

## Nottinghamshire SEND Partnership Improvement Board: October 2024 partner update.

The Special Educational Needs and Disabilities (SEND) Partnership Improvement Board has been established to oversee SEND improvement activity across the whole system in Nottinghamshire, with a focus on the priorities and areas for improvements identified in the [Ofsted and CQC inspection report](#). The Board meets every six weeks and is chaired independently by Dame Christine Lenehan, Strategic Advisor for the National Children's Bureau and formerly Director Council for Disabled Children.

The aim of the Nottinghamshire SEND Improvement Board is to robustly track, monitor and oversee the Nottinghamshire SEND Improvement Programme so that the aims are achieved at pace and provide challenge and support to increase the likelihood of the aims being achieved.

The purpose of these partner briefings is to update you on progress of the SEND Improvement Programme so you can share the work that is taking place via your networks. You can see previous [briefings](#) from Improvement Board meetings from June 2023 onwards.

The most recent Board meeting took place on 3 October which focused on feedback from the SEND deep dive, key messages and SEND data.

### [Inspection readiness update](#)

There is currently a pause on Ofsted monitoring visits. The Board are waiting to hear from Ofsted on the next steps and timescales. The Local Area continues to be monitored by NHS England and the Department for Education.

### [Feedback from SEND deep dive](#)

The Board discussed the feedback from the SEND deep dive in September. The evidence demonstrated:

- a system wide SEND joint commissioning strategy and SEND outcome strategy have been developed in partnership and approved
- despite a significant increase in referrals (27% increase from 2022 to 2023), a higher percentage of Education and Health Care (EHC) needs assessments were completed and EHC Plans issued within statutory timeframes (increase

from 4.5% in 2022 to 32.3% in 2023), supported by additional agency resource and a revised Stage 1 decision-making criteria for new EHC assessment requests

- a decrease in mediation and tribunals within Nottinghamshire since 2023; number of Mediation Meetings (down 97%, with less than 5 meetings during 2024 compared with 38 during the first 3 months of 2023) and Tribunals (down 100%, with no tribunals during 2024) held
- leaders have committed additional investment in the expansion of an Educational Psychology (EP) Service, appointing nine additional FTE EPs and three additional Trainee EPs by 2027
- improvements in processes have enabled a direct e-referral system and GP record sharing to support referrals to Community Paediatric teams from the Neurodevelopmental Support Team, leading to reduced wait times for families (decreased from 68 weeks in December 2023 to 54 weeks in July 2024), fewer unnecessary GP appointments, and minimised duplication of referrals
- the partnership has developed an interactive SEND data dashboard, making more efficient use of data intelligence to better understand population needs and monitor performance and outcomes for children and young people with SEND
- changes have been made in relation to health partnership held contracts to ensure that SEND is reported against key indicators
- a new SEND Funding Tracker has been introduced to provide fairer funding to groups of schools who include high numbers of children with SEND from outside of their catchment.
- leaders are engaging more closely with schools across all seven districts to collaboratively develop inclusive practices and promote joint, solution-focused approaches.
- SEND Education Pathway Officers are well-established and continue to support reporting and impact measure activity to evidence inclusive practice.
- a SEND interactive Journey Map has been developed to provide a guide to local support for children and young people (0-25 years)
- partnership working has positively evolved with a feeling of more collaborative joined up working across the system, and joint case reviews with

CAMHS/NST have been implemented to ensure the primary need of the child/young person is identified promptly and they're able to access the right support at the right time.

- enhancements to the neurodevelopmental pathway, including improved communication, "waiting well" resources, increased capacity, and smoother transitions, have led to a reduction in waiting times for children and young people (from 68 weeks in December 2023 to 54 weeks in July 2024 for NST), despite a significant rise in referrals
- an integrated sleep support pathway has been developed, with funding secured from the Partnership, set to launch in October 2024 and a proposal for a Sensory Support Pathway has been collaboratively developed and is currently progressing through the initial stages of local governance for approval and investment
- as a result of engagement with families and professionals working with children and young people with SEND, training and education sessions around early identification and intervention of speech, language and communication needs (SLCN) and sensory processing difficulties have been funded and will be offered in the new school year
- a transitions framework has been co-developed for use in services supporting young people transitioning from paediatric to adult healthcare services, which is currently being embedded in acute Trusts and being implemented in Community
- communication continues to improve with families and the workforce has an option to receive a regular newsletter and increasing access to information and resources through websites in addition to partners developing a communication and engagement plan which is due to be published shortly
- a re-design of the local SLCN services is underway to move to an integrated needs led model that is locality based, which will ensure that children and young people are able to access services at the earliest opportunity
- additional staff have been recruited to mitigate against long waits in specialist SLCN services and to provide "waiting well" support through advice lines and drop-in sessions (in the community)
- Recurrent funding has been secured to support the development of a jointly commissioned, needs led locality based SLCN service from April 2025

However, additional improvements could further enhance services:

- to ensure joint commissioning strategy and delivery plan is fully aligned within relevant governance structures to ensure robust decision making and assurance
  - **recommendation:** evaluate decision-making processes and overall responsibilities within the delivery plan and implement a countywide strategy across multiple boards
  
- further development required to engage all partners (education, health and social care) to support with annual reviews and multiagency quality assurance improvements
  - **recommendation:** partners to enhance improvements by having the right representation at the relevant outcome working groups
  - continue to enhance engagement through established channels and explore the option of a designated social care officer role
  - Embed the quality assurance framework
  
- development required around Local authority occupational therapy (OT) services due to long waiting times (average waits around 17 months)
  - **recommendation:** review service to understand gaps and develop a recovery plan, which compliments wider system OT improvements
  
