs) transition into just 42 Integrated Care Boards (ICBs) resulting in most ICBs covering a much larger footprint previously held by multiple CCGs, as well as multiple Local Authorities (LAs) and NHS provider services.

The DCO role and it's functions are crucial in supporting ICBs to deliver responsive, integrated and effective support for CYP with SEND, and to ensure the ICB remains compliant with the SEND legislation.

Bath and North East Somerset, Swindon and Wiltshire (BSW) Integrated Care Board (ICB) employ two full time Designated Clinical Officers (DCOs) who cover all three locality areas which supports a consistent and seamless approach to DCO presence and involvement across the system. The DCOs are both Qualified Nurses who collectively have over 60 years NHS experience and over 15 years experience of working as DCOs across the Special Educational Needs and Disability (SEND) landscape. Both DCOs are educated to degree level and have completed the National Development Team for inclusion (NDTi) SEND Leadership Course, and IPSEA Legal training, one of the DCOs has also successfully completed a MSc in Leadership and Management in Health and Social Care. Both are active members of NHS England's Regional DCO Network and Expert Reference Groups as well as the Southwest Regional SEND network which brings together system partners from education, health and social care, working across the region to inform best practice and service improvement. Their roles are multi-faceted and complex, requiring confidence and adaptability to work both operationally and strategically across various organisations and agencies, which include commissioning, provider and voluntary services.

The DCOs annual work plan aligns with their identified priorities and a copy of their 'Priorities on a Page' document can be found in the appendices.

SEND Inspection Framework

In January 2023 a new SEND inspection framework was published and the new processes it identifies became operational. A copy can be found here Area SEND: framework and handbook - GOV.UK (www.gov.uk). Inspections are now being undertaken over a three-week period (previously two), with inspectors considering how well local area partnerships operate and work together to improve the experiences and outcomes of C&YP and their families with SEND.

Inspectors will do this in several ways, including asking C&YP with SEND, their parents/carers, and practitioners for feedback (surveys and in person) and evaluating case records for individual children, in many instances alongside practitioners who know the cyp well.

SEND Inspection Outcome Criteria

The framework provides a clear list of the evaluation criteria inspectors will use to reach a judgement of local area performance. The 3 possible resulting judgements are:

Inspection Outcome	**Subsequent Meetings, Activities and Reviews**
The local area partnership SEND arrangements typically lead to **positive experiences and outcomes** for C&YP with SEND. The local area partnership is taking action where improvements are needed.	Engagement Meetings. **Full Inspection usually within 5 Years**.
The local area partnership SEND arrangements lead to **inconsistent experiences and outcomes** for C&YP with SEND. The local area partnership must work jointly to make improvements.	Engagement Meetings. **Full Inspection usually within 3 Years**.
There are **widespread and / or systemic failings** leading to significant concerns about the experiences and outcomes of C&YP with SEND, which the local area partnership must address urgently.	Engagement Meetings. **Submission of Priority Action Plan**. **Monitoring Inspection usually within 18 months**. **Full re-inspection usually within 3 Years**.

BaNES Swindon and Wiltshire (BSW) Inspections	**BaNES** – Old Inspection format undertaken **18th – 22nd March 2019**, no significant concerns.	**Swindon** – Old Inspection format, Written Statement of Action (WSOA) last re-inspection **11th – 12th October 2021**, significant progress made.	**Wiltshire** – New Inspection format undertaken **30th September – 18th October 2024** Typically Positive Outcomes.

National SEND Inspection Outcomes; Comparison for 2024 and 2025

April 2024:
38 out of 153 Inspections have been notified
30 Inspection Reports are in the public domain
7 out of 30 (23.3%) Typically Positive Outcomes
14 out of 30 (46.7%) Inconsistent Outcomes
9 out of 30 (30%) Widespread System Weakness

April 2025:
64 out of 153 Inspections have been notified
56 Inspection Reports are in the public domain
15 out of 56 (26.8%) Typically Positive Outcomes
27 out of 56 (48.2%) Inconsistent Outcomes
14 out of 56 (25%) Widespread System Weakness

SEND and EHC Plans – A National Overview

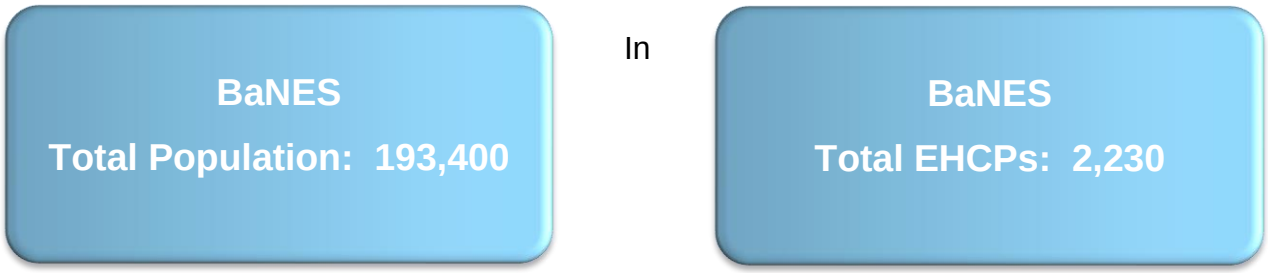
On June 20th 2024, the government published the most recent SEN 2 data which identifies in England there are over **1.6 million pupils who have special educational needs (SEN),** an increase of **101,000** from 2023 which includes children and young people (CYP) with an Education, Health and Care Plan (EHCP) and those receiving SEN support.

