

Shropshire Council
Legal and Democratic Services
Shirehall
Abbey Foregate
Shrewsbury
SY2 6ND

Date: Tuesday, 21 March 2023
:

Committee:
People Overview Committee

Date: Wednesday, 29 March 2023
Time: 11.00 am
Venue: Shrewsbury/Oswestry Room, Shirehall, Abbey Foregate, Shrewsbury, Shropshire, SY2 6ND

You are requested to attend the above meeting. The Agenda is attached

There will be some access to the meeting room for members of the press and public, but this will be limited. If you wish to attend the meeting please email democracy@shropshire.gov.uk to check that a seat will be available for you.

Please click [here](#) to view the livestream of the meeting on the date and time stated on the agenda

The recording of the event will also be made available shortly after the meeting on the Shropshire Council Youtube Channel [Here](#)

Tim Collard
Assistant Director – Legal and Governance

Members of the Committee

Peggy Mullock (Chairman)
Claire Wild (Vice Chairman)
Peter Broomhall
David Evans
Nat Green

Ruth Houghton
Hilary Luff
Kevin Pardy
Kevin Turley

Co-opted Members (Voting):

Carol Morgan
Sian Lines

Diocese of Shrewsbury (RC)
Diocese of Hereford (CE)

Your Committee Officer is:

Ashley Kendrick Committee Officer

Tel: 01743 250893

Email: ashley.kendrick@shropshire.gov.uk

AGENDA

1 Apologies and Substitutions

To receive apologies for absence from Members of the Committee

2 Disclosable Interests

Members are reminded that they must declare their disclosable pecuniary interests and other registrable or non-registrable interests in any matter being considered at the meeting as set out in Appendix B of the Members' Code of Conduct and consider if they should leave the room prior to the item being considered. Further advice can be sought from the Monitoring Officer in advance of the meeting.

3 Minutes (Pages 1 - 4)

The minutes of the last meeting, held on 8 February 2023, are attached for confirmation.

4 Public Question Time

To receive any public questions or petitions from the public, notice of which has been given in accordance with Procedure Rule 14. The deadline for this meeting is 5pm on Thursday 23 March 2023.

5 Members' Question Time

To receive any questions of which Members of the Council have given notice. The deadline for this meeting is 5pm on Thursday 23 March 2023.

6 Local Authority SEND Ofsted Inspection Report (Pages 5 - 28)

An update on the Ofsted-CQC Area SEND Inspection Revisit in November 2022 and Next Steps following publication of the Inspection Report in February 2023.

Contact: David Shaw, Assistant Director of Education and Achievement

7 Children and Young People Complex Needs Summit (Pages 29 - 34)

Providing feedback and key points from the recent Children and Young People (CYP) Complex Needs Summit.

Contact - Claire Parker, Director of Partnerships and Place, NHS Shropshire, Telford and Wrekin

8 Work Programme

Verbal update from the Scrutiny Manager

9 Date of Next Meeting

To note that the next meeting of the People Overview Committee will be held at 10am on Wednesday 24 May 2023.



PEOPLE OVERVIEW COMMITTEE

Minutes of the meeting held on 8 February 2023

10:00am in the Council Chamber, Shirehall, Abbey Foregate, Shrewsbury, SY2 6ND

Responsible Officer: Ashley Kendrick

Email: ashley.kendrick@shropshire.gov.uk Tel: 01743 250893

Present

Shropshire Councillors

Councillor Peggy Mullock (Chairman)

Councillors Claire Wild (Vice Chairman), Peter Broomhall, David Evans, Hilary Luff, Kevin Pardy and Kevin Turley and David Vasmer.

79 **Apologies and Substitutions**

Apologies had been received from Councillor Nat Green and Councillor Ruth Houghton, who were substituted by Councillors David Vasmer and Roger Evans respectively. Apologies were also received from Sian Lines from the Diocesan Board of Education.

80 **Disclosable Interests**

No interests were declared.

81 **Minutes**

RESOLVED:

That the minutes of the meeting held on 16th November 2022 be approved as a correct record and signed by the Chairman.

82 **Public Question Time**

There were no public questions.

83 **Members' Question Time**

There were no member questions.

84 **Criminal Exploitation**

Sonya Miller, Assistant Director for Children's Social Care and Safeguarding, introduced the item and was joined by colleagues from various teams in Shropshire Council, West Mercia Police, NHS Midlands Partnership and West Mercia Youth Justice Service. Members were reminded that an in-depth presentation was given at the last meeting where it was requested that a summary report be brought back to committee, identifying what action partners have taken in response to the recommendations from the Telford Enquiry.

TREES (Together Reducing & Ending Exploitation in Shropshire) was confirmed as the formal pathway for reporting concerns with regards to child exploitation. An agreed process was in place which included triage, risk assessments and data sharing with members of the partnership to provide support on a case by case basis. Concerns can also be raised through Crimestoppers, Safer Neighbourhood Teams and 101. It was felt that it was important to raise awareness of these organisations to promote the reporting of concerns and protecting vulnerable young people.

Members queried the number of exploited children who were not currently in education and were advised that this was a high percentage. Members noted that a piece of work was being carried out by the Education team to reduce the number of permanent exclusions and to track any children currently out of education as they were deemed to be at a higher risk of exploitation.

Members were advised of the various services on offer to support children, including the TMBSS referral unit, Bright Stars Boxing, diversionary pathways through the Youth Justice Service and drug and alcohol advisors.

It was noted that there was a gap in the provision of psychological and emotional support, resulting in a waiting list for assessments. Members felt that this should be a priority to address this gap and a request was made for the number of people currently on a waiting list.

Members were advised that the Criminal Exploitation Panel meet once a month to discuss new referrals and intelligence and to identify areas of concerns such as hot spots.

RECOMMENDED:

That Members agreed the following recommendations as set out in the report and requested that waiting times for children seeking psychological and emotional support are provided as soon as possible:

- Implementation of a pathway for addressing the trauma experienced as a result of exploitation, this would need to be in collaboration with the ICS. Aim is to ensure direct access from Together Reducing & Ending Exploitation in Shropshire (TREES) to specialist trauma support relating to exploitation.
- Implementation of transition pathway for young people who continue to be exploited at the point of turning 18 years old. Working with Adult Services in Health and Social Care, the voluntary sector and the police.
- A safeguarding report is due to be published which will include the voice of the child, learning needs to be taken from the review and recommendations implemented as appropriate.
- Implementation of a 5 year partnership strategy re: exploitation. There needs to be a continued commitment to the response to exploitation across the partnership; including the funding of staff and direct support to young people – so that the

TREES Team delivers a truly multi-disciplinary response to the needs of children and young people. Working with Education Access to ensure that schools can be supported to keep children in school and avoid permanent exclusion.

- Further community awareness events following the success of the events held in Shifnal, Oswestry and more recently Ellesmere.

85 Preparing for Adulthood

Kelly Kubilius, Team Leader Preparing for Adulthood, together with Carole Croxford, Service Manager Ops South Adult Social Care Management, and Sarah Thomas, Parent and Carer Council (PACC), introduced the report which provided an overview of developments in Shropshire Council's PfA Team with regards to a Pilot Projects Update, Early Intervention and Future Planning.

Members welcomed the report and praised the teams involved for ensuring support was available for young people moving into adulthood.

Members noted the importance of maintaining the structure and progress of EHCPs when transitioning into adulthood and ensuring support was being continuously reviewed and updated as appropriate.

Members were advised that PACC's role was to work at ground level to bring people together and build confidence, so individuals feel able to accept opportunities to gain life skills. It was hoped that funding can be secured to develop hubs to allow people to be embedded within their own community. An online portal was also in the pipeline to allow opportunities for work experience to be advertised.

It was felt that health played a vital role and it was requested that health colleagues be present at a future meeting.

Members noted that there was a Children & Young People Complex Needs Summit on 6 March 2023 and it was suggested that a report regarding the number of families not receiving support be brought back to a future meeting.

RECOMMENDED:

- That thanks be given to all staff involved in Preparing for Adulthood (PfA).
- That the updated action plan from the CYP (Children & Young People) Complex Needs Summit be shared with members at the next People Overview meeting on 29th March 2023.
- That a further update for the committee from the PfA team in 18 months' time was requested.

