

## Written Statement of Action Position Statement June 2023

In April 2022, the Local Area established the SEND Transformation Board to oversee delivery of its Written Statement of Action (WSOA) for Special Educational Needs and Disabilities (SEND). Six workstreams were tasked to deliver improvement activity which would fulfil the requirements of the WSoA and lead to better outcomes and experiences for children and young people with SEND and their families.

This position statement seeks to assess progress that has been made in relation to the findings of the Local Area SEND Inspection (September 2021). It has been produced following a series of workshops (completed 6<sup>th</sup>, 7<sup>th</sup>, and 8<sup>th</sup> June 2023) involving all relevant stakeholders and with reference to the WSoA and Priority Plan 2023.

The workshops provided participants with the headline and detailed findings of the Local Area SEND Inspection, the objectives described in the WSoA, and provided opportunity to discuss the following:

- Where are we now?
- What have we done to get to where we are now?
- What do we know about the impact those actions are having?
- What have we planned/in progress to achieve the WSoA outcomes?
- How do we plan to evidence that change?

The workshops also provided an opportunity for stakeholders to raise any challenges and agree steps for resolution with colleagues.

Within the document there is an account, from the perspective of Local Area participants in each workstream, of our “Current Position”.

We will re-assess our position in December 2023.

## WORKSTREAM 1: Data Analysis and Joint Commissioning

<b>HEADLINE FINDINGS:</b> <ul style="list-style-type: none"><li>• Lack of accurate, up-to-date and useful information which informs the area's plans and evaluates the impact of their actions.</li><li>• Lack of joint commissioning of services in the area.</li></ul>
<b>DETAILED FINDINGS:</b> <ul style="list-style-type: none"><li>• There are shortcomings in the collection, understanding and analysis of data. There is no shared information system which captures important information centrally. This makes it difficult to measure the impact of the area's provision on the progress of children and young people.</li><li>• The area does not use performance data effectively to monitor waiting times in some health services. Information about the waiting lists for CAMHS and the neurodevelopmental assessment pathway is not routinely collated to check how long children and young people wait. This has prevented timely remedial action being taken when required.</li><li>• The area is not adept at using information to anticipate where pressures and demands for services may arise. The absence of an accurate, up-to-date needs analysis is a significant obstacle to this. This means that leaders cannot be sure that there will be sufficient capacity in the system in future.</li><li>• There is no effective joint commissioning of services in the area. Leaders do not have an accurate, up-to-date, sufficiently detailed understanding of the most pressing shared priorities. This hampers meaningful discussion around what services could and should be jointly commissioned. There are some examples of partners working together on small-scale projects. For example, the development of specialist provision to prevent young people with mental health needs requiring hospital admissions.</li><li>• Capacity issues across the area have resulted in lengthy waiting lists. This means that children and young people are waiting too long to have their needs identified and for support to be put in place. During these long waits, some children and young people's needs escalate. As a result, these children and young people and their families can require more support than if their initial needs had been met in a timely manner.</li></ul>
<b>CURRENT POSITION:</b> <ul style="list-style-type: none"><li>• Generally, the area moved from having too little information to too much and is now rationalising to ensure it has the right data to manage performance and inform planning. The initial SEND Dashboard is being revised to produce service specific scorecards for use in line with the area's Performance and Accountability Framework, with an overarching dashboard for improved strategic oversight.</li><li>• In a small number of services, access to accurate and up-to-date information has been slow and required workshops, deep dives, cleansing, and system alterations to provide data, some of which requires validation.</li><li>• There is evidence that the SEND Dashboard and associated exceptions reporting has led to improved performance in areas such as EHCPs, portage, and SaLT. Whilst this is positive, some of those improvements have been temporary. The introduction of service scorecards will seek to enable long-term performance management to become embedded and deliver improvements for children and young people.</li><li>• The Joint Commissioning Forum has worked to understand each agency's commissioning arrangements, priorities, and processes. Information exchanges have enabled improvement in systems and pathways, such as Speech and Language Therapy (SaLT), Occupational Therapy (OT) and the Neurodevelopmental (ND). Joint Commissioning at a strategic level will be built upon this foundation with a strategic board set to be developed in summer 2023.</li><li>• The first iteration of the Joint Strategic Needs Assessment (JSNA) has informed joint commissioning priorities, including Speech and Language Therapy (SaLT), the Mental Health and Wellbeing Project, and at a local level, a SEND pilot within the Cradle to Career project.</li><li>• There continues to be a mixed experience for children and young people on waiting lists, with some waits reducing but some still uncertain. More investment in support for those on waiting lists has been provided, such as Care Navigators.</li></ul>
<b>AIMS:</b> <ul style="list-style-type: none"><li>• There is access to timely, up-to-date data to inform the area's plans, driving decision making and supporting the evaluation of actions taken</li><li>• Effective joint commissioning is in place based on a sound understanding of current and longer term needs of the local area.</li></ul>

