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Victoria Gent
Director of Children's Services
Blackpool Council
Number One
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FY1 3AH

Andrew Bennett, Interim Chief Officer, Blackpool Clinical Commissioning Group
Paul Turner, Local Area Nominated Officer, Blackpool Council

Dear Ms Gent and Mr Bennett

Joint area SEND inspection in Blackpool

Between 28 February and 4 March 2022, Ofsted and the Care Quality Commission (CQC), conducted a joint inspection of the local area of Blackpool 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 with special educational needs and/or disabilities (SEND), 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 SEND reforms. Inspectors looked at a range of information about the performance of the area, including the area's self-evaluation. Inspectors met with leaders from the 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 (WSOA) is required because of significant areas of weakness in the 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.

In reaching their judgements, inspectors took account of the impact of the COVID-19 pandemic on SEND arrangements in the area. Inspectors considered a range of information about the impact of the pandemic and explored how the area's plans and actions had been adapted as a result.

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

Main Findings

- The area has been too slow to implement the 2014 reforms. It is now almost eight years since the code of practice was published, yet leaders have only just started to prioritise the education, health and care provision for children and young people with SEND. Many children, young people and their families in Blackpool continue to be let down.
- Partners across the area are now working together to develop a new SEND strategy. Leaders have a better understanding of the strengths and weaknesses across the area and their self-evaluation accurately reflects this. But, while long-term ambitions have been agreed, there is a limited shared understanding about what needs to be done, by when and by whom, to achieve these. Although it is clear that leaders are now prioritising SEND across the area, there is not a shared understanding of what the improvements will look like.
- The area has not paid sufficient heed to the views of children, young people, parents and carers. In some instances, important decisions about key services, such as the short breaks provision, have been taken which have negatively impacted on lived experience of families. While this is beginning to change, there are still missed opportunities to listen to children, young people and their families and act on their views.
- Too often, professionals' poor communication with parents and carers exacerbates their anxieties and concerns. Parents and carers are frustrated when they do not know how to get in touch with services. The high turnover of staff in some teams means that parents and carers do not always have a consistent, known professional who they can contact when they need to. Professionals do not consider what would be most helpful for parents and carers consistently when deciding how to communicate with them. This is because communication methods are not routinely co-produced.
- Some parents and carers spoke highly of leaders' efforts to maintain services during the COVID-19 pandemic. Schools remained open to vulnerable children and young people throughout local and national restrictions. Health services adapted their ways of working so they could continue to identify and meet children and young people's needs. Parents and carers appreciate the

emotional and practical support that they have received from frontline professionals during the COVID-19 pandemic.

- Parents and carers are quick to sing the praises of many frontline staff who make a positive difference. There are staff who go the extra mile every day to give children, young people and their families the help and support that they need. These individual professionals are a 'lifeline' for the families that they work with.
- Despite efforts to reduce waiting times, parents and carers, children and young people experience considerable stress and anxiety due to long waits to access some services. Many parents and carers' perception is that the area has put barriers in place to make it harder for them to access education, health and care (EHC) plan assessments and specialist short breaks. Where there are delays, parents and carers report that these lead to their children and young people's needs escalating. Families find it hard to cope as a result.
- Parents and carers are the experts regarding their children's needs. However, some feel that professionals are too quick to dismiss their concerns. This is particularly the case when children and young people's needs are less visible or when they mask their needs. This leaves some parents and carers feeling isolated and struggling to cope.
- Parents and carers are rightly concerned about their children and young people's futures. Some young people have access to suitable advice, guidance and support to help them realise their aspirations. But, too often, young people have to rely on the help of friends and family to help prepare them for their adult lives. The pathways into greater independence and employability are not well developed. Some young people are left 'high and dry' as the services that they received as children do not link up with equivalent services for adults.
- The online local offer is not sufficiently helpful, informative or up to date. Too many parents and carers are not aware of this website. Those parents and carers who have visited the local offer website struggle to find the information that they need.

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

Strengths

- The introduction of the graduated response toolkit has increased the skills and expertise of school staff. It has helped staff to identify children and young people's emerging needs and put in appropriate support quickly. SEND advisory teachers offer valued advice and guidance to settings to make sure

that this toolkit is used effectively. This has improved provision for children and young people receiving SEND support.

