

# **Royal Borough of Kingston Upon Thames Remote Bespoke SEND Peer Challenge**

**26<sup>th</sup> – 30<sup>th</sup> April 2021**

## **Feedback Report**

## Contents

<b>Introduction</b> .....	3
<b>Executive summary</b> .....	3
<b>Recommendations</b> .....	4
<b>Summary of the peer challenge approach</b> .....	5
The Remote Peer Challenge process .....	5
The peer team .....	6
Document and data review .....	6
Interviews and focus groups .....	6
<b>Scope and focus</b> .....	7
<b>Review of Education Health and Care Plans (EHCPs)</b> .....	7
<b>Main findings</b> .....	9
1. The effectiveness of the Council’s governance arrangements for its children’s services, particularly its governance of SEND services .....	9
2. The ability of the Council’s SEND Futures Plan to deliver improvements to the quality of SEND provision within the allocated high needs fund of the DSG .....	10
3. The effectiveness of the Council’s governance arrangements for improving its SEND services and their cost-effectiveness .....	11
4. The council’s assertion is that quality is improving. EHCPs are issued in a timely manner and benefit from effective input from all statutory agencies .....	13
<b>Next Steps</b> .....	14
<b>Appendix 1 – ECHP report</b> .....	15

## Introduction

When the COVID-19 pandemic emerged and lockdown began in March 2020, the Local Government Association (LGA) suspended the physical delivery of all peer challenge work.

To continue to support councils during this unprecedented period, the LGA rapidly refocused support and adopted a new remote approach. Therefore, this Bespoke SEND Peer Challenge for the Royal Borough of Kingston Upon Thames Council was conducted remotely.

The Council's and Achieving for Children's (AfC) response to COVID-19 and the pandemic will have impacted on its ability to deliver services, this report should be read with this context in mind.

## Executive summary

The peer challenge team found that there was a clear understanding of the challenge with SEND and the budget at a strategic level. The peer challenge team also found that at a strategic level there was a shared understanding that a whole systems approach is needed to tackle the challenges.

The Lead Member for Finance and the Lead Member for Children both have a good grasp of the problems and challenges. They are committed to making changes and take their accountability as Lead Members seriously.

During interviews it was clear that the SEND Futures Plan is welcomed and understood at a strategic and senior level, however the peer challenge team found that its use throughout all relevant agencies could be strengthened.

There was some very good work with young people on engagement and participation. The officers working on this are clearly dedicated and have a very good relationship with the children and young people and their families. This engagement work is an example of good practice that may be of interest to other public sector organisations.

The peer challenge team interviewed members of the Parent Carer Forum. The forum is committed and doing good work. In the view of the peers, with more dedicated support the forum could have greater impact. The council should consider what further support could be given to the forum.

The peer challenge team saw evidence of consultation with parents and carers, but there should be greater emphasis on co-production and engagement to further develop this relationship and have greater input from parents and carers.

The Education Health and Care Plan (EHCP) improvement journey is evident in the EHCP Review report. The Quality Assurance framework is well-embedded. Some improvements are needed in the quality of advice from social care and the timeliness of advice from therapies.

The annual reviews show improvements in tracking, monitoring and targeting, however there needs to be more focus on earlier transition planning.

The peer challenge team found that progress had developed with the DSCO role, however, SEND ownership needs to be developed for all social care professionals.

Managing demand needs to be clearly articulated, reinforcing the expectations at SEN Support. In interviews the peer challenge team found that there is appetite from parents for strong SEN support and mainstream schooling. More work could be done to extend existing good practice in this area.

The deficit reduction plan is a significant challenge. The CCG, Schools Forum and schools and colleges need to be more involved in order to meet the challenge. The shared understanding across all partners of the challenge to address the deficit whilst delivering good services, now needs to become a shared responsibility.

