



Sarah Hammond, Director of Children's Services, Kent County Council. Lee Martin, Executive Director for SEND, NHS Kent and Medway Integrated Care Board.

By email to: Sarah.hammond@kent.gov.uk and lee.martin@nhs.net

3 April 2025

Dear Sarah and Lee,

Feedback following the Third Progress Review of Kent's Improvement Plan (APP)

I am writing following the third Improvement Plan (APP) formal progress review meeting held on TEAMS on 31st January 2025.

Thank you to you and your teams for the paperwork that was submitted prior to the meeting, for the contributions during the meeting itself, for the responses to our follow up questions after the meeting as well as the further parental feedback from Kent PACT.

During the meeting, the local area demonstrated a collective determination to continue making sustainable improvements to Kent's SEND services and to the lives of children and young people with SEND. The evidence provided in advance, alongside the additional information from partners, demonstrated a range of actions being taken to accelerate improvement.

Your Improvement Plan (APP) includes the nine areas that were highlighted by Ofsted/CQC as areas of weakness in Kent's local area SEND revisit in September 2022. Our summary and feedback on the evidence you submitted is set out below.

Area 1: A widely held concern of parents that the local area is not able, or in some cases not willing, to meet their children's needs.

In the evidence submitted and the information shared at the review meeting, you reported ongoing improvement in the level of satisfaction from parents whose children are being issued with Education, Health and Care (EHC) plans. However, you are aware there is more to do to engage with families where EHCPs have been in place for some time. You reported that the SEN enquiries hub is helping with answering parent concerns and queries more efficiently, but it was not clear whether the wider body of parents would agree with this.

Based on the evidence and information provided at this review, it is view of the Department and NHS England that you have demonstrated clear and sustained progress against actions 1A1, 1A3, 1B2, and 1E1. This means we will reduce formal monitoring of these actions.

The actions that we are still formally monitoring are: 1A2, 1B1, 1B3, 1C1, 1C2, 1C3, 1D1, 1D2, 1E2, 1E3, 1F1, 1F2, and 1F3.

For the next review we would like an update on all outstanding actions and in particular we are looking for:

- Evidence of improved communication with schools/families and the impact this is having.
- Focused feedback from parents on the implementation of new communication working practices by SEND officers in relation to keeping parents informed during EHC processes (Action 1A2).
- For Actions 1F1 1F3 we would like to see examples of the evidence you have that demonstrates the effectiveness of antenatal and postnatal support for families.

Area 2: A variable quality of provision and commitment to inclusion in schools, and the lack of willingness of some schools to accommodate children and young people with SEND.

In the evidence submitted and the information shared at the review meeting, you reported an increase in the percentage of children and young people with SEND successfully educated in mainstream settings, and that you had received some positive feedback from school leaders and parents regarding more consistent application of inclusive practice.

To secure further progress in this area, the local area needs to ensure this inclusive practice is evident in the majority of schools in Kent, particularly in secondary schools where the response thus far has not been as widespread.

Based on the evidence and information provided at this review, it is view of the Department and NHS England that you have demonstrated clear and sustained progress against actions 2A1, 2A4, 2D3, 2E2. This means we will reduce formal monitoring of these actions.

The actions that we are still formally monitoring are: 2A2, 2B1 and 2C1.

For the next review we would like an update on all outstanding actions and in particular we are looking for:

 An update on how you are supporting schools to take up the Autism Education Trust Training (Action 2A4).

Area 3: That parents and carers have a limited role in reviewing and designing services for children and young people with SEND.

In the evidence submitted and the information shared at the review meeting, you reported some improvement in the engagement and co-production with children and

young people with SEND and their families on mental health pathways and the Lived Experience framework. You reported that there is better engagement with parents and carers and that these dialogues are influencing and shaping policies and practice. It was reported that parents are not confident that co-production is fully embedded, and this requires further work, including embedding the Co-production Charter.

Based on the evidence and information provided at this review, it is view of the Department and NHS England that you have demonstrated clear and sustained progress against actions 3A2, 3D1, 3D2, and 3E1. This means we will reduce formal monitoring of these actions.

