

## HAMPSHIRE COUNTY COUNCIL

### Report

<b>Committee:</b>	Children and Young People Select Committee
<b>Date:</b>	28 September 2020
<b>Title:</b>	Special Educational Needs and Disabilities (SEND) 0-25 Reforms update report – SEN performance and joint working
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#### Purpose of this Report

1. The Committee received a Special Educational Needs (SEN) update report, on 08 May 2019, setting out progress following the implementation of the SEND Reforms. The purpose of this report is to provide an annual update on progress.

#### Recommendations

2. For the Children and Young People Select Committee to note the following update.

#### Executive Summary

3. This report covers the updates on:
  - SEN Service Education Health and Care assessments and reviews;
  - Implementation of the digital Education, Health and Care (EHC) hub;
  - The work of Hampshire Parent Carer Network
  - SEN Support and Inclusion within mainstream education settings;
  - SEN out-county placements;
  - The SEN Capital Place Planning Strategy (specialist provision);
  - SEND Hampshire Area Preparation for Adulthood work;
  - The work of the Independent Futures Team

- The role of Designated Clinical Officer and Health Services;
- The First-Tier Tribunal and the Single Route of Redress
- The Hampshire Local Offer <https://fish.hants.gov.uk/localoffer>;
- The outcome of the SEND Ofsted Care Quality Commission (CQC) Inspection

## **Background information**

4. The SEND Reforms have been undergoing implementation since September 2014 following the Children and Families Act 2014. This has been a journey for all Local Authorities and in Hampshire the key changes have been:
  - A strengthened focus on parent carer and children and young people's strategic and individual engagement with all agencies and partners;
  - The introduction of Education, Health and Care Plans (EHCPs) 0-25 for those with the most complex needs replacing statements of SEN and Learning Difficulty Assessments;
  - The establishment of a 'SEND Local Offer' and improved impartial information, advice and support.
  - A strengthened focus on SEN Support and the graduated response particularly around the early identification of needs and how effectively needs are met to improve outcomes for Children and Young People (CYP) with SEN;
  - Increased joint planning and commissioning of services to ensure close co-operation across education, health and social care 0-25;
  - A strong focus from year 9 on preparation for adulthood to ensure that young people can live their lives as an adult as independently as possible. A key element here is raising aspirations around employment.
5. A five-year joint Ofsted and Care Quality Commission (CQC) SEND Inspection framework was introduced from May 2016 to assess how well Local Authorities has responded to the new statutory duties. Hampshire was inspected in March 2020 under this inspection framework. The inspection highlighted a number of areas where the Local Authority has been successful in meeting the needs of children and young people with SEND and noted that the Local Authority knows itself well and has robust plans in place to progress work further. The inspection report can be found in Appendix 1.
6. While the reforms have been welcomed in Hampshire they have led to a steady rise in the number of EHCPs maintained within the Local Authority. This in part is due to a rise in requests for assessments for an EHCP. In the academic year 2017/18 there were 1,577 new requests; in 2018/19 there were 2,229 new requests received (41.3%). This is significantly higher than the national average which was 12% rise in 2019.

7. However, between 01 September 2019 – 24 August 2020 there have been 2,025 requests for an EHCP, which is a 9% decrease on the same period last year. This figure has been influenced by school closures following the COVID 19 outbreak and therefore reflects a temporary change in the trend.
8. There has also been a rise in the number of plans being maintained. As of 24 August 2020, there were 9,759 EHCPs being maintained, an 12% increase on the same time last year. This is higher than the national level of a 10% increase. The growth in EHCPs across the age ranges is varied, with all age ranges seeing a significant rise in numbers and particular growth for the post 16 age ranges. Overall, since the reforms took effect in 2015 there has been a 95% increase in the number of EHCPs being maintained.

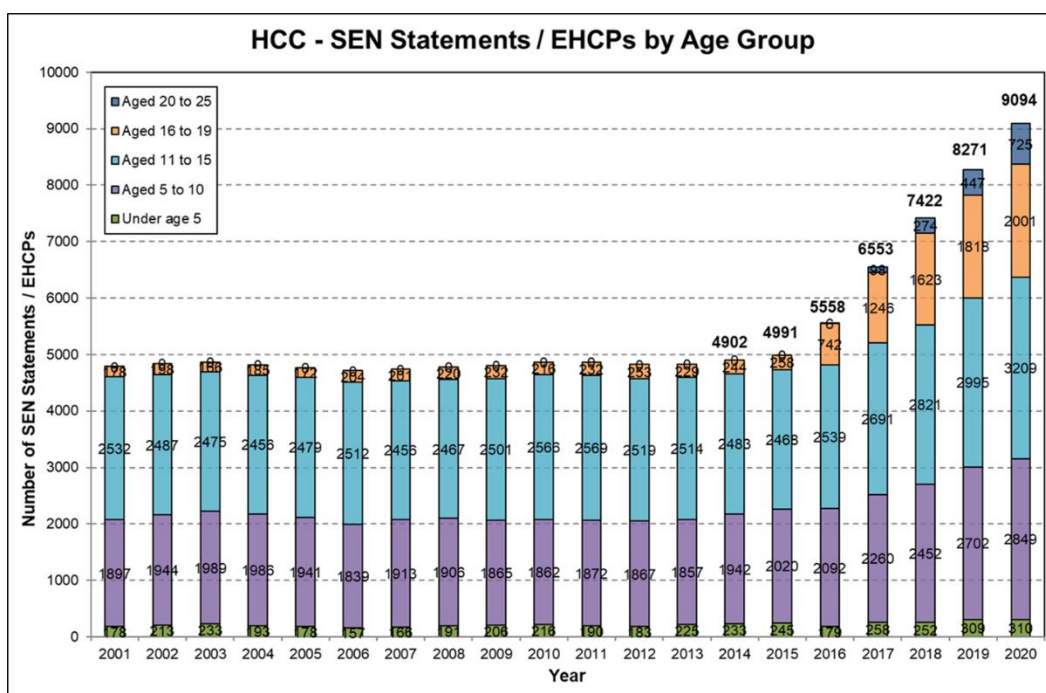


Chart 1: Number of statements/EHCPs being maintained (as at January census date) by age group

9. The large increase in post 19 young people reflects the extension of the age range from 19-25 years. This means that we will see an increase in plans as the 19 year old cohort fully evolves by 2025. Typically, around 90% of post 19 year olds continue with plans year on year.
10. The increase in plans places a pressure on the high needs budget which is part of the dedicated schools grant funding provision for pupils with special educational needs and disabilities. The budget for 2019/20 was £110 million but there was an overspend of £15 million. The overspend not only reflected an overall increase in plans, the extension of EHCPs for post 19 young people (which was not additionally funded), but also reflects a growing need to place children and young people in the independent non-maintained sector. Both the rise of the number of EHCPs and the difficulties placing pupils has also placed pressure on the SEN Service.

## SEN Service Education Health and Care Assessments and reviews

11. The SEN Service is required to complete EHCP reviews for Years 2, 6 and 11 to ensure that the appropriate provision is in place ready for the next stage of education. The deadline for these to be completed for Years 2 and 6 is 15 February. 98% of Year 2 reviews (83% in the previous year) and 96% of Year 6 reviews (78% in the previous year) were completed by the deadline. At 24 August, 78% Year 11 phase transfers had been finalised and 93% had either been finalised or were in draft which is an improvement compared with the same time the previous year.
12. The SEN Service is also required to complete the EHCPs within a 20 week timescale. The Hampshire performance has risen in 2018 to 55%, however, fell to 5.9% for 2019. This is an average of the performance over the calendar year and does not reflect months where performance was well above national levels. The national average for 2019 was 60.4%.
13. The decrease in timeliness of the delivery of EHCPs is disappointing and has mostly been caused by the cessation of the pilot SENSAs scheme. Schools Forum established a scheme called Special Educational Needs Support Allowance (SENSA). The aim of the scheme was to provide funding rapidly to schools to support pupils needs without the requirement for an EHCP. The scheme did not have the desired outcome of reducing the number of requests for EHC assessments. Schools tended to go onto apply for an EHC assessment for most of the pupils with a SENSA regardless of receiving the SENSA funding. Schools Forum chose to cease the pilot scheme as it had not met its aims which resulted in 435 additional EHC assessment requests in a short-term bulge between November 2018 and March 2019. This placed extra pressure on the system which was already being stretched by an overall increase in assessment request. This pressure was anticipated and a recovery plan put was quickly in place providing funding for additional SEN staff (£0.9 million rising to £1.3 million); and supporting the Educational Psychology service who needed to prioritise their statutory work over their traded work. The backlog of assessments is nearly cleared and the service is on track to begin to meet timescales from September.

