

SEND SUB-COMMITTEE

Wednesday, 7th February, 2024

2.00 pm

**Council Chamber, Sessions House, County
Hall, Maidstone**





AGENDA

SEND SUB-COMMITTEE

Wednesday, 7th February, 2024, at 2.00 pm
Council Chamber, Sessions House, County Hall,
Maidstone

Ask for: **Gaetano Romagnuolo**
Telephone: **03000 416624**

Membership

- Conservative (7): Mr P Cole (Chairman), Mrs B Bruneau (Vice-Chairman),
Mr M Dendor, Mrs S Hudson, Mr H Rayner, Mr A Sandhu, MBE and
Mr M Whiting
- Labour (1): Dr L Sullivan
- Liberal Democrat (1): Mrs T Dean, MBE
- Green and
Independent (1): Jenni Hawkins
- Church
Representatives (3): John Constanti, Michael Reidy and Quentin Roper
- Parent Governor (2): Rebecca Ainslie-Malik and Holly Carter

UNRESTRICTED ITEMS

(During these items the meeting is likely to be open to the public)

- 1 Introduction/Webcasting Announcement
- 2 Apologies and Substitutes
- 3 Declarations of Interest by Members in Items on the Agenda
- 4 Minutes of the Meeting Held on 7 December 2023 (Pages 1 - 4)
- 5 Accelerated Progress Plan - DfE and NHS England Review (Pages 5 - 98)

EXEMPT ITEMS

(At the time of preparing the agenda there were no exempt items. During any such items which may arise the meeting is likely NOT to be open to the public)

Benjamin Watts
General Counsel
03000 416814

Tuesday, 30 January 2024

SEND SUB-COMMITTEE

Minutes

Thursday 7 December 2023, at 2.00 pm

MINUTES of a meeting of the SEND Sub-Committee held in the Council Chamber, Sessions House, County Hall, Maidstone, on Thursday 7 December 2023.

PRESENT: Mr P Cole (Chairman), Mrs B Bruneau (Vice-Chair), Mrs T Dean, Mr M Dendor, Mrs S Hudson, Mr H Rayner, Mr M Reidy, Mr A Sandhu, Dr L Sullivan and Mr M Whiting.

VIRTUAL ATTENDEES: No virtual attendees.

ALSO PRESENT: Mr R Love (Cabinet Member for Education and Skills).

IN ATTENDANCE: Ms S Hammond (Corporate Director for Children, Young People and Education), Ms C McInnes (Director of Education), Ms A Farmer (Assistant Director/Principal Educational Psychologist), Mr C Chapman (SEND Assistant Director/Head of Fair Access), Ms A Gleave (SEND Interim Assistant Director for Operations), Ms E McQueen (Interim Assistant Director for SEND Quality Assurance) and Mr G Romagnuolo (Research Officer - Overview and Scrutiny).

1 Introduction/Webcast Announcement

The Chairman welcomed everyone to the meeting.

2 Apologies and Substitutes

Apologies for absence were received from Ms J Hawkins and Ms B Hannon.

3 Declarations of Interest by Members in Items on the Agenda

Mr M Dendor declared that he was a Governor of Kemsley Primary Academy.

4 Minutes of the Meeting Held on Tuesday 31 October 2023

RESOLVED that the minutes be approved as a correct record.

5 SEN Inclusion in Schools

- 1) Mr Love introduced the report. He explained that it discussed SEN inclusion in schools, and outlined the work being undertaken under the Accelerated Progress Plan's Areas of Weakness 2 and 5.
 - Area of Weakness 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.
 - Area of Weakness 5: Poor standards achieved, and progress made, by too many children and young people with SEND.
- 2) In terms of provision and commitment to inclusion in schools, he explained that KCC could not change schools' policies and practices, although it had the power of *influence* and it had implemented a number of activities to maximise inclusion in schools. For example, KCC provided local schools with training on inclusion.
 - a) Christine McInnes added that, when the DfE's Revisit took place in September 2022, the results for the academic year 2021-22 had not been published; the inspection team would have based their judgements about pupil outcomes on school data prior to or during the pandemic. It is likely that they could have inferred outcomes from the attendance data which was poor and below the national average. When the 2021-22 data was published, it showed there were attainment gaps for pupils with SEN, although these were broadly in line with the national average. The first analysis of the unvalidated 2022-23 academic results indicated that this was also the case for that year. While there were aspirations and ambitions about closing the attainment gap, it was important to note that SEND pupil achievement was broadly in line with that of other local authorities.
- 3) A Member asked a question about KCC's collection of key data and indicators on schools' inclusion. Christine McInnes explained that there was no legal definition of an inclusive school, or any single measure of inclusion, but there were a number of indicators that could be used to make a judgement about a school's inclusivity. These included:
 - Rates of suspension and permanent exclusion
 - Attendance
 - Level of Elective Home Education
 - Proportion of pupils with an EHCP and on SEN support
 - Level of requests for top-up High Needs Funding
 - Achievement and progress of pupils with SEND
 - Engagement in SEND Inclusion training and development opportunities.
- 4) Each of these indicators was measured and considered independently. KCC had also developed the District Dashboard to bring together key data relating to inclusion. This was regularly updated. Each school could view its own data. The dashboard was rolled out during the summer term of 2023 and was being

updated with data for the 2022-23 academic year. It was a key tool which would help schools, in their Locality Clusters, to better understand both local needs and variations, and to improve consistency in their inclusion practice across schools in Kent.

- 5) In reply to a question about improving school attendance in Kent, Christine McInnes said that there were initiatives to support young people returning to school. For example, some schools had developed a 'soft landing', that is, a transition period for children who were struggling after returning to school. There was also an anxiety avoidance training programme.
- 6) Kent, historically, had low attendance records that pre-dated the pandemic but had been exacerbated by it.
- 7) A Member asked how KCC was promoting inclusion training to those schools that were not engaging. Christine McInnes explained that KCC had recently recruited a team of inclusion champions whose role was to have discussions with schools that were not engaging. Some schools and Multi Academy Trusts were committed to developing their own inclusive practices and implemented training within their own settings, informed by the needs of their own pupils and families.
 - a) Alison Gleave added that KCC had a team of SEN Inclusion Advisers who supported Kent mainstream schools that had concerns about inclusion.
 - b) Sarah Hammond pointed out that a key objective was not just to increase the number of SEND children in mainstream schools, but to achieve fairer and more equitable distribution of them.
 - c) Mr Love said that Inclusivity was a criterion used by Ofsted to assess schools' performance. It was not KCC's role to hold local schools to account, although it could influence and incentivise schools' inclusion practices.
 - d) Christine McInnes explained that, for those with complex needs, the current system would remain in place - with a budget attached to each child. The system will change for those with lower levels of need, where a pooled budget model will apply.
- 8) The Chairman asked when the 4-year Effective Kent programme would end. Christine McInnes said that the programme ended in the summer 2023, and that it was currently being externally evaluated by the Industrial Society.
- 9) In answer to a question about the historical backlog of EHCPs in Kent, Craig Chapman said that there was a dedicated backlog team who were working to address this issue. It was expected that the backlog would be cleared by September 2025. The work of the team would also ensure that no new backlog developed.

- a) In reply to a question, Alison Gleave said that about 9,000 pupils had been waiting for an EHCP review for over 2 years.
- 10) In answer to a question about when KCC would reach EHCP issuing levels that were in line with statistical neighbours, Christine McInnes said that this was linked to the demand and confidence in the system; to set quotas and targets could potentially put KCC at risk of legal challenge.
- a) Alison Farmer said that it was important to recognise that the number of EHCP assessments in Kent was relatively high. For instance, the number of EHC plans issued by East Sussex in 2022 was 518; in Kent it was 2,314. This was partly affected by factors such as the degree of SEND inclusion in Kent mainstream schools. If the work carried out by KCC to promote inclusion was effective, the number of EHCPs would be reduced.
- 11) In reply to a question about KCC's dyslexia guidance, Alison Farmer accepted that it was not a very parent-friendly document and explained that it was aimed mainly at schools. It offered guidance rather than a fixed approach because schools followed their own procedures to help pupils with dyslexia.
- 12) In answer to a question about the cost to KCC of a comprehensive EHCP assessment, Christine McInnes said that it ranged between £5,000 and £7,000.
- 13) **APP Indicator APP02: Percentage of Stage 1 SEND complaints responded to that were upheld or part upheld** (page 21 of the agenda pack). In reply to a question about what KCC was doing to reduce the percentage of complaints that were upheld, Alison Gleave said that a dedicated backlog complaints team had been established to deal with them. A key task for the team was to improve the quality and speed of KCC's responses.
- a) Mr Love explained that, in some cases, complaints were made because parents had different expectations of assessment outcomes.
- 14) In response to a question, Alison Farmer said that KCC carried out the Education, Health and Care Needs Assessment, although parents sometimes paid for private educational psychology, and speech and language, assessment reports.

RESOLVED – The SEND Sub-Committee noted the contents of the report.

- 15) The Chairman thanked all those present for attending the meeting.

From: Rory Love, Cabinet Member for Education and Skills
Sarah Hammond, Corporate Director of Children, Young People and Education

To: SEND Scrutiny Sub Committee – 7th February 2024

Subject: Accelerated Progress Plan - DfE and NHS England Review

Classification: Unrestricted

Past Pathway of report: None

Future Pathway of report: None

Summary: During November 2023 the DfE and NHS England undertook a review of the progress the Kent area had made against the Accelerated Progress Plan. The feedback letter was sent to the Corporate Director of Children's Services KCC and Chief Delivery Officer Kent and Medway Integrated Care Board during January 2024. The letter is included as Appendix B to this covering report.

Recommendation(s):

The SEND Sub-Committee is asked to **note** the report.

1. Introduction

1.1 When the Kent area was inspected in 2019, the provision for SEND was judged to have weaknesses in nine areas. A revisit took place during September 2022 which judged insufficient progress had been made in addressing the weaknesses. An externally chaired SEND Improvement and Assurance Board was established to support the improvement journey, and within KCC a SEND Scrutiny Sub-Committee was set up. An Improvement Notice was issued by the then Minister in March 2023 requiring the development of an Accelerated Progress Plan. The DfE approved the final APP, which included 116 actions, in July 2023 and this was published in September alongside a parent and children and young person-friendly version.

1.2 The first review of progress against the actions took place on the 15th November 2023. Prior to the DfE and NHSE panel meeting, an extensive level of evidence was submitted for each Area of Weakness (AOW). An overview of the evidence related to each of the nine Areas of Weakness which was submitted as part of the evidence base can be seen in Appendix A. On the day, officers and the Cabinet

Member for Education and Skills responded to questions from the panel, and the views of PACT, a small group of parent/carers and school representatives were also sought. Following the assessment day, further evidence was requested by the panel members. All of this evidence was considered to inform the judgements made in the feedback letter which can be seen in full as Appendix B SEND-6-month-review-feedback-letter-DfE-8-January-2024

1.3 The letter also provides helpful pointers for the next review, which will take place at the end of April 2024 and preparation is well underway to provide a robust evidence base of the further progress that is being made.

2. The feedback letter

2.1 The letter acknowledged the collective determination to make sustainable improvements and their judgement of the evidence provided is that Kent is making progress in all areas of the APP. During the re-visit in September 2022, there had been over one hundred staff vacancies in the SEND statutory services and stabilising the workforce as well as establishing a high-quality professional development programme were an early priority. The review team recognised that this requirement had been fully met. The team also evidenced stronger governance and strategic oversight in place.

2.2 Progress in improving access to wheelchairs, reducing waiting times for speech and language therapy and the stronger relationship with schools were commented on.

2.3 Whilst progress has been made in all nine areas identified for improvement, the review conducted highlighted that the pace of the improvements must be maintained.

2.4 The focus now is on preparing for the next review and an overview of some of the key activities are outlined below. A detailed plan is being developed for each AOW.

3. Planning for the April 2024 Review

Staffing

3.1 Staff from the Strategic Reset Programme made an invaluable contribution to developing and drafting the APP as well as managing and coordinating the evidence base for the review. An Education and SEND Transformation Team have now been recruited to support this work and they are taking the lead on preparing the evidence for the next review, as well as the preparation for the forthcoming SEND Area inspection. These are experienced officers and despite being in post a short time have made significant progress with the work.

Completion of activities

- 3.2 The provision of high quality, robust evidence of progress and impact is critical to the improvement journey and officers have been working with a former Ofsted HMI and colleagues who have undergone inspection under the new framework to develop and refine the evidence being gathered.
- 3.3 The majority of activities in the APP will need to be completed by the next review so a formal governance process has been established to consider the evidence of progress and impact and to decide if it is sufficiently robust that the focused activity/line in the APP can be marked as completed. The SEND Transformation Team are meeting individually with the AOW leads to identify which will be completed by the time we need to submit the evidence and which may need additional support or cannot be completed by the deadline of the 29th of March 2024 as the project timeline exceeds when the next review is planned. To date, 17 actions have been submitted for consideration as complete, with a further ten currently progressing through the process. Using this process, officers are confident that at least 70% of the 116 activities in the APP will be robustly evidenced as completed by the next review.

Education, Health and Care Plans

- 3.4 Both improving the completion rate within timescale and the quality of plans are critical issues and there are a range of activities underway to achieve these outcomes as well as to address the significant backlog which has built up. KCC now has the appropriate staffing in place and this was a significant step forward in addressing concerns relating to assessment, development and issuing of EHCPs. The development of a detailed plan which is requested in the letter is underway and will be available late March.
- 3.5 There is continuing work to understand the drivers for the current demand for EHCPs and an example can be seen in Appendix C EHCPS – Parental Views on Assessment and this type of work has informed our approach to strengthening communications and support pre-request for Assessment. The presentation of this and other data to SENCOs to inform their ways of working to better understand and support them in talking with parents and carers can be seen in Appendix D. This presentation will be used in the SENCO network meetings taking place during February 2024.
- 3.6 Regular independent reviews take place to judge the quality of decision-making at each stage of the process and most recently (December 2023) the Inclusion Champions have undertaken an evaluation exercise of all the decision making and their recommendations will be implemented over the coming weeks.
- 3.7 The quality of EHCPs is routinely sampled, analysed and reported on through the Quality Assurance process and the findings are then looped back to inform training and performance management. As suggested in the letter the sample size will be expanded to give a more informed, richer picture and accelerate improvement.

Parental and young people's engagement

- 3.8 There is a wealth of activity currently being undertaken on engagement and this needs to be developed to be more systematic and considered strategically to influence decision-making. CYP/family voice has now been incorporated into SIAB to further evidence our commitment to ensuring it forms a core part the primary focus as per DfE review letter. Mapping of family/parent groups created or attended by KCC and NHS teams is nearing completion so AOW leads know where to go to involve parents/carers in service designs, seeking feedback and other forms of engagement.
- 3.9 Staff are advising on the most effective ways of gathering and collating supporting evidence from children, young people and their parents and carers. Feeding back how this intelligence has influence change and if not, why not is important to build confidence in the system so effective mechanisms to ensure parents/carers, young people, staff and the education sector providers have this communication are being developed.
- 3.10 Parental confidence is an important indicator and the Communications and Engagement Task and Finish group are considering the means by which this data can be collected including through schools.
- 3.11 To ensure that the impact of the extensive work on communications is captured, there will be termly reports on the impact of communication activities.

4 Financial Implications

4.1 Special Education Needs Services are funded from either:

- the Dedicated Schools Grant (DSG) - a specific grant from the Department of Education to fund special educational need placement and support services (total budget for 23-24 is £317m) or;
- Council Funding - for the statutory responsibilities relating to the strategic oversight, assessment and review Education Health and Care Plans (total budget for 23-24 is £29m). In additional to SEN transport services (budget for 23-24 is £60m).

4.2 In 2023-24, the council is forecasting a £40m overspend on its DSG allocation, where the cost of SEN services is greater than the grant funding received. The Council has been experiencing a growing overspend on its DSG since 2018-19, resulting in an accumulated deficit on its DSG of £135m by March 2023. In response, to this the council entered the DfE's Safety Valve Programme in March 2023, for those Councils with the highest deficits to support the development of a sustainable plan for recovery; including annual funding from the DfE, totalling £140m by 2027-28, along with a commitment from this council to contribute a further £82m, to help pay off the historic deficit. The funding from the DfE is contingent on the Council demonstrating and delivering a credible plan to achieve an in-year breakeven position on its DSG. The majority of the actions to achieve a balanced in-year position are reflected throughout the APP, where improvements to the SEN system and outcomes for children are expected to result in an improved financial outcome.

