

Birmingham City Council
Education and Children's Social Care Overview and
Scrutiny Committee
Date: 17th May 2023



Subject: Narrative report: SEND Improvement Programme
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1. Background and Context

1.1. In September 2018, as a result of an Ofsted/CQC Inspection of SEND services, Birmingham received a Written Statement of Action (WSOA) outlining 13 areas of significant weakness. The local area was judged unable to meet the needs of children with additional needs/SEND through appropriate provision.

1.2. A re-inspection by Ofsted and CQC from 24th to 27th May 2021 looked at Birmingham's provision (for children with additional needs/SEND) and confirmed (in the letter dated 6 Jul 2021 from the chief inspector):

"The area has made sufficient progress in addressing one of the 13 significant weaknesses identified at the initial inspection. The area has not made sufficient progress in addressing 12 significant weaknesses."

1.3. On 15 Oct 2021, the Minister wrote and informed Birmingham City Council that John Coughlan was their appointed representative under Statutory Direction to 'Direct' Birmingham in how the local area must improve the approach and the provision for children with additional needs/SEND. [The statutory direction is at this link.](#)

1.4. In December 2021, the SEND Improvement Board (SIB) convened, drawing together the most senior strategic leaders from all relevant stakeholders across Birmingham. John Coughlan chairs this group and is accountable to Ministers for the progress made by the local area to address the areas of significant weakness and to monitor the performance against the outcomes required.

1.5. The DfE and NHS England have dedicated representatives observing and checking progress via 'critical friend' analysis to help prepare the

local area for future inspection(s). We provide a detailed “stocktake” of progress to them every 6 months.

2. The Accelerated Progress Plan

- 2.1. In response, Birmingham’s SEND partnership, consisting of council, local and national health partners and school leaders developed the Accelerated Progress Plan (APP) to address the areas of significant weakness.
- 2.2. The council committed additional resources to the SEND Improvement journey and appointed a SEND Transformation Team to work with the local health and social care partners (and their sub-contractors) and educational settings. All the elements of the plan were grouped together into four Objectives:
 - System Leadership (Objective 1)
 - Getting the Basics Right (Objective 2)
 - Working Together Well (Objective 3)
 - Pathways (Objective 4)
- 2.3. This gave us four coherent units of work, each led by a project manager under the direction of the Programme Manager. The programme reported monthly to the SEND Management Group and SEND Improvement Board (chaired by John Coughlan the DfE appointed Commissioner) during 2022 and it now reports every six weeks to both groups.

3. DfE Stocktakes

- 3.1. Two DfE stocktakes have taken place to date, in June 2022 and December 2022.
- 3.2. In addressing the areas of significant weakness, the local area has made progress in many ways, and there are areas which continue to evolve before they become Business as Usual (BAU).

4. System Leadership (Objective 1)

- 4.1. Relationships with parents, carers, children and professionals are at the heart of our practice, working in partnership to achieve the best possible outcomes for each child / young person. We can address challenges and concerns through restorative practice. A refreshed [SEND Strategy](#) was approved by Cabinet on 21st March 2023 for the next five years together with a new [Inclusion Strategy](#). A launch date

of 10th July 2023 has been confirmed for both strategies. These link to the Children and Young People's Plan.

5. Birmingham SEND strategy

- 5.1. The strategy was co-produced in partnership with school leaders, parents and young people between May and October 2022. Multi-agency sessions were held to ensure a wide cross section of parents, professionals and other stakeholders.
- 5.2. We engaged with children and young people throughout the co-production of the SEND and Inclusion Strategies. The voice of the child was sourced via eight different workshops run in special schools across all age ranges plus two in the community with those who had been through education and were still in receipt of some support. Their comments were used to create the priorities and content of the strategies and also how we will measure success.
- 5.3. The SEND Strategy has eight priorities:
 1. Effective early identification of needs with appropriate and timely assessments across education, health and care
 2. Collaborative graduated approach delivered consistently across the city, ensuring the right support and provision are in place as soon as possible
 3. Smooth transition across education, health and care at every stage of a young person's life, particularly the transition to adult life
 4. A comprehensive review of the provision in educational settings across Birmingham to deliver an offer which is aligned to national and regional best practice
 5. District based model of provision, right support, right place, right time with improved access to provision which meets the needs of families, children and young people in line with the Children and Families Act 2014 and the SEND Code of Practice.
 6. Excellent communication and engagement between children and young people, families, education, health and care services, including schools.
 7. A resilient, skilled and sustained SEND partnership team that delivers impact and positive outcomes for all children and young people who have additional needs.
 8. Improved collection, publication and analysis of data to inform the Birmingham SEND priorities in supporting children and young people in the future.

