

# **BIRMINGHAM CITY COUNCIL**

## **EDUCATION AND CHILDREN'S SOCIAL CARE OVERVIEW AND SCRUTINY COMMITTEE**

**WEDNESDAY, 25 JANUARY 2023 AT 13:00 HOURS  
IN COMMITTEE ROOMS 3&4 (RECONVENED MEETING), COUNCIL  
HOUSE, VICTORIA SQUARE, BIRMINGHAM, B1 1BB**

### **A G E N D A**

#### **1 NOTICE OF RECORDING/WEBCAST**

The Chair to advise/meeting to note that this meeting will be webcast for live or subsequent broadcast via the Council's meeting You Tube site ([www.youtube.com/channel/UCT2kT7ZRPFCXq6\\_5dnVnYlw](http://www.youtube.com/channel/UCT2kT7ZRPFCXq6_5dnVnYlw)) and that members of the press/public may record and take photographs except where there are confidential or exempt items.

#### **2 APOLOGIES**

To receive any apologies.

#### **3 DECLARATIONS OF INTERESTS**

Members are reminded they must declare all relevant pecuniary and other registerable interests arising from any business to be discussed at this meeting.

If a disclosable pecuniary interest is declared a Member must not participate in any discussion or vote on the matter and must not remain in the room unless they have been granted a dispensation.

If other registerable interests are declared a Member may speak on the matter only if members of the public are allowed to speak at the meeting but otherwise must not take part in any discussion or vote on the matter and must not remain in the room unless they have been granted a dispensation.

If it is a 'sensitive interest', Members do not have to disclose the nature of the interest, just that they have an interest.

Information on the Local Government Association's Model Councillor Code of Conduct is set out via <http://bit.ly/3WtGQnN>. This includes, at Appendix 1, an interests flowchart which provides a simple guide to declaring interests at meetings.

**3 - 70**

**4 SPECIAL EDUCATIONAL NEEDS & DISABILITY INFORMATION,  
ADVICE AND SUPPORT SERVICE (SENDIASS)**

To consider the attached report which was initially published with the agenda papers (as an exempt item) for the meeting on the 30 November 2022 which was adjourned.

The National Children's Bureau's report has now been re-published to enable it to be considered in a public session.

# Birmingham City Council

## Education and Children's Social Care Overview and Scrutiny Committee

Date: 25 January 2023



**Subject:** Independent Review of Birmingham Special Educational Needs and Disability Information, Advice and Support Service

**Report of:** Sue Harrison, Director Children and Families

**Report author:** Sue Harrison, Director Children and Families  
[sue.m.harrison@birmingham.gov.uk](mailto:sue.m.harrison@birmingham.gov.uk)

### 1 Purpose

- 1.1 The National Children's Bureau Review of SENDIASS Report was published as an exempt item under Section 100A(4) of the Local Government Act 1972 for the Education and Children's Social Care Overview and Scrutiny Committee's meeting on 30th November 2022.
- 1.2 This was on the advice of the City Solicitor and Monitoring Officer on the grounds that:
  - 1.2.1 it involved the likely disclosure of exempt information as defined by Paragraph 3 of Part 1 of Schedule 12A of the Act; and
  - 1.2.2 the public interest in maintaining the exemption outweighed the public interest in disclosing the information.
- 1.3 As set out on the agenda, it was recommended that members of the press and public be excluded from the meeting for this agenda item. However, Members of the Committee voted against this recommendation. As a result, the meeting was adjourned for reconvening at a later date to allow the report previously marked "not for publication" to be published – giving at least 5 clear days' notice for public inspection – and to allow discussions to take place between statutory officers and the DfE Commissioner on how to proceed in public.
- 1.4 The National Children's Bureau's report has now been redacted to enable it to be considered in public session at the reconvened meeting on 25<sup>th</sup> January 2023. Redactions were undertaken to comply with data protection and confidentiality requirements.

### 2 Background

- 2.1 In June 2018 Ofsted and the Care Quality Commission (CQC) conducted a joint inspection of Birmingham to judge the effectiveness of the area in implementing the

disability and special educational needs reforms as set out in the Children and Families Act 2014.

- 2.2 As a result of the findings of that inspection and in accordance with the Children Act 2004 (Joint Area Reviews) Regulations 2015, Her Majesty's Chief Inspector (HMCI) determined that a Written Statement of Action (WSOA) was required because of 13 significant areas of weakness in practice. The WSOA was issued in September 2018.
- 2.3 In May 2021, Ofsted and the CQC revisited Birmingham to assess whether sufficient progress had been made in addressing the areas of significant weakness detailed in the WSOA.
- 2.4 That inspection found that Birmingham had not made sufficient progress in addressing 12 of the 13 areas of significant weakness.
- 2.5 In October 2021 the Secretary of State for Education issued a [statutory direction to Birmingham City Council](#) requiring the council to take steps to improve its SEND services, including co-operating with the DfE appointed SEND Commissioner, John Coughlan.
- 2.6 In February 2022, [the SEND Commissioner published his first report](#) to the Secretary of State for Education.
- 2.7 This report and the 18 recommendations within it have been accepted by the council, [as noted by Cabinet in November 2022](#).
- 2.8 Recommendation 8 in the report was; *'The SENDIASS service in Birmingham should be externally reviewed with recommendations brought back to the IB (SEND Improvement Board) in due course.'*
- 2.9 The National Children's Bureau was commissioned to undertake a review of Birmingham SENDIASS. This review commenced in March 2022 and reported to the SEND Improvement Board in July 2022.
- 2.10 The National Children's Bureau provides support to SENDIASS across the country and is nationally recognised as leaders in this area. The National Children's Bureau was consulted by government departments in the construction of the national minimum standards so is well placed to evaluate compliance with these standards.
- 2.11 A redacted version of the report is attached as Appendix 1 for consideration and discussion by members of this committee in public session.
- 2.12 The report found issues with SENDIASS that need to be addressed to ensure that it meets the national minimum standards. The council has been considering the findings of the report and the improvements that are required.
- 2.13 A report will be taken to Cabinet in February 2023 setting out options for the service moving forward.
- 2.14 This report will present the options that have been considered to ensure the improvement of SENDIASS and seek Cabinet's approval of a recommended option.



### **3 Recommendations**

- 3.1 Members note the National Children's Bureau report attached as Appendix 1 and the findings from its review.
- 3.2 Members note the next steps planned to improve SENDIASS and provide comments for consideration in the preparation of the Cabinet report.

### **4 Any Finance Implications**

- 4.1 The report that will be taken to Cabinet in February 2023 will include financial information.

### **5 Any Legal Implications**

- 5.1 Local authorities must arrange for children with SEN or disabilities for whom they are responsible, and their parents, and young people with SEN or disabilities for whom they are responsible, to be provided with information and advice about matters relating to their SEN or disabilities, including matters relating to health and social care.
- 5.2 As per the SEND Code of Practice 2015, SENDIASS is also expected to comply with the Minimum Standards for SEND Information Advice and Support and a set of Quality Standards ratified by the Department of Education, Health, and Social Care.
- 5.3 This report was due to being considered in closed session, as the implications of the report might contain information that is not conducive to be discussed in a public meeting, as would otherwise prejudice, or would be likely otherwise to prejudice, the effective conduct of public affairs.
- 5.4 This followed advice from the DfE SEND Commissioner, and accepted by the Monitoring Officer, that this was not a public report and therefore could not previously be considered at a meeting in public. The report has now been redacted to enable members to have an open and full debate and fulfil the Committee's scrutiny function in public session.
- 5.5 The report that will be taken to Cabinet in February 2023 will include the legal implications of the options being considered for the future of SENDIASS.

### **6 Any Equalities Implications**

- 6.1 The inspections of Birmingham's services for children and young people with SEND by Ofsted and the Care Quality Commission identified areas of weakness that needed to be addressed.
- 6.2 The functions carried out by the Council's SEND services, including SENDIASS, are designed to support the aims set out in section 149 of the Equality Act 2010, particularly for those with the protected characteristics of disability and age.
- 6.3 An Equality Assessment will be undertaken ahead of the February 2023 Cabinet meeting.

## **7 Appendices**

- 7.1 Appendix 1: National Children's Bureau report, redacted to enable discussion by this committee in public session.

## **8 Background papers**

- 8.1 See above links to statutory direction, SEND Commissioner's first report to the Secretary of State and Cabinet's acceptance of the Commissioner's recommendations.



# INDEPENDENT REVIEW OF BIRMINGHAM SENDIASS: NCB REPORT

Date: 31<sup>st</sup> May 2022

## Part 1.

### 1.1 Executive Summary

Birmingham City Council (BCC) commissioned the National Children's Bureau (NCB) to conduct an independent review of its current Information, Advice and Support Service (IASS) to ensure the service design and offer was fully meeting its statutory obligations as described in the Minimum Standards (MS). This review aimed to illustrate the strengths of Birmingham SENDIASS whilst identifying areas for service improvements when non-compliance is identified.

This review commenced in March and concluded in May 2022 and is based on detailed discussions with key individuals and a review of the management information available. The review concludes that Birmingham SENDIASS is 85% non-compliant when assessed against the MS. This means the service is only compliant with 3 out of the 20 standards with 55% RAG rated red. These findings are a direct contrast to the information provided by the SENDIASS to the Information Advice and Support Programme in January 2022, where the service self-evaluation return reported it was fully compliant (100%) when assessed against the MS and the management information provided to this review in April 2022 where the service self-assessment return was 80%, when assessed against the MS.

The review found some inadequacies in the SENDIASS infrastructure, including weak policies, lack of a service development plan, an "exclusive" steering group, poor data collection and associated analysis and reporting that is essential to reliably fulfil annual national benchmarking activities (although it does participate in these) and to inform service development and delivery. This could include key data, not asked for by anyone else but necessary to support for example new initiatives or exploring a suspected concern.

This review found the service presents as insular, with entrenched ways of working that do not routinely empower parents or YP and appears to be operating in a silo. Unhelpfully it is seemingly encouraging families to do the same by not promoting constructive or positive engagement with other council related services working with families with SEND. This is further exacerbated by routinely not allowing opportunities for services, particularly SENAR, to put things right in a non-confrontational way at an earlier stage. It reinforces this insular approach by in recent months creating its own YP Participation Group and a parents' group both of which have an unclear remit and, as far as I can ascertain are unknown outside of the service including by the LA, and the Parent Carer Forum (PCF) who have expressed keenness to engage and work in partnership with SENDIASS but to no avail. Understandably this approach and an apparent reluctance to change, also seems to have alienated other departments across BCC.

A fundamental requirement is, and always has been since their statutory status in 2001, for IAS services (previously known as Parent Partnership Services) to be a distinct service that operates at armslength from the LA. This is achieved in a range of ways and from a parent or young person (YP) being perceived in this way can be key to their success. This perception has to be wide reaching for it to be meaningful and true but it was reported to the review by a parent, that they and many other parents they "knew" via a FaceBook local SEND page, didn't trust the service and would never use it unless they were desperate. Birmingham SENDIASS may consider itself to be operating at armslength, but it needs to address the perception of potential service users. Being so intrinsically linked with Front Door appears to be blurring those lines considerably.



Based on the past performance of the LA, particularly prior to May 2021 when OFSTED revisited, it's possible that SENDIASS thought there was little point in trying to get the LA to comply with the legal requirements of the C&FA 2014 and so used their legal knowledge to ensure parents and CYP's rights were protected and believed that appealing to the SEN and Disability Tribunal (SENDIST) was the most effective option. Based on a rather crude calculation (£253,000,000, reported widely since December 2021 as being spent by LAs defending appeals since 1.9.2014, divided by total number of nationally registered appeals = £6206.91 per appeal.) BCC has had approximately 1626 appeals registered since 1.9.2014 to 31.12.21 totalling an astonishing £10,092,435.70 which equates to half a new school. In 2019 Birmingham SENDIASS was the "named representative" in approximately 236 appeals (out of 295 appeals registered against BCC) or in 2020 in 209 (out of 261 appeals registered against BCC). To put this in context, the national average for a SENDIASS service's involvement in some capacity with tribunal cases is 40 a year, and attending and supporting a parent or young person directly is only 4. This latter figure may also include being the named representative. Please see appendices SE1a and SE1b. Even when taking into consideration the size of BCC, this requires significant attention by all departments including SENDIASS, to ensure all earlier options available to resolve issues are explored and exhausted, to avoid the SEN budget being used in such a negative and unproductive way.

The first and immediate decision to be made is how to enable SENDIASS to become a jointly commissioned, adequately funded, distinct and standalone service. There seem to be two options; restructure the existing service and this must include a significant staff training programme, or commission from a different supplier. The action plan is intended to act as a road map to get things on track so the service can deliver all it is required to do. Bringing about such change will bring challenges and will need accompanying support and resources, along with the backing of the SEND Improvement Board et al including HR, coupled with commitment and willingness by everyone, including SENDIASS, to agree a positive way forward. Only when this happens will more families living in Birmingham affected by SEND, be able to have a fully functioning SENDIASS that is fully compliant with the minimum standards and that can be easily "found", as well as being able to access the full range of support it is required to provide and that might be needed.

## 1.2 Background

This independent review for BCC was conducted by [REDACTED] (NCB associate). Since 2014, [REDACTED] has worked extensively in writing and delivering training to support government funded programmes. [REDACTED] has also carried out similar reviews and investigations both independently and on behalf of NCB following an established format.

It focussed on looking for evidence and formalised processes being in place to support the MS. An extensive investigation was carried out initially remotely looking at management information and documents from 2018 - 2022 shared by CDC in relation to DfE funding through the Information Advice and Support programme (IASP). The review also took into account other reports provided by [REDACTED] and information available in the public domain including the SENDIASS page on BCC website. The purpose of going back to 2018 was to give some idea of progress within the service and also to give a fairer and more accurate picture due to the necessary changes and limitations on practice that arose from Covid restrictions commencing March 2020. The paper exercise was followed up with face-to-face meetings with key LA staff, the SENDIASS and the PCF. The conclusions reached in this report are based on the evidence both written and verbal provided during this review process, or where there is lack of supporting evidence to the contrary, particularly where it has been requested. It has required an exceptional level of due diligence for a variety of reasons, including some confused, contradictory and vague information of which clarity has been sought.

From what I have come to understand, including from Baron Robert Kerslake's review in 2014, Birmingham Council as a whole has been in various states of disarray for many years possibly back to 1.1.2000 when



SENDIASS in its original form as a Parent Partnership Service (PPS), was first established. It would seem that this chaotic backdrop without a fully functioning infrastructure, may have not been conducive to a more conventional PPS/SENDIASS to develop, resulting in the service as it is today. In general, it is not “performing” like any service nationally.

For many IASS nationally, some of what they do isn’t formalised and is on an ad hoc basis. Although at times it may be necessary to work in this way, it can make it difficult to report or evidence. This means it may not be obvious to those outside of the service or possible to “prove” compliance with the MS rather than the service being non-compliant. Where this is thought to be the case, a recommendation for action to address this has been included as everything SENDIASS does, should be accurately recorded and reportable to measure success, progress and compliance, especially where nationally agreed processes exist. This in turn requires the service to have the correct infrastructure in place including for example an independent database; reliable, accurate and accessible information available easily found, usually on their own website; a current development plan; effective management structure; all staff trained and familiar with application of ALL aspects of C&FA 2014 in relation to SEND. As well as helping to “prove” compliance, all of this helps to improve transparency and supports how the service is armslength from the LA.

What should be a strength is that Birmingham SENDIASS has had the same manager since the service’s inception on 1.1.2000 as a Parent Partnership Service. This means the manager will have had numerous opportunities to participate in training, alongside access to extensive resources relating to setting up and maintaining a compliant service etc. and ensure it has all the key elements in place.

SENDIASS services have a strong well established (predating the year 2000) support network consisting of quarterly or termly regional meetings and an eforum where tips and resources are frequently shared. They also have access to NCB dedicated staff who operate the IASS Network. Birmingham SENDIASS is able to access all or any of these to address service challenges they face should they need to.

Although Birmingham SENDIASS appears to be understaffed for such a large LA and is one of the more poorly funded services (see appendices IASSN 3 & SE 1b) ranging from £0.49 to £3.31 per head with an average of £1.20 and Birmingham SENDIASS being at only £0.53, this does not provide the full picture (as explained in 2.2E below).

In addition, Birmingham SENDIASS has received additional funding from the Information, Advice and Support Programme (IASP) administered by NCB on behalf of the DfE for the period 1.4.2018 to 31.3.22 totalling £115,792. No reference to this funding has been included in the annual reports covering these dates or the changes to the service that should have arisen. Given the combination of resources and training opportunities from 1.1.2000, it is not unrealistic to expect that Birmingham SENDIASS should be better placed to:

- comply with all legal requirements
- comply with majority if not all minimum standards (first introduced in SEN Code of Practice 2001)
- have a sound infrastructure including, policies, formalised practice and independent systems for effective recording, monitoring and reporting
- effective management structure to ensure armslength from LA and needs led.

Currently the service is not functioning in this way.

### 1.3 Agreed tasks

- I. Audit and provide the local authority (Sue Harrison, DCS) with assurance as to the quality of their current SENDIASS offer against the Minimum Standards.
- II. Identify for the LA good practice within current service delivery and where practice needs to improve.



- III. Review existing governance and quality assurance mechanisms and suggest improvements.
- IV. Provide a systematic action plan in light of the audit process to help the LA address non-compliance where this has been identified, or where service improvement should be focused.

#### 1.4. Schedule of meetings to support review process

28.4.22

Name	Position/role	How meeting was conducted
[REDACTED]	[REDACTED]	Face to face ([REDACTED] home office)

26.4.22

Name	Position/role	How meeting was conducted
[REDACTED]	[REDACTED]	Telephone

10.5.22

Name	Position/role	How meeting was conducted
[REDACTED]	[REDACTED]	Face to face

30.3.22 & 11.5.22

Name	Position/role	How meeting was conducted
[REDACTED]	[REDACTED]	Teams (30/3) & Face to face (11/5)

12.5.22

Name	Position/role	How meeting was conducted
[REDACTED]	[REDACTED]	Face to face

As well as the above meetings a range of documents dating from 1.9.2014 to current day, provided by the IASS and CDC were reviewed as well as an extensive appraisal of the IASS web pages included on the LA website being carried out.