1. What we have delivered from the WSoA	2. What we have delivered additional to WSoA
<ul style="list-style-type: none"> <li>· Produced and using a SEND Performance Dashboard</li> <li>· Produced and using the SEND Performance Management Accountability Framework</li> <li>· Progress reports have been provided to the Children, Young People and Education Committee, the Health and Wellbeing Board, Partnership for Children, Young People and Families, and Place Based Partnership Board</li> <li>· Published the first iteration of the SEND Joint Strategic Needs Assessment (JSNA)</li> <li>· Appointment of a Joint Strategic Commissioner for Children and Young People</li> <li>· Established the Joint Commissioning Forum</li> <li>· Completed a rapid-fire audit of systems with a findings report presented to the SEND Transformation Board</li> <li>· Drafted the Joint Commissioning Strategy, including draft priorities and governance arrangements</li> </ul>	<ul style="list-style-type: none"> <li>· Adopted the Council for Disabled Children (CDC) Checklist for commissioning</li> <li>· Self-assessed against the CDC Checklist for commissioning</li> <li>· Undertaken pilots to explore different approaches for the provision of SaLT</li> <li>· Produced a Mental Health and Wellbeing Joint Strategic Needs Assessment (JSNA)</li> <li>· Embedding SLC pathway in early years and increased investment in WELCOMM</li> <li>· Developed information, advice, and resources on SLC and ND Pathway for the Family Toolbox</li> <li>· ICB appointed a Head of SEND to work across the Cheshire and Merseyside area</li> <li>· Joined Cheshire and Merseyside Change and Integration Programme for SEND</li> <li>· Undertaken a pilot in 12 schools using a pre-diagnostic checklist (ND)</li> <li>· Delivery of Transforming Care work including a regional Autism workstream, short breaks workstream, and development of crisis support facilities.</li> </ul>
3. What difference this has made	4. What our challenges have been
<ul style="list-style-type: none"> <li>· Exception reports raised through the SEND Performance Dashboard have enabled improved performance for specific services</li> <li>· SEND JSNA identified SEMH and SLC as areas of need, leading to those becoming joint commissioning priorities, and on to development of new delivery models</li> <li>· SEND JSNA informed the content of the special school Service Level Agreements</li> <li>· SEND JSNA led to a workshop with the Cradle to Career project and additional funding provided through the Steve Morgan Foundation to provide SEND Support</li> <li>· Some service areas now more confident and proficient in describing and understanding their data and performance- improving ownership of data</li> <li>· Increased levels of provision for children and young people</li> </ul>	<ul style="list-style-type: none"> <li>· Need to review the existing SEND Strategy to clarify our vision, values, intentions and ambitions. SEND Strategy needs to set tone for Joint Commissioning Strategy and detail the Outcomes Framework for children and young people with SEND</li> <li>· It has taken 12 months to understand and interpret the current data sets from the various systems of 3 different provider trusts and to develop a robust data set for future commissioning</li> <li>· Access to reliable, timely, CAMHs data</li> <li>· Understanding the SaLT data and performance</li> <li>· Working across the Local Area to test and learn from data reports to agree a meaningful dataset</li> </ul>
5. What we still need to do	6. Evidence
<ul style="list-style-type: none"> <li>· Confirm governance and reporting arrangements for the Joint Commissioning Forum, providing a reporting schedule</li> <li>· Establish DPIA for SEND across the local area</li> <li>· Share our local definition of joint commissioning (aligned with the SEND Code of Practice) so that it is understood and accepted across the Local Area</li> <li>· Work with NWDCS to define regional dataset, thereby setting benchmarks</li> <li>· Complete the Delivering Better Value in SEND research programme to understand need, demand, trends and future sufficiency requirements</li> <li>· Develop a commissioning framework for schools and settings</li> </ul>	<ul style="list-style-type: none"> <li>· Evidence of £2.5m worth of new joint commissioning at present</li> <li>· Exception reports for SaLT, Portage, EHCPs, Paediatrics, and school attendance</li> <li>· Data workshop evidence, surveys and meeting records for SaLT and ND Pathway</li> <li>· CDC Checklist Self-Assessment</li> <li>· Audit report on systems and report to SEND Transformation Board</li> <li>· SEND Performance Dashboard, Exception Reports and data risk tracker</li> <li>· Mental Health and Wellbeing Phase 1 report and Phase 2 programme overview</li> <li>· JSNAs for SEND and Mental Health and Wellbeing</li> <li>· Examples of children and young people receiving specialist packages of support that are jointly funded</li> </ul>

## WORKSTREAM 2: Education, Health, and Care Plans (EHCPs)

<b>HEADLINE FINDING:</b> Weaknesses in the quality and timeliness of EHC assessments and annual reviews.
<b>DETAILED FINDINGS:</b> <ul style="list-style-type: none"><li>• The poor quality and lack of timeliness for education, health and care (EHC) assessments and plans are unacceptable. Too many parents and schools are driven to seek private specialist advice in order to mitigate failings in this process. Moreover, families are left in the dark about the progress of these assessments as parents are not told how the process is progressing. Added to this, annual reviews are not processed in a timely manner.</li><li>• The quality of EHC plans in Wirral is not good enough. The lack of inclusion of parents' and children's and young people's contributions, poorly written plans and unsuitable objectives means that the plans do not reflect the child or young person and their needs. The processes for considering requests for EHC assessments and agreeing to issue plans lack rigour. There is no representation from health professionals on the decision-making panels. There is also no effective quality assurance to check that EHC plans are fit for purpose.</li><li>• The vast majority of EHC assessments are not completed within the 20-week timescale. The lack of capacity in key teams, such as educational psychology and the children's services SEND team, causes considerable delays. In addition, the area does not meet timescales around the annual review process.</li><li>• Objectives set in EHC plans are often generic and are not well matched to the individual children and young people. This means that objectives do not help to raise expectations for what these children and young people could achieve. Added to this, the area does not carry out the checks needed to reassure themselves that those children and young people in out-of-borough placements and resourced provision achieve well.</li></ul>
<b>CURRENT POSITION:</b> <ul style="list-style-type: none"><li>• The area has improved its understanding of EHCP performance, EHCP data, and its understanding of factors impacting on EHCP timeliness. This has led to a slow but steady improvement in 20-week compliance, moving from 22% at the point of inspection to an average of 37%. Whilst the improvement is lower than desired, key deliverables for the EHCP team have been met including completion of the 247 out-of-time cases at the point of inspection, achieving the WSoA target of 100% year 6 transitions, and exceeding the 90% WSoA target for year 11 transitions (100% achieved).</li><li>• The EHC Needs Assessment to Annual Review process has been fully reviewed. This, accompanied by service development, has promoted a relationship-based practice approach, more regular interaction with parent carers, and opportunity for multi-agency co-production meetings. Despite increasing the number of posts in the service, high levels of demand and staff absence has impacted on the ability to fully embed this approach consistently. The core EHCP team is being further increased to enable this.</li><li>• The multi-agency Decision Making Group has undergone several modifications since September 2022. Stakeholders demonstrate commitment and engage well in process, however decisions regarding placements and funding often require discussion/agreement outside of the meeting.</li><li>• The area has maintained its levels of permanent Educational Psychologists and increased capacity through trainees and commissioned advice and assessments. Although the area continues to rely heavily on external specialists, this is done within a structured approach which is co-ordinated.</li><li>• Quality assurance of EHCPs is in early stages but developing with activity becoming part of everyday practice, including quality assurance of advice, plans, provision, and compliance. Expertise from Wirral Safeguarding Children Partnership is supporting delivery of the quality assurance framework. The SEND Commissioning Team undertakes regular quality assurance of commissioned placements.</li><li>• More Annual Reviews Meetings are attended by Local Authority Officers, and more reviews are taking place, however this will be improved by extending capacity within the Local Authority Team, clarifying the role of stakeholders, and providing further training across the partnership on the Annual Review process and expectations.</li></ul>
<b>AIMS:</b> <ul style="list-style-type: none"><li>• All EHCPs are produced in partnership with parents, carers and young people wherever possible, with completion within 20 weeks consistently above the national average of 58% (based on 2021 figures)</li><li>• Quality assurance systems are implemented to ensure compliance, quality and timeliness of all EHCPs and take account of regular feedback which informs the improvement cycle</li><li>• Annual reviews are completed within statutory timescales with month-on-month completion rates above the national average</li></ul>

