

# Joint SEND Written Statement of Action (WSOA)

## Progress report – October 2020

Joint SROs for the SEND Improvement Programme

- Rachel O'Connor – Assistant Chief Exec, BSol STP
- Dr Tim O'Neill – Corporate Director for Education & Skills, BCC



# Introduction 1

- Following a joint local area SEND inspection in June 2018, 12 key areas of weakness were identified in Birmingham and a joint Written Statement of Action (WSOA) was prepared by education, health and social care sectors. The purpose of this report is to update on key progress 2 years post-inspection
- The SEND Improvement Programme was immediately set up to deliver these improvements in partnership across all sectors, including the Birmingham Parent Carer Forum, who re-launched the PCF in March 2019.
- A refreshed SEND Strategy was agreed in September 2019 and the programme governance and workstreams updated to deliver the required improvements from the WSOA and a wider SEND transformation programme. We have 5 main workstreams
  - Building capacity in mainstream schools
  - Quality Assurance & Performance
  - Developing support and provision
  - Preparation for Adulthood
  - Integrated Commissioning
- A key test of our progress is what our children and families experience. The most recent Parent Carer Survey continues to show improvements in the overall experience which is now 3.1 out of 5 in June 2020 up from 2.4 in December 2018 (This is a composite indicator including overall experience of SENAR; experience of telling their child's story; and how well parents think different parts of the partnership have communicated adequately with each other in relation to their child)



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# Introduction 2

- Re-inspection by Ofsted & CQC was originally expected June/July 2020, although the inspection timetable has been delayed as a result of the covid-19 pandemic - now expected 2021.
- We remain in close contact with DfE and NHS England & Improvement advisors through the covid-19 period and as part of regular quarterly monitoring and preparation for re-inspection.
- We have completed 78 out of 117 response statements in the WSOA, 9 are archived and 30 remain in progress.
- Delivery of the improvement plan as set out in 2018 is averaging 90% complete, although the remaining 10% includes significant areas of our improvement programme that we remain committed to deliver.
- Where original actions are 'completed', there is still ongoing work to capture and analyse user feedback, validate outcomes and identify any additional planning needed.
- As an example, it is recognised that waiting times for therapies need to reduce further and remedial planning is being developed given the impact of service pauses due to Covid-19.



# WSOA – 12 areas for improvement

1. The lack of an overarching approach or joined-up strategy for improving provision and outcomes for children and young people who have SEN and/or disabilities across Birmingham.
2. The effectiveness of inter-agency working.
3. The coordination of assessments of children and young people's needs between agencies.
4. Integrated commissioning.
5. Co-production
6. Parental engagement and satisfaction of parents.
7. The accessibility and currency of the local offer.
8. The quality of EHC plans.
9. Waiting times and access to therapies and professionals in Child Development Centres (CDCs).
10. Academic progress when compared to all pupils nationally.
11. Absence and exclusions.
12. Employment opportunities.



# Birmingham SEND Strategy

## Our Vision

“By working together with families and communities we want to support all children and young people, aged from 0 to 25, with SEND to meet their potential, live healthy lives and become active citizens within their communities”.

## The Birmingham Promise – Key Strands

- Getting the climate right – vision, policy and culture
- Building capacity to ensure staff have the confidence, expertise and access to specialist support to enable this to happen.
- Having a Quality Assurance Framework to ensure the best possible outcomes for children and young people are achieved.
- Maximising the use of resources and provision to ensure we make the most effective use of them.
- Developing strong partnerships within local areas.



# The team delivering the improvements (1)

Name	Job Title / Role	
Rachel O'Connor	Assistant Chief Executive, STP (Bsol CCG)	Joint SRO / chair SEND Board
Dr Tim O'Neill	Corporate Director of Education & Skills (BCC)	Joint SRO / chair SEND Board
Sabiha Aziz	Chair of the Parent Carer Forum	Parent representative on the SEND Improvement Board
Nichola Jones	Assistant Director for SEND, Inclusion & Wellbeing (BCC)	Building Capacity & Developing Support & Provision Workstream lead
Jo Carney	Director of Joint Commissioning (Bsol CCG)	Integrated Commissioning Workstream Lead
Linda Lockwood	Deputy Director of Nursing (Bsol CCG)	Quality Assurance & Performance Workstream Lead
David Stringfellow	Interim Director of Commissioning & Corporate Parenting (Birmingham Children's Trust)	PFA Workstream lead
Helen Jenkinson	Chief Nurse, BSol CCG	Clinical & Quality Nursing Lead
Richard Selwyn	Transformation Director, Birmingham Children's Partnership (BCP)	BCP CYP Improvement Team

# The team delivering the improvements (2)

Name	Job Title / Role	
Dr Orlaith Bryne	Designate Medical Officer (DMO) – Bsol CCG & BCHC Trust	Designate Function
Dr Manjeet Raina	Designate Medical Officer (DMO) – Bsol CCG & BCHC Trust	Designate Function
Ali Beard	Designate Clinical Officer (DCO) – Bsol CCG & BCHC Trust	Designate Function
Teresa McIntosh	Deputy Director of Children & Families Division – BCHC Trust	Therapy waiting times lead
Chris Bush	Head of Disabled Children's Care, Birmingham Children's Trust	
Gillian Leach	Parent Link Coordinator, Education & Skills BCC	



