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Mrs G Lawrence, Clinical Commissioning Group Chief Officer, Trafford

Mrs Anne Birch, Local Area Nominated Officer

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Dear Ms Colbert

Joint local area SEND inspection in Trafford

Between 30 January 2017 and 3 February 2017, Ofsted and the Care Quality Commission (CQC) conducted a joint inspection of the local area of Trafford to judge the effectiveness of the area in implementing the reforms for children and young people who have special educational needs and/or disabilities (SEND), as set out in the Children and Families Act 2014.

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

Inspectors spoke with children and young people who have special educational needs and/or disabilities, parents and carers, and local authority and National Health Service (NHS) officers. They visited a range of providers and spoke to leaders, staff and governors about how they were implementing the SEND reforms. Inspectors looked at a range of information about the performance of the local area, including the local area's self-evaluation. Inspectors met with leaders from the local area for health, social care and education. They reviewed performance data and evidence about the local offer and joint commissioning.

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

Main findings

- Clear procedures and assessment systems ensure that the identification of needs is strong in the early years. Agencies work closely together to identify needs and then provide the required support for young children and their families.
- Joint commissioning between healthcare services and the local authority is well established. This has a positive impact on the provision of services in Trafford, such as the provision of health visiting and school nursing.
- The educational needs of children looked after who have special educational needs and/or disabilities are well catered for. Leaders monitor these children and young people closely and are quick to intervene when concerns arise, such as poor attendance at school or a slowing of academic progress.
- The vast majority of Trafford's children and young people who have special educational needs and/or disabilities attend schools that are good or outstanding.
- Trafford has a long-standing and very active independent advice and support service (the Trafford parents and young people partnership). This service is valued highly by parents and provides effective support.
- Pupils receiving special educational needs support make consistently strong academic progress from their starting points.
- Young people are prepared well for adulthood. There is a wide range of options to match young people's aspirations. The proportion of young people not in education, employment or training is low. The proportion of adults who have learning disabilities in paid employment is well above the national average.
- There has been a high level of unease among parents regarding the statutory assessment of needs. This resulted in higher than average numbers of parents requesting a tribunal hearing to challenge decisions around statutory assessment. Local area leaders have responded well to parental concerns. A fundamental review has improved processes and strengthened communication with parents, thereby increasing the capacity of this service to deliver. However, parents who have yet to experience the new process remain frustrated by historical problems.
- Published information shows that until recently, the local area's performance in meeting expected timescales for the completion of education, health and care assessments was weak. This caused delays in the meeting of needs and was a point of frustration for parents.
- The meaningful co-production of services with parents is a recent development. Not all agencies are fully aware of the importance of co-production and parents' views are not always considered early enough when planning future provision.

- Parents are frustrated by delays in accessing speech and language therapy and child and adolescent mental health services. Children and young people who are referred for a possible diagnosis of autistic spectrum disorder also have to wait too long. However, plans to improve the timeliness of access to these services are well advanced. There are similar frustrations with occupational therapy, where leaders are currently developing a strategy for improvement.
- The targets set for children and young people in their education, health and care plans (EHCPs) are not always clear enough. This makes it difficult to measure the progress of some children and young people over time.

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

Strengths

- Agencies across Trafford work closely together to identify children in the early years who have special educational needs and/or disabilities. Delivery of the healthy child programme is strong. This national programme is enhanced by integration with the 'Greater Manchester 8-stage assessment model', which helps to identify and respond to any emerging developmental or healthcare needs from pre-birth to age five.
- All early years settings have a named health visitor. This helps in providing effective communication and support for children and families and is well received by settings. Health visiting teams work flexibly across Trafford to meet the needs of their communities. For example, in some parts of the borough, teams have increased their offer of home visits to ensure that more families take up the offer of the development check for two-year-olds.
- School nurses are a valuable resource for school-age children and schools benefit from their support. Such support includes drop-ins for children and young people and more formal input into care planning and the training of staff in educational settings. An increasing number of children, young people and their families are now accessing this service because of increased confidence in the service.
- Early identification and support for children who have physical, medical and/or sensory disabilities are timely. Parents are supported through the assessment processes by different healthcare teams. The Trafford early development service (TEDS) team prepares children and settings well for the transition into school. Children who have complex needs may also benefit from assessment placements in specialist provision that supports the timely, early identification of their needs.
- The special educational needs coordinators (SENCoS) located in the settings visited are well qualified; many have benefited from the delivery of the national SENCo award. SENCoS are effective in providing strategic oversight of SEND provision in their schools and this enhances the effective identification of needs.

