

Area SEND inspection of Middlesbrough Local Area Partnership

Inspection dates: 9 to 13 October 2023

Date of previous inspection: 8 to 10 July 2019

Inspection outcome

The local area partnership's special educational needs and/or disabilities (SEND) arrangements typically lead to positive experiences and outcomes for children and young people with SEND. The local area partnership is taking action where improvements are needed.

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

Ofsted and Care Quality Commission (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 2019, there have been several leadership changes in Middlesbrough Council Children's Services. These include changes to the director of children's services, the director of children's care and the head of safeguarding and care planning. During the inspection, a new executive director of children's services took up a substantive post.

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 Middlesbrough. This change included the appointment of a new executive chief nurse with lead responsibility for SEND.

Middlesbrough Council commissions alternative provision for permanently excluded pupils through several registered settings. One provider supports pupils in key stage 1. Another provider supports pupils in key stages 2, 3 and 4. A number of registered alternative education providers add additional capacity for children and young people who need additional support away from mainstream education. An increasing number of children in mainstream settings access SEND assessment places through specialist settings. Some school age children with SEND attend places in additionally resourced mainstream settings.

What is it like to be a child or young person with SEND in this area?

Children and young people with SEND and their families are valued, visible and included in Middlesbrough. Local area partners work to a shared vision that 'Middlesbrough children matter'. This vision is woven through all decision-making across the partnership. To a high degree, leaders collaborate to secure the best possible outcomes for all ages of children and young people with SEND.

Children and young people typically receive the right help at the right time. Their education, health and care needs are identified accurately and assessed in a timely and effective way. Children and young people with education, health and care (EHC) plans and those children and young people with SEND support plans are closely monitored by SEND partnership leaders. Leaders generally ensure families are kept well informed about the provision to meet their children and young people's SEND needs through the local offer website, newsletters and an active parent and carers forum.

Children and young people are typically well supported when accessing health services. They do not have to wait for diagnosis to access appropriate care and treatment. Speech and language therapy, for example, offer an open referral system and have a robust triage process to ensure children and young people with SEND are placed on the right pathway to meet their needs at the right time.

Leaders actively engage with the voice of children and young people to ensure they feel part of the community. Children and young people with SEND of different age groups support each other. This is through well attended SEND conferences throughout the year. They share information about next steps in education or towards adulthood. Children and young people learn about pathways to further education and work experience. Such initiatives have led to a notable number of children and young people with SEND achieving employment. Most children and young people are valued, visible and included in their communities. They gain confidence from their educational setting. Staff support them to access activities in the community, such as visiting the theatre and playing sports for local teams.

Partnership leaders actively engage and work with children, young people and their families. They work with members of the Middlesbrough parent carer forum well. As a result, members of the parent carer forum feel valued and have a voice. They say that the local area partnership communicates with them well and that they feel listened to. This ensures the views and experiences of children, young people and their families are heard. Representatives of the parent carer forum are involved in strategic decision-making that benefits children and young people. For example, they are kept aware of local priorities and the progress of initiatives such as supported internships. Through the local offer website and community events that include regular coffee mornings, children and young people with SEND and their families share their experiences and make their voice heard.

Leaders commission services and provision to meet the needs and aspirations of children and young people. This includes effective commissioning arrangements for those in

alternative provision. Leaders work closely with schools to ensure that any children and young people who are placed in alternative provision remain in contact with their home schools through frequent review meetings. School leaders and partnership leaders effectively check the quality of provision twice each year.

Children and young people's SEND needs are identified and promoted across children's social care. Practitioners have a good understanding of the multi-agency support services available and refer children and young people for additional support as required. Children and young people's care plans typically reflect their voice. Social workers promote contributions from families. Meetings are typically well attended by partner agencies. This ensures that for the majority of children and young people, support is provided in a timely way. Commissioning arrangements for children and young people needing out-of-area residential special school placements are strong. Children and young people's progress is effectively monitored to ensure that the placement continues to meet their SEND and care needs well.

What is the area partnership doing that is effective?

- Children, young people and their families typically speak highly of their lived experiences and the support they receive. They feel included in decision-making that involves themselves. Leaders engage with parents and carers to ensure they have a voice. They engage with families when implementing and developing new service offers, for example developing a parent letter to explain consent for the dynamic support register. They are also visible and available at events such as parent carer forum meetings. The parent carer forum members say leaders largely communicate with them well. Parental views and the voice of the child in EHC plans is well documented.
- Leaders prioritise preparation for adulthood. They have ambition for children and young people with SEND. Children and young people are supported well to develop life and employability skills. Leaders have developed a '50 futures' work experience project to promote employment opportunities. Since its launch, the number of work experience pathways has grown beyond 50, and has led to most participants gaining employment. This forms part of leaders' local area regeneration strategy and is threaded through leaders' strategic planning.
- Children and young people with repeated school suspension or low school attendance are supported using a multi-agency approach. Leaders meet frequently to ensure children and young people receive the right support. They target intervention to ensure it meets individual needs well. This forms part of the local area partnership inclusion model to promote positive attendance and reduce suspensions.
- Leaders have a clear strategy to support children and young people that face permanent exclusion through a pupil inclusion panel. Registered alternative provision is used well to support children and young people experiencing permanent exclusion. The partnership works closely with schools to track the numbers of children and young people at risk of suspension and permanent exclusion and to identify their individual needs. Leaders have increased the

number of registered providers running alternative provision. They have identified appropriate actions to improve the early identification of needs in schools to help reduce the numbers of permanent exclusions and the high number of suspensions locally. This is particularly the case for children and young people with SEND support plans.