# Key impact so far

- New improved user-friendly Local Offer website co-produced with all partners including parents/families
- Multi-agency EHCP Quality Assurance Framework in place. Since April, the new assessment pathway requires 100% of new EHCP plans to be audited pre-issue. In April, 41% of new EHCPs were quality assured green which has increased to 80% in August.
- 89% of EHCPs were issued in 20 weeks for July which exceeded the Core Cities average.
- The paperwork for 10,400 outstanding Annual Reviews for 5,755 children have now been completed and are being issued.
- Improved response time and quality of health advice for EHCPs.
- Significantly strengthened health input and visibility in all aspects of improvement via health Designate team
- Multi-agency Locality Teams include speech and language (SLTs) and occupational therapists (OTs), providing quick route to families and schools for support to meet needs at universal level, potentially reducing future referrals/waits for specialist services.
- SLT advice line set up in response to Covid-19 offering advice and strategies to families and professionals – 106 calls first 8 weeks.
- OT service has established advice line for families and professionals - 113 calls received in June/July 20
- Improved lines of communication for parents through linked professionals, resulting in reduced mediations (all 8 in July resolved)
- 6 x Parent Link Officers work alongside all agencies to seek a resolution, improving the outcomes for the child/young person.
- Decrease in no. quarterly complaints about the SEND service for the most recent quarter: Apr-Jun 2019 = 71, Apr-Jun 2020 = 20.
- Earlier access to support and funding through implementation of new SEND Support Plans
- The Home Bridging Team is working with professionals and families in the localities to help secure appropriate provision for the next academic year. Children in receipt of home tuition was 83 in February and currently (end of September) is 50.
- The most recent Parent Carer Survey continues to show improvements in the overall experience which is now 3.1 out of 5 in June 2020 up from 2.4 in December 2018 (This is a composite indicator including overall experience of SENAR; experience of telling their child's story; and how well parents think different parts of the partnership have communicated adequately with each other in relation to their child)





# Outline of what is still to do

- SEND Section 75 agreement and implementation of new Integrated Commissioning team and brokerage function
- Reduce waiting times for therapies further and confirm recovery plans following covid-19
- Improvements to Personal Budgets and publish on Local Offer
- Implementation of SENAR redesign
- Implementation of new ongoing EHCP Annual Review processes (including Year 9s and Preparation for Adulthood)
- Sufficiency reviews – complete post-16/employment/housing options and consolidate work so far across the partnership
- Further development of multi-agency workforce development and training
- Validation of user experiences, outcomes achieved, and continuous improvement



# Overall RAG and % complete

WSOA Section	Sub-section	Responses or areas of activity in WSOA Action plan	R - Overdue	A - Risk of overdue	G - On track	B - Complete	Archived / Duplicate*	% Complete** Subsection / Total	
1.1	Overarching approach or joined up strategy	Strategic and coordinated leadership / Prog. Governance	6	0	0	5	1	99%	96%
1.2		Joint SEND Strategy & new SEND Service Model	8	3	0	4	0	93%	
1.3		Strategic planning	6	0	0	4	1	96%	
2	Effectiveness of inter-agency working		10	3	0	6	1		95%
3	Coordination of assessments of needs between agencies		11	1	0	9	1		98%
4	Integrated Commissioning		8	1	0	7	0		95%
5	Co-production		6	1	1	2	1		91%
6.1	Parental engagement and satisfaction of parents	Communications and 'tell it once'	5	1	1	3	0	76%	85%
6.2		Parent satisfaction	10	2	0	6	2	94%	
7	Accessibility and currency of the Local Offer		7	2	0	5	0		80%
8.1	Quality of EHC Plans	Capacity of DMO	5	1	0	4	0	98%	89%
8.2		EHCP Quality Assurance Framework	8	1	0	5	2	94%	
8.3		SENAR Function	2	1	0	1	0	75%	
9	Waiting times and access to therapies and professionals in CDCs		8	0	0	8	0		98%
10	Academic progress when compared to all pupils nationally		7	2	1	4	0		86%
11	Absence and exclusions		5	1	0	3	0		89%
12	Employment Opportunities		5	3	0	2	0		75%
		TOTAL	117	23	3	4	78	9	91%

\* Archived activities - Some activity was duplicated across different sections in the action plan. Any archived items are recorded in the action plan

\*\* % complete is approximate and is based on progress towards each response statement in the WSOA. Each response statement in the WSOA is treated as a single unit. Some responses are regarded as 'complete' at an activity level but there is still ongoing work to measure outcomes and gather feedback to ensure 100% embedded

# 1.1 Overarching approach & joined up strategy - Strategic Leadership / Programme governance

Inspection main findings – June 2018	What we have done
<p>A lack of strategic and coordinated leadership means that pupils who have SEN and/or disabilities have failed to achieve as well as they should have done.</p>	<ul style="list-style-type: none"> <li>▪ Agreed a partnership Written Statement of Action in response to the inspection and set up associated governance for the SEND Improvement Programme - December 2018</li> <li>▪ Agreed a refreshed SEND Strategy, including a shared Vision and "Birmingham Promise", with new values and behaviours including co-production with families to support young people 0-25 to live healthy lives, be active in their communities and achieve their potential (September 2019)</li> <li>▪ Set up the strategic Birmingham Children's Partnership to ensure coordinated leadership to address joint priorities for children's services with 5 key priorities for 2019/20 including SEND, High Cost Placements, Contextual Safeguarding, Primary School exclusions and Early Help.</li> <li>▪ Jointly resourced and completed recruitment of a CYP Improvement Team to support delivery of the partnership priorities - in July 2019</li> </ul>
What is still to do	Impact so far – September 2020
<ul style="list-style-type: none"> <li>▪ Complete analysis of recent surveys and confirm additional feedback from parents and families about impact of the new integrated SEND model and how well the Birmingham Promise within the SEND Strategy is embedding (Sept/October 2020)</li> </ul>	<ul style="list-style-type: none"> <li>▪ There are robust levels of challenge and support to agencies through the Birmingham Children's Partnership executive and wider teams delivering the improvements. There is strong commitment from Members and senior leaders, with understood routes of escalation that lead to practical changes which will improve outcomes for children and young people with SEND.</li> <li>▪ The strong commitment and challenge is equally reflected through the involvement of the Birmingham Parent Carer Forum, who have had a role on the SEND Improvement Board and in the workstreams including development of the Local Offer, Parent Link Officer services and Preparation for Adulthood.</li> </ul>