## Recommendations

The following are the peer challenge team's recommendations:

1. Streamline governance agendas and discussions to shift the focus to delivery and accountability.
2. Create a High Needs sub-group of the Schools Forum with terms of reference to examine the detail of the spend and track progress against projections delivering impact and value for money. Review top-up funding and implement a banding tool.
3. Improve communications on the SEND Futures plan across Achieving for Children, the Council and partners, creating shared ownership of the savings plans. Ensure there is constructive challenge.
4. Work more effectively with parents for better outcomes and create a co-production agreement with the Parent Carer Forum. Consider using a 'you said, we did' framework for feeding back to parents and carers.
5. Improve parental confidence about in-borough provision. Consider creating a role for parent engagement from within available resources, collate case studies of positive experiences and develop a coherent support offer for parents and carers; consider what the voluntary sector can offer, too.
6. Develop consistently highly effective SEN support provision within all phases of mainstream schools, by identifying, sharing and embedding strong working practices of SENCOs and class teachers, in relation to early intervention and Quality First Teaching.
7. Consider changes to ECHPs in light of the findings of the ECHP review.
8. Develop clearer transitional planning support for young people and ensure understanding of the future cohort of young people who have care and support needs as adults. As part of this work, develop stronger links with post-16 providers, colleges and adult social care.

9. Reach out to BAME communities and those less likely to seek support, working with communities and the voluntary sector on this.
10. Review demand projections on a regular basis and link to the projecting and monitoring of spend. Monitoring spend and demand will also be key given the challenging savings and the timeframe they need to be delivered in. There needs to be a close watch on expenditure, by all concerned and at all levels, of the savings to be made.

In addition, there are a number of suggestions and observations within the main part of the report that the peer team suggest as some 'quick wins' and practical actions for consideration.

## Summary of the peer challenge approach

It is important to remember that a peer challenge is not an inspection; it provides a critical friend approach to challenge the council and partners in assessing their strengths and identifying their own areas for improvement. As a result of Covid-19 restrictions, this challenge was undertaken remotely, which meant the team were unable to visit the Royal Borough of Kingston Upon Thames.

The challenge involved reviewing documentation and data provided by AfC and the Council; a review of a sample of EHCPs; meetings with children and young people, parents and carers from the Parent Carer Forum, and staff and partners in focus groups and interviews. The people interviewed provided a wide range of information and insight.

The Council's and Achieving for Children's response to COVID-19 and the pandemic will have impacted on its ability to deliver services, this report should be read with this context in mind.

It also important to consider that at the time of the peer challenge an Ofsted CQC Local Area revisit was expected imminently. Peer challenges are very distinct from inspections and this report has a far narrower focus than an Ofsted CQC inspection. The peer review team is also aware that the funds provided by the Government and the Department for Education to address the immediate financial issues as a result of the SEND deficit, means that this peer challenge report will also be of interest to the Department for Education, as well as local stakeholders.

## The Remote Peer Challenge process

The findings in this report are based on this range of activities:

- The scope and focus for the peer challenge were agreed with the sponsors
- Documents and data were reviewed by the peer challenge team
- Audit of 20 EHCPs undertaken week commencing 19<sup>th</sup> April 2021
- Interviews and focus groups, week commencing 26<sup>th</sup> April 2021
- Feedback presentation on 30<sup>th</sup> April 2021

## The peer team

Peer challenges are delivered by experienced LGA peers. The make-up of the peer team reflected the agreed focus of the peer challenge. Peers were selected on the basis of their relevant professional experience and expertise.

The peers who delivered the peer challenge were:

- Gail Tolley – Strategic Director, Children and Young People, Brent Council, Chair ADCS Educational Achievement Committee (Lead peer)
- Cllr Carol Runciman – Executive Member for Health and Adult Social Care, City of York Council (Member peer)
- Jackie Wright – SEND Consultant and former DfE advisor (SEND peer)
- Sam Nowak – Head Teacher, Fryent Primary School (Education peer)
- Karishma Parmar – Designated Clinical Officer for Special Educational Needs and Disabilities, Sutton and Merton (Health peer)
- Michael Hallick – Assistant Director, Business and Resources Children’s Services, Wandsworth Council
- Mark Smith – Head of Service, 0-25 SEND Project Lead, Bromley Council
- Pete Ruse – Calderdale Parent Carer Forum
- Angela Kawa – LGA Programme Manager (Review Manager)
- Helen Galvin & Richard Holland (EHCP Reviewers)

## Document and data review

In preparation, the peer team reviewed a range of documents and information provided by AfC and the Council to ensure that they were familiar with the work being done in the area, the outcome of the local area SEND inspection, and progress regarding the Written Statement of Action.