- Children and young people typically have their needs assessed and met at the point of entry to all health services. This means that they do not have to wait for the correct care and treatment. If there is a wait to access services, children and young people are referred to intermediate services that offer appropriate support, for example support and advice to manage behaviour and improve sleep routines.
- Children and young people can access a range of social, emotional and mental health provision within the local area. There is an open referral system and robust triage mechanism. As a result, they typically access the right pathway to meet their individual needs in a timely manner.
- The designated clinical officer (DCO) attends parent carer forum meetings. This promotes one-to-one opportunities to understand families' needs in the area. The DCO attends special educational needs coordinator meetings. As a result of this engagement work, they are aware of children and young people's health needs in schools.
- The dynamic support register process was co-produced with parents and carers. This ensures that explanatory leaflets and guidance are user friendly. Leaders have developed a 'pre-DSR' list, identifying those children and young people at risk of hospital admission or placement breakdown regardless of their diagnosis. This means that the most vulnerable children and young people get help at the earliest opportunity.
- Commissioners of the neuro-developmental service listen to recommendations from practitioners to improve waiting times. Advanced nurse practitioners work alongside community paediatricians to complete the diagnostic process in a timely manner. A robust holistic assessment is completed that involves children and young people being assessed at home and in school by two independent practitioners.
- Children and young people's SEND needs are identified and promoted across children's social care. As a result, practitioners have a secure understanding of the multi-agency support services available to children and young people with SEND. They refer them for additional support as required.
- Children and young people's care plans reflect their voice. Social workers promote contributions from families. Care meetings are well attended by partner agencies. This ensures that, for most children and young people, support is provided in a timely way. If there is delay, social workers challenge barriers and work to ease the impact on children.
- Social workers consider plans for children and young people's transitions between services and placements at the earliest opportunity. This helps children, young people and their families feel secure about their next steps.
- The joint commissioning arrangements for children and young people requiring

out-of-area residential special school placements are effective. Children and young people's progress is closely monitored. This ensures that the placement continues to meet their individual SEND and care needs.

What does the area partnership need to do better?

- Some parents and carers express concerns that they wait too long for EHC plans to be updated after annual reviews. Draft and final EHC plans are not consistently shared with health professionals. The health and social care contribution to EHC plans is varied. Leaders have identified this and introduced a social care pathway to improve professionals' contributions. As a result, newer EHC plans accurately reflect the individual needs of children and young people with SEND. In addition, the SEND inclusion team workforce has grown to cater for the increased demand in the assessment and issuing of EHC plans.
- Some EHC plans do not always contain the full picture of the child and young person's needs. As a consequence, the current needs of some children and young people are simplified or not accurately represented. To improve this, the DCO and designated social care officer check the quality of EHC plans with key stakeholders. A selection of EHC plans are sampled each term to ensure they accurately reflect the needs of children and young people and the support to be made available to them. Following the strengthening of these checks, the quality of information included in EHC plans is improving.
- Professionals' reports and advice notes are slow to be shared or are not always included with EHC plans, as children and young people move between settings. This means that important information is not consistently shared in a timely manner. As a result, providers do not always have a full picture of an individual's needs to provide support.
- Children and young people with SEND support plans in secondary schools receive more suspensions than any other group. This negatively impacts their learning and attendance. Leaders are engaging schools and proactively identifying packages of support for interventions to reduce the number of suspensions locally, but progress is limited.
- Leaders do not consistently keep schools informed where children and young people are placed during the process of permanent exclusion. Some schools must request information and chase up the movements of children and young people. This causes frustration and uses staff resources needlessly.
- Some children and young people are not able to access social provision in the community due to broken equipment such as hoists at the swimming pool or swings at the park. Children and young people with physical disabilities have limited access to recreational and sports activities. Parents and professionals highlighted a lack of provision within the area for children to access. These include inclusive sports and other social activities that make children and young people feel visible and valued.
- Access to learning disability services is a challenge without a formal diagnosis.

Children and young people must receive a cognitive assessment by the child, adolescent mental health service 'Get more help team'. Professionals highlighted the challenges and frustration of not having a formal pathway for both families and professionals. Consequently, some children and young people are not able to access specialist learning disability provision within health and social care.

Areas for improvement
Leaders should continue to implement their strategy to reduce suspensions. They should further collaborate with school leaders to support and challenge them to provide early intervention and reduce suspensions of children and young people with SEND in the local area.
Leaders have identified the need to improve the learning disability pathway. They should strengthen the systems and processes to correctly identify the needs of children and young people to ensure they have access to the right support throughout their lifetime from education, health and social care.
Leaders should continue to strengthen the quality of EHC plans and improve the timeliness when issuing EHC plans after annual reviews. EHC plans should capture the advice of professionals to accurately reflect the ongoing needs of children and young people, and their families.

Local area partnership details

Local authority	Integrated care board
Middlesbrough Council	NHS North East and North Cumbria
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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 HMI from education and social care, a lead Children’s Services Inspector and a Children’s Services Inspector from the CQC.

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