

# Timeliness of Education, Health and Care Plans Report to the SEND & AP Partnership Board May 2024

## Introduction

There is a statutory requirement to complete Education, Health and Care needs assessments (EHCNAs) and to issue a plan where the need assessment indicates one is required, within 20 weeks from the request for an assessment, and this is referred to as timeliness. Current performance against this measure is low for several reasons and mirrors a trend in a significant number of other local authorities. However, timeliness in Shropshire has been declining and is now considerably lower than the national average (49.2%)

Data is collected by the Department for education (Dfe) each calendar year (SEN2 return). National data is published in the summer for the previous calendar year. Shropshire’s timeliness for the previous 3 calendar years compared to national data is as follows

	Shropshire	National
2021	66.	59.9%
2022	45.9%	49.2%
2023	33.74%	N/A
2024 (to April)	14.45%	N/A

## Context / Demand

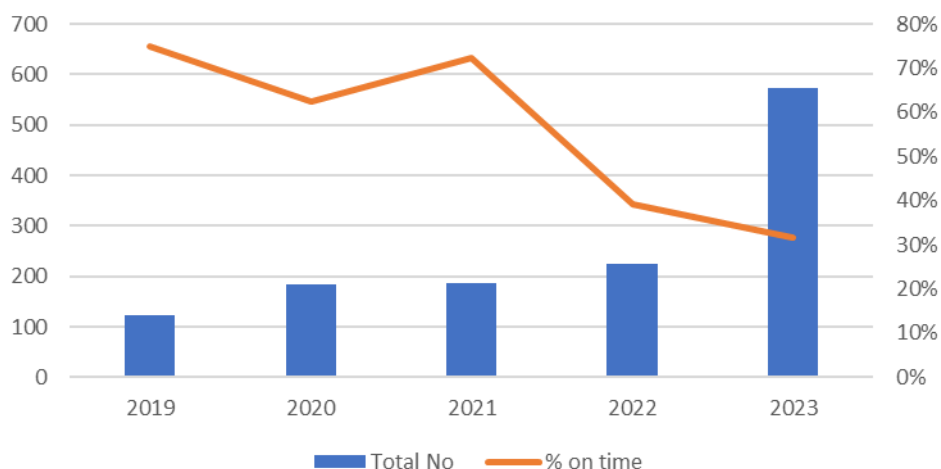
There is an increasing trend in the number of EHC Plans maintained for children and young people living in Shropshire which has now exceeded 2,500. The number of new EHCPs issued each year has shown a significant increase

2021	187
2022	225
2023	572

This represents a 154% increase in new EHCPs issued between 2022 and 2023.

The substantial increase in demand has placed extreme pressure on service resources and has resulted in delays in timeliness.

### EHCP Timeliness and Numbers



The number of requests for EHC Needs Assessments continue to increase with a total number received of 902 during the 2023 calendar year, compared with 513 in 2022 and 271 in 2021.

This represents a 76% increase in assessment requests between 2022 and 2023.

Although the number of EHC Needs Assessment Requests received in the first quarter of 2024 indicates that this trend may level off or decrease slightly and despite the launch of Shropshire’s Ordinarily Available Provision (SOAP), the overall predictions suggest that EHCNA requests in 2024 is likely to remain in excess of 900 overall.

Request for Assessment (From Case Monitoring Sheet)												
Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	2021 Total
20	22	28	16	33	29	21	6	25	22	26	23	271
Jan-22	Feb-22	Mar-22	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	2022 Total
35	41	50	35	53	31	49	13	31	35	77	63	513
Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	2023 Total
93	88	118	49	105	80	98	19	45	71	70	66	902
Jan-24	Feb-24	Mar-24	Apr-24	May-24	Jun-24	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	2024 To Date
74	60	32	39									205

The increased volume of EHCNA assessments received puts pressure on the SEND Team as well as the advice writing services who contribute to the assessment particularly the Educational Psychology service. Reliance on EP locums and associates for statutory work places considerable strain on the EPS budget. The increased EHCPs result in additional casework, mediations and tribunals which impacts on SEN case officers’ time and availability to complete the statutory process within the prescribed timescales. There has been a 75% increase in complaints this year compared to last year and MP enquires have risen by 170% during the same period.