86 Work Programme

RECOMMENDED:

That:

- The meeting in March would cover the SEND Report and the CYP Complex Needs Summit.
- The items on Fostering and adoption, and social worker recruitment, and Safeguarding and community safety partnership annual report are deferred until the June or July 2023 meeting.
- That the best way to brief members on progress, impact and issues relating to Post 16 Destinations and Closing the Gap – Pupil Attainment be explored and taken forward

87 Date of Next Meeting

Members noted that the next meeting would take place on Wednesday 29th March 2023 at 10am.

Signed (Chairman)

Date:



**People Overview
Committee**

29 March 2023

Item

Public



Update on the Ofsted/CQC Area SEND Inspection Revisit in November 2022 and next steps following publication of the inspection report in February 2023

Responsible Officer:	David Shaw – Assistant Director of Education and Achievement Tracey Jones (Deputy Director Partnerships Shropshire, Telford and Wrekin ICS) Jen Griffin (Designated Clinical Officer for SEND)		
email:	David.shaw@shropshire.gov.uk	Tel:	01743 256479
Cabinet Member (Portfolio Holder):	Kirstie Hurst-Knight		

1. Synopsis

This paper provides an update on the joint Ofsted/CQC Area SEND inspection revisit of services for children with a special education need and/or disability (SEND) in November 2022 and the formal requirements from the DfE/NHS England regarding the preparation and submission of an Accelerated Progress Plan (APP) for the three areas judged by Ofsted/CQC to have not made sufficient progress during the inspection in November 2022.

2. Executive Summary

The Ofsted/CQC revisit inspection report outlines that the Shropshire Area SEND Partnership has made sufficient progress in the following three areas:

2.1 Strategic leadership and planning across the area, including the use of data to accurately commission and plan services. The report recognises that the strategic leadership has strengthened considerably despite the financial pressures, staff turnover and the COVID-19 pandemic.

2.2 The inclusion of health services' input into the area's SEND action plan. There is greater clarity of roles and responsibilities across education, health and social care and leaders work in partnership and have a keen focus on children and young people with SEND.

2.3 The rate of exclusions for children and young people with an EHC plan and the rate of fixed-term exclusions for those receiving SEND support. Leaders' actions to address the high rate of exclusions and suspensions for children and young people with SEND across Shropshire have been successful. They have led to a significant number of exclusions being prevented since the last inspection.

The report highlights that "while many strategic plans are at a very early stage of implementation, they are the right plans and provide a secure base on which to build on the emerging improvements thus far. The pace of change and improvements made by the strategic leadership team have particularly accelerated over the last 12 months."

The report also recognised that the involvement of the parent carer forum (Parent and Carer Council (PACC)) has increased at a strategic level.

It is also noted that "The corporate commitment to children and young people with SEND is now embedded. The strong strategic leadership is successfully beginning to improve the provision, across education, health and social care, for children and young people with SEND in Shropshire."

Further progress is still required to address three outstanding areas identified below;

- a) Significant wait times for large numbers of children and young people on the ASD and ADHD diagnostic pathways.
- b) Significant waiting times for those needing assessment and treatment from the speech and language therapy service.
- c) Inconsistency in the quality of input from education, health and care into EHC assessment and planning.

The three areas will now become the focus of an Accelerated Progress Plan (APP) formally monitored by the Department for Education (DfE) and NHS England (NHSE) at regular intervals. The APP builds upon the SEND action plan reviewed by Ofsted, whilst providing more specific detail around actions to be taken and the desired impact of this work when successful. This will be reviewed by the Area SEND Partnership Board and formally submitted to the DfE and NHSE by the 5th April.

The Ofsted/CQC inspection revisit report and the draft APP are included as appendices. The Area SEND Partnership accepts the report findings and is encouraged by many of the positive impact examples recognised by Ofsted. However, it is acknowledged that much more work remains to realise the ambition and positive experiences outlined in the SEND and Inclusion Strategy for all children and young people with SEND.

3. Recommendations

3.1 Note the report and appendices.

- 3.2 Commend partners in the Area SEND Partnership for their work on delivering improvement across the SEND system.
- 3.3 Seek assurance that the Area SEND Partnership are doing all they can to promote, support and improve the experience and outcomes for children and young people with SEND.
- 3.4 Note the actions and success criteria outlined in the draft APP to accelerate the progress and improvement in the remaining three areas.
- 3.5 Identify any key areas of concern where members could support further improvement/resolution.
- 3.6 Note that updates from the Shropshire Health Integrated Place Partnership (SHIPP) will be provided to the SEND Partnership Board via a standing item on the SEND Partnership Board agenda. Key papers will be shared with the SEND Partnership Board clerk to enable cross-working between the key groups.
- 3.7 It is recommended that SHIPP and the Learning Disability and Autism (LDA) Board include a standing agenda item or similar approach to ensure key items/papers related to the Area SEND Partnership can be raised with SHIPP/LDA members.
- 3.8 Schedule bi-annual updates for the People Overview Committee on the progress of the SEND action plan, including the Accelerated Progress Plan (APP), and the impact this is making to improve the experience and outcomes for children and young people with SEND.

Report

The Ofsted/CQC revisit inspection was completed over three 'on-site' days, 21-23rd November 2022, plus the previous two weeks where documentary evidence was requested and shared with Ofsted/CQC. The inspection report findings are consistent with the Area SEND Partnership self-evaluation.

The Ofsted/CQC revisit inspection report outlines that the Shropshire Area SEND Partnership has made sufficient progress in the following three areas:

- Inconsistent strategic leadership and weak strategic planning across the area, most notably in the CCG, including the ineffective use of data to accurately commission and plan services.
- The lack of inclusion of health services' input into the area's SEND action plan.
- The high rate of exclusions for children and young people with an EHC plan and the high rate of repeat fixed-term exclusions for those receiving SEND support.

The areas identified below require significant further improvement by the Area SEND Partnership and Ofsted/CQC;

- Significant wait times for large numbers of children and young people on the ASD and ADHD diagnostic pathways.
- Significant waiting times for those needing assessment and treatment from the speech and language therapy service.
- Inconsistency in the quality of input from education, health and care into EHC assessment and planning.

The three areas will now become the focus of an Accelerated Progress Plan (APP) formally monitored by the DfE and NHSE at regular intervals. The APP builds upon the SEND action plan reviewed by Ofsted/CQC, whilst providing more granular detail around actions to be taken and the desired impact of this work when successful. Once the APP has been formally approved by the DfE/NHSE it will be monitored by the Quality Assurance Group (QAG) monthly and reported to the Area SEND Partnership Board half termly.

The Ofsted/CQC inspection revisit report and the draft APP are included as appendices. The Area SEND Partnership accepts the report findings and is encouraged by many of the positive impact examples recognised by Ofsted/CQC. However, it is acknowledged that much more work remains to realise the ambition and positive experiences outlined in the SEND and Inclusion Strategy for all children and young people with SEND.

Following the Ofsted/CQC inspection we have seen significant increases, almost three times the numbers of EHC Needs Assessment requests in January and February 2023, compared with January 2020. This is consistent with the overall comparison between the full calendar year in 2021 and 2022, where there was a 187% increase in EHC Needs Assessment requests. Despite the increase, almost 90% of the requests are accepted (2022 National Average 77.7%) and following the 20 week assessment process around 95% of CYP are issued with an EHC plan following assessment (2022 National Average is 94.1%).

These increases have led to 270 CYP currently undergoing the EHC Needs Assessment process, based on figures at the beginning of March 2023. This presents significant challenge to the Area SEND Partnership, particularly education psychologists as education advice givers, social care advice givers and health advice givers, where advice is required by each of these statutory partners during the EHC Needs Assessment process.

These challenges have been reported to the Area SEND Partnership Board, the Integrated Care System CYP, Families and SEND System Board and Shropshire Director of Children's Services Performance Review meeting held in March 2023 for awareness and consideration of service capacity, both current and future, to inform financial modelling.

What difference have we made? Our 'Top 15 Successes shared during the inspection'

1. 44 permanent exclusions avoided/rescinded since 1st Feb 2020 – 14th Nov 2022.
2. Increased the specialist education placements available through mainstream SEND Hubs (7 primary, and 3 secondary) and a new Special Free School - Keystone Academy (YES Trust) opened Sept 2022. Independent review of the SEND Hubs completed during Nov/Dec 2022.
3. 100% Year 6 to 7 phase transfer reviews for 21/22 to 22/23 academic year.

