

Report of Director of Children's Services

Report to Executive Board

Date: 22nd March 2017

Subject: Leeds joint area inspection of services for children and young people with Special Educational Needs and Disabilities (SEND)



Are specific electoral Wards affected? If relevant, name(s) of Ward(s):	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Are there implications for equality and diversity and cohesion and integration?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Is the decision eligible for Call-In?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Does the report contain confidential or exempt information? If relevant, Access to Information Procedure Rule number: Appendix number:	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Summary of main issues

1. In May 2016, Ofsted and the Care Quality Commission launched an inspection framework to cover children's services and health arrangements for children and young people with SEND, in accordance with the Children and Families Act (2014).
2. Leeds was the fifteenth local authority to be inspected under this new framework, with a one-week inspection taking place in December 2016. The outcome letter for the inspection was published on 16 February 2016 (appendix three).
3. Inspectors noted a number of key strengths in Leeds, and identified some areas for development which the local authority and health services were already aware of. An action plan to address these areas for development will be monitored through the Complex Needs Partnership Board.

Recommendations

1. Executive Board is recommended to note and comment upon the report, and the outcome of Leeds' SEND inspection
2. Executive Board is recommended to note and approve the proposals for the post-inspection action plan to address areas for development to be monitored by the re-configured Steering Group, which reports in to the Complex Needs Partnership Board chaired by the Executive Member for Children and Families.

3. Executive Board is recommended to note that the responsible officer is the Head of Complex Needs.

1 Purpose of this report

- 1.1 This report provides Executive Board with an overview of the changes to services for children with Special Educational Needs and Disabilities (SEND), introduced by the Children and Families Act (2014), and the joint Ofsted and Care Quality Commission (CQC) framework for inspecting local area arrangements to implement the Act.
- 1.2 The report notes the findings of the Leeds SEND inspection which took place in December 2016, and outlines the next steps that will be taken to address the areas for development that inspectors identified.

2 Background information

- 2.1 As noted in a report to Executive Board in September 2014, the Children and Families Act of 2014 introduced changes to a number of areas, including family justice and care. However, the changes in the Act to services for children and young people with SEND were the most significant in 30 years, and included:
- Local authorities are now required to produce a 'local offer' of services for children and young people with SEND and their families. This should clearly set out services available locally for those aged 0-25 years with SEND, and how to access these services.
 - Statements of Special Educational Needs (Statements) and Learning Difficulty Assessments (LDAs) must be replaced with Education, Health and Care Plans (EHCPs). EHCPs cover the 0-25 years age range for children and young people with complex needs which should be child centred, and must focus on outcomes including preparation for adulthood. All existing SEN Statements must be converted to EHCPs by April 2018.
 - Local authorities, as part of the EHCP process, are required to offer families the option of a personal budget, which can be managed in different ways to increase families' self-direction, choice and control.
 - Complex Needs services (or their equivalents in other local authorities) are required to work in a more integrated way with social work and health services, including through the joint commissioning of support and services. Health services are required to have a designated medical officer/ clinical officer to lead on implementation of the SEND reforms.

For more detail on the changes to SEND introduced by the Act, please see the one minute guide (appendix one).

- 2.2 Leeds' work to implement the changes in the Children and Families Act was and continues to be managed through the Complex Needs Partnership Board, chaired by the Executive Member for Children and Families, which includes strong representation from health partners and the EPIC Leeds parents' forum. Leeds City Council children's services and health colleagues work closely through the Interagency Children and Families Act Implementation Steering Group (the

Steering Group), which includes representation from the third sector, to manage the operational implementation of the changes.

