



SEND Accelerated Progress Plan: 6 Month Review November 2023

Name of the local area	Shropshire
Date of inspection	21–23 November 2022 (Special Educational Needs and Disability (SEND) Revisit)
Date of publication of the revisit report	06 February 2023
Date of six month update report	19 October 2023
Accountable officers from the LA and CCG	David Shaw (LANO) – Shropshire County Council Tanya Miles – Exec Director of People Shropshire County Council Gareth Robinson, Director of Delivery and Transformation and Executive Lead for SEND, Shropshire Telford and Wrekin Jennifer Griffin – Designated Clinical Officer for SEND, NHS Shropshire, Telford and Wrekin
DfE and NHSE advisers	POC Katie Moore (DfE) and Debbie Ward (NHSE)

Current context in relation to the Accelerated Progress Plan

Shropshire Local Area has committed to addressing the Accelerated Progress Plan through a range of initiatives, largely led through multi-agency workstreams. Governance around the APP has enabled strong oversight of progress with actions and has provided leverage to assist challenges impacting on progress. As the APP embeds and actions are completed, greater focus is placed on the impact of these actions on enhancing the experience of children and young people and their families.

Progress has been made in a number of areas, particularly in relation to the provision of information, supporting the early years workforce and developing effective multi-agency working around EHCPs. Additionally, the impact of consistent multiagency work to meet speech, language and communication needs has resulted in a slowing of referrals to the Speech and Language Therapy service.

The Local Area has experienced challenges, in line with the national trend, with regards to significant increases in requests for EHC Needs Assessments and referrals to ASD and ADHD diagnostic services. These challenges are ongoing and are unlikely to reduce for some time. We also note that the hangover impact of Covid is continuing to affect CYP within our community, this is particularly evident when thinking about CYP's emotional wellbeing and mental health.

To support the actions within the APP, following the Ofsted/CQC inspection in November 2022, training and support has been utilised from a range of sources. In late November 2022 the RISE consortium delivered a multiagency EHCP workshop which formed the basis of developments with EHCPs. The RISE consortium returned in January 2023 to deliver a co-production workshop which was well attended across agencies. The SEND team have continued to maintain monthly meetings with DfE advisors sharing key updates and information. The DCO and Commissioning Lead have sought support from Coventry and Warwickshire Local Area in relation to ASD and ADHD waiting times, upon the advice on the Regional NHS SEND Lead.

Co-production, Communication and Engagements

Following the co-production of the Accelerated Progress Plan (APP) in March 2023 with PACC (Parent Carer Forum) and IASS (Information Advice and Support Service) and associated partnership workstreams, work has been ongoing to effectively engage in co-production and develop impactful communication channels.

We have tested different approaches to communication, to improve how we ensure that progress made through the workstreams and associated challenges are communicated to CYP with SEND and their families. We acknowledge the importance of communicating effectively with the community and reflect that the initial proposal of having a stand alone Local Offer and Communication workstream resulted in duplication of communication approaches. More recently we have developed a core group of communication leads from the ICB, LA, Parent Carer Forum and IASS to act as a central point to agree communication methods for important news stories to share with the community. Additionally, workstreams have agenda items dedicated to good news stories and challenges which need to be shared with the community. This has most recently resulted in the SEND Newsletter including an update from the Neurodiversity Workstream talking about new initiatives such as library staff receiving training to be Neurodivergent Friendly. Work is ongoing to improve our communication approach and utilise a broader range of communication channels.

Parent Carer Co-production has continued to be integral to all activity related to the Accelerated Progress Plan (APP). Parent Carer representatives have been a part of all workstreams associated with the APP. Some of the most notable outputs following co-production are as follows

- Redesign of the Child Development Centre Website
- Development of the Neurodiversity Practitioner role
- Decision not to pursue the Dimensions Tool Approach

We remain committed to further developing and embedding effective co-production, ensuring that the area partnership has strong methods of gathering views of all parent carers in innovative ways, including our most seldom heard groups.

Co-production with Children and Young People with SEND has developed at a slower pace. We recognise that co-production is regularly taking place with CYP at an individual level, for example a CYP focus group and survey of CYP newly diagnosed with diabetes is hosted by the Paediatric Psychology Service and CYP consistently contribute to setting their outcomes in the mental health service, as acknowledged in the recent Telford SEND Inspection. Plans are being developed for broad scale co-production with CYP to better understand their experience of SEND. This includes plans to deliver an accessible survey to CYP with SEND. An event was held in October 2023 to better understand the range of CYP co-production activity, which is already taking place and identify any further opportunities, for example the Preparing for Adulthood workstream are taking an expert by experience approach to co-produce their developments around supported internships.

Accelerated Progress Plan

RAG: R: Delayed or Low confidence of completion;
A: Completion delayed or at risk but being managed;
G: Completion on track and will be met;
C: Completed;

Area of weakness identified in the original inspection

Priority Area 3: Significant wait times for large numbers of children and young people on the Autism Spectrum Disorder (ASD) and Attention Deficit Hyperactivity Disorder (ADHD) diagnostic pathways.

