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Frances O'Callaghan, Accountable Officer, NHS North Central London Clinical Commissioning Group Grace Walker, Local Area Nominated Officer

Dear Mr Munday and Ms O'Callaghan

Joint area SEND inspection in Barnet

Between 17 and 21 January 2022, Ofsted and the Care Quality Commission (CQC) conducted a joint inspection of the local area of Barnet to judge the effectiveness of the area in implementing the special educational needs and/or disabilities (SEND) reforms as set out in the Children and Families Act 2014.

The inspection was led by one of Her Majesty's Inspectors (HMI) from Ofsted, with a team of inspectors, including an HMI and a children's services inspector from the CQC.

Inspectors spoke with children and young people with SEND, parents and carers, and local authority and NHS officers. They visited a range of providers and spoke to leaders, staff and governors about how they were implementing the SEND reforms. Inspectors looked at a range of information about the performance of the area, including the area's self-evaluation. Inspectors met with leaders for health, social care and education. They reviewed performance data and evidence about the local offer and joint commissioning.

In reaching their judgements, inspectors took account of the impact of the COVID-19 pandemic on SEND arrangements in the area. Inspectors considered a range of information about the impact of the pandemic and explored how the area's plans and actions had been adapted as a result.

This letter outlines our findings from the inspection, including some areas of strengths and areas for further improvement.





Main findings

- Leaders from education, health and care have an accurate view of the positive impact of their work. They know what works well and what needs to improve. This is underpinned by strong and trusting working relationships and effective communication between partners. This means that services are managed effectively across education, health and social care.
- Children and young people with SEND enjoy their time in education and in their social lives. They like living in Barnet. They feel well supported by the professionals who help them. The support they receive helps them to access learning at school and college more easily.
- Parents and carers are typically positive about their children's experiences in schools and colleges. They feel that education settings meet their children's needs well. Parents and carers feel that the education, health and care (EHC) plans make a positive difference in assessing and meeting their children's needs.
- Parent representatives feel respected and valued as part of strategic and operational teams. One parent told us, 'We work fantastically well together.' Parents and carers help leaders to design and deliver different services in the area. Their views are taken seriously, and they contribute to decision-making at all levels.
- The area has experienced recruitment challenges across health services. This has led to a reduction in therapeutic provision. It has also increased the length of time children and young people wait to access therapies. Despite these pressures, staff have worked creatively to support children and young people and their families. Nevertheless, parents and carers are concerned about the impact this has on their children.
- School and college leaders speak highly of area leaders. They said that area leaders provide 'invaluable support' and are 'very responsive' to meeting the needs of children and young people, including those who need specialist provision.
- Leaders have responded thoroughly and promptly to the challenges of the COVID-19 pandemic. The pandemic has helped leaders to think differently about how to tackle needs, such as providing safe and inclusive outdoor spaces for children and young people with SEND.
- There is a strong, extensive and multi-agency training offer in Barnet. Many people, from parents to school governors, were positive about the quality and helpfulness of training in improving their ability to identify and meet the needs of children and young people.
- Co-production (a way of working where children, families and those that provide the services work together to create a decision or a service that works for them all) in Barnet goes beyond consultation and collaboration. Children, young





- people, and parents and carers influence and help deliver improvements across a wide range of services.
- Leaders have rightly focused on further strengthening the offer for young people after they are 16. There is now more effective collaboration between colleges, post-16 settings and secondary schools to assess young people's needs. This has made the move from secondary schools to post-16 providers more effective.
- The special educational needs and/or disabilities information and advice service in Barnet is well established and well used. Leaders have recognised and responded to the need to reduce waiting times and meet increased demand by employing more staff. However, some parents told us that they experience long waiting times for this service.
- Parents and carers who are aware of the online local offer say that it is useful. Leaders have worked to strengthen the offer so that it is more appealing to children and young people. Leaders have added a 'young people's zone' section on the local offer website, which is useful and more engaging for children and young people.

