

Appendix Four: Children's Social Care, SEND and Education Services in Devon

The National Context for Children's, SEND and Education Services

Children's Services, SEND, and Education in England form an interdependent statutory system that supports children and young people from birth up to age 25. In January 2024, there were 8.84 million children in education in England, including 1.06 million receiving SEND Support and 517,000 with an Education, Health and Care Plan (EHCP). In addition, around 400,000 children were supported by children's social care at any given time. Local authorities carry statutory responsibilities across safeguarding, SEND, education, childcare and placement sufficiency and corporate parenting. Leading work in partnership with schools, police, health services, voluntary organisations, and families.

Local authorities are legally required to safeguard and promote the welfare of children under the Children Act 1989, Children and Families Act 2014, Education Act 1996, and the SEND Code of Practice (2015). Statutory guidance in Working Together to Safeguard Children (2023) reinforces multi-agency accountability for protecting children and ensuring their voices are heard.

SCOPE OF CHILDREN'S SERVICES

Safeguarding and Protection	A fundamental responsibility, including investigating concerns about child abuse or neglect and taking action to protect children from harm.
Supporting Children in Need	Providing extra help and support to children and families facing challenges, such as mental health issues, or disability, or living in poverty.
Promoting Wellbeing	Working to improve the physical, mental, social and emotional wellbeing of children, including access to education, healthcare, and recreational opportunities.
Children in Care	Managing the care of children placed in foster or kinship care or in residential homes, or supporting them into permanence through adoption, making sure they have stable, loving homes.
Care Leavers	Supporting young people, including with housing and financial support, as they transition out of care and into independent living.
Early Help and Prevention	Offering a range of early intervention and support services to families to prevent problems from escalating and promote the wellbeing of children.
Special Educational Needs and Disabilities (SEND)	Supporting children with SEND and their families, ensuring they have access to appropriate education and care, including publishing and maintaining a local offer of services.
Education	Ensuring there are sufficient school places and admissions arrangements for all children and children are able to attend schools and alternative provisions which meet their needs. There are additional responsibilities where children are being Electively Home Educated (EHE).
Working with Partners	Collaboration with schools, healthcare providers, police and other

Local authorities' gross expenditure on children's services in 2023/24 was £14.8 billion, of which £8.1 billion was on looked-after children and £3.4 billion on safeguarding. Total local authority and school expenditure reached £50.4 billion, including £31 billion on schools, £4.4 billion on other education, and £10.1 billion via the High Needs Block.

The Dedicated Schools Grant (DSG) funds schools and SEND provision. High Needs Block deficits have become a major financial risk for many councils. A statutory override, allowing councils to carry DSG deficits separately from their general fund, has been extended until March 2028. Despite additional investment, demand is outpacing resources, EHCPs rose to 517,000 in January 2024, over 60% higher than in 2015, with specialist placements and SEND transport driving cost escalation. Working in partnership with all schools is a key duty of the Local Authority. Councils must convene a Schools Forum to advise on allocation of the DSG, with membership from maintained schools, academies, early years, and other stakeholders (Education Act 2002).

Eligibility for children's services is primarily assessed under the Children Act 1989, supported by the Children and Families Act 2014, the Education Act 1996, and the SEND Code of Practice. Assessments may lead to short-term interventions such as early help or targeted family support to prevent escalation or longer-term statutory plans including Child in Need Plans, Child Protection Plans, or EHCPs for children with complex or ongoing needs.

Best practice emphasises early intervention, safeguarding, and inclusion, with a strengths-based and child-centred approach. This ensures that assessments and plans consider the aspirations and voice of the child, their abilities, and potential for positive outcomes. It is particularly vital for children with SEND, Children in care who require permanence and stability, Care leavers preparing for adulthood and independence. Nationally, the system faces significant pressures:

- Shortages of placements and high costs for fostering and children's home care.
- Escalating demand for EHCPs and insufficient inclusive mainstream provision.
- Persistent attainment gaps linked to deprivation and SEND, widened by the pandemic and still larger than pre-2020 despite slight narrowing in 2024.
- DSG high-needs block deficits creating financial instability.
- Workforce shortages across social care, SEND services, teachers, and teaching assistants.
- Changes to NHS Integrated Care Systems create continued challenges for joint commissioning for SEND and children in care. With significant waits for key services such as CAMHS and Autism assessment.
- Nationally referral demand for children's social care dropped by 2.9% in 2024, after rising demand, to the peak in 22/23, following the pandemic.

The government has introduced major reforms to address these challenges:

Families First for Children Strategy (2025): redesigning early help, child in need, and child protection; rolling out multidisciplinary family help teams for complex needs; and creating multi-agency child protection teams. Councils and partners are expected to show significant progress by March 2026.

Best Start in Life Strategy (2025): rolling out Best Start Family Hubs in every council by April 2026 and developing a national Best Start Digital Service, representing a substantial shift in delivery models and partnership working.

SEND and education reform:

- £740 million SEND capital funding in 2025/26 to create 10,000 new places, adapt mainstream schools, and expand special provision.
- Longer-term £1 billion investment to fund 44,500 places by 2028.
- SEND and Alternative Provision Improvement Plan (2023) introducing national standards, strengthened mediation, and a single national system.
- Plan for Change (2024) setting out reforms to inclusion and mainstream capacity.

Children's Wellbeing and Schools Bill (2025): new duties for family-led decision making, expanded school services such as breakfast clubs, attendance enforcement, and workforce regulation.

Education White Paper (2025): expected to outline broader reforms, building on these measures.

Children's Services, SEND, and Education remain under intense pressure from rising demand, financial risk, and workforce shortages. At the same time, government is introducing wide-ranging reforms, including strengthened safeguarding, expanded early help, new Family Hubs, and significant capital investment in SEND provision.

The Local Context for Children's, SEND Services and Education Services

There are currently 3 councils in Devon with statutory responsibility for the provision of Children's, SEND Services and Education Services in Devon; these are the 2 existing unitaries of Torbay and Plymouth and Devon County Council. Within the context of our overall proposal of four unitaries for Devon the focus of this section is on the current set up of Children Services provided by Devon County Council.

The following outcomes are the responsibility of each Local Authority and its partners to deliver.

- **Safety and Protection:** Every child is safe from harm, abuse, and exploitation, with effective early identification and intervention when risks arise.
- **Stability and Belonging:** Children grow up in stable, loving homes – ideally within their family or community – with minimal disruption to relationships, school, or community ties.
- **Health and Wellbeing:** Children and young people enjoy good physical, emotional, and mental health, with strong support for those with SEND or additional needs.
- **Education and Achievement:** Every child has access to inclusive, high-quality education that meets their needs, supports their aspirations, and enables them to reach their full potential.
- **Voice and Participation:** Children, young people, and families are listened to, and their voices shape decisions about their care, education, and future.
- **Independence and Life Skills:** Young people, particularly care leavers or those with SEND, have the skills, opportunities, and confidence to live independently and thrive as adults.
- **Prevention and Early Help:** Families receive early, joined-up support to prevent crises and reduce the need for statutory intervention

Role of OFSTED

Ofsted is the Office for Standards in Education, Children's Services and Skills. They inspect services providing education and skills for learners of all ages and they also inspect and regulate services that care for children and young people.