6. The Local Offer website

- 6.1. Content on the SEND Local Offer website (<https://www.localofferbirmingham.co.uk/>) is regularly updated and it is designed to be easy to use and find relevant information. An [EHCP handbook](#) was developed with the Parent Carer Forum to explain the process for requesting an EHCP and the Education Health and Care Plan Needs Assessment (EHCNA) process.
- 6.2. The Local Offer website now has web pages that support service users, their families/carers, and professionals to access helpful information that will improve their experience(s).
- 6.3. The SEND Local Offer website improvements have been co-produced with various stakeholders. It's now easier to find what you want on the site, content is improved, and there is now a searchable directory of SEND support.

Parent - I have found it much easier to navigate than the previous design, there are fewer steps to find the information needed.

- 6.4. There was a 28% uplift in unique page views from 1 Jan 2023 to 1 Feb 2023 compared with the same period last year. The 27,932 unique page views is 174% of the monthly target set for visitors to the site (16,000).
- 6.5. There is an open survey to baseline the feedback regarding the Local Offer website. Responses so far show 70% of people find navigation easier and more than 60% find the content helpful.
- 6.6. There is a video on the home page which explains what the website is and what it includes: <https://youtu.be/TcAbIK6EVQ0>. The signed version is at <https://youtu.be/eG6co9SAhK0>

7. Getting the Basics Right (Objective 2)

- 7.1. There is improved timeliness in the process, and enhanced communication with transparent and consistent approaches. Families have a clearer understanding of the processes. The number of EHCPs issued within the 20-week statutory timelines has increased from 51% in July 2021 to 67% in February 2023, in line with the national indicator of 65%.
- 7.2. The way the SENAR team works has been changed (eg. focus on age groups and/or geography) to better reflect the needs of the families we

support and we have developed robust standard processes making things more efficient.

- 7.3. There has been an interim restructure of the positions (levels and deployment) which currently is operating well. Funding was approved as part of the Council's Financial Plan by Full Council on 28th February 2023 and we can now move forward with the permanent redesign of the SENAR Service. This will create a sustainable and consistent SENAR Service.
- 7.4. Over 120 new members of staff have been recruited into the SENAR service, increasing the capacity to complete casework. At the time of the last Ofsted visit in 2021 the number of staff was 24. Most of these new staff however are not permanent employees, therefore a review of the SENAR team has taken place and a restructure has been approved which is being implemented in April 2023. This will result in the appointment of permanent employees leading to improved stability of the service and reduced staff churn.
- 7.5. All SENAR staff can make and receive calls through MS Teams and there is a voicemail function when calls are received out of hours. Previously this function was not available, making it difficult for parents and carers and young people to engage with the team. All staff have standardised their email signatures and phone numbers making them easily contactable by the families we support. The service structure is shared on the SEND local offer website and updated regularly to ensure current relevant information is always available.
- 7.6. Children and young people have their needs identified and met earlier, improving outcomes and reducing uncertainty for parents, carers and children and schools. Parents and carers and young people can hold schools and other partners accountable for ensuring provision is in place.
- 7.7. Our health partners have instigated daily meetings with coordinators to ensure the management of assessments is in place. This provides assurance that the allocation of waits internally and to third-party providers are effectively managed. For February 2023 the total number of children waiting is 974 with an average wait of 47 weeks. This is a reduction from October 22, with waits of 1,866 and an average wait of 87 weeks. The forecast to meet an average wait of 33 weeks by April 23 is currently on track.
- 7.8. The Balanced System for Speech Language and Communication Needs (SCLN) has become a cornerstone of the graduated approach (universal, targeted and specialist provision) with collaborative working between professionals resulting in children and young people receiving the right support in the right place at the right time. There are challenges with the availability of qualified Speech and Language

Therapists as well as the culture change needed to deliver this work effectively. However, it is a proven and well used approach nationally that delivers significant progress for children and young people, especially effective in early years and primary phase(s) to improve outcomes for children and young people as they get older.

- 7.9. We ensure parents and education settings understand the recommended way forward for the child and then implement those next steps effectively. Where schools have returned the annual review paperwork within two weeks, SENAR has achieved an annual review completion rate of 94%. The average number of annual reviews processed monthly has increased from 352 in 2021/22 to a projected average of 690 in 2022/23.

