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Mr Colin Foster
Director of Children's Services
Bedford Borough Council
Cauldwell Street
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Sarah Thompson, Bedford Clinical Commissioning Group Accountable Officer
Tim Long, Local Area Nominated Officer

Dear Mr Foster

Joint local area SEND inspection in Bedford Borough

Between 5 February 2018 and 9 February 2018, Ofsted and the Care Quality Commission (CQC) conducted a joint inspection of the local area of Bedford Borough 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 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

- In recent years, deep-seated weaknesses in the local area's wider provision have meant that leaders have not prioritised improving the quality of services for children and young people who have SEN and/or disabilities. The ongoing weaknesses in the partnership between the local authority and Bedfordshire Clinical Commissioning Group (BCCG) continue to hinder their ability to act on weaknesses robustly. Consequently, the reforms have not been implemented quickly or rigorously enough, and leaders are failing to meet their duties under the Children and Families Act of 2014.
- BCCG was placed into financial special measures in January 2018 due to the continuing deterioration in its financial position. This weakness in BCCG, coupled with current commissioning arrangements of many community services, have had a negative impact on the quality of provision and outcomes for children and young people in the local area who have SEN and/or disabilities.
- Frequent changes in the senior leadership of BCCG have reduced its capacity to work jointly with its social care and education partners, and to implement the reforms effectively. BCCG's failure to appoint a designated clinical officer (DCO) until recently has negatively affected BCCG's ability to work effectively with partner agencies. As a result, hardworking and skilled practitioners in front-line services have been left with a lack of strategic direction about how best to support children and young people who have SEN and/or disabilities.
- Leaders do not have a mutual understanding of their overarching priorities as a team of services or of their approach for holding one another to account for the implementation of the reforms. Leaders' plans to tackle the significant weaknesses in the provision do not include jointly agreed health, education and social care priorities. Leaders equally do not yet have a mutual understanding of how they are measuring the difference that they are making to the outcomes for children and young people who have SEN and/or disabilities. Therefore, leaders are unable to commission joint services in a coherent and well-planned way. Joint commissioning between all three services is virtually non-existent to date.
- Leaders have not ensured that children, young people, parents, carers and professionals understand how the borough is implementing the 2014 reforms. Significant numbers of parents and carers who spoke to inspectors commented that the guidance given to them, often by schools, does not help families to understand their rights or the support available. Parents are too often given mixed messages and incorrect guidance about the process for applying for an education, health and care (EHC) plan, and more widely about the essence of the 2014 reforms. Parents, carers and professionals do not know enough about the existence of, and process to apply for, personal budgets.
- Since his appointment, the director of children's services (DCS) has raised expectations about what the provision in the local area should look like. He has been incisive and tenacious in identifying the weaknesses so that the locality can better meet the needs of children, young people and their families. Leaders'

evaluation of the strengths and weaknesses in the provision broadly matches the findings of the inspection team.

- The local area has identified that pathways, support and services for those children and young people who have social, emotional and mental health needs or autistic spectrum disorder are not yet well developed within the borough. The local authority has been quick to create more support in schools and make additional bids for funding to the Department for Education to try and bring more high-quality provision into the borough to support children and young people.
- Leaders have recently identified that the local offer website is weak and in desperate need of development. The website is not effective in giving children, young people, families and practitioners the information they need.
- The members of the Parent Carer Forum (PCF) are skilled, knowledgeable and well respected. They have been actively championing the rights of children, young people and their families, consistently raising their ongoing concerns about the provision in Bedford Borough. However, members of the PCF acknowledge that they do not represent the views of all groups of parents and carers. The DCS has sought the views of the PCF extensively since his appointment, in a genuine effort to seek rigour in the services and more transparency in how the borough addresses the concerns of parents and carers.
- The local area has worked hard to meet its deadlines for both the conversion of statements of SEN into EHC plans, and to ensure that it completes assessments for new EHC plans within the statutory 20-week timeframe. This is a real area of success for the local area. Equally, more recent EHC plans show increasingly effective targets being set by educational professionals. However, EHC plans often lack essential information from social care and healthcare professionals.
- Parents, carers, children and young people appreciate the support that they get from individual practitioners from schools, healthcare services and social care services. There are examples of strong practice by individual practitioners.
- Under the leadership of the new DCS, leaders in social care and education have a much broader and better understanding of the weaknesses in the provision. Professionals across education and social care are now working and communicating more closely to develop effective systems to support and safeguard children and young people who have SEN and/or disabilities. There were no safeguarding concerns identified during the inspection.

