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Ms Alison Murphy
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Alfred Gelder Street
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HU1 2AA

Emma Latimer, Chief Officer, NHS Hull Clinical Commissioning Group
Karen Keaney, Local Area Nominated Officer, Kingston upon Hull City Council

Dear Ms Murphy

Joint local area SEND inspection in Kingston upon Hull

Between 9 October and 13 October 2017, Ofsted and the Care Quality Commission (CQC) conducted a joint inspection of the local area of Kingston upon Hull 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 CQC.

Inspectors spoke with children and young people who have special educational needs (SEN) 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 are implementing the disability and 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 NHS Hull Clinical Commissioning Group are jointly responsible for submitting the written statement of action to Ofsted.

This letter outlines our findings from the inspection, including some areas of

strength and areas for further improvement.

Main findings

- Since 2014, weaknesses and inconsistencies in the local area's strategic leadership have been a barrier to the effective implementation of the disability and special educational needs reforms in Hull. As a result, the reforms have had too little impact on the local area's arrangements for identifying, assessing and meeting the needs of children and young people who have SEN and/or disabilities. This is unacceptable.
- The experience of children, young people and families and the outcomes achieved by children and young people who have SEN and/or disabilities vary too widely. In some schools and settings, children and young people's needs are identified and assessed in an accurate and timely way and individual professionals and services give them high-quality care and support. Some children and young people achieve positive outcomes which prepare them well for their future lives. This is not, however, typically the case.
- Too many children and young people do not have their needs identified and assessed well and, too often, professionals and services do not work together in an effective and coordinated way. As a result, the outcomes achieved by children and young people who have SEN and/or disabilities are not improving.
- Local area leaders do not have a sufficiently detailed or comprehensive understanding of children and young people's needs and their strategy for securing better outcomes for children and young people who have SEN and/or disabilities and their families is weak.
- The local area's self-evaluation does not cut to the heart of what is working well and what needs to improve in Hull and there is no agreed way of measuring and evaluating the outcomes achieved by children and young people who have SEN and/or disabilities. The arrangements for jointly commissioning services across education, health and social care are at an early stage of development.
- Parents and carers have a mixed experience of co-production in Hull. Some families told inspectors that they have been '100%' involved in the co-production of plans and provision for their children, while many others told inspectors that professionals and services do not listen and they feel like getting the help and support their children need is a 'fight'. Children, young people and families have not been involved enough in the co-production of Hull's local offer of services, resources and specialist support.
- The clinical commissioning group's previous interim arrangement for the designated clinical officer (DCO) was effective. As a result, health professionals made a strong initial contribution to the reforms. Currently, however, there is no formalised designated medical officer (DMO) and no DCO in post. This hiatus in the leadership of health professionals is having a

negative impact on the development of services for children and young people who have SEN and/or disabilities and their families.

- Frontline professionals are working hard to make a positive difference to children and young people who have SEN and/or disabilities and their families. There is a strong commitment from parents and carers to work with local area leaders to change the experience of families and improve their children's outcomes. Unequivocally, parents and carers value the advice, support and guidance they receive from KIDS, a national charity which provides a range of support services for children, young people and families.
- Children and young people in the schools and settings visited by inspectors told us that they feel safe and well supported in Hull. Children and young people told us that they feel confident to speak to a trusted adult if they are worried, concerned or have a problem. The advocacy and children's rights service works proactively with children and young people who have the most complex needs and live in residential care to make sure that their needs are understood and acted upon.

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

Strengths

- Professionals and services supporting children and families in the early years work in a joined-up way. For example, early years education providers have an identified health visitor. Similarly, improved partnership working between nursery nurses and health visitors is contributing to earlier identification and assessment of children's needs. This is leading to improved outcomes for children who have SEN and/or disabilities in the early years.
- There has been significant improvement in the proportion of education, health and care (EHC) plans which are issued within the expected 20-week timescale. The local area's performance in meeting this target is much higher than the local and national averages. The local area is on track to meet the requirement for all statements of special educational needs to be converted to EHC plans by March 2018.
- Services such as the autistic spectrum disorder (ASD) outreach service and the Integrated Physical and Sensory Service provide effective support and many health professionals give detailed and helpful advice. As a result, some schools and settings are identifying children and young people's needs precisely and in a timely way. Parents and carers value the work of these services because, in some cases, the support they provide helps children and young people's needs to be met without the need for an EHC plan.