## 1.2 Overarching approach & joined up strategy - Joint SEND Strategy & new SEND Service Model

Inspection main findings – June 2018	What we have done
<p>Significant periods of change across the partnership have led to a lack of an overarching approach. There is not a joined-up strategy for SEN and/or disabilities across Birmingham.</p>	<ul style="list-style-type: none"> <li>▪ Learnt from best practice examples of SEND services across the country through a review of Inspections and learning from other local authorities – April-August 2019</li> <li>▪ Reviewed and refreshed the SEND Strategy agreed a new Joint Commissioning Framework for the partnership - September 2019</li> <li>▪ Development of a new SEND locality model, including new Locality Panels, new EHCP QA process, SEND Support Plans, Individual School SEND Meetings, Consortia Reporting, Parent Link officers and SEND Family Forums which has been piloted and is now being fully implemented across the partnership in order to improve outcomes - from October 2019</li> <li>▪ Implemented a multi-agency SEND Dashboard to monitor and embed our approach to quality assurance across the partnership</li> <li>▪ SEND Code of Practice awareness eLearning training to Health providers has commenced in the community services, and is in the process of being rolled out through all partners</li> <li>▪ Ongoing 6 monthly parent carer surveys</li> </ul>
What is still to do	Impact so far – September 2020
<ul style="list-style-type: none"> <li>▪ Further development of the Professional Development Framework to deliver on multi-agency training/development – Autumn 2020</li> <li>▪ Tracking/reporting e-learning training</li> <li>▪ Improvements to data collection and reporting to feed into the SEND Dashboard and inform further service development – Autumn 2020</li> </ul>	<ul style="list-style-type: none"> <li>▪ A refreshed SEND Strategy has been in place since September 2019, which was co-written with all partners and included consultation with the Parent Carer Forum. There has been a key focus over the last year to embed the strategy, deliver the required improvements and monitor through the dashboard and ongoing parent carer surveys.</li> <li>▪ The June 2020 Parent Carer Survey indicates improvements in the new model are being experienced on the ground – particularly in the number of times parents have to tell their story, and how well partners are working together</li> <li>▪ An annual review is planned for Autumn 2020 to understand the impact of the changes and ensure there is a shared ownership of the SEND Strategy and vision across the city.</li> </ul>

# 1.3 Overarching approach & joined up strategy - Strategic planning

Inspection main findings – June 2018	What we have done
<p>Actions to benefit children and young people who have SEN and/or disabilities have been happening in isolation. There has been a complete lack of strategic planning. A great deal of what is good is the result of the qualities of the individuals who are delivering aspects of the provision.</p>	<ul style="list-style-type: none"> <li>▪ Finalised the Joint Strategic Needs Assessment (JSNA) for SEND in February 2019, which informed development of the refreshed SEND Strategy and associated joint commissioning framework and strategy</li> <li>▪ Completed sufficiency reviews of education, health and social care services to understand gaps in provision</li> <li>▪ Agreed the key priorities for the Birmingham Children's Partnership, which includes SEND</li> <li>▪ Conducted a baseline review of finances across all SEND services, and identified improvements for joint commissioning of high cost placements</li> <li>▪ A Section 75 Agreement has been drafted is being taken through partnership governance and sign off</li> </ul>
What is still to do	Impact so far – September 2020
<ul style="list-style-type: none"> <li>▪ SEND Section 75 agreement to be signed off</li> </ul>	<ul style="list-style-type: none"> <li>▪ We have a single, shared strategic approach to SEND in Birmingham which has been agreed across the Birmingham Children's Partnership. The JSNA and SEND Strategy has driven the development of recent improvements such as the integrated SEND locality teams, parent link officers and new SLT and OT resources in the localities</li> <li>▪ A Section 75 agreement will further support joint funding arrangements and commissioning for children with complex needs, including reviewing new arrangements for commissioning decisions</li> </ul>



## 2. Effectiveness of Inter-agency working

Inspection main findings – June 2018	What we have done
<p>Leaders have not ensured that the 2014 reforms have had a marked impact on improving provision and outcomes for children and young people who have SEN and/or disabilities. Until very recently, health, education and social care teams have not worked together effectively at a strategic level. As no one has taken a clear and cohesive overview of provision and outcomes for children and young people who have SEN and/or disabilities, the local area has not implemented the reforms effectively.</p>	<ul style="list-style-type: none"> <li>Completed a financial baseline of SEND services to understand potential cost efficiencies and improved outcomes through joint commissioning</li> <li>Agreed an Professional Development Framework for Education services which is being further developed to incorporate multi-agency training with Health and Social care</li> <li>Recruited and deployed additional health Designate Medical Officer (DMO) and Designate Clinical Officer (DCO) to support inter-agency working and quality of EHCPs</li> <li>Agreed an Outcomes Framework as part of the initial WSOA, which has been further refined as part of ongoing planning and quality assurance of the SEND system, and is being monitored through a SEND System Dashboard</li> <li>Agreed a Preparation for Adulthood Strategy to ensure Transitions from Children's to Adults services are well managed</li> <li>Agreed a partnership SEND Information Sharing Policy and Information Sharing Agreement</li> </ul>
What is still to do	Impact so far – as at September 2020
<ul style="list-style-type: none"> <li>Further development of the Professional Development Framework / Workforce development plan to incorporate multi-agency training</li> <li>A further review of DMO/DCO capacity to ensure meeting requirements of new operating model</li> </ul>	<ul style="list-style-type: none"> <li>EHC requests follow clearly structured pathways which has resulted in improving timeliness to its highest point for some years. All cases are processed within clear pre-planned work allocations which are completed to strict deadlines.</li> <li>There is an upward trend in the quality and relevance of the content for plans produced. The Quality Assurance Framework now assists the team while writing plans, which is having a significant impact. Health colleagues have introduced QA of plans prior to issue since July.</li> <li>A new improved Local Offer website has been co-produced with parents and all partners/sectors, which describes the services and systems to support CYP and families and will be subject to ongoing review and improvements.</li> <li>The planned launch of the PFA Transitions team in September 2020 is expected to contribute further to interagency working and outcomes for CYP</li> </ul>

