

BIRMINGHAM CITY COUNCIL

LEARNING, CULTURE AND PHYSICAL ACTIVITY OVERVIEW AND SCRUTINY COMMITTEE

**WEDNESDAY, 06 FEBRUARY 2019 AT 13:30 HOURS
IN COMMITTEE ROOMS 3 & 4, COUNCIL HOUSE, VICTORIA
SQUARE, BIRMINGHAM, B1 1BB**

A G E N D A

1 NOTICE OF RECORDING/WEBCAST

The Chairman to advise/meeting to note that this meeting will be webcast for live or subsequent broadcast via the Council's Internet site (www.civico.net/birmingham) 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 that they must declare all relevant pecuniary and non pecuniary interests arising from any business to be discussed at this meeting. If a disclosable pecuniary interest is declared a Member must not speak or take part in that agenda item. Any declarations will be recorded in the minutes of the meeting.

3 - 6

4 ACTION NOTES

To confirm the action notes of the meeting held on the 5th December 2018.

7 - 32

5 YOUNG PEOPLE AND MENTAL HEALTH

Anna Robinson, BEP Mental Health/Emotional Wellbeing Lead and Sarah Finch, Assistant Head, Colmers Secondary School and Sixth Form in attendance.

33 - 86

6 SPECIAL EDUCATIONAL NEEDS AND DISABILITY (SEND)

Cllr Kate Booth, Cabinet Member for Children's Wellbeing; Dr Tim O'Neill, Director for Education and Skills and Rachel O'Connor, Director of Planning

& Performance, B'ham and Solihull CCG in attendance.

87 - 92

7 **WORK PROGRAMME**

For discussion.

8 **DATE OF FUTURE MEETINGS**

To note the dates of future meetings on the following Wednesdays at 1330 hours in the Council House, Committee Rooms 3 & 4 as follows:-

6 March, 2019

17 April, 2019

9 **REQUEST(S) FOR CALL IN/COUNCILLOR CALL FOR ACTION/PETITIONS RECEIVED (IF ANY)**

To consider any request for call in/councillor call for action/petitions (if received).

10 **OTHER URGENT BUSINESS**

To consider any items of business by reason of special circumstances (to be specified) that in the opinion of the Chairman are matters of urgency.

11 **AUTHORITY TO CHAIRMAN AND OFFICERS**

Chairman to move:-

'In an urgent situation between meetings, the Chairman jointly with the relevant Chief Officer has authority to act on behalf of the Committee'.

BIRMINGHAM CITY COUNCIL

LEARNING, CULTURE AND PHYSICAL ACTIVITY (O&S)

COMMITTEE – PUBLIC MEETING

13:30 hours on Wednesday 5th December 2018, Committee Rooms 3 & 4 – Actions

Present:

Councillor Alex Aitken (Acting Chair)

Councillors: Gary Sambrook, Mike Sharpe and Martin Straker Welds.

Other Voting Representatives: Rabia Shami, Parent Governor and Sarah Smith, Church of England Diocese Representative

Also Present:

- Shagufta Anwar, Senior Intelligence Officer
 - Anne Ainsworth, Acting Corporate Director, Children and Young People
 - Tim Boyes, CEX, Birmingham Education Partnership (BEP)
 - Alan Michell, Interim Lead for School Admissions and Fair Access
 - Tracy Ruddle, Director of Continuous School Improvement, BEP
 - Amanda Simcox, Scrutiny Officer
 - Julie Young, Interim AD, Education Safeguarding
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1. NOTICE OF RECORDING

The Chairman advised that this meeting would be webcast for live or subsequent broadcast via the Council's Internet site (www.civico.net/birmingham) and that members of the press/public may record and take photographs except where there were confidential or exempt items.

2. APOLOGIES

Apologies were submitted on behalf of:

Councillors: Mariam Khan, Mary Locke, Kath Scott and Ron Storer.

Adam Hardy, Roman Catholic Diocese Representative.

3. DECLARATIONS OF INTERESTS

None.

4. ACTION NOTES

(See document 1).

RESOLVED:

The action notes of the meeting held on the 14th November 2018 were confirmed.

5. SCHOOL ATTAINMENT AND SCHOOL IMPROVEMENT

(See document 2).

Anne Ainsworth, Acting Corporate Director, Children and Young People; Julie Young, Interim AD, Education Safeguarding; Tim Boyes, Chief Executive, Birmingham Education Partnership (BEP); Tracy Ruddle, Director of Continuous School Improvement, BEP and Shagufta Anwar, Senior Intelligence Officer, presented the item.

The following were among the main points raised:

- BEP's greatest contractual duties are to maintained schools, however BEP has a commitment to working with all schools in Birmingham and every school in the city is a member of BEP.
- BEP's contract with the Council funds them at a level that allows them to monitor and work with a sub-set of maintained schools that are the most vulnerable under the schools causing concern criteria.
- BEP has been successful in bringing additional resource into the city through the Strategic School Improvement Fund.
- The biggest concern in the city is not with A level grades but with not knowing where people end up.
- The data presented for 16 – 18 does not provide all the other qualifications and pathways young people are engaged in.
- There is not a core budget for a universal offer for governor support. The Council's School and Governor Support Service is a traded service which is purchased by maintained schools and a number of academies.
- Members were interested in having a further briefing / seminar and this could focus on elements such as exclusions, SEND, off rolling and elective home education and the support that is available for the child and the family.
- BEP is developing an impact tool / quality assurance tool that will assist schools with how they spend their money.

RESOLVED:

The update was noted.

6. SCHOOL ADMISSIONS AND FAIR ACCESS

(See document 3 and the amended paper document 4)

Julie Young, Interim AD, Education Safeguarding and Alan Michell, Interim Lead for School Admissions and Fair Access, presented the item.

The following were among the main points raised:

- The service is currently going through a significant change programme whilst maintaining business as usual.
- In year admissions is a challenge as the Council does not co-ordinate this and there is a dependency on schools to manage the applications appropriately.

- The fair access protocol has been signed up to by the majority of schools and therefore all schools are obligated.
- Members requested they receive the admissions report sent to the DfE and it was suggested that an overview of schools that admitted children under the fair access protocol and the notes of the Governance Board meetings would be more useful to Members.

RESOLVED:

The update was noted and Members are to be forwarded an overview of schools that have admitted children under the fair access protocol and the notes of the Governance Board meetings.

7. WORK PROGRAMME

(See document 5).

The January 2019 committee meeting will be brought forward to discuss the budget and a mutually convenient time is to be agreed.

The Cabinet Member for Education, Skills and Culture to attend either the February 2019, March 2019 or April 2019 committee meeting. The update will include measurements and details on the high level statements already provided.

8. DATES OF MEETINGS

The dates of future meetings on the following Wednesdays at 1330 hours in the Council House were noted. However, as per the discussion under the work programme the 9th January 2019 meeting will be brought forward to allow for a focus on the budget before the end of the consultation period in December 2018.

9. REQUEST(S) FOR CALL IN/COUNCILLOR CALL FOR ACTION/PETITIONS

None.

10. OTHER URGENT BUSINESS

None.

11. AUTHORITY TO CHAIRMAN AND OFFICERS

RESOLVED:

That in an urgent situation between meetings the Chair, jointly with the relevant Chief Officer, has authority to act on behalf of the Committee.

The meeting ended at 15.40 hours.



Young People and Mental Health

- 1.1 Members have previously had a broad discussion on young people and mental health and this involved Erin Docherty, Senior Nurse Lead, Forward Thinking Birmingham; Joanne Thurston, Chief Operating Officer and Karen Hansford, Head of Universal Children's Services 5-19, Birmingham Community Healthcare NHS Foundation Trust, attending the 5th September 2018 committee meeting.
- 1.2 At the 14th November 2018 committee meeting, Amanda Daniels, Principal Educational Psychologist, Birmingham City Council attended and the discussion included:
- The Mental Health and Behaviour in Schools DfE publication, which talks about the need for a whole school approach to mental health and makes reference to the role of Educational Psychologists.
 - The workforce needing support and they use the analogy of "putting your oxygen mask on first" so staff are in a good place to support the children they are looking after.
 - The service is hoping to develop a trauma informed model behaviour policy for Birmingham schools. This has come out of work that has been going on nationally, for instance, school exclusions can be damaging to a child who has experienced rejection in the past. They would like the backing of Councillors to promote this.
 - Most schools are very good at using the service and other services, such as the Communication Autism Team and the Pupil and Schools Support Service.
- 1.3 Members also visited Pause as part of the evidence gathering session on the 14th November 2018. Pause is Forward Thinking Birmingham's city centre drop-in service, run by The Children's Society and based in Digbeth. Here Members met with Leroy McConnell, Mental Health, Youth Work/Participation Lead, volunteers and staff who took Members on a tour around the centre. The discussion included:
- Pause currently has a pop up version of the service running from The University of Birmingham and sometimes has a pop-up service running from the Lighthouse Young People's Centre in Aston.
 - Measuring the effectiveness of the service - people come back and say 'thank you'.
 - The need to promote the service and this is being looked at.
 - Approximately 10,000 individuals visited Pause in 2017 and 8% - 10% had an onward referral.
- 1.4 As Members are interested in discussing work that is being undertaken regarding mental health in schools, Anna Robinson, BEP Mental Health/Emotional Wellbeing Lead and Sarah Finch Assistant Head, Colmers Secondary School and Sixth Form have been invited to attend today's Committee meeting.

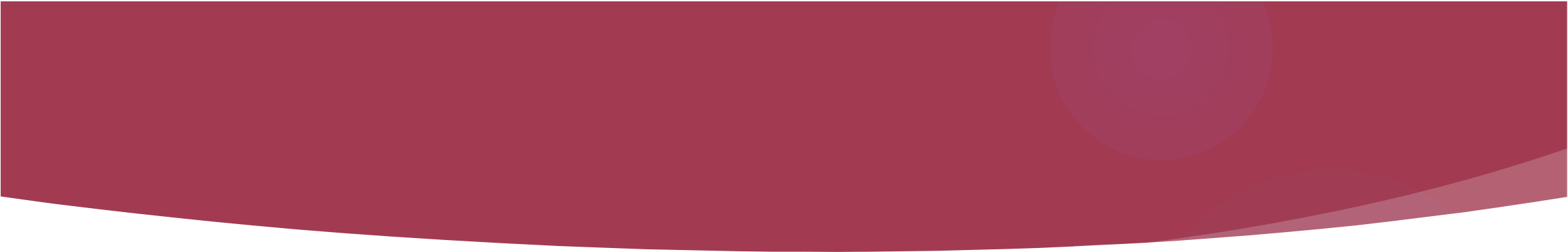
Birmingham Education Partnership – supporting mental health and wellness

FEBRUARY 2018

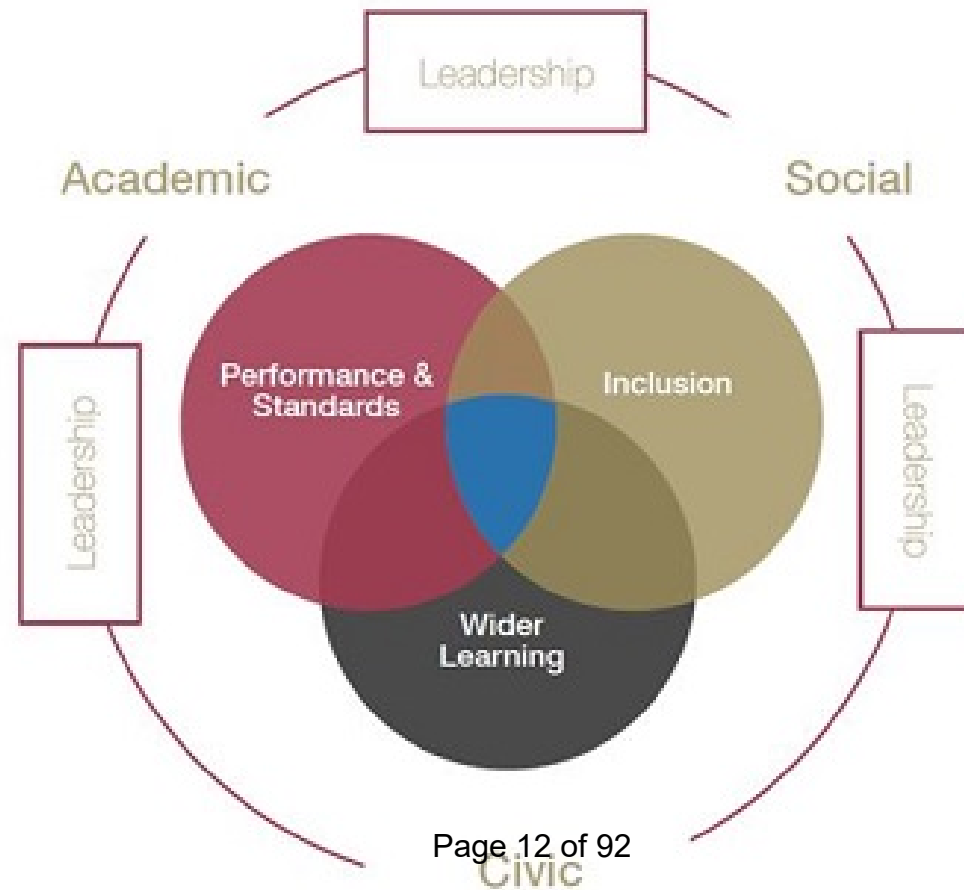


Task for today

- ▶ Anna Robinson – Mental Health/Emotional Wellbeing Lead, Birmingham Education Partnership
- ▶ Sarah Finch – Assistant Head, Colmers Secondary School and Sixth Form
- ▶ To share with you BEPs current and emerging work around mental health/mental wellness

- 
- ▶ Check in around BEP's model and why BEP are in this field
 - ▶ Check in around 'how it is around here'
 - ▶ Give a brief overview of current and emerging work for BEP in this area

BEP school improvement model



Mental health and school improvement?