- 2.3 The Department for Education provided £1.45m of grant funding for Leeds to support the implementation of the SEND reforms in 2014-15, with further funding in the following year. The funding covered additional expenditure associated with implementing the changes, including transferring children and young people to EHCPs from SEN Statements and extending support and services up to the age of 25 for young people with SEND.
- 2.4 In May 2015, Ofsted and the Care Quality Commission (CQC) introduced a new framework for the inspection of local areas' effectiveness in identifying and meeting the needs of children and young people with SEND, and to evaluate the effectiveness of the local area in fulfilling the new duties introduced by the Children and Families Act (2014).
- 2.5 The inspection framework focuses on three key aspects of the effectiveness of the local area, in:
- Identifying children and young people with SEND;
 - Assessing and meeting the needs of children and young people with SEND; and
 - Improving outcomes for children and young people with SEND.
- 2.6 The inspections are not graded, and outcomes of an inspection are reported in a letter to key agencies in each local area which outlines strengths and areas for development identified by inspectors and which is published on both the Ofsted and the CQC websites. For more information about the inspection framework, please see the one minute guide attached at appendix two.

3 Main issues

- 3.1 Joint planning for the potential SEND inspection was underway before the publication of the inspection framework, and included sub-groups looking at communications and logistics, as well as contact with and visits to local areas which had participated in pilot SEND inspections to learn from their experiences. A number of documents were prepared for use in the event of an inspection, including draft notification emails, briefing notes and draft timetables. Colleagues also worked on analysing the published outcome letters from previous inspections.
- 3.2 Leeds received notification of the SEND area inspection on 28th November 2016, and inspectors were on site during the following week (5th – 9th December inclusive). At the point of receiving the notification, Ofsted and the CQC had published outcome letters from ten previous SEND inspections, which means that Leeds was included in the very early phases of the five-year inspection framework.

- 3.3 The inspection was conducted by a team of three; a lead inspector and an additional inspector from Ofsted, and one inspector from the CQC. They requested a range of information during the notification week, including various data items and the local area's SEND self-assessment. The CQC had a separate list of information requests which had to be submitted prior to the arrival of the inspection team. This activity was co-ordinated by the Commissioning Lead – Children and Maternity Services, NHS Leeds CCGs.
- 3.4 During their week on-site in Leeds, the inspection team spoke to a number of senior officers from both the local authority and the relevant health trusts and CCGs. They also interviewed a number of parents, both in person and through hosting a webinar, and through speaking to the EPIC Leeds parent forum. Inspectors visited a range of schools and settings, including health centres, a residential home providing short breaks for children and young people with complex needs, and youth groups and focus groups of children and young people. They also conducted telephone interviews with senior leaders at schools outside of the local authority area where the highest numbers of Leeds children are placed (see 3.19).
- 3.5 In addition to interviews with officers, children and families, inspectors reviewed a number of case files held by the local authority, health services and education services. These reviews covered a wide cross-section of children and young people with SEND, including those on child protection plans, those within the criminal justice system and those placed out of authority. Inspectors were looking to explore the consistency of record keeping and information held about each young person across the different case management systems to investigate whether the activity and approach for each case was jointly shared across the different services.
- 3.6 Inspectors also requested a wide range of documents and supporting evidence during the course of the inspection, which numbered in excess of 140 items from the local authority and around the same from health colleagues. Managing such a flow of information in such a short timescale was a challenge, but was well managed by the team in children's services, which was joined by health colleagues for the duration of the inspection. The Head of Service for Complex Needs was the lead officer for the inspection.
- 3.7 The outcomes letter from the Leeds inspection was published on the Ofsted and CQC websites on 16 February 2016, and is available at appendix three. The outcomes letter is consistent with the feedback given to senior leaders at the conclusion of the inspection. It highlights a number of strengths which the city can be justifiably proud of, and identifies some areas for development which senior leaders were already aware of and had acknowledged in their self-assessment.
- 3.8 Key strengths identified by inspectors included the following:
- 3.9 *Children and young people who have special educational needs and/ or disabilities are proud to be citizens of Leeds. They have a real voice in shaping their education, health and care plans. Many make strong progress towards achieving their personal development goals. Children and young people also have a voice in developing new services to meet their different needs.*