### 3. Coordination of assessments of needs between agencies

Inspection main findings – June 2018	What we have done
<p>There has not been a robust and coordinated implementation plan to realise the desire of professionals who want to do the right things for children and young people in Birmingham. The local area cannot simply adapt what is already in place to improve provision and outcomes.</p>	<ul style="list-style-type: none"> <li>▪ Mapped out all services to understand the journey of the child and identify pinch points in provision available to support design of the new model for SEND</li> <li>▪ Developed key mechanisms for sharing of best practice between agencies, including new Local Offer website and a Professional Development Framework including SENCO Networks, SEND coaching for education staff and SEND Family Forums</li> <li>▪ Development of the SEND Dashboard to share multi-agency management information and track caseload management</li> <li>▪ We are rolling out a training plan and e-learning package to all partners to promote the needs of CYP &amp; families</li> <li>▪ NHS numbers are being entered into EHCP plans which will allow for reporting and tracking through Health systems.</li> <li>▪ Implemented new Decision Making Groups (DMGs) to coordinate applications for EHCPs and provided mechanism for applying for additional funding through SEND support plans</li> <li>▪ Agreed a communication process between Health and SENAR to ensure health advice or reports are provided, including setting up a weekly Health Advice &amp; Support to SEND group (HASSEND) to provide clinical advice for case-specific queries arising from the various SENAR DMGs</li> </ul>
What is still to do	Impact so far – September 2020
<ul style="list-style-type: none"> <li>▪ Further development of the Professional Development Framework / Workforce development plan, to incorporate multi-agency training</li> <li>▪ Consolidation of reporting on EHCPs for health systems</li> </ul>	<ul style="list-style-type: none"> <li>▪ New integrated SEND locality teams include earlier support for parents through parent link officers, SEND family forums and additional therapeutic resources attached to the localities.</li> <li>▪ The EHCP recovery team are now managing EHC requests using clearly structured pathways and sharing tasks. This has resulted in improving timeliness to its highest point for some years. All cases are processed within clear pre-planned work allocations which are completed to strict deadlines.</li> <li>▪ There is an upward trend in the quality and relevance of the content for plans produced. The multi-agency Quality Assurance Framework now assists the team while writing plans, which is having a significant impact. DMOs have implemented a process with SENAR since July to enable them to quality assure the Health elements (C &amp; G) of draft EHCPs prior to issue.</li> </ul>

## 4. Integrated Commissioning

Inspection main findings – June 2018	What we have done
<p>Integrated commissioning is significantly underdeveloped across the local area. Professionals were unable to identify or articulate a clear view, either individually or as a partnership, about their main priorities for integrated commissioning. As service development and capacity does not match demand, the needs of children and young people are not being met. This is particularly evident within the speech and language therapy (SALT) services.</p>	<ul style="list-style-type: none"> <li>▪ Agreed a roadmap for developing integrated commissioning - January 2019</li> <li>▪ Developed and signed off a Joint Commissioning Framework alongside the new SEND Strategy - September 2019</li> <li>▪ As part of the Joint Commissioning Framework and a Parent Carer Forum partnership agreement there is an agreed approach for engagement and co-production with families</li> <li>▪ Reviewed high cost placements and developing plans for an integrated team to commission services more effectively for CYP with complex needs including a brokerage function.</li> <li>▪ SEND JSNA completed and ongoing monitoring through SEND Dashboard in place.</li> <li>▪ A Section 75 Agreement has been drafted to be taken though partner's governance arrangements for sign off. This includes a system improvement team, SLCN, OT, enteral feeding and joint brokerage etc.</li> <li>▪ Recovery and restoration work from Covid-19 has been commenced.</li> </ul>
What is still to do	Impact so far – September 2020
<ul style="list-style-type: none"> <li>▪ SEND Section 75 agreement sign off and staged expansion.</li> <li>▪ Recruitment and Implementation of Integrated Commissioning team and setting up a complex care panel</li> </ul>	<ul style="list-style-type: none"> <li>▪ Measures and KPIs for Integrated Commissioning are in the process of being finalised to demonstrate the impact on outcomes for CYP and families</li> <li>▪ Joint commissioning has taken place in a number of areas / pathways.</li> <li>▪ Service user feedback for both the SLCN and OT helplines and the additional capacity in SEND localities to support specialist health services evaluates well.</li> </ul>





## 5. Co-production

Inspection main findings – June 2018	What we have done
<p>Co-production (a way of working where children and young people, families and those that provide the services work together to create a decision or a service which works for them all) is not embedded in the local area. Actively engaging with parents to help shape services and commissioning is very rare in Birmingham.</p>	<ul style="list-style-type: none"> <li>▪ The Parent Carer Forum relaunched March 2019, with a new Partnership agreement to support working together with the SEND Board and services on key priorities including co-production of the Local Offer website, preparation for adulthood</li> <li>▪ We have undertaken 4 x Parent Carer Surveys (approximately every 6 months) and used these to further inform our improvements</li> <li>▪ We have significantly improved our Local Offer website through co-design and co-production with all partners including the parent carer forum. The site will be subject to ongoing review and feedback from all partners.</li> <li>▪ The local authority has set up a new Parent Link service in response to parental feedback about need for improved lines of communication and have launched new SEND family forums for parents to access services and support earlier</li> <li>▪ A SEND Youth Forum with young people from secondary schools who are experts by experience are meeting regularly, including virtually during Covid-19</li> <li>▪ The CCG has established a 'Health SEND Parent Carer Forum' which met for the first time in August 2020 to directly link up parent/carers reps with Health leads as a vehicle for co-production</li> </ul>
What is still to do	Impact so far – September 2020
<ul style="list-style-type: none"> <li>▪ Collating feedback from recent evaluation and surveys of parents on impact of new ways of working and co-production</li> </ul>	<ul style="list-style-type: none"> <li>▪ There is an improved approach to co-production across the services through continued working with the Parent Carer Forum, who have representation on the SEND Board and relevant working groups which link with the forum's key priorities.</li> <li>▪ The Parent Carer Forum had a key role in co-production of the new Local Offer website, and development of new SEND services including parent link officers and are supporting identification of further improvements in an ongoing way.</li> <li>▪ A family survey conducted by the CCG about people's experiences of accessing and using health and care services during Covid-19 has provided valuable feedback about new ways of working such as telephone and virtual appointments and will be used to inform future service design.</li> </ul>