14.

Strengths	Phase transfer reviews have been successfully completed in the majority of cases for Year 2 and Year 6 and Year 11s are on track for completion for placement in September.
Areas of focus	<p>Completing the backlog of work where plans are not yet finalised.</p> <p>Ensure that new requests are dealt with in a timely manner to improve delivery of plans within 20 weeks.</p> <p>Improve communication, in-coming and out-going with parents and schools.</p>

<p>What we are doing about it</p>	<p>A backlog team was set up to clear the assessment requests that came into the SEN service due to the cessation of the SENSA scheme.</p> <p>The backlog team has managed to reduce the number of requests in the backlog from 1,500 requests to just 10 drafts remaining to be sent and 1,018 plans finalised.</p> <p>There has also been an increase in staffing since November 2019 to meet the overall workload increase that has arisen due to the rising trend in assessment request. These staff have completed a robust training package and are now fully functional.</p> <p>The average number of days for the first decision as to whether to proceed to an assessment or not was 50 in November 2019. Now those staff are more experienced the average number of days is 37. The deadline is 42 days. Demonstrating that the service is on track to complete assessments in a timely way moving forward.</p>
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### Digital EHCP Hub

15. The EHC Hub is a software programme which covers the entire workflow of the statutory SEN processes which include:
  - Requesting and carrying-out the statutory education, health and care (EHC) assessment;
  - Drafting and finalising the EHC Plan;
  - Conducting and concluding the EHCP Annual Review.
  
16. In September 2018 Hampshire County Council began processing EHC assessment requests in the EHC Hub. The following services have subsequently been brought onto the hub:
  - In February 2019 the County Council brought all SENCOs onto the EHC Hub, so that they could request EHC assessment through it.
  - In summer 2019 the County Council brought all Educational Psychologists onto the EHC Hub, so that they could provide their advice for EHC assessment through it.
  - In November 2019 Hampshire County Council launched the EHC Hub to families.
  - Bringing Social Care and NHS advice givers into the EHC Hub was interrupted by Covid 19 priorities. Work is nonetheless progressing. Social Care's Children's Record Team is anticipated to be engaged in September 2020, with further work on-going to bring further Social

Care teams on-board throughout 2020; NHS Community Paediatricians and Community Therapy Teams are anticipated to be engaged from September 2020.

17. To complement the digital EHC hub there is a focus on person centred approaches. This is a requirement within the SEND Code of Practice which sets out how professionals should co-ordinate the development of the EHCP with parents, children and young people at the heart of the process from the outset, and as part of the graduated response in education settings. Training has been delivered to a small number of schools across the county with more planned.

18.

Strengths	<p>Although at a relatively early stage of development, early indications show that the system is improving the timeliness of the completion of assessments.</p> <p>The first EHC plans have now been produced from the system and in the recent Ofsted/CQC inspection these were noted to be high quality plans.</p>
Areas of focus	<p>Greater embedding of person-centred ways of working across the SEND workforce and greater satisfaction of families about the quality of plans.</p>
What we are doing about it	<p>Providing person centred planning training, including ongoing support, across the workforce.</p> <p>Monitoring impact over time to triangulate training, person centred working and reductions in requests, complaints and appeals.</p>

### **Hampshire Parent Carer Network**

19. Hampshire Parent Carer Network (HPCN) is a charitable organisation working throughout Hampshire. Members of the organisation are parents/carers of children and young people with special educational needs and/or disabilities aged 0-25 years, associated professionals, and affiliated groups. The organisation supports and trains parent carer representatives to work alongside the professionals who provide health, education, adult and social services to children and young adults. HPCN representatives sit on many of the groups and boards associated with work within SEND services.
20. HPCN send a newsletter to the membership each month to keep them updated with what the parent carer forum have been doing and what meetings have been attended. There is a steering group of 12 parents and carers who support the parent carer forum strategically that meets once a month. They are a wide range of parents and carers that have received

training on co-production and attend meetings on behalf of the wider voice of parents and carers in Hampshire.

21. HPCN also facilitate ‘Meet the Parents’ events across the county. This gives parents/carers of children and young people with SEND, the opportunity to meet in an informal way with their local SEN Teams, Health leaders and other professionals. They also hold ten ‘Get Together’ sessions every month covering all areas in Hampshire. These are sessions are for parents and carers to come along and meet other parents and carers but also ask for support and feedback on what has been going well and not so well for them. This is then passed onto the local authority and also HPCN can signpost families for further support. Hampshire SENDIASS are also present at these meetings and offer support.

22.

Strengths	<p>The ‘Future in Mind’ meetings have been a real success. These are held at five Child and Adolescent Mental Health Service (CAMHS) clinics across Hampshire. At these sessions parents and carers of children and young people who are on the waiting list for a service or intervention from CAMHS are invited to join us each month, and a clinician from CAMHS will talk to the group on subjects such as Anxiety, self-harm, ASD/ADHD pathway.</p> <p>HPCN feel they support empowering parents and carers with knowledge and resilience so they can get the best outcomes for their children and young people.</p>
Areas of focus	<p>HPCN want to increase their reach in harder to reach areas such as ethnic minority families or where English is the second language. They have found it hard to engage in some areas of Hampshire, namely the New Forest and Havant.</p> <p>HPCN would like to focus on improving their communication with all parents about what work they have been doing.</p>
What we are doing about it	<p>They are working towards improving their presence in the New Forest and Havant and engaging with harder to reach families.</p>

### **SEN Support and Inclusion within mainstream education settings**

23. The focus of the SEND Ofsted/CQC inspections is on all children with SEN, not solely those with the most severe and long-term educational needs that necessitate an EHC plan. In 2019, children with SEND out performed the

national average in the Early Years Foundation Stage for both SEN Support, 34% (national 29%) and those with an EHCP, 11% (national 5%).

24. Children and Young People with SEND and with an EHCP performed higher than national in all other key stages, however at SEN Support level they were just below national:
- Key Stage 2 Reading, Writing and Maths EHCP – 10% (national 9%)
  - Key Stage 2 Reading, Writing and Maths SEN Support – 21% (national 25%)
  - Basics 4 EHCP – 13% (national 11%)
  - Basics 4 SEN Support – 30% (national 32%)
25. SEN support has been made a focus of the Hampshire Inspection Advisory Service (HIAS) for their annual visits with mainstream schools to ensure that support is made available to the Hampshire school population who are deemed to be at SEN support.
26. This focus aims to establish that the provision for these children is both of a good standard and is appropriate to meet their needs within the context of a mainstream school, children and young people with SEN are kept at the forefront of discussions with schools and decisions about the educational offer available within Hampshire.
27. Specific work has been done with headteachers and SENCOs to ensure that the provision available reflects the graduated response promoted in the 2014 SEND Code of Practice. There has also been work with the SENCOs across Hampshire to ensure they are fully aware of all schools' obligations to make provision for children on SEN support, both with and without an EHCP.
28. The SEN Support Guidance for Schools document is being reviewed and co-produced with schools and parents, ready for publication in September 2020. The aim of redrafting the guidance is to develop it further and strengthen areas where it is felt the guidance is currently not clear enough. We will seek feedback and engagement in a variety of ways, including online, through focused meetings of both single stakeholder groups (e.g. parents) and multi-stakeholder groups, through workshop events with practitioners (e.g. SENCOs). This will also enable it to align with the Banding Framework for funding EHCPs which will also be consulted upon later in 2020.
- 29.