4. Implemented a range of training delivered by DCO and health partners during 2021, now included in the workforce development plan.
5. EHCP advice is improving, and senior leaders have a clear view of 'what good looks like' to enable increasing consistency.
6. Joint funding (Health/LA) has enabled the development of a consistent universal offer for Speech, Language and Communication Needs using Talk Boost and Stoke Speaks Out across all Early Years settings and primary schools.
7. Sep 2021 – to August 2022, 129 out of 141 yes decisions were issued in under 42 days = 91.49% of Agree to assess decisions issued within 6 weeks. Since Sept 2022 56 EHCNA request have been made (up to 31st Oct 2022) with 82% of requests receiving a decision within 6 weeks.
8. Implemented Mental Health Support Teams (MHST) across 26 schools (inc. 3 secondaries) which is c.17% of schools in Shropshire.
9. Implemented ways in which the alignment of other social care planning such as for Children Looked After (CLA) with EHCP reviews can secure more integrated planning: outcome CLA - Virtual School reviewed, refreshed and aligned PEP with SEND in Shropshire.
10. PfA Navigator roles funded by Health have been established to support CYP and families during transition
11. 196 families have accessed support from Autism West Midlands without having to wait for an ASD diagnosis.
12. 98% of 677 responses have rated the SCHAT SLT service as good or very good since April 2021.
13. Developed some effective approaches to accommodation planning for families and YP with SEND working with the Children's Senior Occupational Therapist and the Housing Team.
14. Number of personal budgets has increased from 66 (Jan 21) to 149 (Jan 22)
15. DSCO appointed for Children's Social Care, increased capacity of DCO and SEND leads within health services.

All achieved through making progress with co-production with parent/carers, young people & SEND Partners, but recognise more to do.

What do we still need to do?

- Increase the variety of preventative interventions and targeted use of finance to build capacity within the Early Years, schools and 16-25 year sector to effectively identify at the earliest stage and meet the needs of children and young people (CYP) with SEND so they all consistently achieve great outcomes.

- Continue to improve the achievement of all children and young people with SEND (particularly at SEND Support) across all phases of education, including promoting opportunities to develop independence and preparation for employment.
- Implement the workforce development programme across the partnership to enhance the partnership approach to delivering the best outcomes for CYP with SEND.
- Develop a CYP participation strategy across the People's Directorate and ensure the involvement from CYP with SEND.
- Re-design the SEND assessment team processes and systems to ensure maximum efficiency and minimise staffing costs as forecasting predicts continuous growth in demand for statutory services up to 2030.
- Continue to implement the workforce recruitment and retention strategy for Educational Psychology, Speech and Language Therapists and BeeU therapists to ensure a sufficient workforce.
- Continue to improve the breadth and diversity of provision available in Shropshire, or close to Shropshire, so that children and young people can attend local placements instead of out of borough or in-borough independent special schools, whilst ensuring outcomes identified in their EHC plans continue to improve.
- Confirm and, where possible, simplify the governance arrangements for the Integrated Care System (ICS) so that key decisions are increasing local, and system wide decisions (Shropshire, Telford and Wrekin ICS area) are well coordinated.
- Implement the SEND action plan, including the Accelerated Progress Plan (APP), to ensure that the vision of the SEND and Inclusion Strategy are realised for all children and young people.
- Continue to ensure that SEND is everyone's business, and this is evident in agendas, minutes and decision making across Shropshire.

4. Risk Assessment and Opportunities Appraisal

The Area SEND Partnership Board holds a summary risk register covering the key risks identified through its work programmes or discharge of duties. This is being updated considering the development of the APP, publication of the Area SEND inspection report and ongoing monitoring of risk. This does not replace the individual organisation risk registers held by partners to identify, mitigate and manage risks held.

The CYP, Families and SEND System Board led by the ICS is also developing a risk register to hold the key risks identified across the ICS area.

It is recommended that SHIPP and the LDA Board review the Area SEND Partnership Board and CYP, Families and SEND System Board risk registers to enable awareness of

People Overview Scrutiny Committee, 29 March 2023: Update on the Ofsted/CQC Area SEND Inspection Revisit in November 2022 and next steps following publication of the inspection report in February 2023
dependencies or opportunities to positively influence mitigation/management of risks identified.

A key development underway across the Area SEND Partnership is the creation of a SEND data dashboard that includes regularly updated key information from partners across the Area SEND Partnership. This was referenced in the Ofsted/CQC inspection report and must be developed as a key priority across the Area SEND Partnership.

5. Financial Implications

Additional resource requirements are being considered and identified within the SEND action plan, and APP, so that commissioning or governance decisions can be considered for these areas.

To date, key areas where financial implications are highly likely include;

- 5.1 Significant increases (186%) in the numbers of requests for EHC Needs Assessments over the last 12 months. This has implications on the workforce of the whole Area SEND Partnership given that at date of report (270 CYP are undergoing the 20-week EHC Needs Assessment).
- 5.2 Developing a connected and coherent emotional health and mental wellbeing offer (universal, targeted and specialist) and enabling access to this at the earliest opportunity for CYP with different SEND needs.
- 5.3 Further enhancing and embedding the system approach to identifying and meeting different speech, language and communication needs (universal, targeted and specialist) and enabling access to this at the earliest opportunity **for all CYP**.

Appendices

- Appendix 1 - Ofsted CQC Shropshire Area SEND Inspection Report Feb 2023 (attached)
- Appendix 2 - SEND APP Progress Tracker (Draft version to be shared w/c 20th March for comment, in line with sharing with the DfE and NHS England)

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23 January 2023

Tanya Miles
Executive Director of People
Shropshire Council
Abbey Foregate
Shrewsbury
SY2 6ND

Gareth Robinson, Director of Delivery and Transformation and Executive Lead for SEND,
Shropshire Telford and Wrekin
David Shaw, Local Area Nominated Officer, Shropshire

Dear Tanya and Gareth

Joint area SEND revisit in Shropshire

Between 21 and 23 November 2022, Ofsted and the Care Quality Commission (CQC) revisited the area of Shropshire to decide whether sufficient progress has been made in addressing each of the areas of significant weakness detailed in the inspection report letter published on 25 March 2020.

As a result of the findings of the initial inspection and in accordance with the Children Act 2004 (Joint Area Reviews) Regulations 2015, His Majesty's Chief Inspector (HMCI) determined that a written statement of action was required because of significant areas of weakness in the area's practice. HMCI determined that the local authority and the area's clinical commissioning group (CCG) were jointly responsible for submitting the written statement to Ofsted. This was declared fit for purpose on 19 November 2020.

The area has made sufficient progress in addressing three of the significant weaknesses identified at the initial inspection. The area has not made sufficient progress in addressing three significant weaknesses. This letter outlines our findings from the revisit.

The inspection was led by one of His Majesty's Inspectors from Ofsted and a Children's Services Inspector from CQC.

Inspectors spoke with children and young people with special educational needs and/or disabilities (SEND), parents and carers, and local authority and National Health Service (NHS) officers. Inspectors also spoke to school leaders, the parent carer forum (Parent and Carer Council (PACC)) and Shropshire's Information Advice and Support Services. Inspectors looked at a range of information about the performance of the area in addressing the six significant weaknesses identified at the initial inspection, including the area's improvement plans and self-evaluation. Inspectors also reviewed a sample of education, health and care (EHC) plans. They considered the responses to the parents' and carers' surveys, the emails received from parents and documentation sent to Ofsted.

In reaching their judgements, inspectors took account of the impact of the COVID-19 pandemic on SEND arrangements in the area. Inspectors considered a range of information about the impact of the pandemic and explored how the area's plans and actions have been adapted as a result.

Main findings

At the initial inspection, inspectors found the following:

Inconsistent strategic leadership and weak strategic planning across the area, most notably in the CCG, including the ineffective use of data to accurately commission and plan services.

There have been significant changes in the area's strategic leadership, particularly over the last 12 months. The management of change has been extremely challenging, including dealing with financial pressures, staff turnover and the COVID-19 pandemic. Despite these challenges, the strategic leadership has strengthened considerably.

The creation of new roles which better meet the area's strategic needs have further strengthened leadership. For example, there is now a designated social care officer who has the oversight of children and young people with SEND. PACC reports that its involvement at a strategic level has increased and has largely been welcomed by all parties. The corporate commitment to children and young people with SEND is now embedded. The strong strategic leadership is successfully beginning to improve the provision, across education, health and social care, for children and young people with SEND in Shropshire.