“Schools are powerhouses of emotion as individuals engage with each other, with learning, with their values, and with the everyday pleasures, excitements and joy that occur when relationships and learning combine in creative exploration and discovery. They are also minefields of disappointment, envy, ‘fear, anguish, depression, humiliation, grief and guilt’”

Belinda Harris *The Emotional Work of School Leaders*

State of the Nation

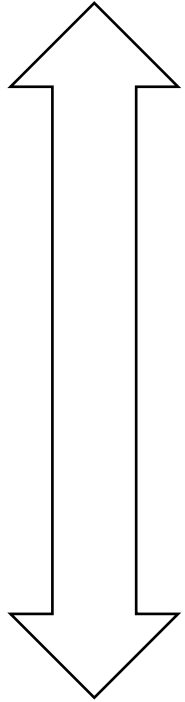
- ▶ One in 10 CYP experience a mental health problem – 720,000 CYP between 5-16 in England (ONS 2004)
- ▶ Gender differences – boys likely to 'externalise' and girls 'internalise' (AFC 2017)
- ▶ CYP in UK rank 14 out of 15 for children's satisfaction with life (Children's World's Project 2013/14)
- ▶ BPS society survey of providers found that 89% said there had been an increase in referrals. Percentages ranged from 20-70% (Health Select committee, 2014)
- ▶ Scaling up child and adolescent mental health services to ensure every child receives timely support requires an extra 23,800 staff at a cost of 1.77bn (MH Policy Commission, 2018)

Policy Developments

- ▶ Future in Mind – March 2015. Children's mental health taskforce established by Norman Lamb MP. Recommendations included changing commissioning, tackling stigma, access standards and moving away from tiers. 1.26bn over 5 years
- ▶ Access to funding via a 'transformation plan'. Going forward, plans are included in each area's 5 year strategy for health.
- ▶ Feb 2016 – Five year Forward view for Mental Health. Adopted a 'life course' approach to mental health
- ▶ NHS 10 year plan – specific references to young people's mental health

Green Paper developments/proposals

**Individual/intervention
specific**



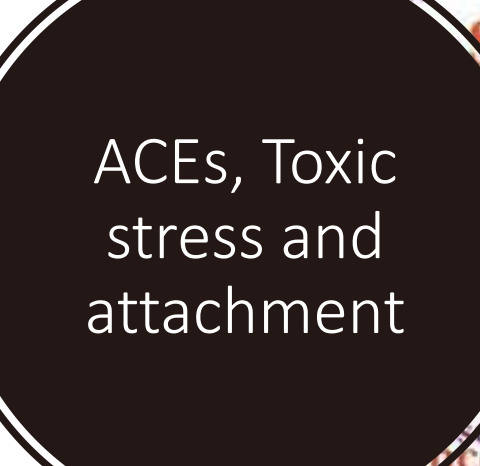
MH Support Teams

Designated SL for Mental Health

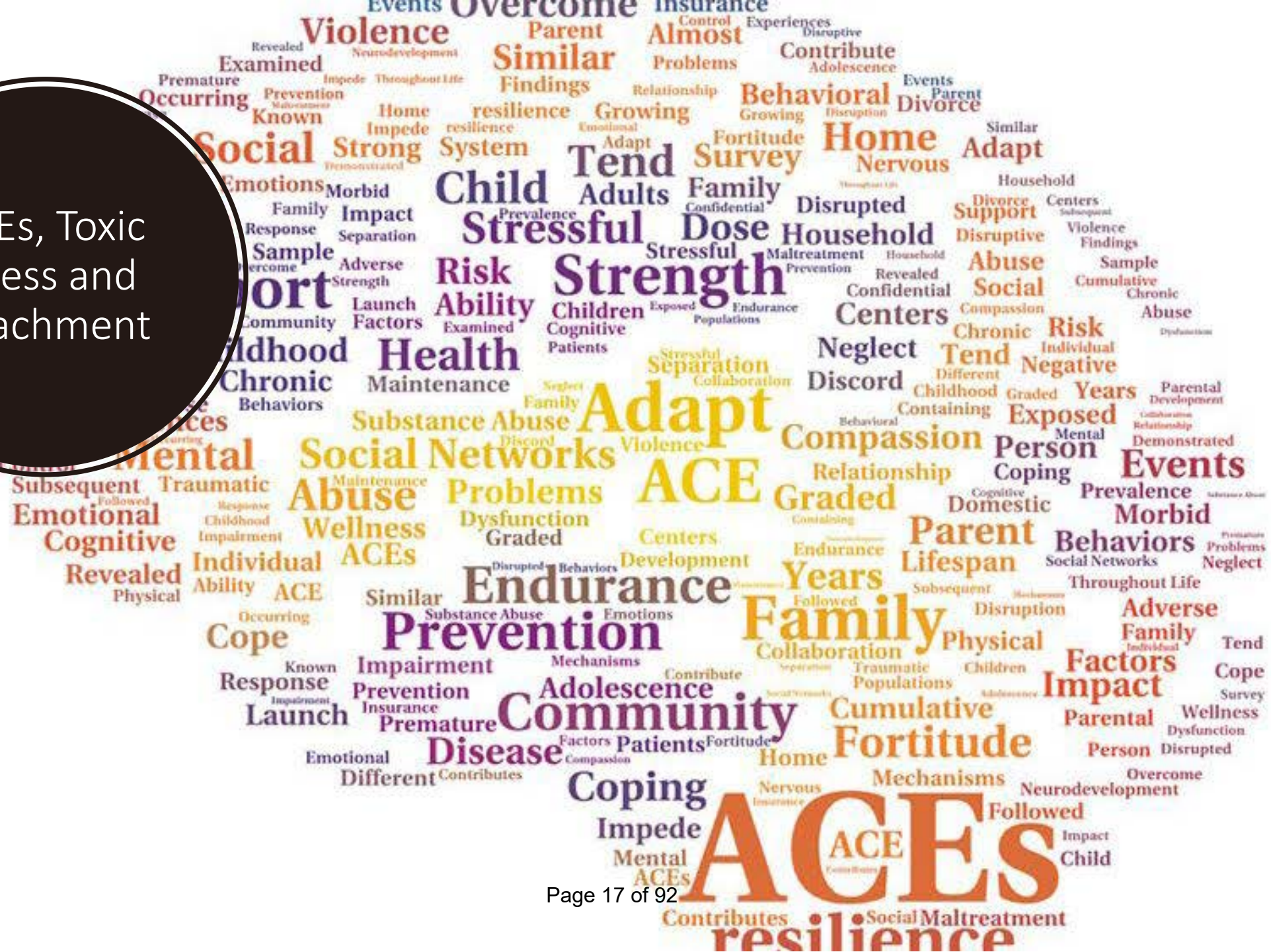
Curriculum: SRE/PSHE

**Policies,
promotion,
universal
support**

Whole school approach: policies, leadership, approaches



ACEs, Toxic stress and attachment



BEP's role

SYSTEM CHANGE

Working strategically to create sustainable transformation and increase prevention

EARLY HELP

Intervening earlier to identify and respond to children's needs.

CONNECTING

Linking schools, social care, health, VCS to increase capacity, knowledge and expertise

SHARING

Training and sharing opportunities, sharing language, online resources

ENVIRONMENTS

Impacting on whole school culture, raising awareness of mental health, attachment, trauma and stigma

RESILIENCE

Mediating the relationship between emotional intelligence and psychological distress

- ▶ New Start is BEP's CCG-funded, asset-focused approach to:
 - ▶ Make schools more emotionally supportive environments
 - ▶ improving pupil wellbeing and building resilience
 - ▶ enabling early identification of vulnerable pupils and early intervention of need
 - ▶ Enable schools to take an asset focused approach to intervention
 - ▶ Links to school improvement – closing the gap

Working actively in 48 schools

Based on the premise that it is changes in the environment that mean more to a child's resilience when risk is high.

Or in other words...



NewStart

When we shape environments for our most vulnerable children, we make them much more likely to overcome adversity and continue his/her normal development and in turn, help all children.

Ungar, 2014.



NewStart: Strands



- ▶ All schools access the same strands:
 - ▶ Support of a BEP Strategic Lead
 - ▶ Senior Lead
 - ▶ Audit and action planning
 - ▶ Method for identifying vulnerability
 - ▶ Staff training
 - ▶ Student Leadership/pupil engagement
 - ▶ Communities of Practice and CPD



Doing better than circumstances might have predicted



Early intervention

‘Pyramid of Need’ – score and collate pupil data to map need e.g.

- Behaviour
- Attendance
- Safeguarding
- Special Educational Needs
- Looked After Children
- Free School Meals
- EAL

X no. High
risk (likely
known to
you already)

X no. Medium
risk (prevent
escalation)

X no. Risk indicated
(keep an eye on and
focus prevention activity
here)

Rest of the school (embed Fostering
Academic Resilience culture)

Interventions

High level intervention e.g. lead adult,
focusing on developing relationship and
sticking with them

Medium level intervention; e.g. step up to
more individual support, monitoring etc. –
raise awareness of others in school

Low level intervention e.g.
watchful teacher/mentor; develop
rapport and belonging

Curriculum opportunities.
Modelling the approach

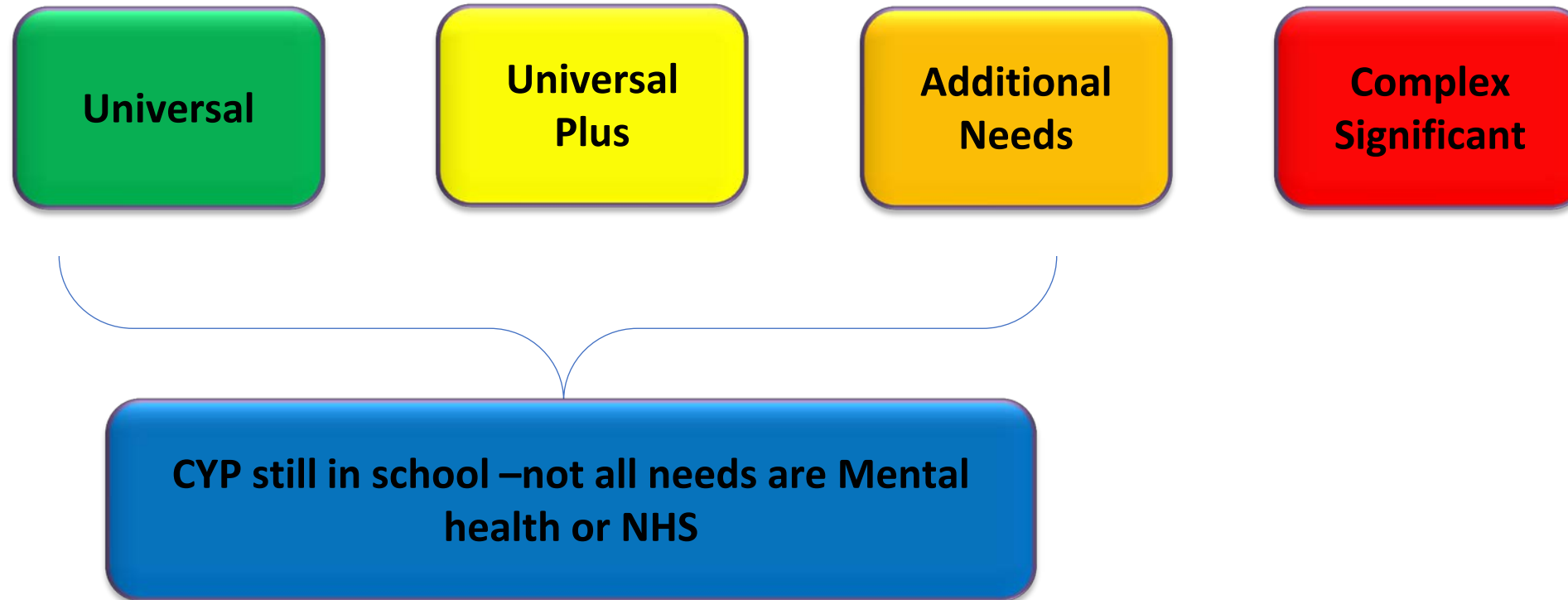


COLMERS SCHOOL & SIXTH FORM COLLEGE

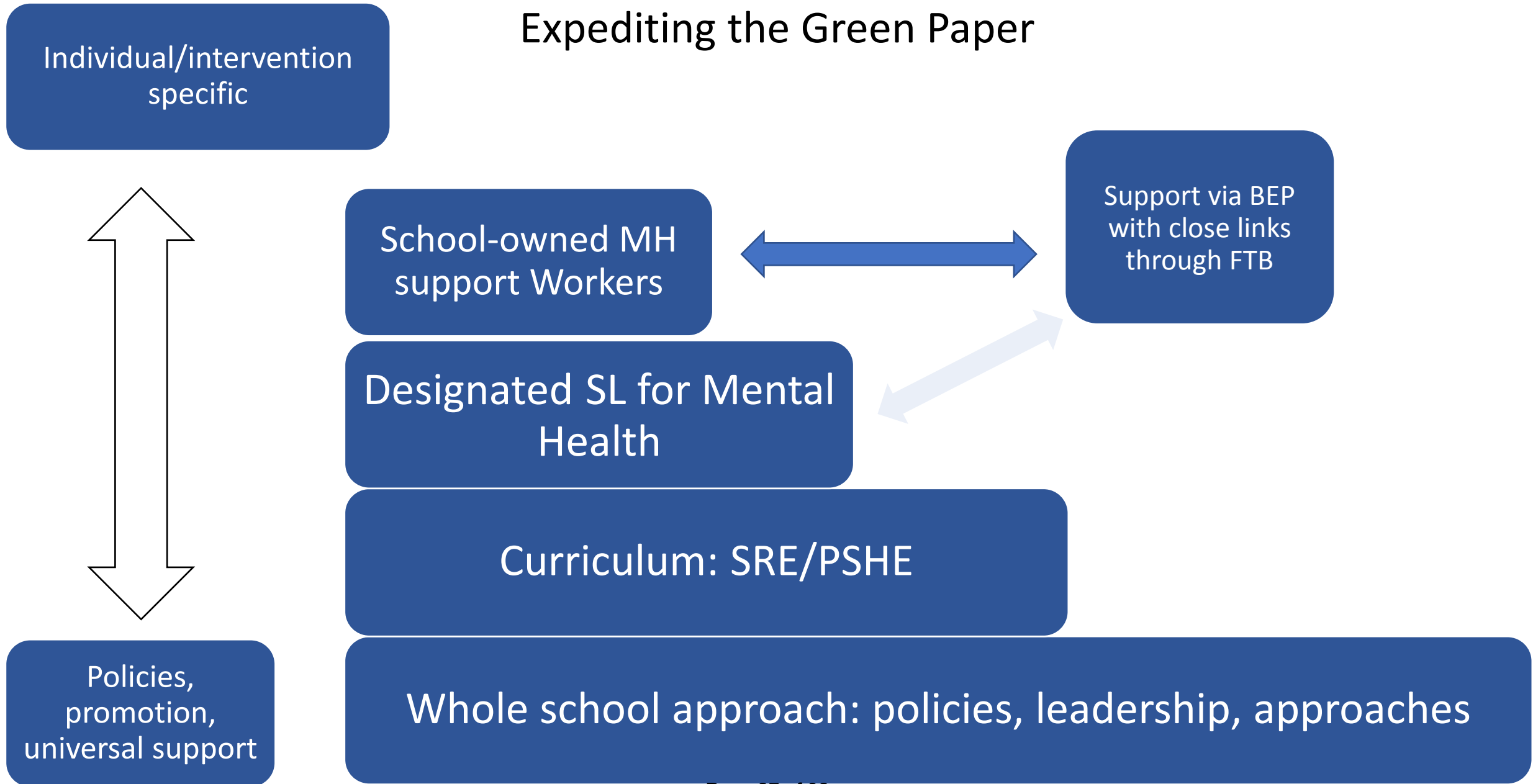
- BASE - including the DSL
- Introduced academic resilience and mental health awareness into the learning for life PSHE curriculum and assemblies
- Introduction of Place2 be
- The creation of the learning pod
- Development of our prefect role - as helping hand 'buddies' attached to lower school forms groups
- Early help / identification of vulnerable students with the letters to self / pupil social and emotional well being surveys.
- Targeted intervention - peer education partnership and Fizzogs
- The Renaissance Centre
- Staff CPD on Mental Health awareness
- Social and Emotional newsletters re attachment / anxiety / stress

Main issues we face:

