19 May 2017

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Director of Children’s Services  
Middlesbrough Borough Council  
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Middlesbrough  
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Amanda Hume, Chief Officer, South Tees Clinical Commissioning Group  
Caroline Cannon, Local area nominated officer

Dear Ms Ioannides

Joint local area SEND inspection in Middlesbrough

Between 20 March 2017 to 24 March 2017, Ofsted and the Care Quality Commission (CQC) conducted a joint inspection of the local area of Middlesbrough to judge the effectiveness of the area in implementing the disability and special educational needs reforms 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 Care Quality Commission (CQC).

Inspectors spoke with children and young people with disabilities and/or special educational needs, parents and carers, local authority and National Health Service officers. They visited a range of providers and spoke to leaders, staff and governors about how they were implementing the special educational needs 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.

As a result of the findings of this inspection and in accordance with the Children Act 2004 (Joint Area Reviews) Regulations 2015, Her Majesty’s Chief Inspector (HMCI) has determined that a Written Statement of Action is required because of significant areas of weakness in the local area’s practice. HMCI has also determined that the local authority and the area’s clinical commissioning group are jointly responsible for submitting the written statement to Ofsted.

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

- The disability and special educational needs reforms have not been implemented effectively in Middlesbrough. There are significant weaknesses in the strategic leadership and governance of the reforms and, since 2014, local area leaders have done too little to improve outcomes for children and young people who have special educational needs and/or disabilities.

- Children, young people and families are not involved enough in discussion and decision-making about the services and support they need. This weakness was exemplified by one parent who told inspectors, ‘All I want is for people to ask how my child is, which is rare, listen to me and do what they say they will do.’ Importantly, too few parents know about Middlesbrough’s local offer or how to get the essential help and support they need.

- Leaders do not have an accurate understanding of how effectively children and young people’s needs are identified and assessed. Equally, leaders do not have a clear view of how well children and young people’s needs are met or whether they are achieving better outcomes. As a result, strategic planning is weak and leaders do not have a secure starting point for jointly commissioning services across education, health and social care.

- In contrast, front-line professionals are committed to working together to improve outcomes for children and young people who have special educational needs and/or disabilities. Specialist provision for some children and young people is strong because their needs are identified, assessed and met effectively and, as a result, they achieve good outcomes.

- Children and young people in the schools and settings visited by inspectors told the inspectors that they feel safe and well supported. Leaders in the local area are alert to the things that make children and young people who have special educational needs and/or disabilities vulnerable. Crucially, those who need help and protection are identified quickly and given effective and well-coordinated multi-agency support.

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

Strengths

- The needs of young children are identified in a timely and effective way. Health visitors provide targeted development reviews for three-year-olds and, in addition, run clinics for young children jointly with physiotherapists. As a result, those who need specialist help or support are identified quickly and referred promptly to other services.

- The needs of vulnerable children and young people who have special educational needs and/or disabilities are identified well because services are well coordinated and effective. For example, health visiting services, ante-natal
services and physiotherapy are provided jointly at a community hub for refugees in Middlesbrough. Similarly, children and young people who have recently arrived in the United Kingdom and may have complex needs are quickly placed in special schools so their needs can be identified and fully assessed. Also, children and young people who are electively home-educated are referred to the school nursing team and are always offered a service.

- Primary care practitioners complete a high number of annual health checks for young people aged 14 and over who have moderate, severe or profound learning disabilities. This supports the timely identification of their changing needs as they move towards adulthood.

- Children and young people who are vulnerable, exploited, missing or trafficked are identified quickly as a result of effective multi-agency work in Middlesbrough. Local area leaders have made sure that children and young people who have special educational needs and/or disabilities who may be vulnerable, or at risk, are identified, helped and protected.

Areas for development

- Leaders in the local area do not have a thorough understanding of the views and experiences of children, young people and families. This is a barrier to effective and equitable identification of children and young people’s needs. Crucially, many parents and carers told inspectors that they do not know whom to speak to when they have a concern about their son or daughter and that sometimes the professionals they approach do not listen to them.