Leaders have begun to use a SEND data dashboard. There have been some challenges with data collection, data-sharing and gathering meaningful data to inform and evaluate leaders' commissioning. This includes data around children and young people's lived experiences. Leaders are working through these challenges and have prioritised the strategic use of data to inform the commissioning of services. They have begun to use data from a variety of sources to inform and measure the impact of a small number of commissioned services. However, they do not use the available data routinely to commission services. This means that leaders do not

consistently benchmark to set levels of expected service and measure the impact of the service.

The area has made sufficient progress to improve this area of significant weakness.

At the initial inspection, inspectors found the following:

The lack of inclusion of health services' input into the area's SEND action plan.

The strategic leadership has a much improved and integrated oversight of the provision for children and young people with SEND across the local area. Across education, health and social care, there is a much greater clarity of roles and responsibilities. Leaders work in partnership and have a keen focus on children and young people with SEND. For example, health and education leaders secured joint funding for the implementation of the Talk Boost programme across early years settings and primary schools. However, health leaders acknowledge that there is still work to do around the governance of the recently developed Integrated Care System. In addition, PACC's involvement in co-production across education, health and care varies, particularly within health. Some organisations within health have successfully developed a co-production approach. However, in others, PACC's involvement remains more of a collaborative experience.

Leaders updated the SEND action plan in September 2022 to reflect the current improvement priorities. The plan is based on accurate self-evaluation by the strategic leaders. All strategic partners, including PACC, contributed to the area's SEND action plan. The development of the SEND strategy is also a key example of how all partners, including health partners, work together to plan improvement in the provision for children and young people with SEND in Shropshire.

All partners are committed to the area's vision. While many strategic plans are at a very early stage of implementation, they are the right plans and provide a secure base on which to build on the emerging improvements thus far. The pace of change and improvements made by the strategic leadership team have particularly accelerated over the last 12 months. For example, the number of school exclusions and suspensions has decreased significantly.

The area has made sufficient progress to improve this area of significant weakness.

At the initial inspection, inspectors found the following:

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

Leaders acknowledge that there is still much work to do to address the significant diagnostic pathway wait times. Parents and carers told inspectors that there is a lack of clarity in how to access the service. Many parents report that they 'get bounced around the system'. Communication between services and parents is variable.

Parents and school leaders, rightly, have significant concerns about the referral processes into the neurodevelopmental pathways. Many children and young people mask their difficulties in school. As a result, some schools are not referring these children and young people into the assessment pathways. This places some families, whose children do not present their difficulties in school, under extreme pressure as they do not have a way into the assessment pathway.

Some groups of children in the under-five age group, and those who have recently been referred to the service, report more positive experiences. For example, the service has improved its communication with families, who report that access to the pathway is clear and appropriate. However, this is not the experience for the majority of families. Many families expressed their frustration with the experience of trying to get an assessment and the adverse impact the experience was having on their family's well-being. The challenges of accessing neurodevelopment pathways place unacceptable pressures on families.

Children and young people waiting for an assessment do not receive consistent communication or support. This means that they do not know what to expect in terms of the service and timescales for assessment. On many occasions, this has led to a deterioration in the child and young person's mental health.

Although there have been temporary reductions in waiting times with a time-limited increase in resources, this reduction cannot be sustained given the rise in demand and the current resources available.

The area has not made sufficient progress to improve this area of significant weakness.

At the initial inspection, inspectors found the following:

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

Long waiting times for speech and language assessments and treatment remain. The service has introduced several new ways of working to support parents, carers, practitioners and children and young people while they wait for an assessment. This includes triage using recently developed specific and specialist pathways to refer children and young people. This means that children and young people are prioritised according to their level of need. An advice line has been introduced for parents, carers and practitioners. School staff report that they are supported by the speech and language therapy service with the recent changes. Parents report a positive experience when their child is seen by a therapist, but many parents say that they had to wait too long to be seen or were discharged too early.

The service has seen a large increase in demand and in the complexity of children and young people's needs. It is unable to meet this demand with the current resources. It has recently introduced an intervention programme in education settings to train school staff. However, it is too early to see an impact on children and young people's speech, language and communication. Although these new ways

of working are supporting children and young people to have their needs identified in a timelier way, some of the additional staffing is time limited and will cease in a few months.

The area has not made sufficient progress to improve this area of significant weakness.

At the initial inspection, inspectors found the following:

Inconsistency in the quality of input from education, health and care into EHC assessment and planning.

Leaders have not identified and addressed the poor quality of many EHC plans. They have not established an effective quality assurance process to review the quality of the plans. Individual services review the quality of their sections of the plans without considering the plan as a whole. While there is an audit tool in place, it is not used consistently by education, health and social care professionals. Individual services have different thresholds for measuring whether their input to the plan is adequate or not. Leaders have not ensured that regular audits of plans have been carried out. The occasional 'dip sampling' by different services has been inadequate and has not identified the significant weaknesses in the quality of EHC plans. This means that children and young people too often do not receive the right support to meet their identified needs.

The SEN team has faced significant challenges since the last inspection. This includes a very high turnover of staff, recruitment issues, lack of expertise and lack of effective leadership. However, over the last six months, the team's leadership and staffing structure has stabilised. Strong leadership has ensured that the team's roles and responsibilities are clear. Restructuring caseworkers' work plans in order to cover specific geographical areas has enabled caseworkers to develop a better understanding of the children and young people and their EHC plans. This means that the team is functioning more efficiently.

However, the work to improve the SEN team and panel is very recent and children and young people, parents, carers and school leaders can see little or no impact of the improvements made at a strategic level. Many children and young people's EHC plans are not fit for purpose; they do not describe the child or young person's needs accurately, do not set out clear outcomes and do not identify the right support that the child or young person needs. Furthermore, far too many plans are not updated, amended or issued within statutory timescales. This is unacceptable. It causes stress and frustration for children and young people, their families and school leaders. Most importantly, it means that too many children and young people with SEND do not receive the right support to help them achieve the outcomes of which they are capable, to enable them to prepare successfully for adulthood.

The area has not made sufficient progress to improve this area of significant weakness.

At the initial inspection, inspectors found the following:

The high rate of exclusions for children and young people with an EHC plan and the high rate of repeat fixed-term exclusions for those receiving SEND support.

Leaders' actions to address the high rate of exclusions and suspensions for children and young people with SEND across Shropshire have been successful. They have led to a significant number of exclusions being prevented since the last inspection. In addition to this, a high number of children and young people with SEND have received support and interventions to help them engage more positively in school before they reach the point of exclusion or suspension.

Leaders have focused on developing a more inclusive culture for children and young people with SEND across Shropshire's mainstream schools. To achieve this, they have increased the range of support to schools to enable them to better support children and young people who are at risk of permanent exclusion or those who have been suspended on multiple occasions. For example, access workers facilitate multi-agency meetings with schools to review any child or young person who is at risk of permanent exclusion. Inclusion caseworkers also facilitate pupil planning meetings to support children and young people to remain in mainstream settings. When school leaders take the decision to permanently exclude a child or young person, area leaders work with school staff to ensure that the exclusion is lawful and that there is an appropriate provision in place to support the child or young person if the exclusion proceeds.

Across Shropshire, there is a range of specialist provisions to support children and young people with SEND who have been excluded or suspended from school. For example, the tuition, medical and behaviour support service (TMBSS) provides short term support for children and young people while an appropriate educational placement is sought to meet their needs. Leaders have worked with schools to increase the provision to support children and young people who find mainstream education challenging. This includes the development of 'hubs' in 10 schools. The Keystone Academy, which opened in September 2022, also provides children and young people with social, emotional and mental health needs and difficulties, including neurodivergent needs, with a specialist educational provision. Leaders, rightly, are continuing to explore wider opportunities to increase and broaden the specialist provision across Shropshire. This is especially important given the large geographical area of the county. This demonstrates their commitment to ensuring that all children and young people with SEND can successfully access full-time education.

The majority of schools work closely with the area's inclusion team. This has led to a decrease in the number of exclusions and suspensions and more children and young people remaining in mainstream education. Area leaders have identified where further challenge and support is needed to ensure that all schools are fully inclusive. They provide these schools with appropriate challenge and support to ensure that their vision of a fully inclusive culture is embedded across Shropshire.

The area has made sufficient progress to improve this area of significant weakness.