The data also identifies that nationally there were **138,242** requests made for EHC Needs Assessments in 2024, an annual **increase of 23,760** and a 20.8% rise since 2022, with **84,428 new EHC Plans issued during 2023** resulting in a total of **576,474** CYP having an Education, Health, and Care Plan (EHCP) in England, an increase of **11.5%** since 2023.

The most common type of need identified for CYP receiving SEN support (CYP with no EHCP) is speech, language, and communication, and for those with an EHC Plan the most common area of need is Autism (data accessed online) via: Special educational needs in England, Academic year 2023/24 - Explore education statistics - GOV.UK

SEND and EHC Plans - Local Area Demographics

Bath and North East Somerset (BaNES)



BaNES the total population is estimated to be **193,400** (Population Census 2021 accessed here: Population and household estimates, England and Wales: Census 2021 - Office for National Statistics (ons.gov.uk) of which **30,197** is estimated to be of 'school age'.

BanES Council currently have **2,230** CYP with an EHCP, **an increase of 263** since 2023 and attributed to the following age groups (SEN2 data 2022, 2023 and 2024):

	2022	2023	2024
Aged under 5yrs	**54**	**94**	**92**
Aged 5-10yrs	**632**	**714**	**730**
Aged 11-15yrs	**609**	**705**	**810**
Aged 16-19yrs	**334**	**378**	**482**
Aged 20-25 yrs	**79**	**76**	**116**

Swindon

Swindon
Total Population: 233,400

Swindon
Total EHCPs: 2,573

In Swindon the total population is estimated to be **233,400** (Population Census 2021) of which **34,979** is estimated to be of school age.

Swindon has a total of **2,573** CYP with an EHCP, **an increase of 249** since 2023 and attributed to the following age groups (SEN2 data 2022, 2023 and 2024):

	2022	2023	2024
Aged under 5yrs	**117**	**103**	**122**
Aged 5-10yrs	**743**	**822**	**891**
Aged 11-15yrs	**801**	**885**	**987**
Aged 16-19yrs	**461**	**427**	**487**
Aged 20-25 yrs	**142**	**87**	**86**

Wiltshire

Wiltshire
Total Population: 510,400

Wiltshire
Total EHCPs: 5,536

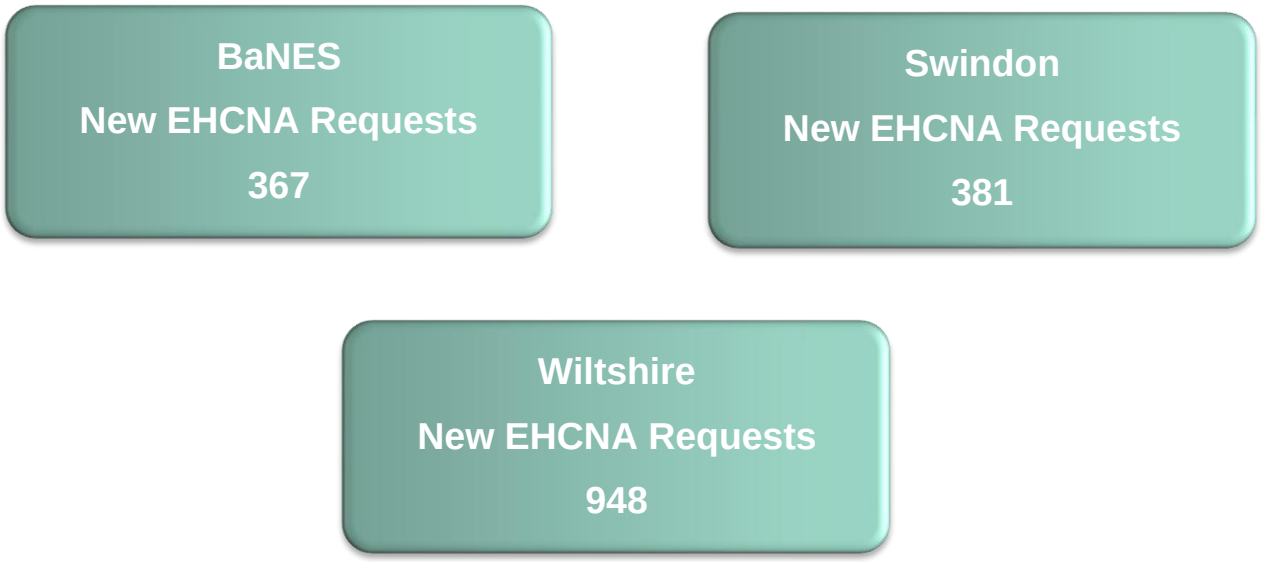
In Wiltshire the total population is estimated to be **510,400** (Population Census 2021) of which **76,198** is estimated to be of school age.