4.3 In 2024-25, the council is also proposing to invest a further £2m in SEN statutory services to support ongoing recovery.

5 Legal implications

5.1 An Improvement Notice was issued to Kent County Council (“the Council”) on 31 March 2023 following an assessment that the local area has failed to make sufficient progress against nine areas of weakness in its special educational needs and disability (“SEND”) service provision, as set out in the Ofsted and Care Quality Commission (“CQC”) SEND Revisit report, published on 9 November 2022. This Improvement Notice requires the Council to aim for the majority of the actions included in the Improvement Plan to be delivered by the end of April 2024 (i.e. within 18 months of the Ofsted and CQC revisit) or sooner, where appropriate. Should the Council be unwilling or unable to comply with this Improvement Notice or should the Secretary of State not be satisfied with the Council’s progress at any stage, she may choose to invoke her statutory powers of intervention (s497A Education Act 1996) to direct the Council to take any further actions deemed necessary to secure the improvements required in SEND services.

6 Conclusions

We welcome the feedback which both acknowledges the progress made and helps to guide the preparation for the next assessment. This report provides an overview of some of the key activities which are taking place to prepare for the next review to provide some assurance.

7 Recommendation(s)

Recommendation(s):

The SEND Sub-Committee is asked to **note** the report.

8 Background Documents

- Appendix A: APP overview pack
- Appendix B: SEND 6-month review feedback letter-DfE (8 January 2024)
- Appendix C: Parental views on EHCPs
- Appendix D: SENCo Forum Presentation Jan 24 (Quality Assurance & Practice Development)

9 Contact details

Report Author: Christine McInnes
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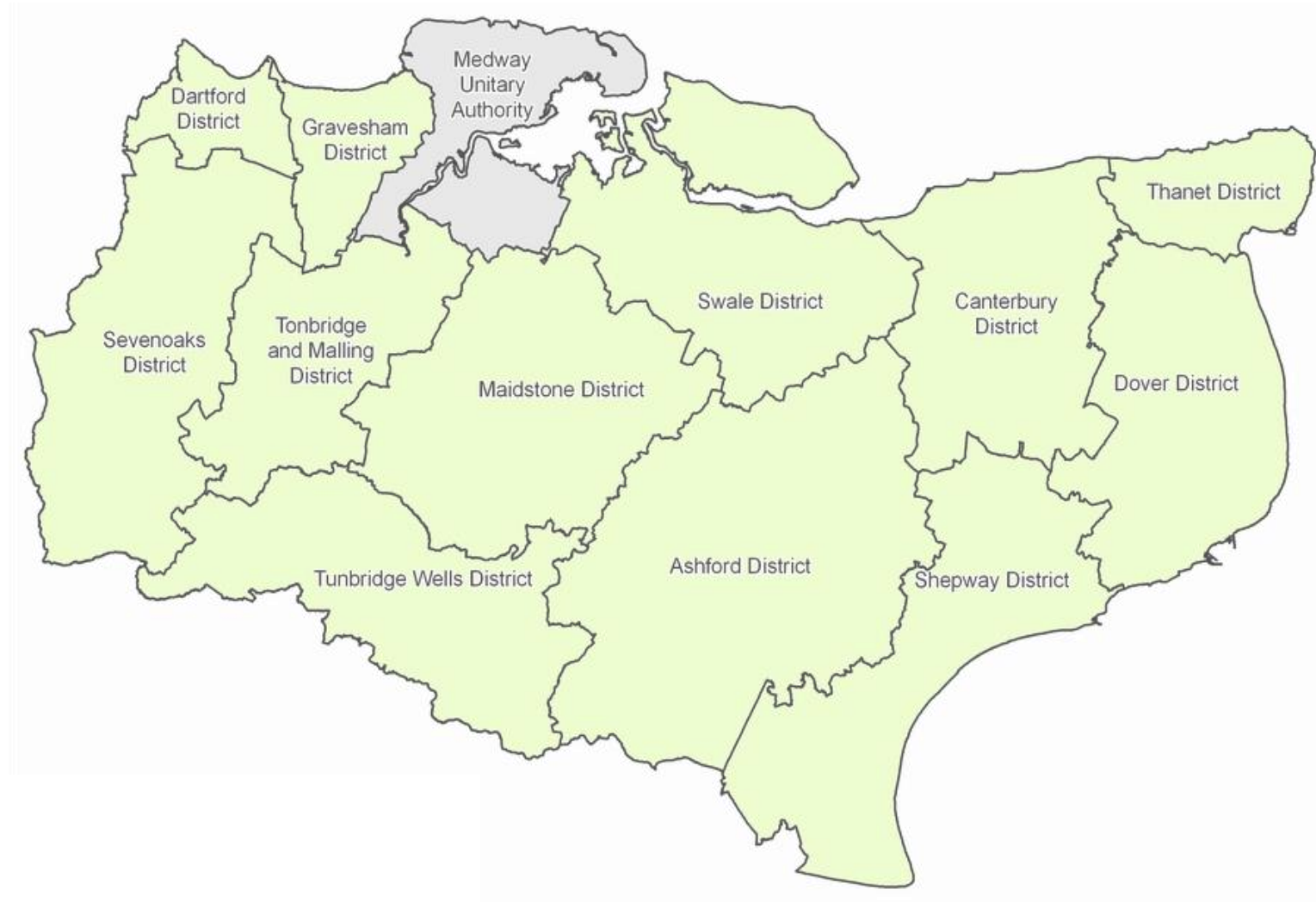
Kent Local Area System

Improvement Plan and Accelerated Progress Plan 6 Month Review

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APP Overview Pack

15th November 2023



Acknowledgements

The supporting evidence provided within the 6 Month Review reflects the contribution and partnership working from partners across the Kent Local Area System, including:

- Feedback from children, young people, parents and carers
- Kent County Council
- NHS Kent and Medway - Kent and Medway Integrated Care Board
- Health Providers
- Kent Parents and Carers Together (Kent PACT)
- Council for Disabled Children
- The RISE programme
- Virtual Schools Kent, Kent Youth Council and Schools Councils
- Early Years sector – including Kent Early Years and Childcare Provider Association
- Primary and Secondary schools – including Kent Association of Headteachers
- Special schools - including Kent Special Educational Needs Trust
- Further Education – including East Kent Colleges Group and Kent Further Education
- Commissioned Service Providers
- Training and development providers
- Local Government Association
- NHS England
- Department for Education



Contents

1. Executive Summary of each Area of Weakness

2. Overview of Progress for the APP
 - a) Blue
 - b) Green
 - c) Amber
 - d) Red

3. Overview of Impact for the APP
 - a) Blue
 - b) Green
 - c) Amber
 - d) Red

3. Completed Actions

Kent's Accelerated Progress Plan (APP) has 116 actions across 9 Areas of Weakness.

Throughout this pack we refer to Progress and Impact – the supporting definitions for these are below:

Progress

Blue indicates that change is embedded.

Green indicates the action is complete.

Amber indicates that actions are on track.

Red indicates the action is delayed

Impact

Blue indicates there is ongoing evidence of impact.

Green indicates there is early evidence of impact.

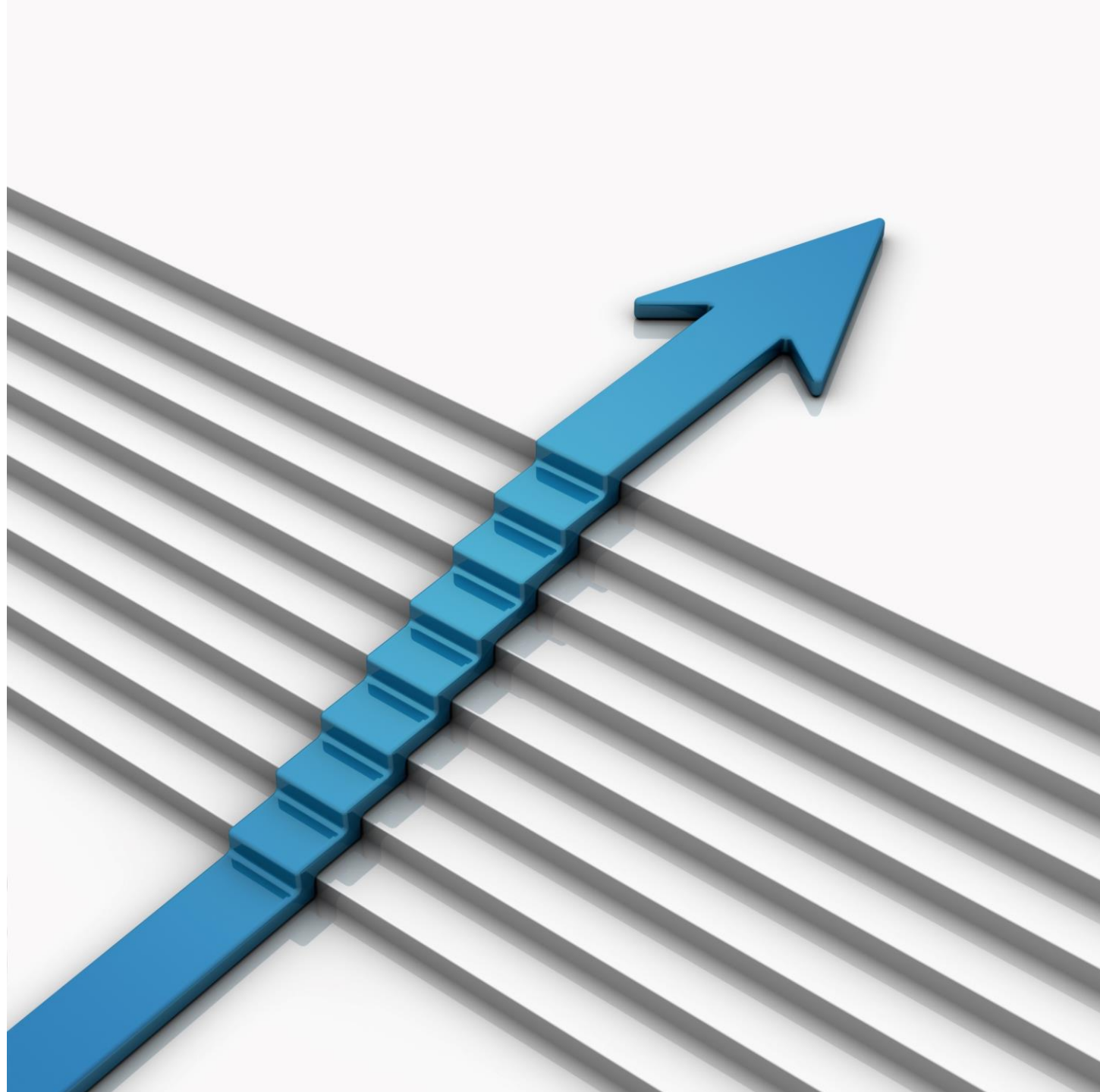
Amber indicates the expected impact is on track.

Red indicates that impact is not being delivered

Executive Summary of Each Area of Weakness

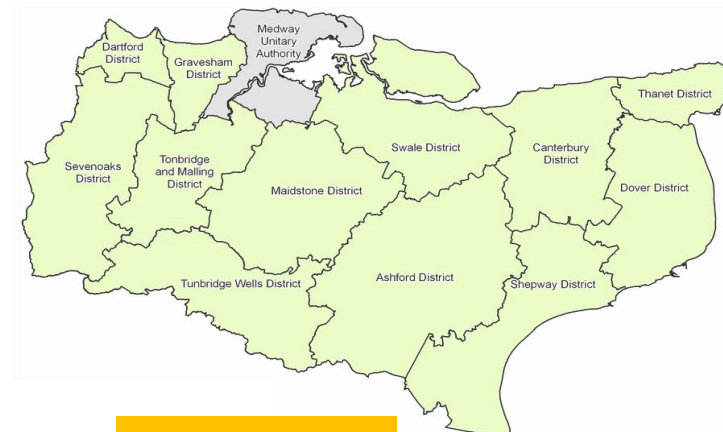
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A detailed pack is available for each Area of Weakness, with supporting evidence



Executive Summary

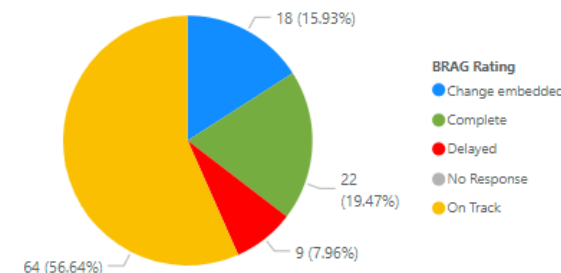
- Since the Improvement Notice was issued in March 2023, Kent has considerably strengthened its systems leadership, governance, risk and assurance processes, giving greater transparency and visibility of improvement, including clear KPI's reported in a monthly scorecard.
- Partners are now working more closely together as a system, demonstrated in joint working on inclusion, joint commissioning, quality assurance, new pathways of support for families and greater engagement, communication and co-production with children and young people.
- The role of the Parent and Carer Forum (Kent PACT) has been clarified through a new Collaboration Agreement and we are continuing to extend our reach to a broader range of parents and carers through our work with the Council for Disabled Children, RISE programme and engagement work through the Integrated Care Board programmes.
- From April to July, partners pulled together to develop a comprehensive APP covering 116 actions. We recognise that there are several areas in the APP that now may need to evolve and mature as we deliver our programmes of work. The APP development was a learning process for us all.
- Although we know there is much more to do and we are early in our improvement journey, we have made solid progress with 40 actions complete, of which 20 of the completed actions have evidenced early or ongoing impact for children, young people and families evidenced.
- 64 of 116 actions (57%) are on track to deliver to their expected end date, and only 9 are reporting as behind/delayed, which are being followed up by Area of Weakness Leads.
- We are confident that the early foundations we are putting in place will result in sustainable improvement, but we accept that it will take time for this impact to be realised and fully evidenced, particularly for some of our long-term actions and where frontline performance remains challenging. This is reflected in our impact ratings, but there is encouraging signs of early improvement, and we will continue to challenge hard for tangible evidence of impact.
- For this 6 Month Review, we have provided transparent reporting on progress and impact, including examples of system-wide partnership working and supporting evidence.



116 actions

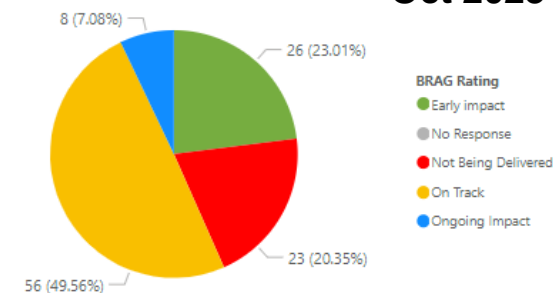
Progress BRAG

Oct 2023



Impact BRAG

Oct 2023



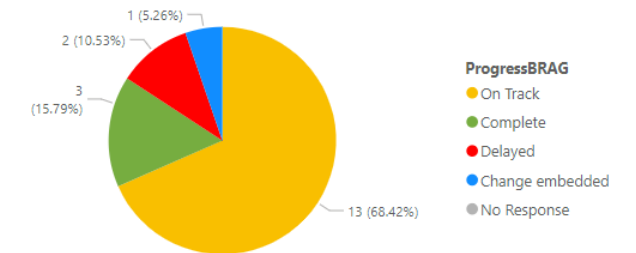
Area 1 Summary – Parental Confidence

- We recognise the progress in improving parental confidence is one of the most challenging Areas of Weakness, as it is influenced by many factors and the cumulative impact of all the APP actions. Therefore, we expect this to be one of the longer-term areas to demonstrate full evidence of impact for parents, carers and families.
- Our collaborative work as a system on this Area has significantly strengthened since the APP was developed, particularly with strong collaboration with Health in parental support in Family Hubs, health professional involvement in SEND training, audit and quality assurance, and co-design and consultation with Kent PACT on communications and engagement approaches with families.
- This is all about putting in place strong foundations in consistent practice, communications and system-wide engagement with families, which will result in positive improvements and impact as we embed these in our culture and practice.
- We recognise the critical importance of consistent, high-quality communication with families, so we are putting in place additional resource to support the delivery of the SEND Communications and Engagement Strategy, with a dedicated partnership Task and Finish Group co-chaired by RCC and NHS Kent and Medway to support this.
- However, since the APP was agreed, we have made positive progress with 4 of the 19 actions (21%) completed, and 13 of 19 actions (68%) are on track to complete by their expected end date.
- As we work towards evidencing impact, 9 of 19 (47%) actions in Area 1 are currently reporting red for impact, which has remained broadly consistent at this level since July. This is largely because the changes are still being implemented and it will then take time for this to lead to sustainable change and improved parental confidence.
- Several actions (1A4, 1B3, 1E2, 1F2) are longer-term with end dates in 2024 so we would not expect to see impact yet.
- It is encouraging that 4 of 19 actions (21%) (1A4, 1C2, 1D1 and 1E1) are now reporting green for impact, showing that early evidence of improvements are being made, particularly around engagement with parents, carers and families. 6 of 19 actions (31%) of actions are now reporting as amber and expected to be on track to evidence impact by their end date.