Areas for development

- Leaders have a limited understanding of the effectiveness of the local area's

arrangements for identifying and assessing children and young people's needs. Information about children and young people's needs is not used well to inform decision-making and leaders do not have an accurate view of the effectiveness of education, health and care services in meeting children and young people's needs. Leaders understand that these weaknesses have had an unacceptably negative impact on the local area's response to the reforms and, consequently, on the experience of children, young people and families in Hull.

- Although many professionals and services work collaboratively in Hull, there is minimal integration in the local area's arrangements for identifying and assessing children and young people's needs. This is evident, for example, in the lack of an integrated city-wide approach to development checks for early years children.
- Some children and young people's needs are not identified in a timely or accurate way. There is a lack of specialist knowledge and understanding of children and young people's needs in some schools and settings. In primary schools, for example, children's social, emotional and mental health needs are not identified quickly enough and many parents told inspectors that their children's needs are simply not understood. Some parents said that they sometimes feel 'blamed and un-supported' by professionals.
- As a result of weaknesses in the local area's arrangements for reviewing EHC plans, some children and young people's new or changing needs are not identified in a timely way. The weak oversight of these processes results in unacceptable delays in children and young people receiving the help and support they need. Critically, local area leaders do not have a robust plan for remedying these weaknesses and the 0–25 Integrated SEN Team has limited capacity.
- While there has been improvement in the arrangements for transition between early years providers and primary schools, the experience of children and young people transferring at other key points between schools, settings and services is less positive. Local area leaders have recently co-produced a high-quality transitions protocol with children, young people and families. Currently, there is no consistent city-wide approach to supporting children, young people and families at these crucially important points in their lives.

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

- Children and young people who have SEN and/or disabilities are beginning to be involved in decision-making about their lives. For example, a group of children and young people are involved in the development of a new child and adolescent mental health services (CAMHS) provision in Hull.

Importantly, children and young people have an increasingly active role in EHC planning meetings and reviews. They make strong and influential contributions to the 'all about me' section of EHC plans which are effectively co-produced.

- Children and young people who have SEN and/or disabilities and are looked after by the local authority are well supported by the specialist looked after children's health service. The 'virtual' child development unit provides similarly effective and well-coordinated multi-agency support for children and young people who have SEN.
- A new approach to providing CAMHS is reducing the waiting time for access to these important specialist resources. The waiting time has reduced significantly since January 2017 and is now compliant with national targets.
- Local area leaders have a developing understanding of how specialist resources and care pathways can be aligned so that duplication of services is minimised. For example, in response to feedback from parents and carers, the integrated therapies service has developed a more coordinated approach to planning clinical appointments and home visits.
- Some children and young people who have SEN and/or disabilities access a high-quality short-break service. Children and young people told inspectors that they enjoy spending time with their friends, for example, at the youth club run by the Leisure and Freetime Support Service. Local area leaders know that, currently, this service does not have the necessary reach and work on co-producing a more needs-led short-break service with children, young people and families has started.
- Assessment for continuing care is given a high profile in the local area and the take-up of personal health budgets by families is increasing. Parents and carers told inspectors about the positive impact of personal health budgets on their children's health and well-being.
- Children, young people and families access a range of high-quality services from the national charity KIDS. This includes information, advice and support, parent and family support, independent support for the EHC planning process for young people and families, and children and young people's advocacy. These services are a highly valued part of Hull's local offer.

Areas for development

- Local area leaders cannot be sure that they are commissioning the right services for children, young people and families. This is because there is no detailed or comprehensive analysis of children, young people and families' needs. The indicators that young people's needs are not being met in Hull are reflected in increasing rates of fixed-term and permanent exclusion for children and young people who have SEN and/or disabilities. It is also demonstrated by increasing levels of absence and persistent absence, a year-on-year increase in the number of children and young people who are

electively home educated and a rise in appeals to the Special Educational Needs and Disability Tribunal.