Although the quality of Education Health and Care Plans has improved, the additionally of undertaking the quality assurance process has also resulted in an increase to case officers workload.

## Quality Assurance

### Autumn Term 2024

59.2% of Draft EHC Plans were rated as Good.

76.7% of proposed Amended EHC Plans were rated as Good

### Spring Term 2024

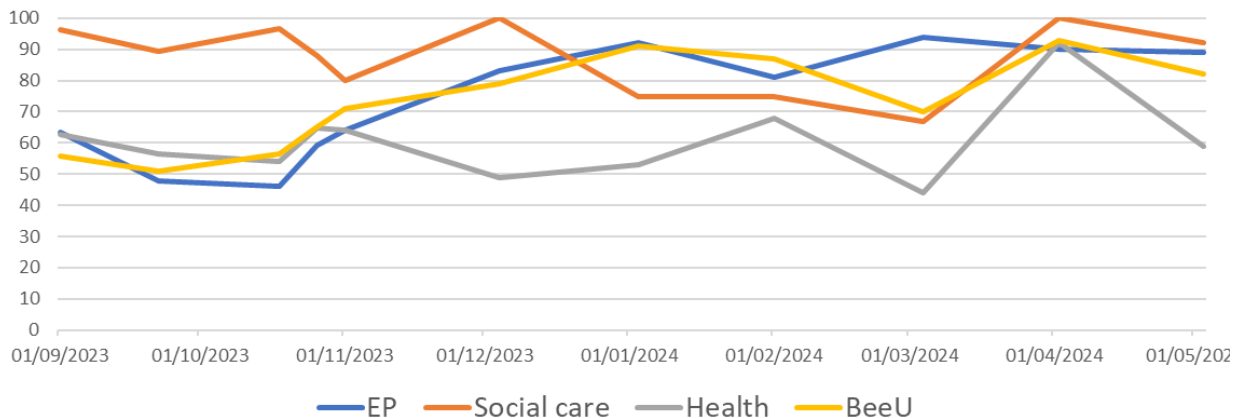
90% of Draft EHC Plans were rated as Good

92% of Proposed Amended EHC Plans were rated as Good

## Performance

### EHCNA Advice (6 weeks)

Within the EHCNA process, there is a requirement for all agencies to produce advice reports within 6 weeks. As the graph shows, the majority of advice reports are received in a timely manner.



## Appendix C Child Health Advice

Whilst Child Health Advice received within 6 weeks has recently declined, we ensure that late Child Health advice does not significantly impact on either the decision to issue a Draft EHC Plan or writing the Draft Plan. In the majority of cases, where Child Health advice has not been received in 6 weeks, this has not impacted on the overall timeliness of the Final EHCP.

## Appendix B Education Advice.

This advice is not always completed by education settings and a proportion received is not of good enough quality to inform a good quality EHC Plan which then requires follow up. However, the revised Appendix B template which has been coproduced with SENCOs is now “live” and we are seeing the impact on the quantity and quality of advice received. In addition, “Guidance for writing good quality education advice” is now available to education settings via the Local Offer with a training/support session offer from the SEN Team also available. The quality of EHCNA requests and Appendix B Education Advice is now RAG rated at Statutory Assessment Panel to illustrate any improvements and to identify any education settings that could be offered a training/support session.

### Final EHCP performance (20 weeks) Current Academic Year

Number of EHCPs issued	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24	Apr-24
Late EHCPs issued	66	32	53	39	58	59	59	44
20 week EHCPs issued	7	4	7	4	5	14	10	7
Total issued	73	36	60	43	63	73	69	51
EHCP timeliness	9.59%	11.11%	11.67%	9.30%	7.94%	19.18%	14.49%	13.73%

An analysis of the reasons for late plans was undertaken to provide a snap shot of the start middle and end month within the current academic year as highlighted above.

In almost 50% of cases, the main reason for the delay was due to plan writer/ case officer capacity. Other reasons include late advice (37%) and placement delays (7%). The remaining 7% were due to a variety of other reasons.