- to continue to utilise data intelligence, engagement with families and the workforce to understand the themes/trends in the significant increase in referrals to the neurodevelopmental and EHCP pathways
  - **recommendation:** establish the themes/trends to support leaders to shape and influence commissioning and decision making
  - consider the 17 recommendations following the completion of the neurodevelopmental pathway review and the independent review of the Integrated Children's Disability Service (ICDS)
  
- embed the SEND system risk management and assurance into governance structures
  - **recommendation:** develop a SEND system risk register, incorporating relevant risk across the partnership, which may impact on SEND improvements, and continue to fully embed SEND system governance arrangements
  
- reporting to be accurately rag rated with clear timescales when actions have risks or issues. Health leaders are reviewing rag ratings and challenging themselves whether actions are fully embedded
  - **recommendation:** consider the accuracy of rag rating around all actions and for areas exceeding initial timeframes this needs to be clearly reported, recovery plans put in place and new timeframes to be included to mitigate drift and delay

- leaders to consider sufficiency and sustainable funding opportunities for additional resource provided through non-recurrent funding to support SEND system improvements. This will ensure sustainability of progress and mitigate potential risks
  - **recommendation:** local area partnership should consider sufficiency planning and joint commissioning arrangements, including evaluating and validating concepts through pilot programs and transformation initiatives.
- embed young people and parent/carer feedback across the system to understand lived experiences, shape ongoing improvements and build trust and confidence with the partnership.
  - **recommendation:** continue to explore alternate ways for families to communicate and engage ensuring partners are incorporating this into reporting mechanisms/data sets to measure success and progress

### SEND key messages

The Board discussed and agreed key messages about the improvement programme so far:

- Our local area SEND Partnership has made substantial progress in working together on shared priorities, responding to both a Priority Action Plan and agreeing our ambition in collaboration with children, young people and their families through a SEND Strategy.
- Leaders now have a significantly better shared understanding and line of sight to the SEND system, with the governance and frameworks to respond to required improvements collaboratively – we know where we are now and what we need to achieve next.
- We have improved communication, engagement and co-production with young people and parents/carers, including representation at governance groups; views on service effectiveness/pathways such evaluating SLCN services; consultation such as the Local Offer on Notts Help Yourself; events that contributed to the SEND Strategy; the annual parent/carer survey; and newsletters/service maps that better explain what support is available and what the next steps might be.
- There are significantly increased demands on the SEND system. Despite this, wait times have reduced on average.
- We have invested across services to make this happen, including 6 additional Education and Health Care Coordinators, 3 additional Senior Practitioners, locum/agency support for Educational Psychologists, additional staff within local pre and post diagnosis support services and additional staff within Speech Language and Communication Needs (SLCN) services. We have also looked to provide support during waiting, for example recruiting a SEND Educational Pathway Officer, implementing advice lines and drop-in sessions for families waiting to access specialist SLCN services, and newsletters for families on neurodevelopmental assessment pathways.

## Data

The Board were given a demonstration of the joint data held by the partnership to help measure metrics and outcomes of children and young people with SEND.

Headline data for October 2024:

- Wait times to access pre and post diagnosis support for neuro-divergent children and young people has reduced by 14 weeks since December 2023, with anticipated further reductions throughout 24/25.
- There has been significant work undertaken to improve the timeliness of EHCP completion, with data intelligence reporting an improvement in the number of plans issued within statutory timescale. 36% of plans were issued within timescale year-to-date, against a target of 40%.
- At the end of July 2024, the average wait time for all cases which have started the EHC Assessment Process was 17.0 weeks. Cases waiting over 20 weeks has reduced by almost a third since January 2024.
- To manage waits, the Specialist Health Occupational Therapy service changed its priorities in March 2024, focusing on children who have been assessed and are awaiting further treatment. This reduced the backlog from 150 to 102 children, with none waiting over 52 weeks. However, the "awaiting assessment" list has grown, impacting RTT. As of July 19, 2024, 127 children are awaiting assessment, with the longest wait at 19 weeks (10 children, all with scheduled appointments).
- Historically in 2022 there were wait times on average of 22 months for a full Occupational Therapy Assessment, (LA commissioned services) this was reduced to 14 months by April 2023, before rising again to 18 months in January 2024, the rise in waiting times is attributed to the low staffing levels. As of September 2024, there are 49 children and young people waiting for an assessment by an Occupational Therapist Assistant - all within review date.
- Waiting times to access local Speech, Language and Communication Needs services is consistently shorter than the national average and statistical neighbours, however local Speech, Language and Communication Needs wait times still remain long with the longest waiting time currently being 39 weeks (August data), in comparison to the longest wait in April being at 54 weeks. The average wait time is currently 22 weeks to access the Autism SLCN pathway locally. Work is ongoing to support a full System service redesign to allow for a more needs led approach. This aims to reduce reliance on specialist services and support earlier identification and intervention.
- Data intelligence demonstrates a significant system spend reduction through developing sleep support services when compared to the prescribing of Melatonin. In March 2023 the ICS spent in excess of £36,000 on Melatonin

prescriptions. With the recruitment of a sleep practitioner into the Acute System, specifically to support neurodivergent children and young people with sleep difficulties, this was reduced to approximately £22,000 by January 2024. A jointly commissioned integrated sleep pathway is due to go live in October 2024.

### Case studies

The Board were presented with two case studies. The first featured two young men who had successfully been employed after taking part in the [Project SEARCH](#) initiative. The second featured [Max Dolan](#), who has become a DJ following support from the Short Breaks Service.

Dame Christine Lenehan

Independent Chair of the Nottinghamshire SEND Partnership Improvement Board