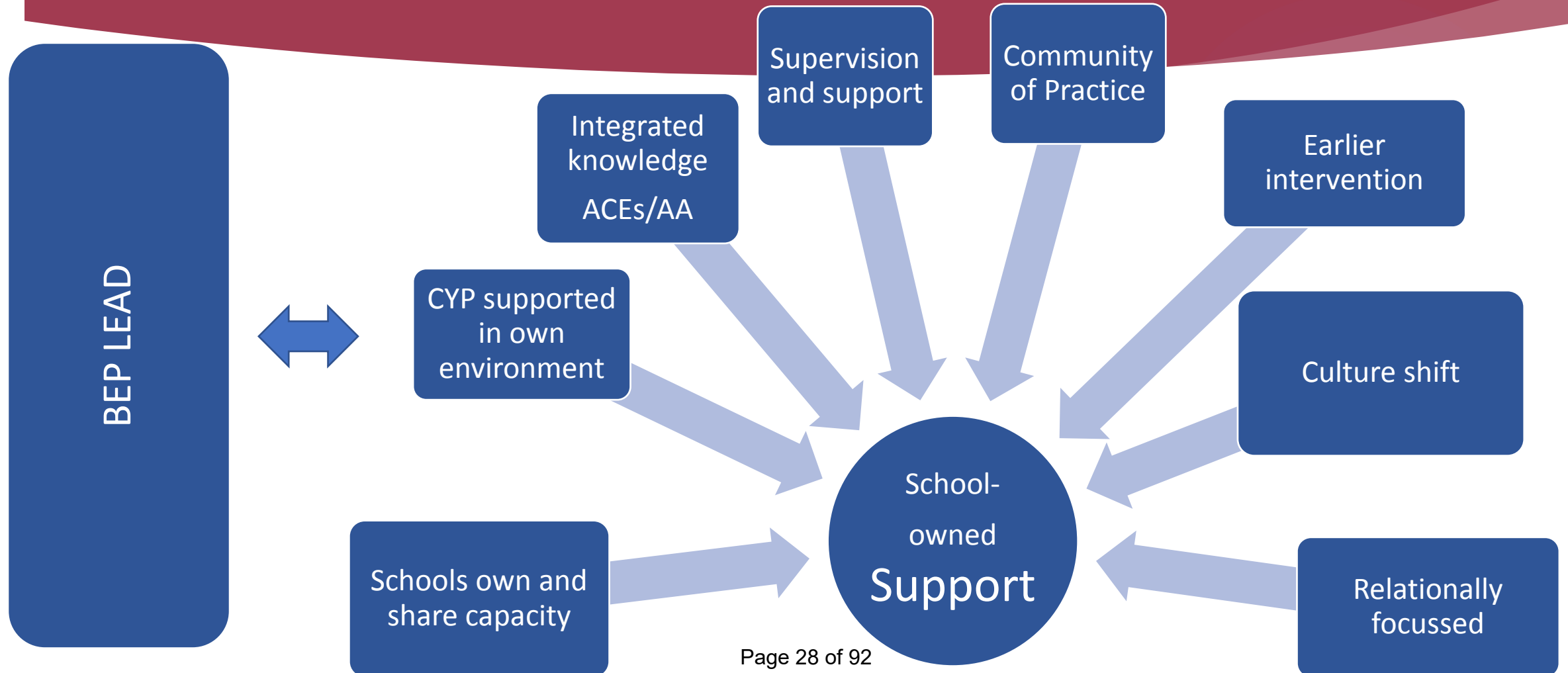
- Financial
- Staffing (workload)
- Inability to access timely support from external agencies



Expediting the Green Paper



Building the workforce with schools



Next steps

- ▶ BEP funded
- ▶ Secondaries engaged now to begin training element and will build primary model for September
- ▶ Puts us in a strong position for further funds
- ▶ Key is the continued relationships and partnerships to meet needs of often-missed groups
- ▶ Sustainability is front and centre

Inclusion review

- ▶ BEP funded, emerging model of inclusion for BEP that relates strongly to emotional health and wellbeing
- ▶ Helping schools see their work through a more psychologically informed lens and to then build on our successful model of peer working to develop practice
- ▶ School network can link in to wider CPD opportunities offered through BEP
- ▶ Continuing to work with valued and committed colleagues in other services
- ▶ Keep on keeping on for Birmingham's children and young people



To find out more contact:

ANNA ROBINSON

BEP MENTAL HEALTH/EMOTIONAL WELLBEING LEAD

ANNA.ROBINSON@BEP.EDUCATION

SEND INSPECTION – UPDATE REPORT

Birmingham SEND Improvement Programme

Rachel O'Connor, SRO SEND Improvement Programme, BSOL
CCG

Dr Tim O'Neill, Director Education and Skills, BCC



Birmingham
City Council



BIRMINGHAM
CHILDREN'S TRUST

Birmingham City Council
Birmingham Children's Trust
NHS Birmingham and Solihull Clinical Commissioning Group
NHS Providers

Joint Ofsted and CQC Inspection

- Aim of the inspection was to review the effectiveness of the area in implementing the **special educational needs and disability (SEND)** reforms as set out in the **Children and Families Act 2014**.
- The Statutory Duty falls on the City Council and the Clinical Commissioning Group; working in partnership with Education, The Childrens Trust, adult social care and wider health provider partners.
- The report findings highlighted a small number of areas where practice was strong; however, a number of **significant improvements** were urgently need to be made.
- This work is being **prioritised** by all organisations involved, to ensure a clear focus on **improving standards** and **addressing the concerns** that have been identified. With the collective aim of commissioning and providing an excellent service for children, carers and parents in Birmingham
- **Written Statement of Action** was submitted and approved by Ofsted and CQC in December 2018.

Birmingham SEND Inspection Response

A joined up response with collective accountability

Strategic Leads:

- Birmingham and Solihull CCG – Rachel O'Connor (SRO)
- Birmingham City Council – Dr Tim O'Neill
- Birmingham Children's Trust –Jeanette Young
- Birmingham Community Healthcare Trust – Claire Paintain

Our Collective Commitment

There needs to be **fundamental change** and **improvement** in how we **work together** and **provide care and services** to children and young people with special educational needs and disabilities (SEND) and their families.

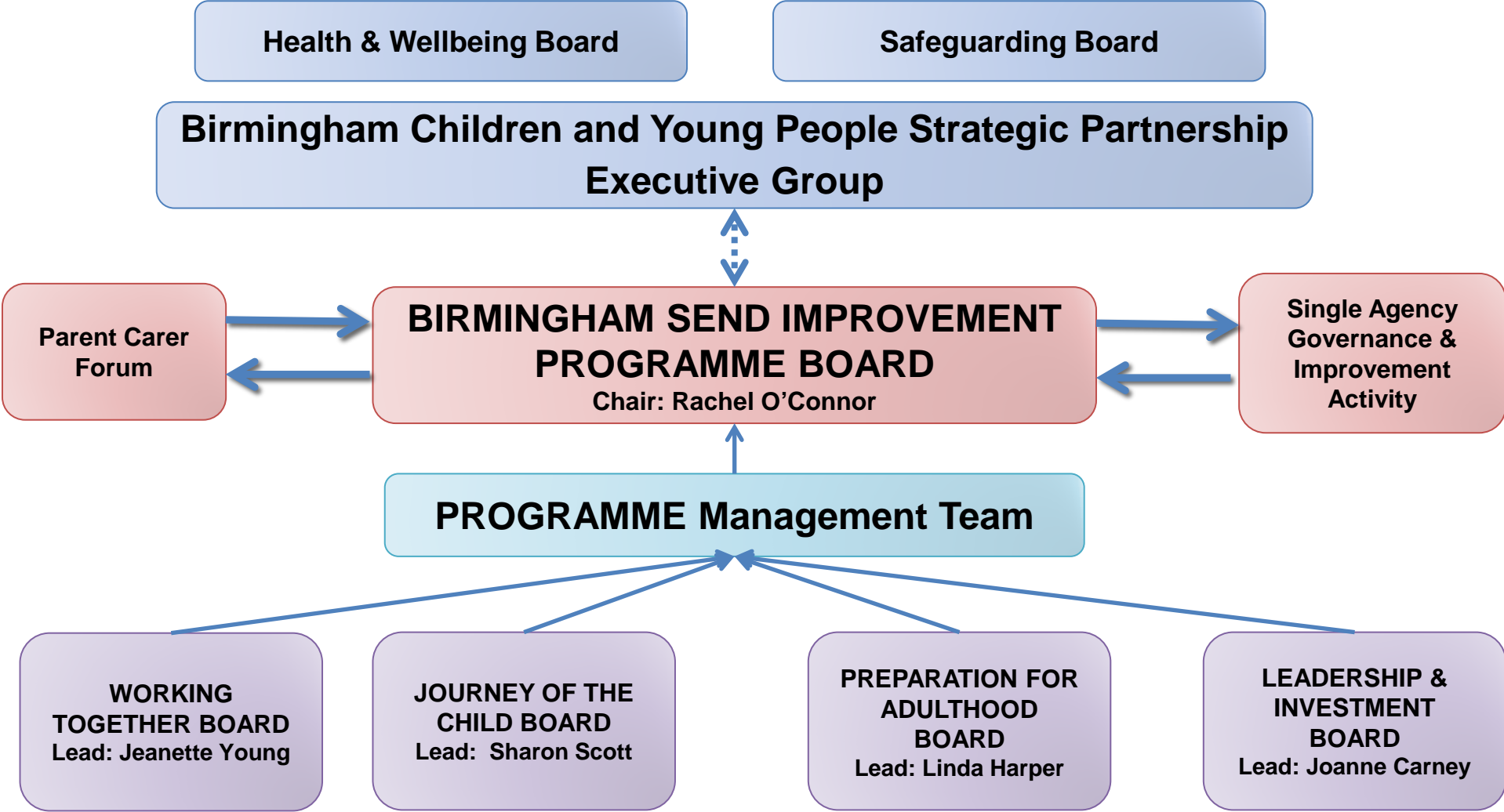
We recognise that Birmingham's implementation of the Statutory SEND reforms has collectively not been good enough.

We need to make **significant improvements** to how we **strategically plan and deliver services** in order to improve outcomes for children and young people.

We need to **improve how we work with children, families and carers** and with other organisations.

We have to **improve our effectiveness** in **identifying** children and young people's special educational needs and disabilities, in **assessing and meeting these needs** and we need to improve our **effectiveness in improving outcomes** for children and young people with SEND.

SEND Improvement Programme Governance



Note: Due to the profile of this work, other bodies may require updates on progress.

Process for the development of the WSoA included:

- Multi agency partnership approach – all committed to responding to the inspection findings.
- Two workshop sessions with parent and carers.
- Outcomes were co-produced with parents and carers.
- Engagement with school heads from across the city
- Parents and Carers survey - over 250 responses, supported by the Voluntary sector.
- Consultation with the schools forum.

Overview of Monitoring Process

- The Written Statement of Action contains the partnership response to the inspection findings.
- Based on this the SEND Board has developed a detailed (30 page) action plan that outlines the actions required by the four workstreams.
- The SEND Board will monitor progress against the action plan on a fortnightly basis.
- NHS England and a DfE Regional advisor will undertake monitoring visits every three months, starting in Jan 2019.
- Ofsted and the CQC will re-visit the area to check on progress within 18 months of the WSOA being agreed.

Progress so far

- Leadership and Investment
 - Establishment of Senior Responsible Officer and Programme Office
 - Establishment of SEND Improvement Team and fortnightly Improvement Board
 - Establishment of Children's Strategic Partnership Executive and developing workplan
 - Established four workstream groups to deliver WSOA
 - SEND JSNA due February 2019
 - Joint Commissioning - mandate to develop proposal agreed
 - Baseline review of services – underway
 - Children's Improvement Forum – November
 - Two Ofsted and CQC monitoring visits held
 - Multiagency review of complex children across the City – workshop

Progress so far

Journey of the Child

- Journey of Child workshop – November.
- Review of SENAR complaints completed.
- New EHCP request form completed.

- Preparing for Adulthood

- Workstream aligned and joined up with Birmingham Transitions strategy.

• Working Together

- Approval of waiting list initiative for CDC, for all children due to start school
- Survey with parents, carers, children, young people reflections on current service offer and areas for improvement, their priorities to inform WSoA
- Establishment and re-launch of parent carer forum – formally on the 28th March 2019

Action's and Impact so far

- Working Together
 - Good School engagement in sufficiency planning and as a SEND reference group.
 - Number of complaints from parents, carers in relation to SEND has reduced 28% since 2017.
 - Training package for assessment report writing (including voice of the child) was completed in December - Currently rolled out to Children's Trust and Education staff.
 - Refreshing Local Offer – ready for launch in March 2019
 - New digital approach to for CYP and parents carers to tell their story once as part of care plans, using new web based WIKI - involving 1000 children and young people purchased.
- Journey of the Child
 - SEN support plan pilot now live - across 36 settings – valued by parents, carers and professionals.
 - Prioritising children who currently do not have a suitable school place into any new/expanded provision – eg Boldmere Primary resource base for children with autism

Action's and Impact so far

- Preparing for Adulthood
 - A review of EHCP's for CYP at transition reduced overall numbers by 300.
 - Health transition plans in place for all year 14 young people; circa 250
- Leadership and Investment
 - Increased clinical leadership - DCO and DMO capacity – 1.0wte DMO started January, 1.0wte DCO starts in March.
 - Increased LAC nursing WTE will reduce case loads from over 600 to 180 by Feb 2019, caseloads reduced to 320 in November 18
 - Children's Improvement Forum held 86 leaders, stakeholders, parents/carers shaping our collective values and common purpose for leading strategic improvements for local Childrens and families.
 - Multi-partner funding for a Birmingham childrens multi-partnership improvement team.

Over the next six months

- Complete best practice review
- Finalise Birmingham SEND strategy
- Agree investment priorities as a partnership
- Implement quality assurance framework for EHC Plans
- Create a partnership scorecard on SEND performance
- Finalisation with the parent/carer forum our SEND outcomes framework
- Conduct sufficiency review of current provision
- Develop a programme of workforce engagement
- Agree the roadmap for integrated commissioning
- A reduction in childrens therapies waiting list.

Longer term

- More early help for parents and carers.
- Reduced waiting times for therapies
- Parent and Carer satisfaction significantly increased

Risks

- Leadership continuity – a number of ‘interim’ senior managers supporting the programme
- Co-production – Ensuring we the build trust and confidence of our children and families
- Insufficient resources - to achieve the scale of change
- Long waiting times, and high thresholds for some key therapy services
- Need as measured by a number of indicators continuing to grow
- Challenging environment for agencies across Birmingham, including the city council.

For discussion

- What would be the preferred approach by O&S to remain briefed on SEND improvements?
- What would be the preferred approach for O&C to be assured that we are on-track with delivery and bring about improvements for our children and young people?
- Would a regular member briefing session be supported by O&C?



Nadhim Zahawi MP

Parliamentary Under-Secretary of State for Children and Families

Sanctuary Buildings 20 Great Smith Street Westminster London SW1P 3BT
tel: 0370 000 2288 www.education.gov.uk/help/contactus

Anne Ainsworth
Acting Corporate Director for Children and Young People
Birmingham City Council
Council House
Victoria Square
Birmingham
B1 1BB

Rachel O'Connor and Paul Jennings, Birmingham and Solihull Clinical
Commissioning Group
Simon Field, Local Area Nominated Officer

17 December 2018

Dear Anne, Rachel, Paul and Simon

Joint local area SEND inspection – Birmingham

I am taking a close interest in the Ofsted and CQC inspection of special educational needs and disability (SEND) services and I read with great interest the findings in your recent report.

I was encouraged to read the positives in the report, including the quality of service being provided by many of Birmingham's front line staff. However, your report highlighted a number of areas of significant weakness, including in strategic planning, commissioning and leadership; poor communications with parents and between agencies; and disappointing outcomes for pupils who have SEND.

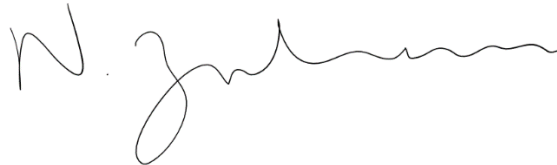
I am reassured by feedback from the Department's senior officials about Birmingham's commitment to improving services and encouraged that immediate action is being taken. I am particularly pleased that senior leaders from health, education and social care are working collectively with determination on the Written Statement of Action (WSOA) and that they have reached out to the newly-formed Parent Carer Forum to ensure their views are heard. I ask that you publish the statement on the local authority's website and keep it up-to-date so that parents, carers, children and young people can understand the actions you are taking and the progress you are making.

