Annex A: Accelerated Progress Plan for an Area following the judgement by Ofsted/CQC that sufficient progress had not been made against the weaknesses outlined by the Inspection

Name of the Local Area	Southend-on-Sea
Date of Inspection	1 – 5 October 2018
Date of Publication of the Revisit	14 June 2021
report	
Accountable Officers from the LA	Michael Marks Executive Director (Children and Public Health)
and CCG	Tricia D'Orsi, Alliance Director, Southend Clinical Commissioning Group
	Gary Bloom, Head of SEND, Local Area Nominated Officer
DfE and NHSE Advisers	Brian Gale (DfE Adviser)
	Anneliese Hillyer-Thake (NHS England Adviser)

Governance and Accountability

Please describe here the governance and accountability structures and processes that will be supporting your next phase of improvement. Please make clear which are information/reporting lines and where the challenge accountability sits within both the Local Authority and the CCG

Governance and accountability structures and processes

The Southend SEND Strategic Partnership Board (SSSPB) provides strategic leadership to the local area provision of SEND.

The main legislative partners included are:

- Southend on Sea Borough Council, including Education and Early Years, Public Health and Social Care (SBC)
- NHS Southend Clinical Commissioning Group (CCG)
- The contracted parent/carer forum (Southend SEND Independent Forum (SSIF))

In accordance with the legislative requirements of the SEND Code of Practice 2014, the SSSPB Board reports directly into Southend's Health and Wellbeing Board (HWBB). SEND is an agenda item at HWBB meetings a minimum of twice a year and any communication in the interim is made via CCG and SBC management structures.

The SEND Strategic Partnership Board also provides quarterly updates of progress to the CCG Governing Body and Southend Borough Council governance structures.

Two sub-groups report into the SSSPB.

• Southend SEND Operational Group: responsible for supporting and delivering the infrastructure that helps partners work together to effectively plan, monitor, develop and maintain effective SEND provision in the local area.

 Joint Commissioning Group: the joint commissioning body for the local area's SEND 0-25 population, responsible for identification, development and implementation of commissioned services (internally or externally). The Group will maintain and progress a joint commissioning plan and providing information and options analyses to the SSSPB for decision as appropriate.

Governance and accountability for the delivery of the APP will be in line with the structure as outlined above. The sub-groups will be responsible for the delivery of all actions within the APP, both groups will provide progress/highlight reports to the SEND Strategic Partnership Board (SSPB), all groups meet half termly. The SSPB will monitor and take appropriate action where required to ensure the necessary delivery of the APP. The SSPB will escalate issues to HWBB or other suitable decision-making body as appropriate, however SSPB will hold ultimate accountability. Additional scrutiny and oversight will be implemented through the Southend Health & Wellbeing Board and the Southend CCG Governing Body. It has also been agreed with elected members that a verbal update on progress related to SEND will be given at each People Scrutiny Committee, a public meeting.

The focus of this plan is each area of weakness from the original inspection where, in the revisit, Ofsted/CQC have judged that sufficient progress has not been made. For each weakness, you should identify:

- the actions you are taking to achieve improvement
- how you will measure success/impact of the actions
- the milestones you will need in order to achieve your targeted improvement.

Area of weakness identified in the original inspection

The emerging leadership of the Southend CCG, Public Health, the Local Authority and education providers has not developed quickly enough to ensure precisely coordinated priorities, accountabilities and joint commissioning to improve the outcomes for children and young people.

The re-visit letter noted a 'palpable change' in the culture of the area's partnerships and greater commitment to joint working to improve outcomes for children and young people with SEND. However, whilst many improvements were recognised within this area of weakness, some actions/initiatives were only recently established and not fully embedded, consequently many children and young people with SEND and their families are not feeling the benefits of the improvements.

Actions designed to lead to improvement			
Action	Responsible officers	By When	Action RAG Blue; Completed Green; On track to be completed by due date Amber; Potential slippage (2 weeks after due date) Red; Overdue
Exec and senior level attendance consistently at SSPB, SEND Ops, Joint Commissioning	MM/TD'O	In place, ongoing monitoring	
Southend SEND Partnership core team capacity review	GB/CM	November 2021	
Parent Carer Forum (SSIF) development and support programme agreed	GB/CM	November 2021	
Publication of the Southend SEND Partnership Strategy 2021-2024 and underlying action plan – delayed from original intention due to Member Commissioned Peer Review scheduled for late November 21	SSPB	TBC but estimated Jan 22, final sign off dependent on the completion of the Member requested Peer Review. Strategic priorities will be worked on from September	
Quality and Outcomes Framework embedded	GB/CM	October 21	
SEND Partnership Quality Assurance process for EHCPs embedded	GB/CM	October 21	
Co-production Charter published on Local Offer	GB	October 21	
Neurodevelopment Pathway (Neu Pathway) embedded and accompanying parental information pack produced	CM/SSIF	December 21	
Clearance of the ASD Diagnostic Pathway backlog (as at 31.3.21)	СМ	October 21	
Recommendations for outline delivery model for SLT, OT and Physio defined (Balance System in partnership with Essex SEND Partnership)	СМ	December 21	