- Parents and primary settings value the opportunity to access a qualified social worker through the social care in partnership (SCIP) offer. Social and emotional needs are identified and early help is having a positive impact on children's and young people's mental health.
- The recent introduction of the Trafford assessment panel (TAP) aims to involve a range of professionals in making the decision whether to assess. The panel includes the principal educational psychologist, special educational needs and/or disabilities advisory service (SENDAS) lead paediatrician, social care and school SENCos. This approach is improving the coordination and timeliness of the process for completing assessments.
- Pupils identified with exceptional needs are discussed at the moderation and resources panel. Healthcare, social care and education colleagues agree to the sourcing of appropriate specialist education provision, which may include out-of-borough placements where such provision is not available locally.

Areas for development

- Most children entering the care system in Trafford receive their initial health assessment within statutory timescales. However, there is no routine quality assurance to ensure consistency in the quality of the assessments that are carried out. Not all children benefit from having both an assessment and a healthcare plan that are child centred and comprehensive.
- Parents reported that the rigour with which communication, interaction and social and emotional needs are identified can be dependent on the extent of knowledge and skills of the staff in individual settings. Where needs are not correctly identified, parents report delays in children receiving timely support and this is a cause of frustration and anxiety for those families concerned.
- In 2015, the local area's performance in meeting expected timescales for EHC needs assessments was weak when compared with the national average. The challenge of converting statements of special educational needs (SENs) into EHCPs has also impacted on the overall timeliness of assessments. This has been particularly the case at key transition points, for example in preparation of a child's or young person's move from one setting to the next. The local area has completed a comprehensive review of processes and has increased the capacity of the statutory assessment team. There has been a significant improvement in timeliness more recently, with all plans being completed on time since September 2016.

The effectiveness of the local area in assessing and meeting the needs of children and young people who have special educational needs and/or disabilities

Strengths

- Trafford has a well-established history of joint commissioning between healthcare services and the local authority, including the use of shared budgets. This has a positive impact on the range of services offered, for example through an expanded offer of health visiting and school nursing. Recent commissioning decisions demonstrate close collaborative working between education, health and social care services to improve the lives of families living in the borough. SEND is an integral part of the five key priorities of the health and well-being board. Governance around commissioning and the delivery of services is monitored through appropriate structures.
- The settings visited had received training and support from the SENDAS. This helped them to embed effective 'assess, plan, do and review' assessment cycles, enabling children and young people to have their needs met early and benefit from the most appropriate SEND support programmes. The establishment of development programmes for social communication skills, learning skills and resilience building is providing an approach that enables children to be well supported and for parents to have confidence that needs are met. Settings work in partnership with specialist teams to build good practice across the borough through termly SENCo forums, training programmes and sharing what works well.
- Early years SENCos lead networking sessions for private and maintained early years providers, offering them information and guidance about good practice in SEND provision. This ensures a consistent approach across the range of early years settings.
- Families with young children are able to access an appropriate range of effective early years support in children's centres or other early years settings. For example, health visitors and parents can refer to programmes that help to support the early development of speech, communication and parenting.
- A small team of children's community nurses provides effective support to children who require nursing care in the community, including children who have complex health or palliative care needs. There is close collaboration with the local authority. The team responsible for children who have complex and additional needs is integral to the successful identification of any emerging safeguarding concerns within vulnerable families. Joint visits from these two teams are routinely offered. This ensures a coordinated approach to care and minimises the potential stress on families who would otherwise have to deal with numerous professionals.