Wiltshire has a total of **5,536** CYP with an EHCP, **an increase of 776** since 2023 which are attributed to the following age groups (SEN2 data 2022, 2023 and 2024):

	2022	2023	2024
Aged under 5yrs	**121**	**197**	**253**
Aged 5-10yrs	**1557**	**1634**	**1873**
Aged 11-15yrs	**1690**	**1892**	**2231**
Aged 16-19yrs	**804**	**890**	**1011**
Aged 20-25 yrs	**115**	**147**	**168**

Aligned to the national data, locally BSW is also seeing an increasing trajectory of requests being made for Education, Health and Care Needs Assessments (EHCNA) which is placing additional demands on health services who are required to provide health and medical advice for CYP known to them within 6 weeks to contribute towards the EHC Needs Assessment, recognising that one CYP may be known to multiple health professionals, for example the Community Paediatrician, Speech and Language Therapist, Occupational Therapist, Physiotherapist and the Child and Adolescent Mental Health Service (CAMHS).

The SEN2 Data published in June 2024 identifies the following number of new EHC Needs Assessments that were agreed:



Quality Assurance

The DCOs have developed a Quality Assurance Framework which details the processes they follow to ensure health sections of all draft EHCP's are of the highest quality, factually accurate and meaningful before they're shared with CYP and their families (see appendices for full framework). This can involve attendance at the weekly statutory SEND panels, review of medical records and any advice and information received as part of the EHCNA to ensure that the information populated in health sections (C and G) of all new draft EHCPs is a concise, meaningful, and a factually accurate reflection of the CYPs current health needs in relation to their special educational needs. In addition to this, the DCOs actively encourage LA's to request feedback and quality assurance of existing EHCPs at annual reviews and will always contribute to SEND Tribunal appeals when there is a health element for determination, to ensure that these sections remain up to date, accurate and fit for purpose. The impact of this focus on QA is increased satisfaction from CYP and their families with the health content of plans.

The templates that DCOs use to deliver their feedback have been developed pragmatically to clearly identify the rationale for the suggested wording. This ensures that the specific health needs are clearly identified from the information provided rather than generalised descriptions or medical jargon being used. It also means that information can be easily shared with the CYP and their families, supporting greater understanding and transparency around decision making and engaging a collaborative approach to EHC Plan development.

The DCOs prepare a monthly 'Highlight Report' which is shared widely and evidence activity data such as the number of draft plans quality assured by the DCOs, the number of contributions made towards an Annual Review, and the number of occasions when the DCO has worked with families to coproduce wording (an example can be found in the appendices).

These reports identify a significant increase in DCO quality assurance activity, from **1847 EHC Plans in 2023 / 24**, more than doubling to **4,091 EHC Plans in 2024 / 25, an increase of 2,244.**

In 2023/24

The DCOs provided 1847 Quality Assurance contributions

In 2024 / 25

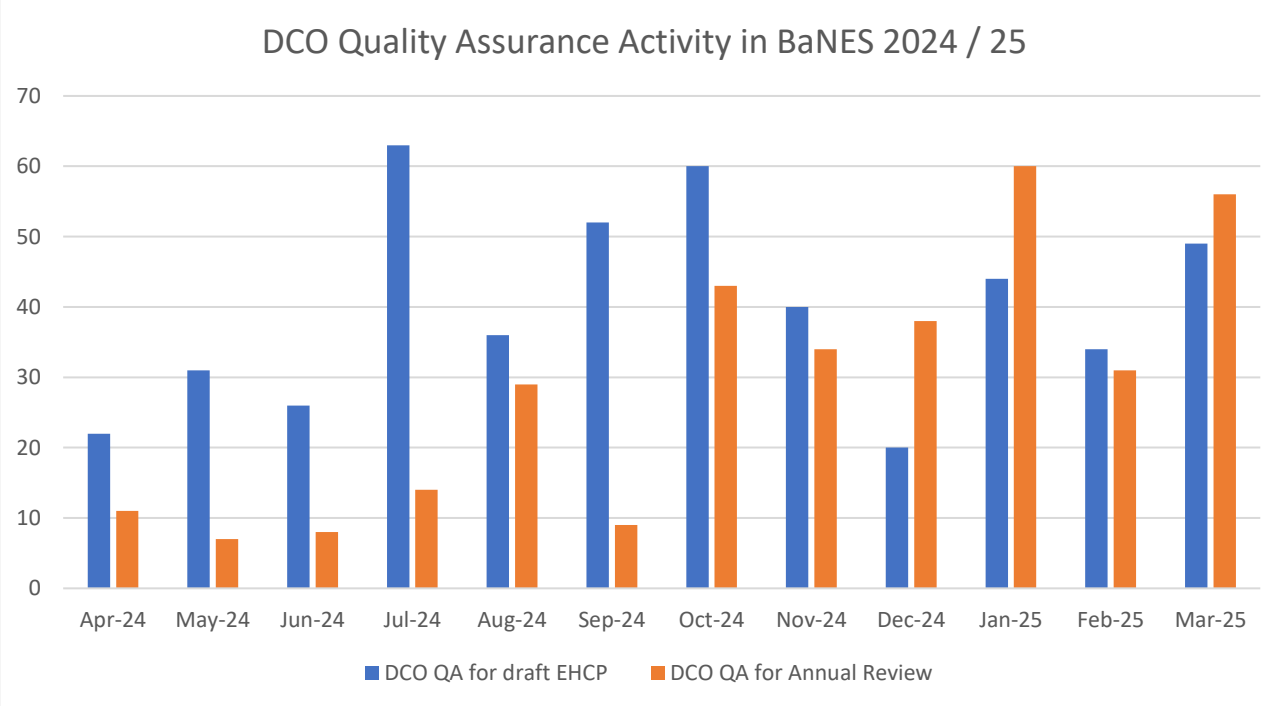
The DCOs provided 4,091 Quality Assurance Contributions