Strengths	<p>Knowledge of SEN, both statutory and school based, is being strengthened within HIAS and schools.</p> <p>The SEN Support Guidance for schools is being refreshed and being co-produced with parents and schools.</p>
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Areas of focus	<p>Ensuring that children with SEN are at the forefront of thinking in any future developments.</p> <p>Ensure progress tracking is robust and rigorous so that no child or young person, regardless of ability is 'unchallenged' in their learning journey</p>
What we are doing about it	<p>Focus on Inclusion for those on SEN support in Hampshire's mainstream schools.</p> <p>Running area SENCO support groups to facilitate peer support and updates to develop/enhance the SENCO role in Hampshire.</p> <p>Refreshing the SEN Support Guidance for Schools.</p>

### **SEN out-county placements**

30. As at August 2020 there were 482 children and young people with SEN placed in independent/non-maintained schools (INMSS) or independent specialist colleges. This was 421 at the same point last year. Many placements are made on a residential basis because of home school distance. All the children and young people concerned have an EHCP.
31. The total annual cost 2019/20 to the High Needs Funding Block for the out-county placements was £29.7 million (this includes the SEN funded element of placements joint funded with health and social care). This is £3.8 million more than the annual costs for 2018/19.
32. The total number of children and young people in independent non maintained out-county placements and the average cost of these placements are at the highest levels to date.
33. Independent placements can be very effective and lead to positive outcomes for the child/young person through specialist provision which might not be available through local maintained special provision. However, educating children away from their local community can lead to the fracturing of the child/young person's support networks. The SEN Service typically has been unable to attend many out of county annual reviews which has meant some children and young people remaining in their independent placement longer than necessary.
34. Since October 2017, there have been staff tasked specifically to attend annual reviews for children and young people educated in independent placements. Focusing specifically on Year 9 and above. The aim was to ensure improved transition planning for young people in independent placements and, where it was clearly in the interests of the child/young person, to bring them back to Hampshire provision.
35. In 2017/18 (academic year) 118 annual reviews were attended. There were 46 students where it was in their best interests to cease their education placement or move to a more cost effective in-house placement, resulting in

a saving of £2.2m in 2018/19 (academic year). In 2018/19 (academic year), a further 180 annual reviews were attended and 60 placements were amended as a result. The net saving is estimated to be £2m. It is assumed that this work will continue to result in a new saving of £2m in each year. While the number of young people placed in INMSS continues to be high, this is being off set by the work to bring back young people whose needs are better met in their community.

36.

Strengths	60 placements were either ceased or amended by the end of the current Academic Year. These placement changes have led to a net saving of over £2m.
Areas of focus	<p>To utilise the additional staffing resource made available to the SEN Service to continue attendance at annual reviews in independent provisions from Year 9 onwards where expectations regarding the long-term plan for the young person are clarified with a view to the out of county placement ceasing and that a properly planned transition plan is in place for when the young person moves into adulthood.</p> <p>Negotiate with out of county providers in respect of more cost effective placements, for example through block purchasing arrangements.</p>
What we are doing about it	<p>The SEN Service has increased the number of caseworkers with the additional staffing resource enabling continued attendance at annual reviews at out of county placements in partnership with the Independent Futures Team (IFT) in Adult Health and Care Services.</p> <p>A specific workstream is in place to explore and negotiate with Independent providers with the intention of securing more cost effective placements.</p>

### **SEN Capital Place Planning Strategy (specialist provision)**

37. As part of the statutory duty to ensure sufficiency of school places, including special school places, a comprehensive analysis of school places and forecast numbers has been undertaken. Forecasting for the growth in demand for specialist provision is complex; appropriately incorporating recent trends in EHCP assessments, changes in needs of pupils and how they are best met by an evolving service.

38. The total number of SEND places available in specialist and resourced provision in Hampshire in 2018/19 is 1,480 primary places and 1,981 secondary places. A five-year strategic plan is being developed identifying future requirements for specialist school place demand and provision across special and mainstream schools. See Appendix Two for a map of Hampshire SEND Provision.
39. The Department for Education (DfE) has allocated Hampshire £6.4m SEND capital grant for three years (2017-2020). Plans for this funding were initially published in March 2018 and will be updated annually and include a range of projects to increase specialist school places across the County at both primary and secondary level.
40. Hampshire's first Free Special School is due to open in 2021. This is a 125 place school in Basingstoke for pupils with Autism Spectrum Disorders (ASD) and social/communication difficulties school in Basingstoke with Catch 22 being the approved sponsor. Hampshire has also committed resources of up to £15m for additional provision of place for pupils with social, emotional and mental health (SEMH) needs – a 90 place provision for 10 – 16 year olds is being planned and a site sought for SEMH provision for secondary aged girls.
41. As part of the strategy, feasibility work is being undertaken to look at a number of condition issues across the Special Schools estate. As part of this work, a priority project for the remodelling of St Francis School, Fareham, for Severe Learning Difficulties (SLD) and complex needs has been approved. The scheme is costed at £4.5m including fees and due to be completed in Dec 2020. A review of Hampshire's other specialist provision is underway with an additional £5m budgeted for condition issues.
42. This work will help strengthen our provision offer for the growing number of children with EHCPs in our local area.
- 43.

Strengths	Countywide data available on projected growth and therefore strategic planning possible regarding specialist places.
Areas of focus	To understand the uncertainties in our forecasting model and intelligently apply the daily experience of the SEN service and schools to ensure our forward strategy is responsive to evolving pressures.  Work with key stakeholders to agree and progress the strategy.
What we are doing about it	Analysing projected growth data against actual data and building in flexibility to adjust agreed place numbers (APN) to reflect need.

	Project plan to take forward the priorities agreed and outlined in the SEND Sufficiency Strategy.
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## SEND Hampshire Area Preparation for Adulthood

44. It is our ambition to ensure that all young people have the aspiration, opportunity, and support to live fulfilling and independent lives, placing a clear emphasis on a strong education and training offer that provides a pathway to future employment. Applying a person-centred, strength-based approach, young people with SEND in Hampshire can – and do - access a broad range of services and provisions that support their successful transition to adulthood. We are making good progress against the following preparation for adulthood themes.
45. **Employment** - We have developed a county wide, joined up and high performing employability offer for SEND young people which focuses on maximising progression into sustained and paid employment. 'All our Talents' is the name given to the Hampshire SEND employability plan. It has been developed following direct consultation with young people and reflects what they told us was important to them to lead 'a good adult life'. The underlining premise of the plan is that accessing employment ('a good job') supports strong outcomes across all four elements of the PfA framework – independent living, good health and wellbeing and community inclusion.
46. As part of the All our Talents action plan, four SEND Employability Hubs will be operational from Autumn 2020. Designed around a strong employment pathway, these are in Eastleigh, Basingstoke, Farnborough, and Havant/Alton. Eighty places will be available in year 1. The programme will be extended in 2021, informed from the initial finding from the first four hubs. A supported employment provider, Ways into Work, have been appointed to support the pilot including employer engagement.
47. **Independent Living** – The primary enabler of independent living for young people with SEND is to secure paid employment (a good job'). In addition to the employment hubs the offer includes (but is not limited to):
- Embedded support of life skills within post 16 provision.
  - Person-centred travel training, supporting individuals to access and use public transport, included to access work-placements and employment.
  - Care Leaving team's PROJECT-I initiative, supporting individuals to explore and address practical barriers that is preventing their transition to independence.
  - Independent Futures key workers attached to each schools/college to support transition to independent living.
48. **Community Inclusion** – Young people with SEND have the same aspiration as their peers. Again, in the context of supporting them to develop the skills, knowledge, and experiences to live fulfilling and independent lives, we work with a range of organisations to ensure they the same opportunities and experiences as everyone else.

49. **Health and Well Being** – The offer in Hampshire is broad against this theme and includes (but is not limited to):

- Hampshire CAHMS outreach services and Fit-Fest, a festival-style event for children, young people, parents and professionals.
- NHS 'ready, steady, go' programme
- **No Limits** - targeted emotional health and wellbeing courses, Inc. culture/knife crime, cyber safety, child sexual exploitation and drug/alcohol misuse. LGBTQ+ children and young people will be able to access Breakout Youth.

50.