## Interviews and focus groups

In addition to the preparation for the challenge and the time taken determining findings and putting these into the feedback presentation and this report, the team spent 5 days over the week commencing 26<sup>th</sup> April 2021 working remotely, during which they:

- Met people from the Council, Achieving for Children (AfC), Clinical Commissioning Group (CCG), parents, carers, young people, schools, and colleges.
- Gathered information and views from more than 37 interviews and focus group meetings
- Carried out additional research

This report provides a summary of the peer team’s findings. It builds on the feedback presentation provided by the peer team to AfC, the Council, Chair of the Parent

Carers Forum, and key partners. By its nature, the peer challenge is a snapshot in time. We appreciate that some of the feedback may be about things that are already being addressed and progressed.

## Scope and focus

The Council asked the LGA to focus on the following areas of scope during the peer challenge:

**1. The effectiveness of the Council's governance arrangements for its children's services, particularly its governance of SEND services, answering the questions:**

Has the AfC delivery model contributed to the Council's ability to manage the high needs fund of the DSG and quality services for children and young people with EHC Plans? What improvements need to be made to the governance arrangements?

**2. The ability of the Council's SEND Futures Plan to deliver improvements to the quality of SEND provision within the allocated high needs fund of the DSG, answering the questions:** Is the scope and content of the SEND Futures Plan sufficient to deliver the Council's ambitions for SEND services and the Department for Education's requirement to achieve a balanced high needs fund within five years? What further actions could the Council take to improve its plan or delivery arrangements?

**3. The effectiveness of the Council's governance arrangements for improving its SEND services and their cost-effectiveness, answering the questions:** does the Council have effective mechanisms in place to ensure timely delivery of the SEND Futures Plan (including the deficit recovery plan) so that it can achieve the required improvements to the quality of services and a balanced position within the agreed timescales? What improvements could be made to these governance arrangements? Are there missed opportunities to save money, whilst maintaining a good quality response across the system?

**4. The council's assertion is that quality is improving. EHCPs are issued in a timely manner and benefit from effective input from all statutory agencies.** Is this assertion accurate and triangulated by the voices of children and families? Is there more the authority can do to improve its response for children with SEND who do not have an EHCP (SEND Support)? Finally, how effective is the LA's graduated level of response?

## Review of Education Health and Care Plans (EHCPs)

Two LGA Associates remotely reviewed 20 EHCPs ahead of the fieldwork for this peer challenge. The two reviewers spent two days remotely reviewing a cross-section of 20 EHCPs dating from after the Written Statement of Action.

The findings were discussed with AfC on 27<sup>th</sup> April 2021 and the draft ECHP review report was submitted. The final report is included as an appendix to this report.

## **ECHP review – Overview of findings:**

The ECHP reviewers found that in most cases, by taking an open approach there was a richness to the material gathered with a balance of views, aspirations, and concerns. It would be helpful to include the name and details of the officer completing the EHCP so there is clear ownership of the ECHP.

In the parental section, the majority of parents were able to express their views, aspirations and concerns clearly. However, it was not possible to identify if all the recorded concerns had been addressed. None of the plans reviewed included the child/family having a Personal Budget. Similarly, short breaks or direct payments were not recorded in any of the plans reviewed.

The reviewers found that in two cases where English is not the main language spoken the 'About Me' section was not completed. The reviewers do not know what support was offered to the parents in this situation, to complete this important section. The Council and AfC could consider if further support is required for parents who do not have English as a first language.

The reviewers were pleased to find, that for the most part, language was used that was not overly complex and did not include text lifted directly from reports, thereby ensuring that the plans were written in ways that parents could understand.

The plans and appendices accompanying the ECHPs showed that there is a clear system through the Single Point of Access Team (SPA) for families to be notified that Social Care input has been requested through the EHC assessment process.

The ECHP reviewers were concerned that there may be a lack of clarity in Social Care on how to respond to the referral and contributions to the EHCP.

The SEN Provision in the 20 ECHPs that were reviewed was generally detailed and clear. The letter is carefully worded and meets all the legal and SEND Code of Practice requirements. It also directs families to the Local Offer.

The outcomes reviewed were generally clear and included indicators of success. Where a setting had a clear 'offer' or specialisation, how they would work to the broader outcomes was also made clear.