The actions that are still being formally monitored are: 3B2, 3B3, 3B5, 3C1, and 3C2.

For the next review we would like an update on all outstanding actions and in particular we are looking for:

- Evidence of engagement with families on Action 3B5.
- The latest report of the most recent termly meeting with Kent PACT held as part of the collaboration agreement (Action 3C1).

Area 4: An inability of current joint commissioning arrangements to address known gaps and eliminate longstanding weaknesses in the services for children and young people with SEND.

In the evidence submitted and the information shared at the review meeting, you reported ongoing progress in this area. You provided a commissioning timetable and further information linking three SEND strategic priorities to the reprocurement of community services, which is led by Kent and Medway ICB. There are plans to continue rolling out the Lived Experience framework and you reported early signs of improvement in the language and practice of professionals across the Kent system. There is an ambition to embed the Lived Experience framework in contracts to underpin strategic work and commissioning thereby making lived experience a golden thread within strategic planning and design across the local area partnership.

Based on the evidence and information provided at this review, it is view of the Department and NHS England that you have demonstrated clear and sustained progress against actions 4A2, 4B1, and 4C2. This means we will reduce formal monitoring of these actions.

The action that is still being formally monitored is: 4C3. For the next review we would like an update on this action. We would in particular like to see the data developed to support the local area partnership in the oversight of commissioned activity and the impact for children and young people with SEND and their families.

Area 5: Poor standards achieved, and progress made, by too many children and young people with SEND.

In the evidence submitted and the information shared at the review meeting, you reported that the work of the inclusion champions is having a significant impact on schools' response to the outcomes framework, which has been refreshed following

feedback from stakeholders including young people. The local area confirmed that this will continue to be an area of focus, with both quantitative and qualitative evidence being collected to help shape future plans and maintain effective two-way communication regarding the outcomes framework.

Based on the evidence and information provided at this review, it is view of the Department and NHS England that you have demonstrated clear and sustained progress against actions 5A1, 5A2, and 5E1. This means we will reduce formal monitoring of these actions.

The actions that are still being formally monitored are: 5B1, 5C1, 5C2, 5C3 and 5E3. For the next review we would like an update on all outstanding actions and in particular we are looking for:

• An update on the roll out of the Communities of Schools project and what impact this has had (Action 5B1).

Area 6: The inconsistent quality of the EHC process; a lack of up-to-date assessments and limited contributions from health and care professionals; and poor processes to check and review the quality of EHC plans.

In the evidence submitted and the information shared at the review meeting, you reported significant progress in the timeliness of both new assessments and completing annual reviews. Further work is needed to secure improving quality of the content of plans, but you consider your multi-agency audits and quality assurance processes to be good, and that they are becoming embedded into the process as BAU. Although there has been an improvement in communications with parents and carers, you acknowledged that there is more to do to, as some parents – particularly those where the EHCP has been in place for some time – remain unsatisfied with the current communication systems in place.

Based on the evidence and information provided at this review, it is view of the Department and NHS England that you have demonstrated clear and sustained progress against actions 6B1, 6B2, 6C1, 6D2, 6D3, 6F2, 6F3, 6G1, 6H2 and 6J2. This means we will reduce formal monitoring of these actions.

The actions that are still being formally monitored are: 6D1, 6E1, 6F1, 6F4, 6I1, 6J1, and 6J3. For the next review we would like an update on all outstanding actions and in particular we are looking for:

• An update on how Kent PACT are part of the quality assurance process for EHC plans and reviews (Action 6J1).

Area 7: Weak governance of SEND arrangements across the EHC system at a strategic and operational level and an absence of robust action plans to address known weaknesses.