# 6.1 Parental engagement and satisfaction of parents

## Communications and 'tell it once'

Inspection main findings – June 2018	What we have done
<p>Communication within and between services is ineffective. Parents consistently report that the 'tell it once' approach is not established in the local area. Parents have to repeat their stories over and over again.</p>	<ul style="list-style-type: none"> <li>▪ Have established a pilot to roll out Rix Wiki licences to CYPs and families until at least Feb 2021, and this is currently included as standard in the offer for all new EHCPs.</li> <li>▪ As part of the EHCP recovery plan and quality assurance framework, we have implemented a new approach for a lead professional as part of all new EHCPs and Annual Reviews.</li> <li>▪ Health agreed a business case for funding for Digital Care Records (October 2018)</li> <li>▪ We are currently developing an implementation plan for Impulse to improve record keeping for EHCPs and SEND support plans</li> <li>▪ Developed an annual plan for engagement/co-production with Parent Carer Forum</li> </ul>
What is still to do	Impact so far – September 2020
<ul style="list-style-type: none"> <li>▪ Finalise improvements to Impulse system</li> <li>▪ Continue development of Digital Care Records</li> <li>▪ Complete evaluation of Rix Wiki pilot</li> <li>▪ Refresh the Engagement plan with Parent Carer Forum 2020/21</li> </ul>	<ul style="list-style-type: none"> <li>▪ The latest parent/carer survey results (June 2020) suggest a continued reduction in the frequency of times that families are having to tell their child's story. A higher percentage of respondents had repeated themselves 1-3 times only (59%), compared with the November 2018 (29%), June 2019 (46%) and December 2019 (53%) surveys.</li> <li>▪ Respondents rated their overall experience of telling their child's story as 3.2 out of 5 on average, and this is an improvement on the average rating in the November 2018 (2.7) and June 2019 (2.9) surveys and similar to that seen in December 2019 (3.3)</li> <li>▪ As the implementation of the link professional is being established across the service there has been a significant reduction in the number of mediations taking place. In July all 8 requests were resolved without the need for a formal mediation with parents. The approach has proved highly productive removing the need for parents to engage in a lengthy processes. The continued work of the parent link officer has further strengthened the early help support for families.</li> </ul>

## 6.2 Parental engagement and satisfaction of parents

### Parental satisfaction and meeting needs

Inspection main findings – June 2018	What we have done
<p>There is a great deal of parental dissatisfaction. During the inspection, parents raised several concerns about the needs of children and young people who have SEN and/or disabilities not being met in Birmingham.</p>	<ul style="list-style-type: none"> <li>▪ Supported the re-launch of the Parent Carer Forum from March 2019 including a partnership agreement for how the forum will work with SEND Board. The Forum agreed key priorities for 2019/20 including co-production of the local offer, early years services, preparation for adulthood</li> <li>▪ We have baselined complaints across the partnership and have a plan for improving these through the ongoing Quality Assurance Framework</li> <li>▪ Additional resources have been recruited for Locality teams including dedicated Parent Link Officers</li> <li>▪ Regular SEND Family forum meetings are being held where parents are able to access support from SEND services across the partnership, including earlier help with speech and language therapy, occupational therapy and areas of SEND that parents have identified the need for support. During covid-19, virtual support is also being made available including online webinars</li> <li>▪ Phone helplines for both parents and professionals and additional online resources have been made available for therapy services</li> </ul>
What is still to do	Impact so far – September 2020
<ul style="list-style-type: none"> <li>▪ Collate and analyse feedback from parents on new SEND Strategy, Locality arrangements and involvement in co-production</li> </ul>	<ul style="list-style-type: none"> <li>▪ The June 2020 Parent Carer Survey continues to show improvements in the overall experience which is now 3.1 out of 5 in July 2020 compared to 2.4 out of 5 in December 2018 (This is a composite indicator including overall experience of SENAR, experience of telling their child's story and how well they think different parts of the partnership have communicated with each other in relation to their child)</li> <li>▪ Parent Link Officers work alongside all agencies to seek a resolution, improving the outcomes for the child/young person. The team consists of one team coordinator, and 5 Parent Link Officers, The themes for the referrals received are primarily linked to requests for an EHCP assessment, school placements, communication breakdown and advice and guidance.</li> <li>▪ Feedback from parents following forums was positive with 7 SEND Family Forums taking place during the Spring term 2020 facilitated by the Parent Link Service, and a city wide webinar in September 2020. A total of 48 parents attended these forums, all of whom completed an evaluation form. 100% rated the events at 3 or above out of 5 on an evaluation scales (1 = low, 5 = high). A full schedule is being developed for the coming year to support parents on key themes they have requested through the evaluation of these sessions including subjects like health and wellbeing, occupational therapy, speech and language therapy and housing support.</li> <li>▪ Positive feedback has been received from Health phone advice lines, and other additional helplines from council services such as Educational Psychology which were put in place during covid-19</li> </ul>

## 7. Accessibility and currency of the Local Offer

Inspection main findings – June 2018	What we have done
<p>Birmingham has not ensured that the published local offer is a useful means of communicating with families. It is difficult to locate information and many parents and young people are unaware of its existence. Very few were involved in its development.</p>	<ul style="list-style-type: none"> <li>▪ Fully reviewed the previous Local Offer, in the context of best practice (April 2019)</li> <li>▪ Reviewed the Short Breaks Statement as part of Children's Trust content included within the Local Offer website (April 2019)</li> <li>▪ Co-produced a new Local Offer website with all partners and with the parent carer forum, which is user friendly and clearly sets out the services available for families of children with SEND in Birmingham – soft launched April 2020 with a full launch planned for end November 2020</li> <li>▪ Ensured the new Local Offer will be compliant with legislation and have developed a process for ensuring it is subject to ongoing review and co-production with all partners including the parent carer forum</li> <li>▪ Agreed key partnership support and communications for parents through covid-19 pandemic (April 2020)</li> </ul>
What is still to do	Impact so far – September 2020
<ul style="list-style-type: none"> <li>▪ Complete phase 2 of the local offer</li> <li>▪ A full public launch of the Local Offer end November 2020</li> <li>▪ Improving the offer around Personal Budgets, to be communicated via the Local Offer website</li> </ul>	<ul style="list-style-type: none"> <li>▪ Phase one of the Local Offer website is now complete and includes the following sections: having a child with SEND; educational support and provision; home to school transport and health information. There has been a soft launch of the site whilst currently seeking feedback from families and professionals.</li> <li>▪ The second phase of the development includes: the children and young people's forum; care and support; leisure; money matters; adulthood; early identification and intervention; well-being; early help for families and an on-line bookings service for schools and families. This final phase will be completed by November 2020.</li> <li>▪ The Parent Carer Forum has had a key role in feedback on the new content and supporting further improvements.</li> </ul>