You will be aware that Ofsted and CQC will revisit you within 18 months of their approval of the WSOA to assess progress with addressing the weaknesses set out in the inspection letter. I have also asked Charlie Palmer, DfE professional SEND adviser, to continue to be your link contact with the Department. Sue Nicholls and Jacqueline Barnes remain your contacts at NHS England.

I look forward to hearing of good progress being made with improving services.

I am copying this letter to John Bostock from the Children's Services Improvement and Intervention Unit at the DfE; Charlie Palmer and Jacqueline Barnes, DfE and NHSE Advisers; Ian Ward, Leader of the Council; David Bridgman, Head of Service, Special Educational Needs Assessment and Review; and MPs David Bridgman, Preet Gill, Jack Dromey, Roger Godsiff, Liam Byrne, Richard Burden, Khalid Mahmood, Steve McCabe, Andrew Mitchell, Jess Phillips and Shabana Mahmood.

Yours sincerely,

A handwritten signature in black ink, appearing to read 'N. Zahawi', with a long, wavy horizontal line extending to the right.

Nadhim Zahawi MP
Parliamentary Under-Secretary of State for Children and Families

SEND IMPROVEMENT PROGRAMME

WRITTEN STATEMENT OF ACTION


1.0 Introduction

Birmingham was inspected by OFSTED and CQC in June 2018 to judge the effectiveness of the area in implementing the special educational needs and disability (SEND) reforms as set out in the Children and Families Act 2014. The Chief Inspector determined that Birmingham City Council (BCC) and Birmingham & Solihull Clinical Commissioning Group (BSol) were required to jointly submit a Written Statement of Action because of significant areas of weakness in the local area's practice. Whilst there were some examples of good practise, overall services and the SEND system across the city was failing children and families and not delivering good outcomes for individuals with SEND.

The areas of weaknesses identified in the Inspection report are the following:

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

The purpose of this Written Statement of Action (WSOA) is to set out the immediate response of all partners in Birmingham to the June inspection. This Statement of Action focuses on our collective intent to bring about these necessary improvements for our children and young people and is underpinned by a detailed action plan (Appendix A).



Our ambition is to provide an excellent SEND service for our children and young people that is personalised, empowers, and provides early support. Delivered by a united and integrated partnership across education, health and social care with the ultimate aim of ensuring our children and young people to reach their potential/educational attainment and make a smooth transition to adulthood.

We will have a collective and co-produced strategic framework led and championed through a new Children's and Young Peoples Partnership Board for the city. This will ensure that there is robust system leadership and a single strategic direction for Children's Services (including SEND) for Birmingham. The Board and Framework will be supported by an integrated improvement team to ensure that there is pace and effective delivery on immediate actions for improvements, transformations and sustainability in commissioning the services offer required across children's services.

As equal partners, we have come together to ensure an early response to some immediate areas for remedial actions and to review our current service offer. We are committed to developing together our further integrated commissioning and integrated care model for a transformed SEND offer for our local children, young people and their families.

Our Collective Commitment

Partners in Birmingham recognise that there needs to be fundamental change and improvement in how we work together and provide care and services to children and young people with special educational needs and disabilities (SEND) and their families. In response to this inspection, partners in Birmingham have taken stock. We recognise that Birmingham's implementation of the SEND reforms has collectively not been good enough.

Moving forward we have reset our partnership working, strategic direction and collective ambition to ensure the improved quality in outcomes for individuals with SEND both now and for future generations:

To realise the ambition, we aim to:

- Ensure our services are centred around the needs of the child, not organisations or sectors, are easy to access, and navigate.
- Deliver excellent services to children and families that include effectively identifying children and young people's special educational needs and disabilities.
- Ensure that our approach for transitions and preparation for adulthood is robust and explicit in all that we do.
- Develop excellent models of early support that enables and empowers families to develop their skills particularly at the start of their journey. Our early system should enable and empower parents to be able to support their children in the best possible way recognising that parents are the experts in their children.
- Enhance parents, carers and professionals understanding of the SEND system, SEND framework and local offer.
- We will ensure that the assessment and planning process involves children, young people, carers and families.
- Work jointly with children, families and carers and with other organisations, through honest and collaborative dialogue, and co-production.
- Deliver excellent services to children and families that include effectively identifying children and young people's special educational needs and disabilities.
- Making significant improvements to how we strategically plan and deliver services to achieve better outcomes for children and young people.
- Ensure we have a common set of values and behaviours and that we demonstrate these as leaders, colleagues, and at the front line.
- Promote independence and personalisation in our commissioning and services that are available to children and families.
- Ensure the workforce across the care pathway are empowered to work in partnership to meet those needs of the children.
- Ensure we are an attractive employer; demonstrated through how we value, support and offer development opportunities for our staff.
- Maximising our use of digital access, support and means of communicating and supporting families and children through their journey.

Parents and Third Sector Consultation

The Improvement Board commissioned a number of activities to ensure that parents' voices were being heard and acted upon.

Birmingham Voluntary Sector Centre (BVSC) was commissioned to undertake a survey with parents and the voluntary sector. 291 responses were received. A full report of the consultation outcomes will be available on our website. This was enhanced by a SEND consultation event held in November 2018 with parents and the voluntary sector with the objective to determine to identify priorities for attention. Senior leads for the Improvement Board have held meetings with a number of members of the newly formed Parent / Carer Forum.

The SEND Improvement Board is committed to co-production with parents, learning the mistakes of the past and developing a new way of working. We are committed to quarterly oversight of progress against the WSoA by parents and involvement by parents in work streams and training and support to parents to ensure that they feel confident to express their views. Birmingham professionals needs to utilise the expertise of parents and is going to do so.

Journey of the Child Workshop

A workshop was held in November 2018 attended by around 47 delegates with representatives from the Birmingham Parent Carer Forum, and senior managers and staff from strategic partners. Attendees discussed:

- The things that helped the adults in the workshop along their childhood journey, setting out a person-centred approach to the workshop.
- Consideration of the percentage of time spent by professionals in joint working – how we might spend more time joint working and what presently is stopping us.
- Pinch points and cross over points for children with send from pre-birth to 25 years of age – as experienced by the child / parent / carer / professional.
- How the journey of the child could be improved.

Output from the workshop will be used to inform the SEND programme action plan.

Headlines from SEND parents / Voluntary sector survey undertaken by BVCS for BCC, BCT, BCHT & BSol CCG

In October 2018, BVCS undertook a survey with parent, carers and the voluntary sector regarding their experiences of using the current Birmingham SEND system - 291 responses were received, and a full report will be published shortly.

- Just 25% of respondents rated their experience of the EHC process as good or very good, and 84 parents gave feedback concerning issues such as delays, lack of assistance, and misunderstanding in the system.
- Nearly 64% of parents experienced challenges with the plan, and from the 138 detailed comments received, feedback included refusals, a gap in experiences and expectations, unsupportive, lots of avoidable mistakes, and timescales not being met.
- 60% of Parents rated contact with the SENAR service as unsatisfactory or very unsatisfactory. Parents were asked what changes they would make to SENAR services – 140 suggestions were received that included – “don’t write rubbish EHC Plans”, “could try caring”, “someone who communicates with parents”, “the whole system is wrong”, “answer phone calls”.
- Nearly 60% of parents and carers had to tell their child’s story more than 5 times to different members of the partnership in the past 2 years with only 15% of them finding it a positive experience.
- 119 parents had raised a concern, of which 79% did not feel that their complaint had been effectively resolved
- 43% of children had waited more than 40 weeks for speech and language therapy, 52% of children had waited more than 40 weeks for occupational therapy, 29% of children had waited more than 40 weeks for physical therapy.
- During the waiting times 91% of parents stated that they did not feel supported during the waiting period. 39% of Parents suggested that online support would have made a difference during that waiting period, 35% suggested telephone helpline would have helped.

The Improvement team will use this as a baseline to judge progress and impact of the WSoA, and to ensure that in two years’ time the system works better for parents, carers and children.

Engagement with Head Teachers

An engagement workshop was held with head teachers on 21st November at which there was good representation across all sectors of educational provision. Head teachers recognised that the WSoA was a high-level strategic document and were keen to work with the local authority and partners to implement the recommended changes.

The outcome from this meeting was that the heads offered to become a reference group to the programme, that will meet half-termly, in order to challenge the partnership in regard to the differences that we were making at the front line.

Our Collective Response

BCC and BSol, along with Birmingham Children's Trust (BCT), Birmingham Community Healthcare NHS Foundation Trust (BCHC) and Birmingham Women's and Children's NHS Foundation Trust (BWC) fully accept the findings of the Joint Local Area SEND Inspection and are committed to leading the key actions to improve outcomes for children, young people (0-25 years) and families.

This Written Statement of Action (WSOA) has been co-produced between BCC, BSol, and BCT. We have undertaken co-production engagement and consultation with Birmingham Parent Carer Forum, as well as wider consultation with schools, partners and providers. The WSoA includes the strategic improvements required to meet the requirements of the inspection and an action plan with specific areas of work explained in greater levels of detail and will be subject to wider engagement with schools, GP practices, wider partners and providers.

The Children's Strategic Partnership will take responsibility for this area of work, and the leaders of the main partnership organisations have taken ownership of the response and will oversee the actions taken to address the issues highlighted from this inspection. The Children's Strategic Partnership is chaired by the CEO of BCC and includes senior representation from the CCG, BCC, BCHC, BWCH BCT, West Midlands Police and the Independent Chair of the Birmingham Safeguarding Board.

The Statement was presented to the BCC Lead Member for Children's Services (5th December), Birmingham and Solihull CCG Governing Body (4th December), BCT Executive (22nd November) and BCHC Executive whereby all four governing bodies approved the draft Statement of Action, delegating powers to appropriate senior managers and officers to finalise the more detailed action planning underpinning the Statement.

We see the transformation of our SEND services in three steps:

1. A collaborative baseline assessment and services review of our current commissioning arrangements and service offer.
2. A jointly developed case for change for an integrated commissioning offer and integrated care delivery model.
3. Implementation and continuous cycle of improvement learning and evaluation of our new integrated commissioning and care delivery model.

Key new resources to enhance our initial response

Across the partnership, we will appoint a jointly resourced and integrated Children's Partnership Improvement Team. These posts will all be advertised by the end of November 2018 and will start as soon as possible.

This additional capacity will include:

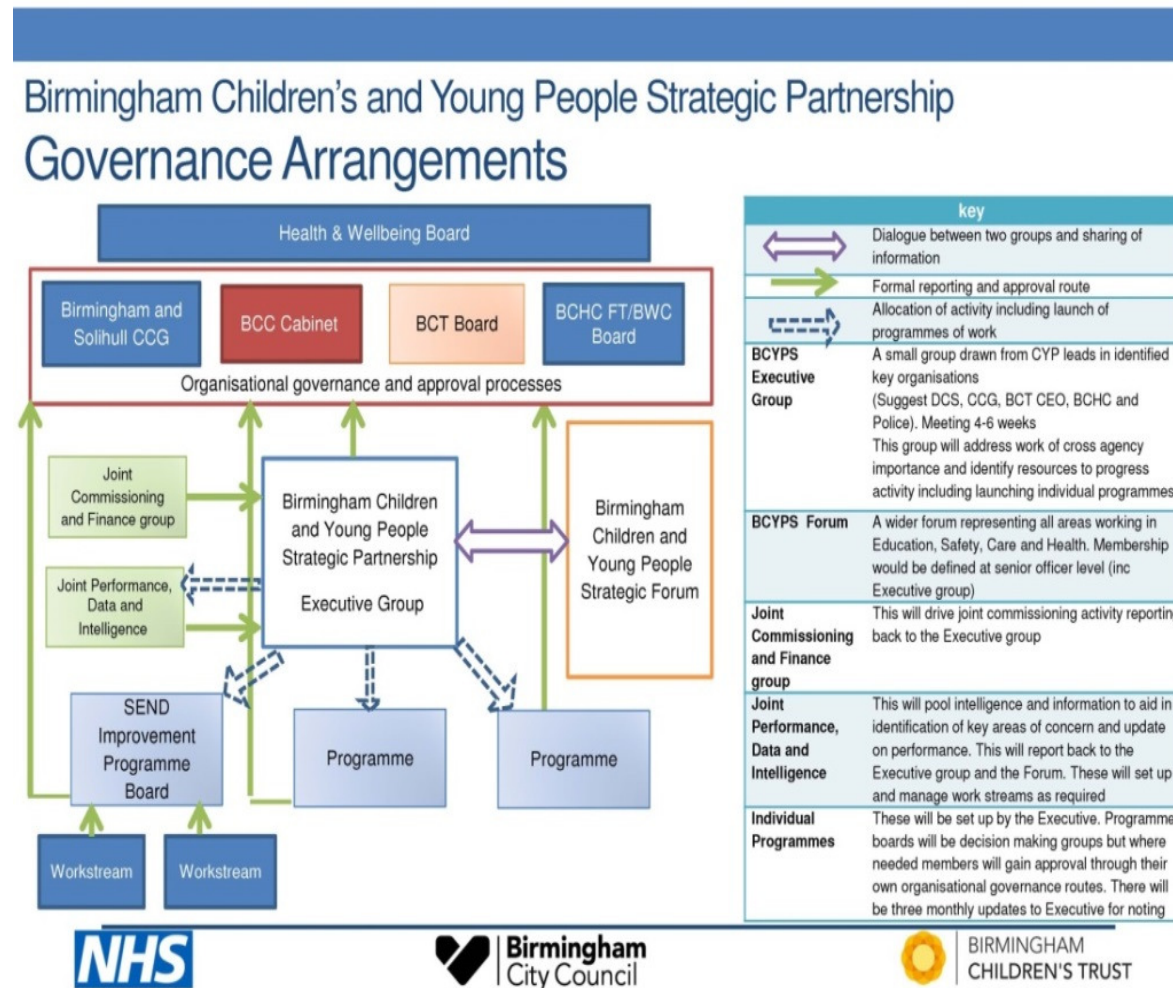
- a) A Senior Responsible Officer for the Programme to ensure overall governance and accountability for the SEND Improvement Programme; (The SRO has been in post since July 2018).
- b) An Improvement Programme Director who will be accountable for the co-ordination and delivery of the Statement of Action (interim in place since July) and the overarching Children Improvement Programme Plan.
- c) An Integrated Commissioning Manager for Children's Services.
- d) Officers to support the improvement plan delivery.
- e) BCHC PMO lead (In post August 2018).
- f) Partnership Commissioning manager for SEND and personalisation (in post August 2018).
- g) Dedicated time from across the partnership officers to lead the key workstreams of the plan (in place from August).

The outcome of the recent LA SEND inspection has resulted in a multi-agency response to underpin the actions required to improve outcomes for our children and young people. Multi agency partners have developed a set of principles that will support the delivery of these improvements. Underpinning these principles is the absolute commitment to a model that supports a child-centered approach modelled on behavior of trust and honesty irrespective of organisational boundary.

