Ofsted Agora Nottingham NG1 6HJ

**T** 0300 123 1231 **Textphone** 0161 618 8524 6 Cumberland Place enquiries@ofsted.gov.uk www.gov.uk/ofsted lasend.support@ofsted.gov.uk



#### 13 October 2022

Christine McLoughlin Corporate Director for People and Integration Stockport Metropolitan Borough Council 2nd Floor Fred Perry House Stockport SK1 3XE

Anita Rolfe, Director Health, Quality and Improvement/Deputy Place Lead, NHS GM **Integrated Care** Bev Milway, Local Area Nominated Officer

Dear Ms McLoughlin and Ms Rolfe

#### Joint area SEND revisit in Stockport

Between 27 September 2022 and 30 September 2022, Ofsted and the Care Quality Commission (CQC) revisited the area of Stockport to decide whether sufficient progress has been made in addressing each of the areas of significant weakness detailed in the inspection report letter published on 22 November 2018.

As a result of the findings of the initial inspection and in accordance with the Children Act 2004 (Joint Area Reviews) Regulations 2015, His Majesty's Chief Inspector (HMCI) determined that a written statement of action was required because of significant areas of weakness in the area's practice. HMCI determined that the local authority and the area's clinical commissioning group (CCG) were jointly responsible for submitting the written statement to Ofsted. This was declared fit for purpose on 26 April 2019.

The area has made sufficient progress in addressing four of the significant weaknesses identified at the initial inspection. The area has not made sufficient progress in addressing one of the significant weaknesses. This letter outlines our findings from the revisit.

The inspection was led by one of His Majesty's Inspectors from Ofsted and two Children's Services Inspectors from 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. Inspectors looked at a range of information about the performance of the area in addressing the five significant weaknesses identified at the initial inspection, including the area's improvement plans and self-evaluation.

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.

#### **Main findings**

■ At the initial inspection, inspectors found the following:

A lack of an effective approach to jointly plan and commission the services that meet the needs of those with SEND.

Following the previous inspection, leaders took the urgent action needed to resolve this significant weakness. They established a multi-agency joint commissioning group, which includes parent and carer representatives, to lead on this work. They have been bold in their decision making and have not shied away from solving complex problems.

Following their formation, the multi-agency joint commissioning group put together an up-to-date and accurate joint strategic needs assessment. This enabled the group to determine those education, health and care priorities that would benefit from joined-up working. This has led to considerable progress in planning and delivering services that meet local need. For example, commissioned mental health practitioners are now part of the multi-agency safeguarding and support hub. These appointments have facilitated the earlier identification of children and young people's emotional health and well-being needs and have reduced the numbers of inappropriate referrals.

This joint commissioning group have delivered a wraparound package of support for care leavers that includes access to housing, employment and mental health services. While some projects, such as this, have only benefitted a few children and young people with SEND, others have made a positive difference to large numbers of children and young people with SEND. For instance, the single point of access for early help and reduced waiting times for some therapy services have improved the lived experience for many children and young people with SEND and their families.

The area has made sufficient progress to improve this significant weakness.





At the initial inspection, inspectors found the following:

## A failure to assess and meet children and young people's social care needs in conjunction with EHC assessments and plans

Leaders ensure that all parents are contacted by a social care practitioner as part of the education, health and care (EHC) assessment process. However, needs assessments are not always carried out as required by the SEND Code of Practice statutory guidance. Consequently, EHC plans do not set out the detailed and specific social care provision required by some children and young people. Too often, parents are simply advised to refer to the local offer to find any services that they might need. This means that some children and young people and their families do not get the help and support that they need and are entitled to.

The local area's 'team around the school' approach has encouraged and enabled some families to access social care advice and support early. This has prevented needs escalating for many families, including for those with children with SEND. Following a pilot programme, leaders have now developed multidisciplinary locality-based teams across seven geographical areas. Both of these approaches have reduced the number of early help referrals significantly. However, while some children, young people and their families have benefited from these new ways of working, others are not so fortunate.

### The area has not made sufficient progress to improve this significant weakness.

At the initial inspection, inspectors found the following:

#### A lack of involvement of children and young people and their families in the meaningful, effective co-production of the services, resources and support they need.

Following the previous inspection, leaders worked with children and young people and their families to understand which SEND services were not working and why this was the case. Together, parents, children, young people and professionals developed a co-production charter that underpins their work. There has been a wealth of elearning sessions delivered to professionals, frequent briefings at special educational needs coordinator network meetings and workforce training to promote co-production across the local area. Leaders have ensured that most staff involve children, young people and their families in discussions and decisions about their individual support and about local provision now. There are 173 teams, services and individuals signed up to this charter.