8. SENAR

- 8.1. More timely monitoring of CYP needs and provision. More timely changes in need or provision have been considered, and where relevant, the EHCP has been updated, ensuring children's current needs are met with effective provision. The EHCP gives an up-to-date view of the child, which supports professionals in targeting intervention and support effectively.
- 8.2. We are improving the quality of the EHCP content and correspondence with families, though more needs to be done. Quality Assurance (QA) of information provided throughout the needs assessment process and QA of the draft and final EHCNA/P paperwork content takes place. Invision, a tool used by multiple Local Authorities is used to QA the EHCPs, which allows benchmarking of quality against national standards and other local authorities. We monitor time frames ensuring compliance, transparency and accountability across the local area systems and teams. We have a better Annual Review process providing more timely adjustments to the provision required by each child to meet their changing needs.
- 8.3. As a result, the support children and young people receive via universal and targeted services is greatly improved. We are removing delays between the assessment of need and the delivery of interventions, resulting in more timely interventions and better clarity for children and young people, families and professionals.

9. Transitions

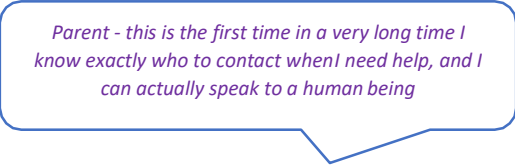
- 9.1. We ensure children, young people, and families know what setting they will be attending at the next stage of their education. The phase transfer process placed two fundamental principles of the Code of Practice as central: the presumption of mainstream education and parental preference. Effective transition planning enables timely

completion of phase transfers and orientation of children into their new settings. This includes multi-professional support to settings to allow them to meet needs confidently and competently. Where there are concerns from parents about the named placement, there is time for these to be addressed, and, where appropriate, another setting to be identified.

- 9.2. We met the Statutory Deadlines to issue school phase transfers for EHCPs in 2023, moving from a position of 0% in 2021 to:
- 2023 = 99% (2022 = 91%) of Reception placements were confirmed
 - 2023 = 99% (2022 = 97%) of Year 2 placements were confirmed
 - 2023 = 99% (2022 = 99%) of Secondary placements were confirmed

10. Working Together Well (Objective 3)

- 10.1. Professionals are improving services to families by all pulling in the same direction with one clear way of working.



Parent - this is the first time in a very long time I know exactly who to contact when I need help, and I can actually speak to a human being

- 10.2. Leaders in Health, Social Care and Education agreed to a Joint Working Protocol. And all parties are all committed to working more effectively together.
- 10.3. We have created different ways we can improve communications with parents and carers (and other stakeholders) as outlined in the new [Communications and Engagement Strategy](#). Regular newsletters are available [here](#), and a SEND Partnership Facebook page is in operation www.facebook.com/SEnDBirmingham
- 10.4. Eight 'Have your say' events were held, where parents and carers were invited to share their views and experiences of SEND support and services, co-production, and the SEND Local Offer website.

11. Co-production

- 11.1. Co-production is a pillar of how we will work with children and young people, families, and all of those within the local partnership have signed up to the co-production charter. We have recruited a co-production and engagement lead tasked with bringing clarity and

embedding co-production within the ways of working across the local SEND landscape.

- 11.2. The Co-production Framework and Charter, published in Summer 2022, sets out how organisations in the SEND Partnership will work with parents, children and young people and their families.
- 11.3. Co-production has four elements: co commissioning, co-design, co-delivery and co-assessment and parents, children and young people will be involved in all of these where appropriate.
- 11.4. Co-production must also take place at an individual level and parents, carers, children and young people must be included in the EHCNA, EHCP and Annual Review processes as equals with a say on what support is required and how it is delivered. This is a “person centred planning” approach.
- 11.5. Older children and young people have told us that they want their own voices to be heard without mediation via parents or carers. We are co-producing a young peoples’ engagement strategy with the groups of young people and relevant professionals.