Commission	ning Roadmap	to be up	dated and published			СМ	October 21		
			portunities for future strategic	olanning	3	СМ	December 21		
outlined									
Impact meas	sures and mile	stones t	o be achieved						
KPI	By 3	RAG	By 6 months	RAG	By 1	2 months			RAG
reference	months								
Quality	Panel TOR,		3 key recommendations for		Impr	ovement on b	paseline measurement	t	
Assurance	reporting &		improvement & baseline						
	learning log		identified to measure						
Co-	in place		improvement		Eato	bliched from	work for Co productio	n of	
Co- Production	Sign up of all		Evidence of positive participation in co-				ework for Co-productio en and young people		
Charter	Partnership		production activities by		20141		en and young people		
Charter	members to		Children & Young People						
	the charter		(CYP)						
			Families, parents, carers						
			Professionals involved in a						
			child or young person's						
			journey						
			Third and voluntary sector						
			groups						
			- · · · ·						
Neu	Actively		Gaps in support and				ber of CYP progressin	ig to the	
Pathway	diverting		resources for CYP and		ASD	diagnostic p	athway.		
	referrals from		families pre and post diagnosis identified		Dadu	uction in white	ing time for the ASD		
	Community					nostic pathwa	•		
	Paediatrics				ulayi		ay.		
					Posi	tive feedback	from families that the	v are	
							iate levels of support	,	
Clearance	Backlog		n/a	1	n/a	<u> </u>			
of ASD	fully cleared								
diagnostic									
back log									
SLT/OT,	Public		Clear outline pathway and		CYP	and families	will have access to SL	_T, OT	
etc	consultation		model recommended for				earliest point as indica	ated by	
	completed		universal, specialist and		asse	ssed need.			

targeted support.		
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If you have a council wide risk register format you can insert that here, otherwise please use this one. At this stage it is critical both for yourself, DfE, NHS England and DHSC that you identify early any risks and can demonstrate appropriate and decisive action. The progress of your Plan will be evaluated with you initially at 6 months to determine any further action which may be required.

Risk Register

Date	Risk	Severity/Impact	Mitigation	Progress following action
July 21	Potential disruption to the Community Pediatrics Provision during the transfer to alternative provider	Moderate	Detailed triage and prioritisation of current caseload has been completed. Risk assessment completed. Communication plan in place with communication cascaded to families, staff and wider stakeholders. Transfer to alternative provider planned for Jan 22	
July 21	SBC Member requested Peer Review will divert capacity from the delivery of improvement plans and the APP (SBC facing only, not health)	High	Review and adjust anticipated completion dates within the APP and wider improvement programme. Expectation to achieve completion of all actions within the 6-month review window	
July 21	SBC Members requested Peer Review highlights additional strategic actions not previously identified	Moderate	The consultation on the SEND strategy will be delayed, the strategy will not be finalised until the conclusion of the Peer Review	
July 21	Parent Carer Forum capacity to	Moderate	New organisation who are constantly evolving,	

	engage fully in all aspects		development support programme will be designed to facilitate continued growth and engagement.	
July 21	Limited SEND Partnership resources to deliver BAU and drive continuous improvement	Moderate	Completion of core team capacity review supported by a clear understanding of the shared spend across the partnership	

Scorecard

This is the summary of all the ways you are going to measure the overall effectiveness of your plan. For example, if measuring the impact of the improvement of the quality of EHCPs, you may look at the improvement in attendance, exclusions and outcome measures for CYP with EHC plans.

It is felt that a scorecard approach is challenging given the remaining weakness relates to the embedding of joint commissioning activities. The SEND Strategy Action plan when published will include relevant KPIs which will be incorporated into the quality and outcomes framework.