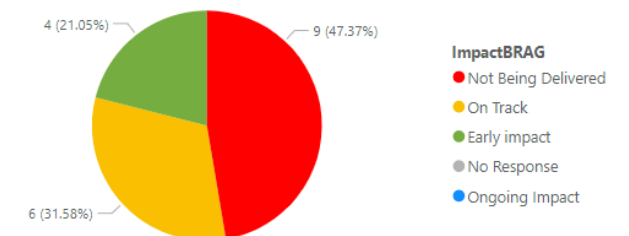


- 1 action complete with change embedded
- 3 actions complete (21%)
- 13 actions on track (68%)
- 2 actions behind (11%)

Progress BRAG



Impact BRAG



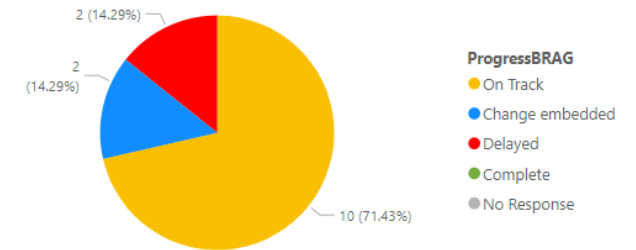
Area 2 Summary – Inclusion



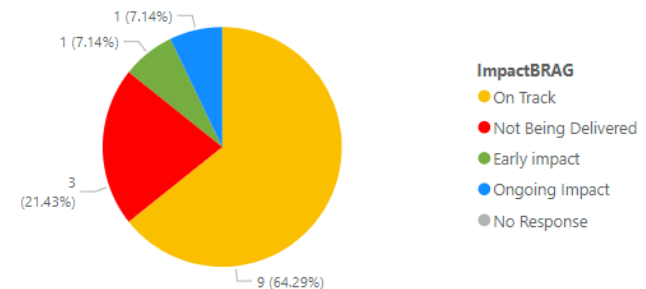
14 actions

- 2 actions complete with change embedded
- 0 actions complete
- 10 actions (71%) on track
- 2 actions behind

Progress BRAG



Impact BRAG



- The ambition for Area 2 is to ensure that children and young people can access inclusive education and a warm welcome in a setting, school and Post 16 provision for the vast majority, in their local community. There is an emerging evidence bank of progress and impact against some of the sub-themes, but inevitably there is a lag in seeing firm evidence of an improving education system currently as much of the work will impact in the longer term.
- The alignment of Education and SEND within the local authority has led to stronger collaboration across the system with early years, mainstream, special schools and further education, and health partners, with increasing levels of engagement at events for Headteachers and uptake in dedicated training programmes, and education leaders acting as Inclusion Champions to champion inclusive practice peer-to-peer within schools.
- There is steady progress within Area 2, with 10 of the 14 actions (71%) reporting amber for progress so are on track to meet their expected end date - 6 of the 14 (50%) actions in Area 2 have end dates in 2024. Most of these actions are currently rated amber and are due to complete on time next year and evidence impact in the next academic year.
- 2 projects (2A1 and 2A3) are reporting blue for progress and have completed, with evaluations undertaken and evidence in place. We are seeing positive examples and evidence of progress within specific districts and areas within Kent, but it will take longer to see consistent improvement across the whole system.
- Positive progress has been made since July with one action (2A1) now reporting green for impact and another action (2A3) reporting blue, meaning change is fully evidenced. Overall, 9 of the 14 actions (64%) are reporting amber and are currently on track to deliver the expected impact by their end date.
- Action 2B1 (videos to provide inclusive practice) has consistently reported red for impact since July. We are putting in place further communications resource to enhance impact. The other red actions (2C1 and 2D4) are now expected to evidence impact in late 2024, with impact milestones being put in place.

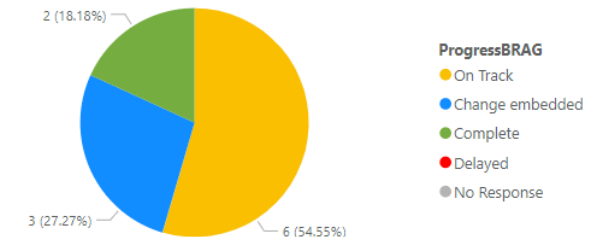
Area 3 Summary – Parent and Carer Involvement

- Foundations for successful improvement within Area 3 will be built on strong relationships across the local authority and with Health, Education, Parent and Carer forums, as well as children, young people and families themselves.
- Impact for Area 3 can be difficult to demonstrate due to parents and young people not having trust in the system and the changes due to historic experiences. We are beginning to address this through collaborating and learning from best practice from Lived Experience Advisors, Participation Leads, Kent PACT, Council for Disabled Children and the RISE programme. This is informing and strengthening our co-design, co-development and co-production approaches, with the ambition to extend our reach and connection with a broader group of families.
- The voice of children and young people themselves is critical, with the Kent Youth Council and School Councils influencing work with the Integrated Care Board, SEND and Health vision and strategies for children and young people and communication projects.
- Good progress is being made in Area 3 with 45% of actions complete and reporting as either Green (2 actions, 18%) or Blue (3 actions, 27%) for progress, with the remaining 6 of 13 actions (55%) on track to be delivered by the expected end date.
- As Area 3 is focused on engaging with parents/carers, the progress of a few actions was impacted during the summer holidays, when parents/carers had additional caring responsibilities but have since seen solid improvement since September.
- There are early signs of positive impact, with 43% of actions demonstrating impact and reporting as Green (4 of 13 actions, 37%) or Blue (2 of 13 actions, 18%), with supporting evidence in place.
- Two actions (3A3 and 3E1) are still reporting red for impact because work is on-going to understand how impact will be measured. We are ensuring appropriate projects and processes for engagement for the young people and we are clear what all involved want to achieve.
- We also need a defined understanding of language used around co-production, co-design, consultation and the collaboration engagement which is being addressed through the support of Council for Disabled Children and Kent PACT.

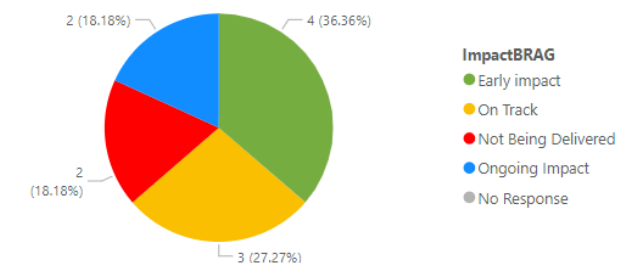


- 3 actions complete with change embedded
- 2 actions complete
- 6 actions on track (46%)
- 0 actions behind

Progress BRAG



Impact BRAG



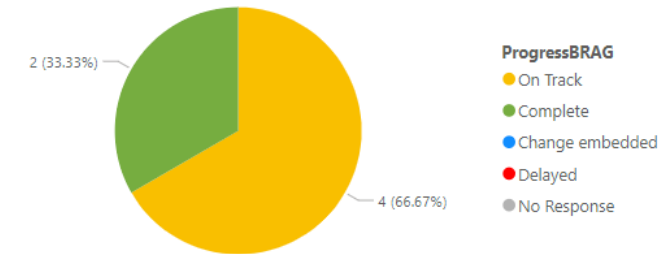
Area 4 Summary – Joint Commissioning

- Effective collaboration between Health and Kent County Council is essential to the success of joint commissioning. We have continued to strengthen this through a refreshed Children and Young People’s Joint Commissioning Group with agreed joint commissioning principles and priorities, and deep dive work on crisis and complex care.
- Partners are also taking action to look at the Community Offer, identifying priorities, feeding into commissioning strategies, improving communications and inter-agency understanding and joined up working.
- There has been a renewed emphasis on co-production and ensuring the voice and lived experience of children, young people and families influences our commissioning, such as the Good Conversations tool to support families talking to schools about their child’s needed, the Together for Parents service working with families on the ND pathway and the Big Conversations engaging 270 young people and 31 schools on emotional wellbeing and mental health.
- There has been positive and steady progress across Area 4, with all actions are reporting as complete or on track to meet their expected end date. 2 of the 7 actions (29%, 4A2 and 4B2) are reporting green for progress or completed. One action (4C1, Special School Nurses) did not report this month, but has consistently reported as completed.
- 4 of the 7 actions (57%) have longer-term end dates in 2024 and 2025, so will be longer to realise impact. Of these, 3 of these actions are reporting amber for progress, and 1 is reporting green, so are completed or on track to be delivered by their expected end dates.
- There has been some movement in the impact ratings within Area 4 since reporting began in July, as we have tightened up definitions for impact and provided support and challenge for ratings to be more realistic.
- 5 of the 7 actions (71%) in Area 4 are reporting amber for impact. 3 of these actions are longer-term into 2024-25 so we would not expect to see fully evidenced impact yet, however they are reporting to be on track to deliver impact in the longer-term.
- Only 4C3 (joint working with system wide, commissioners and providers to develop a jointly agreed delivery plan) is still reporting red for impact. This is due to the need to more clearly define when impact is expected to be seen and what will evidence the impact, however interim impact milestones have been put in place. This is a positive improvement from September when 29% of actions were reporting red for impact.

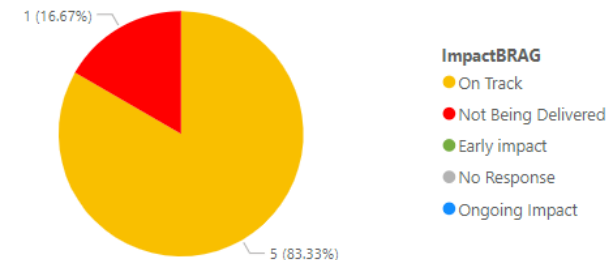


- 0 actions complete with change embedded
- 2 actions complete
- 4 actions on track (67%)
- 0 actions behind

Progress BRAG



Impact BRAG



Area 5 Summary – Standards

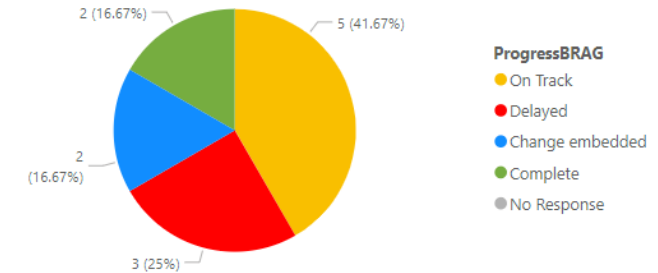
- KCC, Schools, Health, and other SEN service providers are collaboratively to secure improvements in standards for children and young people. It will help ensure all pupils are supported to thrive at school; are valued, visible and included in their local communities, and are prepared for a happy, healthy, and productive adulthood. There is a strong connection between Area 5 and Area 2 on inclusion.
- This system-wide approach is being demonstrated through the robust engagement and consultation with partners on the Localities Model, with 12 district roadshows involving 316 schools. The model will align to NHS Primary Care networks to allow schools and parent better access to support locally and will allow us to better connect families to other support in their local area, such as Care Navigators for Primary Care Networks supporting families with neurodiversity.
- Partners are actively influencing future provision, such as the Specialist Resource Provisions review involving nine NHS trusts and the parent and student voice built into monitoring and evaluation, and schools, Multi Academy Trusts (MATs), specialist and commissioned services and Health using the GATIE district dashboards data to better meet the needs of young people in schools.
- Area 5 actions rely on this effective collaboration with partners across the Kent local area system and can be impacted by progress throughout the academic year cycle. However, it is encouraging that since reporting began in July, a third of actions have now been completed. Two actions (5A1 and 5B2) are now complete and reporting blue as the change is embedded. Two further actions (5A2 and 5E2) are reporting green which means the actions are complete, showing positive progress is being made.
- Five actions (42%) are on track to complete by their expected end date of which four actions have end dates in 2024 (5A2, 5A3, 5B1, 5E2).
- As we begin to complete actions in Area 5, we are beginning to see the impact ratings improve. One action is reporting blue for impact (5B2) where schools now have access to a useful set of comparative data to support and inform their inclusive practice, and the benefits of this can be seen and evidenced. Four actions (33%) are currently reporting green for impact (5A1, 5A2, 5C1 and 5E2), where there is early evidence of positive impact, including qualitative data from schools.
- 6 of the 12 actions in Area 5 (50%) are reporting amber for impact, meaning they are on track to deliver impact by the anticipated date. It will be important to continue to follow up on supporting evidence for improvements for children and young people.



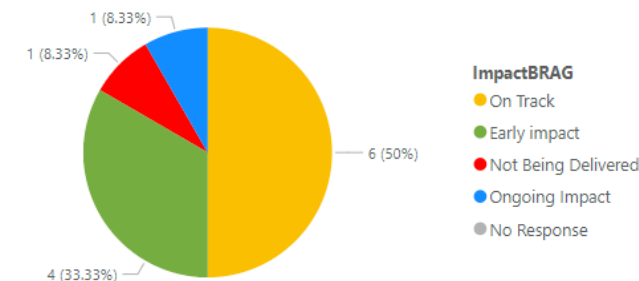
12 actions

- 2 actions complete with change embedded
- 2 actions complete
- 5 actions on track (42%)
- 3 actions behind (25%)

Progress BRAG



Impact BRAG



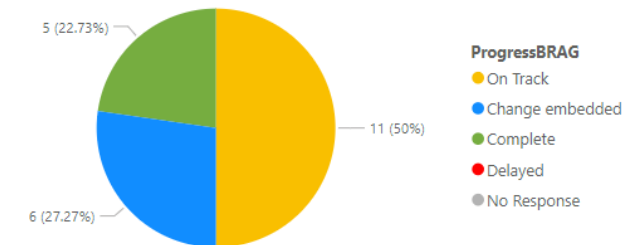
Area 6 Summary – EHCPs

- Whilst there remains a need to improve the quality, compliance and consistency of practice, since the Improvement Notice partners have worked hard to transform the robustness of the Quality Assurance process. A new Quality Assurance Framework is now in place, with four multi-agency Audit Cycles completed, to support practitioners using learning loop material, an evidence improvement template for leaders to oversee in their services and supporting continuous improvement in the EHCP process.
- The latest audit and moderation report demonstrated that we are embedding our quality assurance framework around ‘what good looks like’ with greater management engagement, and significant partnership work with KCC, Education, Health and Kent PACT. This is evidenced through multi-agency audits and co-development of joint action learning plan which will further improve the contribution of partners in the EHCP process.
- Kent PACT are revisiting the quality of feedback forms and surveys to consider redesign through co-production, to increase understanding of impact for parents, carers and families and ensure we are picking up and acting on the right information from families.
- There needs to be a greater focus on supporting a successful transition to adulthood, but there is stronger collaboration with Adult Social Care and partner agencies, including the Kent and Medway Employment Taskforce and the Kent Invicta Chamber of Commerce on Supported Internships.
- In October 2023, progress for Area 6 continued to show positive improvement, with 11 of the 22 actions (50%) on track to deliver by their expected end date and the remaining 11 actions (50%) either reporting as Complete or Change Embedded. No actions have reported being behind since August 2023.
- However, our KPIs for EHCPs remains very challenging and it will take time for the actions being put in place to demonstrate impact, which is shown through the consistent red impact ratings. Whilst 50% of the actions in Area 6 have reported as Completed, only 22% of the actions are showing early or ongoing impact.
- A lot of actions in this area are about reviewing processes that have been embedded in the service for some time, which emphasises the importance of the culture work that is happening alongside these actions and projects in the service itself. For completed actions we will now be looking at further improving and refining those processes for children, young people and families, as we embed this in consistent practice.
- 4 actions are currently reporting as Red for Impact (6B2, 6F4, and 6J3) - these ratings are consistent throughout the reporting months since July and KCC, Health and Kent PACT as owners of these actions will be working closely together with the Area Lead to improve these.