In the evidence submitted and the information shared at the review meeting, you reported ongoing progress in the area. We heard of the continuing commitment from senior leaders across the local area to effective partnership working to deliver improvements in SEND services. You are evolving SEND governance in Kent with

the introduction of the SEND Partnership Board (SPB), with an independent chair, membership based on expertise, and the inclusion of the Cabinet Member for Education and Skills. The SPB has been designed to provide strategic oversight of SEND improvement across Kent, and to support this you are in the process of mapping all work across the Safety Valve programme, the APP and the 11 areas in the Area SEND inspection framework. You are very close to publishing your new SEND Strategy which has been developed over the past two years with education, health, and social care stakeholders, as well as parents/carers and young people.

There is only one action in this area that we are still monitoring closely which is 7B2, and we will continue to do so. For the next review we would like an update on the refresh of the Kent SEND strategy.

Area 8: Unacceptable waiting times for children and young people to be seen by some health services, particularly CAMHS, tier two services, SALT, the wheelchair service and ASD and ADHD assessment and review.

In the evidence submitted and the information shared at the review meeting, you reported some further progress in the area. You reported a positive trajectory of the number of young people age 14+ with a learning disability having an annual health check and an increase in health action plans in place to meet their health needs.

There is a system wide Neurodiversity transformation plan, with several workstreams focused on providing 'support first' to children, young people and families, with a diagnosis or waiting for an autism assessment. However, despite the collective efforts across the system, the number of children and young people waiting for an autism assessment continues to rise.

We heard that the number of children and young people waiting, and the time waited, for a speech and language assessment has reduced, which is attributed to the Balanced System model. However, there are a number of children and young people waiting for longer than 12 weeks; a majority of these children and young people are from the Swale area. You have told us there will be further work to improve this through the community health services reprocurement.

Based on the evidence and information provided at this review, it is view of the Department and NHS England that you have demonstrated clear and sustained progress against the action 8A3. This means we will reduce formal monitoring of this action.

The actions that are still being formally monitored are: 8A1, 8A2, 8A4, 8B1, 8C1, 8C2 and 8D1. For the next review we would like an update on all outstanding actions and in particular we are looking for:

- An update on plans to roll out the ND alternative screening and support interventions, including the offer and coverage across all areas.
- Data to evidence that children and young people with SEND and their families are supported whilst waiting for an autism assessment.
- A recovery plan to address the number of children and young people with SEND waiting for an ADHD assessment and treatment.

Area 9: A lack of effective systems to review and improve outcomes for those children and young people whose progress to date has been limited by weaknesses in provision.

In the evidence submitted and the information shared at the review meeting, you reported that the revised outcomes framework is becoming embedded, and that the scorecard captures statistical evidence to help the local area glean an overview of outcomes. You are aware of some specific areas that still require improvement, for example showing the impact of the anxiety-based school attendance (ABSA) initiative, and tuition provision for those children and young people not in school.

The Department and NHS England will continue to formally monitor the following actions: 9A1, 9A2, 9A3, and 9B1. For the next review we would like an update on all these outstanding actions.

Summary

In summary, it is evident that the local area has made further progress in all nine areas of the Improvement Plan (APP); though there is still progress to be made, particularly in demonstrating the impact of some of the remaining actions on the lives of children and young people with SEND and their families.

We know that this positive result is due to a great deal of commitment and hard work across the local area partnership to address the areas of weakness highlighted in the SEND revisit report by Ofsted and CQC in November 2022. We would like to thank you for everything you are doing to support the children and young people in your local area and encourage you to continue with these efforts and build on your successes across all remaining areas of your Improvement Plan (APP).

For the next review meeting, please report any relevant brief updates on actions that have been reduced for formal monitoring, along with a full update on all remaining actions in the Improvement Plan (APP). We will aim to arrange the third Improvement Plan (APP) review meeting for September 2025.

A copy of this letter goes to Councillor Roger Gough, Councillor Rory Love OBE, Christine McInnes, Abigail Kitt, Sophie Dann and Liz Flaherty.

Yours sincerely,

Catherine Norrie

Assistant Director
South East Vulnerable Children's Unit
Region's Group
Department for Education

Helen Todman

Assistant Director of Mental Health, Learning Disabilities, Autism and SEND South East Region NHS England