The area has made sufficient progress in addressing three of the six significant weaknesses identified at the initial inspection. As not all the significant weaknesses have improved, it is for DfE and NHS England to determine the next steps. Ofsted and CQC will not carry out any further revisit unless directed to do so by the Secretary of State.

Yours sincerely

Ann Pritchard
His Majesty's Inspector

Ofsted	Care Quality Commission
Andrew Cook Regional Director	Dr Sean O'Kelly BSc MB ChB MSc DCH FRCA Chief Inspector of Hospitals and Interim Chief Inspector of Primary Medical Services
Ann Pritchard HMI Lead Inspector	Tessa Valpy CQC Inspector

cc: Department for Education
 Clinical commissioning group
 Director of Public Health for the area
 Department of Health
 NHS England

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Shropshire Area SEND Accelerated Progress Plan (Post SEND Revisit Nov 22)

Name of the Local Area	Shropshire
Date of Inspection	21-23rd November 2022
Date of Publication of the Revisit report	6th February 2023 https://files.ofsted.gov.uk/v1/file/50207192
Accountable Officers from the LA and ICS	David Shaw (LANO) – Shropshire County Council david_shaw@shropshire.gov.uk Tanya Miles - Exec Director of People Shropshire County Council tanya.miles@shropshire.gov.uk Gareth Robinson, Director of Delivery and Transformation and Executive Lead for SEND, Shropshire Telford and Wrekin gareth.robinson7@nhs.net
DfE and NHSE Advisers	Debbie Ward (NHS England) deborah_ward27@nhs.net Gabrielle Stacey (DfE) gabrielle.stacey@education.gov.uk

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;

Priority Area 3: ND Pathways and Waiting Times

Outcome 1										
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	Reference	Actions Designed to Lead to Improvement	Strategic Lead	Responsible Officer	By When	Desired Impact	Progress Update	Evidence	RAG	
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		ND Workstream to confirm	Apr-23					
	3.1.2	Collate details of all support currently available for those with (or possibly with) ASD & ADHD age 5 - 18		ND Workstream to confirm	Jul-23					
	3.1.3	Collate details of all support currently available for those with (or possibly with) ASD & ADHD age 18+		ND Workstream to confirm	Sep-23					
	3.1.4	Publish all of the support available on the local offer website								
	3.1.5	Have a specific ASD area on local offer website (as requested through the Local Offer working group)		ND Workstream to confirm	Sep-23					
	3.1.6	Roll out the Self-Help Passport for those 18 - 25 who are pre-diagnosis		A4U (The Autism Hub)	TBC					
	3.1.7	Place holder for Social Prescribing Initiative		TBC	TBC					
2. Actions to ensure good quality support in Early Years and Educational Settings	3.2.1	Gather & analyse feedback from early years & educational settings regarding neurodiversity and how to support identified needs		Kathryn Morgan to confirm	Apr-23					
	3.2.2	ND Training Steering Group will develop a plan to meet the identified needs of schools and settings including training and coaching		Kathryn Morgan to confirm	?July 2023					
	3.2.3	Planned Inclusion sessions for early years and educational settings including a focus on Neurodiversity including ADHD and ASD		Kathryn Morgan to confirm	In place					
	3.2.4	Review and develop the outreach support available to early years & education settings		Kathryn Morgan to confirm	? August 2023					
	3.2.5	Place holder for self-evaluation work in early years settings, and admittance approach from early years settings								
	3.2.6	Place holder for Autism in Schools initiative								
3. Actions to ensure good quality support for parents and carers	3.3.1	Increase the availability for formal support offered to parents and carers following a diagnosis		Commissioners	? December 2023					
	3.3.2	Enhance the peer support offer for families during or after a diagnosis of ASD or ADHD		ND workstream to confirm	? September 2023					
	3.3.3	Continue the Autism West Midlands offer of support which does not require a diagnosis to access		Commissioners	In place					
	3.3.4	Develop and launch the CDC advice line which will be accessible to children for whom there are concern, or help in navigating the system and what's available		Alison Parkinson	TBC					
	3.3.5	Coproduced redesign of CDC website		Alison Parkinson	TBC					
	3.3.6	Roll out of the Healthier together website with advice and guidance for the ND population		Millar Bowmass	?April 2023					
	3.3.7	Psychoeducation courses on managing sleep issues delivered by PODS		LDA Program Lead	?April 2023					
	3.3.8	Place holder for Autism in Schools initiative								
4. Actions to enable trial of enhanced support	3.4.1	Develop and recruit to the roles of ND Practitioners to supported a targeted cohort		Kathryn Morgan						
	3.4.2	Review the impact of the ND Practitioners to inform the requirements for support in the 2 nd year		Kathryn Morgan						
	3.4.3	Develop the Dimensions Tool and Clarity regarding how the tool will be utilised initially, and then rolled out further								
5. Actions to avoid Mental	3.5.1	Complete the Mental Health Transformation Plan to set the strategic direction of how all CYP with Mental Health Needs will have their needs met		Millar Bowmass	?April 2023					
	3.5.2	Pilot an app for CYP to use if they are experiencing a MH crisis targeting those on the Dynamic Support Register		TBC						

Health Crisis for those with ASD or ADHD	3.5.3	Implement new guidance related to the Dynamic Support Register		Dale Coleman					
	3.5.4	Implement the Digital DSR		Dale Coleman					
	3.5.5	Deliver high-quality Care and Treatment Reviews with the individual at the heart		Dale Coleman					

Outcome 2 CYP who require a diagnostic assessment, easily access a high quality diagnostic assessment in a timely way

Actions	Reference	Actions Designed to Lead to Improvement	Strategic Lead	Responsible Officer	By When	Desired Impact	Progress Update	Evidence	RAG
6. Actions to ensure referrers know how to make good referrals which are accepted	3.6.1	Clear criteria and referral route for current ASD diagnostic pathway in place - 0-5		ShropComm	In place				
	3.6.2	Clear criteria and referral route for current ASD & ADHD diagnostic pathway in place - School age		MPFT					
	3.6.3	Clear criteria and referral route for current ASD & ADHD diagnostic pathway in place - 18+		Commissioner to confirm					
	3.6.4	Clear criteria and referral route for current ASD & ADHD pathway published on the local offer		ND Workstream to confirm					
	3.6.5	Redesign of referral form for 5 – 18 cohort		MPFT	Apr-24				
	3.6.6	System wide engagement to promote new referral forms and process for 5 – 18 cohort		MPFT					
7. Actions to ensure communication from 5 – 18 diagnostic service is clear	3.7.1	Review communications which are sent out		MPFT (Jessica Roose)	Beginning in March				
	3.7.2	Implement changes to improve communications		MPFT					
	3.7.3	Inform the community of changes resulting from the new BeeU Operational Framework		MPFT	Apr-23				
8. Actions to avoid CYP going into crisis whilst waiting for diagnosis by implementing risk stratification	3.8.1	All referrals considered at MDT discussion (including ASD practitioners, OT, nurses, social workers, psychiatry, ADHD specialists, psychology, CBT)		MPFT	In place				
	3.8.2	Upon acceptance of referral CYP to be offered an initial holistic assessment which enables access to range of support available within BeeU		MPFT	In place				
	3.8.3	Protocol in place for prioritising CYP for ASD assessment based on factors such as whether their placement is at risk of breaking down		MPFT	In place				
	3.8.4	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)		MPFT					
	3.8.5	Enhance the risk stratification approach through additional funding from the LDA program		Hilary McGlynn / MPFT					
9. Actions to ensure capacity of the diagnostic service meets the demands of the population	3.9.1	Commissioner understanding of current waiting times from referral treatment for ASD 0 - 5		Millar Bowmass					
	3.9.2	Commissioner understanding of current waiting times from referral treatment for ASD & ADHD 5 - 18		Millar Bowmass					
	3.9.3	Commissioner understanding of current waiting times from referral treatment for ASD & ADHD 18+							
	3.9.4	Develop, fund and recruit to short term recovery plans							
	3.9.5	Understand the capacity of the services currently							
	3.9.6	Develop a trajectory of future growth and capacity required to meet the needs							
	3.9.7	Develop a business case to fund the increased demands across the age range							
	3.9.8	Services are reviewing their skill mix to mitigate the impact of challenges with recruitment and retention, in the context of increased demand.							
	3.9.9	MPFT reviewing internal processes, progressing recruitment into 1 vacancy.							
10. Actions to ensure escalation of long waits to ICS	3.10.1	Review ICS governance		Claire Parker / Tracey Jones					
	3.10.2	Develop links to LDA board for oversight		Helen Southwell					
	3.10.3	CYP risk register held by the CYP System Board		Claire Parker / Tracey Jones					
	3.10.4	Recruit to an enhanced LDA team structure		Helen Southwell					