In regard to Child and Adolescent Mental Health Services (CAMHS) the ECHP reviewers found there was a mixed picture with some good practice and service, although some children waited a considerable time to access initial assessment and service.

The reviewers also noted that health needs met through therapy services, were recorded in the educational elements of the ECHP. The SEND code of practice states that "*Where health or social care provision educates or trains a child or young person, it must appear in this (education) section*". However, some therapies could appear in the health section, for example in instances where therapies supported by personal budgets do not meet the above criteria. The SEND Code of Practice states that information in the Health section may include "*specialist support and therapies, such as*



*medical treatments and delivery of medications, occupational therapy and physiotherapy, a range of nursing support, specialist equipment, wheelchairs and continence supplies” and “other health care provision reasonably required by the child or young person, which is not linked to their learning difficulties or disabilities, but which should sensibly be coordinated with other services in the plan.”*

## **Main findings**

### **1. The effectiveness of the Council’s governance arrangements for its children’s services, particularly its governance of SEND services**

***Has the AfC delivery model contributed to the Council’s ability to manage the high needs fund of the DSG and quality services for children and young people with EHC Plans? What improvements need to be made to the governance arrangements?***

There is clearly political buy-in for the delivery model from the administration. This is demonstrated by additional investment from the general fund and reserves and by the steps taken to help mitigate expenditure. There is also organisational buy-in for the current delivery model.

The peer challenge team found that there is good joint working between the Lead Member for Children and the Lead Member for Finance and Performance. Both Lead Members are committed to working together to tackle the financial issues whilst continuing to deliver quality services.

The Chief Executive of the Royal Borough of Kingston, chairs the SEND Partnership Board, demonstrating that it is a key priority for him and for the Council as an organisation. The Chief Executive has a very good understanding of the scale of the problems and is committed to addressing them whilst maintaining good quality services.

The SEND Partnership has achieved buy-in across partners, the Council and AfC. The SEND Partnership has brought AfC and Council closer together. This improvement to this key relationship was mentioned repeatedly in interviews with the Council, AfC and partners.

The S151 officer (Chief Finance Officer of the council) chairs the SEND Delivery Panel which will have a finance focus. The S151 officer has monthly meetings with the AfC Chief Operating Officer. In terms of budget setting and monitoring, AfC is in the main treated like a directorate of the council with clear accountability and oversight.

The peer review team found that there was a strong commitment from the Council and AfC, to working together with parents, children, and young people to ensure that a good quality of service is maintained whilst dealing with the financial challenge.

The peer challenge team recommends that the Council and AfC take the opportunity to streamline governance agendas and discussions. The focus should now shift to delivery and accountability.

There could be better linking of the Schools Forum with other existing arrangements, for example, the SEND Delivery Group. The Schools Forum can play an important role in helping tackle the problems and deliver solutions. The peer challenge team recommend that a Schools Forum High Needs Block-sub-group is established to examine the detail of all spend, especially non-statutory spend, and track savings plans, thereby ensuring value for money and impact.

Schools and the Schools Forum could further develop the culture of ownership of the issues as the financial problems must be addressed jointly by all partners. Schools and the Schools Forum could also be more open to specific challenge regarding their role in meeting the financial problem.

Adult Social Care need to be brought into the process earlier as they will also be an important part of the delivery of quality services within the financial constraints. Oversight and linkages between Children and Adult's Social Care could also be improved. Children and Adult's Social Care need to be more integral to the SEND governance issues, with an increased presence within the SEND Futures Plan.

## **2. The ability of the Council's SEND Futures Plan to deliver improvements to the quality of SEND provision within the allocated high needs fund of the DSG**

***Is the scope and content of the SEND Futures Plan sufficient to deliver the Council's ambitions for SEND services and the Department for Education's requirement to achieve a balanced high needs fund within five years? What further actions could the Council take to improve its plan or delivery arrangements?***

In the view of the peer challenge team the SEND Futures plan is a good plan, the team found good examples of quality and outcomes being improved as a result of the plan, thereby demonstrating that plan is having a positive impact. There is a clear focus in the plan on quality and joint working to improve outcomes for young people.

