

Southend-on-Sea SEND Partnership

SEND Self-evaluation - Executive Summary

1. Introduction

This is a summary of the full local area self-evaluation, which details the extent to which the local area is effectively identifying, assessing, meeting needs, achieving and improving outcomes for all children and young people with SEND, irrespective of age, characteristics or circumstances.

This information was compiled from partnership development sessions, discussions, and a wide evidence base, and presented to a SEND Partnership Summit in April 2021 to inform a new strategy for the next three years.

Since the Summit and writing the self-evaluation in April, an inspection revisit in May 2021 found that “The area has made sufficient progress in addressing three of the four significant weaknesses identified at the initial inspection.” The full inspection revisit report to complement the self-evaluation can be found [here](#).

2. Headline data

The [SEND Profile](#) provides current data illustrating that there are fewer children at SEN Support in Southend than national and regional comparators but more children with EHCPs:

- **2,663** children at SEN support are in our local schools.
- A higher percentage of pupils with SEN support or an EHCP plan (11.5% in 2016

to **12.4%** in 2021), but this is lower than nationally (from 14.4% in 2016 to 15.5% in 2020).

- 27% fewer new EHCPs were issued (140 in 2019 to **102** in 2020). There are 3% more plans in total (1,361 in January 2019 to **1,399** in January 2021). Although less plans were issued, the total count of plans has increased. This suggests less plans were discontinued or transferred.
- The biggest increase (53%) was for the 20-25 age group, from 30 to **46** EHCPs. The biggest decrease (-30%) was for the 0-5 age group, from 67 to **47** EHCPs.
- **595** Children attend special schools.

As at 31st March 2020, there were 137 children in need (open to social care services) at 31st March 2020 with a disability recorded.

3. Needs

Definitions of disabled children vary in both legislation and in local organisations. Parents told us that services do not always understand the needs of children and young people and the impact on their daily life and on the family. They were clear that understanding need and having a diagnosis are very different, but sometimes professionals want to wait until there is a diagnosis. This means that valuable support in understanding, and meeting need is often too late.

Southend has more children in school than the national average whose needs are

categorised in the school census as Social, Emotional and Mental Health (21.4%) and Specific Learning Difficulty (14.2%).

Speech, Language and Communication needs (28.3%), Autistic Spectrum Disorder (19.5%), Social, Emotional and Mental Health (18.7%), and Moderate Learning Difficulty (18.4%) are the most significant needs in EHC plans.

Southend has a higher rate of adults (age 18+) with a learning disability receiving long term support from local authorities. ([Public Health England Learning Disability Profile](#)).

Further exploration of the reasons for higher Social, Emotional and Mental Health primary need, numbers and characteristics of children and young people with SEND on caseloads of different services would provide a clearer picture to inform future commissioning and improvement activities.

4. Leadership, Partnerships and Commissioning

Leadership, partnerships and commissioning were reviewed and strengthened after the inspection in 2018 as part of the WSoA. Further independent review in March 2020 identified that there was still insufficient pace and more to do, including development of a new strategy and to have greater awareness of impact in meeting the needs of children with SEND and their families. Strengthened partnership governance was implemented in November 2020 which includes a better 'line of sight' and ownership by Health and Wellbeing board

(HWBB). There were also changes in some of the key strategic leadership posts in 2020.

The new Joint Commissioning Group is progressing three commissioning priority projects as well as other activity at present:

- Neuro-development pathway
- Jointly commissioned therapies -
- Improving timeliness and quality of contributions from providers to Education Health and Care Plans (EHCPs).

Commissioning activity and some WSoA actions have not progressed at the pace desired due to problems recruiting to a new short-term commissioning post.

5. The Covid-19 pandemic

The Covid-19 pandemic meant re-prioritising and refocussing services, but there were examples of where services responded and adapted quickly to respond to changing needs for children with SEND.

This included a joint multi-agency professional network established in direct response to Covid which strengthened multi-agency working and identified joint working opportunities.