Priority Area 3 Impacts	Reference	Impact Measure and Milestones to be Achieved	Strategic Lead	Responsible Officer	By When	Progress Update	RAG
Relevant Theme of Actions		Expected Impact				How are we measuring the impact	Baseline
1.	3.1.1 to 3.1.7	CYP report that they received support when they needed it				Survey - to be developed and baseline to be sought	To be sought
		Facilities report that they know and use access the full range of support available				Survey - to be developed	

1, 3, 4	3.1.1 to 3.1.7 3.3.1 to 3.3.8 3.4.1 to 3.4.3	Families report that they know and can access the full range of support available & this support met the needs of the CYP and have the experience of waiting well if applicable							Inspection report indicated a 'lack of clarity'		
1.	3.1.1 to 3.1.7	Professionals report that they know and sign post to the range of support available							Reporting through the local offer website regarding how useful information was - to be developed		
2	3.2.1 to 3.2.6	Lower rates of suspensions and permanent exclusion where Neurodiversity is identified in primary/secondary need							Survey - to be developed, baseline sample from ND workstream	To be sought	
2	3.2.1 to 3.2.6	Lower rates of Emotionally Based School Avoidance with needs related to ASD & ADHD							Baseline to be identified with separate impact measures for primary and secondary schools	To be confirmed using Autumn 2022 and Spring 2023 data	
2, 4	3.2.1 to 3.2.6 3.4.1 to 3.4.3	Setting staff report a greater understanding of needs related to ND (ASD & ADHD) and how to meet those needs							Ed Psych to confirm reporting metrics		
2	3.2.1 to 3.2.6	Setting staff can demonstrate how they ensure good inclusive practice for CYP with needs related to ND (ASD & ADHD)							Survey - repeat recent survey from inclusion day	To be analysed	
2	3.2.1 to 3.2.6	Fewer reports of families struggling to get a place in nurseries due to their children's needs							Survey - repeat recent survey from inclusion day	To be analysed	
2	3.2.1 to 3.2.6	CYP make progress towards their EHCP outcomes							Self and peer evaluation against the inclusion framework universal and SEND Support offer.	Available from Sept 23 onwards.	
3	3.3.1 to 3.3.8	Families accessed support which enabled them to understand their CYP's needs and how to support them							TBC - Neville Ward and Alison Rae to confirm.		
3	3.3.1 to 3.3.8	Families are aware of peer support available to them							TBC		
3	3.3.1 to 3.3.8	Families don't have to wait for a diagnosis to get support							Record of course attendance and course outcomes	Roughly 40 - 5 families access formal support each year	
4	3.4.1 to 3.4.3	For those CYP who have a 'dimensions tool plan' created those who support them will have a better understanding their needs and how to support them							Survey - to be developed		
5		TBC - Dale and Millar to advise							Survey - to be developed		
6									Outcome of intervention summary		
7											
8											
9											
10	3.10.1 to 3.10.4	Timely access to ASD & ADHD diagnostic services					TBC				

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Priority Area 3 Score Card KPI	Reference	Baseline	3 Month	6 Month	12 Month	18 Month	Progress Update	RAG

Priority Area 4: SLCN Pathways and Waiting Times										
Outcome 1	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	Reference	Actions Designed to Lead to Improvement	Strategic Lead	Responsible Officer	By When	Desired Impact	Progress Update	Evidence	RAG	
	4.11.1	Collate details of all support currently available from Public Health for those with SLCN		Steph Jones						

11. Actions to ensure clarity about the support available	4.11.2	Collate details of all support currently available from Early Years Settings for those with SLCN		Sue Carroll / Alison Rae						
	4.11.3									
	4.11.4	Collate details of all support currently available from Early Help for those with SLCN		Jo Cox						
	4.11.5									
	4.11.6	Map the full offer of current SLT support		ShropComm	Completed					
	4.11.7	Collate details of all other support currently available for SLCN (excluding SLT)		SLCN Workstream						
	4.11.8	Publish all of the support available on the local offer website		SLCN Workstream						
	4.11.9	Have a specific SLCN area on local offer website (as requested through the Local Offer working group)		SLCN Workstream						
	4.11.10	Continue the SLCN workstream to enable the continuation of support for SLCN being delivered by all								
	12. Actions to ensure good quality support for Early Years and Educational Settings	4.12.1	Education to promote the use of SLC UK data tracking to support the implementation of Talkboost		Karen who should lead this - Sue Carroll?					
4.12.2		All settings to utilise the SLC UK data reporting on Talkboost		Karen who should lead this - Sue Carroll?						
4.12.3		Evaluation of impact of Talkboost to be reported to SLCN workstream		Karen who should lead this - Sue Carroll?						
4.12.4		Planned Inclusion sessions for early years and educational settings including SLCN		Kat to confirm						
4.12.5		Review and develop the outreach support available to early years & education settings		Karen who should lead this - Sue Carroll?						
4.12.6		Pilot the roll out of Talkboost Yr7		Karen who should lead this - Sue Carroll?						
4.12.7		Continue to deliver Early Years, KS1 and KS2 of talkboost training to ensure sustainability		Karen who should lead this - Sue Carroll?						
4.12.8		Place holder for Best Practice SLCN Teaching (SLCN Primary Talk and Early Talk (CAN))		Sue Carroll / Alison Rae						
4.12.9		Videeing SLT training offer to make it more accessible		Alison Parkinson						
4.12.10		SLT relaunching traded services offer for ELKLAN		Alison Parkinson						
13. Actions to ensure good quality support for parents and	4.13.1	Enhance the peer support offer for families regarding SLCN, adopting a SLCN champions model		SLCN Workstream to confirm						
	4.13.2	Videeing SLT training offer to make it more accessible		Alison Parkinson						
	4.13.3	Place holder for supporting families who are harder to reach		Alison Parkinson						
	4.13.4	(i.e. Reviewing referral form to capture relevant information, clarifying communication preference etc)								
	4.13.5	Publicise the commitment to SLCN being everyone's responsibility and that everyone has a role to play in supporting SLCN		SLCN Workstream to confirm						
	4.13.6	Maintain the SLT service advice line		Commissioner / ShropComm						
Outcome 2 CYP who require specialist SLT support can access this in a timely way										
Actions	Reference	Actions Designed to Lead to Improvement	Strategic Lead	Responsible Officer	By When		Desired Impact	Progress Update	Evidence	RAG
14. Actions to ensure the capacity of the diagnostic service meets the demands of the population	4.14.1	Confirm which Local Authority and Integrated Care Board commissioners have responsibility for SLT		Commissioning Leads						
	4.14.2	Commissioners to understand current spend, both block contract and individual commissioning to enable benchmarking		Commissioner						
	4.14.3	Commissioner to understand current waiting times from referral treatment		Commissioner						
	4.14.4	Develop, fund and recruit to short term recovery plans		Commissioner						
	4.14.5	Understand the capacity of the services currently		Commissioner						
	4.14.6	Develop a trajectory of future growth and capacity required to meet the needs including early indicators of the impact of Talkboost on referral rates		Commissioner						
	4.14.7	Develop a business case to fund the increased demands across the age range		Commissioner						
	4.14.8	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		Commissioner						
Priority Area 4 Impacts	Reference	Impact Measure and Milestones to be Achieved	Strategic Lead	Responsible Officer	By When		Progress Update			RAG
Relevant Theme of Actions		Expected Impact					How are we measuring the impact	Baseline		
11, 12	4.11.1 to 4.11.10 4.12.1 to 4.12.10	CYP report that they received support when they needed it					Survey - to be developed and baseline to be sought			
11, 13	4.11.1 to 4.11.10 4.13.1 to 4.13.6	Families report that they know and can access the full range of support available & this support met the needs of the CYP and have the experience of waiting well if applicable					Survey - to be developed			

