

Area SEND inspection of Gateshead Local Area Partnership

Inspection dates: 22 to 26 May 2023

Date of previous inspection: 6 to 10 February 2017

Inspection outcome

The local area partnership's arrangements lead to inconsistent experiences and outcomes for children and young people with special educational needs and/or disabilities (SEND). The local area partnership must work jointly to make improvements.

The next full area SEND inspection will be within approximately 3 years.

Ofsted and CQC ask that the local area partnership updates and publishes its strategic plan based on the recommendations set out in this report.

Information about the local area partnership

Since the previous inspection in 2017, there have been several changes to the senior leadership of Gateshead's SEND service. These include the appointment of a new director of children's services, a new director of adult services and commissioning, a new director of education, a new deputy strategic director for children's social care and a new strategic lead for SEND and inclusion.

In 2022, the commissioning of health services across England changed. On 1 July 2022, North East and North Cumbria Integrated Care Board became responsible for the commissioning of health services in Gateshead. This change included the appointment of a new director of nursing, a new director of place and a new executive chief nurse with lead responsibility for SEND.

Gateshead Metropolitan Borough Council commissions alternative provision for secondary-age young people through a single pupil referral unit (PRU). In addition, children and young people benefit from assessment places in additionally resourced mainstream settings (ARMS). For those children and young people who need residential provision, the council commissions a small number of out-of-area placements.

What is it like to be a child or young person with special educational needs and/or disabilities (SEND) in this area?

The 0 to 4 health visiting service implements the Healthy Child Programme well in Gateshead. This results in robust assessments and subsequent referrals at appropriate times. The SEND nursing team within the 0 to 19 service works to mitigate delays in services such as occupational therapy and the bladder and bowel service. Paediatricians in the 0 to 4 service work innovatively to see children with complex needs. They work with children and young people in clinics, at home or in school. This reassures parents and carers and reduces the risk of infection and transport issues.

Too many children and young people with SEND wait too long to access some health services, including mental health pathways, speech and language therapy, neurodevelopmental pathways and occupational therapy. In some instances, children who have been waiting on one pathway have to wait again if professionals transfer them to another service. This means that children and young people and their families experience further frustration and delay.

Children and young people with SEND have access to accurate school-based assessments. The high incidence needs team and low incidence needs team provide specialist support to professionals, parents and carers and children and young people. Most children and young people and their families speak positively about the support that they receive. They welcome the provision provided in ARMS and specialist settings. However, there are a growing number of parents and carers who opt to electively home-educate (EHE) their children. Some parents and carers feel that their child's needs cannot be met in their current school placements. Through the fair access panel (FAP), leaders provide effective support and guidance to these families including advice on alternative placements. Leaders monitor the number of EHE children and young people regularly and respond to any emerging trends.

Children and young people's access to the educational psychology team is inconsistent. Primary headteachers jointly commission an educational psychologist through the FAP. This means that primary-aged children who arrive in Gateshead with significant gaps in their educational history access prompt assessments. However, many other children and young people, including those in the PRU, wait too long to be assessed. Consequently, some of these children and young people do not receive specialist support as quickly as they need.

Young people at risk of, or who have been, permanently excluded access effective support and guidance. The virtual school and educational psychology team provide specialist training to staff who work with these young people. This helps to ensure that young people receive the support that they need to do well.

Young people with SEND who move into post-16 provision are supported well by their social care transition workers and the provider's specialist careers and guidance team for

SEND. Professionals encourage young people to share their views and aspirations in education, health and care plan (EHC plan) reviews. Young people are positive about the travel training available to them. They use this to access a range of educational and social opportunities independently.

Young people who are due to transition to adult social care receive their finalised continuing care plans too late. Despite effective systems for early identification and assessment of needs, the delayed finalisation of the plans means that young people and their families have little opportunity for review and consultation. Leaders have recognised this and have amended the 'Ages and Stages' document to ensure this process begins at an earlier stage.

The specialist knowledge of the Early Help team and Children with Disabilities (CWD) team means that for most children and young people, social workers complete assessments appropriately and at the right level. Children and young people benefit from established multi-agency partnership working. Social workers provide clear plans that support most families and contribute to the EHC plan assessment process.

What is the area partnership doing that is effective?

- Leaders across Gateshead have a determination to provide high-quality education and support to all children and young people with SEND. Leaders have invested in the continued development of the ARMS to ensure that they best meet the changing profile of needs. Post-16 young people with SEND, including those not in education, employment or training, receive a comprehensive package of support and guidance.
- Leaders mitigate the delays that some children and young people with SEND face when accessing the Children and Young People Service (CYPS). This includes the provision of family events to learn about strategies to improve sleep and occupational therapy support workshops. The offer from 'getting help' services, such as the emotional well-being team, remains in place while children and young people are on the CYPS waiting list.
- Leaders ensure that children and young people who live in residential settings out of area are in placements that meet their needs effectively. Social workers visit these children and young people regularly and know them well. The high needs panel and commissioning panel oversee each placement to help to ensure that they are suitable and safe.
- Leaders on the FAP listen to the views of children and young people and their families and match placements to their needs. The FAP team works closely with a range of professionals to ensure that children and young people attend well and have a reduced risk of permanent exclusion.
- The parent carer forum actively contributes to the strategic developments for children and young people with SEND. Representatives of the forum are confident that leaders listen to their views and concerns. Leaders commission Special Educational Needs and Disabilities Information Advice and Support Services support to ensure that parents and carers have effective impartial advice on issues

such as EHC plan applications and SEND tribunals.