## 1.5 Documents reviewed to inform this report

Document title & date	
<b>IASP docs from NCB</b>	
A	2018 Birmingham Task Order IASP.11072018
B	2018 Case Study - Assessment and provision of Need
C	2018 Case Study - Innovative Practice October 2018
D	2018 IASP self-review
E	2019 Birmingham IASP service operational plan docx
F	2019-20 Birmingham Task Order IASP TO SIGN
G	2019-21 operational plan
H	2020-21 Birmingham IASP contract variation SIGNED
I	2020-21 Birmingham IASP service operational plan
J	2021 B'ham Oct reporting
K	2021 Birmingham IASP service operational plan updated
L	2021 March report
M	2021-22 Birmingham IASP Task Order
N	2022 Bham contract check-in report form
<b>From Parent Carer Forum</b>	
O	bpcf-sendiass-partnership-agreement (1) (1)
<b>From SENDIASS</b>	
1	Appeal Rates Birmingham & Hampshire comparator Data included 2014-19
2	myth busters created 18.2.21
3	Staffing - SENDIASS Birmingham April 2022
4	1. Birmingham SENDIASS Board Remit Undated
5	4. SEND Statutory Process Training - PFA Team 16th Sept 2021
6	5. SEND Statutory Process Training - CAMHS ST 4.10.21
7	Agenda - Parents SENDIASS meeting dated 20.9.21
8	Birmingham SEND Multi-Agency Front Door dated 3.1.22
9	Birmingham SENDIASS Conference 30 Nov 2021
10	Flyer SENDIASS Professionals Meeting Nov 19.11.21
11	JD - SENDIASS Head of Service Created 3.3.19 last updated 29.9.21
12	Minimum Standards Self-assessment template with notes - SENDIASS Birmingham 23.4.22
13	Parent Partnership Group 2022
14	pg3(A) Allocation Sheet (EHC Needs Assessment)
15	pg3(B) Allocation Sheet (EHCP Progress)
16	pg3(C) Allocation Sheet (EHCP Content)
17	pg3(D) Allocation Sheet (Placement)
18	pg3(E) Allocation Sheet (School or Setting Meeting)
19	pg3(F) Allocation Sheet (Annual Review)
20	pg3(G) Allocation Sheet (Exclusion)
21	pg3(H) Allocation Sheet (Other)
22	pg4 Professionals involved
23	pg5 Family Targeted Assessment
24	pg6 Genogram
25	pg7 CYP Views & Details of Direct Work
26	pg8 Signs of Safety Form
27	pg9(i) Working with Parents & Carers
28	pg9(ii) Working with CYP
29	pg14(i) Quality Assurance Form Parent Carer
30	pg14(ii) Quality Assurance Form - Young Person
31	SEND Statutory Process Training - BCT Disabled Social Care Team 8.10.21



32	SENDIASS Board Agenda - Monday 17th January 2022
33	SENDIASS Board Minutes 17th January 2022
34	Young People's Participation Charter Undated see line 35
35	Young Peoples Participation Charter Created 2.12.21
<b>xSENDIASS - Information Pack (not dated for creation, review or update)</b>	
36	1. SENDIASS Information Pack Contents Page
37	Leaflet SENDIASS
38	SENDIASS - Annual Review Process
39	SENDIASS - Annual Review Timescale Chart
40	SENDIASS - Appeals
41	SENDIASS - Areas of SEND
42	SENDIASS - Assessment Process
43	SENDIASS - Assessment Timescale
44	SENDIASS - Confidentiality Policy
45	SENDIASS - Definition of Advocacy
46	SENDIASS - Disability Discrimination
47	SENDIASS - EHCP 'Cease to Maintain'
48	SENDIASS - Exclusions
49	SENDIASS - Home to School Transport
50	SENDIASS - Impartiality Policy
51	SENDIASS - Information for Young People
52	SENDIASS - Issuing an EHCP
53	SENDIASS - Mediation
54	SENDIASS - Naming a Placement
55	SENDIASS - Personal Budget
56	SENDIASS - SEND Support & School Funding
57	SENDIASS - Tribunal Hearings
58	SENDIASS - What are Special Needs
59	SENDIASS - What is an EHCP
60	SENDIASS - Young People with SEND
<b>SENDIASS Annual Report (6) (from SENDIASS)</b>	
61	SENDIASS Annual Report (1) 1.9.14-31.8.15
62	SENDIASS Annual Report (2) 1.9.15-31.8.16
63	SENDIASS Annual Report (3) 1.9.16-31.8.17
64	SENDIASS Annual Report (4) 1.9.17-31.8.18
65	SENDIASS Annual Report (5) 1.9.18-31.8.19
66	SENDIASS Annual Report (6) 1.9.19-31.8.20
<b>Joint Commissioning – 2021 (from SENDIASS)</b>	
67	Item 1 - Covering Note 12th January 2021
68	Item 2 - SENDIASS Joint Commissioning Paper 30th June 2020
69	Item 3 - Schedule A SLA Joint Commissioning Created 28.12.19
70	Item 4 - Schedule B Joint funding SENDIASS Created 27.6.20
71	Item 5 - Schedule C Financial Overview SENDIASS Created 26.12.19
72	Item 6 - Schedule D data processing Created 26.12.19
73	Item 7 - Schedule E Joint Funding SLA SENDIASS Created 26.12.19
74	Item 8 - Minimum Standards with DfE DH sign off
75	Item 9 - Birmingham IASP contract variation 20-21 SIGNED 31.3.20
76	Item 10 - Cat 2 Restrictions. Action Plan Created 9.6.20
77	Item 11 - SENDIASS Operational Plan Created 27.6.20
78	Item 12 - SENDIASS Leaflet
79	Item 13 - The Role of SENDIASS in the Community Family Educational Recovery Programme (2020) Created 27.6.20
80	Item 14 - Quality Assurance Form

## 1.6 Documents created as additional supporting evidence

APPENDIX REF	TITLE OF DOCUMENT
App SE 1a	SENDIST data costs re B/Ham
App SE 1b	SENDIST Data comparisons re B/Ham
App SE 2	Summary of additional funding to IASS via IASP from NCB 2018-22 (ref 1.5 A-N above)
App SE 3	Summary re casework numbers from each annual report
App SE 4	B/Ham Quality Assurance Form Parent Carer (Evaluation form)
App SE 5	Summary user satisfaction stats from each annual report
App SE 6	Anonymised emails to SENAR
App SE 7	Minimum Standards final RAG rating
App SE 8	Notes of meetings with [REDACTED]
App SE 9	Documents reviewed to inform report with comments

## 1.7 SENDIASS – Overview (meetings with [REDACTED])

30.3.22 via Zoom and in person 11.5.22 in Birmingham City Council offices)

[REDACTED] expressed strong views that the LA really do not want a SENDIAS service or want to have anything to do with them. [REDACTED] feels they want to crush it because they “trample over their green shoots”. [REDACTED] believes they are not liked because they “are too truthful” and honest.

### Topics of discussion

- Annual reports/data recording; purpose, level of detail and availability
- Parents Group and Young People (YP) Participation Groups; membership, publicity and purpose
- Outsourcing; pros and cons
- Staffing; structure and roles
- SENDIASS website; content and status
- Tribunals; SENDIASS role
- Service evaluation; content, roll out and return rate
- Steering Group; membership and role
- Young People (YP); casework and consent
- PCF; relationship

See Appendix SE 8 for further details of discussions

## Part 2. Review outcomes

### 2.1 Identified strengths in the service offer

- A. It has an Access database – this means it will be easy to build in all the required elements of recording relating to casework.
- B. All staff seem to have accessed and completed levels 1 to 3 of the IPSEA Legal Training programme.
- C. The [REDACTED] speaks 5 community languages
- D. Some families like the service they receive. National IASSN reporting in 2021 regarding feedback received, included the following quote attributed to Birmingham SENDIASS

**Q5 Overall how satisfied are you with the service we gave?**



'We need you to continue doing what you do without barriers. Funding is an issue all round. You are a testimony of excellence considering funding struggles,'

## 2.2. Identified weaknesses in the service offer

### A. Data recording is unreliable, incomplete, insufficient, and not being reported or analysed effectively

**Poor data recording.** The only data provided for this review, despite making several requests, is that which is included in the annual reports. However, this is very basic and relates mainly to gender, ethnicity, year group, postcode and breakdown of some types of cases. This is unusual and means that the service does not have the necessary evidence for the work it does, the work it is unable to do and the demand on the service/in Birmingham.

I asked [REDACTED] via email 25.4.22 for a breakdown of further information ([REDACTED] responses are in blue):

- i. How many for each of the national intervention levels (1-4) or certainly a split between helpline one-off calls and casework. **All these are LEVEL 4 as the requirement was to only report on these.\***
- ii. How many cases relate to SEN Support vs EHCP related etc. **These are all EHCPs as the requirement was to only report on these as a comparator for the SEND EHCPs in the Department.**
- iii. How many direct referrals are there from CYP. **None, the CYP area of work has only started since September 2021. This is in contradiction to Annual Report 5; 2018-19 "A particular feature of this year's work has been providing information, advice and support to children and young people directly." Their stats since then include over 60 at one time of 16+ (>Y12).**
- iv. A breakdown re the route to the service i.e. how service is initially found. Again broken down to distinguish between parents and CYP. **This has not been captured as a reporting target previously and will begin from September 2021.**
- v. The Annual Report for 2020/21. **This has not been produced as SENDIASS casework data and SEND Early Help Front Door data have not been kept separate.**

\* A follow up email was sent 25.4.22 asking who had specified this requirement – no reply was received.

The "Allocation forms" (parent details and recording forms) currently in use, possibly introduced for Front Door (see Section 2.2E for further information), mention IMPULSE and as SENDIASS uses an Access database it would seem they have 2 recording systems in use. I can only conclude SENDIASS is also now recorded only on IMPULSE, the LA system because if it was still on Access it would be available. Birmingham did participate in the IASSN annual benchmarking activity (IASSN Funding, Casework and Staffing Data Report) for 2021. I am unclear what data was submitted in relation to casework.

There appears to be no data analysis. Usually this would be a minimum of termly or quarterly to monitor changes in trends so that service delivery can be adapted accordingly, including service delivery such as developing resources or providing training for professionals or parents/YP. This should be clearly reported in an annual report (available publicly) and reflected in the service development plan. It should also inform strategic work with the LA and is usually a requirement for commissioning, including joint commissioning purposes or for making a business case for extending the service to inform and support the narrative. Services are expected to follow the nationally agreed 4 levels of intervention (Appendix IASSN 2). The 4 levels distinguish between the level of complexity of cases and the SENDIASS staff time factor involved. This is important for the purposes of national reporting and benchmarking as well as for service development. Level 1 equates to one-off enquiries at the helpline stage and could include signposting to additional resources etc and level 4 is "Detailed and continuing assistance and guidance with preparation and support during: First Tier Tribunal (SEND), including DDA complaints to Tribunal, Complaints to Ombudsman, Judicial Review, Disputes about Child Protection". The guidance included in Appendix IASSN 2 makes it clear to services what



is expected, including examples of casework for each level and when to send the evaluation form, an expectation for each of the 4 levels when the case is closed.

Statistical evidence is also helpful to demonstrate if the service doesn't have capacity to meet demand. This again would be a typical requirement to support a business case or commissioning. When asked if SENDIASS recorded service deficit (occasions when they could not provide support to families due to lack of staffing capacity), SENDIASS said (30.3.22) they didn't because such occasions never occurred as everyone gets support, including a same day service if needed. Unexpectedly the service manager still carries a caseload. When asked about other barriers that might prevent the service being able to offer support such as local geographical challenges or language, this was quickly dismissed as the [REDACTED] informed me [REDACTED] speaks 5 languages and they are perfectly located centrally with good transport links.

The "Allocation forms" being used have SENDIASS as their heading with no mention of Front Door. They have titles for different types of enquiry relating to elements of SENDIASS work such as EHC Needs Assessment, EHC Progress, Placement, Annual Review etc. with each form also stating: "Ensure you have obtained all the relevant information to complete the Family Targeted Assessment, Genogram, and Signs of Safety straight away." These additional forms are also cause for concern:

- "Family Targeted Assessment" this very much follows the medical model of disability and consequently not at all person centred as intended by the C&FA. All casework should be underpinned by the Section 19 Principles. There is no mention of aspirations or desired goals, interests etc. No reference to impact on home life or what family needs to be different and what that might look like. It does not reflect the values included in the YP charter which hold true for all CYP and their families. Not a typical or relevant approach for IASS to adopt.
- "Genogram" Most of this info is not relevant or required for IASS work and again is too intrusive. Could use person centred circles of support instead if relevant.
- "Signs of Safety" It is not standard or necessary for IASS to have such a form. It is not their role to identify signs of risk and try to intervene but to escalate appropriately whenever safeguarding might be an issue. This is another example of blurring the boundaries, compromising being armslength and also breaching the "impartiality policy" i.e. non-judgemental. Staff may not be "qualified" to make this judgement call, if they are it is not relevant to the role they are fulfilling in SENDIASS i.e. they are not employed as social workers.

NB. GDPR requires services to only have info that is relevant to the task in hand.

## **B. Poor infrastructure, weak unimplemented policies, failure to empower families or deliver casework or operate in line with typical practice of IAS services**

- i. Based on the evidence available it would appear that the service is focussing on, or prioritising cases that can be escalated to formal and publicly reportable redress namely SENDIST. Despite the review making several requests, including on 11.5.22 when it was agreed to provide full breakdown of casework by 5pm 13.5.22, there is no evidence to demonstrate what levels of casework exist apart from Level 4 intervention (Tribunals). What's more, during this review worrying examples have emerged where SENDIASS has not provided accurate information that would have meant situations raised with them could have been resolved at casework levels 1-3. This included where a simple telephone enquiry asking why Section I was left blank in the draft EHCP, resulted in being told "don't worry about that – go to Tribunal!". When the same parent spoke to other (Birmingham) parents about this, they all said they had received a similar response from SENDIASS. Furthermore, an example was provided of SENDIASS explaining to a parent "I am so sorry SENDIASS cannot help you as we do not have a Decision to Appeal – you should have received a response to the Annual Review by now." This clearly looked like a situation that "qualified" for SENDIASS to be offering information, advice and support and yet the parents, who from the content of the email appear to be really struggling and in desperate need for support, were refused any further assistance from SENDIASS.



- ii. **Not being armslength or operating within permitted and widely accepted SENDIASS boundaries** meaning it is unlikely to fulfil the armslength requirement all the time, therefore, it cannot be viewed as armslength per se. Impartiality and being armslength from the LA with regard to parents and YP usually comes down to perspective. It is important therefore, particularly for an in-house service to establish consistent and clear boundaries around the service to ensure it can maintain its distinct and unique position. This can in part be achieved by having strong impartiality and confidentiality policies, shared with parents or CYP from the outset and that are understood by everyone within SENDIASS and all stakeholders, and upheld to the letter (see “x” below). Neither of these things appear to be happening in Birmingham. [REDACTED]  
[REDACTED] It is also acting at times as if it is the LA representative by directing or telling a school what it should do, or speaking with an authority to parents/carers that SENDIASS services do not have such as informing them they can take the child off role (parents do have this right) and the LA will provide 4 hours of home tuition each day (this is for the LA to decide and would usually be dependent on the individual circumstances). It is possible this is raising unrealistic expectations and is certainly not empowering families or making them aware of all their options.
- iii. **Not respecting/recognising boundaries of others.** This includes sending emails on behalf of parents and/or cc’ing parents and numerous people within the LA, often at an inappropriate level. For example a situation that should be addressed at an operational level such as a SENAR caseworker in the first instance. SENDIASS recently contacted a senior LA officer requesting a copy of an EHCP on behalf of a school. They were refused – it is unclear why the school, if for example they had mislaid their copy, couldn’t have made the request to the LA directly themselves. SENDIASS then contacted an even more senior LA officer (DCS) with the same request, except this time it was reported as a safeguarding issue and was making the request under the guise of Front Door. It is still unclear why usual and established safeguarding protocols weren’t implemented either by the school, SENDIASS or Front Door. This could have caused avoidable delay and unnecessary confusion. Given the recent high national profile arising from professional confusion leading to potentially avoidable tragedy, this approach should be avoided at all costs. Everyone should follow the LA existing protocols and policies regarding safeguarding without adding unnecessary additional levels.
- iv. **Duplication and insular approach.** Although many SENDIASS have developed their own YP participation group and some a specific parent group, what is unusual about the Birmingham arrangements are that the already established PCF and those in the LA that I spoke to, knew nothing about their existence. Neither of the SENDIASS groups are “advertised” and it is unclear what their remit is, or visible/accessible to others who may want to join. It is also unclear if it is the YP or the parents themselves who are reaching out, or if SENDIASS staff are doing so in their name or on their behalf. This lack of transparency reinforces how the service is operating in a silo.
- v. **Representing in all Tribunal appeals instead of making case by case decisions according to individual circumstances.** It is reported in all annual reports that the LA states that SENDIASS is representing (confirmed by LA this means acting as their representative not “supporting” or “involved with”) 80% of all Birmingham Tribunals. This equates in 2019 to SENDIASS representing in approximately 236 appeals or in 2020 in 209. To put this in context with regard to the national picture, the IASSN Funding, Casework and Staffing Data Report 2021 reported, that *“Tribunal numbers continue to rise. Services are supporting an average of 40 tribunal cases a year in some form, and attending and supporting a parent or young person directly with 4”*. [REDACTED]  
[REDACTED] IASSN, clarified that “directly” in this instance means attendance at the actual hearing or representing. [REDACTED] confirmed that SENDIASS details are on the Tribunal forms in the “representative” fields and the “representative” box is ticked for them to be the contact from SENDIST. This means that SENDIST communication is NOT going to parents at all but directly to SENDIASS. Usual practice would be to get the parent to get back in touch when they receive communication and forward it to SENDIASS not the other way round, unless there are exceptional circumstances requiring a representative. The requirement is stated in MS 3.5 as “The IASS provides



information, advice and support before, during and following a SEND Tribunal appeal in a range of different ways, dependent on the needs of the parent or young person. This will include representation during the hearing if the parent or YP is unable to do so."