## 8.1 Quality of EHC Plans

### Capacity of the designated medical officer (DMO)

Inspection main findings – June 2018	What we have done
<p>The current designated medical officer (DMO) role is under-resourced and lacks capacity. This restricts the effective discharge of the CCG's strategic responsibility for implementing the reforms. There is a lack of training and awareness across the health providers about the reforms. There is no strategic oversight of health professionals' contribution to education, health and care (EHC) plans</p>	<ul style="list-style-type: none"><li>▪ Recruited additional Designate Medical Officer and additional Designate Clinical officer capacity to provide strategic oversight and input into EHCPs.</li><li>▪ The designate team are supporting Health providers to implement systems to contribute to formal EHCP needs assessments with timely quality health advice</li><li>▪ Designate team actively promote SEND across the health system and support providers in the implementation of health-specific SEND training and quality assurance / clinical audit</li><li>▪ Agreement to increase Designate capacity with specific expertise in SEMH is in process</li><li>▪ There are agreed processes to ensure health advice and input to all new EHCPs as part of the new EHCP Quality Assurance Framework</li><li>▪ Additional review of DMO/DCO capacity completed September 2020</li></ul>
What is still to do	Impact so far – September 2020
<ul style="list-style-type: none"><li>▪ Further clinical audits to quality assure health advice and refreshed health SEND training roll out across Health partners.</li><li>▪ Complete tracking and reporting of all health SEND training</li><li>▪ Further tighten reporting of timeliness of Health advice for EHCP</li><li>▪ Further development of professional development framework and multi-agency training</li></ul>	<ul style="list-style-type: none"><li>▪ The additional DMO and DCO resources are now fully deployed in their roles and acting as connectors in Health across the SEND transformation work. They work across the range of Health providers including primary care, school nursing, community services and hospitals in physical and mental health to raise awareness of SEND statutory responsibilities and to support providers with system change to enable them to do so. They are working to connect all parts of the system under the 0 – 25 agenda, bringing focus on transition pathways and specific focus on health outcomes and provision for EHCP needs assessment.</li><li>▪ They have established processes for SENAR / Health provider communications across the system and set up SEND Forums in key Health providers. including supporting quality assurance of EHCPs, ensuring health advice is provided in a timely way.</li></ul>

## 8.2 Quality of EHCPs

### EHCP Quality Framework

Inspection main findings – June 2018	What we have done
<p>The quality of EHC plans is variable. Some are good but many of them are poor. They tend to focus on short-term educational outcomes and contain little information about health and social care needs and provision. Outcomes are not sufficiently aspirational or measurable.</p>	<ul style="list-style-type: none"> <li>▪ Agreed an initial multi agency QA Framework for EHCPs in June 2019 which included approach for ongoing monthly auditing</li> <li>▪ An EHCP recovery plan has been agreed to address the backlog of Annual Reviews and set out a plan for transforming the process going forward, alongside a partnership EHCP Quality Assurance Framework</li> <li>▪ A partnership wide SEND Dashboard has been agreed to track improvements to EHCPs</li> <li>▪ We have implemented changes to how EHCPs are requested and advice received, through the new Decision Making Groups (DMGs), and this includes a process for applying for additional funding for SEN Support plans</li> <li>▪ 'Health Advice and Support for SEND group' established to provide direct health advice for the DMGs weekly</li> <li>▪ The EHCP QA framework has been further developed to incorporate 4-tiers and multi-agency auditing and improvements, including 100% QA of new plans before they are issued, and use of a new online audit tool that provides benchmarking and analysis through quarterly dip sampling</li> <li>▪ Health Designates have worked with Health providers to establish quality assurance processes at health service level</li> <li>▪ Reports on number of those taking up the Annual Health check at the GP (for YP with Learning Disability) are being tracked</li> </ul>
What is still to do	Impact so far – September 2020
<ul style="list-style-type: none"> <li>▪ Finalise and agree processes within the new EHCP Quality Framework with system partners to ensure timeliness and quality is consistently met within a cycle of continuous improvement</li> <li>▪ Complete ongoing Annual Reviews for all CYP with EHCPs, including Year 9 reviews and agree criteria for health contributions</li> </ul>	<ul style="list-style-type: none"> <li>▪ There is an upward trend in the quality of EHCPs being reported as part of the new quality assurance framework.</li> <li>▪ Clinical Audits within Health providers have demonstrated improved quality of health advice for EHCP needs assessments.</li> <li>▪ Since March 2020, the paperwork for 10,400 outstanding Annual Reviews for 5,755 children have now been completed and are being issued. Work has taken place to implement new processes to ensure the timeliness for undertaking an EHCP review is embedded going forward.</li> <li>▪ Link professionals have been allocated as part of the assessment process for all new EHCP plans</li> <li>▪ The local authority has published a timetable for specialist placements of those transitioning in September 2021.</li> </ul>

## 8.3 Quality of EHC plans

### SENAR Service

Inspection main findings – June 2018	What we have done
<p>The Special Educational Needs Assessment and Review (SENAR) service lacks the capacity and culture to meet its intended aims. In common with other services, there are individuals who are making a difference to children and young people. However, there is a lack of strategic oversight.</p>	<ul style="list-style-type: none"> <li>Completed a comprehensive review of SENAR services within wider review of SEND Services to inform a draft business case for the implementation of new service delivery</li> <li>Undertaken a review of appeals and tribunals and agreed recommendations for improvements as part of these business cases</li> <li>Additional resources and an interim ways of working have been put in place, full implementation will follow in Autumn term.</li> </ul>
What is still to do	Impact so far – September 2020
<ul style="list-style-type: none"> <li>Agree the business case as part of union and staff consultation and implement final structures early 2021</li> <li>Updates to Impulse to support the processing of EHCPs</li> </ul>	<p>A review of SENAR has been completed and interim structures and working arrangements have been put in place to clear the backlog of EHCP and appeals and tribunals and support the new EHCP Quality Assurance Framework.</p> <p>In the most recent parent/carers survey, respondents rated their overall experience of the SENAR service as 3.1 out of 5 on average and this is an improvement on the average rating in the November 2018 (2.3), June 2019 (2.5) and December 2019 (2.9) surveys.</p>



