

Area SEND inspection of Wakefield Local Area Partnership

Inspection dates: 18 to 22 March 2024

Date of previous inspection: 3 June 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 the 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

Wakefield Metropolitan District Council and NHS West Yorkshire Integrated Care Board (ICB) are responsible for commissioning and planning the services for children and young people with SEND in Wakefield.

Over the past four years, there have been several changes to senior leadership positions in the local authority's services for children and young people. A new Director of Children's Services was appointed in October 2022. The commissioning of health services changed across England in 2022. On 1 July 2022, NHS West Yorkshire ICB took over the commissioning of health services from Wakefield clinical commissioning group. Wakefield District Health and Care Partnership is the strategic place partnership for Wakefield District, which is within the broader West Yorkshire ICB arrangements.

The local authority commission Evolve and Enrich Academy Trusts and directly deliver alternative provision through Pinderfields Hospital Pupil Referral Unit to provide education for children or young people who cannot attend school due to health needs or for those who are at risk of or have been permanently excluded. Schools and academies are responsible for their own checks on the suitability of any alternative provision (AP) they commission independently.

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

Children and young people with SEND are at the heart of decision-making about their individual plans and support across education, health and social care. Practitioners gain an understanding of the child or young person's world quickly. This information is accurately captured and included in the education, health and care (EHC) plans. Voluntary sector organisations, such as the parent carer forum (PCF) and Wakefield early support, advice, information and liaison service, support and advise parents and carers to obtain the correct identification of needs.

Children and young people do not have to wait for a diagnosis in some services to receive the right help and support at the right time. There is an innovative and individualised approach to the support that they receive. For example, infants who receive neonatal intensive care are proactively screened for any emerging speech, language and communication delay through monthly paediatric led clinics. This means that they can access support at the earliest opportunity.

Children with emerging emotional and mental health needs have access to a range of effective and timely support. Mental Health Support Teams in schools have had a positive impact. There is a single point of access for child and adolescent mental health services (CAMHS) and initial assessments are timely. Healthy Young People's Clinics are run by school nurses in each secondary school. They provide support for managing anger, self-harm, anxiety and low mood.

The dynamic support register is effective in preventing in-patient admissions for children and young people with a learning disability, autism or both. Rates of admission to hospital are low. Children and young people at risk of admission without a diagnosis of a learning disability or autism can be included. This means more children and young people benefit from the process.

Many children and young people with SEND receive the help they need to succeed in school. This starts from the early years. In schools, health professionals, social care and school staff hold family sessions for parents to discuss any education or health concerns they may have before their child starts school. This allows staff to plan support for individual children, ensuring they are well prepared for their next steps into early years. Leaders work proactively with schools to identify children in Year 6 who may struggle with transition to secondary school. Children receive targeted interventions to prevent issues in the future which might affect learning and attendance. In further education, partners such as the preparation for adulthood team and careers advisers work together to plan transitions for young people. Young people who are preparing for adulthood have detailed educational assessments within their EHC plans. However, the support that young people should receive from social care and/or health when transitioning into adulthood is not as detailed.

Children and young people benefit from a plethora of activities outside of school. This includes a range of short break offers. Social workers within the local authority

understand the importance of encouraging children and young people to positively participate in social activities.

What is the area partnership doing that is effective?

- Leaders across the partnership are ambitious and innovative. Using a collaborative approach, they constantly look for new ways of working to improve their services. Leaders use data sharing systems to review the needs and outcomes of children and young people to help them shape services across health, social care and education. Leaders use regular quality assurance to identify and address gaps in service. The sufficiency strategy produced by the local area accurately reflects need. There are several posts that are jointly funded by health and the local authority, which supports jointly commissioned provision and joint working.
- Leaders actively engage with the PCF, whose members are seen as equal partners. Recommendations from local youth forums and the PCF have a direct impact on strategic decision-making. The PCF has been instrumental in alerting leaders to key issues for families. The PCF feeds back to parents regularly about what has been done to improve the service for children and young people with SEND. For example, parents and schools can ask for advice and guidance through a helpline if they have any questions about a child with SEND.
- Leaders are tenacious about gaining children, young people and their families' views at both a strategic and individual level. For example, family liaison officers visit children at home and create 'pupil passports', which capture their views. In addition, practitioners review children and young people's EHC plans to gain valuable insights into how services can improve. Leaders use this information to shape services such as promoting access to autism and sensory services for parents who choose to electively home educate.
- Leaders understand and act on the needs of different cohorts of children and young people. For example, there is an increase in the number of young people presenting with mental health and social anxiety. The educational psychologist service provides all schools with training on how to support children and young people with these needs.
- Leaders effectively commission services and provision to meet the needs and aspirations of children and young people. This includes commissioning arrangements for children and young people in AP. Leaders have improved the AP they offer. For example, they are supporting the pupil referral unit to open a vocational centre that will offer courses in construction, catering, motor vehicle maintenance and hair and beauty.
- Leaders work effectively with schools to improve the attendance of children and young people with SEND. The SEND attendance officer and education welfare officers provide targeted support for families to help improve attendance. They regularly visit identified families to support and offer a range of strategies. This results in improved attendance for those children and young people.
- Social workers, the virtual school and commissioners regularly monitor the provision for children and young people in residential settings out of area. There is a strong