SENDistT guidance on this states:

#### **Who can be a representative?**

A representative is someone who will give advice on the issues in the appeal, prepare the paperwork and represent the person making an appeal to the Tribunal. They can also be an advocate. They could be a volunteer from a charity, a paid representative, a solicitor or barrister. **Most appeals to the Tribunal are made without a Representative. The Tribunal will support both parties through the process of making an appeal to ensure that it is decided fairly and justly.**

- vi. **Casework for YP either over 16 or over 18s.** This is very confusing. The way that stats are reported in all the annual reports since 1.9.2014, illustrates casework for year groups from Y12 upwards i.e. YP. For period 1.9.2014 to 31.8.2020, 250 YP feature in stats, 127 of these are 18 or over. In report 5; 2018/19 it stated **"A particular feature of this year's work has been providing information, advice and support to children and young people directly."** Which implied that prior to that, the casework relating to YP was still carried out with their parents. It seems unlikely they all could be assumed as lacking capacity. Annual report 6 2019/20 noted a significant increase in referrals relating to YP i.e. 66 compared to 48 in previous year but didn't mention anything else about this during its report nor does it at any time include any stats relating to parents referrals compared to CYP directly contacting the service. I asked SENDIASS for clarification via email 25.4.22 "How many direct referrals are there from CYP?" The reply **"None, the CYP area of work has only started since September 2021."** Nationally many services reported an increase in referrals from CYP during lockdown. This was down to a range of reasons e.g. they were at home and not in school so were around when their parents were contacting the service and they liked and were comfortable using various technology to contact the service. Unclear why the national pattern of contact with CYP wasn't replicated in Birmingham. Although SENDIASS said they always explain they will need to speak directly with the YP to get their views if their parent contacts the service and always get written consent from YP before they engage with them, an anonymised email copying the LA in, dated Aug 2021, shows SENDIASS in contact with a parent re Post 16 placement for a YP described by the parent as "quite capable". It doesn't make any reference to speaking directly to the YP or requiring consent. The vagueness regarding data recording and the mixed information provided when direct work actually started, unfortunately makes it very difficult to understand what exactly is going on.
- vii. **Not all SENDIASS staff equipped with appropriate skills and knowledge to do the job including providing IAS to empower families.** It is fundamental that SENDIAS services do not take over but empower parents and YP in every way, not just with their rights but to enable them to engage and contribute including with all aspects relating to EHCPs. The SENDIASS "allocation sheet – EHC Needs Assessment" includes the following *guidance* **"If the CYP is on roll at a school/setting, ask the parent to arrange a meeting for you and the parent to also attend to discuss the CYP's learning and for the parent/carer to discuss their concerns. (You can contact the school to ask for a meeting/more information if you feel that is more appropriate)"**. This is potentially disempowering parent from the outset. It is unknown how schools respond to such a direct request from SENDIASS. It is hoped they would ask to see written permission before sharing information however, if the request is made under the guise of a qualified or student social worker, would a school realise they are only acting in the capacity of a member of SENDIASS and their professional qualifications are irrelevant and would go along with such a request. Another example of how confusion can arise and the boundaries being blurred. The review has received worrying recollections from the LA and a parent. In a recent mediation meeting where a SENDIASS member of staff supporting a parent with a refusal to access appeared to have adopted an advocacy model of taking on the issue as if it was their own. The SENDIASS member



of staff is described as insisting on a special school (assuming this is what the parent wanted) without understanding this is not even possible without an EHCP and the meeting was about refusal to assess. A parent reported how when she first contacted SENDIASS because she wanted some assistance requesting a statutory assessment. She was very surprised by the response she received when she phoned them – she was asked what exactly she expected them to do about it, they were too busy and expecting an important phone call and hung up. Mum made a complaint and received a response from [REDACTED]. (NB SENDIASS in their annual report state they do not receive any complaints).

- viii. **Evaluations/feedback.** Although in annual reports since 2018, it states it requests feedback based on the QA form that CDC have produced (Appendix IASSN 4). It has changed Q2b completely. The national one is carried out anonymously and contact details are optional. They are sent out at the end of all enquiries when the case is closed. The Birmingham SENDIASS version (Appendix SE 4) requests contact details not offering this as optional. The forms are then added to case files. This is not in the spirit that is intended. According to feedback from a small sample from PCF recently involved with SENDIASS, none of them knew anything about a feedback form. In every annual report from 1.9.2014 to 31.8.2020 It includes similar wording “it is worthy of note, over the 4 years since the changes in legislation, the service has received no ranking below satisfactory;”. Only Q5 has a “satisfaction” rating (0=Very unsatisfactory to 4=Very Satisfied) so this cannot be assumed they are positive about all aspects included in the other questions in the evaluation form.
- ix. **Annual reports** are vague and repetitive from one year to the next, much of it cut and pasted without any changes. They do not include sufficient detail or include information relating to such as new initiatives or service development. There is also no reference to any of the service changes or projects being funded by IASP including the website development. There has not been an annual report since 31.8.2020. The reason for this is being given as because there’s no separate data for SENDIASS as it’s all mixed in with Front Door. The annual report should consist of several elements with stats being just one of them. I am unclear who the annual reports were shared with in the past, but they were not available in the public domain and they should be.
- x. **Policies** available for the review were the Confidentiality Policy and Impartiality Policy. Neither are sufficiently detailed meaning they are weak. The Confidentiality Policy is far too vague and doesn’t explain what confidentiality means and its boundaries or how it is applied operationally. The Impartiality Policy is also not robust enough as it doesn’t explain how the service delivers or maintains impartiality. What it does correctly state it doesn’t implement e.g.
  - “We will help families with decisions regarding services and options in relation to schools and other service providers in a similar, open manner
  - We will provide full information and advice distinguishing between guidance, legislation and local policy to assist families to fully explore all options and to come to their own decisions. We will avoid advising people ‘what to do’”
  - We will build good cooperative relationships with our colleagues throughout the local authority, Children’s Trust and Health to ensure that our respective roles are well understood and respected.

Based on the written information shared via its web page and provided to this review, there is little to no evidence to suggest it delivers on these points.

- C. **Poor quality, misleading and unclear information being provided.** The little information available on the SENDIASS web pages on the LA website is geared towards formal address and not early intervention or non-confrontational resolution. It also includes incorrect information biased towards the assumption the LA is wrong. It is not impartial meaning it should relate to the law and in context, clearly explaining any wider implications it may have. None of them are written in plain English and do not empower parents or YP by outlining what all their options might be or include any reference to how SENDIASS might be able to assist at all stages. None of the animations relating to EHCPs produced by CDC are included and there is no separate or accessible information for children or YP.



D. **Service is virtually invisible - no website.** The service has minimal presence online and does not use social media and was not keen on my suggestion to use it as a quick way of disseminating information. The fact that a page on the LA website, containing only brief information and considerably less than the MS require, was seen by SENDIASS as sufficient for it to be considered compliant with the MS 3.3 is worrying. The web page also doesn't include any accessible or plain English information. It also doesn't have a complaints policy included as stated in the MS. A copy of a complaints policy has not been submitted to the review amongst key documents, so it is unclear if they do have one. The refusal to consider social media such as FaceBook when nationally, when managed well, it has been found to be a very effective way of disseminating information to parents and also easy for them to share to an even wider audience.

E. **Ineffective staffing structure breaching the requirement for the service to be armslength.** Birmingham SENDIASS is no longer a "distinct" standalone service due to the overlap with the "Front Door" project it created although it provides a different service to SENDIASS. Once again the boundaries between the two being blurred or non-existent. It was explained the Front Door project came into existence at the start of lockdown in March 2020 and was funded until 31.3.22. It is unclear if it currently has any official status within the LA as it seems to be a Social Care based approach but is not in the Children's Trust with the other Social Care departments and services. See appendix SE 8.

There is such confusion and crossover between SENDIASS and Front Door roles, as it seems to be the same staff, with over 30 agency staff, operating across both. They all appear to use SENDIASS in their job titles e.g. in emails or in attendance at meetings. The staff structure originally provided to the review on 13.4.22 included only 4 posts and makes no reference to vacant post(s) or volunteers, yet SENDIASS has for many years had 12 Social Work students at a time on placement (up to 60 in a year), who are unpaid with zero costs in terms of out-of-pocket expenses, who are supported by 2 agency staff also not included in that staffing structure. On 11.5.22 SENDIASS described their structure as much greater than the original document (up to 50 members of staff) and agreed to provide a full staff structure but didn't. It is impossible to understand the current staffing arrangements, which could provide useful evidence going forward in understanding the levels of staffing needed to meet the actual demands on SENDIASS. The review has been unable to ascertain what the overall budget for all this is or where/how the core SENDIASS funding is being applied. The review was told that an enquiry might start off as SENDIASS case but then becomes Front Door or possibly the other way round. No information has been offered regarding the referral pathway for Front Door in its own right.

[REDACTED]

F. **Ineffective management structure including Steering Group (SG).** The terms of reference, agenda and minutes from January 2022 meeting provided for the review raise some concerns, such as the agenda and minutes not making any reference to being updated by or monitoring SENDIASS performance or overview of a service development plan. SG minutes for a longer period of time might have given a different perspective but they were not provided as agreed. Although PCF are not on the SG because SENDIASS doesn't want to "add to their burden..." the PCF confirmed they had actually asked SENDIASS to be on SG but had been refused. They are prepared to be on it. They also confirmed there are no parents, YP or CVS on it. Given the profile of the current SG, minutes from 17.1.22, which was well attended, 13 attendees (excluding SENDIASS staff) included 8 "Independent Members" (described to the review as "those with an interest in SEND which could include parents" – but none of them are), with



apologies from a further 13 that included 3 more “Independent Members” and 2 city councillors, it could be quite an intimidating and overwhelming atmosphere for parents and YP to feel they have any voice never mind an equal voice. The current profile of the SG, although may look impressive on paper, means it does not fulfil the requirements of MS 1.7.

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

#### **G. Non-compliance with majority of Minimum Standards**

The self-assessment completed by Birmingham SENDIASS for national reporting in January 2022 rated the service as fully (100%) compliant with the MS and on 25.4.22 for this review at 80%. The reason for the difference in the 3 months was attributed to the external review stalling the joint commissioning process.

Based on the evidence provided for this review it is considered to be non-compliant with 85% of the MS. This means it is only compliant with 3 out of the 20 standards and 55% are RAG rated red.

Examples of non-compliance that are not separately covered in A to F above are:

- i. No Service Development Plan
- ii. Not jointly commissioned – the one that the SENDIASS manager cites as being responsible for 3 of her 4 identified areas of non-compliance and was being championed because of the extra funding it is expected to bring
- iii. No strategic work either within service or with stakeholders

### **2.3. Proposed aims to address weaknesses**

Given the overall non-compliance with the minimum standards, there is a need for drastic action to be taken here.

1. SENDIASS to become a distinct and standalone service again with its own staff who are not employed in any other LA department or service. Consideration needs to be given whether this can be achieved by keeping the service in-house with a major restructure or whether it should be commissioned to a different supplier. If the latter, given the size of Birmingham Council and the low starting point of where the service currently is, there will be a need to consider restricting the tendering applications in terms of efficiency and reliability, to only coming from larger organisations with established systems in place and experience at running successful SENDIAS services, compliant with at least 85% of minimum standards, in larger size authorities.

The following points need to be factored in with either option in point 2.3:1 above.

2. Service to be restructured to include employing sufficient permanent staff and dedicated admin support, with JDs and grades to match the levels of responsibility to reduce reliance on student social workers (they can still be deployed within the service, if it appropriate to their placement requirements but e.g. in level 2 cases only). All staff, existing and new, will be required to participate in a prescribed “back to basics” training programme.
3. Effective management arrangements for staff, finances etc and a properly functioning steering group in accordance with MS.



4. For the service to be jointly commissioned in line with MS 1.1. For a Service Level Agreement (SLA) to be produced, pinned tightly against MS, including management arrangements, quality assurance, monitoring and reporting requirements etc.
5. To ensure it has a sound infrastructure to include robust policies, formalised processes and sufficiently detailed data recording in place.
6. For the Birmingham SENDIAS Service to adopt a transparent, streamlined, methodical, evidence based and systematic approach across all aspects of their service underpinned by robust quality assurance and reliable data.
7. To be compliant with all of the MS e.g. website, development plan, armslength, impartial etc.
8. To improve and increase visibility and transparency of the Birmingham SENDIAS Service for all families entitled to receive a service and not just those with a right of appeal.
9. For the Birmingham SENDIAS Service to be proactively and constructively engaged strategically, informed by reliable evidence and data, to start to promote positive relations between the IASS and key LA partners/depts and for a culture of trust to start to grow. This should ultimately lead to achieving better outcomes for families by helping others “get it right” and reduce the need for IASS to be involved in a negative and reactive way.

## 2.4. Required action to deliver on the aims

Uncouple SENDIASS from Front Door with immediate effect i.e. each has its own staff without any crossover and distinct database.

Explore both options in point 2.3:1 above with agreement established for joint commissioning and the level of core funding required for the service to become and maintain full compliance, and meet the needs of the community it is required to serve effectively and efficiently. Whichever option is decided upon the following and all the actions outlined in the table 2.2A to 2.2G below still apply.

Ensure the service has a sound infrastructure, adopts typical approaches employed nationally and is compliant with the Minimum Standards

The time factor and the range of skills, knowledge and experience to effectively deliver the aims outlined in 2.3 above and the actions outlined in the table 2.2A to 2.2G below, are not to be underestimated and it is expected that a range of additional resources, including external support will be required to achieve it all.

This action plan below is expected to act as a road map to establish a fully functioning and compliant strong SENDIASS capable of meeting local needs across all levels of SEND and with the correct systems and processes in place to keep it so. This plan needs to be considered in the spirit it is intended and what mustn't happen is scrutinisation to seek out gaps to be exploited as an opportunity to derail any attempt to improve outcomes for SEND families living in Birmingham.

A relaunch of the service should be considered once all the basics are in place and new practice is established, to make it clear to all stakeholders it's an “out with the old and in with the new” approach.

## 2.5. List of appendices to support delivery of the aims

APPENDIX REF	TITLE OF DOCUMENT	REPORT REF
App IASSN 1	IASS Minimum Standards	
App IASSN 2	Intervention levels for IASS August 16	2.2.A3
App IASSN 3	Funding, Casework and Staffing Data Report 2021	
App IASSN 4	IASS Service User Evaluation EXTENDED Oct 15	2.2.B5
App RK 5	Sample Initial Enquiry doc to illustrate key fields	2.2.A1; 2.2.A2
App RK 6	Sample STATS CODING examples re nature of enquiry	2.2.A1; 2.2.A2
App RK 7	Monitoring report template	2.2.A5; 2.2.B10
App RK 8	Confidentiality policy suggested wording	2.2.B1
App RK 9	Impartiality Policy suggested wording	2.2.B1
App RK 10	EMPOWERMENT MODEL and evaluation 2022	2.2.B2; 2.2.B8
App RK 11	Evaluation by professionals	2.2.B5
App RK 12	Complaints procedures and IASS	2.2.B9
App RK 13	Volunteer JD or description	2.2 E6
App RK 14	Volunteers advert	2.2 E6
App RK 15	Steering Group TOR	2.2 F2
App RK 16	SLA draft against MS - 2 appendices incl TOR and AR template	2.2 G1
App RK 17	IASS Dev Plan re MS blank template	2.2 G2
App RK 18	Section 19 principles	2.2 B4



## Proposed Action Plan

2.2 A	To establish reliable and sufficiently detailed data recording so it can be analysed effectively to inform strategic planning		
Action ref.	Suggested actions to take	By who	completed by
1	To update and maintain SENDIASS Access database to accommodate wider level of detail to support all aspects of service development and delivery and to fully support national benchmarking. (Sample Appendices RK 5 and RK 6 to illustrate level and type of detail to be considered). The database is to be exclusively used for recording SENDIASS work only. To clearly distinguish between direct contact with YP vs parents and record appropriate permissions received. Referral pathways are easily reported on		
2	To develop new referral forms to record appropriate personal details and key information relating to the casework issues to be recorded in line with GDPR requirements i.e. no "one size fits all" recording extraneous information not pertinent to the individual circumstances. (Sample Appendices RK 5 and RK 6 to illustrate level and type of detail to be considered).		
3	Service to adopt, apply and accurately record the nationally agreed 4 levels of intervention (Appendix IASSN 2).		
4	To ensure they ask and then record and date if parents give permission to speak to others stating exactly who e.g. school staff, EP, SEN case worker etc. and also to note anyone they refuse to give permission for (this may form part of a discussion). This needs to be routinely checked and updated. It is not to be assumed as an open-ended agreement.		
5	Data should be routinely "pulled off", ideally monthly but a maximum of termly, for analysis. All key data should be presented for a range of audiences including e.g. commissioners, steering group, etc and be included in regular public reports e.g. termly or annual reports (sample template for reports attached Appendix RK 7) made available e.g. on website. See 2.2 B9 below		
6	Database is exclusively accessed by SENDIASS employees and volunteers only. Ensure all staff within SENDIASS understand the recording requirements and establish system for database to be routinely and efficiently updated i.e. without unnecessary delay preferably by dedicated member of staff i.e. administrator post to reduce or avoid mishaps.		