- Leaders have not evaluated the local area’s effectiveness in identifying children and young people’s special educational needs and/or disabilities accurately. They have a weak understanding of children and young people’s needs. This limits the effectiveness of strategic planning, including arrangements for jointly commissioning services.

- In some schools and settings, staff do not have sufficient knowledge of the disability and special educational needs reforms. Equally, some staff in these settings are not knowledgeable enough about how to identify children and young people’s special educational needs. While leaders recognise that this is a barrier to effective and timely identification of needs, they have not done enough to tackle this fundamental weakness.

- Although the local area’s performance in completing education, health and care (EHC) assessments and converting statements of special educational needs to EHC plans has improved, local area leaders have not made sure that these plans have the necessary contribution from health practitioners. Local area leaders do not use information and data to identify children and young people who may have special educational needs and/or disabilities. This limits the effectiveness of strategic planning to improve services.

- Most children and young people placed in Middlesbrough who are looked after by the local authority and have special educational needs and/or disabilities
do not get timely initial health assessments. In contrast, the quality assurance of health assessments for children and young people who are looked after by the local authority and placed outside the local area is effective.

**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**

- Front-line professionals are committed to working together to meet children and young people’s needs. For example, joint education and therapy groups provide effective multi-agency assessment and short-term therapy programmes for young children. This contributes to earlier assessment of their needs and, when needed, timely and effective support and intervention. Similarly, school leaders in some settings work closely with professionals from child and adolescent mental health services to provide support that is highly responsive to children and young people’s emotional needs arising from, for example, gender identity.

- Children and young people told inspectors that they feel safe and well supported in the schools and settings they attend. They also told inspectors that they feel safe when they use a short break service, for example when they go to the Youth Club at ‘My Place’ or take part in a leisure activity in their local community.

- New post-16 courses, for example at Middlesbrough College and those provided by Education and Services for People with Autism (ESPA), are meeting young people’s needs and helping them to gain the qualifications and skills needed to move successfully on to further or higher education, employment and independent living.

- The local authority’s SEN team provides effective support to schools and settings in Middlesbrough. This helps special educational needs coordinators work out how they can meet a child or young person’s needs in their school or setting. Importantly, many parents told inspectors that the SEN team are an invaluable source of information and advice.

- There is a strong and effective multi-agency approach to assessing and meeting the needs of children and young people who have a hearing or visual impairment at the schools with an additionally resourced provision. Pupils at these schools spoke to inspectors about how the specialist support they receive is helping them to learn well and make progress.

- Similarly, many children and young people benefit from specialist services which meet their needs well. For example, children with a mild speech and language delay are effectively supported by an accessible and responsive speech and language therapy service. Also, some children who have social, emotional and mental health needs and autism have transferred successfully to mainstream secondary schools as a result of effective support provided by a special school.
Areas for development

- There are significant weaknesses in the involvement of children, young people and families in discussion and decision-making about how their needs are assessed and met. Families do not know about the resources and support for children and young people who have special educational needs and/or disabilities in the local area. Few know about the local offer or specialist services such as the Special Educational Needs and Disability Information Advice and Support Service in Middlesbrough. This leads to unacceptable inequalities in the resources and support children, young people and families receive. Some children and young people regularly access a high quality short break, for example, while others simply do not. This was exemplified by one parent who told inspectors ‘the more you know, the more you get’.

- The quality of support plans and EHC plans is too variable. The engagement of health professionals in education, health and care planning is underdeveloped and the quality of health advice in plans is sometimes poor. Oversight of the quality of these plans by local area leaders is ineffective. In part, this is because there is a lack of clarity about the strategic and quality assurance role of the designated medical officer.

- The availability and commissioning arrangements for some specialist services give serious cause for concern. The occupational therapy service and the provision of specialist equipment in Middlesbrough do not meet children and young people’s needs. They wait too long for the services and specialist equipment they need and, as a result, their opportunities to participate in essential everyday activities are unacceptably restricted.

- Equally, information about children and young people on the pathway for recognition, referral and diagnostic assessment of autism is not shared purposefully during the education, health and care planning process. As a result, they do not get the timely help and support they need. Also, there is no post-diagnostic support for these children and young people and their families, which, too often, leaves them feeling vulnerable and isolated.