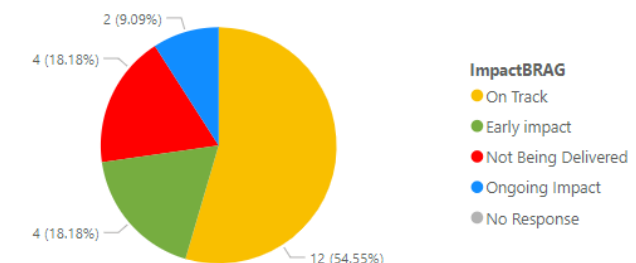


- 6 actions complete with change embedded
- 5 actions complete
- 11 actions on track (50%)
- 0 actions behind

Progress BRAG



Impact BRAG



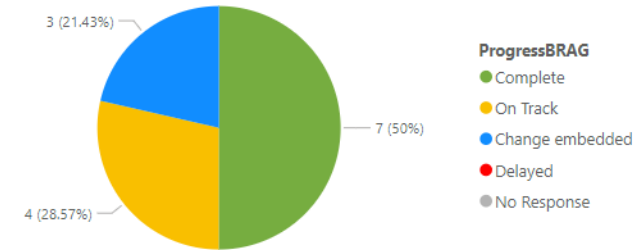
Area 7 Summary – Governance

- One of our first priorities as a system was to transform our governance arrangements, to learn lessons from the Revisit and look ahead to strengthen partnership collaboration across the system and work together to deliver the APP. Trusted relationships continue to be developed between partners and there is a commitment to reflection and continuous improvement, for example SIAB's evaluation survey in July and workshop led by Graham Razey, Deputy Chair in October.
- In addition to SIAB, PDG and Task and Finish Groups, the assurance and oversight of SEND has been further strengthened with visible system leadership in each organisation including refresh of Kent PACT's Collaboration Agreement, establishment KCC's SEND Scrutiny Sub-Committee and refresh of the Children and Young Joint Commissioning Group and the ICB's SEND Network and specific working groups on Neurodiversity, Social Emotional and Mental Health and Complex and Crisis Care.
- Effective progress on initial engagement, co-design and planning for co-production and consultation on the SEND Vision and Strategy (7B1 and 7B2) is underway, which will involve the direct voice and experience of children, young people and families, and key partners including Kent PACT, Health and Education Sector representatives from Early Years, Mainstream, Special Schools and Further Education. There was positive support for a strong vision for all children and young people, including SEND, with further focus on infants and transition to adulthood, supported by SIAB in October.
- In October 2023, progress for Area 7 was positive with no delayed actions reporting Red for progress, 4 of 14 actions (28%) on track to deliver by their end date and 10 actions (71%) completed and evidencing impact (3 of 14 actions (21%) are reporting Blue and 7 of 14 (50%) are reporting green).
- The majority of the completed actions were 'one off' or 'enabling' activities, centred around updated governance processes. Further work will continue to ensure the arrangements are fit for purpose, that governance continues to mature, and terms of membership and attendance is regularly refreshed.
- Most of the actions within Area 7 are enabling activities which support strong governance, oversight and strategy – they have an in-direct impact on children, young people and families but collectively contribute to the improvement journey across all Areas of Weakness. 7 actions are now reporting as Green for impact (early evidence of impact), with 7A2, 7A3, 7E1 and 7F1 consistently rated as Green.
- Impact ratings have improved from September to October – all actions are now reporting as at least Amber for impact, showing they are on track to deliver expected impact, mostly linked to SEND strategy items which will be delivered by April 2024, so will take longer to demonstrate impact for children and young people.

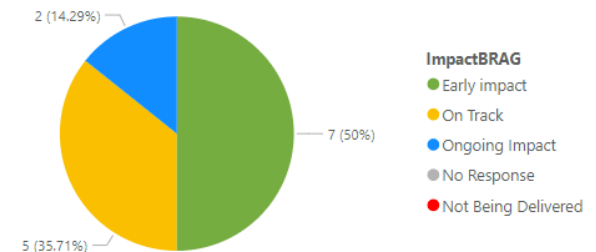


- 3 actions complete with change embedded
- 7 actions complete (50%)
- 4 actions on track (29%)
- 0 behind

Progress BRAG



Impact BRAG



Area 8 Summary – Waiting Times

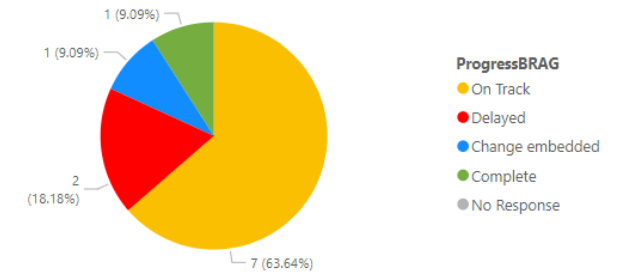
- SEND has been recognised as a NHS system priority for the first time, and as an essential part of transformation programmes overseen by Kent and Medway Integrated Care Board (ICB). Since the Improvement Notice, there has been much stronger collaboration and joint working between Health and the Local Authority, with co-chairing of governance groups, joint funding of posts, and a deeper understanding of across organisations interoperability, rather than single organisational actions. There is also tangible commitment to co-design and co-production with Kent PACT and Schools (e.g. the Balanced System Framework now embedded in 185 schools in Kent).
- Too many families are still waiting too long for the support they need, which is a nationally recognised issue, exacerbated by the supply-chain changes since the pandemic, particularly for specialist equipment. The focus in the Kent local area system is not only on robust remedial action plans to reduce waiting times - which is a longer term endeavour - but how we actively engage with, support and listen to children, young people and families during the process.
- Partners and providers have made real step-changes to co-design new pathways of support with families in Speech, Language and Communication Needs (SLCN), Neurodiversity (ND) and Specialist Equipment, including more local support in local communities through Care Navigators. This is building on ground-breaking national best practice, such as the 'This is Me' tool.
- It will take longer for these foundations improvements to come through in the data, performance and impact for children and young people, but we are seeing encouraging early signs of positive movement in our trajectories, particularly in Kent and Medway performance against national trends, and committed to working with NHS England in further enhancing our data quality.
- In October 2023, progress for Area 8 was positive with just 2 of the 11 actions (18%) reporting Red for Progress. This is a similar rate to September, but an improvement from earlier in the summer when 37% of actions were reporting delayed. Now 7 of 11 actions (64%) actions are on track.
- 5 of the 11 actions (45%) in Area 8 are not due to complete until 2024 so we would not yet expect to see evidence of impact, but impact milestones are being requested in reporting. The majority of actions (72.73%) are reporting that they are on track to deliver impact by the action end date.
- 2 actions are reporting red for impact. Action 8A4 (consistent and managed approach to ND waiting list management) is behind schedule so is not yet seeing impact and action 8B1 (alternative prescribing and review model for ADHD) is not yet able to report impact. This is being followed up by the Area Lead.



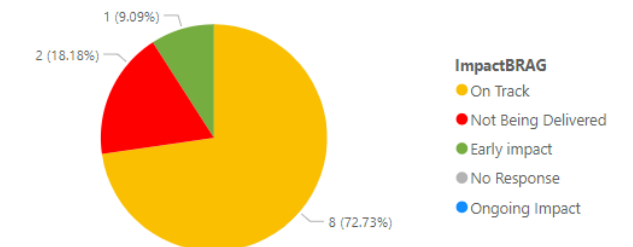
11 actions

- 1 change embedded
- 1 complete
- 7 on track
- 2 behind

Progress BRAG



Impact BRAG



Area 9 Summary – Systems and Outcomes

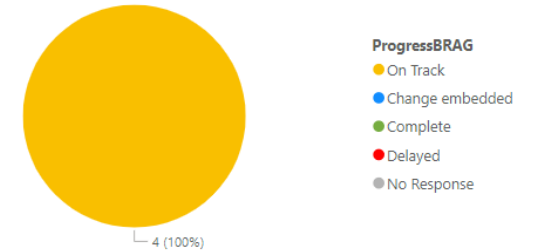
- Consistent attendance at school is essential to support to enable such children and young people to catch up and secure improved outcomes. Kent has a higher proportion of children, in particular those with SEND, who are not attending school. To address the education provision for children who have been adversely affected by previous weaknesses in provision, we have taken actions to ensure that there are consistent standards of tuition (9A1 and 9A2) provided to support access to education when children do not have a school place, and/or children have been excluded from school.
- Materials are being created to support parents and schools to work together to enable children and young people with emotion-based school avoidance return to school (9A3). The materials are being reviewed by Kent PACT to ensure that the way in which information is communicated is accessible and useful to parents and carers.
- The key focus for emotion-based school avoidance is support for schools and working together across KCC and NHS Kent and Medway to improve attendance and reduce issues related to mental health in young people. Updated data on persistent absence, indicates a significant drop in persistent absence (Swale, Sevenoaks, Folkestone and Thanet) in areas where 50% or more of schools have engaged with the emotion-based school avoidance (EBSA) pathway.
- In 2021 over 80% of referrals for complex mental health to the Complex Case Key-Worker Team were for young people who had persistence absence or were not attending school at all. Now in the last four months no referrals from students that were experiencing EBSA on top of complex mental health needs have been referred requiring this service.
- Kent has had feedback about lack of clarity about the vision for children’s education including those with SEND. The Education and SEND Strategy, which will be underpinned by a refreshed Children and Young People’s Outcome Framework (9A4) is being co-developed with parent and carers’ engagement through close collaboration and expertise from Kent PACT.
- Good progress is being made in Area 9 with all actions reporting in October as on track and no actions reporting as Red for progress. All 4 actions in this area of weakness have end dates in 2024 and beyond, so the dominance of ‘red’ and ‘amber’ impact ratings over the period July - October 2023 is a reflection of the expected goal attainment timescale.
- All Area 9 actions remain actively in progress to gather evidence of impact, and actions 9A1, 9A2 and 9A3 are expected to demonstrate impact by the end of the academic year 2023/24, if not before. The groundwork for delivery of impact has been methodically and proactively developed, with young people’s wellbeing and educational attainment as the focus. One action (9B) is reporting as Red for impact – this is because the Children and Young People’s Outcome Framework is part of the SEND strategy review, with the strategy still being devised. However, the work is on track and expected to evidence impact when the strategy is completed in 2024.



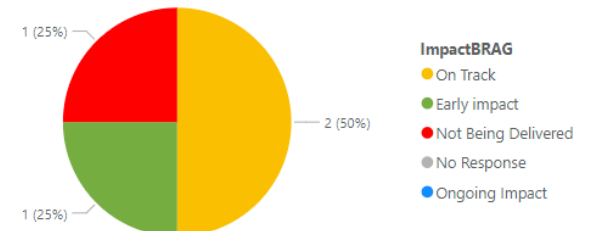
4 actions

- 0 actions complete with change embedded
- 0 actions complete
- 4 actions on track
- 0 actions behind

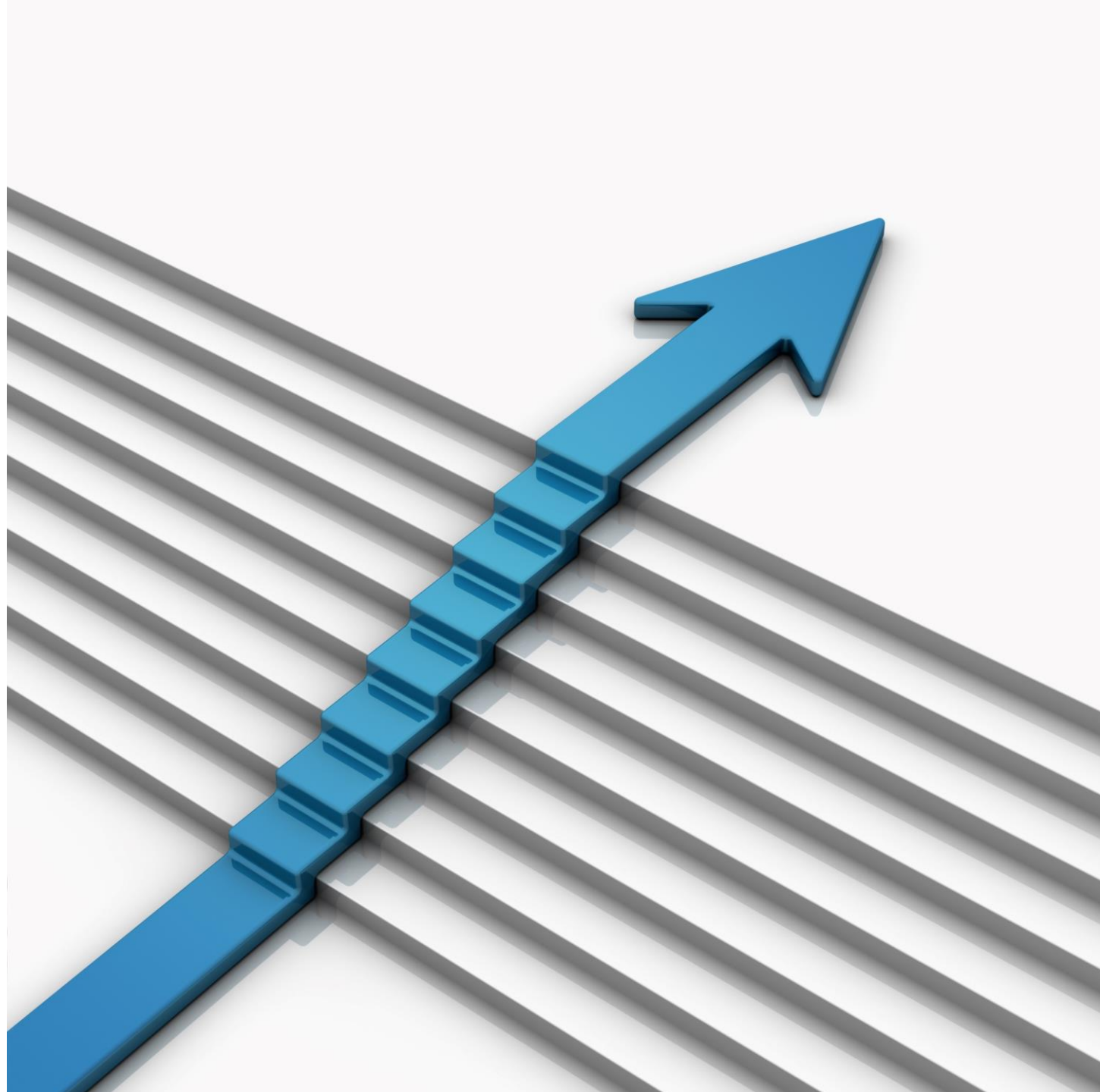
Progress BRAG



Impact BRAG



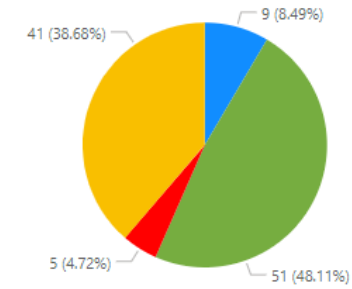
Overview of Progress



Overview of Progress

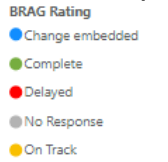
- There are currently 116 actions within the APP, with responsible action owners asked to report every month. We have consistently had over a 90% response rate, with 97.4% of reporting leads responding for October 2023.
- Our current position sees 40 actions (35.4%) either reporting 'completed' – either as Blue (Change Embedded) or Green (Complete) compared to 37 actions (33.6%) in August.
- The number of Blue actions has increased by over 5% in that time so now 16% of all actions are reporting as 'change embedded'. Area Leads and Business Analysts are following up to ensure there is tangible evidence to support the Blue rating.
- The majority of actions are currently On Track (56.64%) and that figure is similar to August (56.36%).
- Of the 64 currently On Track (Amber), 34 actions (53%) of those are confident of reporting an improved progress BRAG for the next reporting period.
- The number of delayed actions has reduced from 11 actions (10%) in August to 9 actions (8%) in October. Of the 9 current Delayed (Red) actions only 1 (11%) is confident of reporting an improved progress BRAG for the next reporting period, which will require further challenge from the Area Lead.
- We also ask reporting leads to choose the current status of their actions from the following options - completed, in progress, behind, not started. This can vary from month to month in reporting, so we are focused on requesting supporting evidence to back up any 'completed' actions, so we need to do further work with the Area Leads to tackle this variation. In October our position was:
 - Not started – 1 action
 - Behind – 11 actions
 - In Progress – 72 actions
 - Completed – 29 actions
- It is important to note that following the first reporting round in July, we tackled optimism bias with clearer definitions and guidance of exactly what the BRAG status is for reporting leads ahead of the second round of reporting in August, so the figures from in the last 3 months are felt to reflect a more realistic and accurate starting position.