- 3.10 *Leaders have maintained and developed services for the youngest children living in vulnerable communities. As a result, children who have delayed development are identified early. Parents of these children report smooth and efficient identification of needs, particularly through their involvement in children's centres.*
- 3.11 *The increased uptake of health checks for children and young people aged 0 to five and five to 19 supports the early identification of children who may have additional needs. Extra checks about bonding and attachment are made by health visitors at the babies' six-to-eight-week review. This supports access to additional services, where needed, to secure the best start to developing good emotional health.*
- 3.12 *Effective planning for adulthood is in place through the early identification of the skills that young people need to achieve their aspirations. For example, the independent travel training programme is ensuring young people have the skills they need to get to the workplace.*
- 3.13 *Leaders have responded to the inadequacy of provision for children and young people who have social emotional and mental health (SEMH) needs. Over the last two years, improved collaboration between education and health professionals, parents and children and young people has led to a range of provision that is substantially different from previous services. The positive impact for children and young people within mainstream schools is beginning to emerge as their needs are now assessed and met.*
- 3.14 *Parents and young people describe the benefits of school-based resourced provisions. Children and young people access specialist support, including support provided by health services, while being included in all aspects of school life with other children. For example, in a resourced provision for deaf and hearing impaired children, deaf children learn about deaf culture, that defines aspects of their lives that they have in common with other deaf people, while being included with their hearing peers. This is supporting their social development and communication skills.*
- 3.15 *Local colleges and some special schools have been instrumental in increasing the range of options to develop work skills, including supported internships. This has increased opportunities for all young people with additional needs, including those who have SEMH needs.*
- 3.16 *The visibility and needs of children and adults with a learning disability in some general practices has increased. The use of the Commissioning for Quality and Innovation (CQUIN) incentive has, for example, identified additional children who had not previously been recorded on learning disability registers. There is more to do to embed this practice.*
- 3.17 *Indicative results for 2016 show that by the end of Year 6 the most able children who have additional support needs made good progress. As a result, a larger proportion of these children reached or exceeded the standards expected for their age in reading, writing and mathematics, when compared with children without special educational needs and/ or disabilities nationally.*

- 3.18 *Most young people indicate that they feel safe in school and when out in Leeds. They confidently identify what they would do if anyone was unkind or disrespectful to them. Multi agency involvement in child protection plans is strong. Records confirm that differing views about what is in the best interest of the child/young person are resolved with respectful debate. Leaders responded swiftly, with great care and sensitivity when concerns about individual young people were brought to their attention during the inspection.*
- 3.19 *Young people placed in schools and settings outside Leeds are in appropriate settings for their needs. Officers have good oversight of these young people and know that they make strong progress towards meeting their personal goals.*
- 3.20 Key areas for development identified by inspectors included the following:
- 3.21 *Leaders have not responded to the significant difference between the proportion of children who have specific learning disabilities, particularly dyslexia, and the proportion seen nationally for the same group. Consequently, leaders have not ensured that all children with specific learning disabilities have their needs identified adequately. Parents and young people have concerns about the impact of unmet needs stemming from dyslexia on their emotional health.*
- 3.22 *The outcomes for children and young people who have special educational needs and/or disabilities, are improving in relation to the progress they make towards their personal development goals and ambitions. However, academic progress is poor, particularly for secondary-age young people who require support for their special educational needs and/ or disabilities.*
- 3.23 *The local area established an unrealistic timetable for the conversion of statements of special educational needs to EHC plans, resulting in unnecessary pressure on schools and colleges. Equally, the timescale has created a log jam, and many reviewed plans are not getting back to parents and schools before the date of the next review meeting.*
- 3.24 *The school nursing service is not commissioned to complete health checks at key points of transition for young people. This commissioning decision limits the opportunity to identify the needs of young people at these crucially important times.*
- 3.25 *In a range of support plans for children and young people who have additional needs, the lack of detailed analysis of the barriers to young people achieving good outcomes weakens their effectiveness. As a result, this group makes slow progress.*
- 3.26 *Children and young people wait too long to have their health needs assessed or checked by some health services. The CCG has secured additional funding to increase resources at Leeds Community Healthcare NHS Trust (LCHT) to reduce waiting times for autistic spectrum disorder assessment because some children have experienced waits of over 52 weeks.*
- 3.27 *Decisions made by LCHT leaders about recruiting speech and language therapists (SALT) to the NHS mainstream provision, and their plans to implement new ways*

of working, are not meeting the needs of children effectively. Children still wait too long to receive their services. More than 600 children in school-based settings and more than 200 children in clinic settings are experiencing prolonged waits that exceed 18 weeks.

