

13 December 2022

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Andy Williams, Chief Executive Leicester, Leicestershire and Rutland Integrated Care Board
Tom Common, Local Area Nominated Officer, Leicestershire

Dear Mrs Moore and Mr Williams

Joint area SEND revisit in Leicestershire

Between 14 and 16 November 2022, Ofsted and the Care Quality Commission (CQC) revisited the area of Leicestershire 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 27 March 2020.

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. The statement was declared fit for purpose on 16 October 2020.

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

The inspection was led by one of His 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, 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 two 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 arrangements for children and young people with SEND 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:

The absence of clearly defined joint commissioning strategy for 0 to 25 SEND provision.

Area leaders across education, health and social care have strengthened their working relationships since the initial inspection. Commissioners from Leicestershire, Leicester City and Rutland have improved their joint working procedures and processes.

A joint commissioning strategy for 2021 to 2024 has been created in partnership with parents and carers to ensure that the commissioning of services is appropriate to the needs of children and young people with SEND. Leaders have demonstrated their commitment, ambition and willingness to improve commissioning arrangements across the local area.

Leaders have significantly expanded the workforce for health professionals working with children and young people with SEND. There is increasing capacity for leaders in the integrated care board to improve the support for these children and young people and their families. There is now a sharper and more strategic focus on children and young people with SEND in the wider health service.

Leaders from social care, health and the local authority meet on a monthly basis to evaluate the support that can be provided to families with particularly complex needs. For example, they work collaboratively to ensure that families living in adverse circumstances with children and young people with SEND receive the right support at the right time.

Area leaders maintain a secure oversight of the joint commissioning strategy. They frequently review the outcomes of their actions to inform the progress of changes in services. For example, the implementation of changes to occupational therapy and speech and language therapy has begun. However, the programme is recent. Most children and young people with SEND and professionals working in school are yet to feel the benefit of the positive changes to these therapy services.

Some parents and carers are not aware of the joint commissioning strategy. Some are unclear as to how it supports professionals in education, health and social care to meet

their children's needs. Area leaders recognise the need to communicate more effectively with parents and carers so that they understand the purpose and benefits of the joint commissioning strategy. Leaders also aim to expand the involvement of children and young people with SEND in the future design and development of services.

The area has made sufficient progress in addressing this significant weakness.

■ At the initial inspection, inspectors found the following:

Systemic weaknesses in the quality of EHC plans, including the following: the drawing up of EHC plans; the inaccuracy with which the plans reflect children and young people's needs; the absence of good-quality outcomes in EHC plans; the inconsistency with which plans include contributions from education and particularly health and care professionals; and the lack of any formal quality assurance framework to improve new and existing plans.

The format of education, health and care (EHC) plans has been reviewed and redeveloped to better reflect the needs and provision for children and young people with SEND. Children and young people's outcomes link more precisely to their needs, interests and aspirations. Their views, and the opinions of their parents and carers, are woven well through newer plans. However, there are still too many existing EHC plans that need to be transferred to the new template.

There is now a clear framework to assure the quality of EHC plans. Leaders from education, health and social care work together to monitor and evaluate the quality of new plans. Leaders have strengthened their oversight of this process, including their monitoring of contributions to EHC plans by health professionals. Through this they have identified appropriate improvement priorities. For example, leaders have planned pertinent training for staff across health and the local authority to secure improvements in the writing of EHC plans and to ensure that proposed outcomes in these plans accurately match the assessments of need of children and young people with SEND.

The designated social care officer reviews all EHC plan requests. They carefully check social care contributions. For those children and young people with SEND without current social care involvement, their potential needs for such involvement are screened. When necessary, families are signposted to appropriate services or are put forward for assessments of their needs.

The proportion of children and young people with EHC plans in Leicestershire has increased significantly over the last three years. This has placed increased strain on the system and processes for the assessment of children and young people's needs. The increase has helped to exacerbate the serious decline in the number of new EHC plans completed in statutory timeframes. Too many children and young people are waiting too long for their identified needs to be met. Some currently miss out on educational provision while they wait.

Some parents and carers told inspectors of their frustration at the length of time they have to wait for EHC plans to be completed. They spoke of the distress such delays cause. They expressed their dissatisfaction and worries about the inaccuracies in their children's EHC plans. Some parents and carers feel that they must resort to mediation and tribunals to get what they need for their children. They are exasperated with the lack of communication from area leaders while they wait for news of the progress of statutory assessments of their children's needs.

There is a high number of children and young people's annual reviews completed without EHC plans being updated and amended. Too many EHC plans contain inaccurate and out-of-date information. Many plans have not been updated for more than a year. School leaders and parents and carers speak of their frustration when information from annual reviews is not reflected accurately in EHC plans. The inaccuracies have the potential to significantly affect the education, health and welfare of children and young people with SEND.

Area leaders understand the concerns of parents and carers. They are keenly aware of the potential risks for children and young people with SEND that arise from the delays in completing their EHC plans and annual reviews. Area leaders have revised their priorities for improvement to address these identified weaknesses. They have implemented a suitably focused plan to bring about the necessary improvements. However, this is in the very early stages. Leaders understand the need to work more closely with parents and carers to involve them in decision-making.

Professionals working in education, health and social care welcome the new 'Transforming SEND and Inclusion in Leicestershire' programme. They see it as a positive way forward to improve the timeliness of the drawing up of EHC plans and the updating of EHC plans after annual review.

The area has not made sufficient progress in addressing this significant weakness.

The area has made sufficient progress in addressing one of the two 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. This may include the Secretary of State using her powers of intervention. Ofsted and CQC will not carry out any further revisit unless directed to do so by the Secretary of State.

Yours sincerely

Stephanie Innes-Taylor
His Majesty's Inspector

Ofsted	Care Quality Commission
Mike Sheridan Regional Director	Dr Sean O'Kelly BSc MB ChB MSc DCH FRCA Chief Inspector of Hospitals and Interim Chief Inspector of Primary Medical Services
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cc: Department for Education
Clinical commissioning group
Director of Public Health for the area
Department of Health
NHS England