Progress BRAG

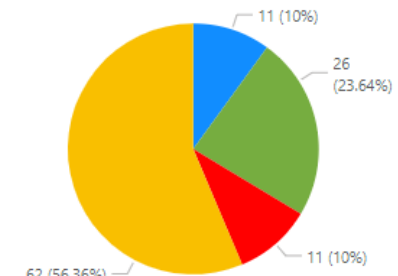


July 2023

106 actions reported

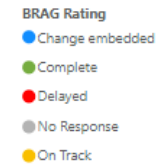


Progress BRAG

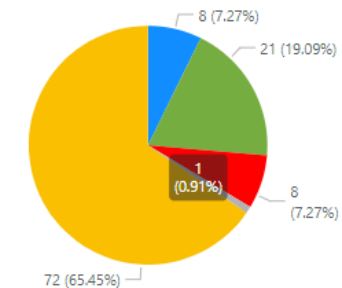


Aug 2023

109 actions reported

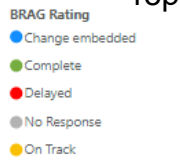


Progress BRAG

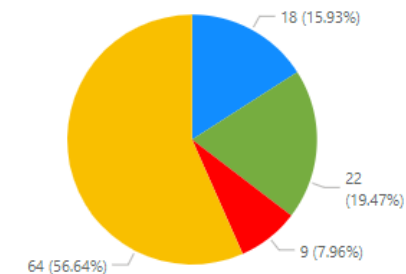


Sept 2023

108 actions reported

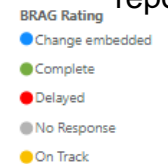


Progress BRAG



Oct 2023

113 actions reported



Blue areas of Progress

Blue indicates that change is embedded

Blue Actions- Progress BRAG			
AoW	Action	APP End Date	Commentary
1	1A2	31/05/2023	Action completed and reported as changes have been embedded and an initial evaluation has been conducted. Whilst the new process is now being taken forward as part of core business, the impact will continue to be challenged by the Area Lead as we have not yet seen the expected improvement in consistent practice.
2	2A1	25/07/2025	Action completed in July 2023 and is training has been rolled out and being delivered as business as usual, with supporting evidence provided. The mainstream core standards are now being embedded in practice through Action 5A3 (amber).
2	2A3	31/07/2023	Evaluation of the pilots has taken place and findings have been shared with stakeholders.
3	3A1	31/03/2023	Session was held in March 2023 and the lived experience framework is now in development.
3	3B1	28/02/2023	The action has been completed and the project has moved to the next phase.
3	3B4	31/03/2023	Event was held in March 2023. Action now completed.
Page 29	5A1	28/07/2023	All the work on the project has been delivered and the evaluation is being completed and should be received early in the new calendar year.
	5B2	30/11/2023	Action complete - CATIE dashboard has circulated to schools.
	6A1	31/05/2023	This action has now completed and impact is being monitored.
6	6A2	30/06/2023	Action completed in July 2023.
6	6D1	31/05/2023	Project complete as implementation of all major changes completed. Impact being monitored.
6	6E2	30/04/2023	Action complete. Task and Finish group held with all key health partners in May 2023.
6	6G1	31/05/2023	Within this project, process mapping and data analysis was carried out to identify improvement opportunities. A number of these improvements have been identified, deigned and implemented.
6	6H2	31/07/2023	Action complete. Communication was sent to all schools regarding the phase transfer annual review documentation and expectations of when this would be completed.
7	7A1	28/02/2023	This enabling action completed in Feb 23, with all terms of reference documents updated and agreed with the relevant boards and meeting groups.
7	7A3	28/02/2023	This enabling action completed in Feb 23 with all partners continuing to be well represented across the SEND partnership governance arrangements, who are all focused on making a difference for children, young people and families.
7	7B3	31/03/2023	This enabling action completed in March 23. SEND is included and publicly published in the ICS strategy and 5 Year Plan.
8	8E1	30/09/2023	This action has been completed. In response to parental concerns, online assessments have stopped and all assessments are now face-to-face.

Green Actions- Progress BRAG			
AoW	Action	APP End Date	Commentary
1	1C1	28/02/2023	SEND complaints resource has now been moved to a centralised team. A complaints backlog team is being implemented
1	1C3	01/08/2023	Impact of the Hub is being monitored and evaluated. A Power BI report is being developed. Draft Operating Plan in place.
1	1F1	30/04/2023	Action is complete - digital form is live and a podcast is available for health professionals to understand how and why to complete notification.
3	3C1	30/06/2023	Action has been completed – the new Collaboration Agreement is signed and review dates are in place.
3	3E1	28/02/2023	Action has been completed and feedback from lived experience experts shaped the tone and information in the letters/emails.
4	4A2	01/04/2023	Good progress is being made. The Children and Young People Joint Commissioning Group has been established and developed its priorities and activities.
4	4B2	31/08/2023	Good progress has been made in the development of the Thrive framework.
Page 28	5A2	31/08/2024	This action is on track and due to complete by the expected end date with anticipation to reach the full target of 300 schools.
	5E2	31/03/2024	Good progress is being made. Work is in progress to integrate the new Inclusion Leaders of Education and the Headteachers of participating schools as leaders of inclusion in the new locality-based model.
6	6B1	31/07/2023	The 4th cycle four of the audit and moderation cycle is currently taking place, with Cycles 1-3 successfully delivered as part of a learning loop. Now able to draw conclusive evidence of the quality of practice between one month and another.
6	6D3	30/11/2023	The Annual Review backlog manager is collating learning as the project moves through its stages. The project is on track although the original action end date is delayed.
6	6E1	31/12/2023	There is a clear plan of action in respect of the partner agencies and these have been divided up into five areas of improvement Education, Health, Educational Psychologist and SEND. Project is on track to complete by end date.
6	6F2	30/06/2023	Good progress is being made and two additional members of staff have been recruited to focus on the 18 to 25 cohort.
6	6F3	01/06/2024	This project is on track and key areas of focus for supported internships in Kent are being progressed.

Green Actions- Progress BRAG			
AoW	Action	APP End Date	Commentary
7	7A2	31/07/2023	This enabling action completed in July 23 with the Terms of Reference still fit for purpose at this stage in the governance arrangements. Terms of reference have been reviewed with the relevant board/groups and updated where required.
7	7A4	28/02/2023	This enabling action is now completed in October 23 as the SEND Health Network is now established with TOR and governance, with partners sharing voice and lived experience including Friends and Family Feedback with clinical teams.
7	7C1	19/07/2023	This enabling action completed in September 23. The APP was published on 8th September and communications to key stakeholders took place from then over two weeks, including a media release and subsequent media interviews conducted.
7	7D1	31/01/2023	This enabling action completed in Jan 23. The SEND Sub-Committee was agreed by the Scrutiny Committee in January 2023. It first met in March and has met four times since.
7	7D3	31/05/2023	This enabling action completed in August 23. The APP Scorecard is discussed at monthly assurance meetings as part of an established process and now considered embedded in business as usual, with regular refresh of targets and indicators.
Page 29	7E1	28/02/2023	This enabling action completed in early '23. A Strategic Improvement and Assurance Board and Partnership Delivery Group with clear Terms of Reference and Membership have been established and continue to regularly meet.
	7F1	30/06/2023	The first assurance report was prepared and submitted in June 23 but there continues to be more to do to gain a consistent understanding of BRAG's, impact and milestones/end dates, challenge quality of responses and optimism bias.
8	8A5	31/07/2023	Comms and Engagement Strategy Final draft agreed. Plan to take to the CYP Programme Board in November for sign-off and adoption, when action is expected to be completed. A one year action plan has also been developed.

Amber areas of Progress

Amber indicates that actions are on track.

Amber Actions- Progress BRAG			
AoW	Action	APP End Date	Commentary
1	1A1	30/09/2023	Progress is being made with further work on the delivery plan underway and due for approval in November 23.
1	1A3	01/10/2023	This is now a standing agenda item at the Comms & Engagement T&F Group. Additional comms capacity will be in place from early November to progress this work.
1	1A4	30/04/2024	Progress is being made and all health providers have been informed of the e-learning platform.
1	1B1	01/10/2023	Comms plan will go to the CATIE group for review in November. Action has a revised end date of 30 th November 2023.
1	1B2	30/06/2023	Draft plan being finalised and will be reviewed by Interim Assistant Director for SEND Operations at end of October.
1	1B3	31/12/2024	Good progress is being made, including the development of training materials and the implementation of a quality assurance framework
Page 30	1C2	30/04/2023	Enquiries Hub has been launched, and bespoke training for the team and mystery shopper process are being implemented.
	1C4	31/07/2023	Recruitment has been successful and the service is now well resourced. A full training programme is being developed.
	1D1	31/10/2023	Progress is being made and a survey of schools has informed the future targeting of Educational Psychology support.
1	1D2	22/12/2023	Good progress is being made and recruitment has commenced to increase capacity in the SEND Therapies Team.
1	1E1	31/01/2023	Survey has been co-produced with Kent PACT, Education Leads, and KCC Analytic to ensure it is meaningful and measuring the right things.
1	1E2	30/04/2024	Progress is on-going and the action is being discussed at the Quality Assurance Task & Finish Group.
1	1F3	TBC	Progress is being made – engagement report has been completed and co-production activities are underway. 3 models are being tested and piloting will run from January to March 2024.
2	2A2	26/09/2023	Review has been completed and options appraisal conducted. Recommendations are being discussed and agreed.
2	2A4	31/08/2025	Action is progressing well and training is in place across all districts.
2	2B1	March 2023 Pilot	Planning was delayed by the start of the new school term in September. Primary school has been identified but waiting for meeting dates from the school. Promotion of 16+ videos is being scheduled.
2	2B2	31/03/2023	Action is progressing well and improvements have been made to the phase transfer process. Placement app has been developed to support the process.
2	2B3	31/03/2024	Action is progressing well and is on track to be delivered by the due date.

Amber areas of Progress

Amber indicates that actions are on track.

Amber Actions- Progress BRAG			
2	2D1	02/09/2024	Project is progressing well and conversations are on-going with social care and education about widening the scope of the plan.
2	2D2	31/07/2024	Progress is being made and districts have started submitting transition plans.
2	2D3	30/04/2024	Good progress is being made. Work on guidance has started and workshops have taken place.
2	2E1	01/09/2023	A Steering Group has been established and each meeting of the group will focus on a key priority area.
2	2E2	31/07/2024	The localities consultation is on track to be launched in November, with a consistent narrative to be shared.
3	3A3	30/09/2023	It has been agreed that the Kent Youth Council will provide the role of ICB Shadow Board, rather than creating a whole new board. The Council has capacity to support the ICB now but will have a fuller portfolio of SEND work from January 2024.
3	3B2	31/07/2023	Good progress is being made to progress the RISE project and meetings are taking place with KCC and Health. Co production training for stakeholders and parents is taking place in November 23 and the Charter will be consulted on and finalised in January 24.
Page 31	3B3	31/03/2024	Progress is being made and the Good Conversations methodology will be completed this month. A method of call feedback is being co-produced with Kent PACT and KCC's Analytics team.
31	3B5	30/09/2023	Progress is being made and a RISE project workshop was held in October to discuss the intended action plan. Training will be taking place from November 2023 and evaluation of the framework is expected in 2024.
3	3C2	31/12/2023	Kent PACT is making good progress but the summer holidays impacted capacity and the ability to progress work.
3	3D2	30/04/2023	Action is making progress on the voice of children and young people within health services, supported by NHS England funding and engagement work has been ongoing since the summer holidays.
4	4A1	31/05/2024	Action is progressing well. The SEND service needs to embed as business as usual to routinely consider joint funding opportunities as appropriate.
4	4B1	TBC	The action 3A1 on agreement to proceed with the development of the Lived Experience Framework was completed. Good progress is now being made in the development of the lived experience framework document. Updates have been provided on progress and next steps, with consultation on draft content with key colleagues and steering group help in October 2023. Surveys and events have been used to gather parent/carer and children and young people's feedback. Draft should be completed in early November 23 and seeking endorsement from Think Local Act Personal in Social Care Excellence.
4	4C2	30/04/2024	Progress is being made on developing the Children and Young People's Strategy, with workshops with stakeholder held in September and the vision statement has been agreed. Task and Finish Groups will continue to meet. Longer term action currently on track to meet expected end date.
4	4C3	30/04/2024	Good progress is being made on maturing health data and cross-organisational conversations about joint commissioning are continuing. Key leads are meeting to progress the SEND specific joint commissioning delivery plan and baseline data. Engagement ongoing with NHSE advisers. Longer term action currently on track to meet expected end date.

Amber areas of Progress

Amber indicates that actions are on track.

Amber Actions- Progress BRAG			
AoW	Action	APP End Date	Commentary
5	5A3	Ongoing	Good progress is being made with the mainstream core standards training incorporated into the core contract for the School Improvement Team. From April 2024, the training will become part of the core school improvement offer. Relates to 2A1 as we continue to embed the core standards in practice.
5	5B1	01/04/2024	Work is on track and the current priority is preparing for the public consultation to launch in November 2023. 12 district meetings have taken place with schools and 316 schools across the county have attended.
5	5C1	30/09/2023	Progress is being made but the action did not meet its original end date. Staff training modules and Working Together to Improve School Attendance' guidance is on track to be completed and distributed by end of November. The Special Schools process will be evaluated by end of December 23
5	5C2	30/09/2023	Progress is being made but the action did not meet its original end date. - Communication continues with each PRU Head/management committees and IYFA panels when required to discuss individual case studies. Audit summary of school spend will be completed by end of November, with a consultation on funding agreements in 2024.
Page 32	5D1	31/07/2023	Progress is being made with new contracts and SLAs on track to go out to schools on schedule. All contracts are expected to be signed and returned by end of December 2023, embedding this as business as usual from January 2024.
	6B2	31/03/2023	Action is 80% complete but minimal progress this month due to interdependencies with the SEND service. There could be a potential delay to the action end date.
6	6C1	30/04/2023	Through the process of grading over the last 6 months we have established a benchmark of grading in the service in respect of % of good, RI and inadequate, our overall plan use the benchmarking figures against new grades to understand if the practice, resulting from the learning is improving.
6	6C2	31/03/2023	Progress is being made with good uptake of training. There is a delay to the original action end date.
6	6D2	31/08/2023	SEND Handbook will be published in January 2024 with engagement underway. Project is now progressing well with no major risks.
6	6F1	29/08/2025	Pathways for All aims to develop and improve system efficiency and effectiveness with the Project on track and good progress being made.
6	6F4	31/10/2023	Work not yet started on the communications plan so is not on track, with additional resource expected in Nov 23 to accelerate pace.
6	6H1	31/07/2023	Current staffing structure now exceeds expected establishment in key assessment and case management teams. Work is behind schedule
6	6I1	01/04/2024	Current staffing structure now exceeds expected establishment in key assessment and case management teams. Work is behind schedule
6	6J1	31/12/2023	Kent PACT (KP) engaged in Quality assurance (QA) framework for EHCP reviews. Work is on track.
6	6J2	31/12/2023	Service is currently reviewing the questions and timings of the surveys. There is an agreed way forward and planning scheduled to ensure project completion in a timely manner.
6	6J3	01/12/2023	Review of existing processes from education, KCC and health providers has commenced Work is still in scope but is on track.