Children's Services and SEND Governance Structure

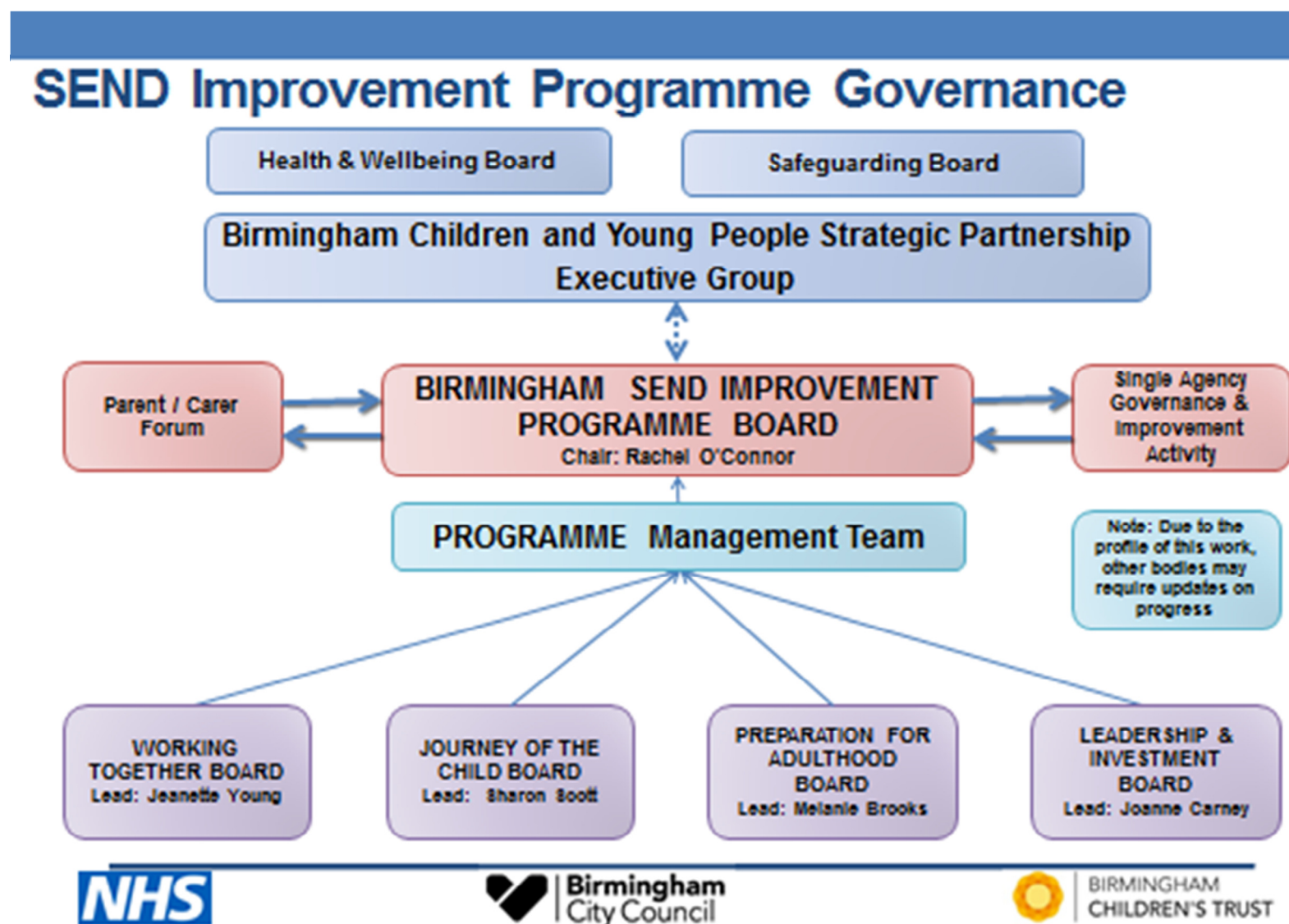
A further key initial action has been the review and reframing our Children's Services and SEND governance to support joint strategy development and decision-making and multi-agency design and delivery.

Figure 1. Birmingham Children's and Young People Strategic Partnership Governance



Birmingham City Council and Birmingham & Solihull Clinical Commissioning Group are the two responsible bodies the delivery of the SEND Improvement Programme. Within BCC, Member oversight will be through the Children's Social Care Overview & Scrutiny Committee and through the Learning, Culture, & Physical Activity Overview & Scrutiny Committee. BSol CCG oversight will be through the Governing Body.

Figure 2. SEND Revised Programme Governance



Delivery of the SEND Improvement Programme – Delivery Working Groups

Four delivery working groups have been established to deliver the actions identified within the WSoA:

Delivery Working Group	Areas of Focus
Working Together	<ol style="list-style-type: none">1. Voice and influence of children and families2. Communication3. Engagement and participation4. Workforce development
Journey of the Child	<ol style="list-style-type: none">1. Identification2. Assessment3. Service provision4. Service review
Preparation for Adulthood	<ol style="list-style-type: none">1. Transitions to adult services2. Outcomes for Young People with SEND3. Housing4. Employment
Leadership & Investment	<ol style="list-style-type: none">1. Strategy and vision2. Finance3. Integrated Commissioning4. Integrated Intelligence (outcome monitoring, quality assurance, performance management)5. JSNA

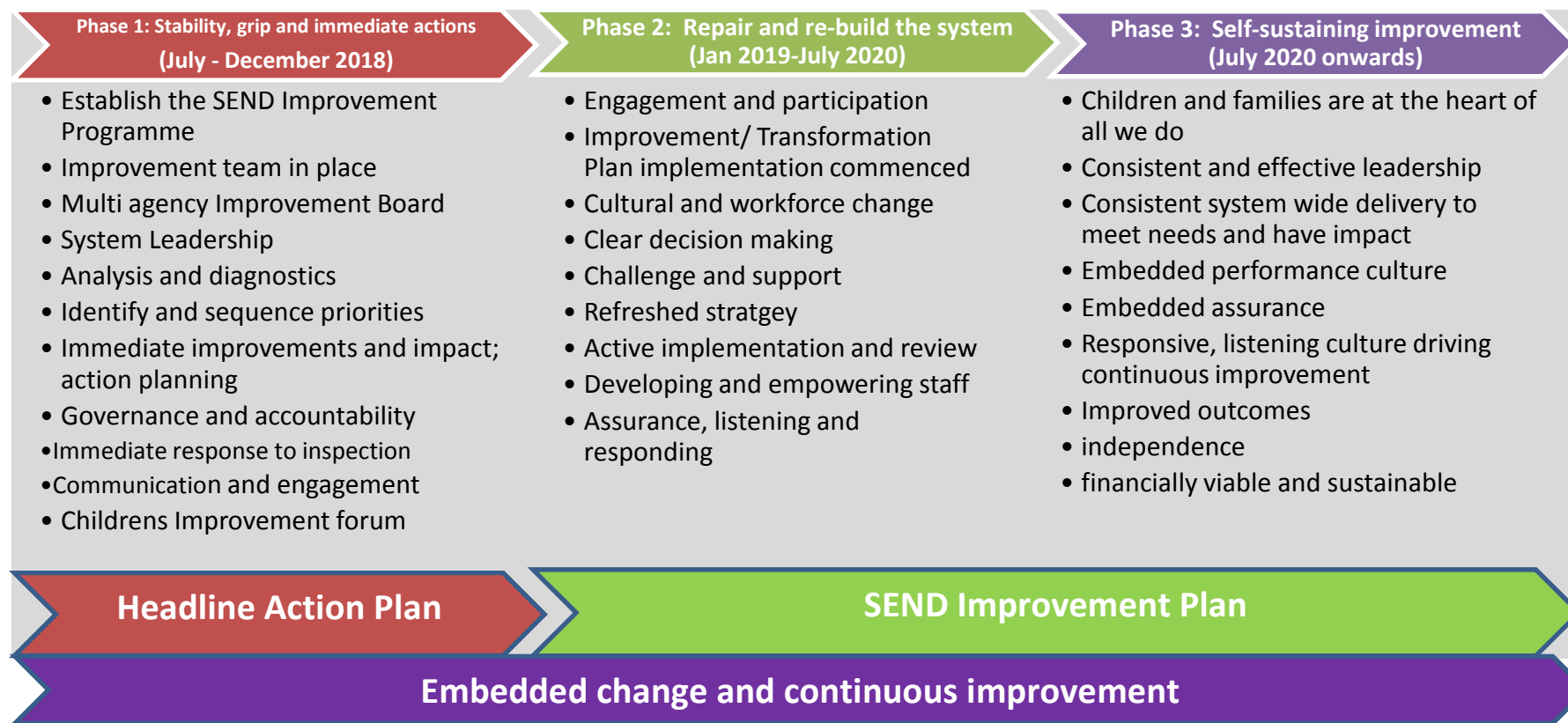
Our Founding Principles for the SEND Transformation and Improvement Plan

A needs-based model that is child centred and based on the journey of the child and is co-produced with parents, carers, children and young people	Health, education and social care will adopt a person-centred planning approach in how we commission and provide SEND services.	Parents and partners understand and agree that the SEND framework being used with individuals delivers outcomes	SEND pathway and services support and promote empowerment, personalisation and independence	Based on best practice and draws on learning from other areas
Our transformations will be underpinning by a cycle of continuous improvement and evaluation	Strong relationship-based working	The accountability and Governance as an integrated partnership empowers and drives the transformation for SEND strategy, operational and delivery changes	Is financially sustainable	Our commissioning and provision will be underpinned by a single quality monitoring and assurance process

SEND Improvement Plan 3 Phased Implementation

Multi agency partners have established a SEND Improvement Programme to drive the changes we need. At the heart of these changes is a dedication to putting children and families at the heart of all we do and ensuring that they have voice and influence; changing culture and practice; and working and communicating better together across and within organisations. We will have a more collaborative approach, working *with* children, young people and families rather than doing things *for* or *to* people. Workforce development, modernisation and change will also be a key priority in our transformation agenda alongside underpinning organisational and behavioural change. We recognise that a well-trained, well-led and well-motivated workforce, with the required capacity, is essential to deliver the impacts we need.

Our work has been structured into three key phases of development to ensure that we drive impact and improvements at pace and to ensure that we develop an accountable and self-sustaining improvement system.



Key Progress from July – November 2018

At the point of publication, the following progress has been made towards our plans for improvement.

Leadership and Governance - Progress since June (Rachel O'Connor, Assistant CEO, BSol CCG)

- Establishment of the Children's Strategic Partnership Executive (Senior Leaders).
- New multi-agency leadership and improvement team established including SRO and Programme Office and supporting resource plan
- Briefing and awareness of inspection findings to internal boards/cabinet, partners, key stakeholders.
- Redesign of SEND governance centred around workstream themes – weekly improvement Board in place while these are established
- Date set and planning complete for Children's Improvement Forum.
- SEND JSNA commenced.

Co-Production and Engagement - Progress since June (Jeanette Young, Director of Commissioning & Innovation, BCT)

- Support the re-establishment and relaunch of the Parent Carer Forum.
- Commissioning of an independent partner to undertake parent / carer and voluntary sector survey and consultation event. Output from the survey and event has been analysed and used to inform development of the WSoA.
- Co-production with parents and carers on values, outcomes and success criteria for the programme.

Commissioning - Progress since June (Joanne Carney, Associate Director Joint Commissioning, BSol CCG)

- Integrated Commissioning - mandate and road map to develop integrated commissioning agreed by Children's Strategic Partnership Executive.
- Baseline review of scope of integrated commissioning and service offer commenced.
- CCG Approval of increased DCO and DMO wte – recruitment commenced.
- Approval of increased LAC nursing WTE to reduce nursing caseloads to 320 by November 2018 and further to 180 by February 2019.
- Approval of waiting list initiative for CDC for ASD and ADHD assessment, for all children due to start school.
- Commissioning review of SENAR services including out of area school placements completed.
- Multiagency workshop to review of complex children across the City completed.

Local Service Offer – Progress since June (Claire Paintain, Deputy Divisional Director, Children & Families, BCHC)

- A workshop was held on the 13th November to look at the Journey of the Child. From this workshop four focus areas were identified to improve the journey of the child and these will be developed as part of the work stream associated with the journey of the child.
- Multi-agency review of assessment to inform training packages.
- Tool kits have been developed for multi- agency use when writing assessment reports and ascertaining the voice of the child. The tool kits are in the process of being rolled out to all partners
- DMO capacity increased – further recruitment progressing.
- Aligning health assessments for Children in Care with SEND and EHCPs.
- Training of health colleagues on SEND related issues.
- Transitions:
 - Group and CQC issues.
 - Adoption of BCC Strategy and moving through BCHC governance.
 - Transition Policy and operational plan in place.
 - 'Adopted Ready Steady Go Hello' transitional care plan now live on RiO.
 - Recruitment of children's nurses and assistant psychologists to complete comprehensive transition care plans on all Year 14 children (300 children) by the end of December 2018, and monitored weekly.

- BCHC now attend the Transitions Operational Group.
- Contribution to developing Preparation for Adulthood theme.
- Cases for Change – Therapy Services and Neurodevelopment pathway developed.
- Identification of CYP with EHCPs on RiO system.
- Best practice visits.
- Review of evidence base of EHCPs and School Placements to inform required redesign.
- Exploring options to create new educational places in the city – through the expansion of existing provision and the creation of new.
- Prioritising those children who currently do not have a suitable school place into any new/expanded provision.
- Review of staffing, locations, capacity and skill sets.
- Review of all educational services that relate to SEND, and of sufficiency and banding arrangements for SEND pupils and students.

Waiting times and access to therapies and professionals – Progress since June (Claire Paintain, Deputy Divisional Director, BCHC)

- BCHC has worked with referring maternity units to ensure timely notification of pregnant mothers requiring an antenatal contact. Where a midwife identifies a higher level of need a Maternity Services Liaison Form is used to notify the Health Visiting service that an antenatal contact is to be prioritised. A leaflet explaining the antenatal Health Visiting offer has been developed to be available at maternity units, as well as a letter for the pregnant mother and her GP when an antenatal appointment has not been attended.

2.0 Inspection Main Findings and Collective Actions in Response

1. The lack of an overarching approach or joined-up strategy for improving provision and outcomes for children and young people who have SEN and/or disabilities across Birmingham

1.1 A lack of strategic and coordinated leadership means that pupils who have SEN and/or disabilities have failed to achieve as well as they should have done.

Context/barriers

There has been an unacceptable lack of strategic and coordinated leadership for SEND in Birmingham. Strategic partnerships for children's and young people's services in Birmingham have been lacking for several years. There has not been a single strategic vision for Children's services (including SEND) nor a delivery plan for realising those strategic aims and outcomes for children and young people. There has been significant change in leadership and a lack of continuity for SEND in BCC and there has been limited oversight and leadership for SEND in

NHS partners. Until April 1st, there were two CCGs in the City, one whom had the lead for Children's Services. Those CCGs did not have a single commissioning voice and strategic leadership was not as effective as it needed to be for the city. Those CCGs were merged into a single CCG, Birmingham and Solihull CCG on the 1st April 2018 with a new leadership team including CEO, Executive lead for Children's Services and revised structure and roles within the Children's commissioning team.

There has not been a single form or supporting governance for how the system comes together to lead and make strategic decision for SEND and/or the wider Children's services in the city.

Our response

Immediately after the inspection, senior leaders in Birmingham established the SEND Improvement Programme identified a Programme SRO and deputy and established a joint programme team. This programme has been established to lead and coordinate the response to the inspection and the new SEND improvement programme. BCHC and BSol CCG have increased Designated Medical Officer capacity to provide clear and robust clinical leadership for SEND. The programme steering group has senior representatives from BCC, BSol CCG, BCHC and BCT.

In August 2018, senior strategic leaders and chief executives approved the establishment, governance and terms of reference for a Children's Strategic Partnership Executive. Monthly meetings have been scheduled and a forward plan of programmed activity developed. That group approved the development of a proposal for Cabinet and Governing Body (November) for how we integrate our Children's Commissioning and integrated commissioning roles across health and social care.

We acknowledge that the system leaders and wider public sector stakeholders need to come together to consider the current issues across children's services and consider together what our strategic system approach is to address those. A Children's Improvement Summit will take place on the 26 November 2018.

The aim of the Children's improvement summit will be to bring the leaders together from across the public-sector service and voluntary service for Children's Services together to:

- Agree a Children's Services concordat of our behaviours and values that will underpin how we work as a partnership to bring about the necessary changes in Children's services.
- Discuss and agree the key themes of weakness in our partnership working, commissioning and services offer and agree key actions as leaders we will commit to as in a Children's improvement plan.
- Make personal pledges for what we will bring to partnership working and improvement in Children's services.