The effectiveness of the local area in identifying children and young people's special educational needs and/or disabilities

Strengths

- Training and support networks for special educational needs coordinators (SENCos) and whole-school staff training offered by leaders make a real difference. They lead to staff in schools being more knowledgeable about how to identify and assess children and young people's needs. This training includes opportunities to learn about early identification, and using support plans, working with parents and carers, and providing support for families.
- Specialist professionals work within settings across the community. This enables staff in education, health and social care to share information about identification and helps reduce the need for parents and carers to tell the story of their child more than once.
- Professionals work together effectively to share expertise and identify children and young people's needs early. For example, as part of the 0–19 hubs, they use weekly multi-agency meetings to identify emerging needs.
- Parents of children and young people with SEND can complete one referral form for all multi-agency services in Barnet. This means that parents and carers only need to submit their details once and will receive one response rather than many.
- There is a wide range of effective support for children under the age of five and their families. This includes training programmes for all partner agencies and





- settings, support for frontline practitioners, workshops, and direct and indirect support to children. This support is provided in a timely manner to support children and their families as early as possible.
- Children with complex needs in specialist nursery settings in Barnet receive multi-agency assessment for an EHC plan. An integrated report across education, speech and language therapy, physiotherapy and occupational therapy is provided. This means that there is one report with integrated outcomes between education and health in place for the child.
- Social care professionals provide consistent and helpful input into the initial assessment process and review of EHC plans. Providers feel that this strengthens their evidence when requesting an assessment of needs.

Areas for development

- Over time, the challenges with recruitment and the reduction and discontinuity of some therapeutic provision have had a negative impact on how well children and young people's needs are identified. Children and young people in Barnet wait too long for a diagnosis of autism spectrum disorder. Children, young people and families are supported while they wait for assessment. Area leaders have committed to a credible plan to reduce these waiting times.
- Not all expectant parents are offered an antenatal contact in Barnet. This is one of the requirements of the healthy child programme. This means that some early or emerging needs may not be identified and responded to.

The effectiveness of the local area in meeting the needs of children and young people with special educational needs and/or disabilities

Strengths

- EHC plans focus sharply on how to meet children and young people's needs. Professionals use these plans well to support the all-round development of children and young people, including their independence and social skills. Plans are routinely completed and reviewed within the statutory timescales. They clearly outline the needs of the children and young people and record their views. The outcomes intended for children and young people are usually written in clear and straightforward language.
- Leaders make sure that assessments to establish the needs of children and young people with SEND are completed in a timely manner. Parent representatives are involved in the complex needs panel. This has been positive because it has helped parents and carers to appreciate the expertise needed in





- making decisions. Parents spoke positively about the transparency of the assessment process.
- Leaders work well with education providers to meet the wide variety of needs of young people with SEND in post-16 education, including those with complex needs. For example, there are supported internships and specialist provision for young people with profound and multiple learning difficulties. As a result, young people have a good choice of providers to meet their needs and aspirations as they transfer to post-16 education, employment or training.
- Children and young people who missed audiology and optical checks because of the COVID-19 pandemic have been identified and offered a catch-up appointment. Specialist staff in a pupil referral unit (PRU) are supporting pupils in mainstream primary schools who are at risk of losing interest in coming to school after the COVID-19 restrictions and school closures. During one period of COVID-19 restrictions, an 'open spaces' project was introduced and continues to be in place. This enables children and young people to enjoy secure outdoor space with their family in settings that would usually have been unavailable. For example, a youth centre is being used to provide a safe and confidential space for children and young people with SEND to be able to use Wi-Fi and be in a quiet environment to access online support.
- There are effective arrangements for assessing and meeting the needs of children and young people with SEND arriving in the area from another country. They are supported in new school settings by a pilot project delivered jointly between the school nursing team and the specialist teaching service. The clinical commissioning group (CCG) has commissioned a psychologist to be part of the initial health assessment to assess the needs of a cohort of asylum-seeking young people who require additional psychological support.
- Vulnerable children and young people with SEND in Barnet have easy access to support for their health and well-being. There are designated nurses on site at PRUs, the youth offending service and in specialist settings. Children looked after with SEND benefit from timely assessment and support.
- Children and young people have a strong voice in joint commissioning. For example, they helped to redesign documents for different services and influenced the content of staff training.
- Children and young people with Down's syndrome benefit from comprehensive multi-agency support from birth until the age of 25. This was developed in partnership with parents and carers, and professionals from education, social care and health, as well as those with Down's syndrome. The dedicated pathway ensures that children and young people have access to the support they need.