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

Strengths

- The integrated two-and-a-half-year assessment for all children is effectively enabling collaborative working between the families and professionals to support early identification of needs. Professionals build positive relationships with families

and understand their needs well.

- Leaders have ensured that the processes for undertaking statutory assessments within allocated timeframes is a strength in their work. Nearly all conversions from statements of SEN to EHC plans have now taken place. Additionally, almost all assessments for EHC plans are completed within the 20-week statutory timeframe.
- The borough provides ways to support children, young people and their families when they are not successful in their application for an EHC plan. These 'way forward meetings' offer guidance and advice from a range of professionals about the reasons behind the unsuccessful application and how best to support children and young people in the future.
- There is good-quality work to support the transition for young people between disabled children's social care and adult social care teams. These two teams are working collectively to support the young people who have the most significant needs, so that they can access the necessary support they require as they settle into early adulthood.

Areas for development

- The lack of joint commissioning and weaknesses in strategic planning mean that the local area has a poor shared understanding of how well children and young people's needs are identified. Similarly, leaders do not know sharply enough the improvements that are needed in the processes and systems that could improve the identification of the needs.
- The quality of EHC plans is too variable. Too often, the plans have been finalised before contributions from healthcare professionals have been included or checked. Healthcare professionals have not been involved quickly enough in determining the level of children's and young people's need or planning the support for them. The lack of information sharing means that the requirements for the co-production of EHC plans are not met.
- Families are too often having to resort to gathering evidence and information themselves from one of the services to provide it to another service during assessment and review periods. This information is not consistently forthcoming from education, healthcare and care services. This is not ensuring that professionals have the most up-to-date information when they are undertaking initial assessments or reviewing the needs of children and young people.
- Leaders are working hard to try and improve the quality of the assessment panel process. More recently, the assessment panel includes representation from healthcare, education and social care professionals. This is starting to support a better understanding among leaders about the provision that is needed in the local area.
- Leaders have begun to improve the borough-wide processes and systems for assessments. There is a focus on bringing simpler application processes that are owned jointly by the services, thereby reducing the need for parents and carers to

have to complete similar paperwork more than once. This work is still in its infancy.

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

Strengths

- There are examples of strong practice by individual healthcare professionals and services working directly with families. For example, the school nurse provision is well developed and highly thought of by practitioners in schools, as well as parents and carers. This service is held in high esteem by special schools and mainstream providers alike.
- The designated nurse for children looked after, the child and adolescent mental health services (CAMHS) and the continuing care nurses work well jointly to support children who are looked after and placed in provision out of the borough. This collective work ensures that healthcare professionals are able to support and evaluate the therapeutic care for children and young people who have complex ongoing healthcare needs.
- The child development centre provides high-quality support for children, young people and their families while they are waiting for the outcomes of a full assessment. Specialist staff support families with ongoing problems, such as with sleep or behaviour. Feedback from this work is then informing the follow-up paediatric appointments. These services are highly appreciated by children, young people and their families. In particular, parents with children who have attention deficit hyperactivity disorder are positive about the recent scheme to support them through training workshops.
- BCCG has recently introduced an initiative that is actively reducing the numbers of children and young people requiring tier 4 specialist in-patient CAMHS provision. Most notably, this service, coordinated by BCCG and offered through a multidisciplinary team, is using 'experts by experience' to give young people a 'voice' in the decisions being made about their care.
- The local area has successfully improved the support for children and young people who have emerging social, emotional and mental health needs and those who have autistic spectrum disorder. The local authority–school link, whereby every school has a CAMHS professional, has been received positively by school staff. They feel that this is creating more effective and timely support for some of the most vulnerable pupils, as well as more on-the-spot guidance about how schools themselves can improve their professional practice.
- In the short time since it was reorganised, the work of the early-help team to support the education team is an emerging strength in the local area's provision. This closer work between the two teams is supporting more young people to be identified and supported well when they are failing to successfully access education, and are vulnerable to exclusion. This work has shown success in reducing the number of children and young people who have been excluded in 2017/18.