1. What we have delivered from the WSoA	2. What we have delivered additional to WSoA
<ul style="list-style-type: none"> <li>· Presented a report to the SEND Transformation Board on factors impacting EHCPs</li> <li>· Reviewed the EHC Needs Assessment to Annual Review process, publishing a practitioner handbook and a stakeholder handbook, with flowchart</li> <li>· Produced a SEND Quality Assurance Framework, with Invision 360 QA reports, Compliance Checklist, Commissioned Provision QA Check, Advice QA tool with a multi-agency SEND QA Group established</li> <li>· Monthly data performance reports for EHCP 20-week compliance</li> <li>· Achieved 100% year 6 transitions target and exceeded 90% year 11 target</li> <li>· Increased Educational Psychology capacity</li> <li>· Published the SEND Service Workforce Development Programme and delivered related training packages</li> <li>· Established the multi-agency Decision Making Group, with regular meetings since October 2022</li> </ul>	<ul style="list-style-type: none"> <li>· Introduced a dedicated Annual Review Team</li> <li>· Reviewed the process for accessing health advice</li> <li>· Provided all staff with mobile phones for ease of communication</li> <li>· Reviewed the Personal Budget policy</li> <li>· Arrangements in place with education settings that allow them to commission EP advice/assessments</li> <li>· Conducted a pilot of Joint Outcomes Meetings (JOMs)</li> <li>· Delivered a series of SEND Service Development Days</li> <li>· Established and held a regular Extended SEND Management Team meeting, bringing managers from across Children's Services together to support improvement</li> <li>· Engaged a range of colleagues from across services to support the improvement journey, e.g. Wirral Safeguarding Children Board to support multi-agency working, Family Matters to support QA, and 14-19 Team on Preparation for Adulthood</li> </ul>
3. What difference this has made	4. What our challenges have been
<ul style="list-style-type: none"> <li>· Improvement in the timeliness and quality of health advice, with all advice being quality assured by the DCO</li> <li>· Improved rates of EHCP compliance</li> <li>· Young people can make their own EHC Needs Assessment Request</li> <li>· There are more opportunities for meetings and conversations with parent carers and young people</li> <li>· Training on Co-production and Working with Parents has provided the SEND Service with opportunities to reflect on relationships with stakeholders</li> <li>· Staff have worked with the external training provider to develop Working with Professionals training which will be delivered to parent carers, to enable better working relationships</li> </ul>	<ul style="list-style-type: none"> <li>· Capacity with the EHCP Team and staff absence, this has been particularly detrimental to communication and led to an increase in complaints, both formal and informal</li> <li>· 40% increase in EHC Needs Assessment requests from 2021 to 2022</li> <li>· Lack of Educational Psychology, SaLT, Occupational Therapy and Paediatric capacity to provide advice</li> <li>· Lack of local provision for post-16 young people</li> <li>· Improved case management system implementation being delayed</li> <li>· Meeting the expectations of parental preference</li> <li>· Managing staff morale, balancing workload, pace of improvement, opportunities for learning and development, keeping the service well-informed on the improvement journey</li> </ul>
5. What we still need to do	6. Evidence
<ul style="list-style-type: none"> <li>· Achieve the 58% WSoA target for compliance by December 2023</li> <li>· Monitor the progress of the 247 children and young people whose EHCPs were in the historic backlog to ensure their progress is supported</li> <li>· Improve casework for families awaiting tribunal, enabling case resolution without legal intervention</li> <li>· Continue to deliver the Workforce Development Programme, prioritising SEND Law, Code of Practice and Regulations</li> <li>· Make arrangements for parent carers to get timely updates on EHCP process, thereby improving communication</li> <li>· Re-establish Workstream 2 meetings, prioritising Annual Reviews</li> <li>· Embed quality assurance processes and implement learning from activity</li> </ul>	<ul style="list-style-type: none"> <li>· EHCP Compliance increased from 22% to 37%</li> <li>· Longest plan now at 69 weeks, previously 124 weeks</li> <li>· Increased output 317 EHCPs finalised in 2021, 720 in 2022</li> <li>· Higher monthly compliance rates- March 82% and May 97%</li> <li>· Reduced the historic backlog from 247 to 7</li> <li>· Quality Assurance completed in May 2023 shows: <ul style="list-style-type: none"> <li>○ 80% of children and parent carers have their views captured in Section A</li> <li>○ 40% of EHCP Section Es have a direct correlation with Sections A, B, C and D</li> <li>○ 64% of parents are happy with their EHCP experience</li> <li>○ 70% of EHCP Section Bs are rated as Good</li> <li>○ 78% of parents are satisfied with the quality and content of the EHCP</li> </ul> </li> <li>· The % of tribunals for refusal to assess has fallen from 35% at the point of inspection to 3%</li> <li>· The number of tribunals being resolved via consent order has increased</li> </ul>