framework in place to ensure that children and young people are both safe and that their needs are met. The local area responds quickly when needs change.

- Effective partnership working ensures that children and young people in Wakefield benefit from a range of services to support their needs. There is a culture that is based on mutual respect, understanding and a willingness to challenge each other. As a result, when opportunities for new services are identified, these are planned in collaboration with education, social care, health and the PCF. During the inspection, a practitioner stated, 'We are Wakefield.' This accurately reflects the level of partnership working.

What does the area partnership need to do better?

- Leaders provide and commission a comprehensive package of training to ensure that practitioners effectively meet the needs of children and young people. For example, all schools have received training through the educational psychology service to raise awareness of the importance of early intervention. Leaders recognise the importance of carrying out the Oliver McGowan training, and plans are in place to deliver this.
- Permanent exclusions and suspensions in Wakefield are too high. Local area leaders recognise this and are working closely with schools and multi-academy trusts to address this.
- Some families do not access the information provided through websites and parent coffee mornings about the range of community activities available for children and young people. This means their children miss out on these valuable opportunities.
- There is an increase in demand for respite care for young people over 18 years old. The local area has identified a gap in provision and is proactively expanding resources within existing provision to meet this need.
- Procedures for transition to adulthood in some health services and for those children and young people known to social care are underdeveloped. Young people who are preparing for adulthood have detailed educational assessments within their EHC plans. The health and social care elements are not strongly reflected within these plans. The plans lack clarity on the support available from health and adult services. Leaders have introduced pilot initiatives to identify a solution to this problem. It is too early to see the benefits of this development.
- Children and young people wait for too long for neurodevelopmental assessments and diagnosis. However, there is a range of support available to children and young people while they are awaiting assessment. This includes one-to-one support and group work. Leaders continue to develop and implement strategy to reduce these waits.
- Children and young people wait too long for some specialist core CAMHS. Leaders have plans to address this and provide families with support while they wait.
- Every school in Wakefield has a 'mental health in schools' team. Children and young people who require more specialist support can access CAMHS quickly via this team. However, children and families being supported through Compass require a formal referral into CAMHS. This can create delays in children and young people accessing

CAMHS. Leaders recognise this as an area for improvement.

- Most children have their speech and language needs identified, assessed and met in a timely way. There are some children who wait too long to be seen in speech and language community clinics. There are well-advanced plans to reduce waiting times.
- For children and young people who need extra support and/or help and protection, social workers create detailed, multi-agency plans to positively meet and manage those needs and risks. Some children receive imaginative packages of support from their early help workers that adapt to the child's changing needs. These encompass both partner agencies and support from the family network. Some early help plans for children and young people with SEND are more variable in quality. As a result, this leads to the support being less robust.

Areas for improvement

The local area partnership should strengthen its work to further address access to, and waiting times in, community clinics for speech and language therapy, specialist CAMHS and neurodevelopmental assessment pathways.

The local area partnership should strengthen the contribution from health and social care to transition to adulthood planning within the EHC plan process.

Local area partnership details

Local authority	Integrated care board
Wakefield Metropolitan District Council	NHS West Yorkshire Integrated Care Board
Victoria Schofield, Director of Children's Services	Rob Webster, Chief Executive Officer
www.wakefield.gov.uk	www.westyorkshire.icb.nhs.uk
Town Hall Wood Street Wakefield WF1 2HQ	West Yorkshire Integrated Care Board White Rose House West Parade Wakefield WF1 1LT

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 from the CQC; and another Children's Services Inspector from the CQC.

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