								Reporting through the local offer website regarding how useful information was - to be developed		
12	4.12.1 to 4.12.10	Professionals report that they know and sign post to the range of support available						Survey - to be developed,		
12	4.12.1 to 4.12.10	Setting staff report a greater understanding of needs related to SLCN and how to meet those needs						Survey - to be developed,		
12	4.12.1 to 4.12.10	Setting staff can demonstrate how they ensure good inclusive practice for CYP with needs related to SLCN						Survey - to be developed,		
12	4.12.1 to 4.12.10	Children progress well with their speech, language and communication skills						Early Years Foundation Stage Framework – communication, literacy and language		
								Progress with ECHP outcomes related to SLCN		
13	4.13.1 to 4.13.6	Families are aware of peer support available to them						Survey - to be developed		
14	4.14.1 to 4.14.8	Timely access to SLT service								
14	4.14.1 to 4.14.8	Reduction in requirement for individually commissioned / spot purchased packages of SLT								
14	4.14.1 to 4.14.8	Strong joint commissioning arrangements								

Priority Area 4 Score Card KPI	Reference	Baseline	3 Month	6 Month	12 Month	18 Month	Progress Update			RAG

Priority Area 5: Quality of EHC plans and Annual Reviews

Outcome 1	Quality of EHC Plans										
Relevant Theme of Actions	Reference	Actions Designed to Lead to Improvement	Strategic Lead	Responsible Officer	By When		Desired Impact	Progress Update	Evidence	RAG	
1. Actions to ensure improved quality of EHC plans	5.1.1	Develop an inclusion framework which sets out expectations of the support that should be ordinarily available for CYP with SEND within mainstream settings		Steve Laycock - PEP	Sep-23		a) Families and CYP tell us they have their special educational needs met in an appropriate and timely manner b) EHC thresholds are agreed and understood by parents/carers and practitioners				
	5.1.2	Update EHCP quality standards and agree what a good quality plan looks like and devise/deliver a plan writing training programme for SEND Case Officers		Fran Davis - SEND Team Manager	Sep-23		a) Families and CYP tell us they have a good quality EHC Plans that are co-produced and contain aspirational, holistic outcomes b) All EHCPs are judged good or outstanding when measured against agreed QA framework using the multi-agency audit tool.				
	5.1.3	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		Steve Laycock - PEP Sharon Graham - DSCO Jen Griffin - DCO	Sep-23		a) Professional advice is judged good or outstanding when measured through multi-agency audit process using agreed QA framework b) Families and CYP tell us that the advice accurately reflects the CYP's special educational needs and that they feel listened to.				
	5.1.4	Review arrangements to ensure an assessment of social care need is completed and the early help offer is embedded as part of the EHC process		Sharon Graham - DCO	Sep-23		a) Parents/Carers and CYP will have their social care needs and provision accurately identified within the EHCP b) All families are offered an Early Help Assessment to identify any social care needs and provision				
	5.1.5	Implement performance monitoring to ensure that EHCPs are finalised within 20 weeks		Samantha Bradley - Performance and Integration Manager	Jul-23		a) Families and CYP receive a timely service b) CYP with SEN receive access to the correct and provision based on their needs				
	5.1.6	Explore and procure an on-line digital EHC system.		Karen Levell - Service Manager SEND & Inclusion	Apr-24		a) Improved CYP and parent/carer experience of the EHCP assessment and annual review statutory systems b) Increased collaboration and engagement of families, CYP and professionals in EHC assessment and annual review process				
	5.1.7	Establish and embed a multi-disciplinary quality assurance process to monitor and improve the quality of new and amended EHC Plans		Karen Levell - Service Manager SEND & Inclusion	Apr-23		a) Families and CYP tell us that they receive the right support to meet their identified needs in a timely manner b) Audit outcomes are routinely used to inform workforce training and development to continually improve the quality of EHCPs				
	5.1.8	Undertake monthly multi-disciplinary audits to ensure improved consistency of EHCPs		Fran Davis - SEND Team Manager Sharon Graham							
	5.1.9	Review the SEND Team structure and develop a recruitment / retention strategy to ensure sufficient capacity to complete all statutory tasks.		Karen Levell - Service Manager SEND & Inclusion	Sep-23		a) Families, CYP and professionals tell us that communication with the SEND Team is effective b) Monthly data reporting shows full compliance with statutory tasks				
	5.1.10	Review Staff recruitment and retention in EP Service.		Steve Laycock - PEP	Sep-23		a) Audit activity demonstrates all EP advice is completed within 6 weeks of request.				
Outcome 2	Timeliness and quality of annual reviews										
Relevant Theme of Actions	Reference	Actions Designed to Lead to Improvement	Strategic Lead	Responsible Officer	By When		Desired Impact	Progress Update	Evidence	RAG	
	5.2.1	Develop and implement an annual review recovery plan to ensure all EHCPs		Fran Davis - SEND	Apr-24		a) Families and CYP tell us they have an up-to-date EHCP with access to timely access to all relevant professional advice.				

2. Actions to ensure improved timeliness and quality of annual reviews	5.2.1	written prior to December 2022 are up to date		Team Manager			b) Audit activity demonstrates all amended EHCPs issued prior to April 2023 are rewritten/amended to the same quality standards as new plans			
	5.2.2	SEND Team staffing to ensure sufficient capacity to update EHCPs following amendments agreed via annual review		Karen Levell - SEND Service Manager			a) Families and CYP tell us they have high quality, timely EHC plans that are coproduced and meet their holistic needs b) Audit activity demonstrates Final Amended EHCPs will be issued within 12 weeks of the annual review meeting where there has been a decision to amend			
	5.2.3	Review the multi-agency EHCP review process and develop a clear workflow to ensure the decision to maintain/cease or amend an EHCP is made within 4 weeks of the annual review meeting and where appropriate amendments are made within statutory timescales and amended EHCPs meet the agreed quality standards					a) Families and CYP with EHCPs tell us they receive the right support to help them achieve the outcomes of which they are capable to enable them to prepare successfully for adulthood b) Audit activity shows that annual review reports are received, are on time and of good quality and contain up to date, professional advice. c) Annual review performance monitoring shows that statutory annual review timescales are met.			
	5.2.4	Create a suite of co-produced annual review templates and guidance, including key phase transition and preparation for adulthood templates					a) b)			
	5.2.5	Create a multi-agency training plan to ensure all staff are aware and understand the local annual review processes					a) professionals tell us that their training needs are identified and met, and they feel clear and confident about their role in the annual review process.			

Priority Area 5 Impacts	Reference	Impact Measure and Milestones to be Achieved	Strategic Lead	Responsible Officer	By When	Progress Update	RAG
Relevant Theme of Actions		Expected Impact				How are we measuring the impact	Baseline
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Priority Area 5 Score Card KPI	Reference	Baseline	3 Month	6 Month	12 Month	18 Month	Progress Update	RAG
1	5.1.1	Launch work with SENCOs via planned SENCO Forum and SEND development days with a focus on implementation of the graduated response and SEN toolkit Support ensuring timely interventions in a person-centred manner.	SEN Toolkit on 4 broad areas of SEN will have been developed and published on local offer	We will have published clear guidance on the Local Offer setting out what support should normally be available within a mainstream setting for CYP identified as having difficulties with learning.	New EHCNA request paperwork developed and published Increased quality of information received at point of EHCNA request 95% EHCNA requests agreed first time	Extend to early Years and post 16		
1	5.1.2	Review a sample of EHC plans. Develop draft proposal of what a "good" EHC plan looks like in Shropshire and present to the SEND & Inclusion Partnership Board	Quality standards will have been agreed and published on the Local Offer. EHCP QA checklist is in place and used by all SEND Case Officers to inform EHCP Plan writing	75% of good or outstanding plans at each audit point	100% of good or outstanding plans at each audit point	Review quality standards		
1	5.1.2		We will have draft quality standards for each discipline submitted to the Head of SEND	finalised and signed off the quality standards which will have been reviewed by all partners				
1	5.1.3							

1	5.1.4	Reviewed and amended the pathway for statutory advice requests for social care	We will have introduced and embedded the social care screening tool at the point of making a request for an EHCNA. Develop a pathway for social care involvement through Early help at EHCNA	We will have received 75% of social care advice within 6 weeks of the request being made (unless exceptions apply)	We will have received 100% of social care advice within 6 weeks of the request being made (unless exceptions apply)				
1	5.1.5	Review workflow process and performance reporting	On-going monthly reporting will show EHCP timeliness at 60%	On-going monthly reporting will show EHCP timeliness at 75%	On-going monthly reporting will show EHCP timeliness at 100%				
1	5.1.6								
1	5.1.7								
1	5.1.8								
1	5.1.9	Establish caseloads and review against best practice	Complete proposed Team situ	Conduct recruitment					
1	5.1.10								
2	5.2.1								
2	5.2.2								
2	5.2.3								
2	5.2.4								
2	5.2.5	Identify workforce training needs with a clear plan in place for priority groups	Delivered training to SENCO's and other priority groups	Roll out training to remaining staff groups	Implement sustainable model to ensure on-going CPD				

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Committee
People Overview
Scrutiny

29 March 2023

Item

Public



Children and Young People Complex Needs Summit – Outputs and Next Steps

Responsible Officer:	Claire Parker, Director of Partnerships and Place, NHS Shropshire Telford & Wrekin		
email:		Tel:	
Cabinet Member (Portfolio Holder):	Kirstie Hurst-Knight		

1. Synopsis

This report summarises the key themes and next steps from a system wide summit held on March 6th 2023 to review issues for children with complex care needs and their families.