Amber areas of Progress

Amber indicates that actions are on track.

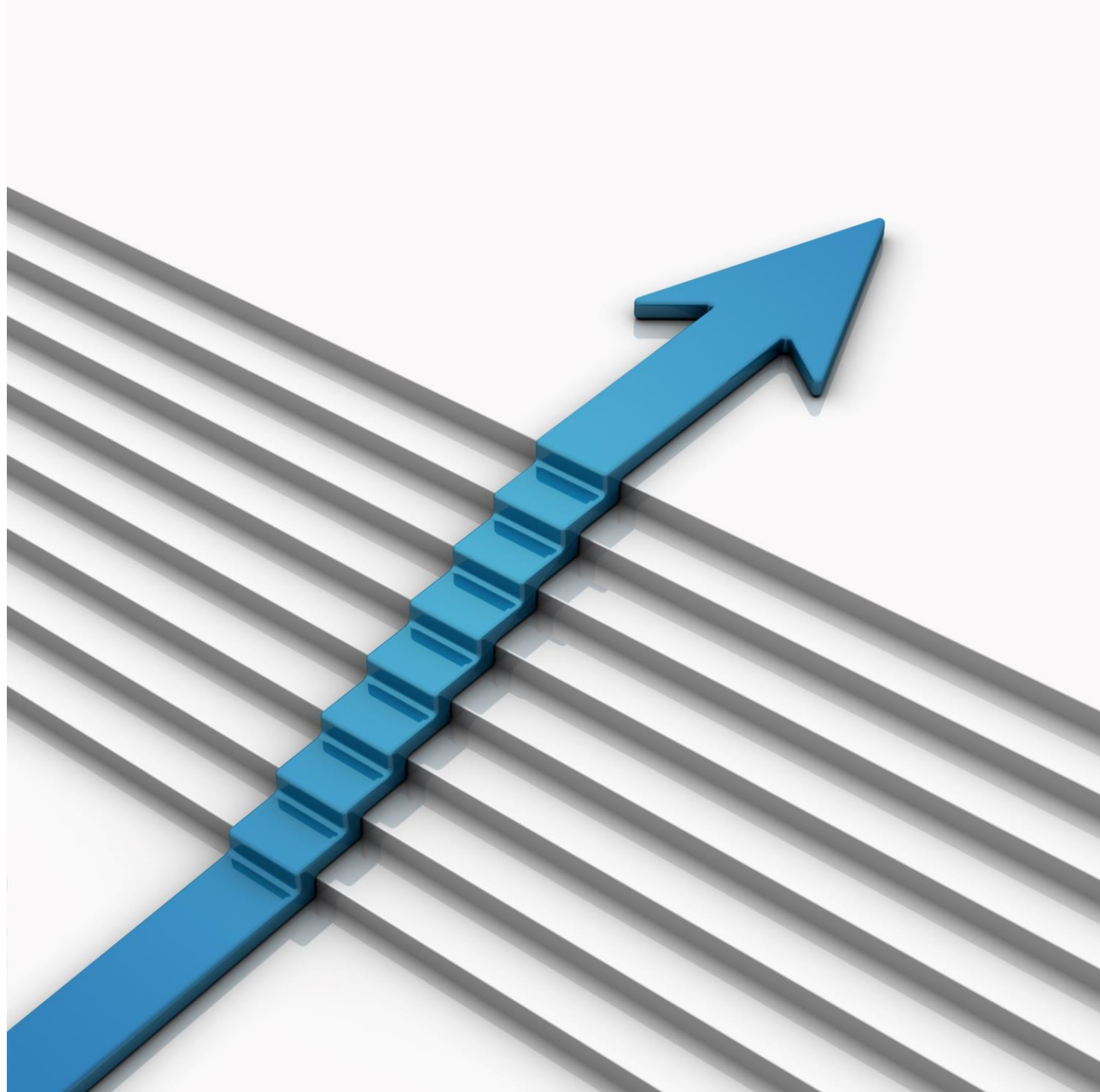
Amber Actions- Progress BRAG			
AoW	Action	APP End Date	Commentary
7	7B1	30/04/2024	The SEND strategy will be approved in April 2024 and is currently on track.
7	7B2	30/04/2024	The SEND strategy will be approved in April 2024 and is currently on track, with engagement and drafting underway.
7	7D2	01/12/2023	A risk register has been informed by key stakeholders and is being regularly reported on to the SIAB. This is provided with the risk strategy as part of the 6 month review and is on track to be in place before the end date.
7	7F2	Ongoing	This enabling action is now completed as a system has been established to enable a monthly review of exceptions for APP scorecard, which is presented at SIAB.
8	8A1	31/12/2023	Action is making progress and ways to increase the completion of health assessments are being trialled and tested.
8	8A2	31/12/2023	Now expected to deliver by Mar 24, with milestones in place. SROs and a support team are in place, with funding being defined and development of the business plan and continued expansion of the This is Me pilot in schools.
8	8A3	31/12/2023	Action is on track to meet deadline with Practice managers meeting arranged for Early November to share data and enhance engagement
8	8C1	30/04/2024	Action is making steady progress and district work with schools is starting to increase access to educational psychologists.
8	8C2	30/04/2024	Action is making good progress. Draft case studies for service level outcomes in development and an agreed SLCN Overview Transformation programme for action plan strands to be completed by 7th November with 3,6, and 12 month elements.
8	8D1	30/04/2024	Action is on track to be delivered by the due date. Participation with Joint Commissioning Sub Group in September. Better Communication service deliver document in place to inform SLCN commissioning. Key decision for SLT services planned in November 23.
8	8F1	30/0/2024	Steady progress is being made and whilst the action is currently behind due to national capacity issues in the wheelchair service to conduct assessment and handover of equipment, this is expected to be on track to meet the end date and there are milestones in place for when we expect to see an improvement in performance in the timeliness of providing wheelchairs to children.
9	9A1	31/08/2025	Work is on track and due to complete before the expected end date. Revised KPIs for The Education Programme have been developed.
9	9A2	31/08/2026	Work is on track and due to complete before the expected end date. All but 6 contracts for external tuition providers have been sent to the printers. Dates have been put into the diary for evaluation of subsequent rounds of application.
9	9A3	ONGOING	The Emotionally Based School avoidance pathway for Kent is now established and available for all schools and services across Kent to access. End date updated to 26/07/2024.
9	9B1	30/04/2024	The Review of the Children and Young People's Outcome Framework is being taken forward as an aspect of the reviewed SEND strategy. Action is on track.

Page 33

Red indicates the action is delayed

Red Actions- Progress BRAG			
AoW	Action	APP End Date	Commentary
1	1E3	31/12/2023	Action is behind schedule but updating the survey is being treated as a priority piece of work by the ICB.
1	1F2	30/09/2024	Contract to co-create a perinatal mental health and parent infant relationship strategy near completion has mobilised and is active. The Key Decision to progress to implementation is now expected in November 23.
2	2C1	31/12/2023	Project is behind schedule due to consultants not delivering work of the expected quality.
2	2D4	31/07/2024	Project is currently behind schedule. Conversations are on-going about how to collect student voice as part of the locality consultation.
5	5C3	31/12/2023	Project has been put hold as the NHS have paused the workstream following directions from the regional SEND Team that this work will form part of the national movement to review pupils with complex needs accessing Home to School transport.
Page 5 of 8	5E1	30/09/2023	Work is behind schedule and capacity in Commissioning is impacting ability to deliver. Options to hand the project over to more closely align with the ongoing development of the School Resource Directory (5E3) are being explored.
	5E3	31/10/2023	Action is behind schedule due to missed content collection deadlines affecting overall project deadlines. Content collation is expected by mid November 23.
	8A4	30/09/2023	Action is behind schedule. Awaiting SRO/Lead for system to be identified and confirmed.
8	8B1	31/01/2024	Action is currently behind schedule. Working group has been set up with relevant leads to devise strategy and actions and clinical reference group being formed.

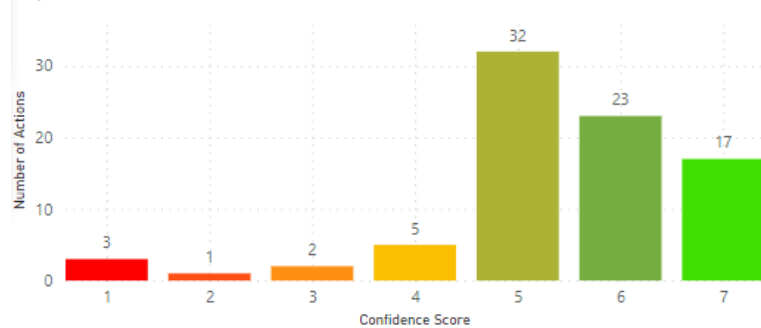
Overview of Impact



Overview of Impact

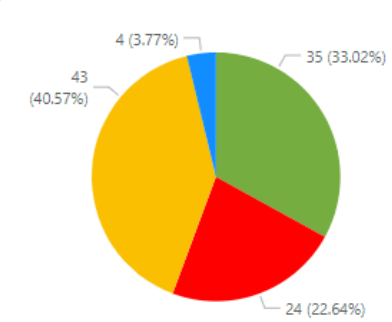
- To support the 6 Month Review process, we have asked the Area of Weakness Leads to contribute supporting evidence, particularly evidence of working as a system and where we are seeing early impact for children, young people and families. The supporting evidence underpins the professional 'check and challenge' on impact ratings, including completed actions. It is important evidence is high quality and robust and this will become a real focus on the next 6 months, including our preparation for future inspections.
- It is important to note that, following the first round of reporting in July we provided tighter definition and guidance for impact BRAG status for reporting leads ahead of the second round of reporting in August, so the figures from then are felt to be a more accurate and realistic starting position, however this still needs greater follow up and moderation.
- Our current position sees 34 actions (30%) either reporting as Blue (Ongoing Impact) or Green (Early Impact) which is the same as in August.
- The number of Blue actions has doubled in that time so now 7% of all actions are reporting as having Ongoing Impact.
- The number of actions Not Being Delivered (Red) has reduced from 27 actions (24.5%) to 23 actions (20.3%). When looking at the detailed reporting commentary, the majority are actions completing late 2023 into 2024-25 and so likely to take longer to evidence impact.
- Just under half the actions are currently On Track (49.5%) and that figure is up from August (44.5%).

Bar Chart showing how confident action owners are that their BRAG will improve



- Of the 8 current Ongoing Impact (Blue) actions, 5 actions (62.5%) of those are confident of continuing to report as Blue for the next reporting period.
- Of the 26 current Early Impact (Green) actions, 15 actions (57%) of those are confident of reporting an improved progress BRAG for the next reporting period.
- Of the 56 current On Track (Amber) actions, 23 actions (41%) of those are confident of reporting an improved progress BRAG for the next reporting period.
- Of the 23 current Not Being Delivered (Red) actions, 8 (35%) are confident of reporting an improved progress BRAG for the next reporting period.

Impact BRAG

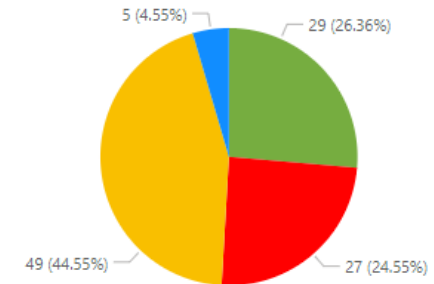


July 2023

106 actions reported



Impact BRAG

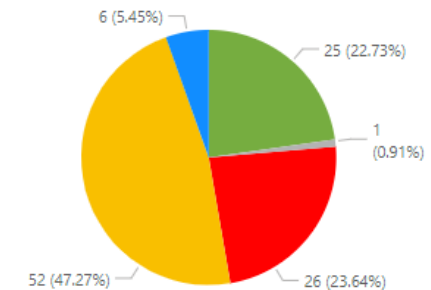


Aug 2023

109 actions reported

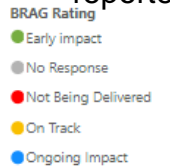


Impact BRAG

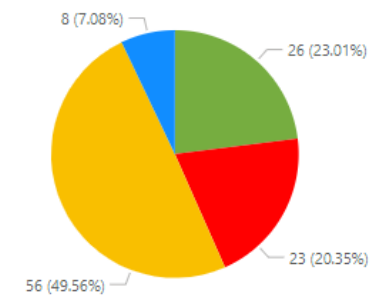


Sept 2023

108 actions reported

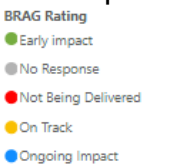


Impact BRAG



Oct 2023

113 actions reported



Blue areas of Impact

Blue indicates there is ongoing evidence of impact.

Blue Actions- Impact BRAG			
AoW	Action	APP End Date	Commentary
2	2A3	31/07/2023	Evaluation of the project has been completed by Kent Analytics and findings have been shared with stakeholders.
3	3A1	31/03/2023	The lived experience session was delivered and the impact was that the Board endorsed the need for a strategic framework.
3	3B1	28/02/2023	This action relates to discovery work which has completed. Impact will be seen when the project enters the implementation phase and will be reported through action 3B2.
5	5B2	30/11/2023	This is an enabling action so the impact will be based on the rollout and implementation of the CATIE.
6	6A2	30/06/2023	Multi agency audit of EHCP demonstrates improved quality of health sections of EHCP.
6	6E2	30/04/2023	Health outcomes have been met and are evidenced through the quality assurance process and audits.
Page 37	7A1	28/02/2023	This is an enabling action with an indirect impact on improvement for children, young people and families, with ongoing improvement expected alongside other actions in Area 7 on Governance.
	7D3	31/05/2023	The APP scorecard supports work to be focused in key improvement areas, meaning that children, young people and families will see the impact through improved service delivery.

Green indicates there is early evidence of impact..

Green Actions- Impact BRAG			
AoW	Action	APP End Date	Commentary
1	1A4	30/04/2024	Expect to see the full impact of the action in June 2024. Parental feedback is being used to monitor impact.
1	1C2	30/04/2023	There is some feedback from parents/carers already. Feedback forms are being developed to gather further insight.
1	1D1	31/10/2023	Expect to see impact in July 2024. Evidence will include feedback from young people and schools, and quantitative data.
1	1E1	31/01/2023	Parental satisfaction across parental surveys is being used to monitor impact.
2	2A1	25/07/2025	Impact of training expected to be seen in 6-12 months. Evidence will include feedback from teachers and governors, number of EHCPs, number of children in specialist placements, and number of children in non-maintained independent special schools. Relates to 5A3 (amber).
3	3B3	31/03/2024	There is early evidence that parents/carers are having positive experiences with the Enquiries Hub, with ongoing monitoring of feedback.
Page 38	3B4	31/03/2023	The event was held and there is on-going evidence of active engagement with children, young people, and families through VCSE organisations.
	3B5	30/09/2023	Impact is being measured via parental surveys to monitor parental satisfaction.
	3C1	30/06/2023	Expect to see impact from January 2024 onwards. Quarterly reports will include data on engagement and progress.
5	5A1	28/07/2023	The project evaluation is being completed and should be received early in 2024.
5	5A2	31/08/2024	Contract KPIs have been met. Expecting to see quantitative impact in the Analytics report. There is evidence of qualitative impact via feedback from participating schools.
5	5C1	30/09/2023	Expect to see impact in Spring 2024. Evidence will include attendance levels of pupils.
5	5E2	31/03/2024	Impact is expected to be seen late 2024. Report in November 2023 will start to provide baseline figures to measure against.
6	6A1	31/05/2023	Positive effects can already be seen but impact will continue to be monitored because it is anticipated that, as processes embed and staff become more confident in the process, the consistency of decision making will increase.
6	6F3	01/06/2024	Impact is on-going and evidenced through uptake of supported internships across the County.
6	6H1	31/07/2023	Impact on education likely to be linked to other actions related to staff training etc. However, full staff structure is clearly preferable to a partially filled structure.
6	6I1	01/04/2024	The impact will see an Increase in quantity and quality of assessment, placement and casework functions. Expected early 2024.