- Children and young people do not have timely access to speech and language therapy services in Hull and local area leaders do not have an effective plan for securing improvement. This is also the case for the diagnostic pathway for ASD. The waiting time for ASD diagnostic assessment is unacceptably long, not improving and unlikely to improve without significant further work. Currently, sensory processing assessments are not commissioned in an effective enough way. Many parents and carers spoke to inspectors about the impact of this gap in the local area's arrangements for assessing children and young people's needs.
- Few families know about the resources and support for children and young people who have SEN and/or disabilities in the local area. The local area is not complying with the statutory requirement to publish information about personal budgets and leaders are not telling parents and carers about their right to a personal budget in the EHC planning and review process. As a result, the take-up of personal budgets in Hull is very low.
- Children, young people and their families told inspectors that they have a mixed experience of co-production. Many said that they are asked for their views and consulted about changes but few have experienced meaningful co-production.
- The quality of EHC plans is too variable. Too often, reports and plans have clinical descriptions of children and young people's diagnosed conditions with no explanation of how their daily lives are affected by these health needs. The provision in EHC plans does not always match children and young people's identified and assessed needs, and the outcomes are often imprecise. Some children and young people are subject to a number of statutory plans, for example children who are looked after or those who have a plan of protection. The reviews of these plans are not always aligned, which means that parents and carers may need to attend multiple meetings where they are required to 'tell their story' to different professionals. Weaknesses in the coordination of these processes are, in part, a result of the absence of a formalised DMO or DCO arrangement in Hull. Importantly, health services are not making sure that children and young people who have an EHC plan can be easily identified on electronic health records.
- In some mainstream schools and settings, staff do not have the knowledge and skills needed to provide an effective and graduated response to children and young people's special educational needs. Although local area leaders recognise that this is a barrier to meeting children and young people's needs in an effective and timely way, they have not done enough to tackle this fundamental weakness.
- Inspectors have concerns about the safety of home to school transport for children and young people who have health and medical needs. The system for identifying children and young people's health needs and working out how

they will be helped and supported when they are travelling is not sufficiently robust. Understandably, some parents and carers lack confidence in these arrangements.

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

Strengths

- Some young adults aged 16 to 25 are being effectively supported through high-quality learning programmes. Increasingly, post-16 providers such as East Riding College and Pathway Plus, an innovative partnership between three special schools and Siemens, are helping young people who have SEN and/or disabilities to be more independent, better prepared for employment and more confident. They are also helping them to be visible and included in the communities where they learn and live. Some young people who have SEN and/or disabilities have ambitious plans for the future, including apprenticeships, full-time employment and higher education.
- Some health services are providing effective and well-targeted support which is helping children and young people who have SEN and/or disabilities to achieve better outcomes. For example, newly redesigned services provided by CAMHS are beginning to impact on children and young people who have high levels of anxiety. As a result, a group of children and young people who have been frequently absent from school are successfully re-engaging with education. Notably, a highly effective specialist continence service is contributing well to a significant group of children and young people's independence and quality of life.
- Local area leaders have made sure that children and young people who have SEN and/or disabilities are fully involved in activities linked to the City of Culture. Children and young people told inspectors that they are proud of their participation and the contributions they are making.

Areas for development

- Local area leaders have a limited understanding of the outcomes children and young people who have SEN and/or disabilities are achieving. There is currently no systematic or inclusive approach to measuring and evaluating these outcomes across education, health and social care services. Crucially, this limits local area leaders' ability to support and challenge schools, settings, services and providers and, in doing so, to hold them to account for the outcomes children and young people achieve.
- Some education, health and social care services are commissioned well in response to children and young people's identified needs. However, there is no robust strategy for jointly commissioning services across education, health and social care in Hull. This significant weakness has a profound impact on

the effectiveness of the local area in improving outcomes for children and young people who have SEN and/or disabilities.

- Levels of absence and persistent absence for children and young people who have SEN and/or disabilities are increasing and levels of fixed-term and permanent exclusion from primary and secondary schools are high.
- Levels of fixed-term exclusion for children and young people who have SEN and/or disabilities and are looked after by the local authority are also high. The progress made by children and young people who have EHC plans and those receiving support for their special educational needs varies widely between schools in Hull. The progress made by children and young people who have SEN and/or disabilities varies too widely across schools in Hull.
- Some children and young people's social care needs are assessed well and, as a result, they receive a high-quality service, such as a short break, which is helping them to achieve better outcomes. But, too often, children and young people have a less positive experience because families have limited knowledge of the resources available in Hull and many do not know how to get the support and help their children need.

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:

- Poor strategic leadership and governance of the disability and special educational needs reforms in Hull.
- Too little involvement of families in decision-making about the services and support they need and insufficient awareness of the resources available to them in the local area.
- Poor self-evaluation of service quality and impact and insufficiently focused improvement planning to facilitate better provision and outcomes in the local area for children and young people who have SEN and/or disabilities.
- The lack of an effective strategy for jointly commissioning services across education, health and social care.

Yours sincerely

Nick Whittaker
Her Majesty's Inspector

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Cc: Department for Education
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