KPI Reference	KPI	Baseline	3 months	6 months	12 months	
Quality & performance	Upward trend in overall quality assurance of EHCPs undertaken. Baseline of plans where Quality Assurance Tool records Yes or N/A	81%	84%	87%	91%	
Quality & performance	Upward trend in Section C/G Health quality assurance of EHCPs undertaken. Baseline of plans where Quality Assurance Tool records Yes or N/A	79%	83%	87%	90%	
Quality & performance	Upward trend in Section D/F Social Care quality	83%	86%	89%	92%	

	assurance of EHCPs undertaken. Baseline of plans where Quality Assurance Tool records Yes or N/A						
Quality & performance	Improvement in timeliness of provision of advice from all partners. Report not currently produced by EHC Hub	Report to be written and baseline determined	% increase improvement for Education, Health and Care.				
Satisfaction & feedback	Increased young people, parent/carer, professional engagement in POET or satisfaction scores from new survey being finalised to replace POET	6 CYP 80 Practitioners 168 Parents took part in 19/20 Survey	Minimum 50% increase in participants in all categories in 20/21	fin ev im en sa	ew survey when nalised vidences nproved ngagement and atisfaction from arents and CYP		
Neurodevelopment pathway	Young person/parent/carer satisfaction with the Neu pathway						
Autism Assessment Waiting List – CYP on waiting list as at 31 March 21 will be cleared within 6 months	All pupils who were awaiting an autism assessment as at 31/3/21 will have received the assessment.				acklog will be eared		
Balanced System Approach to Therapy Provision							

Annex B: Supporting statement for the Accelerated Progress Plan

Please include here any significant reasons why you feel you did not make sufficient progress and how you are addressing these

Factors accounting for insufficient progress	How we are addressing these
In direct response to the outcome of the original inspection and the written statement of action (WSOA), additional resource and capacity was agreed across both the Borough Council (SBC) and the CCG. However, scoping, planning and the restructuring of the SEND service took longer than hoped to complete. We were unable to recruit the right personnel to some key roles and took the decision to re-advertise, attracting the right caliber of staff with the right values, behaviours and experience was paramount to success. As a direct consequence some actions within the WSOA were late in starting and have not had the opportunity to embed fully or enable improved outcomes to be evidenced.	Key roles have been filled and working practices strengthened significantly. The SEND Partnership core team is about to embark on a review to ensure we have sufficient and sustainable resource/capacity to support the requirements of the SEND agenda whilst maintaining and accelerating the significant improvements/progress already achieved.
Both SBC and the CCG have been through major re-structures in recent years, the CCGs has seen a number of changes in Executive level roles during this time and SBC have appointed to a completely new Executive structure and roles. These changes have 'distracted' both organisations which in turn has delayed progress and pace.	Since appointment into their respective executive roles the Executive Director for Children and Public Health in SBC and the NHS Alliance Director in the CCG have brought a renewed focus, dedicated leadership, drive and energy to the SEND agenda in Southend.
The arrangements for the Southend parent carer forum have been extremely challenging and have impacted negatively on achievement of the improvement plans. The renewal of the parent carer forum was turbulent, the final decision was strongly contested, this has led to continued and ongoing clashes which divert energy, focus and attention away from the core objective of the forum. Despite the troubled start the new forum, SSIF, are already an integral part of the SEND Partnership and this was clearly apparent to inspectors. However, their reach into the SEND Parent community is not sufficiently embedded to evidence that improvements were felt by many parents.	We continue to work closely with SSIF, they are fully engaged and provide welcome challenge to the wider partnership. SSIF are determined to champion improvements in lived experience, the journey for the child and family and ultimately outcomes. We are keen to support SSIF to grow and evolve to become trusted and respected representatives for all children, young people and families with SEND in Southend.

The SEND partnership has felt the impact of the covid pandemic in
various ways, focus has been diverted to ensuring provision,
settings and services were supported to continue to deliver vital support and services. Staff have at times been redeployed to
alternative roles and covid priorities all of which has detracted from
continued focus and delivery of the SEND WSOA and wider
improvement plan.

Please say here how you will ensure that partners, including families, are fully aware and kept informed of you actions and progress

Agendas and approved Minutes of SSPB meetings will be published on partner websites and the Local Offer.

SSIF are integral members of all meetings and workstreams. We will support them to grow their membership and give and receive feedback from their members. Additionally, SSIF have regular meetings with key leads from the SEND Partnership to discuss and resolve issues.

Please say here what support and challenge you feel would be most helpful over the coming months and when

- 1. DFE/NHSE support during the Member requested Peer Review process, timetable tbc
- 2. Additional and meaningful support from Contact for Disabled Children and the Association of Parent Carer forums to guide SSIF through ongoing challenges they are facing
- 3. Share learning from other areas with similar challenges
- 4. Informal check-in meeting in November to review progress