Education professionals have worked with children, young people and parents to develop the Stockport entitlement framework. This framework sets out what partners





agreed should be ordinarily available in every classroom to ensure inclusion and curriculum access for children and young people with SEND. This is used across the local area by schools to audit the quality of their universal provision.

Children, young people and parents now routinely attend annual review meetings and are involved in the development of their EHC plans. This enables them to be more involved in making important decisions about their provision. Leaders have improved the offer to children and young people with SEND who are electively home educated (EHE). They have listened to the views of parents and carers with EHE children and young people and have removed some of the barriers to services, such as educational psychology and child and adolescent mental health.

While there has been considerable progress made in this area, leaders recognise that co-production is not yet fully embedded. There is still inconsistency and variability within and across teams and services. This leads to some children, young people and their families still feeling that they are not listened to.

### The area has made sufficient progress to improve this significant weakness.

■ At the initial inspection, inspectors found the following:

# A poor shared understanding by local area leaders of the needs of children and young people with SEND and their education, health and care outcomes.

Leaders across education, health and social care understand the needs and outcomes of their children and young people well now. Leaders are honest in their evaluation of the progress that has been made since the previous inspection and the work still to be done. They recognise that, so far, some of the actions that they have taken have not impacted on the lived experience of some children, young people and their families. While groups, including care leavers and young children, have a muchimproved experience now, some older young people with mental health needs and their families are yet to feel the benefit of leaders' actions.

Across the local area, staff at all levels recognise the considerable culture shift that has been made. Leaders' mantra that 'SEND is everyone's business' is now embedded in the culture of the local area. Leaders ensure that children's services and health teams are held to account for the education and health outcomes for children and young people with SEND. For example, headteachers are challenged robustly around the attendance, suspensions and academic performance of these children and young people. This challenge has made a positive difference to health and education outcomes, such as reduced waiting times for occupational therapy and fewer suspensions and exclusions for children and young people with SEND.





The local area's investment in training and support is paying dividends. The workforce's improved SEND expertise means that more children and young people have their needs identified earlier than at the time of the previous inspection. Moreover, this increase in early identification and assessment means that more EHC plans are issued to four-year-old children than any other age group. Added to this, professionals are more accurately identifying and assessing children and young people's needs so that they receive the most appropriate help and support.

### The area has made sufficient progress to improve this significant weakness.

■ At the initial inspection, inspectors found the following:

# Weak assessment of the effectiveness of the local area in improving outcomes for children and young people.

Following the previous inspection, leaders immediately established a joint SEND board to oversee the development and delivery of the written statement of action. Key to the success of the local area's new governance arrangements was the establishment of a reliable data set. This gave leaders an accurate starting point and enabled them to check progress across each of the priority areas.

Leaders' improved understanding of local area performance has helped them to develop an effective SEND strategy and joint commissioning plan. The delivery of these plans has made a positive difference to children and young people's outcomes. For example, more young children with SEND are achieving a good level of development at the end of the Reception Year. That said, leaders recognise that they have not yet captured parents' views well enough to understand the impact of their actions on families' day-to-day lived experience. Moreover, while leaders are adept at measuring outputs such as the numbers of staff participating in training, they are much less confident in evaluating the impact of the strategy on outcomes for children and young people.

Frequent checks on the outcomes data help leaders to pick up any emerging patterns and trends. Leaders use this information to help them escalate potential issues and take the urgent action when needed to halt any decline in outcomes.

Leaders have prioritised understanding the likely future demand for children and young people with SEND in the local area. They have drawn up long-term plans so that they will be better prepared to meet the likely future needs of children and young people with SEND. Leaders have already started to execute these plans. For example, they have redesigned the speech and language service to meet the predicted demand.





As the area was getting under way with executing their plans, the COVID-19 pandemic struck. Leaders refused to let this disrupt their plans. They adapted well to the challenges of the COVID-19 restrictions and have continued to use some of the some of the new ways of working into their post-pandemic practice. These new ways of working, alongside other improvements across the local area, are helping to mitigate the impact of COVID-19 on adolescents' mental health and wellbeing and the subsequent increased demand for services.

### The area has made sufficient progress to improve this significant weakness.

The area has made sufficient progress in addressing four of the five significant weaknesses identified at the initial inspection. As not all the significant weaknesses have improved, it is for DfE and NHS England to determine the next steps. Ofsted and CQC will not carry out any further revisit unless directed to do so by the Secretary of State.

Yours sincerely

### Pippa Jackson Maitland **His Majesty's Inspector**

Ofsted	Care Quality Commission
Andrew Cook HMI	Dr Sean O'Kelly BSc MB ChB MSc DCH FRCA
Regional Director	Chief Inspector of Hospitals and Interim Chief
	Inspector of Primary Medical Services
Pippa Jackson Maitland HMI	Lyndsey McGeary
Lead Inspector	Tessa Valpy
	CQC Inspectors

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