- Multidisciplinary working is strong in Trafford. For example, multi-agency meetings between education, health and social care services take place on a monthly basis. These are used to coordinate care and to negotiate solutions to barriers faced by children and young people who have complex needs in accessing services. Innovation in information and communication technology (ICT) is helping to solve the problems in sharing information across separate health, social care and education systems.
- Children and young people who have additional social and communication needs are able to access workshops held in the summer. These include transition workshops to help with the transfer into a different school environment.
- The TEDs and SENDAS teams make a positive difference to the lives of families with infants and young children who have complex disabilities. The TEDs team is highly regarded by the majority of parents who rate the support provided as either excellent or very good.
- The needs of children looked after are well met. The needs of individual children and young people are well known and regular monitoring takes place to ensure that pupils' outcomes are positive. Where outcomes are a concern, there are timely interventions to address any decline, such as in attendance or academic performance. There are effective systems to alert colleagues to investigate. Children or young people who have social and emotional needs have access to bespoke support from the education psychology service. The most vulnerable are placed with the most senior staff to ensure that their needs are monitored closely.
- The medical education service panel, which includes representation from the child and adolescent mental health service (CAMHS), allocates appropriate provision when a placement is at risk either through exclusion or poor attendance. There are effective systems in place to avoid the permanent exclusion of children and young people who have an SEN or an EHCP. As a result, the number of such pupils who are permanently excluded is low.
- Where parents have accessed Trafford's independent advice and support service (the Trafford parents and young people partnership), they have received strong support through the process. This service is highly valued by parents.

Areas for development

- The Trafford parent carer forum does not feel that parents are routinely engaged in the meaningful co-production of services in Trafford. There is confusion among agencies about what co-production should involve. Although parents have been consulted about new developments, they have not necessarily been involved in planning for them at the earliest stage. Recent developments, such as parental representation on strategic boards and the agreement in principle of a co-production charter, are positive steps and show a willingness from local area leaders to work more closely with parents in shaping future provision.

- Parents are keen to learn the challenges faced by the local area and to be key partners in working through these challenges to ensure that the needs of all children and young people who have special educational needs and/or disabilities are well met.
- Parents have felt dissatisfied about the statutory assessment and review process. This is reflected by the majority of parents who completed a parental survey, as well as parents spoken to at settings. The high number of parents who submit a request for a tribunal also exemplifies the level of unease. Their concerns mainly surround the lack of communication, poor timeliness and the accuracy of information in completed plans. Leaders have since completed a full review of the statutory assessment department and there is a robust improvement plan in place. This involves parents having a named person who will manage the whole process from initial meetings to writing the completed plan. Discussions with leaders and parents in schools who have experienced the new process confirm that plans are working. This is confirmed by the significant reduction in complaints received by the department and the more timely completion of statutory assessments.
- Trafford CCG has not appointed a substantive designated medical officer (DMO) or a designated clinical officer (DCO). The majority of the responsibilities of the DMO role are undertaken by a number of key people across the CCG and although effective, it is a fragile arrangement. The CCG recognises this, and plans to recruit to this post in the near future are well advanced.
- The local offer is not promoted sufficiently by front-line practitioners. Therefore, too many families remain unaware of the valuable resource that is available to them. Many parents of children and young people who have SEND are unaware of the local offer as a source of information. Young people report that the local offer is hard to navigate. A recent review has taken place, in consultation with parents and young people, and a new version of the local offer is ready for publication imminently.
- Healthcare practitioners report that they routinely contribute to EHCPs; this represents good practice. However, draft and final EHCPs are not routinely shared with practitioners. While most practitioners submit their advice on a standard template, there is no formal guidance on how current an assessment needs to be for children and young people who are not on active caseloads. This means that the healthcare provision within completed EHCPs is not always up to date. Consequently, there is an over-reliance on the person writing the plan to accurately interpret clinical advice.