By phase 3 of self-sustaining improvement, July 2020, we will:

- a) Have an agreed strategic approach to SEND underpinned by a SEND Improvement Programme - this will have been co-produced by partners and consulted on with schools, GP's, children, young people, parents and carers. (by Jan 19)
- b) Agreed a Children's Services concordat of our behaviours and values which will inform and is embedded across all our practice. (by Jun 20)
- c) Established a children's improvement team to take forward the SEND and other wider children improvement programme. (by Dec 18)
- d) Have embedded the Birmingham Children's Strategic Partnership Executive and be demonstrating our agreed set of partnership behaviours and improvements in children's outcomes. (by Dec 18)
- e) Have an agreed memorandum of understanding to identify areas for integrated commissioning or services (either integrated commissioning for individuals or commissioning services for groups) informed by SEND JSNA. (by Apr 19)
- f) Have in place substantive senior leadership capacity for SEND. (by Mar19)

Outcome Evaluation:

We will know we have made an impact when there are robust levels of challenge and support to agencies through the Children's Strategic Partnership Executive delivering the improvements, with commitment from Members and senior leaders, with understood routes of escalation that lead to practical changes and improve outcomes for children and young people with SEND.

1.2 Significant periods of change across the partnership have led to a lack of an overarching approach. There is not a joined-up strategy for SEN and/or disabilities across Birmingham.

Context and barriers

Birmingham has experienced a significant amount of change and instability over recent years, both from a lack of consistency in leadership in BCC for SEND, lack of a single health commissioning voice, changes in CEO leadership across agencies and multiple system challenges across Children's services. We are also aware of the environment within which the commissioning and provision of services has operated in recent years, with reduced multi agency funding, significant cost pressures within BCC. Combined with a lack of 'joined up' strategic planning, decision-making, impact assessment, quality monitoring and assurances has clearly contributed to the current inadequacies in our commissioning and provisions of quality SEND services to children and young people. This has led to poor partnership working and a lack of a shared strategic approach for improving outcomes for children and young people with SEND. A consequence of this has been poor outcomes for children and young people with SEND and a number of workforce challenges.

Our response

By phase 3 of self-sustaining improvement, July 2020, we will:

- a) Learn from best practice examples across the country to develop a transformed SEND services in Birmingham. (by Apr 21)
- b) Use the full baseline review across the partnership of the commissioning and provisions of SEND to inform a future integrated commissioning and integrated care delivery for SEND – including, for example, SENAR and Access to Education (A2E). (by Sep 19)
- c) Implemented the new integrated commissioning and care delivery model and be monitoring its outcomes. (by Apr 22)
- d) Have co-produced a shared SEND strategy that has been formally approved by the relevant decision-making bodies. (by Mar 19)
- e) Have established the governance framework and structures to support joint-working across all key stakeholder organisations and will have made integrated commissioning decisions which impact positively on children's services for SEND. (by Apr 19)
- f) Have put in place joint training on key areas that will improve the quality of information and documentation for families (for example, report writing). (by Oct 19)
- g) Have embedded our quality assurance as a single framework across the partnership. (by Jul 19)
- h) Self-regulate through our Children's assurance governance. (by Mar 20)

Outcome Evaluation:

We will know we have made an impact when service user and partner sampling demonstrates greater awareness and ownership of the SEND strategy and shared vision across the city.

1.3 Actions to benefit children and young people who have SEN and/or disabilities have been happening in isolation. There has been a complete lack of strategic planning. A great deal of what is good is the result of the qualities of the individuals who are delivering aspects of the provision.

Context and barriers

There has been limited, consistent strategic leadership for SEND in Birmingham and an absence of strategic planning. Work has taken place in isolation and has not been integrated and joined up. There has been no strategic forum or group for children's services generally or for SEND specifically.

Our response

By phase 3 of self-sustaining improvement, July 2020, we will:

- a) Develop and agree a shared SEND JSNA for the city. (by Feb 19)
- b) Align the priorities captured within the updated SEND JSNA and other needs assessments and ensure any gaps in provision (and data) are identified. The JSNA will also map out current and projected future demand for services, including the impact of predicted population growth. (by Sep 19)

- c) Have reviewed the SEND inclusion strategy to reflect and promote a multi-agency holistic approach across health and social care. (by Mar 19)
- d) Fully established the Birmingham Strategic Partnership Executive for Children with a clear set of improvement priorities. (by Feb 19)
- e) Fully established the SEND Improvement Programme, and have consistent integrated reporting through the SEND governance and statutory bodies. (by Dec 18)
- f) Where appropriate explore the alignment of budget and or resources across partner organisations. (by Aug 20)

Outcome Evaluation:

We will know we have made an impact when there is a single, shared strategic approach to SEND in Birmingham that drives the implementation of service changes, improved outcomes and improved value for money.

Children and Young People's needs are understood and resources applied so they get what they need when they need it.

2. The effectiveness of inter-agency working

2.1 Leaders have not ensured that the 2014 reforms have had a marked impact on improving provision and outcomes for children and young people who have SEN and/or disabilities. Until very recently, health, education and social care teams have not worked together effectively at a strategic level. As no one has taken a clear and cohesive overview of provision and outcomes for children and young people who have SEN and/or disabilities, the local area has not implemented the reforms effectively.

Context and barriers

Birmingham has not effectively worked together to fully implement the 2014 reforms; this has had an adverse impact on the quality and outcomes for children and young people with SEND. There has been no clear overall leadership for SEND, with key gaps in relation to SEND leadership. Whilst there now is a strategic commitment to improve outcomes for children and young people with SEND, there is a significant amount of improvement activity that is needed both within individual organisations and across the partnership.

Our response

By phase 3 of self-sustaining improvement, July 2020, we will:

- a) Undertake a collective baseline review of current service delivery and practice against the 2014 reforms and the 2015 Code of Practice (in part informed by SEND JSNA. The outcomes of this review will contribute to the development of the SEND Improvement Programme and the case for change for integrated commissioning and integrated care delivery model. (by Oct 20)

- b) Develop from the SEND improvement plan and baseline reviews a new model of commissioning and case for SEND to transform and sustain our services for current and future generations. (by Jul 20)
- c) Put in place information and training for professionals on the SEND reforms and Code of Practice and establish an information repository of 'what good looks like'. (by Apr 19)
- d) Have developed an outline workforce development strategy and plan, including skills and expertise relating to service transformation and improvement, joint and integrated working, cultural and behavioural change and co-production. (by Mar 20)
- e) Have deployed the increased capacity in Designated Clinical Officer and Designated Medical Officer roles to provide assurance around meeting the health need requirements of the Children and Families Act and improve the quality of health input into EHCPs. (from Jan 19)
- f) Have developed and started to embed a new culture – as set out in the Code of Practice – that creates a culture of aspiration and independence. (by Jun 19)
- g) Have in place an integrated SEND Outcomes Framework to monitor and self-regulate our improvement activity to ensure we are making progress in inputs and outcomes for individuals with SEND. (by Jul 20)
- h) Ensure transitions at key points will be standardised through multi-agency approaches – this will include necessary focus on preparation for adulthood. (by Jul 19)
- i) Improve communication and co-ordination through the recommissioning of SENAR as a multi-agency service. (by Apr 19)
- j) Ensure robust information sharing agreements, developed by specialist information governance leads across the system, are in place to support and promote effective sharing of information. (by Aug 19)

Outcome Evaluation:

We will know we have made an impact when the experiences and outcomes of children and families using our services have improved and families understand and can navigate the local offer, as evidenced through the parent carer survey tool. We will know we have made an impact when we fully meet the requirements of the Act.

3. The coordination of assessments of children and young people's needs between agencies

3.1 There has not been a robust and coordinated implementation plan to realise the desire of professionals who want to do the right things for children and young people in Birmingham. The local area cannot simply adapt what is already in place to improve provision and outcomes.

Context/barriers

There has been a history of poor partnership work in relation to children with SEND in Birmingham. Part of this has been an absence of a joint and shared approach to integrated working and workforce development. This has contributed to disconnect within and across services. We recognise that this needs to be transformation programme of activity. Inclusion of health services within the EHC planning processes is poor. Practitioners are not routinely invited to contribute to EHC assessments or review processes, and do not regularly receive copies of plans or when information is provided this is not routinely nor effectively referenced within plans. No health service was able to provide evidence of working knowledge about the number of children with EHC plans within their caseload.

Our response

By phase 3 of self-sustaining improvement, July 2020, we will:

- a) Have held a multiagency and multi-professional head of services workshop to map together the current journey of the child and discuss areas where that journey is not delivering for the child, staff and partners to deliver the best services we can. (by Apr 19)
- b) Have developed mechanism for sharing of good practice across and within agencies. (by Jun 20)
- c) Identify immediate improvements areas from the journey of the child mapping and those which will inform our wider transformation of the SEND commissioning and service offer. (by Sep 19)
- d) Share multi-agency SEND performance management information across the partnership that will inform decision making and report caseload management'. (by Jan 19)
- e) Have an agreed approach to integrated workforce planning and development. (by Jun 20)
- f) Have an agreed and embedded process between SENAR and Health to communicate the need for a health assessment or report at both the initial and review stage of the process and compliance is monitored. (Action completed)
- g) Have implemented changes to how we work to ensure the engagement and involvement of professionals in service planning, development, delivery and review. (by Sep 19)
- h) Promote education / awareness of the needs of children and young people with SEN and/or disabilities with professionals. (by Dec 19)
- i) Explore the opportunity to develop the case for change for a new model of integrated care delivery for SEND. (by Sep 19)
- j) Include NHS numbers on all plans and plans to be shared between contributing agencies. The plans will be uploaded and flagged on the respective clinical information systems within health. (by Jan 19)
- k) Review and consider implementation of multiagency care plans for those not eligible for EHCP but who have additional educational, social and / or health needs. (by Jun 19)

Outcome Evaluation:

We will know we have made an impact when there is clear evidence of pride and ownership in regard to professional engagement and involvement in our SEND services and an improvement in our staff survey results, retention and recruitment rates.

Increased understanding, support, and challenge of SEND improvement action plan in the city which will be evidenced in Quality Assurance reports.

4. Integrated Commissioning

4.1 Integrated commissioning is significantly underdeveloped across the local area. Professionals were unable to identify or articulate a clear view, either individually or as a partnership, about their main priorities for integrated commissioning. As service development and capacity does not match demand, the needs of children and young people are not being met. This is particularly evident within the speech and language therapy (SALT) services.

Context and barriers

Integrated commissioning has not developed effectively in Birmingham and there are no pooled budgets. There is no integrated commissioning strategy or plan and commissioning practice, skills and capacity varies significantly across the partnership. Commissioning decision making across partners is weak. There are no agreed commissioning priorities across partners for Children's Services. The current JSNA is not up to date, so there is a lack of joint understanding of need and outcomes we must address through our commissioning intentions. There is limited shared understanding of contracts currently in place and of capacity and demand. There is limited understanding of current use of resources and of the impact and effectiveness of commissioning spend. There is limited evidence of engagement and involvement of children, young people, parents and carers in commissioning and informing our commissioning intentions. Commissioning decisions have been undertaken in isolation and impacts not shared, understood across the partnership. We have not collectively reviewed our commissioning activities to review opportunity for efficiencies and freeing up resources as an integrated prioritisation or commissioned plan.

Our response

In August 2018, CEO's of BCC, BSol CCG and BCT gave the mandate to produce a strategy for aligning commissioning for SEND, and a draft framework has now been produced. A proposal for how we take forward integrated commissioning will be going to the November Governing Bodies, Trust Boards and Cabinet to seek a mandate to develop a plan and road map for Integrated Children's Commissioning. We are starting integrated commission by working more closely together to jointly review services and this will be more evidence as we fully establish our integrated improvement team and commence our phase 1 stage of the improvement plan.

By phase 3 of self-sustaining improvement, July 2020, we will have:

- a) Secured mandate to proceed to establishing integrated commissioning and roadmap for when and how we will achieve this. (by Jan 19)
- b) Developed our strategic approach to aligned and integrated commissioning, including the development of a shared outcomes framework, recognising the different approaches for individual and strategic level commissioning. The first outline framework to be considered for approval by partners by November / December 2018 to enable effective co-production with partners and formal approval by January 2019. This strategy development will include: (by Mar 19)
 - Identifying the current commissioning arrangements for all partners;
 - Identifying all budgets that are allocated to services that could be jointly commissioned; and
 - Identifying the current capacity and demand for all services to understand and then address current gaps. A key focus will be on speech and language therapy, occupational therapy and physiotherapy.
- c) Provided clear oversight and governance for aligned and integrated commissioning, including reviewing the outcomes of panel requests and decisions, and the introduction of a complex care panel. (by May 19)
- d) Identified the current capacity and skills of associated commissioning capacity across the partners and will have produced a plan to pool or align resources, including developing additional capacity to improve the speed of our response to deliver on the action plan. (by Apr 19)
- e) Developed an agreed approach to co-production, defining all partners' roles and responsibilities and ensures that the views and experiences of children, young people and parents and carers are at the centre of all planning and delivery of provision. (by Feb 19)
- f) Gained an improved understanding of unmet needs through co-producing our outcomes framework with all partners and through improved analysis of panel requests, Early Help Assessments and other local intelligence. This will include gathering qualitative information from children, young people, parent carers and all partners. (by Mar 19)
- g) Considered and taken decisions on models to bring waiting lists for assessment and therapies back in line with 18 weeks. (by Sep 19)
- h) Ensure a life-course approach to commissioning including integrated commissioning with adult services for preparation for adulthood. (by Mar 19)

Outcome Evaluation:

We will know we have made an impact when we can evidence that our integrated commissioning activity enables the provision of services that better meet need and that provide good value for money.

Children and Young People's needs are assessed and met in a timely and purposeful manner, with needs identified at the earliest point and appropriate support put in place.

5. Co-Production

5.1 Co-production (a way of working where children and young people, families and those that provide the services work together to create a decision or a service which works for them all) is not embedded in the local area. Actively engaging with parents to help shape services and commissioning is very rare in Birmingham.

Context/barriers

There has been a lack of engagement with children, families and carers in Birmingham and an absence of the 'expectation' that co-production is standard. We have done things 'for' or 'to' people or done 'nothing at all'.

Our response

By phase 3 of self-sustaining improvement, July 2020, we will have:

- a) Reviewed and mapped our current engagement and communication activities and engage with children and families to make recommendations for how we can make improvements. (from Mar 19)
- b) Embedded co-production across our services. (by Sep 19)
- c) Regularly engaged and surveyed children and families to seek their views of key elements of the SEND service to inform our improvements and service delivery, and the published Local Offer. (by May 20)
- d) Significantly improved our online Local Offer 'portal' and support material for children, families, and professionals. (from Apr 19)
- e) Active partnership forums with parents and carers to share plans to improve the provision of services. (by Feb 19)
- f) Developed strategies for obtaining the 'voice of the child', especially those with communication difficulties and very young children. (by Mar 19)

Outcome Evaluation:

We will know we have made an impact when children, parents and carers tell us, consistently, that we do things differently and that co-production is getting to be the 'norm'.

A culture of co-production is evident in future commissioning projects and services appear more responsive to CYP and their family's needs resulting in:

- *improved access to services*
- *improved satisfaction*
- *reduction in complaints.*

6. Parental Engagement and Satisfaction of Parents

6.1 Communication within and between services is ineffective. Parents consistently report that the ‘tell it once’ approach is not established in the local area. Parents having to repeat their stories over and over again.

Context and barriers

Partners in Birmingham acknowledge that there is significant need for improvement in relation to how we communicate across and within organisations. Services have not been fully focused towards the needs and lives of children with SEND and those who care for them.