Ofsted inspect maintained schools and academies, some independent schools, colleges, apprenticeship providers, prison education and many other educational institutions and programmes outside of higher education. They also inspect childcare, local authorities, adoption and fostering agencies, initial teacher training and teacher development

Ofsted regulate early years and children's social care services, making sure they're suitable for children and potentially vulnerable young people and they publish reports of findings so they can be used to improve the overall quality of education and training and inform policymakers about the effectiveness of these services.

Strategic Performance Overview

Devon County Council's Children's Services, including Special Education Needs and Disability (SEND) and Education, continue to face significant strategic challenges. Despite targeted improvement efforts, the service remains rated "Inadequate" following inspection by Ofsted during 2024 and 2025. This follows over a decade of Ofsted, through its Inspection of Local Authorities Children's Services (ILACS) process, raising consistent concerns around safeguarding, SEND provision, and outcomes for vulnerable children.

The ILACS 2025 inadequate judgement highlighted the following:

Overall Judgement Inadequate

- Children needing help and protection: Inadequate
- Children in care: Inadequate
- Care leavers: Inadequate
- Leadership impact: Requires improvement to be good

Key Concerns

- Children at risk of harm: delays in strategy discussions and poor safety planning.
- Neglect and domestic abuse: inconsistent identification and response.
- Care leavers: many live in unsuitable accommodation, including unregistered homes.
- Planning and oversight: weak child protection and care plans; lack of measurable outcomes.
- Multi-agency working not strong enough to meet needs of vulnerable children.
- Placement sufficiency: over-reliance on unregistered and unsuitable accommodation.

Areas of Improvement

- Leadership stability: since 2023, stronger leadership has led to more ambitious improvement plans.
- Early Help: expanded and better targeted; waiting lists reduced.
- Front Door Services: more effective screening and quicker responses.
- Emergency Duty Service: timely and effective out-of-hours safeguarding.
- Private Fostering & Homeless Response: strong and timely support.
- Children's Social Care Academy: positive impact on staff development and practice.

Progress and Challenges

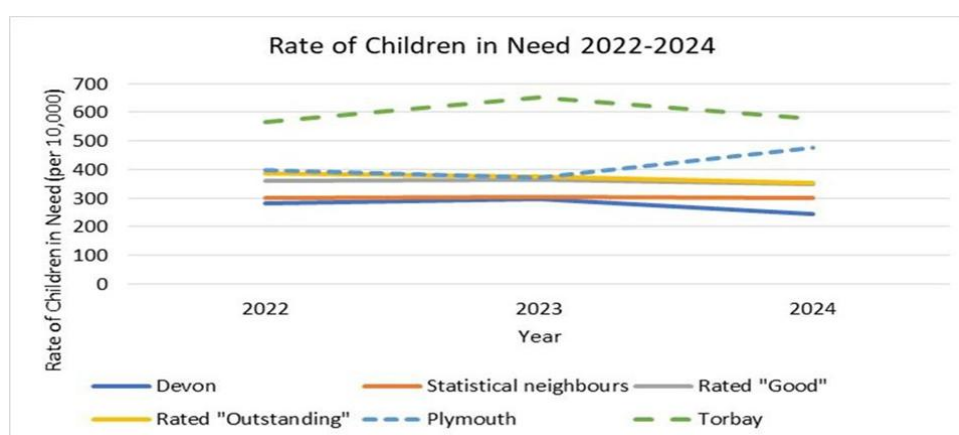
- Positive trajectory: improvements are emerging but not yet widespread.
- Staff morale: generally positive, with improved recruitment and retention.
- Leadership ambition: strong corporate and political support for change.
- Ongoing issues: many children still face delays, instability, and inadequate support

Children in Need (CIN)

Devon's levels of Children in Need continue to be very low: well below Torbay and Plymouth. This can indicate an effective Early Help system. Ofsted note thresholds for early help and Child Protection Plans (CPP) are appropriate, but improvements are needed in targeted early help.

Ofsted identified that the right part of the system is responding as families are not escalating to statutory Social Care Intervention unnecessarily, however, the interventions are just below the threshold for social care to be more effective.

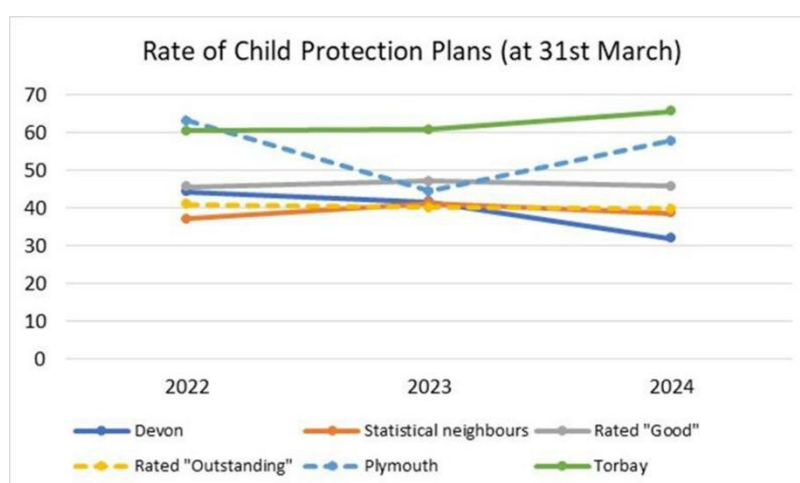
Targeted Early Help was expanded and invested in 2024 but some families with less urgent need were waiting too long for support particularly timely multi-agency support from Domestic Abuse services.



Child Protection Plan Rates (CPP)

The graph below shows that for 2024, Devon had a level below its statistical neighbours and Ofsted rated good and outstanding Local Authorities for rate per 10,000 of CPP.

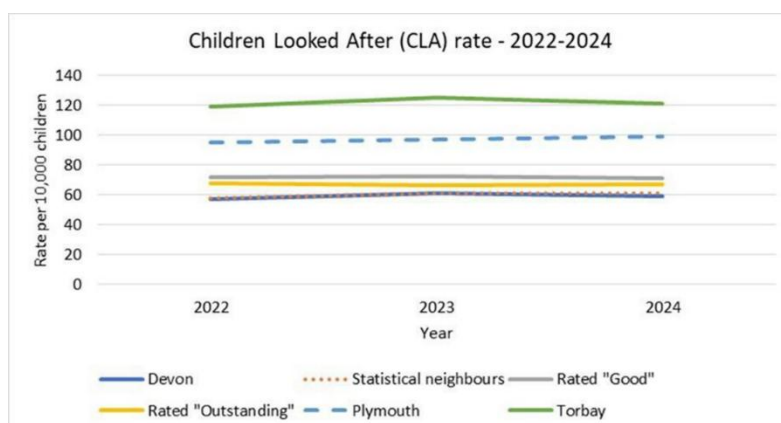
Whilst this can indicate effective Early Help Ofsted note that there are delays to half the child protection conferences, the quality of plans is too variable, and children are 'stepped down' too quickly to Child in Need or Early Help without partners being able to track if change has been sustained.