### Current EHCNAs within the system

There are currently 278 EHCNAs in process where EHC Plans have not yet been issued. These are broken down as follows

Awaiting advice	98
Awaiting Decision to issue an EHCP	9
Awaiting Draft EHCP	80 ( 64 have exceed 20 weeks)
Draft EHCP issued	91

During April, there were 97 draft EHCPs issued, 69 of these have been waiting more than 15 days allowed for the consultation period

There are 64 Draft EHC Plans that are yet to be written where the 20-week deadline has passed. This will impact further on the 20-week performance in the second and third quarters of 2024.

Monthly monitoring reports show that there are a number of EHCPs that have been waiting over 30 weeks and 52 weeks to be finalised. Analysis of the reasons for the delay in finalising these plans shows that in all cases there has been difficulty in sourcing an appropriate placement. In many cases the SEN team are issuing a high number of

consultations which do not result in a placement. This adds to the delays within the statutory system.

	Jan 24	Feb 24	March 24	April 24
New requests received	74	63	80	94
Number of EHCPs issued (excluding exceptions)	5	14	10	7
Percentage of EHCPs issued within 20 weeks (excluding exceptions)	7.94	19.18	14.49	13.73
20-week EHC Needs Assessment completion rate cumulative for the year 2024	7.94	13.97	14.15	14.45
20-week EHC Needs Assessments overdue by 30 weeks	92	87	60	62
20-week needs assessments overdue by 52+ weeks	7	11	10	10

Although since 1st September 2023, staffing capacity was increased and caseloads were reduced to an average of 267 from well over 300, there have been a number of staffing challenges with 4 full time SEN Case Officers on long term sickness absence or phase return following sickness leave. Whilst temporary cover for these posts has been secured, induction and training takes on average 4 weeks which contributes to drift and delay with the EHCNA process and attendant casework.

There are 13.6 fte staff within the SEN Team that are directly responsible for the statutory SEN Processes, including EHCNA assessments, issuing and finalising EHCPs and completing annual reviews . The majority (70%) are employed via temporary agency contracts employed through agency contracts.

## **EHCP Recovery Plan**

Work is underway to manage the identified challenges with the intention to return timeliness for issuing new EHC plans to above the national level. This information is being included in the Accelerated Progress Plan (APP) monitored by the DfE and NHSE and will become a key focus of the EHC work stream.

In order to complete all outstanding EHCPs (backlog) and increase timeliness to be at least in line with national performance, the following recommendations are made

- Develop a recovery plan, identify actions and monitor progress and impact through the multi-agency EHC workstream. These actions will need to be fully aligned with the APP
- Improve data recording and reporting structure to ensure consistency and accuracy of information reported
- Weekly oversight from the Service Manager – SEND & Inclusion to address issues and cases causing concern and also support timely decision making
- Review the SEN team structure to become task orientated to support 20 week timeliness and delivery
- Identify a dedicated EHCP backlog team within the SEN Team and increase percentage of SEN team staff on permanent contracts to reduce staff turnover and bring stability to the SEN team
- Clear the backlog of late plans – particularly those waiting over 30 weeks and 52 weeks – this will likely result in a dip in 20 week performance initially due to issuing a high proportion of late plans.
- Further improve timeliness of 6 week advice and improve quality of Education Advice (Appendix B) through workforce training and SENCo networks
- Identify EHCPs that can be finalised within the prescribed 20 weeks by naming a type of provision rather than a specific placement
- Review the business processes to strengthen the decision – making pathways to ensure that placement decisions are made immediately following the 15 day consultation period.
- Review SEN Team capacity so that more EHCPs can be completed on time. This will counter the effects of issuing a large number of late plans each month.
- Improve communications with families and introduce a proactive communications protocol. Establish an SEN contact team which will fully adhere to the communications protocol and ensure that regular communications are consistently provided in a timely and helpful manner. Publish information regarding the recovery plan and progress on the Local Offer
- Progress to be monitored monthly by Quality Assurance Group with further updates to be provided to the SEND & AP Partnership Board



Shropshire  
Council