## 9. Waiting times and access to therapies and professionals in CDCs

Inspection main findings – June 2018	What we have done
<p>Waiting times are too long. Children and young people are not seen quickly enough by a range of therapists or professionals in the child development centres (CDC).</p>	<ul style="list-style-type: none"> <li>▪ Agreed a business case for fast-tracking dysphagia assessments – April 2019</li> <li>▪ Agreed a service development plan for Speech &amp; Language Therapy (SLT) and Occupational Therapy (OT) services and new trajectory to bring waiting list down to 45 weeks (OT) and 30 weeks (SLT Phonology, Fluency and Voice referrals) by March 2020 (Note: these trajectories are now subject to a further recovery plan following Covid-19)</li> <li>▪ Agreed business case for Neurodevelopmental pathway – June 2019</li> <li>▪ Recruited additional 2 x SLT &amp; 2 x OT posts as part of the BCC integrated SEND locality teams pilot in 2020</li> <li>▪ BCC has agreed funding for a further 4 x SLT &amp; 4 x OT resources for the localities – August 2020</li> <li>▪ Improved Speech, Language and Communication Needs pathway to support needs being met earlier, eg Language Through Play groups and proposed screening and support in early years' settings</li> <li>▪ Virtual support introduced during Covid-19 period including digital and phone consultations, phone helplines, online parent workshops and other online resources</li> <li>▪ Commenced online autism assessments for 7+ and piloting virtual preschool assessments – July 2020</li> </ul>
What is still to do	Impact so far – September 2020
<ul style="list-style-type: none"> <li>▪ Following covid-19, a recovery plan and updated trajectory for SLT/OT services is being developed</li> <li>▪ Continued implementation of recovery plan for Neurodevelopmental pathway, including commencement of testing for ADHD using a new QB tool in October 2020 which will reduce need for school observations</li> <li>▪ Recruitment of additional Locality based 4 x SLT, 4x OT posts</li> </ul>	<p>In line with NHS England/Improvement guidelines, a number of non-urgent community health services (including therapies and neurodevelopmental assessments) were paused and staff redeployed to support the NHS response to Covid-19. This has led to increased waiting times for some services. Trajectories for improved therapy waiting times were being met prior to the pandemic; updated trajectories are now being developed.</p> <p>Longest waiting times are currently reporting as follows and the impact of Covid can be seen:</p> <ul style="list-style-type: none"> <li>• OT - Fell from 130 weeks in August 19 to 44 in March 20, rising to 58 in Aug 20 (target = 37 weeks)</li> <li>• SLT (Phonology, Fluency &amp; Voice) – Fell from 117 weeks in August 19 to 47 in March 20, rising to 69 in August 20 (target = 30 weeks)</li> <li>• SLT (Early Years and School Age) – Fell from 119 weeks in August 19 to 110 in March 20, rising to 160 in August 20 (target = 120 weeks)</li> <li>• Physio – Fell from 261 weeks in August 19 to 97 in March 20, continued to fall to 59 weeks in August 20</li> <li>• Longest wait for ASD assessment currently around 3 years</li> </ul>



## 10. Academic progress when compared to all pupils nationally

Inspection main findings – June 2018	What we have done
Pupils who have SEN and/or disabilities make weak academic progress, attend less often and are excluded more frequently than other pupils in Birmingham and all pupils nationally.	<ul style="list-style-type: none"> <li>▪ Undertaken a baseline review in order to understand the reasons for poor academic performance through individual school meetings</li> <li>▪ As part of the implementation of the new Locality model, individual school SEND meetings are being rolled out to review SEND provision and support and understand key indicators such as attendance, exclusions, attainment</li> <li>▪ A format for Consortia reporting has been agreed to understand trends and pressures within a particular area or cluster of schools, in order to identify local recommendations and improvements</li> <li>▪ Bsol STP agreed a proposal to gift up to 10% of apprenticeship levy to support children leaving care</li> <li>▪ We have commenced contract negotiations with specialist colleges to improve service quality</li> </ul>

What is still to do	Impact so far – September 2020							
<ul style="list-style-type: none"><li>Consortia Reporting to be rolled out, and continuous improvements</li><li>Implementation of Wellbeing Strategy</li><li>Collate reporting on uptake of apprenticeships for children leaving care</li></ul>	<ul style="list-style-type: none"><li>Indicators of Academic progress were largely the same in 2019 as they were in 2018, although there was a marked improvement in GCSE level results in the SEN Support cohort for year ending July 2019</li><li>National testing was cancelled for 2019/20 due to covid-19 and replaced with teacher assessments. Data on this is not yet available.</li></ul>							
			ENGLAND		ENGLAND	GAP	GAP	
	Ref	Sep-18	Aug-19 (2018)	(2019)	(2019)	(2018)	(2019)	
	7.1 % achieving good development with EHCP	4.10%	4.20%	5.00%	4.50%	0.90%	0.30%	-0.60%
	7.2 % achieving good development SEN Support	23.50%	23.20%	28.00%	28.90%	4.50%	5.70%	1.20%
	7.3 % achieving good development (all pupils)	67.70%	68.00%	71.50%	71.80%	3.80%	3.80%	0.00%
	7.4 % pupils reaching expected standard KS2 RWM with EHCP	6.60%	6.40%	9.00%	9.20%	2.40%	2.80%	0.40%
	7.5 % pupils reaching expected s'dard KS2 RWM SEN Support	20.50%	20.30%	24.00%	25.30%	3.50%	5.00%	1.50%
	7.6 % pupils reaching expected standard KS2 RWM (all pupils)	61.10%	62.10%	64.00%	64.90%	2.90%	2.80%	-0.10%
	7.7 % achieving 9-5 in English and maths - with an EHCP	4.10%	4.50%	5.30%	5.50%	1.20%	1.00%	-0.20%
7.8 % achieving 9-5 in English and maths - SEN Support	13.20%	16.20%	16.50%	16.80%	3.30%	0.60%	-2.70%	
7.9 % achieving 9-5 in English and maths (all pupils)	40.10%	42.50%	40.20%	43.40%	0.10%	0.90%	0.80%	