Children Looked After (CLA)

Devon's rate of CLA has been steady and is reported in May 2024 as continuing to fall. As of May 2024, there were 873 children in care of which 570 (65%) are placed in Devon¹. Devon compares well with the average rate of Ofsted rated outstanding Local Authorities and well below Plymouth and Torbay (reflecting differences in levels of need).

Whilst this performance looks good Ofsted note too many children are coming into care in an unplanned way, particularly older adolescents, and that multi-agency work for children missing, at risk of, or subject to exploitation, subject to neglect, needs improvement as does more timely access to domestic abuse services.



Financial and Budget overview

Children and young people's services make up 30% of the Council's overall budget. At a value of £237.3m (excluding DSG) for 25/26. Of which Children's Social Care is £172.1m (a 7.4% rise on 23/24). £4.5m savings are planned for 25/26. Social Work agency staff account for £1.5m of the £10.3m overspend reported at month 4, with a further £7.9m attributed to placements, due to increase in numbers over plan.

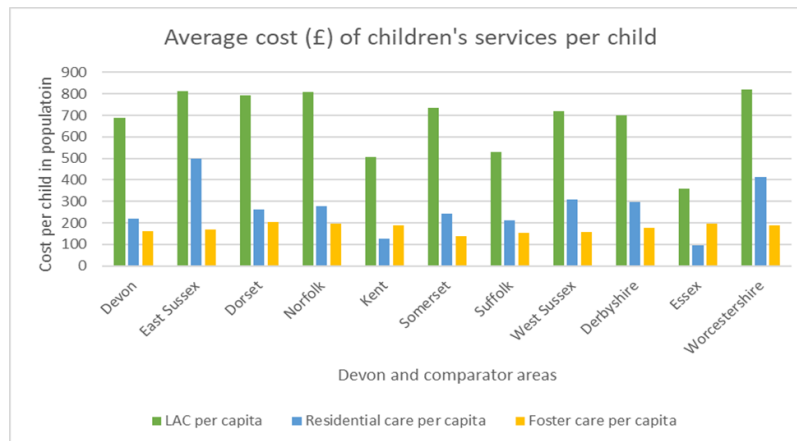
Sufficiency and cost of care

The average weekly cost of a fostering placement in Devon is £750 compared to £795 nationally². Residential children's home placements in Devon cost in the region of £4,000–£5,000 per week compared to £5,000 nationally. Actual figures in month 4 budget reporting taking total 24/25 spend and Full time Equivalent placements figures show Children's Homes at £6,129 Supported Accommodation at £5,171 and independent Fostering at £1,373

64% of children in care in Devon are placed in foster care, 44% in-house fostering and 20% with a fostering agency. Devon's overall spend on children in care is consistent with South West averages and slightly below averages for fostering and residential care.'

¹ Devon County Council Sufficiency Strategy 24-29

² Based on PSSRU unit cost 2021 uplifted for GDP deflator to 2025/26



Adoption services are hosted by Devon delivered through a regional adoption agency, Adopt Southwest which is a partnership with Devon, Plymouth, Somerset and Torbay Councils. In April 2024, Cornwall & Isles of Scilly joined the partnership.

In 2023/24, Adopt Southwest placed 196 children for adoption (a 15% increase), with over 91% matched to its own adopters, national-leading performance in early permanence (42% vs 21% nationally), and reduced family breakdowns. Challenges remain around adopter recruitment (down 19%) and timeliness in Devon, while adoption support referrals exceeded 1,000, the service also reported a £551k underspend on its £5.43m budget, with funding rising to £6.59m in 2024/25 to include Cornwall.

Education and Achievement – Early Years

Early Years and School Readiness: Overall in Devon 68.5% of children achieve a Good Level of Development at the end of reception: close to the national average of 67.7% in 2023/24. However, there is wide variation across districts with a local attainment gap of 20% points between disadvantaged and non-disadvantaged children. In Exeter for example, several wards are below the county average with significant underperformance for disadvantaged children.

Education and Attainment: Overall, in Devon attainment is broadly in line with national averages but there is a wide gap on attainment for disadvantaged children. For example, in Exeter secondary outcomes are below the county average in certain schools particularly for disadvantaged pupils. School exclusions are higher in Exeter than in rural Devon, where there is a 30.8% attainment gap between children eligible for Free School Meals and those ineligible.

SEND and Education finance: There are currently 16,545 children in Devon on Special Educational (SEN) Needs support in 24/25. The current total number of EHCPs as of July 2025 is 9,943 compared to 9,382 for July 2024 (6% increase), in addition, average costs are rising. The average cost for July 2024 was £17,043 compared to £17,271 for July 2025, an increase of £228 (1.3%).

In February 2025, the number EHCPs reached 9,950, surpassing the Safety Valve target by around 550 for this year³ As identified by OFSTED, EHCP timeliness is a known weakness with less than 30% of plans issued within the statutory timeframe.

Schools finance: Education and Inclusion have a budget of £545m. For 25/26 the DSG has an increase of £78.1m, of which £35.2m is for the Early Years, High Needs Block is increased by £8.6m to £125.5m. The Transport budget has stabilised after significant pressures.

³ ((Public Pack): Agenda Document for Devon Education Forum, 19/03/2025 10:00.

A Safety Valve agreement of £95m was reached with DfE in March 24 for the Council to reach a financially sustainable position by the end of 2026/27, with the aim of paying off the deficit by the 2030/31 financial year. An Accelerated Progress Plan to address efficiency and the EHCP backlog was agreed as part of this process. A revised plan was submitted to DfE in February 2025 due to demand outstripping available resources.

At month four 2025 the DSG is 'forecasting an overspend of £53.3m'. With the 'cumulative deficit forecast to be £165.5 million by the end of the year, £57.3 million more than the position included within the Safety Valve Agreement with the DfE⁴ The cost pressures are rising due to the volume of EHCP's, the high cost of placements, the outcome for high-cost placements from tribunals and workforce turnover. The levels of overspend on SEND High Needs Block⁵ mirror national trend but is proportionately higher.

As part of its strategy to address this the council plans to create 200+ new special school places and expand mainstream college and secondary school capacity with additional investment of £28.5 million. This is funded by Local Authority and DfE resources. Successful applications to the Free Schools Programme for the new Special Schools in Ivybridge with a hub in Tavistock (Due to open Sept 25) and Cranbrook (Sept 2026) (Source MTFP).