Strengths	Significant expansion of the young adult Extra Care supported living accommodation. This has facilitated an increase in supported living placements from x45 in 2017 to x91 in 2019.
Areas of focus	Finalising the Post 16 Strategy and setting up task groups. Development of post 16 and post 19 data to inform strategic commissioning Clarity of the Post 19 offer
What we are doing about it	'All our Talents' SEND employability plan approved- four pilot Hubs to be operational from Autumn 2020 (80 places in year 1)

### **Independent Futures Team (IFT)**

51. Adult Social Care provide statutory services to young adults aged 18 – 25. The Independent Futures Team (IFT) support young people and their families who are transitioning to adult hood. Adult Social Care and IFT are responsible for assessing Care Act Eligibility, providing Support plans for those who are eligible and supporting them to transition from Children's to Adult Services. Adult Social Care and IFT provide signposting, information, and advice to those who do not meet eligibility criteria, both through face to face meetings and online advice and information service through our dedicated websites Connect to Support Hampshire and The Local Offer.
52. The IFT work with people from age 14 depending on need until they are 25 or settled. Settled is defined as a young person who has a support plan which has been in place for at least three months and that the person is not in residential educational and will not be in need of alternative accommodation in the next 12 months.
53. Hampshire Adults Social Care operates a Hampshire first policy, to ensure that young people maintain links with their networks and communities. This includes a focus on reduction of young people being educated out of county and on ensuring young people are supported to return to their local communities when education has ceased.

54. The Learning Disability Plan Review 2018 was co-produced. People with learning disabilities and their carers said the most important things to them were relationships, employment and their own front door. Responding to the Learning Disability Plan Review 2018, a key strategy has been the focus on supported living ensuring that young people with complex learning disabilities have access to housing with security of tenure. This has included significant investment in specialist buildings which ensures maximum levels of independence can be achieved.

55.

Strengths	Technology Enabled care is embedded in Adults Services. This has resulted in innovative technology being delivered to children and young people prior and after their 18th birthday. This has included Brain in Hand and GPS enabled devices – both support greater independence and community access. Another example is technology reducing restrictive care in parental houses for example epilepsy sensors which mean parents no longer need to share a bed with their child.
Areas of focus	IFT have a target to ensure that 85% of 17.5 year olds known to the service have an agreed support plan in place for when they turn 18. During 2019/20 this has ranged between 85% and 58% of CYP.  Hampshire has seen a sustained increase in the % of adults with a learning disability known to Social Care in paid employment. Hampshire remains below the national average.
What we are doing about it	Action plans are in place to address the delays (to having a support plan in place) which include EHCP decisions, provider identification, lack of engagement and unknown Continuing Health Care status.  Changes have been made to the Ways into Work contract to improve the % of young people and adults with a learning disability into paid employment. Plans include working more closely with Hampshire Futures.

### **Role of the Designated Clinical Officer and Health Services**

56. The Clinical Commissioning Groups (CCGs) and the Local Authority (LA) are committed to joining up services where possible, reducing duplication of

effort, and improving the experiences of children and young people with SEND.

57. The five CCGs appointed a Designated Clinical Officer (DCO) in November 2019, following a period of no DCO. The post holder is also the Associate Director for SEND. Following the Ofsted/CQC inspection on the Isle of Wight, the capacity of the DCO role has been increased to include a part time Deputy DCO and a SEND Programme Manager.
58. The role of the DCO is a core leadership position within the Directorate Strategy and Partnerships and carries significant responsibility for the delivery of the position portfolio. The areas of responsibility currently include the following:
  - Fulfil the Designated Clinical Officer function across the two local areas Quality assure the health element of Education, Health & Care Plans (EHCPs)
  - Work with community paediatricians, providers and the Council to ensure statutory timeframes are adhered to
  - Ensure that health providers are commensurate with their duties in early identification of SEND
  - Manage the interface between the NHS and the council so that there is a timely response for Tribunals requests and attend court as directed to represent the CCGs
  - Develop and maintain the Self Evaluation framework and commensurate improvement plans and ensure compliance for Ofsted / CQC inspections
  - Support the delivery of S117 care plans and Care Education Treatment Reviews
  - Lead for Transforming Care Partnership
  - Lead on the Procurement of Integrated Therapies
  - Lead on the Joint Commissioning Boards of the Hampshire and Isle of Wight Councils
  - Ensure local placed based commissioning activity is delivered within designated Integrated Care Partnership area.
59. The NHS 10-year plan supports the development of closer working relationships between health and social care and between service providers. The establishment of Integrated Care Systems enables us to deliver our vision of joint working quicker with the leadership of services operating closer together at local delivery system levels. The NHS 10-year plan also re-enforces the ambition of services operating across the 0-25 age range, removing the challenging transition stage at 18, where many traditional services ended.
60. Across all our services there are opportunities for improving the way we deliver our services. The CCGs are keen to strengthen our partnership

working with the LA and have been working on a number of system transformation programmes:

- Aligned procurement programme between health, social care and education colleagues, we have been re-designing how services are commissioned, such as Health Visiting, School Nursing, immunisation and vaccinations, therapies and parenting.
- Health and Social Care are transforming the way we provide Children’s Continuing Care Services, integrating the workforce, improving decision making and governance processes and joint funding of packages of care.

61. The NHS 10-year plan provides us with an opportunity to continue our transformation programme and focus on those children who are most vulnerable:

- Children with learning disability and Autism
- Children with Eating Disorders
- Children with mental health conditions

62.

Strengths	<p>Multi Agency Resource and Special Education Needs Panel in place and jointly attended by NHS and Local Authority</p> <p>Joint Hampshire and Isle of Wight Local Transformation Plan - priorities of the plan are governed and delivered through joint strategic priorities (Emotional Wellbeing and Mental Health Strategy for Children and Young People in Hampshire 2019-22).</p> <p>The County Council Primary Behaviour Service is jointly commissioned with Hampshire CCGs’ to identify and support children with distressed behaviour and neurodevelopmental presentations</p>
Areas of focus	<p>Improve support for emotionally vulnerable children – Mental Health Support Workers</p> <p>Improve waiting times for CAMHS</p>
What we are doing about it	<p>Strengthening our approach to improving waiting times for CAMHS through working closely with our main provider and looking at innovative solutions such as the use of technology.</p>

**First-Tier Tribunal and the Single Route of Redress: Two year national trial and implications for Health and Social Care**



63. Parents and young people can bring appeals to the SENDIST under the Children and Families Act 2014. Appeals can be made when there is a refusal to undertake an assessment, when an EHCP is issued, or following an annual review of the EHCP. Appeals can be brought but only in relation to special educational needs or the provision specified as necessary to meet those needs. Any decision of the Tribunal is legally binding on the LA.
64. The SENDIST Regulations 2017 came into effect from 3 April 2018 and now allow appeals regarding social care and health needs and provision, but there must be an educational basis to the appeal. The Tribunal will continue to issue Orders in respect of SEND but from 3 April 2018 was able to make recommendations in respect of social care and health. These recommendations are not legally binding but it is clear that there is an expectation they will normally be implemented.
65. In the financial year 2019/20 there were 233 tribunals open. This is 2.5% of the number of maintained EHCPs. In 2018/19 there were 234 tribunals open which was 2.8% of the number of maintained EHCPs. Over half of the registered appeals do not reach a tribunal hearing because Officers work with parents to resolve the case before hearing.
- 66.

Strengths	<p>Single route of redress reflects more closely the ambition that the EHCP would include identification and provision of health and care needs as well as special educational needs.</p> <p>Social care has produced some strong examples of position statements</p> <p>Decisions between social care and education have been faster.</p>
Areas of focus	<p>Colleagues in health and social care continue to need to familiarise themselves and participate with the Single Route of Redress and its implications for their services.</p> <p>Systems and processes within each service need to be brought in closer alignment to aid decision making and communication.</p>
What we are doing about it	<p>Key personnel in Children's Services have already attended training on the single route of redress. Further training is planned.</p> <p>A SEN service review has also taken place to explore options regarding earlier intervention to prevent tribunals.</p>

67. The Hampshire Local Offer provides information and advice about services and support available across education, health and social care for children and young people with special educational needs and/or disabilities (0-25) and their families. It is a statutory local authority responsibility.
68. Part of the Contact and Engagement Officer role is to ensure that the content is up-to-date, accessible and meets the needs of families, children and young people. A key part of this work is to undertake quality assurance of the website and this is through a peer review process with other local authorities.
- 69.