Work has begun with the CCG; this is positive and welcomed across the organisations and there are signs of the relationship developing further. Examples include the 16-25 hub, therapy review and mental health support.

There could be more clarity about the impact on other areas aside from the High Needs block. Some initiatives will generate savings for the CCG and/or Adult Social care, such as the 16-25 hub. The peer challenges team suggests that these savings are tracked with evidence of impact.

The commitment in schools to SEN support is positive but could be developed further. There is clear parental support for strengthening SEN support in mainstream schools. In interviews parents and carers were very aware of the benefits that SEN support in mainstream schools could bring for their children.

Parents and carers were also keen for children and young people to attend local provision where possible.

The annual conversation with parents and children, should ensure that supporting documents and plans are live documents and not static. Consideration should be given as to whether the priorities in these documents are sufficiently aligned to those of parents and carers.

Whilst the peer challenge team found there was a good shared understanding of the challenges, there needs to be more ownership of the problems and solutions from all partners, schools and the CCG. There needs to be shared accountability at all levels. Only by working together can the financial challenge be addressed successfully whilst maintaining a good quality of service.

There should be communication with all partners on the plan and progress against the plan so that it permeates through the system, creating a “golden thread”. Adult Social Care need to be more involved in strategic implementation and reviewing progress. Making this change will build on the good operational work already in place.

The financial challenge is very significant, and interviewees had concerns about achieving the savings in the specified timeframes. There needs to be a strengthened message on expectations, to ensure there is a clear understanding of the consequences if the required progress is not achieved. There must be shared ownership of the DSG deficit by all partners and by all the relevant departments at the Council and AfC.

The peer challenge team are of the view that key priorities need to be captured in the workstreams more consistently, and that greater evidence of impact is required. There now needs to be a greater emphasis on progress, delivery and impact.

### **3. The effectiveness of the Council’s governance arrangements for improving its SEND services and their cost-effectiveness**

***Does the Council have effective mechanisms in place to ensure timely delivery of the SEND Futures Plan (including the deficit recovery plan) so that it can achieve the required improvements to the quality of services and a balanced position within the agreed timescales? What improvements could be made to these governance arrangements? Are there missed opportunities to save money, whilst maintaining a good quality response across the system?***

There are clear governance arrangements for improving SEND services with high level buy-in, demonstrated by the Chief Executive chairing the SEND Partnership Board. The revamped SEND Delivery Group is chaired by the Chief Finance Officer with a focus on funding.

The workstreams link to the plan and, where appropriate, have specific savings identified, for example in local provision. All the workstreams involve a range of

partners, emphasising the need to view the workstreams as a shared responsibility across the local public sector system.

The peer challenge team found that some defined initiatives have now been started with a view to improving cost efficiencies. This is a welcome development. Good work is being done on early intervention in some areas such as early years and with youth services. The peer challenge team believe that there are opportunities to do more on early intervention which could improve outcomes for children and young people whilst also lowering costs.

The new special school development in collaboration with Richmond Council, and the 16-25 campus with associated supported accommodation, are positive developments. These initiatives were welcomed by partners, parents and carers alike.

There are more opportunities to work with school headteachers and SENCOs to help ensure that there is consistency of the quality of SENCO impact. The peer challenge team saw evidence of some good practice that is already happening in Kingston. This good practice should be shared and encouraged elsewhere.

There is a clear focus on quality throughout the SEND Futures Plan and the governance arrangements. Post-pandemic, there needs to be improvement to the pace of change and delivery. There needs to be a change in emphasis, with improved messaging across the local public sector system about the need to focus on savings as well as quality.

There is evidence of impact, however, there needs to be a more robust approach to gathering evidence, including case studies and data. Similarly, projections and forecasts must also be robust. The EHCP forecast states an EHCP growth of 30%, when Greater London Authority projections for the 0-25 population show an expected growth of only 3.5%. These forecasts and projections should be kept under constant review.

When the peer challenge team looked at information on preparation for adulthood, the team found that transitions reviews, particularly Year 11 transition to further education, could be done at an earlier stage. Earlier transition reviews would benefit the young people, promote independence to avoid reduced independence at college, and avoid over-provision, minimising costs. Similarly, planning collaboratively to consider how to support young people and families to embrace preparation for adulthood as early in their life as possible, with a single point of contact, would also bring benefits. Parents, carers and young people spoke very positively about the opportunities to support children and young people to be as independent as possible.