Cost benefit of moving to best practice

Reducing residential placements: Devons Children Looked After (CLA) rate is below national average (60 vs 70 per 10,000) but Devon has too many in high-cost residential care. This is due to increased need and lack of sufficiency in fostering. Month 4 figures 2025/6 show overspend for numbers of children in Children's Homes if the reliance on the use of residential placements in Devon is reduced "top quartile" levels (8% of CLA vs current 14%), this could save £7m-£10m a year and £0.7m-£1.0m a year in Exeter alone.

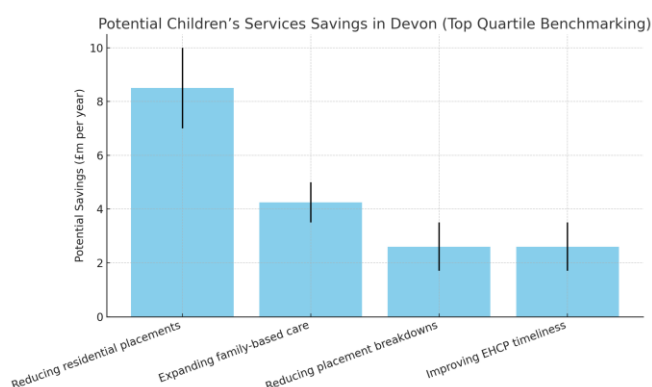
Expanding family-based care: Increasing capacity in in-house fostering and preventing placement breakdowns reduces the need to commission from more expensive Independent Fostering Agencies (IFA). Recruiting and retaining more local authority foster carers, through Mockingbird (a scheme to support foster families by creating a hub or extended family style network) or similar specialist schemes, could help to achieve top quartile stability rates which could deliver £3.5m-£5m million in cost avoidance across Devon.

Reducing Placement Breakdowns: Top quartile performing local authorities achieve significantly lower disruption rates and reduced multiple moves for CLA. Matching across Devon this could save £1.7m-£3.5m emergency placement and safeguarding costs

Improving EHCP timeliness & sufficiency: Timely, high-quality EHCPs reduce tribunal costs and reliance on out-of-county placements. Moving from <30% to top quartile across Devon (75%+ within 20 weeks) could save £1.7m-£3.5m through reduced litigation and placement spend.

⁴ (2025-26 Month 4 Budget Monitoring Report.pdf)

⁵ The term is High Needs Block it is an element of Dedicated Schools Grant. It funds provision for children and young people with special educational needs and disabilities (SEND), from birth to age 25. It covers the costs of specialist support, top-up funding for pupils in mainstream schools, and placements in special schools or alternative provision



Devon's current Children's and SEND delivery model

There are essentially five components to Children's Services System

Social Care	Early Help	Schools & Education	SEND	Systems Leadership
Children in need, child protection, children in care, care leavers, extra familial harm	Family hubs, youth support.	School place planning and sufficiency, home to school transport, educational attendance, educational outcomes, elective home education.	Special Educational Needs and Disabilities.	Public health, mental health support, youth justice, broader safeguarding partnership

Current Delivery Children's Social Care

Local Children and Families Service consists of four Children and Families Teams based offices in Barnstable, Tiverton, Totnes and Exeter. Each office acts as a base for who staff undertake initial assessment and support Children in Need and Children on a Child Protection Plan, and Children in Care and Care Leaver. Decisions made here as to whether threshold for statutory social care involvement is met. The Core functions of these teams are:

Initial Assessment (Child and Family Assessment) Where the child or family meets the threshold for statutory Social Work, a social worker in the Children and Families Team undertakes an assessment under the Children Act 1989, usually within 45 working days to determine the child's needs, risks, and protective factors.

Section 47 Enquiry (Child Protection) If there is reasonable cause to suspect a child is suffering or likely to suffer significant harm, a Section 47 enquiry is launched. This may lead to an Initial Child Protection Conference

Child in Need (CIN) Plan – Section 17 Where the child needs services to achieve or maintain a reasonable standard of health or development but is not at immediate risk of significant harm. And CIN plan sets out support and services, it is reviewed regularly.

Child Protection (CP) Plan If the risk of significant harm is confirmed, a CP plan is agreed at the conference. This sets out actions by agencies and family to reduce risk, reviewed at core group meetings.

Pre-Proceedings (Public Law Outline) If risks remain unmitigated, the local authority may begin pre-proceedings work with the family. Letter Before Proceedings sent, legal planning meetings held; aim is to avoid court if possible.

There are also several centralised services Including:

Multi-Agency Safeguarding Hub (MASH) A concern about a child's safety or welfare is reported (by a professional, family member, or member of the public) to a centralised MASH based in Exeter, which screens and co-ordinates safeguarding referrals across Devon.

Corporate Parenting Service: includes **Children in Care Teams** (social workers managing children placed in foster care, residential care, or with kinship carers) and the Care Leavers service. Oversight is provided by the **Corporate Parenting Board**, which monitors outcomes for children in care across health, education, and wellbeing.

Disabled Children's Service (DCS): supports children and young people up to 18 with severe and complex disabilities, alongside their families. Referrals are usually made through the MASH or Early Help system, and eligibility is based on the child's disability and level of need. The team provides statutory social care functions, including assessments, care planning, and safeguarding, as well as services such as short breaks, direct payments, and practical support to help families care for their child at home.

In-house Fostering Service: Devon is part of a collaboration of in-house fostering services joining up their recruitment and marketing to new foster carers. The partnership consists of fourteen South West Councils, hosted by Wiltshire, funded by the DfE. This is part of the Governments drive to increase the capacity of Local Authority Fostering Services.

Children's Home and Residential Short Breaks Provision: Devon directly manages six of its own residential children's homes:

Home	Location	Service
Meadowpark	Exeter	A 3-bed home equipped for children and young people with complex healthcare needs and/or physical disabilities, providing short breaks, treatment support, and family short breaks.
Barnes	Tiverton	A 2-bed home providing day and overnight short breaks, assessments, and planned stays for children with complex health physical or behavioural needs.
Hillcrest	Honiton	A 3-bed home equipped for children with learning disabilities, physical disabilities, and medical and sensory needs.
Welland House	Barnstable	A 5-bed home for children with learning disabilities, autism, complex medical/physical needs, and challenging behaviour.
The Lyric	Oakhampton	A 2-bed home for children with learning disabilities
The Brook	Dartington.	An 8-bed home for children with learning disabilities
Atkinson	Exeter	An 8-bed home for children and young people, aged between 10 and 17 years. Provides welfare secure placements on a national level and is rated Outstanding by Ofsted

Permanence and Adoption Service: Adoption services are hosted by Devon delivered through a regional adoption agency, Adopt Southwest which is a partnership with Devon, Plymouth, Somerset and Torbay Councils. In April 2024, Cornwall & Isles of Scilly joined the partnership. In 2023/24.

