

Ofsted
Agora
6 Cumberland Place
Nottingham
NG1 6HJ

T 0300 123 1231
Textphone 0161 618 8524
enquiries@ofsted.gov.uk
www.gov.uk/ofsted
lasend.support@ofsted.gov.uk



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Ms Beate Wagner
Corporate Director, Children and Young People
Wakefield Council
County Hall
Bond Street
Wakefield
WF1 2QW

Jo Webster, Chief Officer, NHS Wakefield Clinical Commissioning Group (CCG)
Andy Lancashire, Service Director for Education and Inclusion, Wakefield Council
Melanie Brown, Commissioning Director for Integrated Care, NHS Wakefield CCG

Dear Ms Wagner and Ms Webster

Joint local area SEND revisit in Wakefield

On 3 and 4 June 2019, Ofsted and the Care Quality Commission (CQC) revisited Wakefield to decide whether the local area has made sufficient progress in addressing the area of significant weakness detailed in the written statement of action issued on 4 August 2017.

As a result of the findings of the initial inspection and in accordance with the Children Act 2004 (Joint Area Reviews) Regulations 2015, Her Majesty's Chief Inspector (HMCI) determined that a written statement of action was required because of significant areas of weakness in the local area's practice. HMCI determined that the area's CCG was responsible for submitting the written statement to Ofsted. This was declared fit for purpose on 20 November 2017.

Inspectors are of the opinion that the local area has made sufficient progress to improve the area of serious weakness identified at the initial inspection. This letter outlines our findings from the revisit.

The revisit was led by one of Her Majesty's Inspectors from Ofsted and a Children's Services Inspector from CQC.

Inspectors spoke with children and young people with special educational needs and/or disabilities (SEND), parents and carers, along with local authority and National Health Service (NHS) officers. Inspectors met with leaders and practitioners from the local area for education, health and social care. They considered 107

responses to the online survey for parents and carers and reviewed a range of evidence about the effectiveness of the local area's SEND arrangements.

Main findings

The initial inspection in June 2017 found that:

'There are significant weaknesses in the local area's arrangements for completing specialist diagnostic assessments of autistic spectrum disorder (ASD). Inspectors are not assured that these significant weaknesses are being addressed with the required urgency or robustness'.

Local authority and CCG leaders have worked together in a committed way to tackle the area of significant weakness.

There has been a marked reduction in the number of children and young people who are waiting for ASD diagnostic assessment, and waiting times are significantly improved. In June 2017, 614 children and young people aged 0 to 14 were waiting for ASD diagnostic assessment, and the average waiting time was almost two years. Currently, 57 children and young people in this age group are waiting for ASD diagnostic assessment and the average waiting time is 26 weeks. Although the number of young people aged 14 and above who are waiting for ASD diagnostic assessment has reduced from 72 to 55 since the initial inspection, there has been minimal improvement in the average waiting time, which is currently 43 weeks. In part, this is because local area leaders have not had strong enough oversight of the effectiveness of the 14+ ASD diagnostic pathway. In recent weeks, the actions taken to improve this pathway have been more focused and determined. However, at this stage it is too early to evaluate the impact of these actions on the experience of young people aged 14 and above or their families.

TEAM, the parent and carer forum in Wakefield, has made a strong contribution to improving the local area's arrangements for ASD diagnostic assessment. TEAM had a key role in co-producing Wakefield's written statement of action and has worked proactively to give families stronger and more influential voices. Local area leaders recognise the importance of understanding the experience of children, young people and families and are using what they are learning to improve the 0 to 14 and 14+ ASD diagnostic pathways. Many families told inspectors that 'the parents' events are fantastic' because they give them the opportunity to speak to education, health and care professionals about the aspects of the ASD diagnostic pathway that worked well and the things that could have been better.

Importantly, however, the recommendations and advice from ASD diagnostic assessments are not used well enough to meet children and young people's needs better. Reports from these assessments are not routinely shared with education and care professionals and, in some schools and settings, the findings are underused or ignored. This unhelpfully reinforces the perception that 'nothing changes' as a result of ASD diagnostic assessment. It undermines joint working, for example between education, health and care professionals, and it weakens planning for transitions between services and settings. It is also a concern for inspectors that there continue to be occasions when some individual education, health and care professionals do

not communicate with children, young people and families in a way which reflects the standards expected by local area leaders.

Services for children aged 0 to 5 with communication and interaction difficulties are highly effective. Young children and their families access a range of services and support without a formal ASD diagnosis. Specialist diagnostic assessment of ASD for this group of children is timely and effective.

The local area has made sufficient progress in addressing the area of significant weakness.

As the local area has made sufficient progress against the weakness identified in the written statement of action, HMCI recommends that the formal monitoring visits from Department for Education (DfE) and NHS England should cease. The decision about whether to continue the monitoring visits rests with the DfE and NHS England.

Yours sincerely

Nick Whittaker
Her Majesty's Inspector

Ofsted	Care Quality Commission
Cathy Kirby HMI Regional Director	Ursula Gallagher Deputy Chief Inspector, Primary Medical Services, Children Health and Justice
Nick Whittaker HMI Lead Inspector	Elaine Croll CQC Inspector

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