12.Reducing Waiting Times

- 12.1. We have reduced waiting times in some services and have launched an electronic referral form to streamline the referral process and reduce any confusion on how referrals should be made to the local Neurodevelopmental pathway (NDP). The Local Offer website also has information that will help people have a better experience on the NDP.
- 12.2. We have worked with external partners to transfer thousands of referrals to them to reduce the number of CYP waiting for ASD assessment in the face of increased service demand. We have written to all referrers explaining changes to the process. New ASD referrals are now all directed to NDP.
- 12.3. Investment is being made in the balanced system for therapy provision across the local area. This will train staff to assess needs and provide support within their own professional context in the right place and at the right time, resulting in more timely interventions for children and young people with therapy needs.
- 12.4. This approach will also be used to deliver a graduated response across the partnership for many other services as we evolve a locality - based delivery model across Birmingham.

13. Case Management

- 13.1. We are improving data recording, case management and tracking processes. We have increased data visibility where appropriate and reduced the use of multiple spreadsheets. The aim is to have complete data for each child on NEXUS (our current case management system) enabling a full picture of the child's needs. We hope to have the full system embedded in early 2024.
- 13.2. We have effectively enhanced our tracking processes to support young people into opportunities post-16. We continue to build opportunities for young people post-16 and post-19 and ensure sustainable outcomes.

14. Complaints and appeals – an improving picture

- 14.1. In the last 12 months, there has been an average of 26 formal complaints per month compared to an average of 36 per month in 2021-22. This indicates that concerns are being resolved with parents without the need for them to make formal complaints
- 14.2. The average number of days to close a formal complaint is 18.3 days in the last 6 months compared to an average of 25 since Feb 2022. This minimises the anxiety for parents while they wait for a response.
- 14.3. In the past 12 months there have been 406 mediations compared to 158 in 2021-22. This means more concerns are being resolved informally, without parents needing to undergo the lengthy tribunal process.
- 14.4. Over the last 6 months, 31.5% of mediations overturned the existing decision (low is good). This is indicative of reasonable flexibility on the part of the LA to reach an agreement with families but also confirms the robustness of decision-making within the LA.
- 14.5. Tribunals following mediation equate to only 15% of tribunal cases (low is good). This demonstrates that even where the original LA decision has not been overturned, most parents are assured through the mediation process and do not feel the need to progress cases further.

15. Pathways (Objective 4)

- 15.1. A new Inclusion Strategy which links closely to the Children's Plan has been agreed by Cabinet. The Inclusion Strategy (which applies to all children in Birmingham) sets out the shared vision, key principles, principles of practice and contextual factors to ensure that across the partnership we are working effectively to identify and meet the needs

of Birmingham's children, young people and young adults, for the next five years. It has three key principles:

1. Recognition of the UN Convention on the Rights of the Child
2. Enabling children, young people and young adults to thrive is everyone's responsibility and success is dependent on strong and effective partnership working
3. Some children, young people and young adults currently need support in order to thrive and achieve as well as their peers.

16. Improved SEND provision in mainstream schools in Birmingham

- 16.1. Some children do not qualify for an EHCP but need additional support to thrive at school.
- 16.2. There are also some children with an EHCP who do not require a place in a special school but require specific support to make progress at school.
- 16.3. The Developing Local Provision (DLP) project is an additional £14m investment for mainstream schools and early years settings to build and develop their SEND knowledge, skills, and provision to help pupils with SEND do better within mainstream schools.
- 16.4. There is excellent evidence of the improvement that some of these projects have made to children with SEND in both secondary and primary mainstream schools (the DLP is available to all mainstream schools). An evaluation of the first phase of DLP, undertaken in October 2022, is included with this report as Appendix 1.
- 16.5. DLP has been running for over a year in Birmingham, and the projects already in place are improving the progress and outcomes for children and young people:
 - 29% increase in SEND pupils achieving the expected standard – Year 1 Phonics screening
 - 12% increase in SEND pupils on track to reach a 'Good Level of Development (GLD)*'
 - 16.5% increase in SEND pupils reaching early learning goals in Communication and Language
 - 18.6% increase in SEND pupils reaching early learning goals in Reading
 - 14% improvement in social thinking and problem-solving (57% – 71%)
 - 1 Year 8-month increase in reading age and comprehension age (Accelerated Reader)