Current Delivery – Early Help

Early Help Locality Teams are multi-disciplinary teams coordinating support for children, young people, and families before problems escalate into statutory services. Based in local offices (North, South & West, Exeter, Mid & East Devon). Each team includes Early Help Coordinators, Family Practitioners, Public Health Nurses (health visitors and school nurses), youth workers, SEND/inclusion staff, and education welfare officers, with input from social workers where safeguarding thresholds are met. Their role is to lead the Team Around the Family (TAF) process, deliver practical interventions, and ensure families receive joined-up support across health, education, and social care.

These teams work closely with schools, Family Hubs, health services, police, and the voluntary sector, acting as a single point of contact in each locality. While the exact mix of professionals varies by area, the locality model ensures consistent early help across Devon, connecting families quickly to the right support and preventing escalation into higher-cost or crisis services.

Family Hubs: There are five Family Hubs in Devon, these were bought back in house in 2025 to give the council greater control, consistency, and flexibility in shaping services around its Early Help and SEND improvement priorities. The Hubs are in Exeter; Ilfracombe; Bideford Bay; Newton Abbot and Totnes. These offer a range of services for families with children aged between 0-19 (and up to 25 for those with SEND) ranging from drop-in advice, Start for Life (0-2) programmes, parenting groups (sleep, feeding, behaviour), play & learning sessions, and signposting to local support.

Special School Provision: a child can only be placed in a special school if they have an EHCP and the local authority decides, usually through a panel, that mainstream provision cannot meet their needs. Parents may express a preference, and if they dispute the local authority's final decision, they can use mediation, or appeal to the SEND Tribunal, which has the power to overturn the placement decision.

Location	Special School Provision
Exeter	<ul style="list-style-type: none"> • Barley Lane School – maintained • Southbrook School –maintained (ages 11–16) • Ellen Tinkham School & College –maintained (all-age;)
Teignbridge / South Devon	<ul style="list-style-type: none"> • Glendinning Academy (Newton Abbot) – free school (Reach South Academy Trust) • Orchard Manor School (Dawlish) –maintained residential • Bidwell Brook School (Dartington) – maintained
East Devon	<ul style="list-style-type: none"> • Mill Water School (Bicton) –maintained special school
Mid Devon	<ul style="list-style-type: none"> • ACE Tiverton – Academy free school (ACE Schools MAT)
North Devon	<ul style="list-style-type: none"> • The Lampard Community School (Barnstaple) –maintained • Pathfield School (Barnstaple) –maintained • Marland School –maintained residential I school

Alternative Provision DCC commissions and statutory alternative provision AP under its Education Act duty to provide education for pupils unable to attend mainstream school. Alongside this, the Transforming Futures Trust (ACE Schools MAT) operates ACE Tiverton

and other alternative provision including hospital education under academy governance. In addition, a range of independent providers are commissioned on a case-by-case basis, delivering registered placements inspected by Ofsted but not directly governed by the council.

DCC maintained or commissioned Alternative Provision	Academy or Free School Alternative Provision
<ul style="list-style-type: none"> • The Russet House (Exeter, Tiverton, other sites) 	<ul style="list-style-type: none"> • ACE Tiverton –part of the Transforming Futures Trust (ACE Schools MAT, Plymouth).
<ul style="list-style-type: none"> • Medical AP / Hospital Education funded by DCC but managed by ACE Schools 	<ul style="list-style-type: none"> • ACE Schools Plymouth / Devon sites part of the Transforming Futures Trust

Current Delivery SEND

There are several specialist teams supporting children and young people with SEND, working alongside schools, health, and families:

Early Help & Locality Teams (described above): Referrals are made via the Early Help Request for Support or MASH. They work directly with children and families, including those with emerging SEND.

SEND 0–25 Team: Based centrally at County Hall, Exeter, with caseworkers allocated by locality. Referrals come through EHCP applications or annual review requests (usually via schools or parents). They work with families and schools to assess needs, issue EHCPs, and monitor provision.

SEND Support Services: Specialist advisory teachers (Autism, Communication & Interaction, Sensory Impairment) are countywide but locality-based, attached to education teams in Exeter, Barnstaple, and Newton Abbot. Referrals are made by schools and early years settings through the SEND Advisory route. They mainly support schools with training and strategies but also work directly with children where appropriate.

Educational Psychology Service: Based in area offices (Exeter, Barnstaple, Newton Abbot, Tiverton), linked to schools. Referrals are made by schools (and occasionally parents) via the SEND 0–25 Team or as part of the EHCP statutory process. They work with schools, children, and families through consultation, assessment, and advice.

Inclusion and Attendance Service: Locality-based staff linked to schools, referrals come from schools or education welfare panels. They work mainly with schools and families to address persistent absence, exclusions, and reintegration linked to SEND.

Preparing for Adulthood (PfA) Team: Based in Exeter but working across Devon. Referrals are through the SEND 0–25 Team for young people aged 14–25 with EHCPs. They work with young people, families, schools, colleges, and adult services to plan transitions.

Across SEND services there are also links with Social Care Disabled Children’s Service and Children and Family Health Devon (CFHD)

Children and Family Health Devon (CFHD) – NHS-led, with teams based in community clinics and children’s centres across Devon (Exeter, Barnstaple, Newton Abbot, Tiverton, Exmouth). Referrals are via GPs, health visitors, schools, or EHCP processes. They provide therapies and health support (speech and language therapy, occupational therapy, physiotherapy, nursing, community paediatrics) for children and young people with SEND.

Current Delivery Systems Leadership

Working in partnership across the wider health and public sector system is critical to achieving the best outcomes for children and young people. The following section sets out the key services working with the wider system.

Multi-Agency Safeguarding Hub (MASH) A concern about a child's safety or welfare is reported (by a professional, family member, or member of the public) to a centralised MASH based in Exeter, which screens and co-ordinates safeguarding referrals across the wider system.

Public Health Nursing (PHN) and Integrated Family Support supports families with children aged 0-19 through health visiting (pregnancy–5) and school nursing (5-19). The offer includes developmental checks, health advice, and parenting support, alongside targeted work such as improving attendance, home routines, and coordinating a Team Around the Family (TAF) plan.

PHN is delivered through the Family Hub model, with school nurses linking health and education, and close partnership with Mental Health Support Teams (MHSTs) to provide early help on issues like anxiety and self-harm. Locality teams combine health visitors, school nurses, and family support workers, based in four hubs: Honiton (East Devon, Cullompton, Tiverton), Exeter (Exeter, Crediton), Barnstaple (North Devon, Torridge, Okehampton), and Totnes (Teignbridge, South Hams, Tavistock). PHN is Inspected by CQC and graded Good in 2023. The service is provided by Children's Services Devon after being insourced in 2018 and commissioned by Public Health.