2.2 B	All operational processes and procedures are formalised and policies are sufficiently detailed to be clear and watertight		
Action ref.	Suggested actions to take	By who	completed by
1	To update confidentiality and impartiality policies (Sample policies attached Appendices RK 8 & RK 9) to ensure they are watertight and improve transparency. To add dates re: created, amended and next review and make them widely available. Make sure all SENDIASS staff including temporary or volunteers, are fully briefed and understand how they are applied operationally. Make sure all stakeholders have a clear understanding of them.		
2	To adopt an empowerment model of service delivery supported by improved information being available. (See Appendix RK 10) See 2.2 B7 below Develop plain English step-by-step truly impartial resources to support parents/YP in understanding of what their rights are outlining all their options to implement them, promoting an engagement model and not a confrontational approach from the outset. Make available on website and everywhere else that is relevant. Can also be mailed out. (See 2.2 D3 below) If appeal made to tribunal ensure it takes a "supporting" role and can explain any exceptional circumstances that requires it to "represent" i.e. representation will be the exception not the norm. Routinely provide training sessions for parents/YP on common themes such as SEN Support and reviews, Draft EHCPs, Annual Reviews, including how to get the most out of meetings. (NB encourage parents to identify who their natural supporter is i.e. within their family, friendship circle or community and invite them to training sessions with them.) offer via face to face or virtual and at different times to improve reach.		
3	For all staff to clearly understand and stick to the boundaries of their role and the SENDIASS remit. This includes when supporting parents in escalating a concern, it is done with respect, at the appropriate level, promotes and encourages partnership working. Only suitably trained and experienced staff should be dealing with level 4 interventions. Lesser inexperienced staff could joint work and shadow at meetings (with all party agreement) e.g. mediation to continue their professional development.		
4	Staff handbook to include step-by-step processes Accelerating completion of IPSEA legal training (levels 1-3) should be considered alongside the need to consolidate learning and application before taking next level. All casework should be underpinned by Section 19 Principles (See Appendix RK 18).		
5	The nationally agreed evaluations to be sent out at the end of each case (according to the guidance in Appendix IASSN 2) preferably the extended version (Appendix IASSN 4) The short version is the 6 questions in the yellow boxes only. These should be sent out in the spirit that is intended, that is anonymously and kept separately i.e. not attached to case file. These should be fully recorded, analysed e.g. service practice might need to adjusted, and included in the Annual Report in full i.e. all questions. Numbers sent out and percentage return should also be included. Evaluation forms should also be adopted for capturing professional feedback e.g. those attending a meeting with SENDIASS and parents. (Appendix RK 11 sample)		



6	To consistently follow and apply at all times the impartiality policy. This includes being clear with all stakeholders that the service only accepts direct referrals from parents or CYP and only in exceptional circumstances will it deviate away from this principle. The service will not store or have access to reports without the consent of the parent/YP.		
7	Service development plan to address all areas of non-compliance. Consider involving permanent members of staff as each taking an area of responsibility e.g. website, resources, training, CYP, etc. to foster a collective ownership and pride in the service.		
8	Introduce a formalised triage system (when to ensure cases are consistently prioritised according to set criteria. Service deficit recording to be introduced and reported See 2.2 B 2 above. Appendix RK 10 NB this can only be piloted when range of step by step resources are available		
9	To have its own complaints procedure (Appendix RK 12 sample)		
10	To produce an annual report based on termly/quarterly reports. (Appendix RK7 suggested template) These should be available publicly e.g. website, LO, mailshot etc. It will include as a minimum: <ul style="list-style-type: none"> <li>I. Self-assessment e.g. RAG rating of Minimum Standards with examples of evidence if green and explanations or actions if amber or red</li> <li>II. Full stats broken down re casework, referral pathways etc and analysis including comparison to previous reporting period(s)</li> <li>III. Reporting on evaluations/feedback received and any changes this has brought about to service practice</li> <li>IV. Relevant national and local issues or changes impacting on families in relation to their reason for contacting SENDIASS</li> <li>V. Pressures on service e.g. increase in referrals, staff sickness, office relocation, funding e.g. cut, new source, etc</li> <li>VI. Overview of service activity including breakdown of training sessions provided, themes, audience (parents, YP professionals – stating who e.g. SENCo, SEN governors, YOT.</li> <li>VII. Updates to policies or website</li> <li>VIII. New initiatives e.g. a volunteer programme, monthly drop-ins, weekly evening help-line</li> <li>IX. Training attended by staff</li> <li>X. Steering Group – how many times it met, changes or vacancies</li> </ul>		

2.2 C	Establish stringent quality assurance processes across all aspects of service, with an external element (initially at least)		
Action ref.	Suggested actions to take	By who	completed by
1	Agree key principles of quality assurance e.g. accuracy, plain English, accessibility, relevant to the intended audience (especially those new to the “system”), truthful and in context. It should also include references/links to original source e.g. SEN Code of		



	Practice, C&FA 2014, LA policy so they can be cross referenced by the reader if they wish to ensure transparency. They should also reflect PCP principles as the C&FA 2014 was built on these too.		
2	Establish quality assurance reviewing group (suitable for remote working). Members need to be selected for appropriateness for different aspects according to nature of materials. Ideally at least one member will not have any professional connection with SEN or education etc. for some of not all parent/YP targeted resources because if it makes sense to them it will likely make sense to others. For example training materials for professionals may need different input for sessions required for parents or CYP even if same topic e.g. Annual Reviews so the QA reviewing membership will need to be adjusted accordingly.		
3	All resources for parents and CYP will enable empowerment by clearly reflecting the law and associated rights and responsibilities, local (lawful) practice in context i.e. you have a right to appeal to tribunal but also clearly outline all the options to be taken to promote engagement and encourage a culture of trust between parents/CYP and the professionals they will be required to engage with, before it gets to the point of making an appeal. Resources will be step by step, to enable those unfamiliar with SEN terminology and processes, to be able to understand, be fully informed and follow them with minimal support but will also highlighting how SENDIASS might be able to assist at each step.		
4	Back to basics training programme, including person centred planning, to be created for ALL SENDIASS staff. This programme must be developed externally of any existing, or past staff or associates of Birmingham SENDIASS and could be commissioned externally.		

<b>2.2 D</b>	<b>To improve visibility of service including standalone website to include resources to support empowerment</b>		
<b>Action ref.</b>	<b>Suggested actions to take</b>	<b>By who</b>	<b>completed by</b>
1	In the interim and asap, upload all CDC animations to SENDIASS page on LA website and/or LO. Add links to external sources of support e.g. IPSEA, ACE Education Advice and Training, SOSSEN, Coram Children's Legal Centre		
2	Carry out an immediate review of all wording on SENDIASS information currently available with relevant others i.e. those external to SENDIASS e.g. PCF, NCB etc. Covert to plain English, make all required corrections and update asap.		
3	Develop a range of new step-by-step guides for parents for a range of common themes e.g. getting the most out of a meeting, requesting a statutory assessment, annual reviews etc. These should be added to SENDIASS page on LA website as soon as they become available until the new website is ready. See 2.2 B2 above		
4	To develop standalone website (see MS 3.3) with ideally a dedicated section for CYP.		
5	Clear and distinct identifiable logo on all resources (MS 3.2), training e.g. Powerpoint slides. Materials and resources should also acknowledge original source where data is included from other sources.		
6	To implement social media e.g. FB especially to promote events or changes and is easy for parents to share and disseminate information.		



2.2 E	Effective staffing structure including an admin post, all appropriately trained		
Action ref.	Suggested actions to take	By who	completed by
1	Review staffing structure, hierarchy etc and introduce dedicated admin support post (with knowledge of Access or database) with a view to becoming main first point of contact i.e. operating helpline (included in JD and graded to reflect these anticipated additional responsibilities). Part of restructure should consider all roles within service and have relevant JDs and graded accordingly. This should be transparent so anyone outside of SENDIASS knows who they work for and their role		
2	Clear staffing structure included on website with photos e.g. "meet the team" Job titles for all SENDIASS staff should say the service and title in the first line to avoid confusion with other services e.g. SENDIASS Manager, SENDIASS support worker, SENDIASS caseworker depending on what titles are decided upon. SENDIASS Manager and staff do not have additional LA roles or responsibilities outside of SENDIASS to avoid conflict with confidentiality etc. All SENDIASS staff to conduct themselves according to their role and JD in SENDIASS and not to their previous, or future in case of students on placement, jobs i.e. they are not employed as social workers or teachers.		
3	To ensure all staff act professionally at all times including in all forms of communications and their engagement with others e.g. by understanding and respecting the boundaries of other services or individual professionals.		
4	Compulsory "back to basics" training to be developed for ALL staff, existing and new to reflect all new ways of working, including the role of carrying out casework, Person Centred Planning/Approaches and how this applies to all EHCP processes. Solution Focus training might also be useful.		
5	All staff to be provided with their own copy of the SEN Code of Practice and if possible extra copies to be available for volunteers or students to be able to have access to and how to access it electronically.		
6	Give careful consideration to deployment of student s/w and/or volunteers e.g. to be trained to support parents and CYP in writing their "report" for statutory assessment, to ensure all CYP receiving a casework service from SENDIASS have a One Page Profile, carry out level 2 casework only. Appendix RK 13 & RK 14		
7	Quarterly staff appraisals (careful consideration to be given regarding who should conduct these, initially at least). Objectives should reflect the changes of working practice within SENDIASS and be linked to service Development Plan.		



<b>2.2 F</b>	<b>Have an effective management structure in place</b>		
<b>Action ref.</b>	<b>Suggested actions to take</b>	<b>By who</b>	<b>completed by</b>
<b>1</b>	Line management for Service Manager to be clear and at an appropriate level within directorate		
<b>2</b>	Current steering group to be disbanded and start afresh. The balance of new membership must be given careful consideration to enable parents and young people to be effectively involved without being overwhelmed. Membership (MS 1.7) to include e.g. PCF, parents, young people, max 2 head or deputy head teachers (primary and secondary), SENCo, one special school, EP, SEN dept, Health, Social Care, 1 elected member (if necessary – not usual for them to be included) etc. Service manager's line manager should not be part of SG to distinguish be line management of employee from managing service direction to help fulfil armslength requirement. Appendix RK 15 sample Terms of Reference Its role will be to oversee service direction etc.– TOR, membership, minutes, routine agenda items e.g. going through service report including data, review development plan. SG meetings need to ordinarily be maximum of quarterly or minimum of termly.		

<b>2.2 G</b>	<b>Compliance with remaining Minimum Standards not addressed in 2.2A to 2.2F above</b>		
<b>Action ref.</b>	<b>Suggested actions to take</b>	<b>By who</b>	<b>completed by</b>
<b>1</b>	Joint Commissioning in accordance with MS 1.1 against a tight SLA pegged against the MS. Appendix RK 16 sample document. including reviewing, monitoring and reporting arrangements.		
<b>2</b>	Development plan (MS 1.8) to address all areas of minimum standards to either address non-compliance or ensure continued compliance. Improvement targets should be informed by data and there should be a "thread" to link why everything is happening. Appendix RK 17 sample document.		
<b>3</b>	Constructive strategic involvement (MS 2.3) once the majority of the above (2.2 A – 2.2F) are underway or achieved based on evidence and data.		
<b>4</b>	Establish partnership working and agreement with PCF (MS 2.3)		
<b>5</b>	Develop a training programme (MS 3.6) to include stakeholders, parents and CYP once the majority of the above (2.2 A – 2.2F) are underway or achieved based on evidence and data.		

2.2	Actions required by LA from issues arising during this review outside of SENDIASS		
Action ref.	Suggested actions to take	By who	completed by
1	Front Door – uncouple from SENDIASS with immediate effect and decide its purpose and where it “sits” i.e. in the LA or in Children’s Trust.		
2	Rename Parent Link e.g. SENAR Gateway and reconsider description as it is misleading as sounds like SENDIASS. Ensure when parents contact “Parent Link” they know who exactly they are speaking to and what their role is.		
3	Improve communication options in SENAR letters – add contact name and details e.g. email and phone number so parents can directly and easily contact to try and resolve issues.		
4	Improve content of EHCP letters – explain in letters that are sent with draft EHCP that Section “I” must be left blank so parents can request the school they want named, reassure them they can stay at their existing placement (it is known to worry parents when it is blank that their current placement might be under threat) be honest and explain current situation e.g. pressure on school places particularly special school and reassure LA is willing to work with parents to come up with an acceptable solution e.g. an interim arrangement if appropriate.		
5	Update parents/PCF/SENDIASS – share good news as things are being introduced or changing e.g. all SENAR staff training, recruitment etc.		

**SENDIST data from 13/14 to 20/21**

“£253 million wasted by LAs defending SENDIST Appeals” widely reported in December 2021 by Special Needs Jungle (SNJ) et al.

£253,000,000 = £6206.91 approx  
40761

Official SENDIST appeals registered				Cost based on £6206.91 per appeal for B/ham
Date (academic year 1/9 to 31/8)	Official SENDIST appeals registered National	Per Calendar year	Birmingham	
14/15	3147	2015	144	£893,795.04
15/16	3712	2016	170	£1,055,174.70
16/17	4725	2017	237	£1,471,037.67
17/18	5679	2018	265	£1,644,831.15
18/19	7002	2019	295	£1,831,038.45
19/20	7917	2020	261	£1,620,003.51
20/21	8579	1.1.21-31.8.21	208	£1,291,037.28
<b>totals</b>	<b>40761</b>		<b>1580</b>	<b>£9,806,917.80</b>

\*Appeals registered taken from monthly data from 1.1.21 to 31.12.21

Potentially this figure is over £10,000,000 as there is no data including for Birmingham for 1.9.2014 to 31.12.14. Birmingham had 138 appeals in calendar year 2014 – proportionally speaking this could equate to another 46 appeals =£285,517.86 bringing a grand total to **£10,092,435.70**

**Annual Report 2014/15 stated the following**

The new SEND Code of Practice introduces some changes in relation to disagreement resolution and appeals.

There is a requirement for SENDIASS to support “*children, young people and parents in managing mediation, appeals to the First-tier Tribunal (Special Educational Needs and Disability), exclusions and complaints on matters related to SEN and disability*” (CoP 2.19).

SENDIASS has a long tradition in supporting parents and carers through the appeal process with an emphasis on resolving appeals without the need for SENDIST Hearings

LAs and CCGs have a responsibility to establish an independent Disagreement Resolution Service (DRS) (CoP 11.6); to date there has been no information made available about this function.

In addition, for all SENDIST appeals (except those only relating to the placement named in an EHCP) there is a requirement to seek advice from independent Mediations Services. **Given the success of SENDIASS in resolving appeals the need for the independent DRS and any external mediation service in Birmingham is questionable.\***

The number of appeals that SENDIASS has been involved with in the year covered by this Annual Report is 110.

\* The law requires it regardless of SENDIASS and LA performance!

**Annual Report 2015/16 stated the following**

SENDIST register appeals on a **January to December basis\***. In 2016 SENDIASS have been involved with **137 appeals\*\***.

\* SENDIST actually report appeals quarterly and then annually but for the academic year not calendar year

\*\*this equates to SENDIASS being involved with 95% of all appeals

**Annual Report 2016/17 stated the following**



SENDIST register appeals on a January to December basis. In 2016 SENDIASS has been involved with 171 appeals\* – a significant increase of 25% compared with the 137 received last year. SENAR estimate that SENDIASS is the named representative in around 80% of all registered appeals. It is worthy of note that co-working results in a majority of these appeals being resolved in advance of the Appeal Hearing.

\* 171 is one more than all those registered according to the document NH provided “*Appeal Rates Birmingham & Hampshire comparator*” which she presented as calendar years. Perhaps they are in fact academic years and this would explain the discrepancy here.

#### **Annual Report 2017/18 stated the following**

SENDIST register appeals on a January to December basis. From January to September 2018\* SENDIASS has been involved with 189 appeals; this shows an increase compared to the 2017 period (171). SENAR estimate that SENDIASS is the name representative in around 80% of all registered appeals. It is worthy of note that co-working results in a majority of these appeals being resolved in advance of the Appeal Hearing.

\* This isn't a full year, only 9 months!

#### **Annual Report 2018/19 stated the following**

For this year we have identified the appeals (243) that were lodged and resolved within the year September 2018 to August 2019. Care should be taken when comparing this year's data with the previous year, though proportions would be comparable.

SENAR estimate that SENDIASS is the name representative in around 80% of all registered appeals. It is worthy of note that co-working results in a majority of these appeals being resolved in advance of the Appeal Hearing.

#### **Annual Report 2019/20 stated the following**

SENDIST register appeals on a January to December basis. From January to September 2019\* SENDIASS was involved with 161(189) appeals.

SENAR estimate that SENDIASS is the named representative in around 80% of all registered appeals. It is worthy of note that co-working results in a majority of these appeals being resolved in advance of the Appeal Hearing.

\* 9 month period again

Local Authority	2014			2015			2016			2017			2018			2019			SENDIASS funding and staffing taken from IASSN "Funding, Casework and Staffing Data Report 2021"	Population 2021	total funding 2021	FTE staff 2021	volunteers 2021	£ per head 2021
	Appeals registered <sup>5</sup>	Total Appealable Decisions <sup>1</sup>	SEND Tribunal Appeal Rate <sup>2</sup>	Appeals registered <sup>4</sup>	Total Appealable Decisions <sup>1</sup>	SEND Tribunal Appeal Rate <sup>2</sup>	Appeals registered <sup>4</sup>	Total Appealable Decisions <sup>1</sup>	SEND Tribunal Appeal Rate <sup>2</sup>	Appeals registered <sup>4</sup>	Total Appealable Decisions <sup>1</sup>	SEND Tribunal Appeal Rate <sup>2</sup>	Appeals registered <sup>4</sup>	Total Appealable Decisions <sup>1</sup>	SEND Tribunal Appeal Rate <sup>2</sup>	Appeals registered <sup>4</sup>	Total Appealable Decisions <sup>1</sup>	SEND Tribunal Appeal Rate <sup>2</sup>						
Birmingham	138	7,635	1.8%	144	7,771	1.9%	170	8,093	2.1%	237	9,470	2.5%	265	10,214	2.6%	295	9,793	3.0%	Birmingham	450047	£240,000	5	0	£0.53
The rows below (in yellow) represent 6 LAs with largest polulations																								
Lancashire	90	5,088	1.8%	67	5,350	1.3%	43	6,056	0.7%	73	6,837	1.1%	95	7,486	1.3%	138	7,539	1.8%	Lancashire	369944	£303,281	7	0	£0.83
Essex	155	7,796	2.0%	85	7,737	1.1%	108	8,449	1.3%	178	9,079	2.0%	211	9,797	2.2%	315	10,356	3.0%	Essex	436955	£344,356	6.7	0	£0.79
Hertfordshire	87	3,880	2.2%	98	4,647	2.1%	91	5,364	1.7%	126	6,079	2.1%	159	6,910	2.3%	160	7,654	2.1%	Hertfordshire	371328	£412,509	14.51	0	£1.11
Hampshire	166	5,242	3.2%	113	5,917	1.9%	188	6,991	2.7%	188	7,879	2.4%	224	8,749	2.6%	163	9,309	1.8%	Hampshire	395904	£247,196	7	5	£0.62
Kent	325	6,924	4.7%	160	7,339	2.2%	166	8,685	1.9%	242	10,294	2.4%	369	13,131	2.8%	513	14,599	3.5%	Kent	481475	?	?	?	
Surrey	196	5,855	3.3%	142	5,985	2.4%	188	7,623	2.5%	220	8,210	2.7%	213	9,293	2.3%	293	10,429	2.8%	Surrey	364541	£230,000	7	0	£0.63
England Tota	4,108	251,096	1.6%	3,126	269,565	1.2%	3,863	305,983	1.3%	4,988	338,866	1.5%	6,023	376,254	1.6%	7,385	413,131	1.8%						