Overarching Aspiration: The needs of CYP related to ASD & ADHD are effectively identified at early stages and there is high quality support both pre, during and post diagnosis

Actions designed to lead to improvement

Theme of Actions	Completed Actions	6 Month update October 2023	Original date	RAG
3.1 Actions to ensure clarity about the support available	3.1.1 Collate details of all support currently available for those with (or possibly with) ASD & ADHD age 0 - 5	All support available for Neurodivergent Children and their families are listed here Local Support National Support	May 23	
	3.1.2 Collate details of all support currently available for those with (or possibly with) ASD & ADHD age 5 - 18		Jul 23	
	3.1.4 Have a specific ASD area on local offer website (as requested through the Local Offer working group)	The ND Workstream made the decision to have a Neurodiversity area on the Local Offer which links through to the resources developed on the Healthier Together website	Jun 23	
	3.1.5 Publish all the support available on the local offer website		Sep 23	
	3.1.6 Promote the support on offer via SEND newsletter, local offer website, healthier together website, PACC newsletters, Special Educational Needs Coordinator (SENCo) and Head Teacher networks		Sep 23	
		Activity has taken place to promote the support available, most recently through the Shropshire SEND newsletter We note promotion and communication is an ongoing requirement		

3.2 Actions to ensure good quality support for Early Years and Educational Settings	3.2.1 Gather & analyse feedback from early years & educational settings regarding neurodiversity and how to support identified needs	Feedback has been gathered & analysed from early years & educational settings regarding neurodiversity and how to support identified needs, this has informed future training plans	May 23	
3.3 Actions to ensure good quality support for parents and carers	3.3.1 Continue the Autism West Midlands offer of support which does not require a diagnosis to access	Autism West Midlands contract has been extended for 2 years until 31/03/2025. We recognise and celebrate that there has been an increased uptake of the Autism West Midlands summer programme in 2023.	Apr 23	
	3.3.2 Develop and launch the Child Development Centre CDC advice line which will be accessible to children for whom there are concerns, and help in navigating the system and what's available	The Child Development Centre advice line is live following a soft launch. The advice line is accessible to those known to CDC and those within a 6 month period following discharge.	Jun 23	
	3.3.3 Roll out of the Healthier together website with advice and guidance for the ND population	As detailed above pages relevant to the neurodivergent CYP population and their families have been developed on the Healthier Together website . Clinical oversight of these pages is in place if further adaptations are required. We note promotion of this resource is ongoing.	Apr 23	
3.4 Actions to enable trial of enhanced support	3.4.1 Develop and recruit to the roles of ND Practitioners to support a targeted cohort	Recruitment to the roles of ND Practitioners is underway, with the aim to start in post in January 2024	Sep 23	
	3.4.3 Develop the Dimensions Tool and clarity regarding how the tool will be utilised initially, and evaluated prior to further roll out	An options appraisal was developed to review the likely impact of rolling out the Dimensions Tool. It was agreed through the Quality Assurance Group that the Dimensions Tool would not be pursued at this time.	Sep 23	

Theme of Actions	Incomplete Action	6 Month update October 2023	Original date	Proposed date	RAG
3.1 Actions to ensure clarity about the support available	3.1.3 Collate details of all support currently available for those with (or possibly with) ASD & ADHD age 18+	Work is ongoing with Young People to develop this resource. It has been agreed that as an interim work will be done to develop a resource similar to that of 0–5 and 5–18. Young people will then be supported to contributing to refining the resource and ensuring accessibility.	Sep 23	Dec 23	
3.2 Actions to ensure good quality support for Early Years and Educational Settings	3.2.2 The multiagency ND Training Steering Group will co-produce a plan to meet the identified needs of schools and settings including training and coaching to enable early identification and support for needs related to ASD and ADHD	A plan is in place and initial inclusion days have had a focus on ND with specialists from local CAMHS service as guest speaker. The Autism in Schools project has funded places on the Autism Education Training course, including a focus on senior leadership with an acknowledgement that this is key to effective and lasting improvements. 18 settings attended the first course. This will continue to be rolled out this academic year hence the extension of the timeframe.	Jul 23	Dec 23	
	3.2.3 Review and develop the outreach support available to early years & education settings to ensure that CYP's needs are identified early and supported well	Activity has taken place through termly inclusion days to support schools to embed good practice. A business case is under review for 2 additional posts to deliver a SEN outreach role to early years and foundation stage settings. These roles will support settings to identify and meet needs as early as possible. A baseline survey has been developed to identify current levels of confidence and skills in early years settings, this will be circulated in Autumn term 2. Work is underway to roll out the 'train the trainer' approach around the 'understanding your child' Solihull approach. This is to support foundation stage and early years settings.	Sep 23	Jan 24	
	3.2.4 Early years settings to complete a self-evaluation of their inclusivity and their approach to admittance – in each locality there will be one setting who has done the SEN review and is	20+ PVI early years settings have completed the NASEN SEND Review and subsequently developed an action plan for their setting. The intention is for these 20 settings to support other PVI early years settings to complete this review and action planning.	40% of settings by end of Jan 24		