The **Family Intervention Team (FIT)** in Devon provides intensive, short-term support to families at risk of escalation into social care, working from a locality base alongside Family Hubs and Early Help services. Referrals come through the MASH or Early Help system, usually from schools, health, or social workers. FIT supports families with issues like parenting, routines, school attendance, and safeguarding, and where domestic abuse is identified, they link directly with specialist services such as Splitz Support Service, as well as Children's Social Care and police, ensuring safety planning and therapeutic work are coordinated through a Team Around the Family plan.

The **LINKS service** in Devon provides intensive support for children and young people with highly complex needs, including emotional and behavioural difficulties, mental health issues, and risks of family or placement breakdown. Addressing contextual safeguarding/extra-familial risk (for young people aged 10–25 and includes care-experienced young adults). Referrals are made through Devon's Front Door (MASH/Request for Support) process, or internally via Children's Social Care with team manager agreement and a completed or updated Safer Me assessment and are considered at multi-agency panels. The service operates on a locality basis across Devon (North, South, Exeter/Mid/East), with staff delivering both outreach in homes, schools, and communities, and direct work from their offices.

The **Bridges team** (Edge of Care Service) in Devon is a specialist service that works with young people aged 11–17 who are on the edge of care, at risk of entering care, or in care and needing intensive support to return home or move to family-based placements. The team provides therapeutic, relationship-based intervention to stabilise families, reduce placement breakdown, and prevent escalation to high-cost residential care. The team were recognised nationally (Children's Services Team of the Year, 2023) for their work preventing family breakdown and care entry.

Bridges is countywide but locality-based, with staff operating out of hubs in Exeter, Barnstaple, and Newton Abbot, allowing them to cover East, Mid and South Devon as well as North Devon and Torridge. Referrals are made through Devon's Children's Social Care, usually by a social

worker with team manager agreement, where the case meets edge-of-care thresholds. Eligibility is confirmed through panel processes, and the service is coordinated with Early Help, Youth Justice, and other specialist teams.

The **Youth Service** provides targeted support for young people aged 11–19 (up to 25 with SEND) who are vulnerable, at risk of exclusion, or need help to make positive choices. The service focuses on early intervention, personal development, education and training engagement, and preventing offending, working in partnership with schools, health, police, and the voluntary sector. Delivery is through locality-based youth workers, targeted programmes (including youth justice and prevention), and links with Family Hubs and Early Help teams to ensure joined-up support across the county.

Youth services are delivered from a network of youth centres and hubs across Devon, including Exeter (The 100 Club), Barnstaple (Georgies), Bideford Youth Centre, Okehampton (Room 13), Exmouth (The Hive), Newton Abbot (The Station), Ottery St Mary (The Station), Tiverton Youth Centre, and Sidmouth Youth Centre. Since 2014, most of Devon's youth service has been commissioned and outsourced to Space Youth Services, an independent social enterprise that runs the county's youth centres and programmes, with additional provision delivered by Young Devon through its YES Centre's in Newton Abbot, Exeter, and Barnstaple. This commissioning arrangement allows the council to retain strategic oversight while specialist providers deliver day-to-day youth work.

The **Family Group Conferencing (FGC) service** in Devon enables families to take the lead in planning for children when there are safeguarding or welfare concerns, with independent coordinators supporting them to create their own plan for approval by professionals. The service is countywide, with coordinators based across localities and linked to Early Help and Children's Social Care. Referrals are made by social workers or Early Help practitioners through MASH or internal processes, with parental consent.

FGC plays a strategic role in preventing children from entering care where safe alternatives exist, strengthening family networks, and supporting permanence planning, early help, and safeguarding duties. Government policy now aims to mandate family-led decision-making such as FGCs before care proceedings, as set out in the forthcoming *Children's Wellbeing & Schools Bill*, with research by Foundations (2024) showing that national rollout could prevent thousands of care placements and save over £150m within two years.

The **Young Carers service** provides support for children and young people under 18 who care for family members with illness, disability, mental health needs, or substance misuse. The offer includes an assessment of needs, one-to-one support, respite and short breaks, peer support groups, and help to balance caring with education and wellbeing.

Specialist young carers workers, commissioned by Devon County Council (currently delivered through Devon Carers/Westbank), also provide information, advice, and signposting, run targeted activities and clubs, and work with schools to ensure young carers are identified early and supported in their learning.

The **Devon Youth Justice Team** works with young people aged 10–17 who offend or are at risk of offending, aiming to prevent reoffending and keep communities safe. It brings together staff from social care, police, probation, health, and education to deliver assessment, intervention, and support that addresses risks and builds positive futures. With office bases in Barnstaple and Exeter. A Youth Offending Team (YOT) Board (required under the Crime and Disorder Act 1998.) provides governance and strategic oversight for the local YOT. It is a multi-agency partnership board, including senior leaders from the local authority, police, probation, health, education, and the voluntary sector, which sets priorities, monitors performance, ensures statutory duties are met, and aligns youth justice work with wider children's and

community safety strategies.

Current delivery – Community Health Services

Children and Family Health Devon (CFHD) were commissioned in 2019 as the NHS service responsible for delivering children's community health services across Devon (excluding Plymouth). It is operated by Torbay and South Devon NHS Foundation Trust, in partnership with Devon Partnership NHS Trust and Royal Devon University Healthcare NHS Foundation Trust. Rated Good by CQC (overall Trust effectiveness - Requires Improvement) A section 75 agreement is in place for a range of services including- CFHD, Short Breaks and Child Death overview panel. With the ICB acting as lead commissioner on behalf of the LA for CFHD. Devon County Council contributes to the pooled fund.

CFHD provides a range of services, including:

- Community Children's Nursing
- Specialist school nursing for children with complex health needs Community therapy services (Speech & Language, Occupational Therapy, Physiotherapy)
- Child & Adolescent Mental Health Services CAMHS
- Children in Care health services
- Services for neurodiversity, physical disabilities, early developmental delays, sensory needs, palliative care
- Access to Devon's Family Information Service (a statutory service Required under the **Childcare Act 2006** (sections 12 and 13))

Outline Transition Plan Children's Social Care, SEND and Education Services in Devon

Strategic System Challenge A: Political and Cultural Alignment		
Reorganising Children's services can be deeply political and cultural challenge as well as a structural and technical one. It is fraught with substantial risks to highly vulnerable children. Leaders must not at any point lose focus on the safeguarding of children through transition and beyond. It is important to align political leadership, partnership responsibilities, resources, officer teams, and organisational cultures across the newly formed authorities.		
Phase 1 Preparation	Phase 2 Transition	Phase 3 Transformation
	Deliver a joint leadership development plan. Bringing elected members and senior officers from all legacy councils together using structured sessions to explore expectations, risk appetite, governance models, and shared priorities.	Embed values and behaviours in governance. Codify expectations for behaviour, decision making and collaboration into new constitution, performance frameworks, and leadership development. Reinforce these through appraisal, induction and ongoing peer support.
	In creating a shared narrative for the new council, develop a clear story about what the new council is for, what will be different, and how it will serve	Address cultural differences openly by creating safe space to acknowledge and work through those differences. risks, and reform goals to

	communities better — especially in ASC, where continuity and compassion are vital.	ensure informed oversight.
		Prioritise member induction and Children's Services literacy by providing early and ongoing development to help members understand Children's Services duties, budgets etc. Including Children's Social Care, Education and SEND.