Statistical neighbour rating	Local Authority	2014			2015			2016			2017			2018			2019			SENDIASS funding and staffing taken from IASSN "Funding, Casework and Staffing Data Report 2021"	Population 2021	total funding 2021	FTE staff 2021	volunteers 2021	£ per head 2021	
		Appeals registered <sup>5</sup>	Total Appealable Decisions <sup>1</sup>	SEND Tribunal Appeal Rate <sup>2</sup>	Appeals registered <sup>4</sup>	Total Appealable Decisions <sup>1</sup>	SEND Tribunal Appeal Rate <sup>2</sup>	Appeals registered <sup>4</sup>	Total Appealable Decisions <sup>1</sup>	SEND Tribunal Appeal Rate <sup>2</sup>	Appeals registered <sup>4</sup>	Total Appealable Decisions <sup>1</sup>	SEND Tribunal Appeal Rate <sup>2</sup>	Appeals registered <sup>4</sup>	Total Appealable Decisions <sup>1</sup>	SEND Tribunal Appeal Rate <sup>2</sup>	Appeals registered <sup>4</sup>	Total Appealable Decisions <sup>1</sup>	SEND Tribunal Appeal Rate <sup>2</sup>							
	Birmingham	138	7,635	1.8%	144	7,771	1.9%	170	8,093	2.1%	237	9,470	2.5%	265	10,214	2.6%	295	9,793	3.0%		Birmingham	450047	£240,000	5	0	£0.53
Very close	Luton	4	1,046	0.4%	7	1,284	0.5%	9	1,374	0.7%	11	1,485	0.7%	14	1,536	0.9%	9	1,764	0.5%	Very close	Luton	78711	?	?	?	?
Close	Sandwell	31	1,438	2.2%	12	1,485	0.8%	15	1,698	0.9%	8	1,990	0.4%	12	2,190	0.5%	20	2,308	0.9%	Close	Sandwell	112830	£125,000	4	0	£1.11
Close	Nottingham	18	671	2.7%	10	814	1.2%	18	941	1.9%	40	1,072	3.7%	20	1,122	1.8%	19	1,205	1.6%	Close	Nottingham	141372	?	?	?	?
Close	Wolverhampton	5	1,358	0.4%	10	1,348	0.7%	3	1,405	0.2%	7	1,575	0.4%	6	1,789	0.3%	4	1,985	0.2%	Close	Wolverhampton	86806	?	?	?	?
Close	Enfield	13	1,467	0.9%	8	1,494	0.5%	8	2,097	0.4%	5	2,313	0.2%	9	2,579	0.3%	14	3,201	0.4%	Close	Enfield	115631	?	?	?	?
Somewhat close	Waltham Forest	18	1,506	1.2%	7	1,442	0.5%	8	1,479	0.5%	14	1,894	0.7%	14	1,911	0.7%	12	2,162	0.6%	Somewhat close	Waltham Forest	92544	£97,000	2.6	0	£1.05
Somewhat close	Slough	2	882	0.2%	7	977	0.7%	4	1,425	0.3%	6	1,341	0.4%	10	1,387	0.7%	6	1,514	0.4%	Somewhat close	Slough	54928	£146,000	1.5	2	£2.66
Somewhat close	Manchester	44	2,460	1.8%	44	2,753	1.6%	33	3,349	1.0%	42	3,807	1.1%	36	4,268	0.8%	49	4,800	1.0%	Somewhat close	Manchester	221584	?	?	?	?
Somewhat close	Walsall	25	1,325	1.9%	12	1,616	0.7%	18	1,571	1.1%	17	1,816	0.9%	22	2,204	1.0%	26	2,205	1.2%	Somewhat close	Walsall	94282	£130,000	2.8	0	£1.38
Somewhat close	Derby	46	1,133	4.1%	18	1,356	1.3%	23	1,604	1.4%	63	1,810	3.5%	60	2,013	3.0%	71	2,396	3.0%	Somewhat close	Derby	89259	£98,000	2.3	0	£1.10
	England Total <sup>4</sup>	4,108	251,096	1.6%	3,126	269,565	1.2%	3,863	305,983	1.3%	4,988	338,866	1.5%	6,023	376,254	1.6%	7,385	413,131	1.8%							

? = data not submitted by service

not enough data provided to provide an accurate average

Local Authority	2014			2015			2016			2017			2018			2019			SEND/IAS funding and staffing taken from IASSN "Funding, Casework and Staffing Data Report 2021"	Population 2021 aged 0-25	total funding 2021	FTE staff 2021	volunteers 2021	£ per head 2021	
	Appeals registered <sup>4</sup>	Total Appealable Decisions <sup>1</sup>	SEND Tribunal Appeal Rate <sup>2</sup>	Appeals registered <sup>4</sup>	Total Appealable Decisions <sup>1</sup>	SEND Tribunal Appeal Rate <sup>2</sup>	Appeals registered <sup>4</sup>	Total Appealable Decisions <sup>1</sup>	SEND Tribunal Appeal Rate <sup>2</sup>	Appeals registered <sup>4</sup>	Total Appealable Decisions <sup>1</sup>	SEND Tribunal Appeal Rate <sup>2</sup>	Appeals registered <sup>4</sup>	Total Appealable Decisions <sup>1</sup>	SEND Tribunal Appeal Rate <sup>2</sup>	Appeals registered <sup>4</sup>	Total Appealable Decisions <sup>1</sup>	SEND Tribunal Appeal Rate <sup>2</sup>							
Birmingham	138	7,635	1.8%	144	7,771	1.9%	170	8,093	2.1%	237	9,470	2.5%	265	10,214	2.6%	295	9,793	3.0%		Birmingham	450047	£240,000	5	0	£0.53
The rows below (in yellow) represent 6 LAs with largest populations																									
Lancashire	90	5,088	1.8%	67	5,350	1.3%	43	6,056	0.7%	73	6,837	1.1%	95	7,486	1.3%	138	7,539	1.8%		Lancashire	369944	£303,281	7	0	£0.83
Essex	155	7,796	2.0%	85	7,737	1.1%	108	8,449	1.3%	178	9,079	2.0%	211	9,797	2.2%	315	10,356	3.0%		Essex	436955	£344,356	6.7	0	£0.79
Hertfordshire	87	3,880	2.2%	98	4,647	2.1%	91	5,364	1.7%	126	6,079	2.1%	159	6,910	2.3%	160	7,654	2.1%		Hertfordshire	371328	£412,509	14.51	0	£1.11
Hampshire	166	5,242	3.2%	113	5,917	1.9%	188	6,991	2.7%	188	7,879	2.4%	224	8,749	2.6%	163	9,309	1.8%		Hampshire	395904	£247,196	7	5	£0.62
Kent	325	6,924	4.7%	160	7,339	2.2%	166	8,685	1.9%	242	10,294	2.4%	369	13,131	2.8%	513	14,599	3.5%		Kent	481475	?	?	?	
Surrey	196	5,855	3.3%	142	5,985	2.4%	188	7,623	2.5%	220	8,210	2.7%	213	9,293	2.3%	293	10,429	2.8%		Surrey	364541	£230,000	7	0	£0.63
The rows below (in grey) represent LAs with appealable decisions over 5000 in 2019 although the yellow rows above are over 7500																									
Lincolnshire	29	3,520	0.8%	35	3,532	1.0%	59	4,133	1.4%	50	4,761	1.1%	52	4,829	1.1%	49	5,268	0.9%		Lincolnshire	213294	£178,798	6.4	0	£0.84
Staffordshire	56	3,621	1.5%	63	3,936	1.6%	83	4,303	1.9%	97	4,838	2.0%	95	5,252	1.8%	78	5,564	1.4%		Staffordshire	247960	?	?	?	£1.05
Suffolk	54	3,265	1.7%	63	3,092	2.0%	58	3,558	1.6%	58	4,437	1.3%	73	5,153	1.4%	104	5,998	1.7%		Suffolk	215262	£259,478	6	0	£1.21
West Sussex	41	3,415	1.2%	22	4,015	0.5%	83	4,822	1.7%	85	5,279	1.6%	90	5,681	1.6%	114	6,059	1.9%		West Sussex	238340	£284,100	7.36	7	£1.19
Devon	26	3,699	0.7%	17	3,624	0.5%	37	3,902	0.9%	55	4,360	1.3%	54	5,437	1.0%	63	6,759	0.9%		Devon	216113	£298,000	6.3	15	£1.38
not relevant in any menaingful respect to prov																									
England Total	4,108	251,096	1.6%	3,126	269,565	1.2%	3,863	305,983	1.3%	4,988	338,866	1.5%	6,023	376,254	1.6%	7,385	413,131	1.8%	? = data not submitted by service						

# **IASS additional funding via IASP (NCB) provided to Birmingham SENDIASS**

Some of the things that have been funded should be clearly provable e.g. the existence of a website (minimum standards require it to be a standalone website so IASP funding would have been for that), training materials and evidence that training sessions were held etc.

<b>2018-19</b>	<b>£32,000</b>	<p>1. Conduct a detailed self-review of the IASS to establish its delivering on its responsibilities as required by the C&amp;FA 2014 and SEN C of P</p> <p>2. Develop a 2 year service-led IASS operational plan to seek compliance and service improvements benchmarked against the new minimum standards</p> <p>3. Demonstrate a willingness to work closely with CDC and respect the disciplines of working close to Government policy on the IASP (this required the following:</p> <p style="padding-left: 40px;">Submit a statement to say:</p> <ul style="list-style-type: none"> <li>• Your attendance and learning at IASS regional meetings during the year</li> <li>• Submission of 3 case studies to inform and help other services (ongoing)</li> <li>• Submission of data onto the IASSN national reporting hub (Nov 2018)</li> <li>• Engagement with IASSN annual customer survey (Jan 2019)</li> </ul>
<b>2019-20</b>	<b>£45,900</b>	<p>1a. Support with staff costs / retention</p> <p>1b. Appointment of CYP Lead</p> <p>1c. Support work required to implement plans from 1 April 2019</p> <p>1d. Capacity built into current Head of Service role to define project plan for implementation including specific Project Lead</p> <p>2a. Joint commissioning arrangements with health and social care (this included:</p> <ul style="list-style-type: none"> <li>• Links made at DMO level (SENDIASS is directly managed by the DCSO)</li> <li>• An SLA and funding model established with Health &amp; Social Car</li> </ul> <p>2b. Strengthening governance arrangements and management reporting (this included:</p> <ul style="list-style-type: none"> <li>• Representation of Education, Health and Social Care on the SENDIASS Board (former Chair of Schools' Forum has expressed an interest in Chairing the SENDIASS Board and this will bring a high level of strategic expertise)</li> </ul> <p>3a. Strengthening tribunal support - Protocols established with the SEND Department to resolve disputes</p> <p>3b. <b>Website</b> development and promotional materials designed to link to the Local Offer - Website integral part of IASS offer &amp; online helpline available</p> <p>4a. Setting up and implementing a <b>volunteer development programme</b> (including a training programme) to support CYP and parents (aim was 10 CYP Support Volunteers trained &amp; 10 Parent/Carer Volunteers trained)</p> <p>4b. Creating better processes to receive regular feedback from service users which help refine and develop the service and the staff within it including:</p> <ul style="list-style-type: none"> <li>• Accessible CYP feedback mechanism defined</li> <li>• Accessible parental feedback mechanism defined</li> <li>• Service User feedback on Website</li> </ul> <p>5a. Strategic work with disadvantaged groups this included:</p> <ul style="list-style-type: none"> <li>• Locality Based Groups set up to cover North/South/Central areas of city</li> <li>• Local communities needs defined including language and cultural issues</li> </ul> <p>5b. Supporting strategic participation of parents, CYP - Links with the Strategy for SEND made</p>



## UNFORSEEN COVID RESTRICTIONS IMPACTED ON DELIVERY FROM THIS POINT FORWARD

2020-21	£27,882	<ol style="list-style-type: none"><li>1. To have an SLA and joint commissioning arrangement for IASS signed and agreed with health and social care as per minimum standards. (Purpose – for process to be embedded and improve services locally)</li><li>2. To increase IASS reach and engagement with minority ethnic communities and hard to reach families across Birmingham to include: A communication and engagement action plan devised with ambitious targets and developed in partnership with YP and VCOs.</li><li>3. To develop an IASS easy read guide to improve inclusive Practice in Mainstream Secondary settings this included: Establishing an Operational Board (with terms of reference in place) in partnership with ACAMHS and other relevant organisations that can contribute to the aim.</li><li>4. Produce a service continuity and sustainability plan for the period April 2021 onwards</li></ol>
2021-22	£10,000	<ol style="list-style-type: none"><li>1. Ensure CYP and families receive ongoing impartial IAS within the wider service offer in line with the duties outlined in the Minimum Standards for SENDIASS. This included: A YP's Participation Group (YPG) is established with a defined work programme and creation of a YP participation charter</li><li>2. Ensure the IASS manager based solely within the IAS Service, continues to lead on strategic planning, delivery to ensure it has the capacity and resources to meet these Minimum Standards and local need - including a joint commissioning arrangement no later than March 2022, where such an arrangement is not yet in place. This included developing a training package and to provide training to Health and SC re role and work of SENDIASS</li><li>3a. Due to the changing environment, to develop new IASS digital resources on matters relating to the service and SEND – which increases current service uptake and engagement with CYP and families This included: Compiling Zoom ready training materials that are specific to parents and for CYP. (4 sessions to be delivered on all aspects of IASS work and SEND processes.)</li><li>3b. Due to the changing environment, to develop new IASS digital training resources aimed at external local education, health and social care professionals, CYP, families and volunteers - which increases knowledge of SEND law, guidance, local policy, issues and participation. This included: Compiling Zoom ready training materials that are specific to professionals across the disciplines and schools (4 sessions to be delivered).</li></ol>
Total	£115,792	

## Take from Annual Reports – green highlighted text is my calculation and is not in the ARs

Note the initial reason for contacting the service across all reporting areas never changes.

“School meeting” says nothing about what the casework was about e.g. SEN Support, exclusion, behaviour etc

“Placement” sounds like it may mean naming school in EHCP but unlikely that starting or changing school hasn’t arisen outside of naming in an EHCP.

“Other “ should be broken down a bit more e.g. like 15/16 school transport was highlighted

### 14/15

There are presently over **7100 families and children known to SENDIASS\***. Typically, at any one time around 400 families, children and young people will be receiving an in depth casework service\*\*.

**509** new referrals

At the initial point of referral a Case Objective type is given to each new case; these objectives include:

- EHC Needs Assessment
- Progress of EHCP
- Content of EHCP
- Placement
- School Meeting
- Annual Review Meeting
- Exclusion
- Attendance
- Other

However, it should be noted that many referrals are multi-faceted. Equally, it is not always clear at the point of referral what the case objectives are and these may only become apparent following a first more in depth assessment. Furthermore, objectives can change or be added throughout the progress of a case.

\*Assume this is families on the database since the service began on 1.1.2000

\*\* When SENDIASS were asked on 25.4.22 “How many for each of the national intervention levels (1-4) or certainly a split between helpline one-off calls and casework”. The response was “**All these are LEVEL 4 as the requirement was to only report on these.**” Therefore, the figures relating to in depth casework are all Level 4 intervention.

**The box below is taken from the IASSN Funding, Casework and Staffing Data Report 2021. As you can see national average is 14% of all casework is Level 3 or 4 not just Level 4. (14% of 724 = 101).**

To explore this, we asked services to submit their own helpline and casework numbers from three consecutive years. We found that on average:

- Helpline enquiries: up 48% since 2019- an average of 1291 enquiries being received per year per service
- Casework (non-helpline) up 52% since 2019- average 724 cases per year across the levels
- Tribunal numbers continue to rise. Services are supporting an average of 40 tribunal cases a year in some form, including attending and supporting a parent or young person directly with 4.

### Complexity:

- 14% of cases reported to be level three or above by those that record levels, compared to 10% in 2019



### 15/16

There are presently over **7700** families and children known to SENDIASS. **(600 new families added)**

**565** new cases. Same categories as bullet points for 2014/15.

[In the Summer of 2016 SENDIASS were contacted by over 50 parents – **and other professionals** – regarding decisions that had been made affecting children and young people's school transport. These are included in the 'Other' category]

### 16/17

There are presently over **8240** families and children known to SENDIASS. The range of support provided covers telephone advice, in depth case work support and **workshop sessions\***. **(540 new families added)**

**During the year commencing 1 September 2016 SENDIASS delivered in depth casework\*\* intervention to 637 new cases.** Same categories as bullet points for 2014/15.

\* These should not be added to database unless they receive individual support and numbers should be presented and reported separately including details of themes for the workshop

\*\* This is clearer than in previous reports when just stated referrals but should also include separately number of one-off enquiries and their nature.

### 17/18

There are presently over **8745** families and children known to SENDIASS. The range of support provided covers telephone advice, in depth case work support and workshop sessions. **(505 new families added)**

During the year commencing 1 September 2017 SENDIASS delivered in depth casework intervention to 570 new cases. This is in addition to the continuing casework that is undertaken. Same categories as bullet points for 2014/15.

### 18/19

There are presently over **9500** families and children known to SENDIASS. The range of support provided covers telephone advice, in depth case work support and workshop sessions. **(755 new families added)**

During the year commencing 1 September 2018 SENDIASS delivered in depth casework intervention to **618** new cases. This is in addition to the continuing casework that is undertaken with the families that the service supports.

**A particular feature of this year's work has been providing information, advice and support to CYP directly.\*** Same categories as bullet points for 2014/15.

\* There is no reference in the stats to CYP vs parents re casework numbers or issues raised. According to table below there are 48 cases relating to YP = approx 23 16 & 17 yrs olds & 25 >18. unclear if this is parents of 16+ or YP directly contacting service and if parental consent was acquired. **On another occasion it was reported that direct work with CYP didn't commence to 1.9.21 i.e. more than 2 years later!**

### 19/20 (lockdown from March 2020)

There are presently over **10,200** families and children known to SENDIASS. The range of support provided covers telephone advice, in depth case work support and workshop sessions. **(700 new families added)**

During the year commencing 1 September 2019 SENDIASS delivered in depth casework intervention to **679** new cases. The six monthly split was **371/308**. As the March - August period covers the summer holiday, this may explain the difference, but there would be some effect from the lockdown. Same categories as bullet points for 2014/15.