Local Area DCO Quality Assurance Activity

The graphs below detail the data taken from the monthly DCO Highlight report for each local area. They identify (in blue) the number of written quality assurance advice and agreed wording provided by the DCOs for the health sections (C and G) of draft EHCPs between April 2024 and March 2025, and also identify (in orange) the number of contributions made as part of an EHCP annual review for CYP with existing health needs. This process is explained further in the DCO QA Framework.

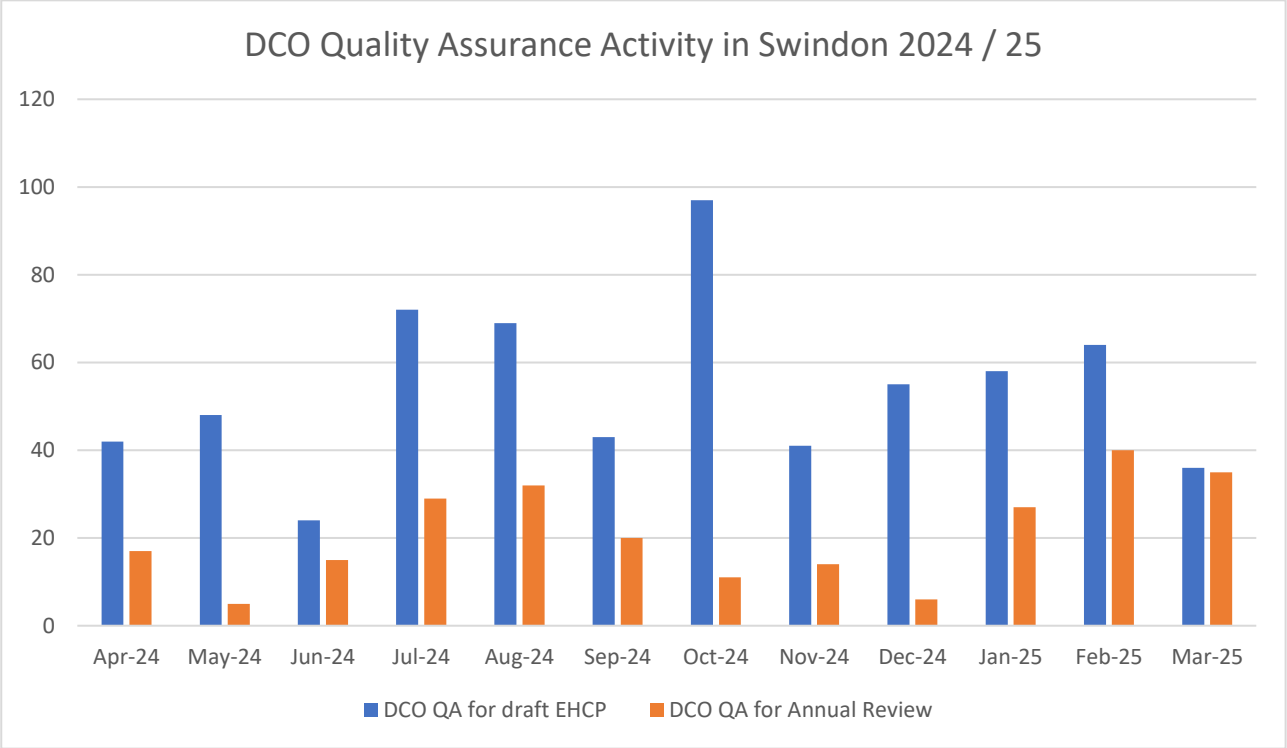
BaNES

The graph below demonstrates that between April 2024 and March 2025 **the DCOs provided a total of 817 QA contributions** which comprised of **477 contributions** of agreed wording for the health sections of draft EHC plans, and **340 contributions** to an Annual Review in BaNES.