- Similarly, specialist careers information, advice and guidance for children, young people and families is not timely or effective. Too many young people and their families do not have the information and support they need to make informed decisions. As a result, some are fearful about their futures.

- In mainstream schools and settings, some staff do not know enough about how to meet the needs of children and young people who have special educational needs and/or disabilities. As a result of long-standing weaknesses in the local area’s strategic leadership, a high proportion of these children and young people are placed in special schools within and outside the local area. This further restricts opportunities for staff in mainstream schools to develop the knowledge and skills needed to provide an effective and graduated response to pupils’ special educational needs. Although leaders recognise that this is a barrier
to meeting children and young people’s needs, they have not done enough to
tackle this fundamental weakness.

There is no robust strategy for jointly commissioning services across
education, health and social care in Middlesbrough. This significant weakness has
a profound impact on the effectiveness of the local area in meeting the needs of
children and young people who have special educational needs and/or disabilities.

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

Strengths

Some services and settings in Middlesbrough are helping children and young
people who have special educational needs and/or disabilities to achieve better
outcomes. Some children and young people’s current and continuing health needs
are assessed accurately and met effectively. Some young people are making
strong progress on post-16 learning programmes and, as a result, are developing
the knowledge and skills they need to be well prepared for the next stage of their
lives.

Many children and young people who use a short-break service are accessing
high-quality activities which have been effectively coproduced with them and their
families. These activities enable children and young people to be more visible and
included, build their confidence, increase their independence and help them to
develop crucially important communication and interaction skills.

Areas for development

Local area leaders do not have a sufficiently clear understanding of the
progress that children and young people who have special educational needs
and/or disabilities make. Leaders do not collect, analyse or use information and
data effectively. As a result, their evaluation of the local area's effectiveness in
improving outcomes for children and young people is inaccurate. Again, this limits
their ability to jointly commission the services that children, young people and
families need.

The outcomes in many support plans and EHC plans are not specific, clear or
measurable enough. There are no clear or consistently used measures of health
outcomes. This makes it difficult for leaders either to check the effectiveness of
services or to work out how to develop and improve them.

Information from statutory assessments in 2016 show that children and
young people who have special educational needs and/or disabilities in Years 6
and 11 did not do as well in English and mathematics as other children and young
people who had similar starting points nationally. Similarly, levels of absence,
persistent absence and fixed-term exclusion for children and young people who
have special educational needs and/or disabilities in mainstream primary and
secondary schools are high and increasing. There is no secure evidence that,
typically, children and young people who have special educational needs and/or disabilities in Middlesbrough are well prepared for further education, employment or independent living.

The inspection raises significant concerns about the effectiveness of the local area.

The local area is required to produce and submit a Written Statement of Action to Ofsted that explains how the local area will tackle the following areas of significant weakness:

- There are fundamental weaknesses in the strategic leadership, governance and implementation of the disability and special educational needs reforms in the local area.
- Children, young people and families have too little involvement in discussion and decision-making about the services and support they need. The local offer is poor and, as a result, children, young people and families have a weak understanding of the resources and support available in Middlesbrough.
- Leaders have an inaccurate view of the local area’s effectiveness. They do not gather, analyse and use information and data to drive improvement in provision and outcomes for children and young people who have special educational needs and/or disabilities in the local area.
- Strategic planning is weak and there is no strategy for jointly commissioning services across education, health and social care.

Yours sincerely

Nick Whittaker
Her Majesty’s Inspector

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<th>Ofsted</th>
<th>Care Quality Commission</th>
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<tbody>
<tr>
<td>Cathy Kirby, Regional Director</td>
<td>Ursula Gallagher, Deputy Chief Inspector, Primary Medical Services, Children Health and Justice</td>
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<td>Nick Whittaker, HMI Lead Inspector</td>
<td>Lucy Harte, CQC Inspector</td>
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<td>Jackie Lown, Ofsted Inspector</td>
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CC: DfE Department for Education
Clinical commissioning group(s)
Director Public Health for the local area
Department of Health
NHS England