## Birmingham SEND Information, Advice & Support Service

### Quality Assurance Form - Parent/Carer

We try to provide the information, advice and support that you need.

Please take a few minutes to answer some questions for us.

We really do value your feedback.

### Getting in touch with us

1 How easy was it to get in touch with us?	<b>Not at all easy</b>	<b>0</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>Very easy</b>
		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	

1b How quickly did we respond?	<b>Very Slowly</b>	<b>0</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>Very quickly</b>
		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

1c How well do you think we understood your questions or concerns?	<b>Not at all well</b>	<b>0</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>Very well</b>
		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

1d How did you hear about us? (Tick all that apply)

Leaflet about the service	<input type="checkbox"/>	Another parent or friend	<input type="checkbox"/>	The internet	<input type="checkbox"/>
The school, early years setting or college	<input type="checkbox"/>	The Local Offer	<input type="checkbox"/>	The Local Authority's SEND team	<input type="checkbox"/>
An educational psychologist or Advisory Teacher	<input type="checkbox"/>	A health professional	<input type="checkbox"/>	Social Services	<input type="checkbox"/>
None of these	<input type="checkbox"/>	(if so, please tell us how you found out about the service)			





## The support we offered you

2	How helpful was the information, advice and support we gave you?	Not at all helpful					Very helpful
		0	1	2	3	4	
		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	

2b Did we:

	YES	N/A
support you with the SEND statutory processes including EHC needs assessment/EHC Plan? (this may have included Appeal/Tribunal)	<input type="checkbox"/>	<input type="checkbox"/>
help/advise with concerns you have relating to educational placement or provision? (this may be related to nursery, school or college)	<input type="checkbox"/>	<input type="checkbox"/>
help/advise with any concerns you may have with the SEND delivery from the LA? (this may have included Home to School Transport)	<input type="checkbox"/>	<input type="checkbox"/>
help/advise with any aspect of Health or Social Care?	<input type="checkbox"/>	<input type="checkbox"/>
provide any other support (please detail)	<input type="checkbox"/>	<input type="checkbox"/>

3	How neutral, fair and unbiased do you think we were?	Not at all					Very
		0	1	2	3	4	
		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	

4a	What difference do you think our information, advice or support has made for you?	No difference at all					A great deal of difference
		0	1	2	3	4	
		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	



4b

Can you tell us more about the difference(s) we made for you?

(Please tick any that apply)

*I feel that my child's needs are better understood than they were*

☐

*I now have a better relationship with my child's school or setting*

☐

*I now have a better relationship with the Local Authority*

☐

*I feel more confident*

☐

*I have a greater understanding of the SEND Code of Practice and the arrangements that should be made for children and young people with SEN*

☐

*I feel more involved in decisions about my child's education*

☐

*I am happier/less worried about my child's future*

☐

*I feel my child has benefitted as a result of the service being involved*

☐

Please tell us of any other differences that your contact with our service has made.

5 Overall how satisfied are you with the service we gave?

Very  
Unsatisfied

Very  
satisfied

0

1

2

3

4

☐☐☐☐☐

5b

Was there anything we could have done better?





## The future

6 How likely is it that you would recommend the service to others?

Not at all  
likely

Extremely  
likely

0

1

2

3

4

☐☐☐☐☐

6b Do you have any other comments about our service?

**Thank you for your help.**

**Service User Contact Details:**

**Name:**

**Tel:**

**Email:**

**Child/YP name:**

**Date of Birth:**

**Date Form Completed:**

Office use only

Caseworker Name:

Role:

## Comments re “User Satisfaction” taken from each Annual report

### 2014/15

It is worthy of note however, that the ‘customer orientated’ nature of our service frequently results in high levels of satisfaction being expressed by service users to their support officer in the natural course of an intervention.

At the time when cases are ‘closed’, Service users are invited to both rank their experience of the service and to raise any concerns. A large majority of our users rank the service as very good or excellent and during the year there have been no ranking below satisfactory. There have also been no issues of concern raised or any formal complaints from users regarding the service.

### 2015/16

At the time when cases are ‘closed’, Service users are invited to both rank their experience of the service and to raise any concerns.

There has been **no ranking below satisfactory** and there have been no issues of concern raised or any formal complaints from users regarding the service. This is in line with the ‘customer-orientated’ nature of the service, whereby in-depth casework intervention and support is provided in the most complex cases.

### 2016/17

At the time when cases are ‘closed’, Service users are invited to both rank their experience of the service and to raise any concerns.

It is worthy of note, over the 3 years since the changes in legislation, the service has received **no ranking below satisfactory**; service users have raised no issues of concern; and there have no formal complaints from users regarding the service. This reflects the ‘customer-orientated’ approach and nature of the service, whereby in-depth casework intervention and support is provided in the most complex cases based on and in discussion and agreement with families, children and young people.

### 2017/18

At the time when cases are 'closed' service users are invited to both rank their experience of the service and to raise any concerns.

It is worthy of note, over the 4 years since the changes in legislation, the service has received no ranking below satisfactory; service users have raised no issues of concern; and there have no formal complaints from users regarding the service. This reflects the 'customer-orientated' approach and nature of the service, whereby in-depth casework intervention and support is provided in the most complex cases based on and in discussion and agreement with families, children and young people.

### 2018/19

At the time when cases are 'closed' service users are invited to both rank their experience of the service and to raise any concerns.

It is worthy of note, over the **4 years\*** since the changes in legislation, the service has received no ranking below satisfactory; service users have raised no issues of concern; and there have no formal complaints from users regarding the service. This reflects the 'customer-orientated' approach and nature of the service, whereby in-depth casework intervention and support is provided in the most complex cases based on and in discussion and agreement with families, children and young people.



Feedback is sought from each case based on the good practice Quality Assurance form that the CDC have produced. \*\* This seeks the experience of the service user from the outset of accessing the service through to the information, advice and support provided and the outcome achieved. This feedback is collated to ensure that the service remains accessible and responsive to the CYP and parents within the city. A significant issue that was identified by the service users had been that the 'telephone line is always busy'. The Duty system was changed to alleviate this by having two Duty Officers operating the helpline, one for the initial 'triage' of the incoming calls and the other to then undertake an initial assessment and complete the referral form.

\* This should say 5 years but it has simply been cut and pasted from the previous year

\*\* except it doesn't. It has changed Q2b completely( see below). The national one is carried out anonymously, Only if they wish are contact details added. and sent out at the end of all enquiries. The Birmingham one requests contact detail – doesn't indicate as optional. The forms are then added to case files. They are only sent out to Level 4 enquiries (according to NH 11.5.22). According to feedback from PCF no one currently involved with SENDIASS knew anything about a feedback form.

### Nationally agreed and widely used evaluation form

2b Did the IASS:

	YES	NO
Return your calls/emails promptly?	<input type="checkbox"/>	<input type="checkbox"/>
Keep in touch?	<input type="checkbox"/>	<input type="checkbox"/>
Explain why decisions were made and what was happening?	<input type="checkbox"/>	<input type="checkbox"/>
Listen to your views?	<input type="checkbox"/>	<input type="checkbox"/>
Treat you with respect?	<input type="checkbox"/>	<input type="checkbox"/>
Explain who they were and what their role was?	<input type="checkbox"/>	<input type="checkbox"/>
Provide a confidential service?	<input type="checkbox"/>	<input type="checkbox"/>
Give you information and advice that met your needs?	<input type="checkbox"/>	<input type="checkbox"/>

### Birmingham's

2b Did we:

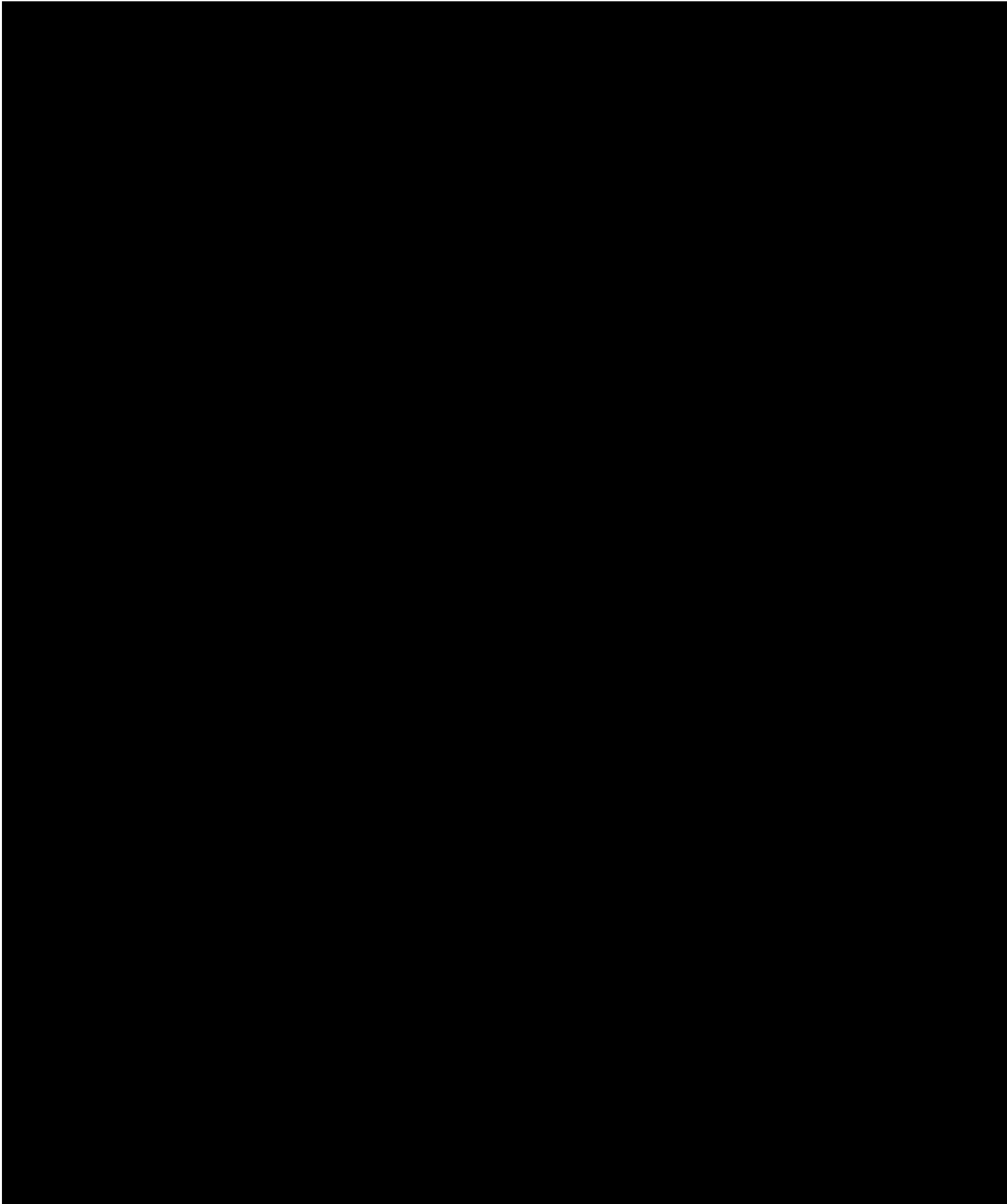
	YES	N/A
support you with the SEND statutory processes including EHC needs assessment/EHC Plan? (this may have included Appeal/Tribunal)	<input type="checkbox"/>	<input type="checkbox"/>
help/advise with concerns you have relating to educational placement or provision? (this may be related to nursery, school or college)	<input type="checkbox"/>	<input type="checkbox"/>
help/advise with any concerns you may have with the SEND delivery from the LA? (this may have included Home to School Transport)	<input type="checkbox"/>	<input type="checkbox"/>
help/advise with any aspect of Health or Social Care?	<input type="checkbox"/>	<input type="checkbox"/>
provide any other support (please detail)	<input type="checkbox"/>	<input type="checkbox"/>