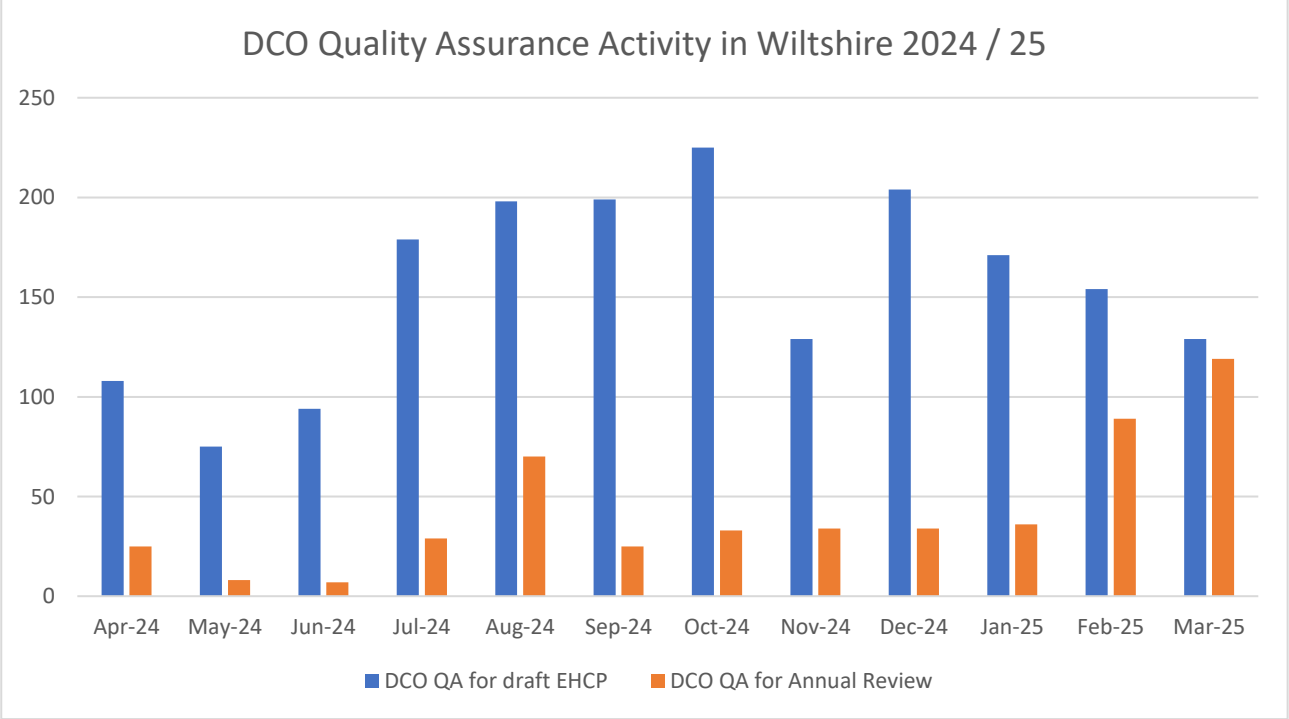
Swindon

The graph below demonstrates that between April 2024 and March 2025 **the DCOs provided a total of 900 QA contributions** which comprised of **649 contributions** of agreed wording for the health sections of draft EHC plans, and **251 contributions** to an Annual Review in Swindon.



Wiltshire

The graph below demonstrates that between April 2024 and March 2025 **the DCOs provided a total of 2374 QA contributions** which comprised of **1865 contributions** of agreed wording for the health sections of draft EHC plans, and **509 contributions** to an Annual Review in Wiltshire.



Thematic Review of the Health Sections of EHCPs

With the Government SEN2 data continuing to demonstrate a national increase in numbers of EHCPs being issued, the DCOs were keen to understand more about the type of health needs and health provision these plans are identifying.

The SEN2 Level data collection recently changed from aggregated figures at local authority level, to a person level collection, which can identify more detailed information such as the EHCP 'Primary Need'. Across BSW all 3 Local Authorities (LAs) are reporting an increase in the number of EHCPs being issued which identify Autism as the 'primary need', and it was interesting to see that this directly correlated with the national data (available online at Special educational needs in England, Academic year 2023/24 - Explore education statistics - GOV.UK).

The DCOs gather data which informs their DCO monthly highlight report and details the numbers of QA undertaken in each area every month. The data collected also includes thematic information about the primary health needs the EHCPs identify, and this is collated using 8 broad themes Children and Young People (CYP) are presenting with:

1. No Health Needs Identified.
2. On the Neurodevelopmental Pathway (No Diagnosis) and no Health Needs Identified.
3. Autism Diagnosis but no Health Needs Identified.
4. Attention Deficit Hyperactivity Disorder (ADHD) but no Health Needs Identified.
5. Child Looked After (CLA) but no Health Needs Identified.
6. Attention Deficit Hyperactivity Disorder (ADHD) Diagnosis and on Medication.
7. Mental Health Condition requiring health provision from CAMHS.
8. Medical Condition resulting in Health Needs e.g. Epilepsy, Diabetes, Cerebral Palsy.