- The area's processes to support the identification of needs in the early years are effective. Early years practitioners benefit from the support of the early years advisory teachers and the area SEND coordinators (SENDCos). Importantly, these practitioners receive effective training and support. This means that young children have the right support in place when they start primary school.
- The informal outreach service provided by specialist schools is making a positive difference. These specialist staff help their mainstream colleagues to better identify, assess and meet the needs of children and young people. This helps children and young people get the support that they need in their mainstream settings. This service helps to build the knowledge, skills and confidence of mainstream school staff.

Areas for development

- Parents and carers report that, all too often, professionals dismiss their concerns about their children or young people's needs. They feel that some professionals, in particular school SENDCos, lack the expertise needed to understand how children and young people mask their needs. This leads to delays in children and young people having their needs identified and met. On occasion, this means that needs can escalate to a point of crisis.
- The requested changes to EHC plans following annual reviews are not completed in a timely manner. Many children and young people's EHC plans are outdated. Consequently, these plans no longer accurately reflect the child or young person and their needs.
- The social care needs of children and young people with SEND are not routinely or reliably identified, assessed or met. The requirement for an assessment by the complex care needs team to access specialist short breaks is a barrier for many families. Added to this, frequent changes in social workers in the complex care needs team has caused drift, delay and an inconsistent approach. This has left parents and carers feeling frustrated as their families have not had the support that they need.
- Many parents and carers are frustrated by the neurodevelopmental pathway. They do not understand how the pathway works. Poor communication means that they worry that their child or young person has been 'lost' in the system. There is now a dedicated practitioner who contacts families whose children have been accepted onto the pathway. But too many families do not feel that things have improved.
- Parents and carers find it hard to get hold of the information that they need. They struggle to navigate the SEND system. Often, the information provided

to parents and carers is not relevant or is written in language that is too difficult to understand. Most parents and carers want consistent named professionals who they can contact when they have any worries or queries.

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

Strengths

- The most vulnerable children and young people with SEND benefit from the wealth of specialist services available. For example, children looked after and at risk of exploitation benefit from targeted support to keep them safe. This means that the most vulnerable children and young people with SEND have their needs met well.
- The area's well-regarded special schools provide an effective service for children, young people and their families. Many mainstream settings in the area also meet the needs of children and young people with SEND well. Parents and carers with children in these schools report positively about how staff advocate for them and signpost them to where they can gain valuable support as a family.
- The area has supported children, young people and their families to access services remotely during the COVID-19 pandemic. Some services carried out home visits to check that families had the technology required to attend online appointments. They used these home visits to provide information so that families knew what to expect of the service. This made sure that more families could benefit from new ways of working.
- The child and adolescent support and help enhanced response service is available to older young people who require mental health support. The service is valued by young people and their families. This early intervention often prevents a deterioration in young people's mental health.
- The relationship between the parent carer forum and area leaders has improved over the past 12 months. The parent carer forum works with area leaders now to make decisions about services for children and young people with SEND. This means that these decisions match what children, young people and their families want and need.

Areas for development

- For many parents and carers, an EHC plan and special school place for their child are the 'golden ticket'. Historical weaknesses in the area's secondary schools have meant that parents and carers have been eager to gain a place for their child in one of the well-regarded special schools. This parental

preference for a special school place has been exacerbated by a number of other SEND services wrapping themselves around the special schools so that they have become a 'one-stop shop'. The area is reversing this trend. However, there are high numbers of children and young people who attend special schools whose needs could be best met in mainstream schools.