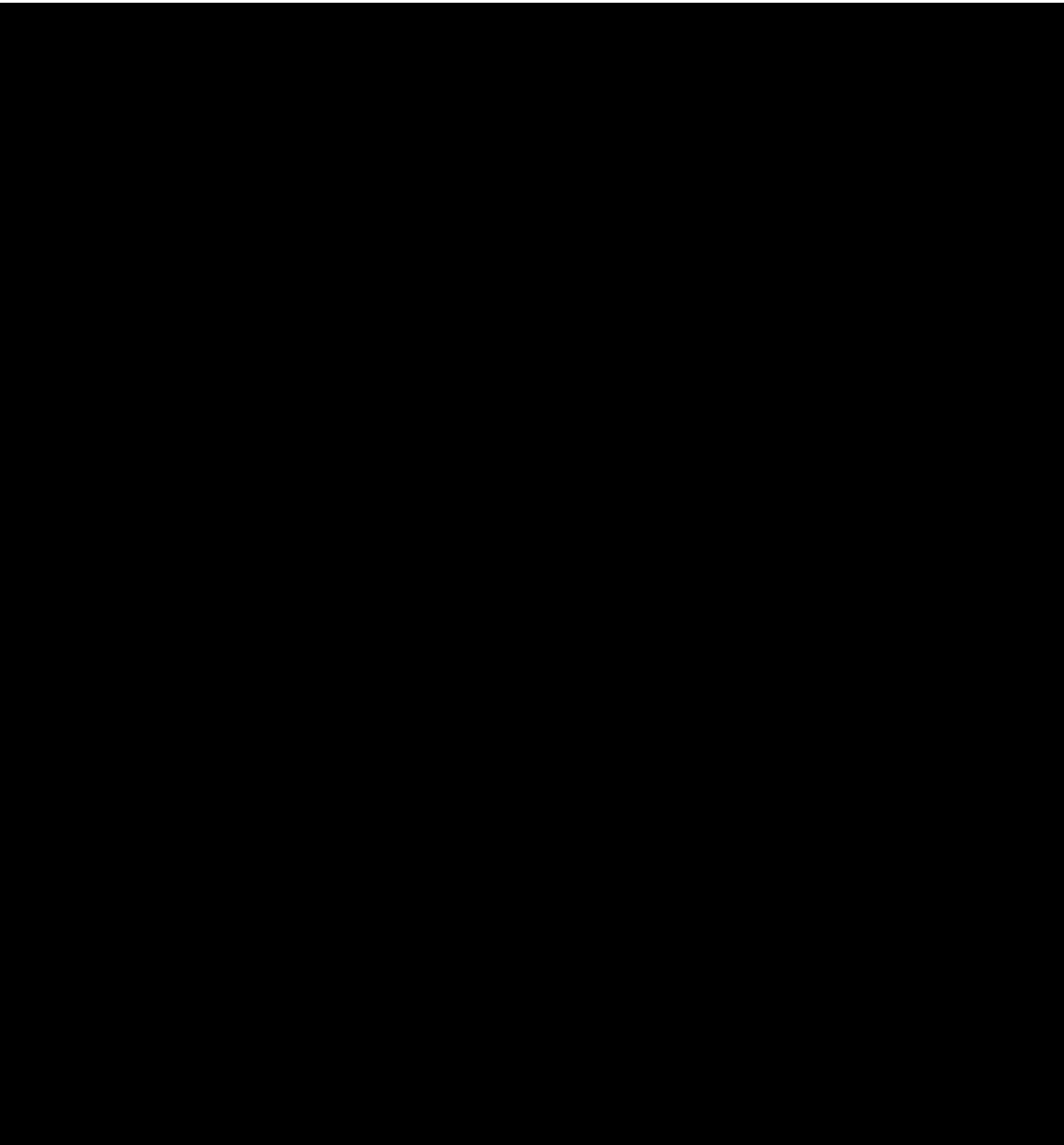
**2019/20**

Identical to previous year

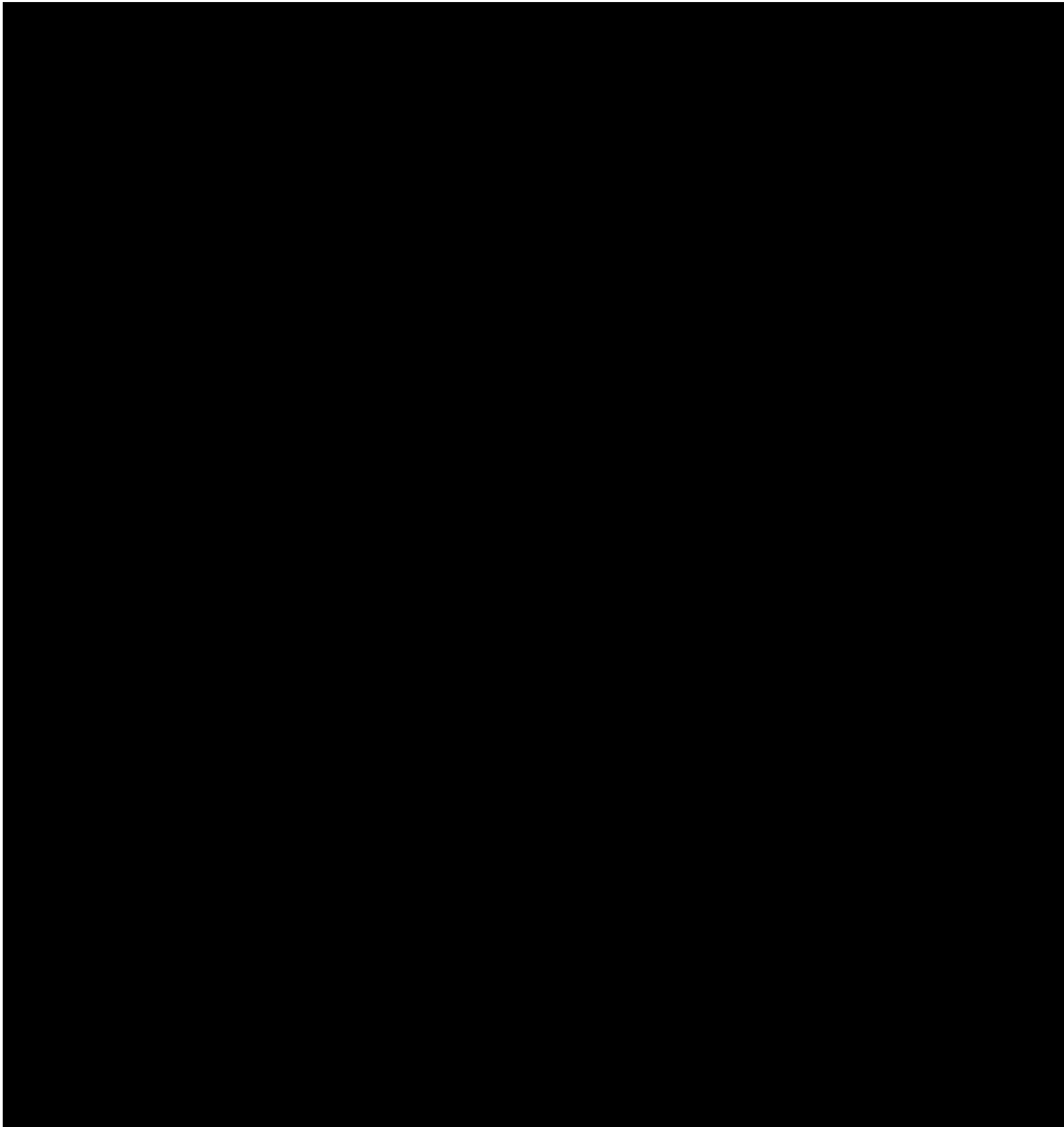


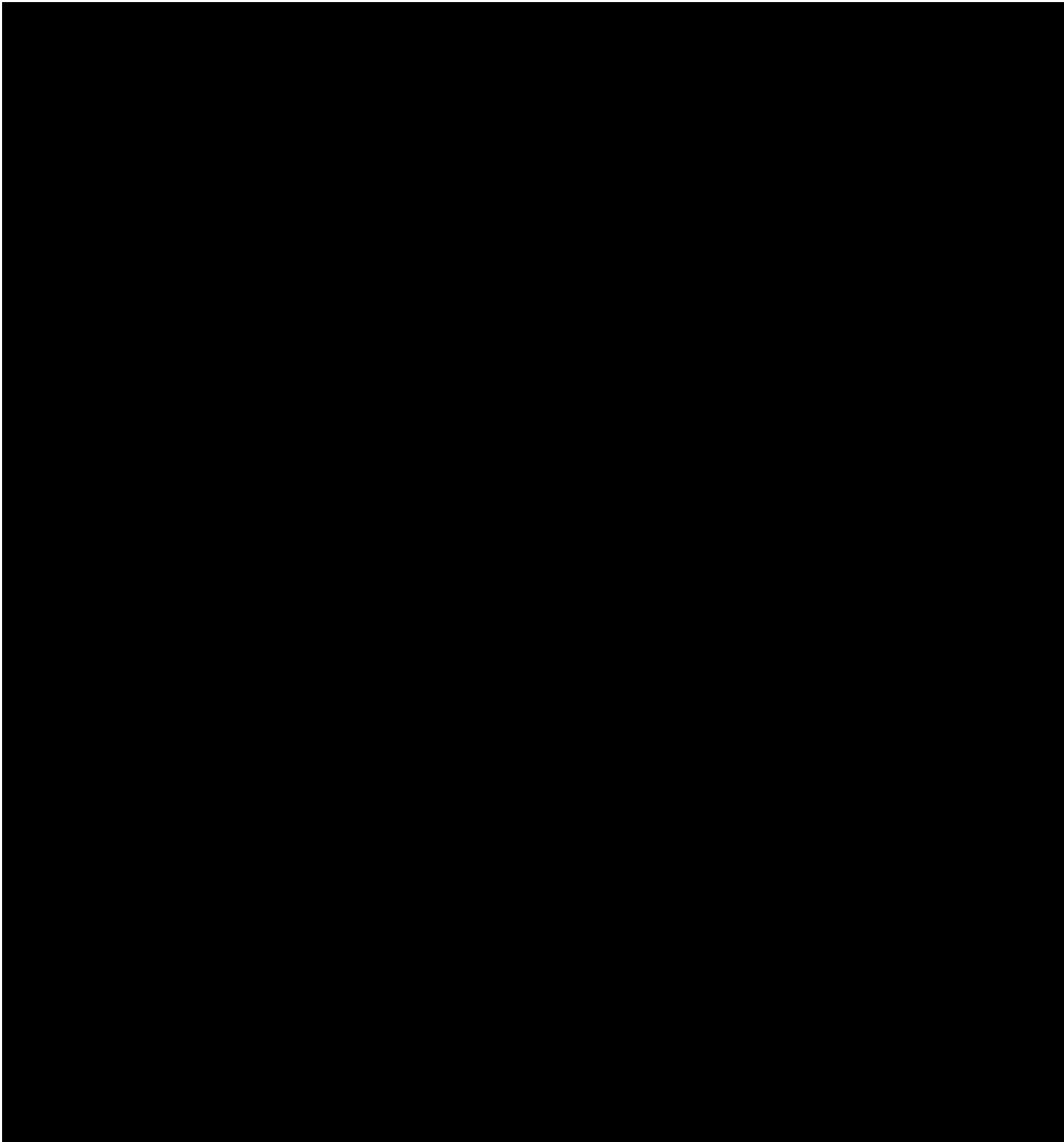




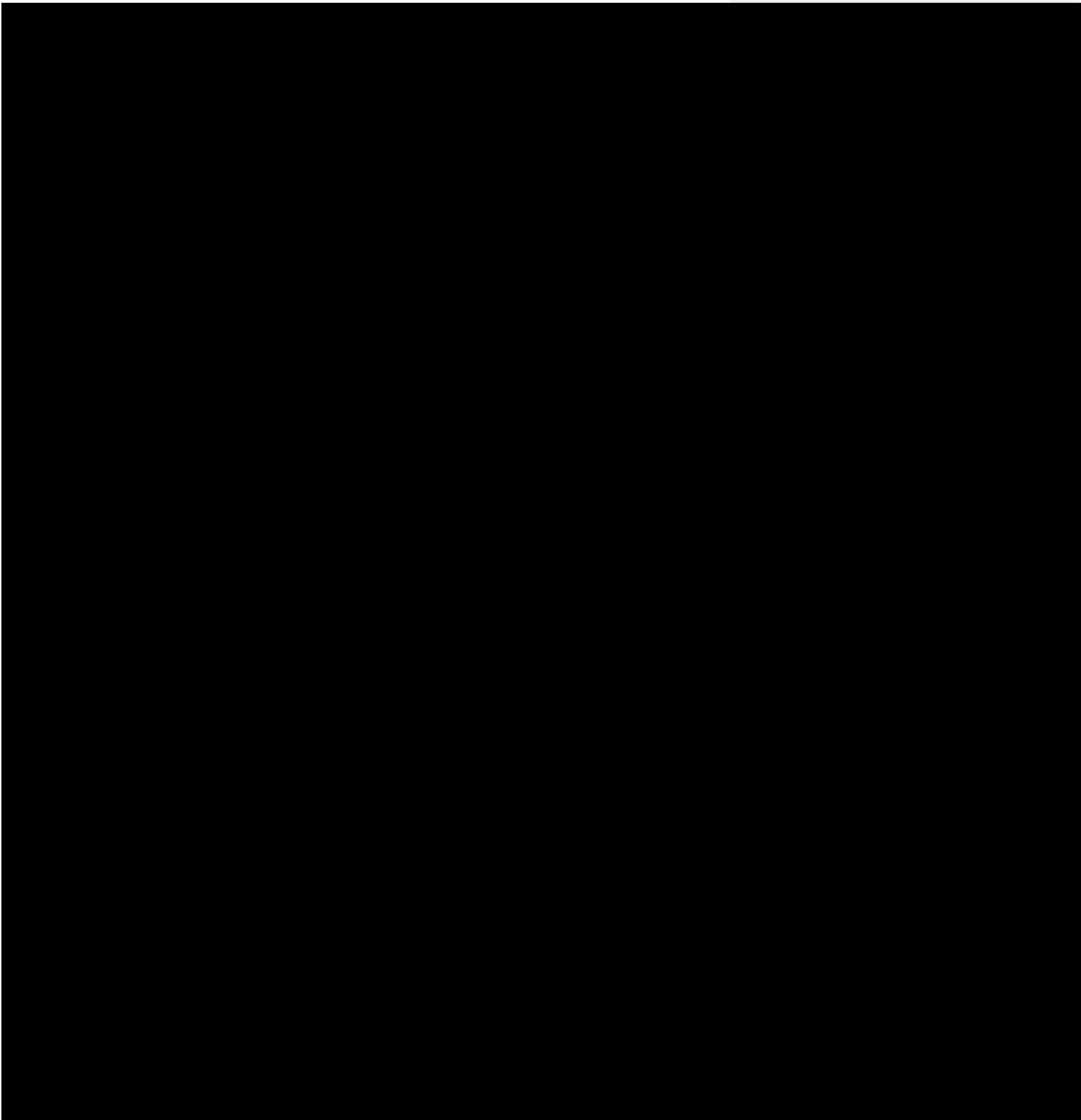


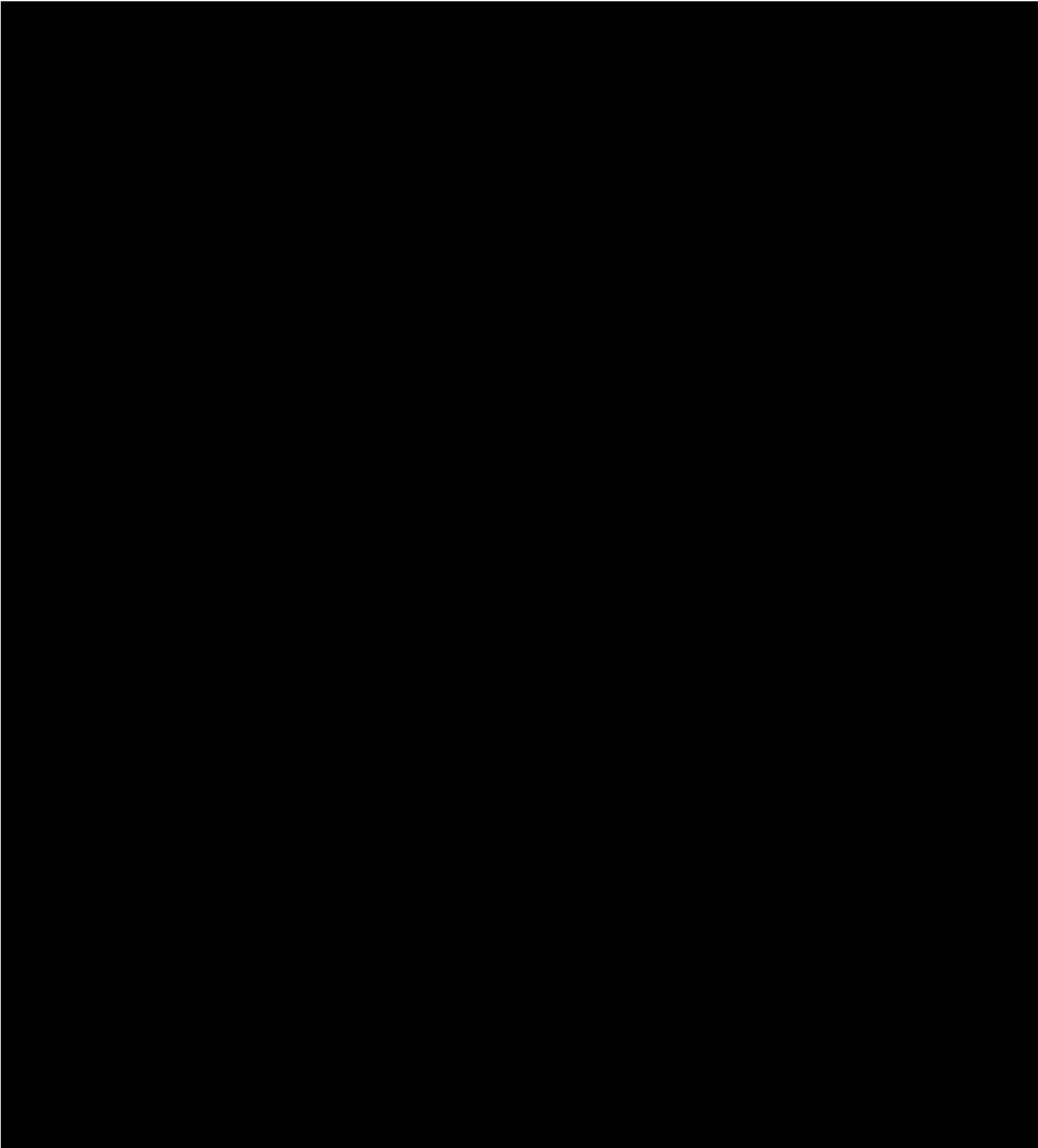




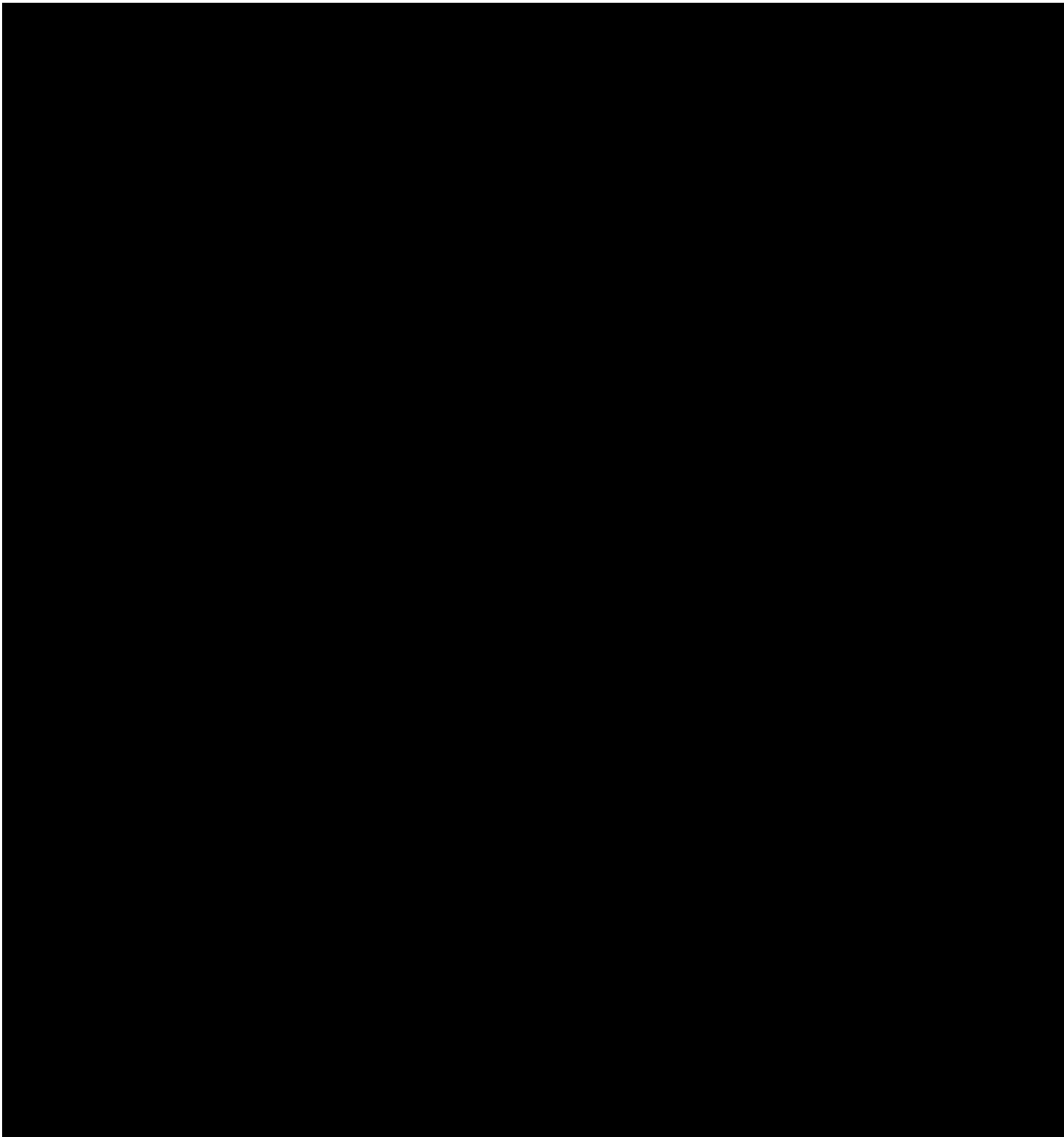












### Summary of minimum standards according to evidence found or provided

[illegible]

1.6 LA and IASS ensure that potential service users, Head teachers, FE principals, SENCos, SEND Teams, children's and adult social care, health commissioners and providers are made aware of the IASS, its remit and who the service is for,			
1.7 The Governance arrangements outline a clear management structure, encompassing a strategic manager within the IASS and a steering group or advisory body which includes representatives from service user groups and key stakeholders from education, social care and health.			
1.8 The IASS has a development plan reviewed annually with the steering group/advisory body which includes specific actions and improvement targets.			



		<b>RK</b>	
<b>2. Strategic functions</b> Standard		Based on evidence provided	
2.1 Each IASS has a manager based solely within the service, without additional LA/CCG or host body roles. They have responsibility for strategic planning, service management and delivery, and quality assurance.			
2.2 The IASS engages with regional and national strategic planning and training and demonstrates effective working with other IASSs – to inform service development.			
2.3 The IASS works with local partners, including local parent and young people forums to inform and influence policy and practice in the local area.			