The results of these thematic reviews continue to evidence that the numbers of draft plans with **identified health needs and health provision in Sections C and G is low; approximately 17%**. This is likely to be reflective of the increasing number of requests for EHCPs for Neurodiverse individuals, with or without a diagnosis of Autism or ADHD, as these conditions rarely result in health needs or the requirement for ongoing health provision to be made.

Only 17% of new EHCPs had health needs and provision identified in Section C and G.

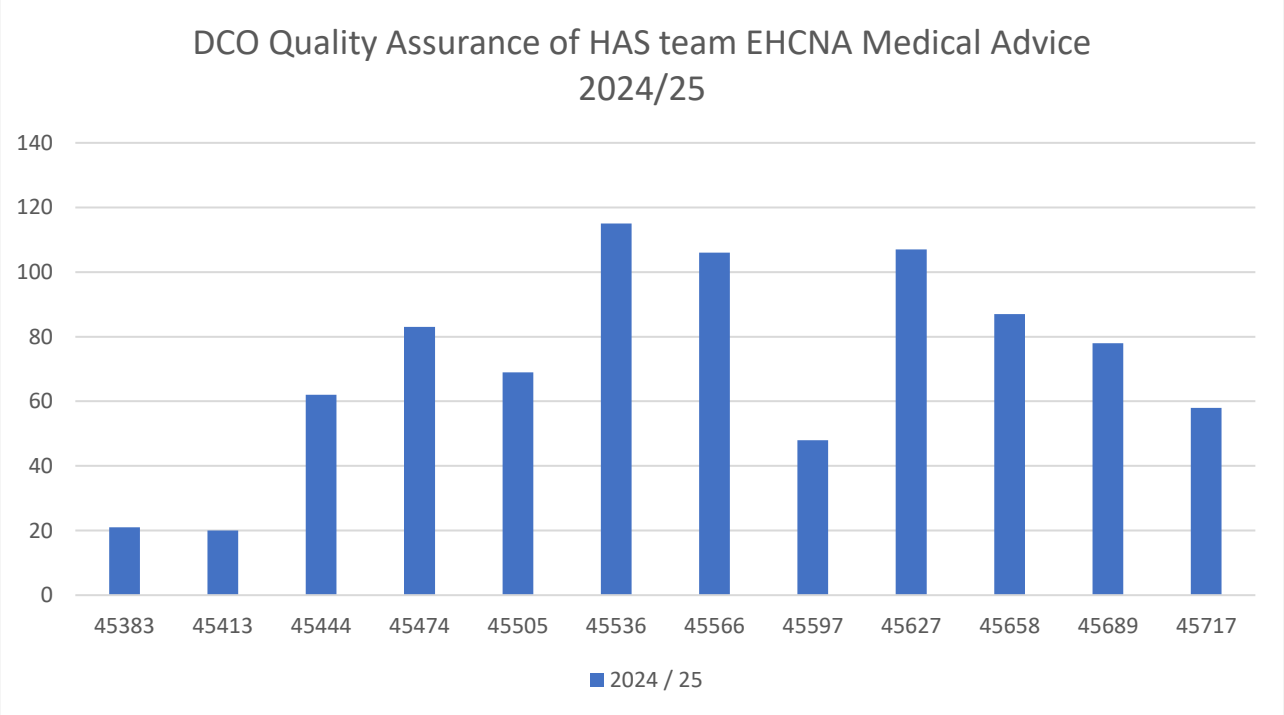
Health Advisers for SEND (HAS) Team

The Health Advisers for SEND (HAS) team work across BaNES, Swindon and Wiltshire (BSW) to undertake holistic, light touch health assessments for children and young people (C&YP) aged 0-25 who are undergoing an Education, Health and Care Needs Assessment (EHCNA). This service ensures that medical advice is provided back to Local Authorities (LAs) within the statutory timeframe of six weeks for all C&YP who aren't currently known to community health services in accordance with SEND Regulations (2015) 6(1)(c).

The DCOs continue to manage the Health Advisers for SEND (HAS) team and provide level one quality assurance on the medical advice provided as contribution towards an EHCNA.

The graph below is displaying data taken from the monthly DCO Highlight reports. It identifies that between April 2024 and March 2025 **the DCOs quality assured 854 HAS team reports.** 100% of HAS team advice was returned within statutory timeframes of 6 weeks.

More details about responsibilities aligned to SEND Regulations (2015) Regulation 6(1) and the HAS team governance and processes can be found in the appendices.



SEND First Tier Tribunals

From April 2018 to August 2021 the SEND Tribunal National Trial tested extended powers of the First tier SEND Tribunal to hear appeals and make non-binding recommendations about health and social care aspects of Education, Health and Care Plans (EHCPs) provided those appeals also included education elements. An independent evaluation of the National Trial drew positive conclusions and in July 2021 confirmed that the extended powers would continue.

The government quarterly SEN Tribunal data (available at www.gov.uk) evidence that during the academic year 2023/24, 21,000 SEND Tribunal appeals were registered, a 55% increase from the previous year

The DCO's act as the point of contact and lead on all First Tier SEND Tribunals which involve health across BSW. Much of the DCO tribunal work focuses on tribunal avoidance and wherever possible, working alongside the LA to agree or suggest compromises to parental requests for amendments to be made to Section C (Health Needs) and Section G (Health Provision) of their child's EHCP's negating the need to attend court as a witness to give evidence.