	engaged in supporting other settings in their locality				
	3.2.5 Education settings to complete a self-evaluation of their inclusivity and their approach to enabling pupils to remain in mainstream education and thrive– in each locality there will be a professional learning network to collaborate and share practice (peer review programme)	Whole School SEND presentation delivered to SENCOs during SENCO Network Meeting in November 2022. This was followed by a Pillars of Leadership Session for Shropshire Headteachers in April 2023 to highlight the importance of engaging in a SEND Review. All leaders attending the session received the SEND Support Resource for school leaders connecting them to the evidence-informed resources from WSS, NASEN and EEF. Some schools have been identified to engage in conducting SEN reviews through peer review approach. On 6 September 2023 Shropshire Local Authority SEN leaders attended a sharing learning event with Warwickshire to discuss and share work on workforce development & training alongside the approach to the developing an Inclusion Framework. The Warwickshire approach is to be disseminated at the Inclusion Conference for Shropshire Schools on 24 th November. SEND Reviews to commence in Autumn term 2	40% of settings by end of Jan 24		
3.4 Actions to enable trial of enhanced support	3.4.2 Review the impact of the ND Practitioners to inform the requirements for support in the 2nd year	This action is on track. Evaluation criteria is included in the Service Delivery Plan.	Apr 24		

Area of weakness identified in the original inspection

Priority Area 3: Significant wait times for large numbers of children and young people on the ASD and ADHD diagnostic pathways.

Overarching Aspiration: CYP who require a diagnostic assessment, easily access a high-quality diagnostic assessment in a timely way

Actions designed to lead to improvement

Theme of Actions	Completed Actions	6 Month update October 2023	Original date	RAG
3.5 Actions to ensure referrers know how to make good referrals which are accepted	3.5.1 Clear criteria and referral route for current ASD diagnostic pathway in place - 0-5	The CDC website has been redesigned in co-production with parent carers to detail helpful information about the diagnostic pathway	Apr 23	
	3.5.2 Clear criteria and referral route for current ASD & ADHD diagnostic pathway in place - School age	The BeeU website includes information about referral pathways Work is ongoing to co-produce a Frequently Asked Questions section with parent carers	May 23	
	3.5.5 For the 5 – 18 service promote the 'Advice and Support Recommendations for Referrers' document via SENCo and Head Teacher networks, Primary Care network, SEND Health Operational Group	BeeU have shared guidance on the referral route to all main referrers including schools and GPs.	Jul 23	
3.6 Actions to ensure communication from 5 – 18 diagnostic service is clear	3.6.1 Review communications which are sent out with local SEND parent carer forums	Work has taken place to review and amend communications sent out for the 5 – 18 diagnostic service. This has included the addition of letters being sent to those waiting on the diagnostic pathway to provide assurance that they are still in the system, and signpost to support available.	Mar 23	
	3.6.2 Implement changes to improve communications and feedback changes to the SEND Quality and Assurance Group to review the impact on CYP/family experiences	The Quality and Assurance Group now has regular attendance from MPFT strategic leads, to ensure consistent and ongoing communication and updates can be shared	Sep 23	
3.7 Actions to avoid CYP going into crisis whilst	3.7.1 All referrals considered at a Multi-Disciplinary Team discussion (including ASD practitioners, OT, nurses, social workers,	This process has been embedded in BeeU.	Apr 23	

waiting for diagnosis by implementing robust approaches to manage risk	psychiatry, ADHD specialists, psychology, Cognitive Behavioural Therapy)			
	3.7.2 Upon acceptance of referral CYP to be offered an initial holistic assessment which enables access to range of support available within BeeU		Apr 23	
	3.7.3 Protocol in place for prioritising CYP for ASD assessment based on factors such as whether their placement is at risk of breaking down	This process has been adopted in BeeU and led to some more effective joint working between health and social care.	Apr 23	
3.8 Actions to ensure capacity of the diagnostic service meets the demands of the population	3.8.1 Commissioner understanding of current waiting times from referral treatment for ASD 0 - 5	Monthly contract review meetings include details of waiting times, this information is shared at termly SEND Partnership Boards.	Jun 23	
	3.8.2 Commissioner understanding of current waiting times from referral treatment for ASD & ADHD 5 - 18		Jun 23	
	3.8.3 Commissioner understanding of current waiting times from referral treatment for ASD & ADHD 18+		Jun 23	
	3.8.9 Midlands Partnership Foundation Trust (MPFT) reviewing internal processes, progressing recruitment into 1 vacancy	MPFT BeeU service have recruited to maternity leave cover, and some additional staffing through the service underspend.	Jun 23	
	3.8.10 Recruit to an enhanced Learning Disability and Autism team structure	The Lead CYP and LDA commissioner took up post in October 2023, with other commissioner roles now filled.	Jun 23	
3.9 Actions to monitor and escalate long waits to ICS	3.9.1 Clear data reporting of waiting list from providers with oversight from performance & assurance manager	The data quality from service providers has improved since March 2023.	Jun 23	
	3.9.2 Ensure the quality team have assurance in place around harm review and risk process	Quality team have oversight regarding measures in place to avoid harm.	Jun 23	
	3.9.3 Dependant on level of harm as ascertained by harm review and risk process, ensure the	Quality team have confirmed that waiting lists related to ND are on the System Quality Group risk register within the ICB.	Jul 23	