- Practitioners in schools and colleges say that once they get access to the local authority SEN and disability team, they are impressed by the support and guidance that they receive. In particular, this team is now working alongside local authority school improvement advisers to bring greater challenge in how schools are being held to account for improving the provision and outcomes for children and young people who have SEN and/or disabilities.
- Children and young people who have additional and complex nursing needs are supported thoroughly by a well-established children's community nursing service. The service works closely alongside Bedford General Hospital's paediatric staff to support planning for discharge at the earliest opportunity, thus reducing the time children are away from their home environment.

Areas for development

- The principles of the 2014 reforms and the document 'Special educational needs and disability code of practice: 0 to 25 years (2015)' regarding joint commissioning, have not been enacted by all key leaders. There is currently no meaningful joint commissioning going on in the borough. Despite efforts by the local authority's senior leaders to get this under way, they have been unable to secure appropriate agreement from BCCG to commission services in partnership.
- The local offer website is not sufficiently accessible for children, young people, their families or practitioners in the different services. Almost all stakeholders do not access the online website, and many do not know what it is. This means that, too often, there is no clarity among the stakeholders about what is on offer to support children and young people who have SEN and/or disabilities. This lack of clarity perpetuates some of the inaccurate information in the locality about how to apply for and access additional support and funding. For example, personal budgets are not well understood, promoted or allocated in the borough.
- Parents and carers spoke of their concerns at having to struggle to get their children's needs met, especially where their needs were beyond what was 'typical' for the main diagnosis of need or as they got older and their needs developed. Parents and carers repeatedly described being caught between services and long waiting times, often owing to a lack of clarity between the services about which service was going to fund the varying packages of support. All too often, parents and carers are overwhelmed by complex conversations about where funding is coming from and what is available, which is not facilitating effective and efficient support for children and young people.
- BCCG leaders' failure to appoint a DCO quickly enough, to play a full part in the development of the integration of services, means that the current DCO is 'playing catch up' in creating basic systems to implement the 2014 reforms across the health service.
- Significant areas for improvement identified by BCCG have still to be addressed, and there is currently no strategic planning that clearly identifies how these weaknesses will be addressed or actions monitored.

- Access to speech and language therapy is an area of real dissatisfaction among parents, carers and practitioners. BCCG acknowledges that there is little flexibility in the service to cope with the current high staff vacancy rate. At times, this is leading to increased waiting times for children to receive ongoing therapy once they are in the service. The staffing issues are also affecting the service's ability to develop new initiatives or expand projects such as the new 'communication passports'.
- Despite their recent work, leaders acknowledge the concerns of parents, carers and practitioners about insufficient provision within the borough to meet the needs of children and young people who have autistic spectrum disorder, or those who have emerging social, emotional and mental health needs. These children and young people account for a disproportionate number of exclusions in the borough's schools.
- The local offer of support for children and young people who have SEN and/or disabilities in the borough is weak. The content of the local offer is outdated and has only limited inclusive opportunities available, especially for children and young people who have profound and multiple learning difficulties, or for those with autistic spectrum disorder.
- For many children and young people whose SEN and/or disabilities are not immediately apparent, their experience of some public services can be unnecessarily traumatic. For example, BCCG acknowledges that general practitioners have not been properly equipped with the knowledge about their involvement in the 2014 reforms. As a result, young people and their families recount distressing experiences, which are incredibly stressful, particularly for children and young people who have autistic spectrum disorder. These incidents could have been avoided by better awareness and a consistent approach to making minor reasonable adjustments in medical surgeries.
- Despite significant weaknesses historically in the children's disability social care team, this is now an improving service. The support that this service is now starting to offer children and young people who have SEN and/or disabilities is becoming increasingly of better quality and more consistent. Professionals within education and social care services are working with increasing effectiveness alongside one another. Information is being shared through closely aligned electronic services, while the DCS has reorganised the structure of the local authority to ensure that these teams have more face-to-face contact.
- There is clear evidence of some improving practice or effective support by individuals in the local area. These emerging successes include: developing the use of direct payments across the borough; efforts made by social care and school professionals to act tenaciously on behalf of children and young people; the recent improvement in the quality of the educational targets set by schools in the EHC plans; and the excellent quality of respite care offered via the two main providers, Foxgloves and Sunflowers. However, these experiences are not commonplace enough. For example, leaders acknowledge that there is not sufficient capacity in the locality to meet the significant respite needs of children, young people and their families.

