# Area SEND inspection of Waltham Forest Local Area Partnership

Inspection dates: 10 to 14 February 2025

Dates of previous inspection: 23 to 27 January 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 three 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

London Borough of Waltham Forest and the North East London Integrated Care Board (ICB) are jointly responsible for the planning and commissioning of services for children and young people with SEND in Waltham Forest.

The commissioning of health services changed across England in 2022. On 1 July 2022, North East London ICB became responsible for the commissioning of health services in Waltham Forest.

There has been stability in leadership across health services, including the Designated Clinical Officer. However, across the local area partnership, there have been several leadership roles that had been filled by interim appointments since the last inspection. The permanent Strategic Director of Children's services was appointed in July 2024, who, alongside health leaders, is coordinating services for children and young people with special educational needs and disabilities.

Waltham Forest commission alternative provision (AP) from several providers for a range of purposes. The offer includes AP for children or young people who are unable to attend a school due to their social, emotional or medical needs. There are also educational settings for those children or young people who have been, or may be, at risk of being permanently excluded.

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

Since the last inspection, the local area partnership has been through a period of changing leadership and had challenges with retaining staff. This has had a negative impact on the experiences of children and young people with SEND and their families. Although, more recently, the SEND workforce and leadership team has been strengthened, there are some important areas where children, young people with SEND and their families have a varied experience.

Some parents and carers and young people told inspectors that they have lost confidence in the partnership's governance of SEND services. Workforce instability in the SEND team has had a negative impact on the quality of communication. This includes the sharing of information about, and navigating, the local offer. For many parents, the Parent Carer Forum (PCF) is a valuable and well-utilised resource for sharing important information about services and support available. A number of parents in discussions and surveys described the PCF as a 'lifeline'. Similarly, the SEND information, advice and support service is well established.

Some children and young people told inspectors there have been some creative and successful opportunities for co-production that have resulted in positive change. For example, 'young advisers' support developments and recruitment in mental health services. Parents have also influenced the creation and establishment of two 'family navigator' roles within the early help SEND offer. However, the quality of co-produced activity is variable. Some parents told us they feel ill-informed about service development or are not kept up to date about how their contributions influence change and improvements.

Many children have their SEND needs identified early. They benefit from early intervention supported by highly effective early help practitioners and early years provisions. There is a multi-agency offer, from education, health and social care, which includes the early years inclusion pathway and the breadth of support for children with SEND within family hubs. This contributes to high take up by disadvantaged children of free early education places. However, the early identification and intervention for children aged five and above is more varied. For example, the graduated approach in some education settings is not consistently implemented and therefore some pupils' needs are not robustly understood until they reach crisis point or once they attend AP.

Some children and young people with speech, language and communication needs receive prompt advice and guidance without a referral to the speech and language therapy team. This is because speech and language therapists are embedded within the community through therapy drop-ins and group offers within Family Hubs. Children and young people also benefit from the co-delivery of health and social care occupational therapy services. Parents and carers do not have to repeat their stories and a shared patient record means information about children's and young people's occupational therapy needs are shared and accessible to all members of the team. However, for some other children and young people with SEND, waiting times to access specialist health

services are too long. For example, many wait up to a year for an autism or attention deficit and hyperactive disorder (ADHD) assessment.

Children known to the children with disabilities social care team benefit from extensive support that includes domiciliary care and short breaks. There is flexibility in the timing of transitions to adult services to ensure that this happens when it is in the child's and their family's best interests to do so. However, the experience of some young people with SEND transitioning to adult services is more varied. For example, children and young people who do not meet the threshold for statutory children's social care services, and some young people with less complex health needs, do not routinely receive timely support with preparation for adulthood.

Sometimes, EHC plans do not reflect the children's and young people's needs or identify specific provision to meet their needs successfully. Although there have been some improvements to the quality of recently produced EHC plans, there is much variability in quality between plans. As a result, some children and young people do not receive the support and guidance they need. One consequence of this is that some children and young people with SEND whose needs are poorly identified receive suspensions or are permanently excluded from their education settings.