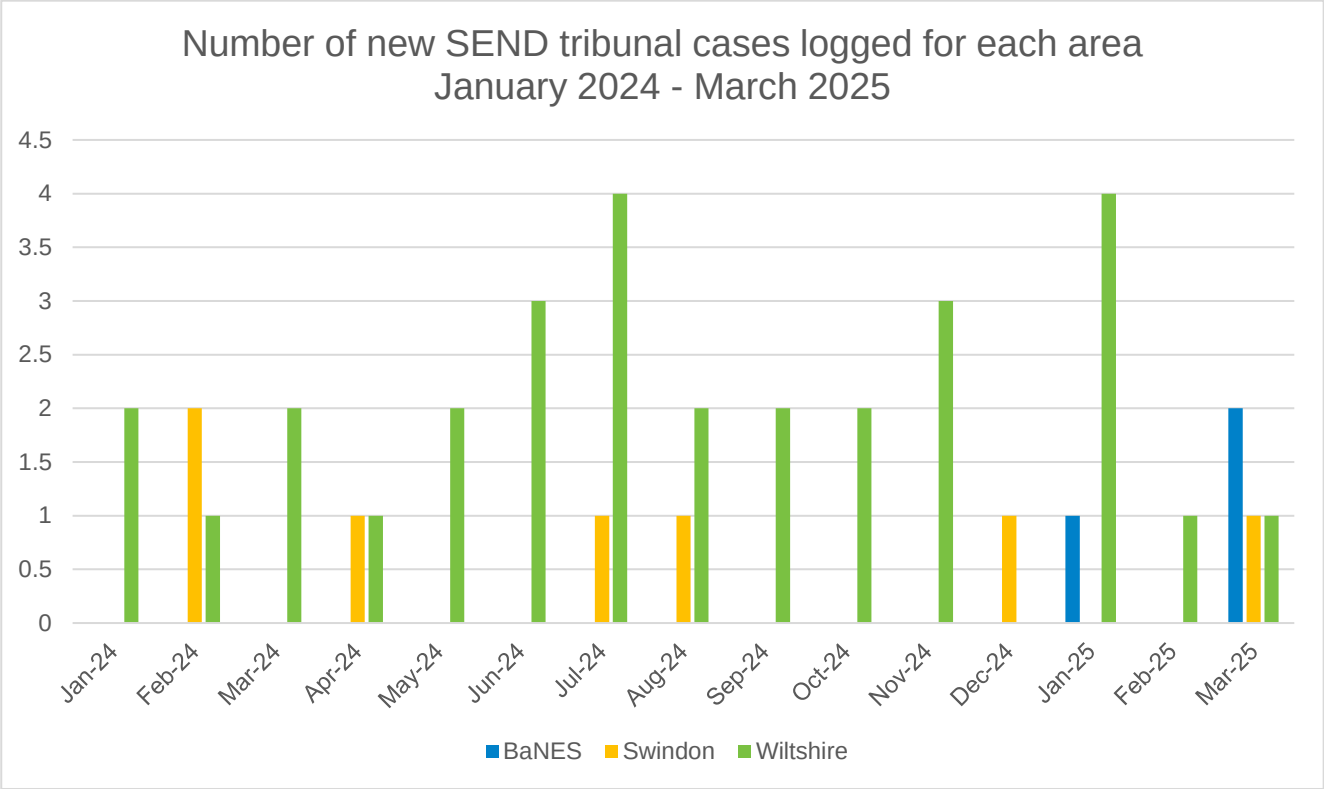
However, when required to do so, the DCO will attend the appeal hearing or provide a written witness statement on behalf of the ICB outlining their position.

The DCOs have significant knowledge, experience and understanding of working across the SEND arena and have undertaken IPSEA accredited legal training and worked closely with specialist legal teams for many years. They have access to legal advice and support from the ICB Solicitor, who will always ensure the ICB acts lawfully when discharging its duties in relation to SEND.

Following a Tribunal appeal hearing the ICB is notified of the outcome in writing and must consider all the non-binding health recommendations. A Regulation 6 response letter must then be submitted within five weeks outlining whether the ICB agrees (or not) to comply with the non-binding recommendations, providing clear rationale for their decisions.

Number of registered SEND First Tier Tribunals being managed by the DCOs

The graph below evidence that since January 2024 the ICB DCOs have been notified of, case managed and contributed towards a total of 40 SEND first tier tribunal appeals. Of these the DCOs have only had to attend a tribunal hearing once as a witness which demonstrates the DCOs current methods of caseload management add value and are effective at reducing the need for ICB tribunal attendance.