- The lack of a well-developed strategy for joint commissioning means that leaders have not prioritised some of the most pressing areas of need. For example, young people who access some services out of area are frustrated by the obstacles that they encounter. This includes not being able to access specialist equipment in a timely manner.
- Children and young people wait too long to access some speech and language services. These children and young people's needs remain unmet. These long waits cause many families frustration and distress.
- There is not enough time allocated to the designated clinical officer role. This limits the capacity of this key role in influencing improvements across the area. For example, there is limited capacity to carry out robust quality assurance processes for EHC plans. This means that the quality of the health input to these plans is sometimes inconsistent.
- There is no strategic approach to co-production (a way of working where children, families and those that provide the services work together to create a decision or a service that works for them) across the area. While some teams have co-produced aspects of their work, this is not consistent. Many parents, carers, children and young people do not feel that they are fully involved in making important decisions that affect their lives.
- The lack of capacity in the SEND information and advice support service over the past 12 months has reduced the number of families that benefit from this service. There is not the advocacy available that some families need. While leaders have recognised these issues and have started to address them, there is much to do to develop an effective service.
- Recent changes to the area's short-breaks provision have impacted negatively on some families. Some children and young people can no longer access activities that they previously routinely attended. Many families feel that the current short-breaks offer does not meet the needs or interests of their children and young people.
- The intended outcomes for children and young people in EHC plans are often too vague. Many plans do not set out specifically what children and young people should know and be able to do. They do not set out clearly how each outcome will benefit the child or young person. This makes it difficult for professionals to evaluate whether the planned provision is meeting children and young people's needs sufficiently well.

- Co-production is not embedded into the area's ways of working. Consequently, opportunities to better tailor planned improvements to the needs of children, young people and their families are being missed.
- Children and young people's experience of access to school nurses in mainstream schools is not consistent. Only some children and young people can access school nurse services at their school. This means that other children and young people do not have support from a school nurse at an early stage, for example as part of a team around the child. Moreover, young people preparing to move to adult services do not get the advice and services that they need consistently.

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

Strengths

- The numbers of children and young people with SEND who have been permanently excluded has reduced considerably over the past few years. Moreover, at the same time, the number of children and young people on the roll of the area's pupil referral unit (PRU) has reduced dramatically.
- Consequently, the PRU staff now offer a more preventative early intervention package of support for children and young people who are at risk of exclusion. Consequently, more of these children and young people return successfully to their mainstream schools.
- The intended outcomes in recent EHC plans better reflect the aspirations of children, young people and their families. Consequently, provision is better matched to what is most important for children, young people and their families. This helps more children and young people to achieve the goals that matter to them. For example, almost all young people aged 16 to 17 years are in education, employment or training.
- The community nursing service provides care for children and young people with complex care needs in their own homes as well as in schools. These nurses work closely with children, young people, their families and other professionals to agree care plans. This means that children and young people's specific wishes are respected, and their individual needs are met.
- There is a wide range of provision across the area to improve children and young people's mental health and well-being. For example, one local provider offers groups, activities and support for lesbian, gay, bisexual and transsexual children and young people. Providers such as this are supporting children, young people and their families' social and emotional mental health needs.

These needs might otherwise require referral to the child and adolescent mental health service.

- Most children with SEND aged between 11 and 16 years attend good or better mainstream schools. The recent improvement in the overall effectiveness of a number of the mainstream secondary schools in Blackpool means that more of these children and young people receive a better quality of education.
- Across the area, children in primary schools who require support for SEND attend and achieve well. This means that they are well prepared for their move to secondary school.

Areas for development

- Leaders do not evaluate the impact of EHC plans to improve the education, health and care outcomes for children and young people. Leaders do not know how well the area meets the needs and improves the outcomes of different groups of children and young people.
- Preparation for adulthood is not well developed across the area. The lack of understanding about this across the partnership has limited the opportunities available to young people. Transitions are often poorly planned. Across all partners, planning for adulthood starts too late and does not provide young people with the advice and guidance that they need to make well-informed decisions. These weaknesses are exacerbated by the lack of useful, up-to-date information and analysis to help leaders better understand what is available and what more needs to be put in place.
- Across the area, children and young people who require support for their SEND and those who have an EHC plan do not achieve well at the end of key stage 4.

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

The area is required to produce and submit a WSOA to Ofsted that explains how the it will tackle the following areas of significant weakness:

- the lack of specificity, ownership and accountability in the area's improvement strategy for SEND
- the duties around preparing children and young people for adulthood not being fulfilled
- the poor communication with parents and carers across the area

- the long waiting times for some therapies.

Yours sincerely

Pippa Jackson Maitland
Her Majesty's Inspector

Ofsted	Care Quality Commission
Andrew Cook Regional Director	Mani Hussain Deputy Chief Inspector, Primary Medical Services, Children Health and Justice
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Cc: Department for Education
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