Our response

By phase 3 of self-sustaining improvement, July 2020, we will have:

- a) Reviewed best practice and embedded change that enables families to share their story once in digital ways that can be shared between services as appropriate. (by Jul 19)
- b) Consider approach for putting in place the ‘lead professional’ model or similar to improve lines of communication with parents, parental satisfaction and act as a conduit for questions and concerns. (by Jun 20)
- c) Have secured agreement across partners in relation to shared record keeping and information management systems. (by Mar 19)
- d) Digital single care records accessible across the partnership. (from Jan 20)
- e) Developed an annual work plan for the engagement and listening to parent and carers with the parent carer forum. (by Apr 19)

Outcome Evaluation:

We will know when we have made a difference when parental satisfaction with the services have improved and this will be judged using our survey tools

6.2 There is a great deal of parental dissatisfaction. During the inspection, parents raised several concerns about the needs of children and young people who have SEN and/or disabilities not being met in Birmingham.

Context and barriers

We do not have a joined up and easy to access process for patients and families to share their concerns and issues with us. Equally, there is then now a joined up and triangulated process for be aware of concerns and understand the themes of issues being raise for us to identify actions to make continuous improvements.

Our response

By phase 3 of self-sustaining improvement, July 2020, we will have:

- a) Developed a strong critical friend type relationship with parent/carer forum. (from Apr 19)
- b) Developed the relationship with all stakeholders, including parents and carers, that support the co-production of provision and services. (from Oct 19)
- c) Baseline satisfaction with existing service provision, and use this information as a tool to continually inform decision making to support improved levels of satisfaction of parents and carers. (Action completed)
- d) Undertaken regular reviews of complaints and comments across our services, sharing themes and learning. (from Feb 19)
- e) Undertaken regular parent consultation regarding the SEND Ofsted findings and then our progress on transformation. (from Oct 18)
- f) Ensured the findings of this review and consultation will be used to improve services and experiences of children with SEND and their parents and carers. (from Sep 19)
- g) Ensured that the SEND strategy has clearly set out, and effectively communicated, to parents and carers what they can expect from the SEND system and how it will improve outcomes for their children. (by Apr 19)
- h) Trained and staffed and raised the confidence of staff to engage with parents in an enabling manner. (by Mar 20)
- i) Clear mechanisms in place that are well communicated to families for how to raise concerns, complaints and compliments with us. (from Apr 19)
- j) A joined up approach for analysing and acting on the themes of complaints, embedded in our self-regulation process ensuring that complaints are logged appropriately and responded to within fifteen working days. (by Jul 20)

Outcome Evaluation:

We will know we have made an impact when increasing numbers of our families and children rate our services as good or better, and we see a reduction in the complaints received by services.

7. The accessibility and currency of the local offer

7.1 Birmingham has not ensured that the published local offer is a useful means of communicating with families. It is difficult to locate information and many parents and young people are unaware of its existence. Very few were involved in its development.

Context and barriers

The Birmingham Local Offer is not as comprehensive or as well published as it should be. This means that it is not well understood by families and easy access to services is hampered, which could be delaying access to services and leads to a poor experience of children, young people, parents and carers.

Our response

By phase 3 of self-sustaining improvement, July 2020, we will have:

- a) Undertaken a comprehensive review of the Birmingham Local Offer, in partnership with children, parents and carers and professionals across the partnership. (from May 19)
- b) Considered other Local Offers and identified the key factors for success. (by May 19)
- c) Improved knowledge and awareness of the Local Offer by having a well-publicised re launch with clear direction to the SEND website that will also provide an 'Annual Review of Parent / Carer Feedback and Partnership Response'. (by Apr 19)
- d) Ensured that the Local Offer will be compliant with the requirements in the SEND Code of Practice 2014, and which will be automatically updated according to changes and improvements to service provision. (by Apr 19)
- e) Ensured that staff will be trained to routinely use the Local Offer with parents/carers when they phone in with enquiries about where they might find help and assistance. (by Dec 19)
- f) Ensured that personal budgets are well publicised to parents and carers, especially where the opportunity supports an efficient use of resources. (by Jun 20)
- g) Ensured that parents are aware of which short breaks are on offer and how to access them. (by Jul 19)

Outcome Evaluation:

We will know we have made an impact when the statutory annual survey shows positive feedback from parents /carers and young people on how easily they were able to find the support and or information they were looking for. The methodology for this will be to use the ladder of engagement model which has been developed by the national parent carer forum. Parents/carers routinely refer to the Local Offer and demonstrate they understand what the Local Offer is for.

8. The quality of EHC plans

8.1 The current designated medical officer (DMO) role is under-resourced and lacks capacity. This restricts the effective discharge of the CCG's strategic responsibility for implementing the reforms. There is a lack of training and awareness across the health providers about the reforms. There is no strategic oversight of health professionals' contribution to education, health and care (EHC) plans.

Context/barriers

There has been insufficient DMO resource and capacity in Birmingham which has hampered the ability of NHS partners to fully and properly implement the 2014 reforms and the 2015 code of practice. Consequently, we have not had sufficient clinical input and leadership to EHCP, review and clinical challenge to EHCPs and review or satisfactory quality improvement of EHCPs. Knowledge and skills levels are patchy with a general low level of awareness across the workforce supporting EHCPs or 'what good looks like' in relation to SEND provision and outcomes.

Our response

By phase 3 of self-sustaining improvement, July 2020, we will:

- a) Have increased DMO capacity to 1.5 wte and DCO capacity to 1.0 wte which will greatly enhance the clinical strategic leadership for SEND across the city. (by Feb 19)
- b) Have developed and commenced an education and awareness programme to staff and leaders of the 2014 reforms and the 2015 code of practice and roles and responsibilities in together meeting those requirements. (from Aug 19)
- c) Have a clear commitment from all partners in making full contributions and information to EHC Plans including final report writing and sharing of final versions across organisations. (by Feb 19)
- d) Have ongoing quality assurance and clinical audit to ensure EHCP process and plans are working effectively and meeting the outcomes for our individuals. (by Feb 19)
- e) Have rolled out a partnership wider education and awareness session for the reforms, it will be a key element of induction and supervision. (from Aug 19)

Outcome Evaluation:

We will know we have made an impact when there is visible clinical leadership that is driving clinical improvements that lead to enhanced services, and health providers know and understand the 2014 reforms and their role in meeting these.

We will know we have made an impact when we are achieving improved educational, health and social care outcomes for children with EHCPs.

8.2 The quality of EHC plans is variable. Some are good but many of them are poor. They tend to focus on short-term educational outcomes and contain little information about health and social care needs and provision. Outcomes are not sufficiently aspirational or measurable.

Context/barriers

Lack of capacity to support SEND, particularly with regard to Designated Clinical Officer and health input from both commissioners and service providers has led to inconsistency of health input and to poor quality of EHCPs and lack of review. Closer working between health and SENAR has not been well developed. Whilst there have been processes in place to undertake quality assurance of EHCPs, there has been no dissemination of the learning from these reviews or changes to operational practice. There has not been a single quality assurance process of EHCP and governance that support the assurance and escalation of issues in relation to quality.

Our response

By phase 3 of self-sustaining improvement, July 2020, we will:

- a) Enable the new DCO posts will provide continuity of input into EHCPs from a health perspective including review and quality assurance. (by Feb 19)
- b) Ensure Clinical professionals who provide therapy services will be supported to input into EHCPs, including the identification of Holistic Wellbeing outcomes. (by Mar 19)
- c) Develop much more effective joint working between partners who jointly work to assess, develop and review EHC plans that will be embedded in new operational policies. (from Nov 18)
- d) Agree a joint quality assurance framework for EHCPs, to ensure that Plans are thorough, comprehensive and detailed, and produced within a 20 weeks' timeframe, and reviewed annually. (by Apr 19)
- e) Ensure robust processes and sufficient capacity to undertake Year 9 EHCP reviews that will include preparation for adulthood outcomes. (by Dec 19)
- f) Have made improvements to the EHCP information request form and implemented these improvements. (by Jan 19)
- g) Support the increased uptake of annual health checks by inclusion within the CCG Universal Offer to GPs. (by Oct 19)
- h) Have referral guidelines in place to support appropriate referrals, with sufficient information, to undertake an EHCP assessment. (from Apr 19)

Outcome Evaluation:

We will know we have made an impact when EHCP assessments will:

- Establish and record the views, interests and aspirations of the parent and child or young person.*
- Provide a full description of the child or young person's special educational needs and any health and social care needs,*
- Establish outcomes across education, health and social care based on the child or young person's needs and aspirations, and help them to prepare for adulthood.*
- Specify the provision required and how education, health and care services will work together to meet the child or young person's needs and support the achievement of the agreed outcomes*
- Use person-centred approaches, transparent systems and decision-making processes with clear lines of governance involving education, health and care.*

- Have an increasing number of parents / carers report satisfaction with EHCPs.
- Have improved timeliness of Annual Reviews.

8.3 The Special Educational Needs Assessment and Review (SENAR) service lacks the capacity and culture to meet its intended aims. In common with other services, there are individuals who are making a difference to children and young people. However, there is a lack of strategic oversight.

Context/barriers

There are long standing challenges that face the SENAR service and which need to be addressed before sustainable improvements can be made. Challenges include workforce capacity and skills, culture and ways of working, finances and resource allocation and operational practice.

Our response

By phase 3 of self-sustaining improvement, July 2020, we will:

- Undertaken a comprehensive review of the SENAR service and made recommendations regarding an improved operational model, within the context of a wider model of care review. (Mar 19 onward)
- Undertaken a review of complaints and Tribunals, using the findings of the review to inform service improvement. (by Dec 18)

Outcome Evaluation:

We will know we have made an impact when parents / carers report increasing levels of satisfaction with the services / processes of the SEND delivery model in Birmingham.

9. Waiting times and access to therapies and health professionals

9.1 Waiting times are too long. Children and young people are not seen quickly enough by a range of therapists or professionals in the child development centres (CDC).

Context/barriers

There is no autistic spectrum disorder (ASD) diagnostic pathway for children over four years old. Children under 4 years old can be assessed through the child development centre pathway - however, children cannot be referred before their second birthday for this assessment and wait a year to be seen in a CDC. As the window of opportunity for assessment for those under four years old is narrow, some parents

believe that their children's needs are not identified or are identified incorrectly. Children are not placed on the MDT list at the point of the referral. Children are all seen by community paediatricians in the first instance.

The provision of community therapy services (SLT, OT and physiotherapy) has not kept pace with rising demand and consequently there has been a rise in waiting times which have impacted on the provision of services for children and with parent and carer satisfaction levels.

Our response

By phase 3 of self-sustaining improvement, July 2020, we will:

- a) Have agreed a fast-track proposal to tackle the backlog of dysphagia assessments for speech and language therapy assessments. (by Mar 19)
- b) Consider proposals for the re-commissioning of the SALT pathway to reduce waiting lists. (by Mar 19)
- c) Have developed a universal offer in regard to self-help and care published within the Local Offer. (by Oct 19)
- d) Have reviewed the current activity, demand and capacity and consider proposals for how we keep pace with rising demand. (by Feb 19)
- e) Have completed work with providers to develop business plans for consideration to improve access to community therapies (SLT, OT, Physiotherapy). (by Jun 19)
- f) Continue to improve therapy pathways to make the best use of the available resources to support children and young people, parents, carers and schools. (from Nov 18)
- g) Look at how we can develop the workforce and parents' / carers' skills to better support children. (from Jun 19)
- h) Develop and consider a case for change for an integrated all age neurodevelopment pathway with direct access to the MDT team at the point of referral. (by Mar 19)

Outcome Evaluation:

We will know we have made an impact when waiting times for services are closer to national and regional averages. Parents and carers report better access to support / tools (available from strategic partners and schools) during the waiting period for services.

10. Academic progress when compared to all pupils nationally

10.1 Pupils who have SEN and/or disabilities make weak academic progress, attend less often and are excluded more frequently than other pupils in Birmingham and all pupils nationally.

Context and barriers

We know Birmingham is below the national average for attainment and progress for SEND at Early Years KS1 and KS2 and that too many young people are not entering employment or supported employment. There are currently inconsistencies with Year 9 Reviews, ensuring the Preparing for Adulthood outcomes are discussed and the relevant high aspirations are set. We also know that we need to build sufficiency of high quality Early Years places. Our recording and use of data to improve service is weak and needs urgent improvement. We know that, compared to our peers, we have greater proportion of children in special schools (especially in the younger age groups).

Our response

By phase 3 of self-sustaining improvement, July 2020, we will:

- a) Have completed a baseline review of attendance and exclusions for children and young people with SEND, using the baseline review to set out clear improvement actions that will be delivered by July 2020.
- b) Commenced contract negotiations with specialist colleges in order to improve service quality, value for money and outcomes for young people. (by Jul 19)
- c) Provided briefings for Careers Advisers around inputting into Year 9 Reviews so they capture the young person's aspirations and PfA outcomes has been delivered and further support is planned as part of the Careers Strategy. (by May 20)
- d) Ensured EHCP reviews consider transition needs including moving from primary to secondary care, and to ongoing higher education, apprenticeships and work. (by Jul 19)
- e) Have in place a robust strategy for supporting ambitions, attendance and attainment for children with SEND in Key Stages 1, 2, 3 and 4, and to promote awareness across all schools and academies of the services available to support inclusive practice. (by Jul 20)
- f) Enable the sharing of best practice, culture and leadership in relation to the inclusion of children in mainstream settings and create 'excellence of inclusion practice'. (by Dec 19)
- g) (As BSoL STP) have gifted of up to 10% of our apprenticeship levy to smaller organisations across the city to be priorities to offer all children leaving care an apprenticeship opportunity across our partnership (from Jun 19).

Outcome Evaluation:

We will know we have made an impact when the achievement gap between children with SEND and their peer group has reduced and when more young people with SEND are in (supported) employment.

11. Absence and Exclusions

11.1 Parents raised concerns about children and young people who are not in education. As leaders are aware that too many pupils who have SEN and/or disabilities are not in school, one of the targets within the education delivery and improvement plan is to reduce this number. This is yet to have a significant and sustained impact.

Attendance of pupils with who have SEN and/or disabilities is lower than for other pupils in Birmingham and below the national average. Persistent absence is higher than for other pupils in Birmingham and higher than the national average.

Fixed-term and permanent exclusions of pupils who have SEN and/or disabilities are higher than for other pupils in Birmingham and all pupils nationally.

Context / Barriers

The behaviours demonstrated children and young people in mainstream settings can often be seen as disruptive and challenging. The current financial position of many schools has seen the number of support staff being reduced. This has led to a decrease in the capacity of schools to meet the individual needs of children and young people.

Our Response

By phase 3 of self-sustaining development, July 2020, we will have:

- a) In collaboration between the local authority and schools, worked together to unpack the reasons sitting behind persistent absence, fixed term and permanent exclusions for those children who have SEND, and then to develop strategies to address these reasons. (by Jun 20)
- b) Ensured all schools are aware of Education and Emotional Well-being Strategy group which will oversee the development of skills, knowledge and understanding of the school workforce. (by Sep 19)
- c) Ensured all mainstream schools undertake a collaborative approach to inclusive education, reflecting the national priorities of Ofsted, DfE and enhance connectivity with special schools. (by Sep 19)
- d) Integrated initiatives such as New Start, Attachment & Trauma Aware Schools, SEMH Pathfinder and Vulnerable & Adolescent Support (via Early Help), allowing and encouraging new and emerging initiatives to be integrated. (by Sep 19)
- e) Reduced the number of children with SEN without a school place by working with 'good' or 'outstanding' Alternative Providers. (by Aug 20)

Outcome Evaluation:

We know we will have made an impact when we have reduced the gap in attendance between children with SEN or disabilities and those who do not. The number of fixed-term and permanent exclusions of pupils who have SEN and/or disabilities is lower than other pupils in Birmingham and all pupils nationally.