2. Executive Summary

A proposal to engage the Integrated Care System (ICS) professionals from education, health and social care with families/carers and young people to work together to identify and problem solve the challenges experienced by children, young people (CYP) with more complex mental and/or physical special educational needs and/or disabilities and their families/carers was made and agreed by the Children and Young People , Families and SEND board.

A summit on Complex Care needs for Children, Young People and their families was delivered on 6th March 2023.

The three topic areas discussed were:

- *Mental health support for CYP with complex care needs*

- *Preparing for Adulthood/Transition to adult services*
- *Early help support and intervention.*

This report discusses the output of that discussion and the next steps to making change that impacts positively on CYP, their families and the staff working across education, health and social care and how the progress on the actions will be monitored.

3. Recommendations

- 3.1. To note the contents of the report.
- 3.2. To ask the Children, Young People, Families and SEND system partnership board to take the outputs of the summit and monitor delivery and provide assurance against the actions within the CYP workplan.

Report

4. Background

Overview

A proposal to engage the Integrated Care System (ICS) professionals from education, health and social care with families/carers and young people to work together to identify and problem solve the challenges experienced by children, young people (CYP) with more complex mental and/or physical special educational needs and/or disabilities and their families/carers was made and agreed by the Children and Young People , Families and SEND board in late 2022. Opportunities to share positive practice that has resulted in positive or improved experiences for children and young people would also be collected and shared.

A half day learning summit was developed to include a range of session topics, including the lived experience from families and young people willing to share their experiences, professionals working in these services and senior strategic leaders from the ICS.

This summit was delivered on 6th March 2023. This report outlines the feedback, learning and next steps of the summit.

Topics included:

It was agreed that the neurodevelopmental pathway and Speech and Language services had been discussed in detail in other forums, with the challenges and risks well understood and the CYP, Families and SEND board is developing a workplan and aligned risk register to gain assurance, monitor the risks and issues related to these topics. These two areas form part of the Accelerated Progress Plan following the Shropshire SEND review in October 2022 and the subsequent publishing of the report from Ofsted and CQC in February 2023.

Therefore, three topics were selected to discuss that had not had a previous degree of focus.

These were:

- Mental health support for CYP with complex care needs
- Preparing for Adulthood/Transition to adult services
- Early help support and intervention.

4.1. The summit was attended by system representatives (Shropshire, Telford and Wrekin) at service and senior level from education, health and social care. Parent and carer representatives were present from both Shropshire and Telford and part of the summit was a story of lived experience from Ruth and her son Jacob. Unfortunately, several Telford colleagues had to leave the event due to the notification of the Ofsted/CQC Area SEND inspection in Telford on the morning of the summit.

4.2. Organisational representatives:

- Shropshire Council
 - Telford and Wrekin Council
 - PACC (Shropshire Parent and Carers Council)
 - Telford POD (Parents Opening Doors)
 - NHS Shropshire, Telford and Wrekin (Integrated Care Board)
 - Shrewsbury and Telford Hospital NHS Trust
 - Midlands Partnerships NHS Trust
- Shropshire Community NHS Trust gave apologies on this occasion.

4.3. **Mental Health Support**

It was agreed that the discussions should extend to family support as well as support for CYP with complex needs.

The main priorities that came out of the discussion were:

- There need to be systems in place to record information that is inclusive of all needs of the CYP/family and systems need to be integrated.
- There is a need to improve communication between CYP and families and organisations with a co-ordinated approach.
- There needs to be more focus on Multi-Disciplinary Team (MDT) working with a family approach. Education, health and social care need to be more joined up.
- There needs to be a culture change to build trust with the family and the providers, to explain their role and input and educate and support families to utilise the system and where necessary, challenge.
- There needs to be a greater understanding of thresholds and thresholds should be used effectively to support the child and family rather than being used to pass issues around the system. Thresholds need to be person centred.
- There needs to be more understanding of the emotional impact on families and how to provide the basic things that support mental health (friendships, being valued, achievements). CYP and their families don't

always have the same community networks that mainstream children and their families access.

- There needs to be specialist support available for CYP and family mental health and wellbeing.
- Different services available to families in Shropshire and Telford - therefore we need to look at equity of access.

What is going well:

- GP annual health check reviews were regular and well received, this was a notable improvement.
- Care-co-ordinators and social prescribing access was valued and helpful.
- Parent carers provide 'Rainbow packs' which were a really useful resource.

4.4. **Preparing for Adulthood/Transition to Adult Services**

The main priorities that came out of the discussion were:

- Planning early with CYP and their families was crucial and must include the parent voice and the aspirations of the young person, including those children in residential settings.
- Data and Intelligence should be used to inform joint commissioning decisions and link children's and adult services.
- Silo working is a particular issue - often work with the child is focussed on school and not the community to prepare the young person to grow into an independent adult.
- Working with the family to help them support transition conversations and experiences.
- Making sure the system transfers knowledge well across the system so that healthcare works well in adult services too.
- Preparing for adulthood should start in the early years and should follow the child from nursery-primary-secondary and onwards. Having those early conversations to build into the Education, Health and Care Plan.
- For children who are non-verbal, assumptions can be made on what the child can achieve and there is a need to raise those expectations.

4.5. **Early support and intervention**

- Using the services we already have in a smarter way, it's not always about more money.
- Changing ways of working and removing barriers. Empowering all.
- Children's Development Centres (CDC) have become health focussed and not a true MDT as in the past, Changing this approach could be the start of bringing the MDT together. CDC conversations need to start at the beginning of the assessment and involve social care.
- Need a multi-agency one stop shop for advice for families and staff.
- There is a need for more support in the home environment with health visiting, portage and emotional health and well-being support.
- Support maternal health after birth of a child with complex needs.

- Better conversations and training with colleagues about preventative health and not crisis management.
- The same emotional support for parents as well as the child/young person.
- How the system can worry the parents more by not being proactive.
- Communication that is clear and informs families.
- Early support and intervention means different things to health and social care.
- Lack of access to portage services for all families.
- Parents don't know what services they can access and feel they have missed out on opportunities when they learn of services available that they were not aware of at the time of need.
- There are often emotional barriers for staff and this creates a reaction of feeling overwhelmed. We need to be better at supporting staff and encouraging co-production.
- There is a clear need for Occupational Therapy support and SALT support from early years so the young person can reach their potential.

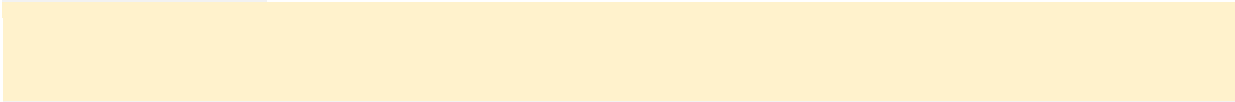
5. Conclusions

5.1. Next steps:

- The outputs from the summit will be included in the priority workplan for the CYP, Families and SEND system board.
- The board will monitor and review the actions against the work plan.
- A risk register will sit alongside the workplan and be clear where the gaps and mitigations need to be managed and escalated.
- The early help and prevention agenda is the place to start transformational change.
- There is a need to co-produce the solutions which bring both the stakeholders and families together.
- MPFT have already asked to review the support for families through the Bee-U service.

List of Background Papers (This MUST be completed for all reports, but does not include items containing exempt or confidential information)

Local Member: All



Appendices [Please list the titles of Appendices]

None