# 11. Absence and exclusions

Inspection main findings – June 2018	What we have done
<p>Parents raised concerns about children and young people who are not in education. As leaders are aware that too many pupils who have SEN and/or disabilities are not in school, one of the targets within the education delivery and improvement plan is to reduce this number. This is yet to have a significant and sustained impact.</p> <p>Attendance of pupils with who have SEN and/or disabilities is lower than for other pupils in Birmingham and below the national average. Persistent absence is higher than for other pupils in Birmingham and higher than the national average.</p> <p>Fixed-term and permanent exclusions of pupils who have SEN and/or disabilities are higher than for other pupils in Birmingham and all pupils nationally.</p>	<ul style="list-style-type: none"> <li>As part of the implementation of the new SEND model, individual school meetings are being rolled out to review provision and support available for CYP with SEND and baseline key indicators such as attendance, exclusions, attainment</li> <li>We are working to ensure all mainstream schools undertake a collaborative approach to inclusive education, reflecting the national priorities of Ofsted, DfE and enhance connectivity with special schools and resource bases</li> <li>The local authority has set up a Home Bridging Team which is working in the localities to support families and schools and prevent exclusions</li> <li>Developed a new Wellbeing Strategy with 6 new strands to improve SEMH provision with a particular focus on impact of covid-19</li> <li>Undertaken a multi-agency audit of 10 primary exclusions, report due October 2020</li> </ul>
What is still to do	Impact so far – September 2020
<ul style="list-style-type: none"> <li>Consortia Reporting to be rolled out, and continuous improvements/recommendations</li> <li>Implementation of Wellbeing Strategy</li> <li>Reporting recommendations of a multi-agency audit of ten Primary Exclusions</li> </ul>	<ul style="list-style-type: none"> <li>The absence rate for children with SEN and EHC plans remained similar in 2018/19 to that seen the previous year. Next reporting is due March 2021 <ul style="list-style-type: none"> <li>EHC 10.1% (2019), 10.2% (2018)</li> <li>SEN 6.5% (2019), 6.8% (2018)</li> <li>No SEN 4.5% (2019), 4.6% (2018)</li> </ul> </li> <li>The Birmingham absence rates are similar to that seen nationally with the exception of children with EHCPs whereby Birmingham children with EHCPs have a markedly higher absence rate (10.1%) compared to the national average (8.7%).</li> <li>Birmingham is performing well compared to the national average in terms of fixed term exclusions: the rate is 12.2% for children with an EHCP and 10.5% for children with SEN support in 2017/18, compared to 15.9% and 15.1% nationally.</li> <li>The rate of permanent exclusion amongst children with an EHCP (0.3%) and SEN (0.4%) is slightly higher than the national average (0.2% and 0.3% respectively).</li> <li>Children in receipt of home tuition was 83 in February, and currently (end of September) is 50. The Home Bridging Team have continued to work with professionals and families to help secure appropriate provision for the next academic year and September, the Home Bridging Team will be working in locality areas to support families and schools. Additional resource is being provided to assist specifically in the return to school post Covid-19. The team will be working closely with schools as it develops early intervention approaches with schools and more bespoke provision for students linked to their local community and school.</li> </ul>

## 12. Employment Opportunities

Inspection main findings – June 2018	What we have done
<p>Not enough young people who have SEN and/or disabilities are entering employment or supported employment. The proportion of adults with learning disabilities in paid employment is below the national average.</p>	<ul style="list-style-type: none"> <li>▪ Agreed a Transitions Strategy in February 2019 which was adopted across the Birmingham Children's Partnership and supports a focus on Preparation for Adulthood (PFA)</li> <li>▪ Secured additional funding for a proof of concept "PFA Integrated Transitions team" - which has now launched from September 2020.</li> <li>▪ We are tracking PFA performance indicators as part of the overall SEND Dashboard.</li> <li>▪ Have completed preparations for Year 9 reviews, and revised templates and guidance to ensure a focus on national PFA outcomes so these can be completed as part of the EHCP recovery plan</li> <li>▪ Started a sufficiency review of post 16 provisions - higher education, apprenticeships, training, employment</li> </ul>
What is still to do	Impact so far – September 2020
<ul style="list-style-type: none"> <li>▪ Evaluate achievement of PFA outcomes</li> <li>▪ Complete sufficiency reviews of Post-16 provision - Higher Education, Training, Apprenticeships, Employment and agree implementation plan</li> <li>▪ Complete Year 9 reviews and ensure ongoing capacity for implementation as part of the EHCP recovery plan and quality assurance framework</li> <li>▪ A Business support internship is planned for October in the PFA Transitions team with a young people who is living with Autism</li> </ul>	<ul style="list-style-type: none"> <li>▪ Sustained education and training (16-25s with an EHCP) - In June 2020, 44% of 16-25 year olds with an EHCP were in employment, education or training, an improvement compared to the equivalent period last year (36%).</li> <li>▪ Destinations after Key Stage 5 - 84% of young people with SEN in Birmingham are in sustained employment or training, compared with 86% nationally (2018). The gap is more marked for young people with a learning difficulty (81%) compare to nationally (85%)</li> <li>▪ The Preparation for Adulthood Integrated Transitions Team went 'live' at the beginning of September and as of the 10<sup>th</sup> of September is now supporting 11 young people</li> <li>▪ An evaluation partner is in the process of being commissioned to evidence impact on the outcomes for young people looking to secure employment</li> <li>▪ Strong links are established with the PURE Project – (Placing vulnerable Urban Residents into Employment)</li> </ul>