<b>3. Operational Functions Standard</b>		<b>RK</b>
3.1 The IASS provides; impartial information, advice and support (IAS) on the full range of education, health and social care as defined in the SEND Code of Practice to the following service users – (a) children (b) young people, and I parents This support is offered in a range of ways which includes face to face, a telephone helpline, email, website and social media.		Based on evidence provided
3.2 IASS provides branded information and promotional materials in a range of accessible formats.		
3.3 The IASS has a stand-alone service website that is accessible to all service users. The website includes; a. Contact details of the service b. Opening hours c. Response times		

<p>d. Information on a range of SEND topics</p> <p>e. Signposting to other useful groups including parent groups and youth forums and national helplines</p> <p>f. Signpost to the Local Offer</p> <p>Key policies including a complaints procedure</p>			
<p>3.4 The IASS provides advocacy support for individual children, young people, and parents that empowers them to express their views and wishes and helps them to understand and exercise their rights in matters including exclusion, complaints, SEND processes, and SEND appeals.</p>			
<p>3.5 The IASS provides information, advice and support before, during and following a SEND Tribunal appeal <u>in a range of different ways, dependent on the needs of the parent or young person</u>. This will include representation during the hearing <u>if the parent or YP is unable to do so</u>.</p>			



3.6 The IASS offers training to local education, health and social care professionals, children, young people and parents to increase knowledge of SEND law, guidance, local policy, issues and participation.			
	NH	NH comments provided	RK
4. Professional development and training Standard			Based on evidence provided
4.1 All advice and support providing staff successfully complete all online IPSEA legal			

training levels within 12 months of joining the service. Volunteers who provide advice and support should complete IPSEAs Level 1 online training within 12 months.			
4.2 The service routinely requests feedback from service users and others, and <u>uses this to further develop the work and practices of the service.</u>			
4.3 All IASS staff and volunteers have ongoing supervision and continuous professional development.			
NB THE FOLLOWING ARE SUPPLEMENTARY QUESTIONS AND ARE NOT PART OF THE NATIONAL MINIMUM STANDARDS			
		RK	
<b>5. Additional information for review purposes</b>		Based on evidence provided	
5.1 What formalised Quality Assurance measures are in place re all external communication and information sharing e.g. training being delivered, service delivery processes, website, factsheets etc.			

5.2 Is there evidence on the service website and in the service delivery model that an engagement and participation approach is being promoted with service users?			
5.3 Service Deficit is recorded and reported to Steering Group and used to inform service development and funding bids			
5.4. Relationship/interface with PCF. Is there a formalised agreement? Is there information for parents and professionals to help make it clear the difference in the PCF and IASS roles?			
5.5. Use of Social Media Use of virtual platforms			



[Home](#) / [Document downloads](#) / [Schools and learning](#) / SENDIASS















## Document downloads

### Related information

News

## SENDIASS downloads

### Review of education health and care plan >

Health advice and information form -Review of EHC plan	DOCX	49.6 KB	
Social care advice and information form - Review of EHC plan	DOCX	49.13 KB	
Agenda for EHC Plan Review Meeting EHC Plan Review Meeting Guidance for Schools and Institutions	PDF	173.09 KB	
Checklist for the ehc plan review meeting - aug 15 1.0	PDF	209.74 KB	
Checklist for the EHC Plan Review Process	DOCX	49.02 KB	
Education advice and information - Review of EHC plan	DOCX	49.02 KB	
Review of ehc plan - v11 version 2 issued jan 2016	DOCX	373.14 KB	
Guidance for completing advice and information for review of ehc plan	DOC	143.5 KB	
Review process for ehc plan (pathway) 23072015 v1.0	PDF	335.78 KB	
Timeline on the Review Process for an Education, Health and Care Plan	PDF	240.15 KB	
Guidance notes on completing review of education health and plan form - feb 2016	DOC	107.5 KB	
Parentcarers views - Review of EHC plan	DOC	144 KB	
Child and young persons views - Review of EHC plan	DOC	146.5 KB	
Guidance on the Review Process for an Education, Health and Care Plan	PDF	190.62 KB	

Only sent out for level 4 interventions.

Nationally agreed and widely used evaluation form

2b Did the IASS:

	YES	NO
Return your calls/emails promptly?	<input type="checkbox"/>	<input type="checkbox"/>
Keep in touch?	<input type="checkbox"/>	<input type="checkbox"/>
Explain why decisions were made and what was happening?	<input type="checkbox"/>	<input type="checkbox"/>

Listen to your views?	<input type="checkbox"/>	<input type="checkbox"/>
Treat you with respect?	<input type="checkbox"/>	<input type="checkbox"/>
Explain who they were and what their role was?	<input type="checkbox"/>	<input type="checkbox"/>
Provide a confidential service?	<input type="checkbox"/>	<input type="checkbox"/>
Give you information and advice that met your needs?	<input type="checkbox"/>	<input type="checkbox"/>

Birmingham's

2b Did we:

	YES	N/A
support you with the SEND statutory processes including EHC needs assessment/EHC Plan? (this may have included Appeal/Tribunal)	<input type="checkbox"/>	<input type="checkbox"/>
help/advice with concerns you have relating to educational placement or provision? (this may be related to nursery, school or college)	<input type="checkbox"/>	<input type="checkbox"/>
help/advice with any concerns you may have with the SEND delivery from the LA? (this may have included Home to School Transport)	<input type="checkbox"/>	<input type="checkbox"/>
help/advice with any aspect of Health or Social Care?	<input type="checkbox"/>	<input type="checkbox"/>
provide any other support (please detail)	<input type="checkbox"/>	<input type="checkbox"/>





[REDACTED]

\_\_\_\_\_

[REDACTED]

the 1990s, the number of people in the United States who are 65 years of age or older has increased by 50 percent, and the number of people 75 years of age or older has increased by 100 percent. The number of people 85 years of age or older has increased by 200 percent. The number of people 90 years of age or older has increased by 400 percent. The number of people 95 years of age or older has increased by 800 percent. The number of people 100 years of age or older has increased by 1,600 percent. The number of people 105 years of age or older has increased by 3,200 percent. The number of people 110 years of age or older has increased by 6,400 percent. The number of people 115 years of age or older has increased by 12,800 percent. The number of people 120 years of age or older has increased by 25,600 percent. The number of people 125 years of age or older has increased by 51,200 percent. The number of people 130 years of age or older has increased by 102,400 percent. The number of people 135 years of age or older has increased by 204,800 percent. The number of people 140 years of age or older has increased by 409,600 percent. The number of people 145 years of age or older has increased by 819,200 percent. The number of people 150 years of age or older has increased by 1,638,400 percent. The number of people 155 years of age or older has increased by 3,276,800 percent. The number of people 160 years of age or older has increased by 6,553,600 percent. The number of people 165 years of age or older has increased by 13,107,200 percent. The number of people 170 years of age or older has increased by 26,214,400 percent. The number of people 175 years of age or older has increased by 52,428,800 percent. The number of people 180 years of age or older has increased by 104,857,600 percent. The number of people 185 years of age or older has increased by 209,715,200 percent. The number of people 190 years of age or older has increased by 419,430,400 percent. The number of people 195 years of age or older has increased by 838,860,800 percent. The number of people 200 years of age or older has increased by 1,677,721,600 percent. The number of people 205 years of age or older has increased by 3,355,443,200 percent. The number of people 210 years of age or older has increased by 6,710,886,400 percent. The number of people 215 years of age or older has increased by 13,421,772,800 percent. The number of people 220 years of age or older has increased by 26,843,545,600 percent. The number of people 225 years of age or older has increased by 53,687,091,200 percent. The number of people 230 years of age or older has increased by 107,374,182,400 percent. The number of people 235 years of age or older has increased by 214,748,364,800 percent. The number of people 240 years of age or older has increased by 429,496,729,600 percent. The number of people 245 years of age or older has increased by 858,993,459,200 percent. The number of people 250 years of age or older has increased by 1,717,986,918,400 percent. The number of people 255 years of age or older has increased by 3,435,973,836,800 percent. The number of people 260 years of age or older has increased by 6,871,947,673,600 percent. The number of people 265 years of age or older has increased by 13,743,895,347,200 percent. The number of people 270 years of age or older has increased by 27,487,790,694,400 percent. The number of people 275 years of age or older has increased by 54,975,581,388,800 percent. The number of people 280 years of age or older has increased by 109,951,162,777,600 percent. The number of people 285 years of age or older has increased by 219,902,325,555,200 percent. The number of people 290 years of age or older has increased by 439,804,651,110,400 percent. The number of people 295 years of age or older has increased by 879,609,302,220,800 percent. The number of people 300 years of age or older has increased by 1,759,218,604,441,600 percent. The number of people 305 years of age or older has increased by 3,518,437,208,883,200 percent. The number of people 310 years of age or older has increased by 7,036,874,417,766,400 percent. The number of people 315 years of age or older has increased by 14,073,748,835,532,800 percent. The number of people 320 years of age or older has increased by 28,147,497,671,065,600 percent. The number of people 325 years of age or older has increased by 56,294,995,342,131,200 percent. The number of people 330 years of age or older has increased by 112,589,990,684,262,400 percent. The number of people 335 years of age or older has increased by 225,179,981,368,524,800 percent. The number of people 340 years of age or older has increased by 450,359,962,737,049,600 percent. The number of people 345 years of age or older has increased by 900,719,925,474,099,200 percent. The number of people 350 years of age or older has increased by 1,801,439,850,948,198,400 percent. The number of people 355 years of age or older has increased by 3,602,879,701,896,396,800 percent. The number of people 360 years of age or older has increased by 7,205,759,403,792,793,600 percent. The number of people 365 years of age or older has increased by 14,411,518,807,585,587,200 percent. The number of people 370 years of age or older has increased by 28,823,037,615,171,174,400 percent. The number of people 375 years of age or older has increased by 57,646,075,230,342,348,800 percent. The number of people 380 years of age or older has increased by 115,292,150,460,684,697,600 percent. The number of people 385 years of age or older has increased by 230,584,300,921,369,395,200 percent. The number of people 390 years of age or older has increased by 461,168,601,842,738,790,400 percent. The number of people 395 years of age or older has increased by 922,337,203,685,477,580,800 percent. The number of people 400 years of age or older has increased by 1,844,674,407,370,955,161,600 percent. The number of people 405 years of age or older has increased by 3,689,348,814,741,910,323,200 percent. The number of people 410 years of age or older has increased by 7,378,697,629,483,820,646,400 percent. The number of people 415 years of age or older has increased by 14,757,395,258,967,641,292,800 percent. The number of people 420 years of age or older has increased by 29,514,790,517,935,282,585,600 percent. The number of people 425 years of age or older has increased by 59,029,581,035,870,565,171,200 percent. The number of people 430 years of age or older has increased by 118,059,162,071,741,130,342,400 percent. The number of people 435 years of age or older has increased by 236,118,324,143,482,260,684,800 percent. The number of people 440 years of age or older has increased by 472,236,648,286,964,521,369,600 percent. The number of people 445 years of age or older has increased by 944,473,296,573,929,042,739,200 percent. The number of people 450 years of age or older has increased by 1,888,946,593,147,858,085,478,400 percent. The number of people 455 years of age or older has increased by 3,777,893,186,295,716,170,956,800 percent. The number of people 460 years of age or older has increased by 7,555,786,372,591,432,341,913,600 percent. The number of people 465 years of age or older has increased by 15,111,572,745,182,864,683,827,200 percent. The number of people 470 years of age or older has increased by 30,223,145,490,365,729,367,654,400 percent. The number of people 475 years of age or older has increased by 60,446,290,980,731,458,735,308,800 percent. The number of people 480 years of age or older has increased by 120,892,581,961,462,917,470,617,600 percent. The number of people 485 years of age or older has increased by 241,785,163,922,925,834,941,235,200 percent. The number of people 490 years of age or older has increased by 483,570,327,845,851,669,882,470,400 percent. The number of people 495 years of age or older has increased by 967,140,655,691,703,339,764,940,800 percent. The number of people 500 years of age or older has increased by 1,934,281,311,383,406,679,529,881,600 percent. The number of people 505 years of age or older has increased by 3,868,562,622,766,813,359,059,763,200 percent. The number of people 510 years of age or older has increased by 7,737,125,245,533,626,718,119,526,400 percent. The number of people 515 years of age or older has increased by 15,474,250,491,067,253,436,239,052,800 percent. The number of people 520 years of age or older has increased by 30,948,500,982,134,506,872,478,105,600 percent. The number of people 525 years of age or older has increased by 61,897,001,964,269,013,744,956,211,200 percent. The number of people 530 years of age or older has increased by 123,794,003,928,538,027,489,912,422,400 percent. The number of people 535 years of age or older has increased by 247,588,007,857,076,054,979,824,844,800 percent. The number of people 540 years of age or older has increased by 495,176,015,714,152,109,959,649,689,600 percent. The number of people 545 years of age or older has increased by 990,352,031,428,304,219,919,299,379,200 percent. The number of people 550 years of age or older has increased by 1,980,704,062,856,608,439,838,598,758,400 percent. The number of people 555 years of age or older has increased by 3,961,408,125,713,216,879,677,197,516,800 percent. The number of people 560 years of age or older has increased by 7,922,816,251,426,433,759,354,395,033,600 percent. The number of people 565 years of age or older has increased by 15,845,632,502,852,867,518,708,790,067,200 percent. The number of people 570

[REDACTED]

## 1.5 Documents reviewed to inform this report

Document title & date	
<b>IASP docs from NCB</b>	
A	2018 Birmingham Task Order IASP.11072018
B	2018 Case Study - Assessment and provision of Need
C	2018 Case Study - Innovative Practice October 2018
D	2018 IASP self-review
E	2019 Birmingham IASP service operational plan docx
F	2019-20 Birmingham Task Order IASP TO SIGN
G	2019-21 operational plan
H	2020-21 Birmingham IASP contract variation SIGNED
I	2020-21 Birmingham IASP service operational plan
J	2021 B'ham Oct reporting
K	2021 Birmingham IASP service operational plan updated
L	2021 March report
M	2021-22 Birmingham IASP Task Order
N	2022 Bham contract check-in report form
<b>From Parent Carer Forum</b>	
O	bpcf-sendiass-partnership-agreement (1) (1)
<b>From SENDIASS</b>	
1	Appeal Rates Birmingham & Hampshire comparator <b>Data included 2014-19</b>
2	myth busters <b>created 18.2.21</b>
3	Staffing - SENDIASS Birmingham <b>April 2022</b>
4	1. Birmingham SENDIASS Board Remit <b>Undated</b>
5	4. SEND Statutory Process Training - PfA Team <b>16th Sept 2021</b>
6	5. SEND Statutory Process Training - CAMHS ST <b>4.10.21</b>
7	Agenda - Parents SENDIASS meeting <b>dated 20.9.21</b>
8	Birmingham SEND Multi-Agency Front Door <b>dated 3.1.22</b>
9	Birmingham SENDIASS Conference <b>30 Nov 2021</b>
10	Flyer SENDIASS Professionals Meeting Nov <b>19.11.21</b>
11	JD - SENDIASS Head of Service <b>Created 3.3.19 last updated 29.9.21</b>
12	Minimum Standards Self-assessment template with notes - SENDIASS Birmingham <b>23.4.22</b>
13	Parent Partnership Group <b>2022</b>
14	pg3(A) Allocation Sheet (EHC Needs Assessment)
15	pg3(B) Allocation Sheet (EHCP Progress)
16	pg3(C) Allocation Sheet (EHCP Content)
17	pg3(D) Allocation Sheet (Placement)
18	pg3(E) Allocation Sheet (School or Setting Meeting)
19	pg3(F) Allocation Sheet (Annual Review)
20	pg3(G) Allocation Sheet (Exclusion)
21	pg3(H) Allocation Sheet (Other)
22	pg4 Professionals involved
23	pg5 Family Targeted Assessment
24	pg6 Genogram
25	pg7 CYP Views & Details of Direct Work
26	pg8 Signs of Safety Form



27	pg9(i) Working with Parents & Carers
28	pg9(ii) Working with CYP
29	pg14(i) Quality Assurance Form Parent Carer
30	pg14(ii) Quality Assurance Form - Young Person
31	SEND Statutory Process Training - BCT Disabled Social Care Team <b>8.10.21</b>
32	SENDIASS Board Agenda - Monday <b>17th January 2022</b>
33	SENDIASS Board Minutes <b>17th January 2022</b>
34	Young People's Participation Charter <b>Undated</b> see line 35
35	Young Peoples Participation Charter <b>Created 2.12.21</b>
<b>xSENDIASS - Information Pack (not dated for creation, review or update)</b>	
36	1. SENDIASS Information Pack Contents Page
37	Leaflet SENDIASS
38	SENDIASS - Annual Review Process
39	SENDIASS - Annual Review Timescale Chart
40	SENDIASS - Appeals
41	SENDIASS - Areas of SEND
42	SENDIASS - Assessment Process
43	SENDIASS - Assessment Timescale
44	SENDIASS - Confidentiality Policy
45	SENDIASS - Definition of Advocacy
46	SENDIASS - Disability Discrimination
47	SENDIASS - EHCP 'Cease to Maintain'
48	SENDIASS - Exclusions
49	SENDIASS - Home to School Transport
50	SENDIASS - Impartiality Policy
51	SENDIASS - Information for Young People
52	SENDIASS - Issuing an EHCP
53	SENDIASS - Mediation
54	SENDIASS - Naming a Placement
55	SENDIASS - Personal Budget
56	SENDIASS - SEND Support & School Funding
57	SENDIASS - Tribunal Hearings
58	SENDIASS - What are Special Needs
59	SENDIASS - What is an EHCP
60	SENDIASS - Young People with SEND
<b>SENDIASS Annual Report (6) (from SENDIASS)</b>	
61	SENDIASS Annual Report (1) 1.9.14-31.8.15
62	SENDIASS Annual Report (2) 1.9.15-31.8.16
63	SENDIASS Annual Report (3) 1.9.16-31.8.17
64	SENDIASS Annual Report (4) 1.9.17-31.8.18
65	SENDIASS Annual Report (5) 1.9.18-31.8.19
66	SENDIASS Annual Report (6) 1.9.19-31.8.20
<b>Joint Commissioning – 2021 (from SENDIASS)</b>	

67	Item 1 - Covering Note <b>12th January 2021</b>
68	Item 2 - SENDIASS Joint Commissioning Paper <b>30th June 2020</b>
69	Item 3 - Schedule A SLA Joint Commissioning <b>Created 28.12.19</b>
70	Item 4 - Schedule B Joint funding SENDIASS <b>Created 27.6.20</b>
71	Item 5 - Schedule C Financial Overview SENDIASS <b>created 26.12.19</b>
72	Item 6 - Schedule D data processing <b>created 26.12.19</b>
73	Item 7 - Schedule E Joint Funding SLA SENDIASS <b>created 26.12.19</b>
74	Item 8 - Minimum Standards with DfE DH sign off
75	Item 9 - Birmingham IASP contract variation 20-21 SIGNED <b>31.3.20</b>
76	Item 10 - Cat 2 Restrictions. Action Plan <b>Created 9.6.20</b>
77	Item 11 - SENDIASS Operational Plan <b>Created 27.6.20</b>
78	Item 12 - SENDIASS Leaflet
79	Item 13 - The Role of SENDIASS in the Community Family Educational Recovery Programme (2020) <b>Created 27.6.20</b>
80	Item 14 - Quality Assurance Form