Green areas of Impact

Green indicates there is early evidence of impact..

Green Actions- Impact BRAG			
AoW	Action	APP End Date	Commentary
7	7A2	31/07/2023	Ongoing indirect impact of the work of the boards and governance arrangements to focus on positive improvements for children, young people and families.
7	7A3	28/02/2023	Partnership representation in governance arrangements is an enabling action, providing systems leadership.
7	7A4	28/02/2023	It is difficult to establish the direct correlation between the work of the SEND Network and the effect on children and young people themselves, but this group is important in driving through the deliverables to support the overall improvements in impact.
7	7B3	31/03/2023	Delivery of improvements articulated in the APP and the next SEND inspection
7	7D1	31/01/2023	The impact of the SEND Scrutiny sub-committee will be long term and is not anticipated prior to the 1 year on review in March 2024 at which point specific recommendations for change may be made.
7	7D2	12/01/2023	This is an enabling action on risk management so it will have an indirect impact on children, young people and families, through the effectiveness of mitigation of risk.
Page 38	7E1	28/02/2023	An item on impact for children, young people and families will begin every SIAB meeting. Items on impact are regularly brought and reinforced by SIAB and PDG as evidenced in papers and agendas. An evaluation is underway.
38	8E1	30/09/2023	Action no longer required as all assessments are now face-to-face. Family concerns have been fully responded to through the face-to-face assessments.
9	9A3	Ongoing	All three phases of the project are progressing well and the impact is expected over the course of the 24/25 academic year. There is now an MS form that all schools and professionals will be required to complete before they can access the resource pack for EBSA – this will support us in tracking which schools have received ongoing EBSA training.

Amber areas of Impact

Amber indicates the expected impact is on track..

Amber Actions- Impact BRAG			
AoW	Action	APP End Date	Commentary
1	1B3	31/12/2024	Expect to start seeing an impact in December 2023. Satisfaction surveys will be used to measure impact.
1	1C1	28/02/2023	The impact of centralising the complaints team still needs to be measured and understood. Expect to see impact in November 2024.
1	1D2	22/12/2023	When impact will be seen will depend on the findings of the review.
1	1E3	31/12/2023	Annual parental survey will show if health needs are being met within special schools.
1	1F1	30/04/2023	Key impact measure will be how many children who have SEND start school with their needs addressed and understood.
1	1F3	TBC	Changes are being introduced but real differences will not be seen until mid-2024 when comms campaigns will be delivered and contracts will start to be implemented.
Page 402	2A2	26/09/2023	Impact expected to be seen in 6-12 months. Evidence will include number of EHCPs for 0-5s.
	2A4	31/08/2025	A range of evidence is being collated as part of the training. We would expect to see small changes in practice immediately after the training, but it will take longer to see wider impacts.
	2B2	31/03/2023	Statutory deadlines are being hit meaning there is a positive experience for schools, pupils, and parents/carers.
2	2B3	31/03/2024	Final impact will be evidenced after the statutory deadline of 15 th February 2024.
2	2D1	02/09/2024	Impact is expected to be seen in September 2024. Evidence will include the number of young people attending local provision.
2	2D2	31/07/2024	Impact is expected to be seen in September 2024. Evidence will include the proportion of children who are educated in mainstream settings.
2	2D3	30/04/2024	Impact is expected to be seen in September 2024. Evidence will include metrics from the District Inclusion Dashboard.
2	2E1	01/09/2023	Impact is expected to be seen from September 2024. There is some evidence to suggest that there is some improvement in post-16 placements for this academic year.
2	2E2	31/07/2024	Impact is expected to be seen in December 2024.
3	3B2	31/07/2023	From early 2024, training should be embedded into practice. Evidence will include feedback, surveys, and evidence of good practice.
3	3D2	30/04/2023	The project is still at an early stage so there are no immediate impacts to report. Impact will be considered in the programme action plan.
3	3E1	28/02/2023	A meeting is being held to discuss how to track the impact letters are having with families.

Amber areas of Impact

Amber indicates the expected impact is on track..

Amber Actions- Impact BRAG			
AoW	Action	APP End Date	Commentary
4	4A1	31/05/2024	Positive impact is already being seen with joint funded cases being agreed in a more timely manner compared to the old JRAP process. This will mean children and young people will spend less time in hospital awaiting funding decisions. Joint funded packages when agreed will ensure that children and young people receive oversight and support from the NHS. As this is a longer term outcome, milestones have been provided on when we expect to see impact – project impact data by Dec 23, and funding split tool in place by Feb 24.
4	4A2	01/04/2025	Impact will be seen when new commissioning arrangements start. Evidence will be provided through completion of the Priority and Activity Plan (Dec 23), Completion of the ICS Strategy (Dec 23) and Children's focused document and delivery plan (and activities) completed
4	4B1	TBC	Expect to see impact within 6 months of the action being completed. There will not be immediate impact because the project will need to be embedded and translated into practice. Expect to complete stakeholder engagement and evidence this in Nov 23.
4	4B2	31/08/2023	Positive impact in some projects (e.g. participation) is being seen now but other impacts will be through system change in the longer-term. Big Mental Health Conversation involved 256 young people from 31 education settings, Mainstream, special, grammar, independent and alternative provisions, with the Have your Say consultation continuing in October.
Page 49	4C2	30/04/2024	The strategy refresh will be launched in early January 2024 so not expecting to see impacts now. Data and outputs will be worked through from the workshop activity in September to October.
5	5A3	Ongoing	Impact is expected to be seen towards the end of the 23/24 academic year. Evidence will be based on a high proportion of children in Kent being educated in schools judged to be 'good' or 'outstanding' by Ofsted. Relates to embedding of mainstream core standards training (2A1, green).
5	5B1	01/04/2024	Impact is expected for the start of the 2024/25 academic year with an upturn of the proportion of children and young people educated in mainstream settings.
5	5C2	30/09/2023	Impact is expected to be seen in December 2024. Evidence will include numbers of PEX and suspensions.
5	5C3	31/12/2023	Action has been paused so there are no timescales for assessing impact.
5	5D1	31/07/2023	Expect to see impact from April 2024 when all reporting mechanisms are in place.
5	5E3	31/10/2023	Impact will be evidenced when the document goes live through website analytics.
6	6B1	31/07/2023	There is evidence from audit to suggest that parental feedback regarding being clear of the process of EHCP has increased, managers understanding of what good looks like impacting on management direction to supervisee's and standards of work.
6	6C1	30/04/2023	By January 2024 we expect to see a marked difference in the writing of plans as the impact of the audit and training is evidenced through the quality of EHCP's.
6	6C2	31/03/2023	Impact will start to be seen as training is completed. Impact will increase as more professionals complete the training offer.

Amber areas of Impact

Amber indicates the expected impact is on track..

Amber Actions- Impact BRAG			
AoW	Action	APP End Date	Commentary
6	6C2	31/03/2023	Impact will start to be seen as training is completed. Impact will increase as more professionals complete the training offer.
6	6D1	31/05/2023	Impact expected to be seen throughout the 2023/24 academic year as the cycle of annual reviews is completed.
6	6D2	31/08/2023	Impact will be shown through less queries from parents carers etc, and website tracking of the document. This is expected when the Handbook goes live from January 2024.
6	6D3	30/11/2023	Impact should be seen throughout the cycle of EHCP annual reviews in the 2023/24 academic year.
6	6E1	31/12/2023	Impact expected by January 2024, although we expect gradual improvements weekly and monthly, evidence based evidence will be more apparent once improvements are made to the contributing forms known as Appendix Forms
6	6F1	29/08/2025	Impact is expected to be seen throughout the life of the project and beyond. Impact timescales will differ for each recommendation.
6	6F2	30/06/2023	Impact is already being seen with all inpatients allocated a key worker who will be supporting the young adult, their family and the multi disciplinary team around the young person to support effective discharge planning.
6	6G1	31/05/2023	Impact is on-going and is monitored through improved frequency and accuracy of reporting data to include key deadlines for targeted approach across teams.
6	6H2	31/07/2023	Impact expected to be seen following annual reviews undertaken in the 2023/24 academic year.
6	6J2	31/12/2023	Kent PACT are more engaged in coproduction, communications and engagement and quality assurance work, so impact will be seen over time.
7	7B1	30/04/2024	The strategy will be approved in April 2024, but will take time to embed and show impact through the delivery of the action plan. This is expected to be a 3 year strategy delivery to 2027, with key milestones for impact throughout the delivery period.
7	7B2	30/04/2024	The strategy will be complete in April 2024, likely to be a 3 year strategy so evidence of impact will be from 2024-2027, with milestones for impact set out in supporting action/delivery plans.
7	7C1	19/07/2023	Compiling an analysis of coverage (media, social media and click-throughs) to see impact of the news. However, the impact on children and young people and families will be affected by their lived experience, with a strong link here to Area 1 and 3.
7	7F1	30/06/2023	This is an enabling action with an indirect impact on children, young people and families, alongside other actions in Area 7 on governance.
7	7F2	Ongoing	Indirect impact on children and young people - exceptions will draw attention to areas for action for improvement. APP scorecard and exception report produced monthly.

Amber areas of Impact

Amber indicates the expected impact is on track..

Amber Actions- Impact BRAG			
AoW	Action	APP End Date	Commentary
8	8A1	31/12/2023	The activity that is supporting this action is to trial and test optimal ways to increase the completion of the health assessments. Health assessments can help to identify health needs and then put in place effective interventions. As the uptake improves impact is expected from when the Public Health Service Transformation Programme is complete in March 2025.
8	8A2	31/12/2023	Impact evidence is expected through waiting list data and responses from service surveys. The model will develop to be coproduced with families and impact will be measured through several points along the support pathway as the programme develops. As part of this work we are supporting the increase of Care Navigators/Social Prescribers focused on children and young people across all PCNs. We have submitted interim evidence on the impact of this work for the 6 Month Review.
8	8A3	31/12/2023	Impact should be felt throughout the year with more 14+ receiving appropriate health checks and interventions. Further evidence was provided to SIAB in October 23, supported by the NHSE adviser.
8	8A5	31/07/2023	Delivery of the annual plan provides requirement for feedback sessions with CYP and families to measure impact from April 2024 for the following 5 years
Page 13 of 13	8C1	30/04/2024	Impact should be seen over the course of this academic year. Evidence will include school staff and young people's feedback.
	8C2	30/04/2024	Agreed SLCN Overview Transformation programme for action plan strands to be completed in November with 3,6 and 12 month elements. Actions will take time to permeate but tangible differences are expected in impact reporting of system wide activities by December 2023.
8	8D1	30/04/2024	Action is on track and impact is expected in 2024. Metrics /measures drafts and outputs will be re-visited and approved in November 23.
8	8F1	30/04/2024	Measuring impact is on-going and the aim is for the wheelchair service to meet the national target of 95% RTT by the end of March 2024.
9	9A1	31/08/2025	Expect to fully evidence impact in 6-12 months' time. This will be measured by the number/proportion of children in receipt of tuition returning to education (mainstream or special).
9	9A2	31/08/2026	Expect to fully evidence impact in 6-12 months' time. This will be measured by the number/proportion of children moving through tuition and into school and post-16 settings. Power BI dashboard will be in place to provide visible reporting on all KPI's by March 2024.

Red areas of Impact

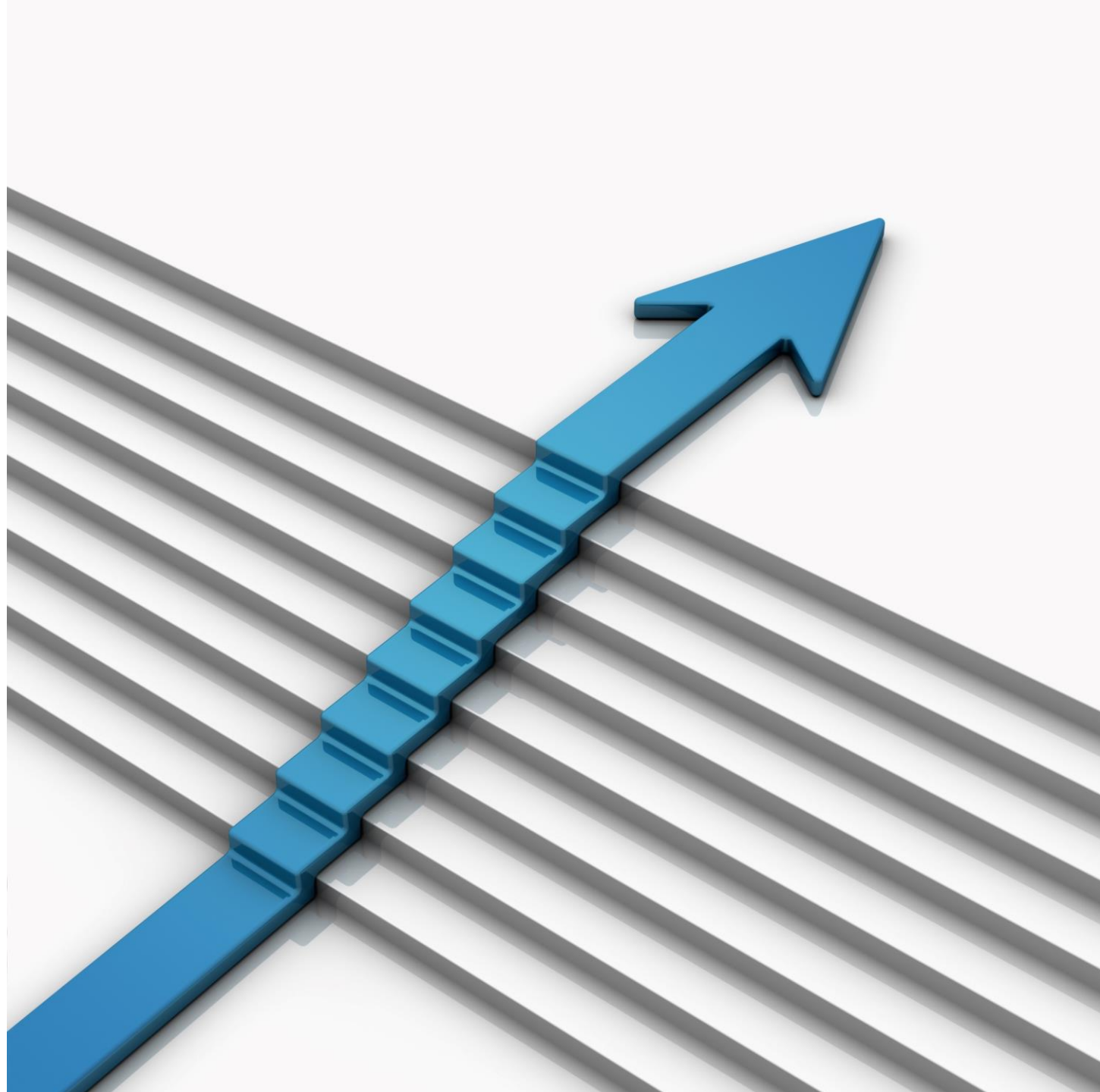
Red indicates that impact is not being delivered.

Red Actions- Impact BRAG			
AoW	Action	APP End Date	Commentary
1	1A1	30/09/2023	Impact will be seen as the comms plan is implemented, which is expected to be signed off in November 23. Social media engagement and sentiment, calls/enquiries and customer feedback will be used to monitor impact.
1	1A2	31/05/2023	Early indicators show that there has been little change in parental satisfaction. New processes have only been in place for 4 months and improving parental confidence will be a long-term impact. Area Lead providing challenge with operational managers on impact, as performance and consistency of practice not yet where we need it to be.
1	1A3	01/10/2023	Impact not yet being seen because the action is dependent on other actions within the APP to improve the inclusiveness of schools.
1	1B1	01/10/2023	Social media monitoring will help measure impact. Further work will be undertaken to scope other ways impact can be measured.
1	1B2	30/06/2023	Work is on-going with the Business Analysts on how to measure impact. Metrics on email open rates, form submissions and engagement with social media posts will be tracked.
1 Page 44	1C3	01/08/2023	Expect to see impact in Spring 2024, as this is a new team and working practices being embedded consistently. Performance against targets in the APP scorecard is being monitored. Enquiries Hub qualitative data is being collated including family feedback.
	1C4	31/07/2023	Impact is not yet being seen. Evidence will include timeliness of EHC needs assessments, number of complaints, and parental feedback.
	1E2	30/04/2024	Project is still being scoped so further work is needed on how impact will be measured.
1	1F2	30/09/2024	Contract will be in place from April 2024 so expect to see impact from then onwards.
2	2B1	March 2023 Oilot	Conversations are on-going with the SEND Business Analysts to understand how impact can be measured and additional communications resources being put in place to increase impact.
2	2C1	31/12/2023	Impact should be seen from September 2024. Impact will be evidenced when decisions have been made about any changes to special school number of places.
2	2D4	31/07/2024	Preferred strategy will be to collect evidence from different groups and develop an analytics report.
3	3A3	30/09/2023	The Youth Council will develop how to evidence their work and we expect to see impact in early 2024.
3	3C2	31/12/2023	Evidence will include surveys, engagement and reach.