<p>Strengths</p>	<p>The breadth and depth of content on the Hampshire Local Offer, providing a central source for information.</p> <p>Overall increase of self-service access to the Family Information Services Hub from 2018 to 2019.</p> <p>The Young Peoples' dedicated section, which was co-produced with young people, within the Family Information Services Hub (within which the Local Offer sits).</p> <p>An established feedback mechanism, whereby feedback from users is received, acted upon, and used to identify gaps or concerns. Feedback is transparent through the Local Offer Annual Report.</p> <p>Accessible information through filter options / search results.</p>
<p>Areas of focus</p>	<p>Review and development of content on the Local Offer – ensure directory is up to date and that there is useful information available.</p> <p>Ensure continued co-production with partners, parents/carers and young people when making changes and improvements.</p> <p>Continue to raise awareness of the Local Offer.</p> <p>Bring the governance and administration of the Local Offer and FISH into line with the wider Children's Services Contact and Engagement Strategy.</p>
<p>What we are doing about it</p>	<p>Utilising existing networks to highlight improvement areas and forming a detailed Action Plan.</p>

	<p>Working with these groups to explore how we can continue to engage with parents, and better engage with young people with SEND.</p> <p>Supporting Hampshire schools and settings in reviewing and publishing their SEN Information Reports.</p> <p>Developing a communications and engagement plan for the Local Offer.</p> <p>Documenting the current process for FISH / Local Offer customer contact management so that it can be developed and streamlined. Understanding and improving monitoring data around the Local Offer.</p>
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### SEND Ofsted CQC Inspection

- 70. The Hampshire local area was inspected under the joint Ofsted and CQC SEND Inspection framework in March 2020. The outcome of the inspection was that the Local Area was not required to produce a Written Statement of Action. This is a significant achievement as most large Local Authorities have received the requirement to produce a Written Statement of Action.
- 71. The inspection involved services from education, health, and care across a wide variety of agencies including the local authority and the NHS. The five-day inspection took the form of various meetings with professionals, parents/carers and children and young people. In addition, a range of documents were submitted to the inspection team including the self-evaluation summary.
- 72. Following the successful inspection, the Local Area received a final report in the form of a letter which detailed the strengths of the local area and areas for development. The table below highlights the key points. A post-inspection action plan is being developed based on the areas for development and input from all those who took part in the inspection, including parents and carers. This will be monitored through the Lead Officers group and the SEND Board will have overall accountability for the plan.
- 73.

Strengths	<p>Leaders are highly ambitious for children and young people with SEND in Hampshire to succeed. Both leaders and practitioners are passionate about improving the lived experience for children and young people with SEND and their families.</p> <p>Hampshire is an area that knows itself well. Leaders have honestly and accurately identified</p>
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	<p>where improvements are needed and know what they need to do.</p> <p>Professionals work together effectively in the early years to identify young children's needs.</p> <p>There are many examples of strong collaborative working between professionals to support schools and settings to successfully include children and young people with SEND.</p> <p>Positive work is under way to prepare young people for adulthood. There are many strong examples of support for young people to promote employability. Leaders have well considered plans in place to broaden this work and promote wider preparation for adulthood outcomes.</p> <p>Overall children and young people with SEND achieve well in Hampshire.</p>
<p>Areas of focus</p>	<p>Communication between parents, schools and services need to improve. Ensure that parents are aware of changes made and that they can see the good work that is going on.</p> <p>Improve co-production with parents/carers and children and young people. Although some good examples, it is not consistent and needs to improve in schools too.</p> <p>The number of children and young people with complex needs is continuing to increase. Therefore, it is important that the capacity of the DCO team is subject to regular review to ensure that it can cope with increasing demand.</p> <p>The timeliness and quality of EHCPs needs to improve and plans are in place for this, but the improvements have not yet embedded.</p> <p>Improve the Local Offer so parents/carers know that it exists and can find the information they require more readily.</p> <p>Produce and deliver on the Joint Commissioning Strategy.</p> <p>Children and young people receiving SEN support do not achieve as well as the same group of children nationally in key stages 2 and 4 .</p> <p>Some children and young people still waiting too long for neuro developmental assessments.</p>

What we are doing about it	Action plan will be devised from the identified areas for development. This will be monitored through the Lead Officers group and the SEND Board will have overall accountability for the plan.
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### **Consultation and Equalities**

74. No consultation or equalities impact assessments have been undertaken as this is an information update.

### **Conclusions**

75. There has been good progress with the implementation of the SEND Reforms across the Hampshire area which has been recognised during the recent Ofsted CQC inspection. As evidenced in this report, there remains a considerable volume of activity underway to further embed the requirements of the Code of Practice, across education, health and social care 0-25. This work aims to further improve how needs are met and outcomes improved for children and young people with SEND 0-25 in Hampshire.

## Appendix One – Local Area SEND Inspection Letter

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**17 April 2020**

Mr Steve Crocker  
Director of Children's Services  
Hampshire County Council  
3rd Floor, Elizabeth II Court North  
The Castle  
Winchester  
Hampshire  
SO23 8UG

Alison Edgington, Director of Delivery – Hampshire and the Isle of Wight  
CCGs Partnership  
Tracey Sanders, County Education Manager (Inclusion), Local Area  
Nominated Officer

Dear Mr Crocker

### **Joint local area SEND inspection in Hampshire**

Between 2 March 2020 and 6 March 2020, Ofsted and the Care Quality Commission (CQC) conducted a joint inspection of the local area of Hampshire to judge the effectiveness of the area in implementing the disability and special educational needs reforms as set out in the Children and Families Act 2014.

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

Inspectors spoke with children and young people with special educational needs and/or disabilities (SEND), parents and carers, and local authority and National Health Service (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 local area, including the local area's self-evaluation. Inspectors met with leaders from the local area for

health, social care and education. They reviewed performance data and evidence about the local offer and joint commissioning.

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

## **Main findings**

- Leaders are highly ambitious for children and young people with SEND in Hampshire to succeed. Both leaders and practitioners are passionate about improving the lived experience for children and young people with SEND and their families.
- The recently refreshed SEND strategy reflects leaders' aspirations unambiguously. Key themes of the SEND reforms are clear in the strategy, such as co-production, joined-up working and inclusion. Hampshire is an area that knows itself well. Leaders have honestly and accurately identified where improvements are needed and know what they need to do.
- Leaders are not afraid to try out new ideas and then adapt and change if needed. However, the scale of the local area and its partnership arrangements make it difficult to deliver changes on the ground as quickly as leaders desire, even when they know what needs to be done. Additionally, leaders do not explain their actions well enough to parents. As a result, some parents feel understandably frustrated and let down when they find it hard to get the right help at the right time for their child.
- Professionals work together effectively in the early years to identify young children's needs. This is a real strength in the local area.
- There are many examples of leaders and professionals working in coproduction with parents and carers to design and review strategies, provision and support for children and young people with SEND. However, this approach is not consistently experienced by all children and young people and their families. Furthermore, co-production with young people to plan strategic developments across the local area is not well developed.
- Providers highly value the quality of support, advice and training available to them. There are many examples of strong collaborative working between professionals to support schools and settings to successfully include children and young people with SEND. A parent commented, 'The reports received recently demonstrate how much all teams work together to get the best support for my son.'
- Designated Clinical Officers (DCOs) are passionate about their work to improve outcomes for children and young people with

SEND. Senior leaders recognise the value of the DCO role and have helpfully increased the capacity through the appointment of a deputy DCO and a project manager. As a result, this has increased their ability to promote the SEND agenda across the clinical commissioning group (CCG) partnership and to drive forward improvements. While the DCOs have clear priorities and intentions, they do not yet have a formalised workplan that aligns with the refreshed SEND strategy to bring even greater steer and focus to their work.