- Transition arrangements to adult services for young people who have complex healthcare needs are an area for development. There is no current strategic plan to support effective joint planning across children and adult community healthcare services for those young people who need ongoing support once they are discharged from the team at age 18. This is in contrast to effective transition planning for young people who have specific medical conditions, such as cystic fibrosis, where joint adult and child appointments take place for up to a year before the young person transfers to adult services.
- CAMHS is in the final stages of its efforts to introduce a new model of service delivery. Children and young people are referred to a single point of access, but it is recognised that some children are still waiting too long to access treatment. Pathways between different provisions to support emotional health and well-being across Trafford are not refined clearly enough to ensure that children and young people access the appropriate service in a timely fashion.
- Children and young people in mainstream schools wait too long for speech and language therapy (SALT) appointments. SALT support in schools is being redesigned in order to address the increasing number of referrals into the service and to reduce waiting times from diagnosis to treatment.
- Children and young people who are referred for a diagnosis of autistic spectrum disorder wait too long. Parents report that the support post-diagnosis does not meet their needs and that sensory occupational therapy is not available in Trafford. Leaders have recognised this as an area for improvement. There is a comprehensive risk assessment that clearly identifies the impact of the current service on children, young people and families, along with a clear improvement plan.
- Families who need a routine appointment with an occupational therapy service also have too long to wait. The current service consists of only two practitioners who work across health and social care to meet the needs of all children and young people in Trafford. The service responds creatively to the challenge by closer joint working with colleagues in physiotherapy. There are also plans for a programme of training within local schools. However, children who need support around fine motor skills are still waiting up to 25 weeks to access a service.

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

Strengths

- A large proportion of pupils who have SEND attend schools that are graded as good or outstanding in Trafford. All special schools are graded as good or outstanding.

- Children looked after are having their ongoing healthcare needs reviewed regularly. Assessments show that the voice of the child or young person is exemplified and the plans are outcome focused, resulting in individual needs being addressed.
- The community learning disability services, including the behavioural intensive support team, work effectively to support families with children who have complex learning difficulties. Evidence shows that this provision helps to avoid family breakdown and parents are supported well in keeping their children in the family home. The local area safeguarding children board has taken an active interest in ensuring that these most vulnerable children are safeguarded well. The board also monitors action plans following an earlier multi-agency case review.
- In 2016, pupils with an SSEN or EHCP in key stage 1 achieved standards above those of similar pupils nationally in reading, writing and mathematics.
- The proportion of pupils with an SSEN or EHCP in key stage 4 achieving five or more GCSEs at grades A*–C is at least in line with, and sometimes above that, of similar pupils nationally.
- Pupils who receive SEN support in key stages 2 and 4 consistently achieve standards above those of similar pupils nationally in English and mathematics. The progress these pupils make from their starting points in English and mathematics is also consistently above that of similar pupils nationally.
- The proportion of 19-year-olds who have received SEN support or who have an SSEN or EHCP and who achieve a level 2 qualification, including English and mathematics, is consistently above that of similar students nationally.
- Pupils who have SEND in Trafford enjoy more regular school attendance than their peers nationally. Similarly, fewer pupils are persistently absent from school than is the case nationally.
- In 2016, the proportion of pupils who have SEND who remained in education, employment and training at the age of 17 was well above the national average.
- Post-16 and post-19 transition planning focuses on all areas of preparation for adulthood. Young people are able to transition into supported employment opportunities, work experience, apprenticeships and further education. Professionals who provide careers information, advice and education guidance are committed to achieving positive outcomes and work closely with young people and their families to do so. They help to raise young people's aspirations and achievements to the most suitable destinations for them. As a result, the proportion of adults who have learning disabilities in paid employment in Trafford is consistently above the national average. In 2015/16, the proportion in paid employment was more than double the national average.

Areas for development

- Health visitors, school nurses and community nurses are not currently planning and recording their work in an outcome focused way. This means that it is often difficult to evidence the impact of their work. This is a recognised area for development across all three services.
- The progress made from starting points for pupils with SSENs or EHCPs in key stages 2 and 4 in English and mathematics is below that of similar pupils nationally.
- The proportion of 19-year-olds with an SSEN or EHCP achieving a level 3 qualification has been below that of similar students nationally for the last two years.
- The outcomes recorded in completed EHCPs are not always clear. This includes contributions from health and social care. The lack of detail makes it difficult to measure the progress of some children and young people from year to year.

Yours sincerely

Ian Hardman
Her Majesty's Inspector

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