	potential risks of long waits are noted on the ICB risk registers			
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Theme of Actions	Action not completed	6 Month update October 2023	Original date	Proposed date	RAG
3.5 Actions to ensure referrers know how to make good referrals which are accepted	3.5.3 Clear criteria and referral route for current ASD & ADHD diagnostic pathway in place - 18+	Clear criteria and referral route is in place for the adult ASD diagnostic service . However work is ongoing to develop the capacity of the Adult ADHD diagnostic service/s.	Apr 23	Dec 23	Yellow
	3.5.4 Clear criteria and referral route for current ASD & ADHD pathway published on the local offer	The Healthier Together website includes details of how to access the ASD diagnostic service . Due to the current context regarding adult ADHD this has not been completed for ADHD.	Jul 23	Oct 23	Green
3.7 Actions to avoid CYP going into crisis whilst waiting for diagnosis by implementing robust approaches to manage risk	3.7.4 Further promotion of how families and CYP can contact the service if their situation changes so their prioritisation can be reconsidered (currently stated in letter)	The service has reviewed communication to families on the waiting list, including an additional communication for those waiting for an extended period. This letter details how families can contact the service if their circumstances have changed. Further to this, additional funding has been secured for Assistant Psychologist posts to proactively contact those on the waiting list. For those waiting on the 0 – 5 ND pathway they are now able to access the CDC advice line for support.	Sep 23	Nov 23	Green
	3.7.5 Enhance the risk management approach through additional funding from the Learning Disability and Autism LDA program	The BeeU service now have an additional Assistant Psychologist, and are recruiting a further Assistant Psychologist post to proactively manage those waiting a long time on the ND diagnostic pathways. Their work will include offering support via coffee mornings and reaching out to families who have had to wait without contact from the service.	Sep 23	Nov 23	Green

	3.7.6 Complete an audit of cases waiting over 6 months to assess the impact of waiting and review the effectiveness of approaches to manage risk. Share the learning from audits with the SEND Partnership Board and Learning Disability and Autism Board	This audit is scheduled between ICB quality team & BeeU for 16 th October 2023.	Jul 23	Nov 23	
3.8 Actions to ensure capacity of the diagnostic service meets the demands of the population	3.8.4 Develop, fund and recruit to short term recovery plans	Short term recovery funding has been put into the 5 – 18 service and this has been delivered through Healios, however the short-term recovery has not met the increased demands due to the increasing referral rates. The CYP head of Commissioning is now in place, therefore work to understand current position and demand/capacity in the 0 – 5 service will commence.	Jun 23	Dec 23	
	3.8.5 Understand the capacity of the services currently	This action has been completed for 5 - 18 and adult services. CYP head of commissioning to complete action for 0 - 5 service.	Jun 23	Nov 23	
	3.8.6 Develop a trajectory of future growth and capacity required to meet the needs	The ICB commissioning team are focusing on these actions. With regards to ADHD the lead commissioner has been linking with regional and national support regarding this.	Jun 23	Nov 23	
	3.8.7 Develop a business case to fund the increased demands across the age range	Business cases are in development for some clinical areas and age groups, the new ICB Commissioner will lead on this work in partnership with providers.	Jun 23	Nov 23	
	3.8.8 Services are reviewing their skill mix to mitigate the impact of challenges with recruitment and retention, in the context of increased demand.	Work is ongoing in provider services to develop the skill mix of services to enhance the 0 – 5 ASD pathway. Quality Impact Assessments have been completed and HR have been consulted.	Jan 24		

Area of weakness identified in the original inspection

Priority Area 4: Significant waiting times for those needing assessment and treatment from the speech and language therapy service.

Overarching Aspiration: Speech language and communication needs of children are effectively identified at early stages and there is high quality support at universal and targeted levels to reduce the number of children who require more specialist support

Actions designed to lead to improvement

Theme of Actions	Completed Actions	6 Month update October 2023	Original date	RAG
4.1 Actions to ensure clarity about the support available	4.1.1 Collate details of all support currently available from Public Health for those with SLCN including from the Best Start to Life programme	The mapping of Public Health support for those with SLCN has been completed. Close working is taking place in relation to the Best Start for Life initiatives with SLTs involved and influencing the programme of work.	May 23	
	4.1.3 Map the full offer of current SLT support – SLT Handbook	The SLT Handbook for parent carers and partners has been developed to support understanding of the clinical offer from the SLT service. Additionally certain clinical pathways have been mapped against the iThrive model .	Apr 23	
	4.1.8 Continue the multiagency SLCN workstream to enable the continuation of support for SLCN being delivered by all	The SLCN workstream has continued with strong multiagency attendance which has driven many of the system wide improvements.	Apr 23	
4.2 Actions to ensure good quality support for Early Years and Educational Settings	4.2.1 Education to promote the use of SLC UK data tracking to support the implementation of Talk Boost	Usage of the SLC UK data tracking has increased across the area and is reviewed at SLCN workstream meetings. We note promotion of this tool is ongoing.	Jun 23	
	4.2.3 Evaluation of the impact of Talk Boost, including the impact on the early identification and support of SLCN. This evaluation to be reported to	Evaluation has been gathered through the SLC UK Talk Boost tracker which indicates there has been a closing of the language gap for 65% of children for	Jul 23	

	the SLCN workstream, Quality & Assurance Group and SEND Partnership Board.	whom baseline and subsequent performance was reported. There are some signs of reduction in referral rates to SLT services.		
	4.2.7 Continue to deliver Early Years, KS1 and KS2 of Talk Boost training to ensure sustainability	The delivery of Talk Boost training has been ongoing, plans are in place for future training to the education workforce.	Apr 23	
4.3 Actions to ensure good quality support for parents and carers	4.3.3 Publicise the commitment to SLCN being everyone's responsibility and that everyone has a role to play in supporting SLCN	There is an acknowledgement across the system that all parties have a role to play in supporting children and young people's speech, language and communication needs. This has resulted in some slowing of referral rates to the SLT service.	Apr 23	
	4.3.4 Maintain the SLT service advice line	The SLT advice line has been maintained, and SLT staffing has been allocated to this element of the service moving forward.	Jul 23	