- The number of children and young people with complex needs is continuing to increase. Therefore, it is important that the capacity of the DCO team is subject to regular review to ensure that it can cope with increasing demand.
- Following a sharp spike in requests for education, health and care needs assessments, too many education, health and care (EHC) plans are now not completed within the statutory time frames. The quality of EHC plans is also too variable. Senior leaders recognise this and have a firm recovery plan in place to improve the quality and timeliness of EHC plans. Annual reviews are also delayed for some children and young people.
- The short-breaks offer has been co-produced with parents and carers effectively. The 'gateway card' and buddy scheme are helpful and popular initiatives within the short-breaks offer to promote community inclusion. However, the uptake of these schemes is relatively low and their availability is sensibly being extended.
- Positive work is under way to prepare young people for adulthood. There are many strong examples of support for young people to promote employability. Leaders have well-considered plans in place to broaden this work and promote wider preparation for adulthood outcomes. For example, leaders have accurately identified that they need to extend opportunities for independent or supported living.
- Although the local offer was originally co-produced with parents, it is now not well known or understood. Many parents told us that they find it hard to get the information they need.
- Parents connected to the Hampshire Parents Carer Network or the SEND information and advice support service (SENDIASS) typically feel well supported. However, for those who are not part of these networks, access to information and support can be patchy.
- The joint commissioning board has been in place for three months and replaces previous strategic joint commissioning arrangements. Commissioners are clearly ambitious for children and young people with SEND and have a number of joint strategic priorities.



However, there is currently no underpinning detailed joint commissioning strategy providing direction and focus to ensure that key priorities are achieved in a timely way.

- Overall, children and young people with SEND achieve well in Hampshire. However, children and young people receiving SEN support do not achieve as well as the same group of children nationally, in key stages 2 and 4. Pleasingly, outcomes for this group of children are improving rapidly. Schools receive a strong offer of support from the school improvement and specialist support teams, focused on raising achievement.
- Leaders are developing a helpful 'outcomes framework' to evaluate their strategic developments. Leaders are ambitious to ensure that this framework aligns with broad holistic outcomes across education, health and care for children and young people aged 0–25. Leaders have clear plans to link EHC plans to this useful framework. However, this positive initiative is at an early stage of development.
- Despite the local area seeking solutions to address long waits for neurodevelopmental assessments, some children and young people are still waiting too long to have their needs assessed and met. There is also a growing cohort of parents and carers who feel that there is a gap in sensory support for their children. The CCG partnership recognises this as an area of unmet need and is sensibly jointly commissioning provision to meet these needs.

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

### **Strengths**

- Effective links between neonatal teams, midwifery teams and health visitors are supporting the identification of young children's needs. Health visitors consistently receive information about antenatal diagnostic tests, enabling them to provide anticipatory support and planning for families.
- Health and social care professionals have access to a 'child health information exchange' (CHIE) system that is promoting effective information-sharing and coordinated care for children, young people and families. Efficient use of flagging and alert systems within electronic records is usefully supporting the identification of children with SEND.
- Most professionals make proficient use of training, advice and support to successfully identify children and young people with SEND. Leaders are committed to identifying and meeting needs

through a child-centred approach which is not dependent on a diagnosis. Professionals work closely together to share their expertise and knowledge to identify children's needs in a timely and appropriate way.

- The 'early years advisory panel' enables professionals to share information successfully. Professionals work together well to coordinate assessments and secure consistent approaches across services to identify young children's additional needs.
- Leaders have wisely invested in speech and language therapy (SALT), recognising speech, language and communication as a primary area of need. An additional service, above that provided by the NHS, is offering useful, evidence-based packages of support.
- There is strong recognition across health that some families who are geographically and socially isolated find accessing clinics challenging. In response to this, leaders are strengthening their digital offer to improve access to services. For example, 'CHAT HEALTH' is an instant messaging service, launched for parents. This digital offer is very successful in helping health visitors to identify need which may not ordinarily be noted. Child and adolescent mental health services (CAMHS) have also co-produced a website with children and young people which provides information and advice to parents about where they can seek support for their mental health.

### **Areas for development**

- Variations in capacity and high caseloads in some health visiting teams means that some mandated checks, in accordance with the Healthy Child Programme, are at times suspended, when staffing capacity is stretched.
- Leaders have not yet done enough work to understand the reasons why the proportions of children and young people identified with moderate learning difficulties are higher in the local area than the national average. They also do not fully understand why the identification of autism spectrum disorder (ASD) is lower than is seen nationally. Consequently, leaders do not know whether these variations link with any gaps in the processes for identifying children's needs.
- Not all parents in the area are positive about the effectiveness of early identification for children with needs that emerge as they get older. Several told us that they had experienced lengthy delays in the identification of their children's needs. Leaders acknowledge that there is more work to do to ensure consistency.

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

### **Strengths**

- The portage service offers helpful support to pre-school children and their families. Knowledgeable staff work closely with pre-school children to provide tailored, holistic packages of support for use at home and in their early years settings. As a result, young children who have accessed this help are well prepared for starting school.
- Many children with SEND benefit from effective transitions into schools and settings. Teams work in partnership across education, health and care to provide this helpful support. For example, the early help team and health teams take a collaborative approach to support pre-school children with SEND. A parent typically explained, 'I can't speak highly enough of the support I have received. We have had everyone involved that we need, and they have been a lifeline.' 'Transition partnership agreements' help to coordinate support and plan transition onto the next school or setting.
- Sensible improvements have been made to transition arrangements for children with complex care needs, moving from children's to adults' social care. Last year, all 16-year-olds known to the disabled children's service had an allocated social worker. Increasingly, this group of young people have an agreed personal budget by the time they are 18 years old.
- SEN support materials provide schools with clear guidance about how to meet the needs of children with SEND who do not have an EHC plan. Area leaders check how well these materials are working and make appropriate changes to keep the guidance up to date.
- Schools value the quality of specialist support and guidance they receive from other professionals in the local area to help them meet the needs of children and young people with SEND. School special educational needs coordinators (SENCOs) keep themselves up to date through the 'SENCO Circles' networks. Educational psychologists are successfully helping schools to develop their expertise in person-centred planning (planning for children's individual needs).
- Most schools and settings in Hampshire are inclusive. Local area leaders are committed to ensuring that school systems and processes enable children and young people with SEND to thrive

in their settings. Strategic developments keep this commitment to inclusion at the forefront. For example, changes to SEND funding are under way to facilitate even greater inclusion in schools and settings.

- Children and young people with SEND whose circumstances make them additionally vulnerable benefit from helpful coordinated support. For example, professionals work well together to meet the needs of children and young people with SEND who are known to the youth justice system. This group of vulnerable children and young people receive useful therapeutic support for their social and emotional needs.
- Health teams are working tenaciously with some of the most vulnerable children, young people and families with SEND, such as those from travelling communities. Over time, one SALT team has built up trust and rapport with a group of travelling families and now are welcomed onto their site. As a result, some of the most vulnerable and transient children and young people are having their needs assessed and met.
- Joined-up work to identify and meet the needs of children in care who also have SEND is effective. There are several examples of innovative approaches that are supporting young people to actively participate in their care plans. 'Care ambassadors' and the digital health application, 'Give yourself a health CIC', are two helpful examples. Care leavers with SEND receive helpful and carefully planned support from the 'independent futures team' to assist transition planning from Year 9. The Virtual School provides helpful support and advice to promote positive outcomes for children looked after with SEND.
- Leaders keep a close eye on children and young people with SEND who are not educated in school. Information is shared well between professionals to support these children and their families. Leaders know that some parents home educate their child because they are worried that the school provision is not meeting their child's needs. Leaders monitor the data they collect to spot any trends or patterns with individual schools so that this can be followed up. This group of children also have access to the school nursing service. Information is shared with the school nursing team from both the local authority and local schools to ensure that school nurses have an oversight of those children and young people with SEND who are educated at home.
- Therapists take an effective coordinated approach to assessing children and young people who have multiple, comorbid therapeutic needs. This helpful way of working is supporting the 'tell it once' approach. As a result, therapists are working together to assess and meet children's needs successfully.