- 3.28 *Leaders recognise that the assessment of need for social development outside of the family, through short breaks and leisure activities and including personal budgets and direct payments, is not linked to the EHC planning process. This is causing anxiety and confusion for parents, many of whom feel there is little transparency in how services are allocated to meet identified needs. Leaders' plans show they are going to revisit this element of their offer so that it is better aligned to the EHC planning process.*
- 3.29 *Nearly all of the parents that inspectors spoke to during the inspection did not know of, or use, the Leeds local offer. This means that they miss out on key services or do not know where to get high quality support. The feedback from a small number of parents in August 2016 is being acted upon by leaders and some parents, through the EPIC (empowering parents, improving choices) parents forum, remain involved in improving the offer.*
- 3.30 *Overall, educational outcomes for children and young people who have special educational needs and/or disabilities are poor. Indicative results for 2016 reveal that progress in half the secondary schools is slow, particularly for those who need additional support.*
- 3.31 *Attainment in English and mathematics by the age of 19 remains low for this group. Equally, the proportion of young people aged 17 who have special educational needs and/or disabilities and remain in education or employment with training in 2015 was 82% compared with the national figure of 88%.*
- 3.32 Next Steps:
- 3.33 *There is no graded judgement (e.g. good, outstanding etc) applied to the SEND inspection outcomes, which makes direct comparison to other local areas difficult. In addition, the five-year inspection framework is at a very early stage of delivery, and the themes and topics which inspectors are looking at are just starting to emerge.*
- 3.34 *However, under the inspection framework, Ofsted and the CQC have the power to require local areas to submit a Written Statement of Action where inspectors have identified areas of significant weakness. Of the sixteen outcome letters published to date, four local areas (25% of those inspected) have been required to complete these statements.*
- 3.35 *Local analysis of published outcome letters indicates that there are some aspects of the framework that have been identified as areas for development in the majority of inspections. For example, at the time of the Leeds inspection, twelve of the thirteen published outcome letters criticised the local area for low parental awareness of the Local Offer. This criticism was also made in Leeds (see 3.28 above), though the letter also separately noted that most parents are confident that their children's needs are being met. It may be that families are familiar with*

the services available for their children, but not with the terminology of the 'Local Offer.' This is something that will be addressed in the post inspection action plan.

- 3.36 The areas for development identified by the inspection team show a significant amount of overlap with both the areas for development identified in the local area SEND self-assessment and with the recommendations made in the Scrutiny Inquiry into services for children and young people with SEND. The outcome of the inspection confirms that the local area knows itself well.
- 3.37 As noted above (point 2.2), Leeds already has a well-established multi-agency Steering Group which has directed the implementation of the Children and Families Act reforms. This group will be reconfigured to lead the development work identified through the inspection and through the SEND Scrutiny Inquiry.
- 3.38 Colleagues in Children's Services and health are developing an action plan to address the areas for development identified through the inspection and through the recommendations of the Scrutiny Inquiry. The action plan follows the format of the inspection, with actions broken down into the three categories of identification, assessing and meeting need, and outcomes. The Steering Group will be reconfigured following the publication of the Leeds outcomes letter, and progress against the action plan will be monitored through this group and reported in to the Complex Needs Partnership Board.
- 3.39 One of the key areas for development identified through the inspection process was attainment and educational outcomes for children and young people with SEND. Plans to address this through the SEND action plan will contribute to and link in with ongoing work to improve outcomes for all vulnerable learners across the city.
- 3.40 In recognition of the finding of poor educational outcomes for children and young people with SEND, the local authority has established an SEND Review Group to sit alongside the existing Primary Review Group (PRG), Secondary Review Group (SRG) and Early Years Review Group. This group is chaired by the Head of Complex Needs, and will proactively identify schools where the outcomes for SEND pupils are not good enough and co-ordinate the local authority response to this. The group will raise the profile of vulnerable learners with SEND across the city with children's services partners and schools and academies, and will support our efforts to improve the educational attainment of children and young people with SEND in a systematic and focused way.
- 3.41 Children's Services and health colleagues welcome the outcome of the SEND inspection, and the opportunity to build further on the progress we have already made in improving our services for children and young people with SEND.