### WORKSTREAM 3: Co-production, communication, and relationships

<b>HEADLINE FINDINGS:</b> <ul style="list-style-type: none"><li>• The lack of meaningful co-production with parents and carers</li><li>• Poor communication with parents and carers across the area</li><li>• The fractured relationship between the area and the Parent Carer Partnership Wirral and the impact of this on the area's progress in implementing the reforms</li></ul>
<b>DETAILED FINDINGS:</b> <ul style="list-style-type: none"><li>• The relationship between area leaders and Parent Carer Forum Wirral is fractured. This has delayed the implementation of planned improvements and has reduced opportunities for co-production (a way of working where children, families and those that provide the services work together to create a decision or a service that works for them). The members of the new leadership team are keen to repair this relationship.</li><li>• Across the area, parents are frustrated by frequent difficulties in contacting professionals. All too often, parents' emails and telephone calls go unanswered. This means that parents and carers often resort to formal procedures to get a response.</li><li>• There is no strategic approach to co-production across the area. While some teams have co-produced aspects of their work, this is not consistent. Many parents and young people do not feel that they are fully involved in making important decisions that affect their lives.</li><li>• The level of parental dissatisfaction means that there are a high number of complaints, mediations and tribunals. Recently, the area has made arrangements to resolve parental concerns before they escalate. This approach has had some success, but it is too early to see any sustained impact. Crucially, these arrangements do not resolve the root causes of parental dissatisfaction.</li></ul>
<b>CURRENT POSITION:</b> <ul style="list-style-type: none"><li>• The area has invested in co-production, working with The Rise Consortium and Council for Disabled Children to revise its Co-production Charter, develop and roll out co-production training, and has held a co-production event for parent carers and stakeholders. Initial prioritisation for training has been given to those practitioners working within SEND services but there are plans to roll this out to the wider workforce, which will be supported by a mandatory e-learning module for all Council employees.</li><li>• Communication with parents and carers across the area remains inconsistent with some benefiting from improved communication, but for too many it remains poor. Whilst it is evident that the area is communicating more often with parent carers in person and providing regular communication sessions, responses to those who seek updates on assessments, plans and provision, needs to improve. Parents resorting to formal escalations to get a response continues to be a common occurrence.</li><li>• Relationships between the area and the parent carer forum are steadily improving with significant evidence of engagement from all parties. Initially relationships were developed between key individuals, which enabled increased trust, and this is now extending to a wider range of stakeholders. More recently the parent carer forum has committed to leading on a preparation for adulthood event on behalf of the area, which demonstrates positive progress.</li></ul>
<b>AIMS:</b> <ul style="list-style-type: none"><li>• Co-production is understood and valued by all stakeholders, with a clearly defined vision of good, collaborative co-production</li><li>• Improved and positive relationships exist between Wirral Council and Parent Carer Participation Wirral, helping accelerate the pace of improvement and reform</li><li>• Communication with parents, carers and young people with SEND are positive and a valued part of all SEND process and systems</li></ul>