Theme of Actions	Incomplete Actions	6 Month update October 2023	Original date	Proposed date	RAG
4.1 Actions to ensure clarity	4.1.2 Collate details of all support currently available from Early Years Settings for those with SLCN	Much of the mapping work has been done, however additional workforce capacity has been committed to	May 23	Nov 23	

about the support available	4.1.4 Collate details of all other support currently available for SLCN (excluding Speech and Language Therapy SLT)	finalise and publish the mapping work. This publication will be similar to that completed for the ND workstream.	Jul 23	Nov 23	
	4.1.5 Publish all the support available on the local offer website		Aug 23	Nov 23	
	4.1.6 Promote the support on offer via SEND newsletter, local offer website, SCHAT NHS (National Health Service) SLT website, PACC newsletters, SENCo and Head Teacher networks	The SLT Facebook page , Best Start for Life events and other services have promoted the range of support available for SLCN. However, following the publication of the full range of support available further promotion will take place.	Aug 23	Nov 23	
	4.1.7 Have a specific SLCN area on local offer website (as requested through the Local Offer working group)	This area will be developed following the publication of the full range of support available. This page will be similar to the Neurodiversity page on the local offer website.	Aug 23	Nov 23	
4.2 Actions to ensure good quality support for Early Years and Educational Settings	4.2.2 All settings to utilise the SLC UK data reporting on Talk Boost	Although there has been an increase in settings using the SLC UK data reporting tools for Talk Boost this has not been wide scale. Some settings have developed alternative practices to capture data which is effective on an individual level but does not contribute to the overall picture of impact.	Sep 23	Jan 24	
	4.2.4 Planned Inclusion sessions for early years and educational settings including SLCN	The Early Years SENCO forums have been reinstated to enable sharing of learning and best practice. Education Inclusion Days have been scheduled throughout the year however further discussions are needed to plan sessions focused on SLCN.	Apr 23	Dec 23	
	4.2.5 Review and develop the outreach support available to early years & education settings to identify needs early and provide good quality support, including best practice SLCN Teaching (SLCN Primary Talk and Early Talk ICAN)	Outreach support has evolved since November 2022 (SEND inspection re-visit), several new initiatives are in place, including Termly Inclusion Days, continued roll out of Talk Boost and re-established the early years SENCo forum. However further work is needed to co-ordinate and fund the outreach services available in Shropshire.	Sep 23	April 24	

	4.2.6 Pilot the roll out of Talk Boost Year 7	The Talk Boost training workforce need to undertake further training modules to roll out KS3 Talk Boost, which is happening at present.	Sept 23	Jun 24	
	4.2.8 Videoing SLT training offer to make it more accessible to support early identification and addressing CYP's needs	The first set of training videos have been completed, dialogue is ongoing with Digital Services to identify the best way to enable accessibility and retain integrity.	Sept 23	Jan 24	
	4.2.9 SLT relaunching traded services offer for ELKLAN	Work is underway to enhance the availability of traded services from SLT. Progress with this is impacted on by national SLT workforce shortages.	Sep 23	Jan 24	
4.3 Actions to ensure good quality support for parents and carers	4.3.1 Enhance the peer support offer for families regarding SLCN, adopting a SLCN champions model`	Joint work is taking place with PACC (parent carer forum) to explore the current offer of support for families with children and young people with SLCN. This has included work to identify how to engage with families who specifically want support around SLCN.	Apr 24		
	4.3.2 Videoing SLT training offer to make it more accessible	The first set of training videos have been completed, dialogue is ongoing with Digital Services to identify the best way to enable accessibility and retain integrity.	Sept 23	Jan 24	

Area of weakness identified in the original inspection

Priority Area 4: Significant waiting times for those needing assessment and treatment from the speech and language therapy service.