6. Engagement and co-production

Co-production and engagement with children, young people, parents, carers and professionals vary across services for children and young people with SEND and their families. We recognise that there is more to do across the partnership to engage and listen harder, more widely, and to collate messages, learning from some of the

examples of participation and engagement in individual areas. For example, Educational Psychology Service, Mental Health support, the Multi-Schools Council and guidance such as [‘Southend SEND: Shared Expectations’](#)

The POET survey (Sept 2020), although in line with national responses, provided areas for attention around quality of life, quality, choice, and flexibility of support.

In terms of parents and carers, Southend SEND Independent Forum was appointed as the new Parent Carer forum in November 2020 and have quickly become an intrinsic and valuable part of the SEND partnership, involved in a range of co-production activities such as materials for the neuro-development pathway as well as increasing their reach to parents/carers in Southend.

7. Identifying children and young people with SEND

Southend has a higher percentage of EHCPs issued to children under 5 (5%) than the regional average of 3.6%. Early identification, notification and assessment therefore leads to many young people having their EHCP in place ready for transition to primary school.

Services and systems for identification and assessment include Universal Healthy Child Programme; Early Years Development Team; Multi-agency Core Referral Team operating through The Lighthouse; the Council’s Early Help Service; and two new Early Years SEND adviser and support worker posts.

Oversight and sharing intelligence about all children has improved. Southend Borough Council now has data sharing agreements

with all mainstream schools, and similar agreements need to be sought with Independent schools. Examples of sharing information appropriately to ensure appropriate provision include the CME dashboard and Inclusion Panel.

The SEND Partnership will ensure that this identification is rigorously and routinely reviewed as part of the new Quality and Outcomes Framework and in undertaking commissioning activity.

8. Assessing and planning for children and young people with SEND

Considerable progress has been made to put in place arrangements for multi-agency decision making through a number of multi-agency panels which identify children and young people with SEND, consider their assessed needs and which resources are best to meet their needs.

The number of initial requests for assessments decreased to 225 in 2020, 47% of which were refused compared to 30% in comparator authorities. We recognise that the insufficient evidence to demonstrate that special educational provision needs to be made for the child or young person may be linked to the lower numbers of pupils identified at SEN Support and target schools where it is felt this is required.

Despite the high number of refusals for EHC Needs Assessments (EHCNA), Southend still maintains a higher percentage of EHC Plans than the National average and the percentage of EHCAs where no EHCP was issued remains low and stable at 1.8%.

Processes and systems for assessment and planning have been improved. The SEND service was reviewed and re-structured and a new Case Management system procured to address weaknesses identified in inspection in 2018 resulting in better co-produced, better quality, timelier (94% issued within 20 weeks without exceptions) plans.

The Annual Review process, with engagement by parents and professionals, has been updated in line with the roll out of the EHC Hub and a new post of Monitoring and Review Officer adds capacity to support timely, good quality reviews. 75.5% of reviews due in 2020 had been completed within a 12-month period, compared to 52.5% for the previous year. A SEND Service priority is to ensure that all annual reviews are completed within 12 months of the date of their EHCP or the last annual review.

A child's progress towards person centred specific outcomes will be recorded in the child or young person's record in the EHC Hub following their annual review which means that parents, schools and all other professionals working with the child can see if they are making progress.

Quality assurance activity in the past year, either ad hoc or planned, has increased. Different mechanisms are now in place or planned, the learning from which is fed into improvement planning and sharing good practice.

9. Communication

Parents told us that they often feel 'redirected', especially at the early stages of identification of SEND, and there is not

always clear information or pathways for support.

A new SEND Local Offer website, completely co-produced with children and parents/carers, has been implemented within the Livewell Southend website providing a wider range of information. Three new roles were created to improve the local offer and other forms of communication and sharing information such as Facebook and Instagram pages.

We know that there is more to do to further improve our local offer website and communications. For example, a gap in specialised information and links to national resources for parents and carers who are at the early stages of understanding their child's needs; services available to young people aged 16-25; and training for parents and carers in the area of autism, ADHD and trauma to reflect the latest research and understanding.