4 Corporate Considerations

4.1 Consultation and Engagement

- 4.1.1 Children, young people and families have been engaged fully at all levels of the SEND reforms programme. The parents' forum EPIC Leeds is represented on the Complex Need Partnership Board and has been involved at all stages of

implementing the Children and Families Act. Parental engagement with the inspection process was strong, with parents interviewed by inspectors at a number of schools and settings they visited, and a good response to the webinar the inspectors ran – this is in contrast to the messages from areas which held pilot inspections, who commented that parental input into the webinar was low.

- 4.1.2 Inspectors commented on how children and young people in Leeds with SEND have a real voice in shaping their EHCPs, and that children and young people have a voice in developing new services tailored to meet their particular needs.

4.2 Equality and Diversity / Cohesion and Integration

- 4.2.1 Inspectors commented that children and young people with SEND feel that they are citizens of Leeds, and are proud to be so. This is a significant finding from the inspection, as children and young people with SEND can be vulnerable to exclusion and isolation. The inspection outcome provides evidence that all children and young people can benefit from our efforts to make Leeds a Child Friendly City; though we acknowledge that the areas for development identified through the inspection show that not all children and young people in Leeds are currently able to achieve their full potential, e.g. in relation to educational outcomes.

4.3 Council policies and Best Council Plan

- 4.3.1 The programme to implement the SEND reforms was in line with the Children's Services ambitions, the Best Start, SEN and Learning Improvement strategies. Leeds as a child friendly city was supported by the inclusive and restorative ways the programme has worked to implement the SEND reforms, and the restorative approach taken supports both the local authority and the Health and Wellbeing Board Every Disabled Child Matters charters.

4.4 Resources and value for money

- 4.4.1 The recent commitment from the local authority to invest substantially in new educational provision and partners' investment into redesigned services for children and young people with social, emotional and mental health (SEMH) needs was well-received by the inspection team, who used the approach to the SEMH Future in Mind: Leeds strategy as a benchmark for other improvement drives across the city. The commitment to improving services for these young people was noted a number of times in the outcome letter, for example:
- 4.4.2 *Leaders have responded to the inadequacy of provision for children and young people who have social emotional and mental health (SEMH) needs. Over the last two years, improved collaboration between education and health professionals, parents and children and young people has led to a range of provision that is substantially different to previous services. The positive impact for children and young people within mainstream schools is beginning to emerge as their needs are now assessed and met.*
- 4.4.3 Inspectors recognised that leaders in Leeds have maintained and developed services for the younger children living in vulnerable communities. For example,

through their continued support for children's centres and through improved investment in extra checks by health visitors at babies' six-to-eight-week reviews.

4.5 Legal Implications, Access to Information and Call In

- 4.5.1 This report is subject to Call In.

4.6 Risk Management

- 4.6.1 Risks associated with the delivery of the post-inspection and Scrutiny Inquiry action plan will be managed through the Steering Group.

5 Conclusions

- 5.1 The recent inspection of Leeds' arrangements to support children and young people with SEND and their families has identified a number of significant strengths which are a credit to the local area and the hard work of local authority and health colleagues in implementing the reforms of the Children and Families Act (2014). The inspection also identified a number of areas for development, and the local area welcomes the opportunity to use this intelligence, alongside the recommendations of the recent Scrutiny Inquiry, to make further improvements to our services and ensure that children and young people with SEND are supported to achieve their potential and fully benefit from living and growing up in Leeds.

6 Recommendations

- 6.1 Executive Board is recommended to note the report, and the outcome of Leeds' SEND inspection.
- 6.2 Executive Board is recommended to note and approve the proposals for the post-inspection action plan to address areas for development to be monitored by the re-configured Steering Group, which reports in to the Complex Needs Partnership Board chaired by the Executive Member for Children and Families.
- 6.3 Executive Board is recommended to note that the responsible officer is the Head of Complex Needs.

7 Background documents¹

- 7.1 None.

¹ The background documents listed in this section are available to download from the Council's website, unless they contain confidential or exempt information. The list of background documents does not include published works.