- We met with several parents who value the support their children receive and describe many examples of the school going above and beyond for their children. They gave examples of some schools taking a real interest in their child and tailoring support to meet their individual needs. They describe schools where children are known well and treated with respect and care. However, sadly, this is not the experience of all parents and carers in Hampshire.
- Many post-16 providers are successfully developing their curriculum offer for young people with SEND. Leaders ensure that young people can study courses that match their needs, interests, aptitudes and aspirations. In many cases, this now includes opportunities for high-quality work experience. Placements are carefully matched with interests and previous skills obtained. When this works well, young people have high aspirations for the future.
- Leaders have grasped the nettle of lengthy delays in the EHC needs assessment process and introduced a digital solution to tackle the issue. The EHC hub was co-produced and launched with parents in November 2019. Although at a relatively early stage of development, early indications show that the system is improving the timeliness of the completion of assessments. No EHC plans have been produced yet from the system but there is evidence that the assessments required to inform these plans are now being completed more efficiently.

### **Areas for development**

- Leaders know that communication with parents needs to improve swiftly. Communication from the SEN team has been limited due to the capacity of the casework team. Leaders have recruited more staff and introduced a dedicated helpline for parents to use to access information. The helpline is busy, receiving approximately 140 telephone calls and 400 emails each day. Despite leaders' positive efforts, many parents still feel highly frustrated and find it difficult to get a timely response from the team.
- Despite many examples of co-production working well, several parents also told us that they do not always feel as involved as they would like to be in reviewing and designing support for their children and young people with SEND in schools and settings. Parents say that the quality of co-production is too dependent on the attitudes of the individual school rather than being a consistent approach across the local area as a whole. Many parents are frustrated and disappointed with the level of service they receive. A parent typically explained that 'we want to be part of the solution'.

- Despite being commissioned to provide a service for children aged from birth to 18, CAMHS is providing little support for children with social, emotional and mental health needs who are under five years old. Although the service is receiving a number of referrals for children under five, it is typically not providing assessments and interventions for this cohort.
- Children and young people who require physiotherapy for musculoskeletal conditions in Hampshire are not benefiting from an equitable service offer. While some children and young people in the south-east of the local area are benefiting from support and intervention, there is no commissioned offer elsewhere.
- A significant proportion of parents and carers told us that due to lengthy waiting times, they felt they had no option but to seek private health assessments. Parents believe that some health provision is not available, although this is not always the case. The local offer does not reliably provide up-to-date information about the health services available. Leaders have more work to do communicate with parents and carers effectively.
- Despite much positive work in the local area, several parents still feel that they have a battle to get the right help and support for their child. Parents feel understandably let down by lengthy waiting lists for some services. Parents told us that there is a lack of appropriate specialist educational provision in some areas. As a result, there are some children who have not been at school for some time. A number of parents feel that their only course of redress is to make an appeal to the SEND tribunal.
- The completion of initial and review health assessments for some children in care with SEND, in accordance with statutory timescales, is variable. Capacity issues within the children in care health team and the geographical size of the county have presented challenges. Recent changes in commissioning arrangements have also resulted in a backlog of assessments. Despite clear plans being in place to address this issue, health assessments for some children and young people are delayed.
- Waiting times for neuro-developmental assessments are too long. While there are a range of pre- and post-diagnostic support services for parents and carers, access to this support is variable around the county. Many parents we spoke with told us that they did not know where to access support. Although leaders know this is a priority, there is currently no formalised National Institute for Health and Care Excellence (NICE)-compliant post-diagnostic pathway in place.
- Access to therapy services is too variable. Capacity within staffing teams has resulted in some children and young people experiencing delays in having their needs assessed and met. The

high rates of tribunals in the county have further exacerbated capacity issues in therapy teams. Leaders have clear recruitment plans to increase staffing and vacancies are currently being advertised.

- School nurses are not commissioned to provide training to staff in mainstream education settings to safely support children and young people with health needs. While the local area provides courses for education staff to access, the data shows a relatively low uptake of this training. More work is needed to ensure that schools have sufficiently trained and competent staff to meet the increasingly complex medical needs of their student populations.
- The proportion of EHC plans completed within the statutory 20 weeks is currently below that seen nationally, although until recently, it was above the national figure. The volume and timeliness of EHC needs assessments have been adversely affected by changes to the local funding system for children receiving SEN support. Leaders are acutely aware that EHC plans are not being completed swiftly enough. They have made sensible changes to improve efficiency. Timeliness is tightly monitored by the director for children's services. However, communication with parents about how the situation is being tackled has not been clear enough. As a result, many parents remain angry and justifiably dissatisfied about how long they have had to wait.
- Overall, the quality of EHC plans is weak, although there are positive signs that quality is improving. However, too often, EHC plans are heavily education-focused, rather than providing a holistic view of the child or young person across education, health and care. Many EHC plans do not reflect person-centred approaches and outcomes are typically too generic rather than specific. As a result, EHC plans are not yet making a strong enough contribution to improving the lives of children and young people with SEND.
- Annual reviews are not reliably completed for all children and young people on an annual basis. Leaders recognise this issue and are starting to tackle the issue. Currently, the most vulnerable groups are targeted to ensure that their annual reviews are completed. Furthermore, amendments to EHC plans following an annual review are not routinely made. Consequently, some children and young people's EHC plans are several years out of date and no longer reflect their needs accurately.
- Children and young people with SEND who receive support from social care teams get the right help. However, the wider family support needs of children and young people who are not known to social care are not always considered carefully enough. Therefore,

this group of children and young people do not always get the help they need.

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

### **Strengths**

- Community children's nurses are providing effective child-specific, competency-based staff training to enable children with complex medical needs to safely remain in their educational settings. Furthermore, training and support are being provided to the parents and carers of children and young people to enable them to safely meet their child's needs at home. This practice is helping to promote positive health outcomes by facilitating early discharges from hospital and preventing readmissions.
- Children with SEND achieve well in the early years. In 2019, the proportion of children with EHC plans and those receiving SEN support reaching a good level of development by the end of Reception was above the national average. Effective joint working and inclusive approaches in early years settings enable children to succeed.
- Most children with SEND build on their strong start in the early years and continue to achieve well in school. Educational outcomes for children with EHC plans are above that seen nationally.
- Many young people with SEND continue to participate in education or training after statutory school age. The proportion of young people with SEND, over the age of 16, who are not in education, employment or training (NEET) is below national figures.
- The number of children and young people with SEND who are permanently excluded from school is low. School staff have access to a wide range of support and advice to help them support children's social, emotional and mental health and keep them in school.
- The number of children and young people in Hampshire requiring in-patient hospital admission for their mental health needs has decreased. CAMHS inreach teams are helping to support children and young people who are at risk of in-patient admission to remain at home and in their communities. Leaders recognise that capacity of the in-reach teams is fragile due to increased demand for the



service. Well-conceived plans are in place to increase the capacity of in-reach home treatment provision by July 2020.

- Supporting young people to make a positive transition into adulthood is a top priority for the local area. Colleges and the council offer a number of different supported internship programmes. Careful planning helps to ensure that young people are on a programme that matches their skills and interests. Independent travel training is often included within the planning to help increase independence. Pleasingly, the number of supported internships is starting to increase, and leaders are committed to securing further employment opportunities for young people with SEND.