10. Meeting the needs of children and young people with SEND: services and support

There are a range of voluntary and statutory services available to meet the needs of children and young people with SEND and their families, and as a partnership we know for some children and families there is more to do to commission or deliver a range of high-quality provision, offer choice and provide access to mainstream, specialist and alternative provision and outreach services according to need, that work together flexibly to meet that need. The headlines from the self-evaluation below illustrates some of the successes and challenges.

- Waiting times for the Lighthouse Child Development Centre are long, and communication has been poor leaving some families feeling frustrated, unsupported and isolated. Demand relating to neuro-diverse conditions is growing exponentially and capacity and pathways have failed to adjust and adapt to keep up with demand. Commissioners and the Lighthouse are working to implement a clear and transparent improvement plan to address these with the aim to develop a new model of community paediatric care in 2021/22, working closely with EPUT and wider system partners and stakeholders.
- There has been a focus on mental health in the past year. Children, young people, families and professionals tell us additional clarity is needed to understand the EWMHs offer, all of which will be considered in the re-commissioning in 2021/22.
- The Social Care Children with Disabilities Team have supported approximately 220 children with various care packages between October and December 2020.
- Southend has a higher percentage of special schools and commissioned special school places than other authorities. Experiences of parents and children in either mainstream or special schools is varied. Clearer pathways for schools about accessing specialist support and early identification are areas for improvement.
- Improvements in school inclusion and behaviour services have resulted in a reduction in the number of children missing education;
- Educational attainment, apart from KS1, is below the national average and

requires improvement. Many young people are in education or employment (97.6% compared to 88.2% nationally) and fewer children are not in education, employment or training than previous years (1.2%).

We know that in some services, as well as collectively across the partnership, we need to be better at understanding the impact of our provision on the lives of children and young people, and how we are improving outcomes for them.

11. Preparing for adulthood and transitions

An agreed [transition protocol](#) is in place between Education, Health and Social Care to support young people with SEND from age 13 to 25.

We know that transition to adulthood needs to be improved for many young people. SSIF parents told us that their experience of transition from children's services to adult services is disjointed, and we need to understand more about the experiences of young people and families, co-producing improved pathways and support. In 2019, Southend was one of 22 successful grants following a joint local authority/CCG bid to the National Development Team for inclusion. A multi-agency Transition Operational Group was reinstated in December 2020 and now meets monthly to plan and implement changes.

12. Effectiveness of local arrangements

Understanding the effectiveness of local arrangements to improve the outcomes for children and young people has been disjointed historically. A new Quality and Outcomes Framework is now being implemented across the local area, which will provide a range of qualitative and quantitative evidence on which the partnership can accurately monitor and identify positive outcomes and areas for improvement.

In terms of our workforce, SSIF parents told us that what they value in professionals who work with them is empathy, understanding and listening. There is strong workforce development within the borough, especially for schools such as the leadership programme and SEND handbook, but we know there is more to do across the partnership.

13. Improving outcomes for children and young people with SEND

We have provided some evidence through the self-evaluation of our effectiveness in achieving good outcomes for children and young people, but we know we have more to do to report impact.

We believe that we are in a stronger position than we were in 2018 at the time of our last inspection. Some achievements, such as restructuring of the SEND service and implementing a new system have taken longer than anticipated. The impact of Covid, inability to recruit to a temporary commissioner post, and period without a

parent carer forum were keenly felt. Despite this, we know that our pace in improving our effectiveness has not been quick enough, and that we have more to do.

In terms of our 2016-19 SEND strategy, all areas have achieved some level of progress:

Priority 1: Timely Intervention	Partly Achieved
Priority 2: Partnership working	Partly Achieved
Priority 3: Quality and effective SEND provision	Partly Achieved
Priority 4: Raise attainment and expectations	Partly Achieved
Priority 5: Ensure value for money	Partly Achieved

The renewed SEND partnership and governance structures, together with the new strategy, will put us in a strong position to drive continuous improvement.