Strategic System Challenge B: Disaggregating Funding

Disaggregating Children's services during local government reorganisation presents a unique set of challenges, including how to model and implement fair, practical service and budget splits between new unitary authorities.

While other functions (such as refuse collection or planning) may lend themselves more easily division along new administrative boundaries, children's services are deeply embedded in pattern of demand, supply and risk that often cross or defy geographic logic.

Phase 1 Preparation	Phase 2 Transition	Phase 3 Transformation
Agree criteria for disaggregating funding including need, deprivation and agree rules for applying ordinary residence.	Establish shared understanding of how need and provider market composition has been shaped by strategic commissioning decisions. Develop business cases to agree transitional funding to allow for transformation. Reform models of delivery.	Implement and monitor delivery of agreed financial and risk management transition plan.
	Agree strategic and financial risk management plan and governance.	

Strategic System Challenge C: ICT Rationalisation and contract novation

ICT Rationalisation Is critical to maintaining continuity of care, statutory compliance, and system functionality during and after local government reorganisation.

The disaggregation process can be complex in that legacy IT systems were never designed to be split. Case management platforms, finance systems, provider databases, and contract management tools are often highly customised, poorly documented and interwoven with broader infrastructure. Additionally, performance data critical to assurance and oversight are built out from these systems.

Phase 1 Preparation	Phase 2 Transition	Phase 3 Transformation
Secure ICT, performance, and legal Capacity and establish digital programme teams, legal contract review, and	Secure inter-authority agreements for shared contracts and systems.	Scale up integrated performance data through integrated data platforms. Creating greater intelligence to shape preventative and

supplier negotiation		early help delivery and manage demand.
Map and rationalise the contracts/license portfolio by completing an audit of active and lapsed contracts, and triage which need novation, which can be reprocurd, and which require bespoke solutions.	Where services or suppliers must remain shared for a period, ensure legally binding agreements on funding, security access and decision making	
Strategic System Challenge D: Provider Engagement		
A significant proportion of Children's Services spend goes to external provision in some areas. Disruption to this system, even if unintended, can quickly translate into instability for the most vulnerable children.		
Phase 1 Preparation	Phase 2 Transition	Phase 3 Transformation
<p>Audit commissioning and sufficiency strategies, market development plans, contracts and provider geography to understand who delivers care, at what cost, to whom.</p> <p>Determination of continued joint commissioning or disaggregation of contracts. Avoiding accidental market destabilisation by splitting a contract geographically that providers need scale to sustain operations.</p>	<p>Set up a provider transition forum early in the programme for sharing information, flagging risks, and co-designing solutions.</p> <p>Forums to be grouped with Children's Homes, Fostering and Supported Accommodation providers brought together. All other providers</p>	<p>Building strong and collaborative provider relationships to better meet the needs of the new Unitary's children.</p> <p>Regular and ongoing communication and joint working.</p> <p>Co-designed models of care. Provider and joint agency learning events to assess impact and develop change.</p> <p>Clear and resourced sufficiency strategy and market development plan developed locally, alongside regional collaboration particularly for provision for children with the most complex needs.</p>
	Test contract terms and pricing models before rollout to avoid a "lift and shift" approach to contract novation. Invite providers to review new terms and give feedback: especially smaller organisations who may struggle to absorb complexity.	
	For placements in children's homes, family-based care and supported	

	accommodation work collaboratively with other councils through the changeover: agree transitional alignment to inflation uplifts, price re-negotiations. To manage the market, prevent unnecessary competition between LA's and to reduce the administrative burden on providers.	
Children's Services Strategic Challenge 1: Workforce Pressures		
<ul style="list-style-type: none"> Recruitment and retention difficulties exacerbated by cost-of-living issues and competition with other sectors. Agency rate (At Jan 25) 47% against establishment. "Management oversight and supervision are still not used effectively or consistently enough" Ofsted ILACS Capacity in specialist roles, including SEND caseworkers, educational psychologists, and therapy services (SEND inspection) 		
Phase 1 Preparation	Phase 2 Transition	Phase 3 Transformation
identify and appoint senior leaders: particularly 'shadow' Director of Children's Services and assistant directors of children's social care, education and SEND services as early as possible: Empowered in shadow roles to shape transition plans, stabilise key partnership relationships, and begin carrying the load of distributed leadership well before go-live.		
Joint workforce mapping and early talent planning alongside collaborative recruitment campaigns to avoid bidding wars and ensure shared messaging about career opportunities in the new structures.	Agree principles on pay and conditions to prevent destabilising market inflation; short term shared or hosted roles particularly in specialist or senior functions where continuity is more important than early separation.	<p>Embed sustainable workforce model with reduced caseloads, strong supervision, structured pathways, and housing/economic levers to support retention.</p> <p>Leverage the city's higher education institutions (e.g. University of Exeter, Exeter College) to create structured pipelines into care careers.</p>
Values and Vision workshops with senior officers and Members to co-create a shared sense of purpose and clarify what success should look and feel like post transition.	Create a narrative to share with staff and communities about what the new organisation stands for and their part in it not just how it will be structured but why it exists and why it will be different	Use local economic development, housing, and planning powers to support affordable housing for children's services staff including Social Workers, Team Leaders and SEND caseworkers, Educational Psychologists, improving retention.
Define "safe and legal" through clear, collaborative		Lead joined-up workforce campaigns (e.g. "Proud to