12. Employment Opportunities

12.1 Not enough young people who have SEN and/or disabilities are entering employment or supported employment. The proportion of adults with learning disabilities in paid employment is below the national average.

Context and Barriers

We know that Birmingham has poor performance for supporting working age adults with Disability into employment and that too many young people are not entering employment or supported employment as the offer, processes and systems for preparing for adulthood are not yet developed or integrated across the system. A Transitions Strategy was agreed by the Council in February 2018, but has not yet been fully implemented. Once implemented, the strategy will provide a strategic and operational platform for improve life course planning and commissioning, which in turn would improve performance for access to employment. Whilst we expect preparing for adulthood and more effective transitions planning to feature across all actions, there will be specific governance to lead improvement for Preparing for Adulthood of which increasing Employment Opportunities will be a central aspect of delivery.

Our response:

By phase 3 of self-sustaining improvement, July 2020, we will:

- a) Have completed a baseline review of employment opportunities for children and young people with SEND, using the baseline review to set out clear improvement actions. (from Apr 19)
- b) Have specific mechanisms in place to ensure the quality of ECHP plans to address Employment Opportunities from year 9. (by Dec 19)
- c) Provided briefings for all services that support 14-25 year olds for inputting into Year 9 Reviews (and then becomes part of Annual Reviews) so they capture the young person's aspirations and PfA outcomes have been delivered and further support is planned. (by Dec 19)
- d) Further reviewed the sufficiency and effectiveness of Post 16 pathways into adulthood, particularly higher education pathways, employment pathways and the availability of supported housing options. (by Jul 20)
- e) Ensure the right culture and leadership in relation to the delivering an aspirational service offer for those aged 14-25 with SEND that feels seamless and integrated to the family and based on principles of inclusion, promoting independence and attainment. (by Jun 20)

Outcome Evaluation:

We know we will have made an impact when we have increased numbers of young people who have SEN and / or disabilities who enter employment or supported employment, and when the proportion of adults with learning disabilities in paid employment is closer to the national average.

Glossary

A2E	Access to Education
ADHD	Attention Deficit Hyperactivity Disorder
ASD	Autistic Spectrum Disorder
BCC	Birmingham City Council
BCHC	Birmingham Community Healthcare NHS Foundation Trust
BCT	Birmingham Children's Trust
BSol	Birmingham & Solihull Clinical Commissioning Group
BVSC	Birmingham Voluntary Sector Centre
BWC	Birmingham Women's and Children's NHS Foundation Trust
CCG	Clinical Commissioning Group
CDC	Child Development Centre
CEO	Chief Executive Officer
CQC	Care Quality Commission
DCO	Designated Clinical Officer
DfE	Department for Education
DMO	Designated Medical Officer
EHC / EHCP	Education, Health & Care / Education, Health & Care Plan
GP	General Practitioner
JSNA	Joint Strategic Needs Assessment
KS1 / KS2	Key Stage 1 / Key Stage 2
LA	Local Authority
MDT	Multi-Disciplinary Team
OT	Occupational Therapy
PfA	Preparing for Adulthood
PMO	Programme Management Office
RiO	An NHS electronic care records system
SALT	Speech And Language Therapy
SENAR	Special Educational Needs Assessment and Review
SEN / SEND	Special educational Needs / Special Educational Needs and Disabilities
SRO	Senior Responsible Officer
STP	Sustainability and Transformation Partnership
WSoA	Written Statement of Action
WTE	Whole Time Equivalent

SEND Improvement Programme - Timeline Overview

		Initial stabilisation and programme set-up							18-month SEND Improvement Programme																		Post-programme			
Workstream		Jun-18	Jul-18	Aug-18	Sep-18	Oct-18	Nov-18	Dec-18	Jan-19	Feb-19	Mar-19	Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20
1	The lack of an overarching approach or joined up strategy for improving provision and outcomes for children and young people who have SEN and/or disabilities across Birmingham																													Through to Apr22
2	The effectiveness of inter-agency working																													
3	The coordination of assessments of children and young people's needs between agencies																													
4	Integrated Commissioning																													
5	Co-Production																													
6	Parental Engagement and Satisfaction of Parents																													
7	The accessibility and currency of the local offer																													
8	The quality of EHC plans																													
9	Waiting times and access to therapies and health professionals																													
10	Academic progress when compared to all pupils nationally																													
11	Absence and Exclusions																													
12	Employment Opportunities																													



Learning, Culture & Physical Activity O&S Committee: Work Programme 2018/19

Chair: Cllr Mariam Khan

Committee Members: Cllrs: Alex Aitken, Mary Locke, Gary Sambrook, Kath Scott, Mike Sharpe, Ron Storer and Martin Straker Welds

Education Representatives: Adam Hardy, Roman Catholic Diocese; Rabia Shami, Parent Governor and Sarah Smith, Church of England Diocese

Officer Support: Rose Kiely, Group Overview & Scrutiny Manager (303 1730)
Amanda Simcox, Scrutiny Officer (675 8444)
Committee Manager: Louisa Nisbett (303 9844)

1 Terms of Reference

- 1.1 To fulfil the functions of an Overview and Scrutiny Committee as they relate to any policies, services and activities concerning schools and education; arts and culture; libraries and museums; sport; events; parks and allotments.

2 Priority Issues

- 2.1 The following were highlighted in June as the possible priority issues for the committee's 2017/18 municipal year:
- Commonwealth Games (Oct);
 - Young People and Mental Health (Sep 2018, Nov 2018 & Feb 2019);
 - SEND (this also falls within the Children Social Care O&S Committee's remit and this has been an item at their meetings on the 17th October 2018 and 17th December 2018);
 - School Place Planning (Sep);
 - School Admissions (Dec);
 - School Attainment and School Improvement (Dec and Mar);
 - Education Finance;
 - Safeguarding (also falls within the Children Social Care O&S Committee's remit);
 - Youth Services.

3 Meeting Schedule

- 3.1 Below is the list of committee dates and items. However, Members may want to use some of



these dates for other things, such as visits and informal briefings etc.

Date, Committee Rooms 3 & 4 Start at 1.30pm	Session / Outcome	Officers / Attendees
6 June 2018 at 2pm	Informal meeting to discuss the Work Programme and priorities:	<ul style="list-style-type: none"> Colin Diamond, Corporate Director, Children and Young People Anne Ainsworth, AD, Education Strategy (Lead on participation and skills, oversight on education infrastructure, finance and planning) Julie Young, Interim AD Education Safeguarding (also re-commissioning of the school improvement contract, school admissions and co-ordination of schools causing concern work) Chris Jordan, AD, Neighbourhoods & Communities Claire Starmer, Cultural Development Joe Hayden, Parks Service Manager
25 July 2018 Report Deadline: 16 July 2018	Cllr Kate Booth, Cabinet Member for Children's Wellbeing (Lead Member for Children's Services for Education and Special Educational Needs and Disabilities (SEND))	Suman McCarthy
	English Baccalaureate (EBacc) Councillors: Liz Clements, Olly Armstrong, Jon Hunt and Zaker Choudhry were invited to the committee meeting.	Colin Diamond, Corporate Director, Children and Young People and Anne Ainsworth, AD, Education Strategy
5 September 2018 Report Deadline: 24 August 2018	Young People and Mental Health	Erin Docherty Senior Nurse Lead, Forward Thinking Birmingham, Birmingham Women's and Children's NHS Foundation Trust. Joanne Thurston, Chief Operating Officer and Karen Hansford, Head of Universal Children's Services 5-19, Birmingham Community Healthcare NHS Foundation Trust.
	School Place Planning	Anne Ainsworth, Acting Corporate Director Children and Young People, Jaswinder Didiyal, Head of Service, Education Infrastructure and Dave Marlow, School Place Planning Lead Officer
10 October 2018 Report Deadline:	Commonwealth Games 2022	Cllr Ian Ward, Leader, Neil Carney, Project Director and Andrew Slattery, Commonwealth Games Programme Manager



Date, Committee Rooms 3 & 4 Start at 1.30pm	Session / Outcome	Officers / Attendees
1 October 2018	Cllr Jayne Francis, Cabinet Member, Education, Skills and Culture	Chris Brockie, Cabinet Support Officer, Symon Easton, Head of Cultural Development & Kevin Jones, Birmingham's Career Service
14 November 2018 Committee Room 6 Report Deadline: 5 November 2018	1.30pm – 2.30pm Educational Psychology Service Birmingham Visit to Pause, 21 Digbeth (20 mins travelling time to the centre)	Amanda Daniels, Principal Educational Psychologist Karen Woodfield, Area Manager, Pause, Forward Thinking Birmingham & Sandwell Beam and Leroy McConnell, Mental Health, Youth Work/Participation Lead, The Children's Society
5 December 2018 Report Deadline: 26 November 2018	School Attainment (headline data) and School Improvement	Anne Ainsworth, Acting Corporate Director Children and Young People, Julie Young, Interim AD Education Safeguarding, Tim Boyes, CEX, Tracy Ruddle, Director of Continuous School Improvement, BEP and Shagufta Anwar, Senior Intelligence Officer
	School Admissions and Fair Access	Julie Young, Interim AD Education Safeguarding and Alan Michell, Interim Lead for School Admissions and Fair Access
19 December 2019 9.00 – 10.00 Scrutiny Office	Budget 2019/20 Consultation	Cllr Jayne Francis, Cabinet Member, Education, Skills and Culture; Symon Easton, Head of Cultural Development; Chris Jordan, Assistant Director, Neighbourhoods and Communities & Lesley Poulton, Integrated Services Head
6 February 2019 Report Deadline: 29 January 2019	Young People and Mental Health	Anna Robinson, BEP Mental Health/Emotional Wellbeing Lead and Sarah Finch, Assistant Head, Colmers Secondary School and Sixth Form
	Special Educational Needs and Disability (SEND) Members from the Children's Social Care O&S Committee to be invited.	Cllr Kate Booth, Cabinet Member for Children's Wellbeing; Dr Tim O'Neill, Director for Education and Skills and Rachel O'Connor, Director of Planning & Performance, B'ham and Solihull CCG



Date, Committee Rooms 3 & 4 Start at 1.30pm	Session / Outcome	Officers / Attendees
6 March 2019 Report Deadline: 25 February 2019	School Attainment (detailed data) and School Improvement	Dr Tim O'Neil, Director For Education and Skills; Julie Young, Interim AD Education Safeguarding; Tim Boyes, CEX; BEP Tracy Ruddle, Director of Continuous School Improvement, BEP Shagufta Anwar, Senior Intelligence Officer
	Childcare Sufficiency Annual Report	Lindsey Trivett, Head of Early Years, Childcare and Children's Centres and Kevin Caulfield, Childcare Quality and Sufficiency Manager
17 April 2019 Report Deadline: 9 April 2019	Cllr Jayne Francis, Cabinet Member, Education, Skills and Culture	Tim O'Neil, Director for Education and Skills; Anne Ainsworth, AD for Skills & Employability, Education & Skills

4 Other Meetings

Call in Meetings

None scheduled

Petitions

None scheduled

Councillor Call for Action requests

None scheduled

It is suggested that the Committee approves Wednesday at 1.30pm as a suitable day and time each week for any additional meetings required to consider 'requests for call in' which may be lodged in respect of Executive decisions.

5 Report(s) to City Council

Young People and Mental Health

Date	Item
5 September 2018	Broad discussion on young people and mental health.



14 November 2018	Educational Psychology Service and visit to Pause drop in centre.
6 February 2019	Further evidence gathering.

Commonwealth Games 2022 – Citizens Engagement

Date	Item
TBC	

6 Forward Plan for Cabinet Decisions

6.1 The following decisions, extracted from the Cabinet Office Forward Plan of Decisions, are likely to be relevant to the Learning, Culture and Physical Activity O&S Committee's remit.

ID Number	Title	Cabinet Member	Proposed Date of Decision	Date of Decision
000232/2015	School Organisation Issues which may include Closures, Amalgamations, Opening of a new school – Standing Item	Education, Skills & Culture	30 Jun 17	
002600/2016	Unattached School Playing Fields – Disposal for Development	Education, Skills & Culture	24 Jan 18	
004890/2018	School Capital Programme 2018-19	Education, Skills & Culture	18 Sep 18	18 Sep 18
005060/2018	Birmingham Museums Trust Future Contract, lease agreement and Financial Arrangements - Public	Education, Skills & Culture	31 Jul 18	31 Jul 18
005062/2018	Birmingham Museum and Art Gallery - The New Museums and Collection Centre – Options Appraisal	Education, Skills & Culture	31 Jul 18	31 Jul 18
005137/2018	Youth Promise Plus – Project Extension	Education, Skills & Culture	22 Jan 19	22 Jan 19
004668/2018	Birmingham Playing Pitch Strategy 2017-2020	Education, Skills & Culture	24 Jul 18	26 Jun 18
005449/2018	Travel Assist Service	Education, Skills & Culture	11 Dec 18	11 Dec 18
005759/2018	School Health Support Service	Health & Social Care	11 Dec 18	11 Dec 18
005871/2019	Refurbishment of the Former Small Heath Lower School Site to Relocate Al - Hijrah Primary School	Education, Skills & Culture	22 Jan 19	22 Jan 19
006042/2019	Admission Arrangements and Published Admission Numbers for Community and Voluntary Controlled Schools and the Local Authority Co-ordinated Scheme 2020/2021	Education, Skills & Culture	12 Feb 19	
005280/2018	Midlands Art Centre - new lease	Leader	12 Feb 19	
005423/2018	BCC International Strategy	Leader	16 Apr 19	
005731/2019	Cofton Park Nursery - Redevelopment PUBLIC	Leader	05 Mar 19	
006004/2019	Master Plan for the Alexander Stadium	Leader	12 Feb 19	



6.2 The following are joint decisions made by the relevant Cabinet Member and Chief Officers.

Ref No	Title	Cabinet Member & Lead Officer	Date of Decision
005462/2018	Proposal to Discontinue Bournville Infant School and to alter the lower age limit and expand Bournville Junior School by Enlargement	Cllr Jayne Francis, Cabinet Member for Education, Skills & Culture Jointly with Anne Ainsworth, Acting Corporate Director for Children And Young People	8 Aug 2018
005968/2018 005969/2018	Written Statement of Action (WSOA) - Special Educational Needs and Disability (SEND) - Public Report	Cllr Kate Booth, Cabinet Member for Children's Wellbeing Jointly with Sharon Scott, Interim Assistant Director - SEND	7 Dec 2018
006031/2018	Review of Sport and Leisure Fees and Charges 2019-2020	Cllr Ian Ward, Leader and Service Director, Sport, Events, Open Space & Wellbeing	19 Dec 2018
006039/2018	Wishaw Lane Playing Fields New Changing Pavilion – Full Business Case	Cllr Sharon Thompson, Cabinet Member for Homes and Neighbourhoods and Service Director of Sport, Events, Open Spaces and Wellbeing	20 Dec 2018
006027/2018 006028/2018	3rd Floor Refurbishment of Pines School – FBC and Contract Award	Cllr Jayne Francis, Cabinet Member for Education, Skills and Culture and Anne Ainsworth, Assistant Director, Children & Young People	21 Dec 2018
006025/2018 006026/2018	Yenton School Early Years Provision – FBC and Contract Award	Cllr Jayne Francis, Cabinet Member for Education, Skills and Culture and Anne Ainsworth, Acting Corporate Director, Children & Young People	21 Dec 2018
006182/2019	Dedicated School Grant Formula 2019/20	Cllr Jayne Francis - Education, Skills and Dr Tim O'Neill, Director for Education and Skills	24 Jan 2019