1. What we have delivered from the WSoA	2. What we have delivered additional to WSoA
<ul style="list-style-type: none"> <li>· Refreshed the Co-production Charter with an agreed definition and held a Co-production event for parent carers to launch the new strategy</li> <li>· 100% of SEND Service, including new employees have completed co-production training</li> <li>· PCPW are represented on the SEND Transformation Board and the workstreams they have identified as a priority. Parent carer representation is on all workstreams</li> <li>· A report identifying the strengths and weaknesses of communication was presented to the SEND Transformation Board, with recommendations acted upon.</li> <li>· Produced a Children's Services Communications Policy</li> <li>· Regular Open Sessions provide parent carers with opportunities to meet and speak to representatives from the Local Area</li> <li>· The termly SEND Snapshot provides a direct communication to all stakeholders on SEND support, activity, news, and changes</li> <li>· Specific requests for face-to-face meetings during the EHC Needs Assessment process are being provided by EHC Co-ordinators, and where necessary, SEND Managers</li> </ul>	<ul style="list-style-type: none"> <li>· The Deputy Director attends the weekly PCPW Steering Group meetings</li> <li>· A record has been kept of PCPW engagement in activity beyond the WSoA which includes, Attendance Meetings, Preparation for Adulthood, Post-16 Education, etc</li> <li>· The contract with SENDIASS has been extended to provide additional capacity</li> <li>· PCPW attend all Open Sessions in partnership with the Local Area promoting a shared approach to the SEND Transformation programme</li> <li>· Engaged with Wirral Safeguarding Children Partnership who have published a policy to support multi-agency working for EHCPs</li> <li>· Engaged with the Regional Working Group for SEND and Family Hubs, with the SEND Manager joining the local Family Hubs Steering Group</li> <li>· Translated the WSoA into a Priority Plan, following engagement with stakeholders. Monthly meetings to progress the plan, with updates published on the Local Offer to keep parent carers and stakeholders informed</li> <li>· Published the SEND Roadmap to provide an image of the transformation journey and progress made</li> </ul>
3. What difference this has made	4. What our challenges have been
<ul style="list-style-type: none"> <li>· The increased capacity in SENDIASS has provided more families with access to impartial advice and support. In addition to this, there has been a regular monthly meeting between the Local Authority SEND Service and SENDIASS Manager</li> <li>· More staff familiar with the principles and expectations of co-production and the term becoming common in everyday practice and meetings</li> <li>· Wirral SEND Service was identified as an area of good practice in developing its Co-production Charter and workforce training and presented to 2 national forums, giving members of the SEND Service increased confidence to deliver and embed</li> </ul>	<ul style="list-style-type: none"> <li>· A SEND Resolution and Relationships post was established however the post-holder experienced a long-term absence from work</li> <li>· Communication across the Local Area remains challenging. Long-term plans for the SEND Service are to introduce an electronic system, such as EHC Hub, which will allow parent carers to log in and track the progress of their assessment/plan, however in the short-term responding to the volume of correspondence is challenging</li> <li>· Whilst the Local Offer is in development there continues to be a lack of clear, consistent information and advice for SEND which impacts on the volume of communication to individual staff members and increases parental frustration</li> </ul>
5. What we still need to do	6. Evidence
<ul style="list-style-type: none"> <li>· Complete the analysis of learning from Tribunals and act on recommendations</li> <li>· Introduce TACO Time for the SEND Service (Tuesday/Thursday Afternoon Communication Opportunity) providing dedicated calendar time for SEND Team communications</li> <li>· Work with PCPW and Wirral Safeguarding Children Partnership to develop a multi-agency approach to communication</li> <li>· Further roll out of training on Co-production, Working with Parents, and development of the Working with Professionals training</li> <li>· PCPW will be working with the EP Team and wider partnership to develop plans for an Emotion Based School Avoidance project (EBSA)</li> <li>· PCPW will lead on a Preparation for Adulthood event for the Local Area, with project support and a budget provided by the Local Area</li> </ul>	<ul style="list-style-type: none"> <li>· Co-production survey of stakeholders demonstrates that training has improved their understanding of co-production approaches</li> <li>· 3 of the 4 requests for face-to-face multi-agency meetings were met in April 2023, with a further 8 meetings held between families and Managers to resolve complaints</li> <li>· Case study examples of achieving resolution and positive outcomes for children, young people and families where there has been long-term dissatisfaction</li> <li>· Feedback surveys in May 2023 show: <ul style="list-style-type: none"> <li>○ 70% of parents feel involved in decision making</li> <li>○ 70% of parents feel their EHC Co-ordinator has the relevant skills and experience</li> <li>○ 76% of parents feel listened to during the EHCNA process</li> <li>○ 72% of parents report feeling confident in their EHC Co-ordinator</li> </ul> </li> </ul>



#### WORKSTREAM 4: Inclusive Practice

<p>HEADLINE FINDING: The graduated response not being consistently applied across all schools and settings.</p>
<p>DETAILED FINDINGS:</p> <ul style="list-style-type: none"><li>• There are marked differences in the quality of provision for SEND across the area. This means that outcomes for children and young people with similar needs vary between schools and settings. Often, the pockets of best practice are found in those areas which face the greatest challenges. Sadly, too few children and young people benefit from this exemplary, inclusive practice.</li><li>• The area's agreed graduated response is not followed by all schools and settings. This means that too few children and young people who require support for their SEND benefit from consistent, high-quality provision which ensures that needs do not escalate.</li><li>• Children and young people's needs are not always accurately identified. This means that the provision chosen for some children and young people is not suitable. Consequently, these children and young people do not receive appropriate support. This can result in some placements breaking down or children and young people not making the progress of which they are capable</li><li>• The lack of a robust training and support programme for school leaders, SEND coordinators and staff is a barrier to the effective identification, assessment and meeting of needs across schools. This exacerbates the inequities and inconsistencies in inclusive practice across the area.</li><li>• There is a lack of support available for children and young people with sensory needs in the area. Some teams, schools and settings have identified this gap and have provided information and advice to parents around sensory issues, despite these teams not being commissioned to do so.</li></ul>
<p>CURRENT POSITION:</p> <ul style="list-style-type: none"><li>• The area's graduated approach has been revised with stakeholders and developed into an electronic resource with supporting toolkit. This has recently been presented to partners and have a 'soft launch' week commencing 19<sup>th</sup> June 2023. Over the summer period, feedback from the soft launch will inform any required amendments and information on health services and therapies will be integrated within the resource. The area is developing its long-term graduated approach implementation plan.</li><li>• How the Local Authority enables schools and settings to better identify and support children with SEND is improving. The Continuous Professional Development programme for education settings is broad and relevant, 'All About Inclusion' training is being delivered in partnership with DfE, to-date 50 schools have signed up for the Inclusion Quality Mark programme with some schools already achieving accreditation, and the Whole School SEND (DfE partnership) has launched.</li><li>• Drop ins provided by the Local Authority Inclusion Team provide evidence that needs are being met earlier and through lower tiers of intervention.</li><li>• Support for SENCOs is provided both formally and informally. The University of Chester is delivering a bespoke programme of training, whilst the SENCO Information Exchanges are keeping regular communication between SENCOs and the wider partnership. These forums have provided opportunity for meaningful engagement on themes such as the neurodevelopmental (ND) pathway and Speech and Language Therapy (SaLT) provision.</li><li>• The Local Area has sought opportunities to share best practice by a number of means including deep dives, Show and Tell sessions, and webinars for Breaking the Cycle. This has enabled a wide range of settings to share their approaches, strategies and learning. Formalising this in the next academic year will be a priority.</li><li>• Working with the University of Chester, the Local Area is establishing Service Level Agreements with its special schools to improve clarity of offer and accountability. Wirral's Special School Headteacher Association is working on a business case to develop the outreach model in order to support mainstream settings to meet needs of children and young people with SEND.</li></ul>
<p>AIM: The graduated response is consistently understood and implemented in all schools and settings. Children have access to relevant and early support and interventions.</p>