Overarching Aspiration: CYP who require Speech and Language Therapy support can access this in a timely way

Actions designed to lead to improvement

Theme of Actions	Completed Actions	6 Month update October 2023	Original date	RAG
4.4 Actions to ensure the capacity of the SLT service meets the demands of the population	4.4.1 Complete triage upon referral and implement specialist clinical pathways to ensure CYP who have the greatest clinical need for specialist SLT are seen most quickly	The process of triaging CYP and expediting referrals based on clinical needs has enabled CYP requiring specialist clinical pathways to be seen more quickly.	Apr 23	
	4.4.5 Commissioner to understand current waiting times from referral to treatment	Information regarding waiting times are reported to the ICB and reported to the SEND partnership board.	Jun 23	
	4.4.7 Understand the capacity of the services currently	The SLT service have provided details of the capacity within the service with the ICB.	Jun 23	
4.5 Actions to monitor and escalate long waits to ICS	4.5.1 Clear data reporting of waiting list from providers with oversight from performance & assurance manager	SLT data reports are now consistently split to separately reflect Shropshire and Telford & Wrekin children and young people.	Jun 23	
	4.5.2 Ensure the quality team have assurance in place around harm review and risk process	The ICB quality team have an oversight of processes in place to mitigate risk and identify any harm. The SLT service have embarked on an audit process to review potential harm for those waiting over 6 months.	Jun 23	
	4.5.3 Dependant on level of harm as ascertained by harm review and risk process, ensure the potential risks of long waits are noted on the ICB risk registers	The ICB quality team review the risk register through the System Quality Group. SLT waits are not currently held on the System Quality Group risk register.	Jul 23	

Theme of Actions	Incomplete Actions	6 Month update October 2023	Original date	Proposed date	RAG

4.4 Actions to ensure the capacity of the SLT service meets the demands of the population	4.4.2 Complete an audit of cases waiting over 6 months to assess the impact of waiting and review the effectiveness of triage. Share the learning from audits with the SEND Partnership Board and CYP and Families System Board	The audit of harm process has been piloted on 10 children using harm proformas. The process was piloted to identify the effectiveness of the process. Following this a full audit of harm is underway.	Jul 23	Dec 23	
	4.4.3 Complete analysis of current commissioning arrangements across, LA, schools and Health to meet need	Responsible commissioners from the ICB and LA have been identified and engaged in discussions regarding this scoping exercise. The completion of this work has been delayed due to recruitment within the commissioning workforce.	May 23	Nov 23	
	4.4.4 Commissioners to understand current spend, both block contract and individual commissioning and school spend to enable benchmarking	The ICB commissioners hold detail of current spend on the SLT service. LA commissioners are working to better understand the spend on SLT through spot purchasing.	May 23	Nov 23	
	4.4.6 Develop, fund and recruit to short term recovery plans	Since the SEND reinspection in November 2023 there has been an increase to the SLT workforce capacity, however some roles have not yet been recruited to, in part due to the national challenges with SLT recruitment.	Jun 23	Nov 23	
	4.4.8 Develop a trajectory of future growth and capacity required to meet the needs including early indicators of the impact of Talk Boost on referral rates	There is some initial evidence of SLT referral rates slowing, likely due to the impact of Talk Boost. The SLT workforce has been increased although not fully recruited to and experiencing challenges with levels of sickness at present.	Jun 23	Nov 23	
	4.4.9 Develop a business case to fund the increased demands across the age range	As mentioned, the SLT workforce capacity has increased. The newly recruited ICB and LA commissioners and SLT service leads will complete a review of demand and capacity based on new referral rate trends.	Jun 23	Dec 23	
	4.4.10 Review the SLT service specification and ensure that it meets the needs of the population whilst being supported by a context of SLCN being supported by all	Work on updating the service specification has been completed by the SLT service in partnership with members of the SLCN workstream. The newly recruited	Sep 23	Dec 23	

		ICB and LA commissioners have plans in place to complete this work.			
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Area of weakness identified in the original inspection

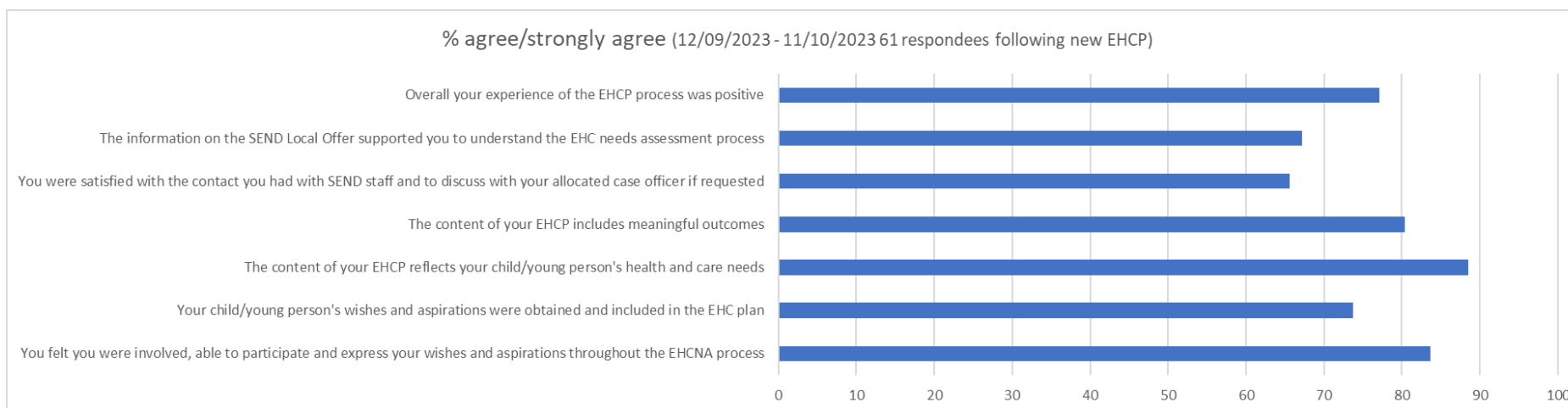
Priority Area 5: Inconsistency in the quality of input from education, health and care into EHC assessment and planning

Overarching Aspiration: Improve consistency and quality of EHCP's supported by good assessment and planning process

We have developed a set of quality standards and a quality assurance framework for both statutory advice and EHCPs. This has been peer moderated by colleagues from Telford and Wrekin. Initial quality assurance auditing demonstrates that the first 29 plans audited meet minimum standards.