Tribunal case review

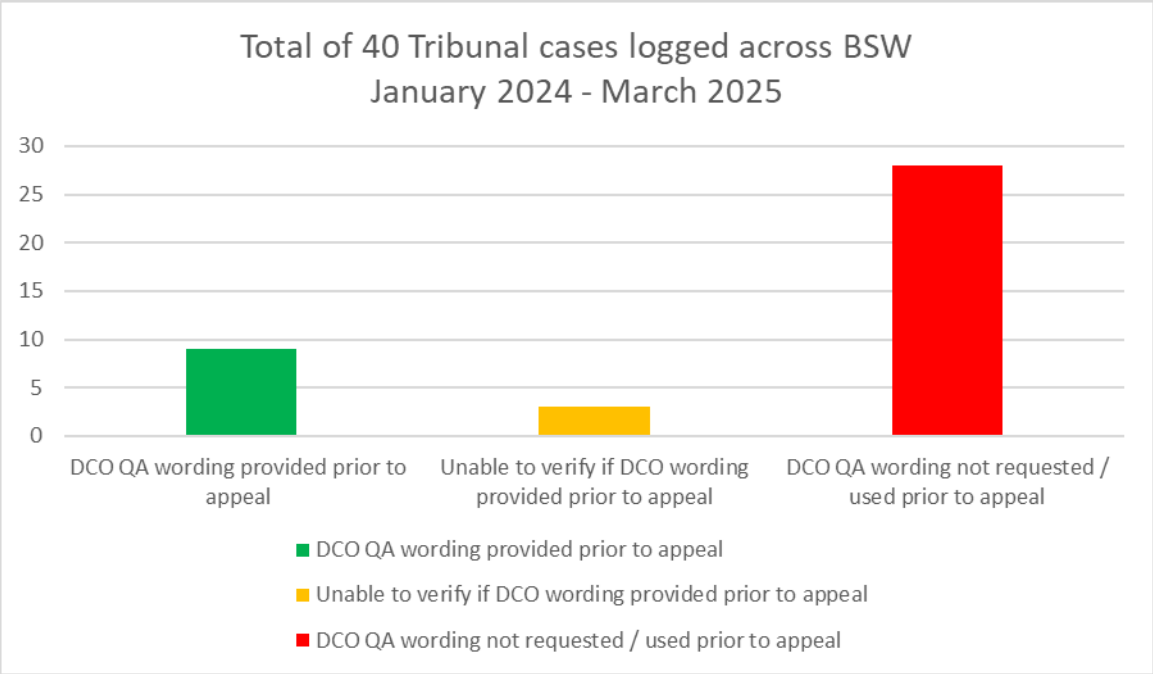
The DCOs completed a review of all the active Tribunal cases from January 2024 to March 2025 to understand how many appeals were lodged which didn't have ICB agreed wording in the health sections of the EHCP.

This review identified that the DCOs had contributed to 40 SEND Tribunal cases, of which 27 were extended appeals involving health.

28 Cases had not been Quality Assured by the DCOs and did not contain ICB agreed wording in the health sections of the EHCP.

In **3 Cases** it was unclear / we couldn't establish if DCO Quality Assurance had been provided prior to the Tribunal appeal being lodged.

9 Cases had Quality Assurance completed by the DCOs and the health sections contained ICB agreed wording.



The graph above demonstrates that 28 tribunal appeals (70%) did not have up to date, ICB agreed wording in the health sections when the appeal was lodged. Although with the significant number of additional quality assurance being undertaken by the DCOs and regular attendance at Tribunal discussion meetings, it's hoped that these findings are an improving trajectory, as evidenced by more recent results from Quarter 4 (January 2025 to March 2025) which indicate far fewer cases where the DCO QA agreed wording hadn't been requested or used in Sections C and G; only 3 out of the 10 appeals (30%).

The DCOs will continue to monitor this situation and feedback to local area colleagues and system leaders, delivering DCO education and training sessions as required to Local Authority colleagues to ensure sustained improvement.

Conclusion

Previous DCO Annual reports have focused on evidencing work aligned with the Designated Clinical Officer 'Priorities on a Page', and also, last year, evidencing the impact of the DCO role.

This year we wanted to go back to basics and focus the report on data aligned to some of our core functions; assurance of legislative compliance, quality assurance, coproduction and tribunal case management. All of which demonstrate the significant amount of ongoing work the DCOs are involved in both operationally and strategically on a daily basis which further supports and improves the outcomes and experience for children, young people and their families with SEND living across BaNES, Swindon and Wiltshire.

You can contact the BSW ICB DCO's on: bswicb.send@nhs.net

Appendices - Additional Reading and Useful Resources

Please find below copies of some of the documents and resources discussed in this Annual Report.

BSW ICB DCOs 'Priorities on a Page'

ICB DCO Priorities on a Page 2023 24 updat

BSW ICB DCO Highlight Report (March 2025)

2025 04 DCO Highlight Report April

BSW ICB DCO Quality Assurance Framework

BSW ICB DCO Quality Assurance Framework

BSW ICB DCO Position on SEND Regulations (2014) Regulation 6(1)

BSW ICB DCO Position on Regulatio

BSW ICB Health Advisers for SEND (HAS) Team Governance and Process

BSW ICB Health Advisers for SEND Te