decision-making based on agreed and rigorously applied criteria around safety and statutory duties.		Care Exeter”) focused on urban/rural recruitment advantages.
Children’s Services Strategic Challenge 2: Demand & complex needs		
<ul style="list-style-type: none"> • Rising complexity of children and family needs (neglect, domestic abuse, mental health, substance misuse). • Timeliness of Child Protection strategy meetings • Sufficiency to meet the needs of children with the most complex lives 		
Phase 1 Preparation	Phase 2 Transition	Phase 3 Transformation
<p>Establish baseline demand data (Children in Need, Child Protection and Children Looked After, Consider local strategic needs data for risk areas such as exploitation, County Lines, self-harm and emotional wellbeing needs).</p> <p>Map overlaps with housing, education, domestic abuse, mental health, substance misuse.</p>	<p>Ensure shadow portfolios and directorates reflect the future intent of the new organisation: e.g. explicit bringing together of housing, health integration and adult care.</p> <p>Develop integrated early help and edge-of-care pathways. Strengthen MASH thresholds and consistency</p>	<p>Development of integrated pathways with housing, education, and employment services to better support young adults in transition.</p> <p>Embed “no wrong door” approach. Best Start Family Hubs developed into integrated early help with housing, education, employment, and health.</p> <p>Develop highly effective work through the local safeguarding partnership addressing exploitation and multi-agency contextual safeguarding approaches.</p>
<p>Working with Community Health Devon to shape pathways for children and families in Exeter.</p> <p>Assess the effectiveness of joint commissioning arrangements</p>	<p>Development of integrated pathways with strategic NHS ICS commissioners and operational delivery partners including Primary Care Networks (PCN’S); RDHU and DPT NHS Trusts.</p> <p>Bring together commissioners and delivery partners for mental health, domestic abuse and substance misuse services.</p>	<p>Integration and co-location of housing, social care, NHS and VCSE services into Neighborhood Area Teams aligned with best start family hubs, early family help and Integrated multi-agency child protection</p>
<p>Understand the needs of the most vulnerable children, where they are placed and the provision, they are receiving</p>	<p>Plan as a partnership for tenacious oversight and joint planning for the continued care of these children throughout transition or where appropriate step down or move on.</p>	<p>Develop strategies and delivery plans to better meet needs, prevent escalation and improve care models for children with the most complex lives. Working in regional collaborations with Provider collaborative, NHS partner and commissioners,</p>

		Ofsted and the police.
Children's Services Strategic Challenge 3: Placement market fragility		
<ul style="list-style-type: none"> • Insufficient local foster/residential capacity • Instability • Rising costs. 		
Phase 1 Preparation	Phase 2 Transition	Phase 3 Transformation
<p>Update sufficiency strategy and engage with the market</p> <p>Assess sufficiency gaps in foster care, children's home and residential provision and costs.</p> <p>Engage providers on future role of the new unitary .</p>	<p>Using planning and housing powers to incentivise the right type of provision.</p> <p>Pilot Mockingbird fostering hub. Options appraise the development or commissioning of additional small therapeutic homes.</p> <p>Develop local brokerage and joint commissioning with neighbours.</p>	<p>Align Section 106 and City Development frameworks to steer investment into areas of greatest need.</p> <p>Shift sufficiency: expand fostering capacity. Build partnerships for therapeutic homes in the new Unitary area, using planning/housing levers to shape provision and provider relationships.</p> <p>Grow in-house fostering capacity, develop specialisms aligned to local need and strategic assessment of sufficiency. Collaborate for recruitment if the DfE funded pilot does not continue</p>
<p>Assess the local offer for Care Leavers.</p>	<p>Establish early and in shadow form a Corporate Parenting Board.</p> <p>Engage with Care experienced young people to determine their lived experience.</p> <p>Develop resourced strategic priorities for the new unitary.</p>	<p>Further enhance the local offer and the Pledge commitments to Care Leavers for prioritised and supported access routes to education, skills and training and employment.</p> <p>New unitary recruitment policies to pro-actively target Care leavers for employment opportunities.</p> <p>Care Leavers prioritised for housing and housing support.</p> <p>Develop specialist capacity to respond to young people with complex lives.</p>
<p>Connect with good practice in Regional Care Co-operatives, connect with regional and sub-regional partners.</p>		<p>Consider joining or convening a Regional Care Co-operative approach to meet the needs of all children better but most explicitly the needs of</p>

		children with the most complex lives such as in youth justice, mental health or neurodiversity
Children's Services Strategic Challenge 4: SEND sufficiency & inclusion		
<ul style="list-style-type: none"> • EHCP backlog, and timeliness performance • Autism diagnostic waits • Alternative Provision /special school pressures, demand and capacity shortfall. • Dedicated Schools Grant High needs block deficit and pressure 		
Phase 1 Preparation	Phase 2 Transition	Phase 3 Transformation
<p>Review EHCP backlog and timeliness.</p> <p>Review strategies and capital plans for Alternative Provision and special school provision needs. Benchmark with areas of good practice.</p> <p>Review impact of Locality Inclusion Partnerships as part of improvement plan.</p>	<p>Stand up SEND leadership. Building strong trust and confidence with partners and schools.</p> <p>Strengthen and embed locality inclusion partnerships with Multi Academy Trusts as part of transition arrangements.</p>	<p>Deliver backlog recovery and achieve 20-week timeliness. Robust annual review cycle embedded.</p> <p>Reducing demand for EHCP's through the impact of the locality inclusion partnership and the subsequent stronger mainstream inclusion capacity.</p> <p>Ensure special school and Alternative Provision capacity meet the needs of the children in the locality.</p> <p>Assessing future need and establishing high quality strategic and resource forward plan.</p> <p>Co-produce and implement assistive technology strategy promoting independence, choice and control</p>
Children's Services Strategic Challenge 5: Parent/carers engagement & trust		
<ul style="list-style-type: none"> • Persistent dissatisfaction, • Poor communications, • Inconsistency and inequity in SEND offer. 		
Map engagement/feedback structures with parents, carers, VCS, and schools. Identify gaps in communication.	<p>Establish local parent carer forums.</p> <p>As a partnership develop place based Local Offer addressing inequity.</p> <p>Stronger coordination with voluntary and community</p>	<p>Embed sustainable co-production and trust-based engagement. Stronger VCS coordination across the area.</p> <p>Develop consistency and</p>

	sector partners already embedded in neighbourhoods	reliability in the offer. Improve trust and transparency
Children's Services Strategic Challenge 6: Integration with Health		
<ul style="list-style-type: none"> • Long waits for ASD diagnosis, limited access to pre and post diagnostic support and waits for therapies and CAMHS • Capacity issues in the specialist workforce (speech and language therapy, occupational therapy, mental health support) (SEND Inspection) 		
Phase 1 Preparation	Phase 2 Transition	Phase 3 Transformation
<p>Map current Section 75 and community health arrangements. Engage NHS Devon and charities (Vranch House, Honeylands).</p> <p>Develop shared arrangements in specific areas – e.g. Out of hours emergency response; Section 117 aftercare/ forensic mental health/other specialist support/ financial assessments and charging functions which may benefit from collaboration with wider Devon unitary social care</p>	<p>Maintain current team and delivery structures where practicable, disaggregating staff, caseload and budgets to align with new unitary footprint</p> <p>Consider options to develop separate or continue with combined Section 75 for children's health.</p> <p>Pilot co-location of community teams.</p>	<p>Implement joint commissioning strategies to deliver integrated delivery services within School Cluster or Neighbourhood Area teams areas.</p> <p>Fully operational place-based Section 75. Co-located services, shared workforce planning, integrated therapies, and digital health solutions.</p> <p>Develop partnerships and joint commissioning with Charity sector, joint planning, shared outcomes.</p>
Establish collaborative commissioning and procurement teams to help manage inheritance of Devon-wide contracts with providers	Maintain arrangements with Mental Health and Learning Disability partnerships to co-ordinate collaborative transformation with all age services.	