## What is the area partnership doing that is effective?

- There is a shared ambition to improve service provision and delivery across education, health and social care in Waltham Forest for children and young people with SEND. Leaders have identified key priorities and are taking intelligent actions to address these. Across the partnership, at both strategic and operational levels, there is emerging positive change. Commissioning of services that meet the needs and aspirations of children and young people is the foundation for this, which is evident in the partnership's sufficiency strategy and a local partnership SEND transformation programme, which are starting to demonstrate impact.
- Many children and young people attend inclusive education settings, where appropriate arrangements are put in place to enable them to achieve well academically. They utilise a range of specialist practitioners across education, health and social care to ensure children and young people with SEND are included and can participate.
- Children and young people referred to health services with complex health and education needs are triaged by a multi-agency panel with representation from health, care and education. This ensures that they are seen by the right health services, as well as referred on to early years and early help pathways for support. There is strong multi-agency working for young children with complex health and learning needs. For example, the physiotherapy service work jointly with early inclusion workers and complete joint home visits.
- Family Hubs adopt a multi-agency approach to support the early identification of SEND needs for young children. All relevant professionals are invited to attend team-around-the-family meetings which promote effective information-sharing about children's holistic needs so that plans can be developed to support children to

progress.

- Children and young people on neurodivergent pathways are assessed by a multi-disciplinary team of doctors, nurses, therapists and psychologists, who provide sensitive and carefully considered assessments based on the needs of the children and young people. Autism and ADHD assessments are integrated so children and young people do not have to repeat their stories or wait on two pathways.
- Transitions into adult health services are positive. For example, transition clinics are held for all young people approaching adulthood who attend special schools. These health-focused clinics bring together health, social care and education practitioners from children's and adult's services to jointly plan the young person's health care plan for when they leave school. This is also evident in child and adolescent mental health services (CAMHS), which have a strong 18 to 25 offer to support young adults who are transitioning to adult mental health services.
- Across Waltham Forest, children and young people with a learning disability benefit from a high-quality annual health check with their GP.
- Practitioners across education, health and social care receive a wide range of communication training to support those with speech, language and communication needs. For example, health visitors are trained to provide an optimal communication environment for health reviews or the 'all talk' programme delivered across many early years settings and nurseries. This ensures communication development and communication needs are embedded in routine practice.
- There are clear processes in place to ensure that children and young people with SEND live in residential educational and care placements that have been quality assured by statutory providers. Placements are carefully chosen to ensure the education, care and health services available meet the needs of the child or young person. The virtual school is involved in the ongoing monitoring and quality assurance processes to ensure suitability of placement.
- Children and younger people in residential education and care settings benefit from regular visits from their allocated social worker and oversight from their independent reviewing officer. Children and young people who are accessing 38-week residential placements also have consistent foster placements to return to during school holidays. This provides children with stability within a family setting.
- Early help adult link workers support vulnerable adults with SEND to access a range of groups and activities, which promotes inclusion and reduces isolation for some adults.
- The local area works well with school leaders, for example through the work of fair access panel (FAP). The FAP helps to ensure that children who need a fresh start at a new school are quickly allocated a place that best matches their needs. Moving to a new school often takes place after children have been given effective support at AP.
- The AP strategy includes plans to improve the AP offer in the local area. Young people and schools have been included in this development. Many children and young people on AP intervention placements are successfully supported to reintegrate into mainstream or specialist settings.