1. What we have delivered from the WSoA	2. What we have delivered additional to WSoA
<ul style="list-style-type: none"> <li>· A review of IPFAs is being piloted in a primary school with high levels of usage</li> <li>· The Graduated Approach has been co-produced with stakeholders and will have a ‘soft launch’ week commencing 19<sup>th</sup> June 2023</li> <li>· The Graduated Approach clearly defines the universal offer that education settings are expected to deliver</li> <li>· The Graduated Approach is enhanced by a toolkit of resources</li> <li>· The policy for multi-agency working, published by Wirral Safeguarding Children Partnership, provides a clear framework for professional collaboration</li> <li>· A training programme is in place, including the Continuous Professional Development Brochure, Whole School SEND, All About Inclusion, and IQM programme. University of Chester have provided bespoke training to SENCOs.</li> <li>· The Educational Psychology Team have delivered ELSA, EAT training and trained 40 secondary school Teaching Assistants</li> <li>· SaLT training, delivered by the NHS, has been provided to schools</li> <li>· SENCO Summits and Information Exchanges are helping to strengthen the SEND network</li> </ul>	<ul style="list-style-type: none"> <li>· Monthly meetings have taken place between PCPW and the Attendance Service to address areas of concern for children and young people with SEND not attending school</li> <li>· WEB Merseyside have delivered a pilot to support young people affected by trauma and anxiety in their transition from the Home and Continuing Education Service back into school</li> <li>· Master Key are delivering a Transitions Pilot to support 12 young people in their year 6-year 7 transition, this includes therapeutic interventions and support for parent carers</li> <li>· University of Chester have completed an audit of school websites, providing settings with a summary report and recommendations for improving information on SEND</li> <li>· University of Chester have worked with 25 settings to deliver their action plans for trauma-informed practice, and facilitated a learning event for over 200 practitioners</li> <li>· Breaking the Cycle Good Practice webinars have provided an opportunity to share best practice across organisations on providing a trauma informed setting</li> <li>· The Inclusion Team are providing Drop Ins which are having direct impact on reducing demand</li> <li>· A celebratory event brought together ELSA practitioners from primary and secondary schools</li> <li>· A Headteacher Reference Group for SEND has been established to improve communication and engagement with the WSoA and improvement journey</li> <li>· The bandings system for school improvement has provided a forum for formal support and challenge in relation to SEND</li> </ul>
3. What difference this has made	4. What our challenges have been
<ul style="list-style-type: none"> <li>· Improved relationships and engagement between the Local Authority Education and SEND Services with education colleagues</li> <li>· Increased capacity within schools, with knowledge, skills and confidence increasing</li> <li>· Review of the Graduated Approach has enabled specific attention to be given to early years and post-16 children and young people</li> <li>· More children are benefiting from earlier intervention and EHC Needs Assessments are appropriate and detailed meaning there are less EHC requests from education being declined</li> </ul>	<ul style="list-style-type: none"> <li>· Meaningful co-production of the Graduated Approach has taken longer than anticipated, missing WSoA deadlines</li> <li>· There have been some unforeseen delays in accessing training packages</li> </ul>
5. What we still need to do	6. Evidence
<ul style="list-style-type: none"> <li>· Commence phase 2 of the IPFA pilot</li> <li>· Establish the digital platform, via the Local Offer, to enable regular, quality information exchange</li> <li>· Undertake a survey of children, young people and parent carers on their educational experience</li> </ul>	<ul style="list-style-type: none"> <li>· Case studies for individual children and young people who have experienced inclusive practice</li> <li>· Case studies of settings which have improved their inclusive practice</li> <li>· Audit findings report and progress against action plans</li> <li>· Graduated Approach and toolkit</li> </ul>