Areas for development

- Gaps in therapy provision narrow the support available to meet the needs of children and young people. Some providers find it a challenge to meet the needs of those with speech and language difficulties due to the limited availability of speech and language therapists, for example.
- Waiting times for occupational therapy and physiotherapy have been too long. Some children and young people have not been able to access the support they have needed. Area leaders know this and have worked with partners, including parents and carers, to develop an integrated service that can better respond to these needs. This is starting to have an impact, with some reduction in waiting times. In physiotherapy, this is now within the NHS target of 18 weeks. However, leaders need to continue to monitor the situation carefully to ensure continued progress.
- Some children and young people wait too long for specialist child and adolescent mental health services (CAMHS). This means that sometimes, other professionals struggle to help these children and young people while they wait.
- Some children and young people with complex medical and health needs have to wait for essential home equipment. For example, due to commissioning arrangements, there are differences in the equipment that health and social care practitioners can prescribe. There is not a clear pathway for those under 18 who need pressure care equipment. This means that children and young people under 18 experience a delay in receiving essential equipment.

The effectiveness of the local area in improving outcomes for children and young people with special educational needs and/or disabilities

Strengths

- The proportion of young people who are not in education, employment or training after the age of 16 is low. Leaders make tenacious attempts to offer alternatives if placements break down. Colleges provide a wide offer and providers know where to look for other opportunities beyond the borough if a suitable placement cannot be found to meet young people's needs. Schools and post-16 providers work well together to ensure that young people have opportunities to transition successfully into and out of post-16 placements.
- There is strong and effective work with education providers at all phases to help them support pupils with SEND who are at risk of exclusion or poor attendance. This has led to reductions in the proportion of these pupils who have been temporarily or permanently excluded from schools.
- Schools and other education settings are supported well with training and advice about how to develop opportunities for pupils who receive SEND support to





learn the full curriculum through careful and effective adaptation of lessons and resources.

- There is a wide variety of opportunities for children and young people to develop their social participation. Many young people participate in social activities and clubs. These include visits to libraries, leisure centres, youth clubs and youth theatres. There has been an increase, over time, in the number of children and young people accessing short breaks.
- A specialist dedicated general practitioner (GP) provides health assessments for children looked after. Throughout COVID-19, this work continued without disruption. This had a positive impact on the health outcomes of children looked after with SEND.
- Schools in Barnet are able to access immediate guidance for children and young people with emerging mental health needs. The Barnet Integrated Clinical Service provides individual and group support to meet a wide range of mental health needs of children and young people with SEND and their families. The role of youth mental health first-aiders is well established. Currently, over 100 schools have this resource.
- Parents and carers in Barnet have been involved in all aspects of the area's redesign to improve mental health services. For example, some parents and carers found it hard when their children's CAMHS sessions ended and they were discharged from the service. In response to this, area leaders have redesigned the service so that after all CAMHS interventions, parents and carers have a sixmonth period when they can refer their child back to the service to be seen promptly about their concerns.

Areas for improvement

 Outcomes in EHC plans do not typically focus on the steps needed to help children and young people realise their wider hopes and ambitions.

Yours sincerely

Andrew Wright **Her Majesty's Inspector**





| Ofsted | Care Quality Commission |
|---------------------------------------|---|
| Michael Sheridan Regional Director | Manir Hussain Deputy Chief Inspector, Primary Medical Services, Children Health and Justice |
| Andrew Wright HMI Lead Inspector | Lesley Perry CQC Inspector |
| Joanna Walters HMI | |

Cc: Department for Education CCG(s) Director of Public Health for the local area Department of Health and Social Care NHS England