The interviews and focus groups with parents, carers and young people showed there is a real appetite for co-production. The peer challenge team are of the view that there is an opportunity to improve and further develop co-production with parents and carers. This would improve transparency, communication and buy-in.

**4. The council's assertion is that quality is improving. EHCPs are issued in a timely manner and benefit from effective input from all statutory agencies**

**Is this assertion accurate and triangulated by the voices of children and families? Is there more the authority can do to improve its response for children with SEND who do not have an EHCP (SEND Support)? Finally, how effective is the LA's graduated level of response?**

The EHCPs reviewed were generally clear and detailed, recording parents' views. They included detailed information about the child. Plans are generally on time and within the guidance: there was some impact on timeliness during the pandemic, which is to be expected.

The quality assurance framework with its deep dives is very positive. It includes contact with the parent/carer and sometimes the young person too.

In the Kingston Parent Consortium Survey (December 2020), the quality of EHCPs was considered to be good by 64% of respondents, with 36% disagreeing. 82% of parents surveyed on the support specified on their child's EHCP agreed that it will help them make progress, with 18% disagreeing. The parent carer surveys are a positive initiative and are a good way to evaluate parents' level of satisfaction.

The peer challenge team saw evidence of improved timeliness from health services overall, however there were some issues with Occupational Therapy (OT) and CAMHS response times. These should be addressed by working with partners to ensure that advice is available at the appropriate time, thereby ensuring that plans are not delayed and are within time. Overall, therapy advice is now reported to be of good quality.

The Designated Safeguarding Co-ordinator (DSCO) role was raised in a number of interviews as key role to improve social care advice. This role could be strengthened and further developed.

The SEN Buddies working with Social Care SEND Champions is a good model, but it is not well-communicated. Consideration should be given as to how communications can be improved. The peer challenge team are of the view that by working with the SEN Buddies and Social Care SEND Champions evidence of the impact they have can be captured so that learning and best practice can be shared.

There are also opportunities to identify and share examples of good practice in relation to inclusive education and SEN support in mainstream schools. This could then lead to this good practice being embedded in other schools too.

Parents and some partners raised concerns that BAME communities may not be seeking support. There is a need to reach out to communities who may not seek support and raise awareness of the support available. More engagement with community and voluntary sector organisations could help with this; ensuring people from BAME communities are able to participate in needs assessments and annual reviews. It is important all communities are aware and supported to take up the services that are available.

## Next Steps

The peer challenge team have identified ten recommendations. The Council's and Achieving for Children's response to this report should include the development of an action plan addressing the ten recommendations, this should be sent to stakeholders and published online. We would be happy to provide a follow-up visit to examine progress against the ten recommendations.

Under the umbrella of LGA sector-led improvement, there is an ongoing offer of support to councils. The LGA is well-placed to provide additional support, advice, and guidance for development and improvement.

Kate Herbert (Principal Adviser) is the main point of contact between the local authority and the Local Government Association (LGA). Her e-mail address is:

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Thank you to everyone involved for their participation. Also, a special thank you to the parents, carers, children and young people who met with us, and who spoke with openness and honesty giving us enormous insight into their experiences of SEND services.

# Appendix 1 – ECHP report

**LGA SEND Remote Peer Challenge – Kingston Upon Thames**

**Remote EHCP analysis visit by Richard Holland and Helen Gulvin**

**Final Report**

**Week Commencing 19.04.2021**

## **1. Introduction**

- 1.1 A list of EHC plans was made available to the reviewers, from which 20 were chosen for review. The authority requested that the focus be on more recent plans as this would give a better picture of current practice. The plans all contained appendices including advice provided through the EHC assessment process. A good cross section of ages was included in the plans that were reviewed.
- 1.2 The areas of focus and key lines of enquiry for the review were advised in advance by the authority. As such the EHCP analysis looked at some key areas using the LGA audit tool for EHCP review.
- 1.3 The findings below do not set out to give a definitive position on the progress of having good plans for each child with an EHC plan. A small sample of 20 cases cannot be definitive. The process has however, been able to identify areas of strength and for consideration and further exploration; by the authority itself and by the forthcoming Peer Review team.