### **Areas for improvement**

- Some children and young people with SEND are not receiving their entitlement to a full-time education in Hampshire. Several parents told us that they worry about their children receiving reduced hours provision at school. Some said that they feel that they have to agree to these arrangements to prevent their child from being excluded from school. Leaders have identified this issue and provide clear guidance to schools with the aim of reducing the prevalence of reduced hours provision. Leaders know that there is more work to do to bring about the improvements that are needed.
- Outcomes for children and young people receiving SEN support are improving rapidly. However, they remain below that seen nationally for the same group of pupils in key stage 2 and 4.
- The quality of person-centred planning to prepare young people for adulthood is patchy. Annual reviews and EHC plans are not always being used effectively to support young people's smooth transition to the next stage in their lives. Frequently, plans focus on education and employment and do not consider wider health and social outcomes that will enable the young person to have a good life.
- Some children with social, emotional and mental health needs do not reliably achieve positive outcomes. Difficulties in accessing timely support is leading to a deterioration of their condition in some cases. Parents told us that despite their children having significant mental health needs, CAMHS are not always able to provide support until children reach crisis point.
- Transition between children's and adult's health services do not always work smoothly enough. Despite the community children's nursing team having effective arrangements with adults' services, transition for some young people with complex and enduring

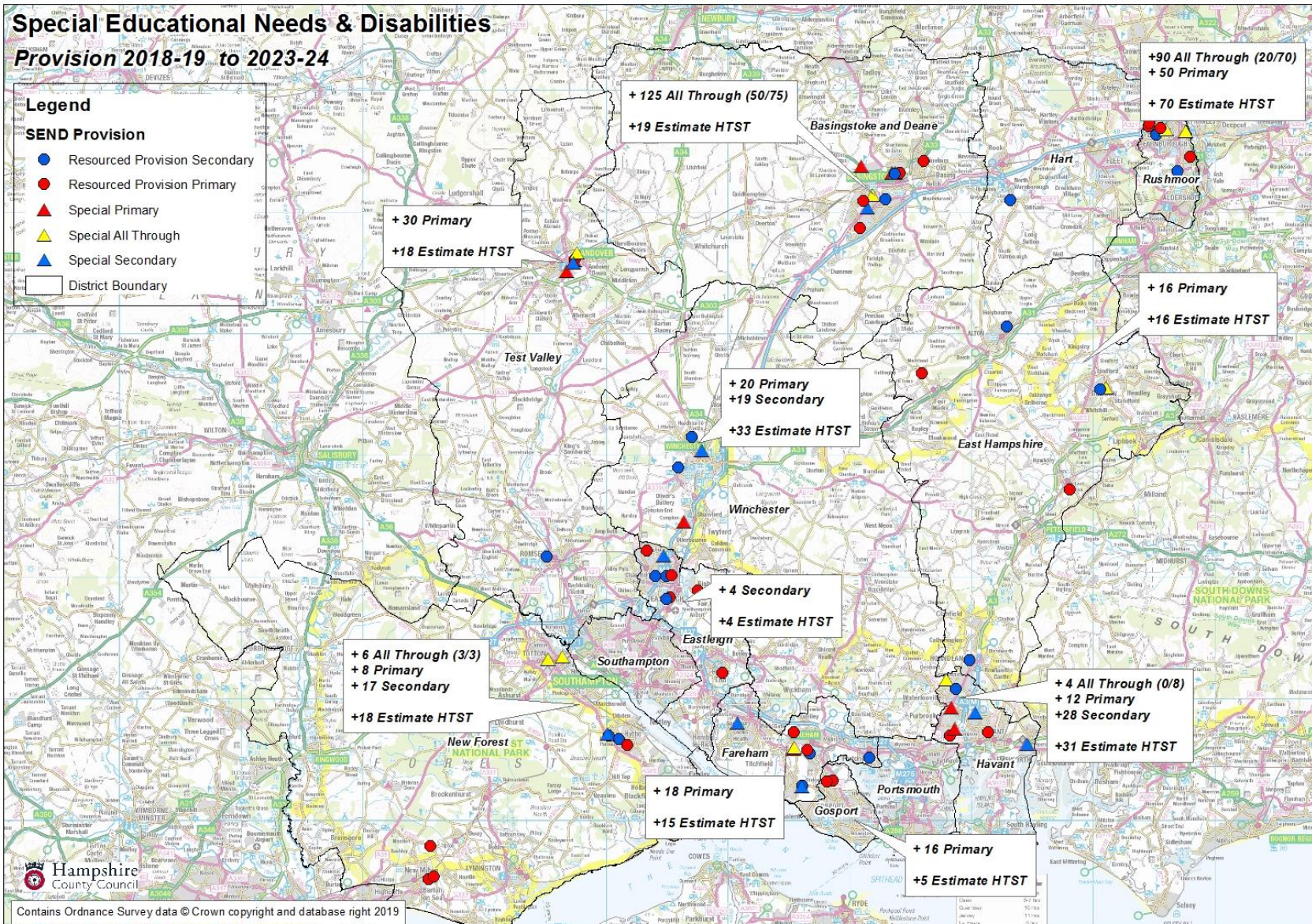
health needs remains an area of challenge. While plans are in place to tackle this, they are at an early stage.

Yours sincerely

<b>Ofsted</b>	<b>Care Quality Commission</b>
Christopher Russell SE Regional Director	Ursula Gallagher Deputy Chief Inspector, Primary Medical Services, Children Health and Justice
Claire Prince HMI Lead Inspector	Nikki Holmes CQC Inspector
Phil Minns HMI	Rebecca Hogan CQC Inspector
Julie Killey Ofsted Inspector	

Cc: DfE Department for Education  
Clinical commissioning group(s)  
Director Public Health for the local area  
Department of  
Health NHS  
England

## Appendix Two - Special Educational Needs & Disabilities Provision 2018-19 to 2023-24



**REQUIRED CORPORATE AND LEGAL INFORMATION:**

**Links to the Strategic Plan**

Hampshire maintains strong and sustainable economic growth and prosperity:	no
People in Hampshire live safe, healthy and independent lives:	Yes
People in Hampshire enjoy a rich and diverse environment:	no
People in Hampshire enjoy being part of strong, inclusive communities:	yes

**Other Significant Links**

<b>Links to previous Member decisions:</b>	
<u>Title</u>	<u>Date</u>
<a href="#">SEND Reforms Implementation</a>	16 Sept 2015
<a href="#">Hampshire SEND Reforms Implementation Programme (Ofsted and CQC feedback)</a>	25 May 2016
<a href="#">Special Educational Needs and Disabilities (SEND) Reforms Hampshire area post implementation update</a>	8 Nov 2017
<b>Direct links to specific legislation or Government Directives</b>	
<u>Title</u>	<u>Date</u>
Children and Families Act [Part 3 SEND] 2014 <a href="http://www.legislation.gov.uk/ukpga/2014/6/contents/enacted">http://www.legislation.gov.uk/ukpga/2014/6/contents/enacted</a>	September 2014
Statutory Guidance: SEND Code of Practice 0-25 <a href="https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/398815/SEND_Code_of_Practice_January_2015.pdf">https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/398815/SEND_Code_of_Practice_January_2015.pdf</a>	January 2015
Local area SEND inspection framework (Ofsted and CQC) <a href="https://www.gov.uk/government/publications/local-area-send-inspection-framework">https://www.gov.uk/government/publications/local-area-send-inspection-framework</a>	April 2016

**Section 100 D - Local Government Act 1972 - background documents**

The following documents discuss facts or matters on which this report, or an important part of it, is based and have been relied upon to a material extent in the preparation of this report. (NB: the list excludes published works and any documents which disclose exempt or confidential information as defined in the Act.)

Document

Location

None

## **EQUALITIES IMPACT ASSESSMENT:**

### **1. Equality Duty**

The County Council has a duty under Section 149 of the Equality Act 2010 ('the Act') to have due regard in the exercise of its functions to the need to:

- Eliminate discrimination, harassment and victimisation and any other conduct prohibited by or under the Act with regard to the protected characteristics as set out in section 4 of the Act (age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex and sexual orientation);
- Advance equality of opportunity between persons who share a relevant protected characteristic within section 149(7) of the Act (age, disability, gender reassignment, pregnancy and maternity, race, religion or belief, sex and sexual orientation) and those who do not share it;
- Foster good relations between persons who share a relevant protected characteristic within section 149(7) of the Act (see above) and persons who do not share it.

Due regard in this context involves having due regard in particular to:

- The need to remove or minimise disadvantages suffered by persons sharing a relevant protected characteristic that are connected to that characteristic;
- Take steps to meet the needs of persons sharing a relevant protected characteristic that are different from the needs of persons who do not share it;
- Encourage persons sharing a relevant protected characteristic to participate in public life or in any other activity in which participation by such persons is disproportionately low.

### **2. Equalities Impact Assessment:**

This report is an information update for the Children and Young People Select Committee and therefore no impact has been identified.