- The SEND involvement worker and SEND youth ambassador ensure that they share the views of children and young people with SEND with strategic leaders across the partnership. They work closely with the Gateshead youth forum to encourage children and young people with SEND to access opportunities in their communities. Through the inclusion of animation and recordings, the SEND involvement worker and youth ambassador have increased the accessibility of the local offer.
- Leaders of the virtual school provide effective support for children and young people with SEND in care. The virtual school team provide useful training for key stakeholders in health and education to improve their understanding of the impact of trauma on school attendance and well-being. This is helping to strengthen provision for children and young people.
- Leaders across the partnership have a combined strategy for workforce development. This helps to ensure that the workforce can respond to the growing level of children and young people with neurodevelopmental and social, emotional, and mental health needs.
- Coordinated multi-agency working for children and young people supported through the early help and CWD teams makes a positive difference to children and young people and their families. This includes the provision of parent information sessions on autism spectrum disorder and individualised sex and relationships education.
- The dynamic support register is well established for children with learning disabilities or autism spectrum disorder. A multi-agency team provides individualised support, such as access to appropriate housing and respite care, to meet the needs of these children and young people and their families.
- The specialist speech and language therapy team support young people until their 19th birthday. The team works well to ensure that any young people who require ongoing support receive an appropriate transition to adult services or specialist providers.
- Leaders ensure that the administration of EHC plan assessments is timely. The proportion of EHC plan assessments completed within the statutory 20-week target is well above national figures. Amended plans are typically published in a timely fashion. However, the quality of these plans is variable.

What does the area partnership need to do better?

- Parents and carers express concerns that there is a lack of specialist secondary school provision for children and young people with physical needs that also provides opportunities to obtain academic qualifications and accreditations. This limits the post-16 opportunities for some children and young people with SEND.
- Leaders across the partnership do not plan strategically well for the future education, health and care needs of children born with complex needs. As a

result, these children sometimes do not receive the specialist provision they require soon enough.

- In addition, some parents and carers find communication with the SEND team challenging. They do not feel their views are listened to and understood, which creates unnecessary strain. Some parents and carers struggle to secure EHC plan assessments which can delay admission to specialist settings.
- Contributions to EHC plans from different partners are variable. Health representatives struggle to attend meetings due to the pressures of workload. Where children and young people have social care involvement, contributions from social workers are often limited and do not provide enough detail to be helpful. Furthermore, the authorised officer delays some applications for EHC needs assessments without prior educational psychology involvement. This hinders the identification and assessment of children and young people’s needs.
- Some social work assessments of children in need with SEND do not provide a holistic view of children and young people’s history and lived experience. This includes a lack of consideration of their ethnicity, language, religion and culture. This means that some parents and carers struggle to engage with and understand the support being provided.
- A small number of children and young people with SEND who are eligible for support through the short breaks service experience long waiting times. This leaves some children and young people with SEND with limited opportunities for social interaction and development and contributes to pressure on families. Leaders have increased the capacity of the service and are increasing access to personal assistant support to help mitigate these delays.
- The 18 to 25 offer in health is at times inconsistent. Most young people are transferred to adult services around their 18th birthday; however, young people do not receive the same level of support provided by children’s services. Some young people with additional needs are unable to access adult services easily.
- Too many children and young people wait longer than they should for specialist services such as speech and language therapy, occupational therapy and neurodevelopmental assessments. Leaders have limited oversight of the significant waits that children and young people experience. This has a negative impact on the progress that children and young people make and on the identification of appropriate provision to meet their needs. Leaders have seen success in improving the waiting times for the 0 to 4 assessment pathway. They are building on this success to improve in other areas. However, leaders have not identified sufficient support for families while they wait for other services.
- Parents, carers and professionals across the partnership do not clearly understand the Gateshead mental health support offer. Furthermore, leaders lack secure oversight of children and young people as they move through the service. Consequently, leaders cannot evaluate fully the impact these services have on children and young people with SEND.

Areas for improvement

Leaders in health should ensure that plans to target the reduction in waiting times for services clearly identify the support that children and young people and their families will receive while waiting. These plans should contain ambitious timescales for improvement and clear monitoring and evaluation procedures.

Leaders in health should ensure there is clear oversight of children and young people as they move through the emotional well-being and mental health support systems in the area. Leaders should provide clear and consistent information to children and young people, families and professionals on the pathway.

Strategic leaders across education, health and care should ensure that they provide clarity and consistency of expectations on the level of contribution from all agencies to continue to improve the quality of the EHC assessment and review process.

Strategic leaders should continue to improve the transitions from child to adult services in health, education and care. They should ensure that the strategy for preparation for adulthood starts from the earliest years, particularly for children with complex needs.

Leaders within the SEND service should improve communication between health, education, care and parents and carers to improve the experiences for children and young people with SEND and their families. They should further develop the role of the SEND caseworkers to strengthen communication. This should include tailored communication for parents and carers new to the country or who speak English as an additional language.

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Local area partnership details

Local authority	Integrated care board
Gateshead Metropolitan Borough Council	NHS North East and North Cumbria
Helen Fergusson Director of Children's Services and Lifelong Learning	Sam Allen CEO NHS North East and North Cumbria Integrated Care Board
www.gateshead.gov.uk	Northeastnorthcumbria.nhs.uk
Civic Centre, Regent Street, Gateshead NE8 1HH	Riverside House, Goldcrest Way, Newburn Riverside (Business Park), Newcastle upon Tyne NE15 8NY

Information about this inspection

This inspection was carried out at the request of the Secretary of State for Education under section 20(1)(a) of the Children Act 2004.

The inspection was led by one of His Majesty's Inspectors (HMI) from Ofsted, with a team of inspectors, including: two Ofsted Inspectors from education and social care; a lead Children's Services Inspector from Care Quality Commission (CQC); and another Children's Services Inspector from CQC.

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