## **2.0 Summary of findings- strengths and areas for consideration**

### **A. Views, interests, and aspirations of the learner and their parents/carers**

- 2.1 Half the plans had a photograph of the child or young person on the top of the first page this brings the child to mind.
- 2.2 A flexible approach was taken in who supported the young person in completing the 'all About Me' section. This was predominantly a parent. In one case a staff member completed the section as she had a good knowledge of the young person and had information beyond the educational setting. It is helpful that how this information is gathered is recorded in the plan. In two cases where English is not the main language spoken this section was not completed. We do not know what support was offered to the parents in this situation, to complete this important section. It should also be noted that the place of birth was not always

recorded. How do we know that ethnicity, language, and background is reflected in preparation and plans?

2.3 In most cases, by taking an open approach there was a richness to the material gathered with a balance of views, aspirations, and concerns. In three cases the person completing the section with the young person could have benefited from more guidance. It may also be worth reviewing the headings used. For example, in 5 of instances 'My story so far' was left blank. This may suggest that it was not clear what should be included.

2.4 In the parental section the majority of parents were able to express their views, aspirations and concerns clearly. From the final plans, however, it was not possible to identify if all the recorded concerns had been addressed. The authority does have management oversight of plans at the point of completion and an audit process. It would be helpful to be certain that this includes checking that parental concerns at the beginning of the assessment process have all been addressed in the plan.

## **B. The learner's special educational needs**

2.5 It was good to see a balance of strengths and needs within the plans reviewed. Children and young people's educational needs were generally well described in many cases with a sense that the professionals contributing to this section know the child well.

2.6 It was positive to see that for the most part, language was used that was not overly complex or and did not include text lifted directly from reports. This was particularly helpful where a child's functioning was compared with standard expectations of what a child without special educational needs or a disability would be doing.

## **C. The learner's health needs that relate to their special educational needs.**

2.7 Health needs were generally well recorded with a process of coordination through the Consultant Community Paediatrician in each case.

2.8 Therapy services in some authorities would come from a CCG commissioned health provider. In Kingston, therapy services are commissioned by AFC on behalf of the Councils and by the local Clinical Commissioning Groups (CCGs). Health needs met through these services were recorded in the educational elements of the plan, limited information was provided in the health section. It was noted for those moving from nursery and children's centres to schools the provider of e.g. SLT services changes and the service has to be recommissioned does this cause delay and possible inconsistency for the child?

2.9 The area that was less clear was for CAMHS. There is a mixed picture with some good practice and service. There were some examples of identified need and involvement. Also, of children waiting a considerable time to access initial



assessment and service

#### **D. The learners social care needs that relate to their SEN or a disability**

- 2.10 The plans and accompanying appendices showed that there is a clear system through the Single Point of Access Team (SPA) for families to be notified that Social Care input has been requested through the EHC assessment process. A standard letter outlines the legal position, notes what information Social Care may have about the child and informs parents of a right to request an Early Help or Social Care assessment
- 2.11 The letter is carefully worded and meets all the legal and SEND Code of Practice requirements. It also directs families to the Local Offer. Its tone, however, could be interpreted in a way that discourages some families from seeking support. From the plans reviewed, except where CIN or on a cp plan there was no mention of Social Care, despite in some instances indicators of need within the content of the plans.
- 2.12 It may be helpful to ask representatives from the parent forum to review the letter and give feedback. It would also be helpful to know whether the letter was accompanied by accessible information that outlines what support may come from an Early Help or Social Care assessment, including Short Breaks. It should be noted that Short Breaks or direct payments were not recorded in any of the plans reviewed.

#### **E. Outcomes, short and long term**

- 2.13 There is a challenging balance to identifying outcomes that are realistic within a key stage time frame, alongside achievable shorter-term objectives. The plan headings are for outcomes at the end of key stages. What appears to be missing is the short- and medium-term plans which are left to be developed in the setting therefore the plan feels like an end document and not a living document. These outcomes are dependent on short- and medium-term outcomes within the plans developed and held by educational settings.
- 2.14 Outcomes reviewed were generally clear and included indicators of success. Where a setting had a clear 'offer' or specialisation how they would work to the broader outcomes was clear. Where the setting had not been identified or a transfer would soon take place this was not always clear for example a 17-year-old who has been out of school and is due to go to college. This was a child in need and there was no feedback from the social worker.