Workforce development programme is in place and work progressing. Training programmes are in place for advice writing. By January 24, 80% of the Early Help practitioners will have undertaken training. For Social Care advice, initial analysis of the quarter 2 dip sample audit has shown an overall increase in the quality of Social Care advice, with advice judged as being 'good' or 'outstanding' increasing by 14% on the last quarter.

The baseline survey of parent experience (183 responses) showed percentage satisfaction over all areas broadly in line with expectations for September 2023, around 50%. The regular feedback from parent/carers for new EHC plans issued since September 23, that is routinely collected, showed higher levels overall satisfaction.



Actions designed to lead to improvement

Theme of Actions	Completed Actions	6 Month update October 2023	Original date	RAG
5.1 Actions to ensure the quality of new EHC Plans is improved	5.1.6 Review arrangements for provision of advice from health teams less frequently involved in EHCNAs eg. Epilepsy team, wheelchair services	Training has been delivered to epilepsy teams, wheelchair services, and Bernardo's keyworkers on EHCPs. Support for the diabetes team has been via the Childrens Community Nurse with support from DCO. Processes now in place for DCO to offer support for requests that are made of those who don't regularly provide advice.	Sep 23	
	5.1.7 Develop and deliver a revised induction and EHC plan writing training programme for Special Education Needs and/or Disability Case Officers	Draft Plan Writing IPSEA and CDC training programme completed by 8 case officers. Refreshed 3 weekly internally. All new staff to receive IPSEA training on a rolling programme. Feedback from QA process used to develop case officer plan writing skills	May 23	
	5.1.8 Develop a performance monitoring system to provide reporting and Power BI dashboard data to monitor 20-week timescale for issuing finalised plans	A performance monitoring system is in place. Weekly meetings with Assistant Director and Head of Service with SEN Team to discuss 20-week performance. Performance data is sent monthly to DfE and reviewed in meeting with DfE SEN adviser. Data captured and reported to SEND Partnership Board half termly. Monthly performance is circulated to all SEND staff. Power BI dashboard is in production.	Jun 23	
	5.1.12 Reinstate SEND Health Operational Group to address quality of EHCP advice and improve consistency	This group has been re-established with membership from ShropComm and MPFT. This group has met regularly.	Apr 23	
5.2 Actions to ensure an effective	5.2.5 Recruit Associate DCO for SEND to increase capacity to support EHCP quality within health	The Associate DCO started in May 23 and regularly attends SEN panels, contributes to the QA process as	Jun 23	

quality assurance process.		well as providing advice and support to plan writers, and advice contributors.		
5.3 Actions to ensure all current EHC Plans are updated and amended to meet new quality standards and issued within statutory timescales	5.3.1 Develop and implement an annual review recovery plan and develop business case to ensure sufficient capacity to amend all Plans issued prior to August 2023 to ensure they meet the new quality standards	Plan and business case have been developed. We have appointed an additional senior case officer and two further case officers. 99 EHCPs have been reviewed and completed so far this term.	Sep 23	
	5.3.3 Review Special Education Needs and/or Disability Team operating model with a specific focus on capacity to update Education Health Care Plans following amendments agreed via annual review	Planned to ensure sufficiency moving forward	Apr 24	

Theme of Actions	Incomplete Actions	6 Month update October 2023	Original date	Proposed date	
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5.1 Actions to ensure the quality of new EHC Plans is improved	5.1.1 Improve the pre- EHCNA pathway to ensure that the requests received from settings contain person-centred information and focus on holistic outcomes which relate to the child's/ young person's aspirations to allow appropriate planning for the EHC assessment, where agreed, to be carried out	Task and finish group established with SENDCO representation. EHCNA request paperwork has been reviewed and substantially redesigned. This was considered and agreed with workstream and due to be signed off by the workstream meeting on 16 th November 23. Will be launched to SENDCOs in network meeting in second half of autumn term.	Sep 23	Nov 23	
	5.1.2 Co-produce new statutory advice templates for education, education psychology, health, and care and review the process for obtaining the CYP voice ("all about me") and parent/carer views	EP, Health and Social care advice templates are being reviewed by workstream. Work has begun on developing a new Appendix B with SENDCOs. Educational Psychologist advice template reviewed and updated	Sep 23	Nov 23	
	5.1.3 Develop a rolling multi-agency joint workforce training programme for all practitioners completing statutory EHC advice utilising the Council for Disabled Children's training resources	There is a Local Area SEND workforce development plan which was co-produced with parent carers and in collaboration with education, health and social care. This was developed during summer term 2022. Training feeds into a wider whole system SEND workforce development and training plan and governance structure.	Apr 23	Dec 23	
	5.1.4 Review arrangements to ensure an assessment of social care need is completed for each EHCNA and, where a child is not known to statutory social care services, ensure that advice and information relating to care needs and provision is requested from other professionals who know our families and CYP well so that the early help offer is embedded as part of the Education Health Care process	An information gathering tool has been developed to find out who is involved with the child/family. Initial meeting notes . A process to lie behind this will be developed once parent carer feedback received.	Sept 23	Nov 23	