## What does the area partnership need to do better?

- There are variable waits to access specialist intervention on mental health pathways, in occupational therapy and speech and language therapy services. Although teams can provide a flexible offer to provide immediate support if there is an urgent requirement, some children and young people wait too long for appointments.
- Leaders have rightly recognised the need for additional capacity in health services to meet demand. Additional investment in therapy and autism assessment and universal services has recently been secured. Recruitment to clinical posts is now underway, and this is aimed at reducing waiting times. Children and young people with SEND and their families are not currently experiencing the benefit of this investment.
- The delivery of the healthy child programme is improving, although there is more work to do to improve uptake of mandated checks for one- and two-year-olds. There is a clear recruitment strategy with an aim to increase the number of specialist roles to support children and young people with SEND.
- Some children and young people wait six months or more for a wheelchair, others receive equipment that is faulty, the wrong size or unsuitable to meet their needs. These issues impact on all aspects of children's and young people's daily lives and limit their opportunities and outcomes. Leaders are addressing these issues with the providers but recognise there is more work to do so that all children and young people have the wheelchair or equipment they need to thrive.
- Children and young people who experience continence issues receive support from their health visitor or nurse who will prescribe continence products as needed. A small number of children and young people who require more specialist assessment and support wait too long. This has an impact on all aspects of the child's and their family's lives.
- Leaders recognise that the strategic use of data is underdeveloped. As a result, leaders have not been in a position to fully understand the needs and outcomes of children and young people with SEND in Waltham Forest. Work is underway to strengthen the oversight and monitoring of the SEND improvement programme, and a new local authority data system and a SEND dashboard are in development. As a result, the commissioning of services lacks precision and some targeted interventions are not as well focused or as effective as they could be.
- There is recognition from the local area partnership that their strategic work around improving preparation for adulthood (PfA) for young people with SEND is not where they need it to be. There are some examples of effective work, such as transitions into adult health services. However, the education and social care planning and coordination in preparing young people for adulthood are not developed.
- There is no overarching co-production strategy or charter in Waltham Forest. However, there is an agreed need for a memorandum of understanding across the whole SEND system with children, young people and their families. There are some examples of co-produced workstreams, such as the recommissioning of transport services that have parents embedded within the commissioning and future contract

management.

- EHC plans are not consistently being updated when there have been significant changes or for transitions to different key stages. Provision and outcomes set out, including in PfA, do not routinely reflect need or the circumstances of the child or young person.
- Some young people receive their EHC plan too late in their education. For some they receive them after they have been permanently excluded from school or when they have stopped attending due to mental health challenges. Some professionals do not receive copies of EHC plans, and some plans are finalised without meaningful health and/or social care advice. This means some children and young people are not accessing the right support across education, health and social care.
- The quality assurance of EHC plans and annual reviews lacks rigour and is not robust. Currently, there is no coordinated multi-agency approach to moderate EHC plans and annual reviews for quality, effectiveness or weaknesses. The local area has identified this as a priority need.

## Areas for improvement

| **Areas for improvement** |
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| Leaders across the partnership should improve communication with parents to ensure that:<br>■ services and ways of working are meaningfully co-produced with children and their families;<br>■ parents are well informed about service developments and how their contributions have influenced change and improvements; and<br>■ they have the knowledge of, and can navigate, the local offer and can access the range of support services and resources in their communities. |
| Leaders across the partnership need to strengthen how well children and young people are effectively prepared for adulthood. They should focus on:<br>■ ensuring that there is a broad offer for education, employment and training;<br>■ ensuring that annual reviews from year 9 represent children's and young people's aspirations and ambitions;<br>■ ensuring that amendments to EHC plans lead to coherent provision for the young people to achieve the best outcomes in adult life; and<br>■ ensuring that those children and young people who do not meet the threshold for statutory children's services have timely referrals for care act assessments. |
| Leaders across the partnership should ensure that a multi-agency quality assurance framework is in place for EHC plans and annual reviews. This includes:<br>■ ensuring plans accurately reflect the child or young person's current needs and provision, as well setting ambitious outcomes targets across education, health and care; |

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| ■ ensuring that EHC plans are routinely updated at key transition points and when there have been significant changes; and<br>■ they strengthen and embed quality assurance processes of EHC plans and annual reviews. |
| Health leaders should implement at pace their plans to improve waiting times for children and young people with SEND to access specialist health services. This includes:<br>■ neuro-developmental assessments;<br>■ CAMHS treatment pathways;<br>■ continence pathways; and<br>■ wheelchair services. |

## Local area partnership details

| Local authority | Integrated care board |
|---|---|
| London Borough of Waltham Forest | North East London Integrated Care Board |
| Nicky Couch, Strategic Director of Children's Services | Zina Etheridge, Chief Executive Officer |
| www.walthamforest.gov.uk | www.northeastlondon.icb.nhs.uk |
| Waltham Forest Town Hall<br>Forest Road<br>Walthamstow<br>E17 4JF | NHS North East London<br>4th Floor – Unex Tower<br>5 Station Street<br>London E15 1DA |

## 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: one Ofsted Inspector from education and one HMI from social care; a lead Children's Services Inspector from the Care Quality Commission (CQC); and another Children's Services Inspector from the CQC.

### Inspection team

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