- 37% increase in receptive and expressive language scores (16-53%)
- 16.6. As part of the DLP, the Special School Outreach Service has been developed to provide additional specialist SEND support for children and young people and school staff in our mainstream schools.
 - 16.7. Mainstream schools can now access support from special schools directly to meet the needs of more pupils through a referral system. This initiative will provide and build additional capacity across Birmingham to improve provision and outcomes for children and young people with SEND.
 - 16.8. For more information, please read the [DLP Newsletter](#).
 - 16.9. DLP 'Phase 2' is launching with a series of roadshows in April and May 2023. Using the intelligence gathered from the work over the past three years, the team(s) are working with education settings to deliver the interventions that have the greatest impact. Eg. speech and language therapists support groups of children, train staff in speech therapy, and supply speech and language programmes across the partnership of schools. This has resulted in 16.5% increase in SEND pupils reaching early learning goals in Communication and Language. There are many more examples and these will be implemented across the city as we move forward with DLP Phase 2.
 - 16.10. We have made a difference by raising the profile of children vulnerable to exclusion or suspension from school across the local area leading to improve identification and to improve outcomes.
 - 16.11. We have instigated robust processes and improved intelligence around the cohort of children with EHCPs who are out of school. With earlier identification, we can inform future practice to prevent/reduce the number of children in that cohort falling out of education. This is alongside improved identification of children and young people who do (and those who do not) need support from the Home Bridging Team. We are ensuring children with EHCPs get a better-quality educational offer thus improving their outcomes.
 - 16.12. We robustly hold partners, including schools, to account for continuing to provide education for children that previously would have been referred to the Home Bridging Team on a reduced educational offer.

17. Other quotes supporting the distance travelled so far.

Comments from a CAT teacher about how much better communication is within SENAR, and the same from the SEND lead for the FMAT academies who was a recent witness at a hearing. The praise from this witness was also very complimentary about the Tribunal team regarding keeping in the loop, explaining the process and generally being supportive of the school

Leanne Burke, our SENCO has just reported that the communication with SENAR (yourselves) has been faultless and the best amongst all the LAs we work with. This is the first time I have heard this in the 8 years we have run Riverside. Thank you so much for making our job easier and less stressful

In interactions with – particularly mainstream – schools and other services the mood in relation to dealing with us is really buoyant and positive. Things like “Do you work with so-and-so? Oh they’ve been really helpful on another case”

18. What we are doing now

- 18.1. In addition to maintaining the momentum for all of the above activities, we will also continue to evolve and enhance the following. We still have a long way to go to become the best we can be.
- 18.2. We will ensure the development of the above actions and the following activities continue so we provide the best possible quality, collaborative and partnership approaches which result in better outcomes for our children and young people in Birmingham.
- 18.3. Through multi-agency task and finish groups and through the continued reinforcement of good practice and co-production with families, we are preparing education, health and social care colleagues for the next Ofsted and CQC inspection.
- 18.4. Through embedding quality assurance (QA) systems (audits and analysis) we will learn from, share and build upon good practice. Using existing models of QA from partners internally and externally, we will improve multi-agency working, understanding between partners and the delivery of services to families and colleagues.
- 18.5. We have some distance to travel with QA but have commenced reviews and audits of: data collection and cleansing; multi-agency decision making panels; Standard Operating Procedures; co-production charter and the embedding of practice; engaging families in

processes which affect how they access the right type of provision to meet needs and the content of the plans which relate to them;

- 18.6. Induction and other handbooks in production to make learning and development and on-boarding of staff much more effective now and in the future.
- 18.7. A partnership-wide Learning and Development and Workforce Development Strategy is being evolved to ensure we attract and retain the best talent for Birmingham.
- 18.8. Collecting, collating, recording and reporting data across the partnership still needs significant work to become more effective in supporting strategic decision-making. There are plans to build a dedicated Children and Families data team in time for September 2023.
- 18.9. Plans are in place, and we now move to gain the commitment of the partnership to implement the delivery of the Inclusion Strategy, The Children and Young People's Plan and the SEND Strategy.
- 18.10. A number of health initiatives will continue to reduce the waiting times for initial assessment and accessing services. Eg. increased capacity or therapy provision, autism diagnosis.
- 18.11. DLP will continue to roll-out Phase 2 and support settings to intervene as early as possible and deliver positive outcomes and progress for children and young people.
- 18.12. Work with Adults Social Care to continue to evolve the transition process as early as possible and through providing appropriate data so that decisions and plans can be made for individuals moving from children's to adult services.

19. Conclusion

The above is not just a 'Statutory Processing' or a SENAR issue. This overarching, partnership approach requires sustained commitment from all partners to the strategic and operational goals: *Being bold* and courageous, we will provide a place where *Birmingham children thrive*.

20. Appendices

Appendix 1: October 2022 evaluation of Phase 1 of DLP.