	5.1.5 Review commissioning arrangements and update health service specifications to ensure health advice is provided where a CYP has a clinical requirement for input rather than being based on referral status	Commissioning capacity has been increased. LA Commissioner in post from 1 September 2023 and ICS Commissioner appointed and started on 6 October 2023. Additional Health resource has been allocated for epilepsy support.	Sep 23	Dec 23	
	5.1.9 Improve the quality and timeliness of statutory social care advice for EHCNAs and Annual Reviews	From September 2023, all statutory social care advice is considered at Statutory Assessment Panel (SAP) for RAG rating to determine baseline quality. Feedback shared with practitioners to improve quality of advice. Plans are in place to further develop social care advice.	Sep 23	Jan 24	
	5.1.10 Improve the quality and timeliness of statutory Health advice for EHCNAs and Annual Reviews	From September 2023 all statutory Health advice is considered at Statutory Assessment Panel (SAP) for RAG rating to determine baseline quality. Timeliness has reduced due to increased demand.	Sep 23		
	5.1.11 Develop a recruitment / retention strategy to ensure sufficient capacity within the Educational Psychology Service	Recruitment has taken place for 2 additional psychologist, 1 main grade, 1 specialist senior (Started September). Significant investment made in securing locum, associate and agency capacity to address increasing demand in statutory work.	Sep 23		
	5.1.13 Review the Special Education Needs and/or Disability Team structure and develop a recruitment / retention strategy to ensure sufficient capacity to complete all statutory tasks	Business case developed and additional staff embedded within the existing EHCP SEND team. There is a new structure within the team to allow for weekly supervision of case officers to support workload and wellbeing.	Sep 23		

	5.1.14 Strengthen coproduction of EHCPs at an individual level by exploring and procuring an on-line digital Education Health Care system to enable families, professionals, and education settings to engage, contribute and collaborate on EHC assessments, plans and reviews	Demo of I-dox EHC Portal and Invision QA software have taken place. Further demos and procurement processes being explored.	Apr 24		
5.2 Actions to ensure an effective quality assurance process.	5.2.1 Publish Education Health Care Plan quality standards and coproduce a Quality Assurance Framework to agree the "Shropshire standard" of what a good quality plan looks like.	Draft quality standards have been developed. Meeting on 17th October to agree what a good plan looks like. Further meeting planned 22 nd November to put standards into practice via a multiagency QA session.	Jul 23	Nov 23	
	5.2.2 Establish and embed a multi-disciplinary quality assurance process to monitor and improve the quality of new and amended Education Health Care Plans	We have produced quality standards (see 5.2.1). All draft and proposed amended plans are moderated within the SEN team before issue. A sample of draft and amended plans are audited through the multiagency panel. Feedback indicates that the plans audited to date have met minimum standards or better. A strategic multiagency QA programme has been designed with full Multiagency audit to commence on 22 nd November. A 1-hour multiagency drop-in session to support case officers/plan writers to discuss issues relating to advice for EHCNA and annual review, to ensure quality of information used in the EHCP.	Jul 23	Nov 23	
	5.2.3 Develop and implement quality standards for statutory advice, including education, education psychology, health and social care and roll out a workforce training programme for practitioners	Quality standards for advice have been drafted and used to inform the multiagency workforce training programme.	Sep 23	Nov 23	
	5.2.4 Undertake monthly multi-disciplinary audits to ensure improved consistency of Education Health Care	See 5.2.2 above. Commencing 22 nd November	Sep 23		

	Plans				
	5.2.6 Engage in external peer review process for monitoring the quality of EHCP's	DSCO and DCO have participated in an external peer review in Stoke on Trent. The Assistant Director has undertaken LGA peer review training. Exploring external peer review of Shropshire area during Autumn 2024.	Sep 23		
5.3 Actions to ensure all current EHC Plans are updated and amended to meet new quality standards and issued within statutory timescales	5.3.2 Create a suite of co-produced new annual review templates and guidance, including key phase transition and preparation for adulthood templates	Annual review template task & finish group – completed review. Awaiting final feedback from participants.	Sep 23	Nov 23	
	5.3.4 Develop a performance monitoring system to provide reporting and Power BI dashboard data to monitor timescale for issuing finalised plans following annual review	20-week compliance monitored monthly and reported to People DMT and SEND Partnership Board. Challenges currently around increased demand.	Sep 23		
	5.3.5 Create a multi-agency (including Education Settings) training plan to ensure all staff are aware, understand and implement the local annual review processes	The annual review strand within the workforce training programme is in the process of being developed.	Sep 23	Dec 23	
	5.3.6 Review and update the local processes for annual reviews and publish an updated pathway on the local offer	Information on the Local Offer has been reviewed. Further updates required. Have been updated and checked. Guidance for practitioners to be reviewed and updated	Sep 23		