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

Strengths

- Health visitors are using a greater range of information as part of early intervention to support maternal mental health. Targeted work to improve outcomes is using both the health visitors' extended skills and specialist mental health practitioners when appropriate. The work is also being used to consider how best to offer locality-based targeted approaches in the future.
- All special schools, a high proportion of nursery provision, mainstream primary and secondary schools, and further education providers were judged by Ofsted as good or outstanding at their most recent inspection.
- For the parents who access the independent information and advice support service, they are incredibly positive about the support and guidance that they receive. They feel that the signposting that this service gives them helps them to improve the provision and outcomes for their children.
- There is clear evidence of strong practice to support the transition of young people who have SEN and/or disabilities into further education.

Areas for improvement

- Throughout the inspection, it was difficult for inspectors to fully assess the local area's effectiveness in improving outcomes of all areas of education, health and social care, because leaders are not collecting evidence of their impact in a holistic or meaningful way. Leaders do not have clear processes for gathering or evaluating the range of information gathered about the progress made by children and young people. Leaders and the improvement board acknowledge that this is currently a weakness in the provision.
- Until recently, there has not been a strong enough focus on measuring the impact of the work of BCCG on the outcomes for children and young people who have SEN and/or disabilities. More recently, new commissioning contracts are beginning to support the gathering of more useful information on public health and CAMHS. However, this is not yet making a difference, and the community services' gathering of information is still weak.
- Leaders' analysis of the educational outcomes for children and young people who have SEN and/or disabilities is not sufficiently well developed. Currently, the depth of their review is not beyond the analysis that they make of all pupils in the borough, regardless of ability or need. Consequently, the evidence that they provided about the achievement of those who have SEN and/or disabilities is of inconsistent quality, and sometimes contradictory.
- Leaders are not reviewing the educational outcomes thoroughly enough for children and young people who have SEN and/or disabilities and who are being educated

out of borough.

- What is evident from the information provided by the local area is that, by the end of key stage 2 and key stage 4, pupils with or without an EHC plan or a statement of special educational needs made less progress than all other pupils nationally with the same starting point.
- Leaders have not sought to review the impact of the 'way forward meetings' that take place after the assessment panel. These meetings are a significant investment of time and money for the borough. However, leaders do not yet know the difference that the approach makes to the longer term outcomes for children and young people who have SEN and/or disabilities and their families.
- Leaders have not actively sought the views of young people, parents, carers and professionals thoroughly enough about how well children's outcomes are improving. This is a critical gap in the implementation of the reforms and in the work to co-produce the local offer of support. Although leaders have undertaken some survey work, this has only gathered a narrow range of views. Leaders point to low feedback rates on the local offer website, and low mediation and tribunal rates as potential evidence of satisfaction in the local provision. However, they have not actively checked a wide breadth of views in order to prove this evaluation of their effectiveness.
- Although still too high, the number of children and young people who have SEN and/or disabilities who are being either temporarily or permanently excluded from school has reduced considerably in 2017/18, most notably in secondary provisions. This is closely linked to the high-quality challenge and support being brought by the early-help team to link pupils' behaviour with their needs far more closely.
- Local authority leaders are working closely with the PCF to try and create a more coherent outcomes-based self-assessment tool, so that all the services have a more joined-up approach to measuring their collective effectiveness. BCCG is also working with the PCF on the procurement of new community services. However, neither of these things is yet well established or making a difference to children and young people who have SEN and/or disabilities.

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 no coordinated priorities, strategies or accountabilities between the services to ensure that joint commissioning is undertaken effectively.
- BCCG has only very recently carried out its self-evaluation to identify progress and barriers to implementing the reforms. At the time of the inspection, there was no robust action plan in place to deliver the necessary actions to ensure that outcomes for children and young people improve.

- Leaders have not ensured that the local offer provides clear, comprehensive, accessible and up-to-date information about the available provision and how to access it. Leaders are not responsive to local needs and aspirations by involving children and young people, their families, and service providers within its development and review.
- Leaders have not ensured collectively that EHC plans identify the range of needs for children and young people beyond the diagnosis or a multi-agency approach to meeting needs effectively, including the subsequent signposting and guidance around personal budgets.
- There are weaknesses in the provision across the borough for young people who have emerging SEN and/or disabilities, including social, emotional and mental health needs, and more complex needs such as autistic spectrum disorder, to live successful lives where they participate positively in wider borough life and engage successfully in education, employment, training and transition into adulthood.

Yours sincerely

Kim Pigram
Her Majesty's Inspector

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Cc: Department for Education
 Clinical commissioning group(s)
 Director of Public Health for the local area
 Department of Health
 NHS England