#### **F. SEN provision required to meet the needs and outcomes**

- 2.15 Provision was generally detailed and clear. It was particularly helpful when professional advice received through the assessment was cross referenced with the provision.
- 2.16 In a number of the plans notional 1:1 hours were allocated against a child. This presumably works through a resource allocation system based on need points. It

was not apparent how these hours directly connected with the detail in the provision.

## **G. Health provision required that relates to the learners SEN**

- 2.17 This section tended to be limited as the therapy component of support was recorded elsewhere. It should be noted, however, that the therapy involvement was recorded clearly and in detail. In some instances, detailing minutes and hours for each activity was almost too detailed and potentially formulaic.

## **H1 and H2. Social Care**

- 2.18 There may be a lack of clarity in Social Care re how to respond to the referral re contributions to the EHC plan for example:  
Adopted children: One child was of concern as she had is now 13 and a half and only now becoming subject of an ECHP. The plan is complex and broad with many professionals involved. There is a need to understand whether being adopted diverts professionals from SEN issues to attributing issues to earlier traumatic experiences, reality is a combination of the two.
- 2.19 CSC 's point of response to the EHSC plan is from the front door service, however, is this appropriate for adopted children who are eligible to funding and support through the Adoption Support Fund? Should a response come from the Adoption service? On one plan this resource was not considered. Do those who need to, know to talk to adoption support?
- 2.20 Another child has a long history with CSC and has been a subject of a CP plan for over two years with no meaningful change to the child's situation and serious impact on his educational achievement due to his overwhelming sense of not being safe. Is there a joined-up approach with the social worker about the impact on the child's future attainment of the home circumstances?
- 2.21 In another case Social Care was involved with a young person there was limited input. Several young people were Children In Need. In one case, the Educational Psychologist had spoken with the Social Worker but the social worker had not made a direct contribution to the process. This limited the possible coordination of the plan and was simply a record that the young person would receive emotional support and may have led to a duplication of service provision e.g. One young person was going to receive long term mental health support from CAMHS but the social care plan was to provide emotional support which may not complement and extend the CAMHS support
- 2.22 Overall, the hypothesis reached from reviewing the plans was that a review of Social Care's input in the EHC process may be beneficial.

## **I. Name and type of the school/setting**

- 2.23 This section was completed for all but two cases reviewed. A situation of concern was where a plan was signed of in March for a child in Year 6 with no knowledge of the secondary school setting for September.

## **J. Personal budgets**

- 2.24 None of the plans reviewed included the child/family having a Personal Budgets. There was no reference to the discussion that may have taken place to inform the understanding of this.

## **K. Assessment advice and information**

- 2.25 The advice received was recorded, dated and provided within the appendices for all cases.

## **Quality Assurance & Review**

- 2.26 All the plans reviewed except two were signed off and dated by the Head of Service for SEND. Additionally, all the health advice had been considered by the Consultant Community Paediatrician. It was not possible to see the level of oversight from Social Care.
- 2.27 It would be helpful to have the name and details of the officer completing the EHC plan and create ownership
- 2.28 The reviewers did consider that there was scope for developing the section 'Arrangements For Review'. In each case a standard form of words was used within the plan. These words did not always relate well to the young person within the plan. A more bespoke approach could be important for some children, particularly where their next school has yet to be identified or where they have been out of school for some time and implementing the plan may be challenging.

## **3.0 Review issues that can inform future OFSTED inspection**

The reviewers experienced a number of practical difficulties in undertaking the review remotely. Whilst issues were resolved with the assistance of Kingston colleagues, it would be helpful to have arrangements in place to avoid similar difficulties in future:

- A request had been made for plans to be available in advance of the review date to avoid delay. This did not happen.
- The reviewers were unable to access the plans until the end of the morning of the first day of the review.
- Third party confidentiality forms were not available to the reviewers for completion until the afternoon before the review commenced.
- Much of the morning was spent with Kingston IT colleagues loading software for systems that were not required. The eventual solution that was extremely effective was a Google Drive link to the necessary documents.

**Richard Holland and Helen Gulvin**

LGA Associate Reviewers 23.04.2021