## WORKSTREAM 5: Local Provision and Strategic Oversight

<b>HEADLINE FINDINGS:</b> <ul style="list-style-type: none"><li>• The high level of parental dissatisfaction with the area's provision</li><li>• The lack of effective strategic oversight to ensure effectiveness of plans and provision and hold leaders, managers and partners to account</li></ul>
<b>DETAILED FINDINGS:</b> <ul style="list-style-type: none"><li>• The area is still recovering from the impact of the pandemic. Key health professionals were redeployed to the COVID-19 frontline during the pandemic. This has resulted in increased waiting times for some services as they catch up.</li><li>• Since the COVID-19 pandemic began, the healthy child programme has not been delivered effectively in the area. Pregnant women do not receive a routine antenatal contact and too few children receive a 12-month developmental assessment. This means that early opportunities to identify needs are missed.</li><li>• Before the COVID-19 pandemic, around half of children attending an early years setting did not receive an integrated health and development review at age two to two-and-a-half years. Currently, only one in five children receive this review. Consequently, needs are not identified early enough in young children.</li><li>• Capacity issues across the area have resulted in lengthy waiting lists. This means that children and young people are waiting too long to have their needs identified and for support to be put in place. During these long waits, some children and young people's needs escalate. As a result, these children and young people and their families can require more support than if their initial needs had been met in a timely manner.</li><li>• Waiting times for speech and language therapy, the child and adolescent mental health service (CAMHS) and the neurodevelopmental pathway are too long. There is support available while children and young people wait for some services. However, professionals and parents are not well informed about this support and how to access it.</li></ul>
<b>CURRENT POSITION:</b> <ul style="list-style-type: none"><li>• Short-term sufficiency of education provision has been met through increased places in special schools and the establishment of resource provision. Quality assurance of resource provision is taking place and bases such as Ganney's Meadow and St. Mary's School can evidence positive outcomes for children and young people with SEND. Long-term sufficiency is being planned through the SEND Sufficiency Strategy Group and will be informed by the second iteration of the JSNA. The Local Area has mapped its existing provision, engaged with stakeholders to identify gaps, and is developing a strategy to meet expected future demand. It is anticipated that participation in the Delivering Better Value in SEND programme will further enhance the Local Area's Sufficiency Strategy.</li><li>• Efforts to ensure the Healthy Child Programme is delivering post-pandemic have been successful with additional clinics providing the opportunity to catch up on missed reviews</li><li>• The neurodevelopmental pathway has been reviewed, informed by learning from 3 co-production workshops with over 100 participants and survey responses from parent carers. Publication of the new pathway will include a detailed version for professionals and a easy-read version for parent carers and young people. The Local Area is seeking to increase pre-pathway support and to improve triage through a multi-disciplinary team. Both strategies will help to reduce waiting times.</li><li>• Data from CAMHS has been irregular and incomplete, which has impacted on the Local Area's ability to understand and respond to need. In spite of this, there has been a Mental Health and Wellbeing Joint Strategic Needs Assessment completed, which outlines as far as possible, the needs, trends, and issues to be addressed. The first phase of the Mental Health and Wellbeing Project has been completed and the second phase is underway, which will procure a triage team and range of services to support the mental health and wellbeing of children and young people pre-tier 4. In the meantime, the Family Toolbox, Early Help Alliance, My Happy Mind, Crisis Café, Mental Health Support Teams (primary schools), and Health Services in Schools (secondary schools) are providing early intervention and support to those on waiting lists/pathways.</li><li>• A new Speech and Language Therapy (SaLT) model has been developed, informed by the Joint Strategic Needs Assessment for SEND and co-produced with stakeholders. Data for SaLT is now clear and reliable, and allowing improvements to be made, this has been achieved following a series of deep dives to understand the data and reporting. Work is underway with education settings to consider their commissioning arrangements for SaLT.</li></ul>
<b>AIMS:</b> <ul style="list-style-type: none"><li>• Parent and carer satisfaction with the local area's provision is consistently good</li><li>• Insightful and effective strategic oversight drives high quality planning and provision that is consistent across the local area</li></ul>

1. What we have delivered from the WSoA	2. What we have delivered additional to WSoA
<ul style="list-style-type: none"> <li>· New Neurodevelopmental Pathway</li> <li>· Completed an audit of complaint cases at first tier tribunal, with findings reported to the SEND Transformation Board</li> <li>· Used the findings of the audit to inform work on pathways for Neurodevelopmental and SaLT services</li> <li>· Undertaken surveys for SaLT, OT, CAMHS, Paediatrics, and Continence services, with approximately 400 responses</li> <li>· Conducted 3 x stakeholder workshops for the ND pathway with 100+ attendees</li> <li>· Designed, in partnership with stakeholders a new SaLT model</li> <li>· Produced and delivering a Quality Assurance schedule to review commissioned provision</li> <li>· Commissioned 4 resource provisions, completing quality assurances reviews for 2, with 2 scheduled</li> </ul>	<ul style="list-style-type: none"> <li>· Produced a Mental Health and Wellbeing Joint Strategic Needs Assessment</li> <li>· Delivered Phase 1 of the Mental Health and Wellbeing Project, and commenced Phase 2</li> <li>· Delivered a range of interventions to support mental health and wellbeing, including Health Services in Schools, Crisis Café, My Happy Mind, Early Help Alliance</li> <li>· Established the WALK Team to support young people with learning difficulties and/or autism who have low school attendance</li> <li>· Delivered a recovery plan for the Healthy Child Programme to catch up on appointments missed during Covid-19 pandemic, including weekend and evening clinics in partnership with Children's Centres and Early Childhood Services</li> <li>· Revised the Health policy on provision of advice for EHCPs</li> <li>· Produced Service Level Agreements for Wirral Special Schools in partnership with University of Chester</li> <li>· Established a SEND Sufficiency Strategy Group, with representation from stakeholders and PCPW</li> </ul>
3. What difference this has made	4. What our challenges have been
<ul style="list-style-type: none"> <li>· More children have been educated in a mainstream environment with appropriate additional support</li> <li>· Several young children have been able to progress into mainstream primary education rather than special schools</li> <li>· Parental confidence in mainstream education has increased for this cohort</li> <li>· Good practice from resource provision has been shared with wider system</li> <li>· Parent carers and young people have contributed to the development of new service pathways and provision</li> <li>· Stakeholders are fully engaged with the new pathways, a partnership understanding of the complexity of the pathway, scale of demand and waiting times</li> <li>· Increased opportunities for parents/carers to access advice and support</li> </ul>	<ul style="list-style-type: none"> <li>· DCO post vacant for several months</li> <li>· Co-ordination across health services- commissioners and delivery partners</li> <li>· Meeting deadlines whilst undertaking meaningful co-production activity with stakeholders</li> <li>· Increasing demand for therapies</li> </ul>
5. What we still need to do	6. Evidence
<ul style="list-style-type: none"> <li>· Review the membership and meeting arrangements for Workstream 5, ensuring there is representation from providers, including WUHT, NHS Community Trust, Cheshire and Wirral Partnerships, in addition to representation from Public Health Themed audit framework</li> <li>· Communicate the SaLT Recovery Plan to families and deliver</li> <li>· Head of SEND for ICB to provide training to advice givers in health services</li> <li>· Conduct the Wirral SEND Survey</li> <li>· Embed the SEND Health Board</li> </ul>	<ul style="list-style-type: none"> <li>· New Neurodevelopmental Pathway (detailed and easy-read versions)</li> <li>· Presentation capturing engagement and development of new ND pathway</li> <li>· Audit report presented to SEND Transformation Board</li> <li>· Provision maps for 2022-23 and 2023-24</li> <li>· Evidence from resource provision quality assurance reviews demonstrate impact for children and young people</li> <li>· New SaLT model</li> </ul>

## WORKSTREAM 6: The Local Offer

HEADLINE FINDING: The published local offer not being well publicised and not providing parents and carers with the information that they need.
DETAILED FINDING: The online local offer fails to provide parents with up-to-date, useful information. Too many parents are unaware that the offer even exists. Parents who do visit the local offer website struggle to find the information that they need.
CURRENT POSITION: <ul style="list-style-type: none"><li>• A new Local Offer website will have its 'soft launch' in the summer, before officially launching in September 2023. Website development has been achieved through co-production with parent carers and young people and is informed by detailed analysis of other local offer sites. Investment in accessibility software and AI functions will enhance the user-experience.</li><li>• Some improvements have been made to the existing Local Offer whilst the new website is developed, however, this has not led to any significant increase in parent carers or professionals using the site.</li><li>• Information on the existing site has been cleansed and updated. Regular updates on the SEND Transformation Programme have been published with a monthly 'blog' from the Vice Chair and all relevant documents and reports being shared. Invitations to Open Sessions and Events have been promoted via the Local Offer, but most engagement has been secured via word-of-mouth or through existing contacts and networks.</li><li>• Understanding of the importance of the Local Offer website across the partnership needs to be improved. The overall response to providing new content identified that several organisations do not yet understand the local area's responsibility or how valuable this resource can be for parent carers and young people. Plans are in place to undertake accountability meetings based on this.</li><li>• A communications plan has been developed to promote the new site, and learning from the successful implementation of the Family Toolbox has been applied. Investment has been secured to ensure that the marketing campaign reaches a broad and relevant audience.</li><li>• The new Local Offer website will link to existing platforms including MyChildCan, Family Toolbox, Zillo and Sandbox, and will be enhanced through co-ordinated social media platforms. Professional groupings, such as SENCOs and Headteachers, will be provided with a forum area on the new site, enabling all communication on SEND to lead back to the Local Offer website.</li></ul>
AIMS: <ul style="list-style-type: none"><li>• The Local Offer is a highly valued source of information and support to parents, carers, children and young people with high levels of engagement from parents, carers, schools and other settings, and young people with SEND</li><li>• The Local Offer contains information that is relevant, up-to-date and easily accessible by all users, including those with disabilities or impairments.</li></ul>

1. What we have delivered from the WSoA	2. What we have delivered additional to WSoA
<ul style="list-style-type: none"> <li>· Scoped out options for the Local Offer website, completed an audit of other examples, undertaken an audit of the current Wirral site identifying areas of strength and weakness</li> <li>· Used a co-production approach to website development involving parent carer representatives in partnership with third sector organisation Positivitree</li> <li>· Engaged with SEND Youth Voice and local schools to ensure that young people are meaningfully involved in the development</li> <li>· Re-established the Local Offer Steering Group</li> <li>· Secured finance for the new site and communications strategy/marketing</li> <li>· New website will have a 'soft launch' in summer, with the official launch in September 2023</li> </ul>	<ul style="list-style-type: none"> <li>· Appointed a Participation Manager responsible for the Local Offer</li> <li>· Produced a Communications Strategy</li> <li>· Produced a detailed site map and content refresh plan</li> <li>· Attended LivPACs Local Offer Live Event for research purposes</li> <li>· Cleansed the existing website removing all out-of-date materials and 'broken links'</li> <li>· Improved the information relating to EHCPs and SEND Services</li> </ul>
3. What difference this has made	4. What our challenges have been
<ul style="list-style-type: none"> <li>· Young people and parent carer representatives involved in the workstream contributing to its development</li> <li>· Improved information for parent carers and young people, with easier access to forms and EHCNA to AR Handbook</li> <li>· More information for parent carers and stakeholders on the SEND Transformation Programme, with monthly updates</li> <li>· More information for parent carers on events, such as the Open Sessions and Co-Production event, with notes being provided to allow those who cannot attend to be kept informed</li> </ul>	<ul style="list-style-type: none"> <li>· Balancing the voice of parent carers and young people with the expectations of the WSoA</li> <li>· Changes to Workstream Lead</li> <li>· Cultural issue within a small number of organisations who have not recognised the importance of the Local Offer website to the Local Area and its families have meant that production of content has been delayed</li> </ul>
5. What we still need to do	6. Evidence
<ul style="list-style-type: none"> <li>· Launch the new website, gathering feedback and making alterations before September 2023</li> <li>· Deliver the Communications Strategy</li> <li>· Recruit and train the Local Offer Champions</li> <li>· Hold a series of Accountability Meetings for stakeholders to offer support and challenge on their engagement with the Local Offer</li> <li>· Recruit sessional parent carer workers to increase participation and engagement</li> <li>· Host a Local Offer Live event</li> </ul>	<ul style="list-style-type: none"> <li>· The number of hits on the Local Offer website has fluctuated over the past 12 months, registering a slight upward trend from 6169 monthly hits in April 2022 to 7274 in April 2023</li> <li>· Co-production evidence presentation</li> <li>· Website development evidence including site map, content refresh schedule, and branding/design mock ups</li> </ul>