Red indicates that impact is not being delivered.

Red Actions- Impact BRAG			
AoW	Action	APP End Date	Commentary
4	4C3	30/04/2024	Impact will be seen over the next 2 years. Further work is needed to understand what the evidence of impact will be. Significant amount of organisational change and procurement programmes may impact on improvement timescales. Will review improvement data and trajectories in Jan 24 and measure and review improvement impact by Aug 24.
5	5E1	30/09/2023	It will take 6-12 months to see impact. Evidence will include parental confidence in mainstream schools. Project being reviewed by December 2023.
6	6B2	31/03/2023	Quality of health needs and provision within EHCP's will improve health outcomes for CYP - collated through QA process and audit. Expected impact next academic year.
6	6F4	31/10/2023	Quality of health needs and provision within EHCP's will improve health outcomes for CYP - collated through QA process and audit. Expected impact next academic year.
6	6J1	31/12/2023	At the moment the service is focussing on reducing the backlog, so it is still too early to measure impact. Expected in the new year.
6	6J3	01/12/2023	Impact is red and yet to be seen as the project is only at the scoping stage.
8	8A4	30/09/2023	Project is behind so no impacts to report yet. Initial impact will increase progressively as the work programme is delivered over the next 6-12 months.
8	8B1	31/01/2024	Expected impacts will be a reduction in prescribing and greater lifelong coping skills for patients and families. Developing system to monitor and track improvement in management of patient cohort by end of Nov 23.

Completed Actions



Completed Actions

- Every month we track any actions which report they have been completed.
- Given we are still in early stages of APP delivery, most of those which have reported as completed are one-off actions (e.g. holding an event, updating a terms of reference), or enabling actions, which contribute to ongoing effective governance (e.g. producing monthly exception reports).
- Completed actions are being categorised, so the Business Analysts can follow up for evidence of completion and any resulting impact for children, young people and families which can be evidenced.
- This will provide independent 'check and challenge' on the evidence, alongside the Area of Weakness Lead to ensure this is sufficiently robust and able to be updated for future 6 Month Reviews.
- The next slide details the completed actions which are reporting blue (ongoing evidence of impact) and green (early evidence of impact), which we are currently compiling the evidence for.

Completed Actions (as of October reporting)

Completed APP actions – those actions which have reported as completed with early evidence available of impact (green or blue BRAG status for impact)		
Action	Impact BRAG Oct 23	Commentary
2A1	G	Action has closed and is being delivered as business as usual.
2A3	B	Evaluation of the project has been completed by Kent Analytics and findings have been shared with stakeholders.
3A1	B	The lived experience session was delivered and the impact was that the Board endorsed the need for a strategic lived experience framework which is now being progressed.
3B1	B	This action relates to discovery work which has completed. Impact will be seen when the project enters the implementation phase and will be reported through action 3B2.
3B4	G	The event was held and there is on-going evidence of active engagement with children, young people, and families through VCSE organisations.
3C1	G	Expect to see impact from January 2024 onwards. Quarterly reports will include data on engagement and progress.
5A1	G	The project evaluation is being completed and should be received early in 2024.
5B2	B	This is an enabling action so the impact will be based on the rollout and implementation of the CATIE.
6A1	G	Positive effects can already be seen but impact will continue to be monitored because it is anticipated that, as processes embed and staff become more confident in the process, the consistency of decision making will increase.
6A2	B	Multi agency audit of EHCP demonstrates improved quality of health sections of EHCP.
6E2	B	Health outcomes have been met and are evidenced through the quality assurance process and audits.
7A1	B	This is an enabling action with an indirect impact on improvement for children, young people and families, with ongoing improvement expected alongside other actions in Area 7 on Governance.
7A2	G	Ongoing indirect impact of the work of the boards and governance arrangements to focus on positive improvements for children, young people and families.
7A3	G	Partnership representation in governance arrangements is an enabling action, providing systems leadership.
7A4	G	It is difficult to establish the direct correlation between the work of the SEND Network and the effect on children and young people themselves, but this group is important in driving through the deliverables to support the overall improvements in impact.
7B3	G	Delivery of improvements articulated in the APP and the next SEND inspection
7D1	G	The impact of the SEND Scrutiny sub-committee will be long term and is not anticipated prior to the 1 year on review in March 2024 at which point specific recommendations for change may be made.
7D3	B	The APP scorecard supports work to be focused in key improvement areas, meaning that children, young people and families will see the impact through improved service delivery.
7E1	G	An item on impact for children, young people and families will begin every SIAB meeting. Items on impact are regularly brought and reinforced by SIAB and PDG as evidenced in papers and agendas. An evaluation is underway.
8E1	G	Action no longer required as all assessments are now face-to-face. Family concerns have been fully responded to through the face-to-face assessments.



Department
for Education

Department for Education
Sanctuary Buildings
Great Smith Street
London
SW1P 3BT

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, lee.martin@nhs.net

8 January 2024

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

Dear Sarah and Lee,

I am writing following our meeting on 15th November 2023 to review the progress against your Improvement Plan (APP).

Thank you to you and your teams for both the paperwork that was submitted prior to the meeting and for the contributions during the meeting. Particular thanks to the parent representatives, Bernie Hannon representing Kent PACT as well as all the school representatives. The local area's collective determination to making sustainable improvements to SEND services and to the lives of children and young people was clear. The evidence provided in advance alongside the additional information from partners during the meeting demonstrated a range of actions in place to accelerate improvement. We are aware that a significant part of the period we reviewed progress against has been an especially challenging period for many in senior leadership at Kent County Council due to the situation with unaccompanied asylum-seeking children.

Your Improvement Plan (APP) includes nine areas and 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.

From the evidence submitted and the information shared at the review meeting, many of the actions within this area have been implemented. For example, events such as the Autism information event have taken place, there has been a redesign of letters that are sent to parents and carers and there are surgeries and workshops in place to support the strengthening of health input in EHCPs, including providing support for caseworkers.

For the next review meeting we will be particularly looking for evidence of:

- Parental confidence has improved across the wider group of parents and how this information will be gathered.
- Engagement with the wider group of parents on activity by the local area to drive improvements, including evidence such as surveys.

- The impact of the focus on SEN support in mainstream schools on parental confidence.
- The impact of the SEND enquiries hub on parental engagement and SEND complaints relating to communications from KCC.
- Co-production of the health offer for special schools.

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.

From the evidence submitted and the information shared at the review meeting, we note that many of the actions within this area are 'on track' to be completed. For example, training has been provided to a large proportion of schools, including a SENCO conference in March 2023. School-based decision-making panels have also allowed peer-challenge and problem solving.

For the next review meeting we will be particularly looking for evidence of:

- What plans have been put in place to improve the inclusion training offer to schools.
- The participation of schools that have not already engaged in the inclusion training offer.
- An analysis of the 15 February 2024 transfer data.
- The impact of progress made in reducing EHCNA requests as the core standards offer in schools becomes embedded and more widely understood and evidence of increased parental confidence in the SEN support offer in schools.
- A review of special school places, including resource provision.

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

From the evidence submitted and the information shared at the review meeting, we note the work around co-production that has been carried out with the Council for Disabled Children and that Kent PACT have been involved in reviewing and developing services. The reference to parental involvement in resolving a recent transport issue was a good example of parental influence on improving services.

For the next review meeting we will be particularly looking for evidence of:

- Children and young people's perception of their involvement in strategic decisions.
- Parental perception of their role in reviewing and designing services.
- The impact of the audit tool on gathering and acting on parental views
- The impact of implementing the training and support being offered via the Council for Disabled Children.

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

From the evidence submitted and the information shared at the review meeting, we note that good progress has been made in the strategic approach to joint commissioning, with emphasis on the data available across organisations to support decision-making. Evidence was provided which demonstrated monthly funding panels, deep dives conducted a strengthened governance approach and shared leadership across partner organisations.

For the next review meeting we will particularly be looking for evidence of:

- The direct impact these shared decisions have had on the lives of children and young people with SEND and their families.
- Evidence of how the newly established sit-reps have led to changes in joint commissioning that have positively influenced children and their families.

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

From the evidence submitted and the information shared at the review meeting, we note that many of the actions within this area have been implemented with some impact made. Good examples of improvement were shared such as the establishment of stronger relationships with a wider group of schools, establishing the role of the inclusion champions and the interaction with the post-16 sector. School leaders who we heard from were generally positive about the interactions they have with the local authority and the level of support that is provided. There were examples of training that has been provided to schools as previously mentioned under area 2, including others such as training for governors and the Inclusion Leadership Programme. The attainment gap for SEN support is slightly above the national average, which is an early indicator of improvement.

For the next review meeting we will particularly be looking for evidence of:

- The impact of the School Inclusion Champions.
- The impact of the work with schools and PRUs to improve attendance.
- How educational settings are using the CATIE data to improve the outcomes for children and young people.
- A focus on the outcomes for the post 16 young people with SEND, as the wider offer for post 16 provision is established.

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.

From the evidence submitted and the information shared at the review meeting we note that there is better oversight of the statutory process and that an increase in the capacity has resulted in some improvement in timeliness. More robust quality assurance processes and feedback is beginning to have an impact, and there was assurance that this will continue to be an area of focus.

For the next review meeting we will be looking for evidence of:

- The impact of actions evidenced through improved EHCP timeliness data, particularly beyond 30 and 52 weeks.
- Parent/carer, and children and young people's views on the assessment process.
- A robust quality assurance process being in place, and how this has impacted the work of the assessment and casework terms.
- The impact of the attendance of health professionals at annual review meetings.
- An improvement in parental engagement throughout the EHCP assessment process through the qualitative and quantitative data.
- Assurance that the sample size of the audits are representative of all EHCPs.
- Evidence of an improvement in the quality of EHCPs.

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

From the evidence submitted and the information shared at the review meeting, we note that there is increasing evidence of much stronger governance and strategic oversight in place. There is evidence of work that has been co-produced with schools and Kent PACT. There is clear partnership representation at SIAB, PDG and the task and finish groups. There are communication channels in place with parents and carers and young people such as the use of newsletters to share information. There is a risk management strategy in place, and all SEND governance arrangements and terms of reference have been updated.

For the next review meeting we will particularly be looking for evidence of:

- The agreed area-wide ambition for children and young people with SEND is consistently seen across the partnership.
- An updated EHCP action plan that clearly shows sustained improvements in 3-month increments demonstrating that the 20-week timeliness is improving as well as the reduction in the number of assessments beyond 30 and 52 weeks.

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.

From the evidence submitted and the information shared we note that significant progress has been made in the strategic direction of services to improve the waiting times for children to access specialist health input, including to the neurodevelopmental assessment and SALT services.

A reduction in waiting time for SALT support under the balance system was positively recognised. We are aware that there are minimal data points to suggest sustained reduction, however the positive direction of travel is acknowledged.

It was noted that there have been delays in implementing the necessary changes to the neurodevelopmental assessment pathway, however the system identified remedial actions they had taken to improve the support families were receiving while they were waiting. We heard of the positive approach taken to ensure a consistent methodology was being taken across multiple providers to ensure a single risk algorithm was in place, alongside the waiting list validation exercise.

We note reported recovery and sustained performance in the specialist medical equipment service, ensuring more children are being seen quickly.

For the next review meeting we will particularly be looking for evidence of:

- How feedback from children and young people and their families is being consistently used to influence service design and delivery.
- The impact the significant changes of the community service's re-procurement exercise and neurodevelopmental assessment programme is beginning to have on families waiting.

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.

From the evidence submitted and the information shared at the review meeting we note that progress has been made in this area, however there is a lack of impact to evidence this progress. There is evidence of internal tuition provision delivery, although the attendance of children and young people with SEND is low. There is also evidence of co-production of SALT services.

For the next review meeting we will particularly be looking for evidence of:

- The qualitative and quantitative data such as attendance, exclusions and academic achievements
- The review of the Children and Young People's outcome framework as part of the SEND strategy.

Overall, it is evident that progress has been made by the local area across all nine areas in the Improvement Plan (APP), and that there are strong governance arrangements and a strategic oversight in place. The statutory compliance of Kent County Council's SEND services is on a positive trajectory and it is imperative that the pace of this improvement is maintained.

However, as you are aware, there is still significant progress to be made, particularly in demonstrating the impact of actions on the lives of children and young people with SEND and their families. Work stream leads need to ensure that all actions in the Improvement Plan (APP) within each area of weakness are being addressed and the impact of these actions is evidenced at the next progress review meeting. There needs to be a sustained effort to ensure that the voices of children and young people with SEND and the wider groups of parents is captured and acted on both on an individual and at a strategic level.

One specific requirement in the Improvement Notice issued on 31st March 2023 was that Kent County Council would, "provide a clear plan to ensure that it has in place, within six months from the date that the Improvement Notice is published, a permanent, suitably trained, SEND case work team of sufficient capacity to enable the effective delivery of the Education, Health and Care ("EHC") needs assessment and review system including effective partnership working systems with advice writers to help improve both the timeliness and quality of the EHC plans." I can confirm that we are satisfied that Kent County Council has met this commitment.

The Improvement Notice also states that the Council should aim for the majority of the actions included in the Improvement Plan to be delivered by the end of April 2024 (i.e. within 18 months of the Ofsted and CQC revisit) or sooner, where appropriate. The Department and NHSE will therefore undertake a further review of progress against the Improvement Plan (APP) in April 2024. Although we have highlighted specific areas of focus above, we will require an update on all actions in the Improvement Plan (APP) for this review. In the meantime, please do draw upon the support that is available to you from both DfE (Jasmine Hussain and Liz Flaherty) and NHS England (David Keaveney-Sheath).

I am copying this letter to Amanda Beer, Paul Bentley, Cllr Roger Gough, Cllr Rory Love OBE, Christine McInnes, Abigail Kitt as well as Liz Flaherty (SEND Adviser), Adanna Williams and David Keaveney-Sheath (NHSE).

Yours sincerely,



Sarah Dimond-Smith
Head of Vulnerable Children's Unit,

South East Regions Group.

Education, Health and Care Needs Assessment – Parental Views

April 2022

Naomi Clemons, Qualitative Analyst Manager
Demetria Burnett, Qualitative Analyst Officer
Vicky Butler, Qualitative Analyst Officer

1 Introduction

KCC sees a high volume of applications for Education, Health and Care Needs Assessments (EHCNAs) directly from parents; this research was commissioned to better understand parental motivations for making applications. Data demonstrates that parental applications are less likely to progress to the next phase of assessment when compared to school-led applications, the volume of applications is putting pressure on the system as well as potentially leading to distress and disappointment for parents undertaking the process. This report not only explores some of the broader themes that emerged from this research but also provides examples of family journeys too.

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2 Methodology

A mainly qualitative approach was taken to this research, however, some referral data has also been incorporated to provide context¹. The decision was taken to conduct semi structured interviews with parents who were currently going through the application process to enable them to reflect on this process and their reasons for applying prior to a decision being made. A total of 60 parents or carers who had made an application on behalf of a child in the months of November and December 2021 were contacted to participate in this research; interviews were undertaken with parents/carers between January and March 2022. Recruitment presented some challenges, overall, of the 60 parents/carers who were randomly selected and invited to take part, only 9 agreed to be interviewed. It is also acknowledged that two participants who took part have formal complaints against Kent County Council. Therefore, we have been especially careful to ensure that no participant can be individually identified by the quotes used and that some very specific points or examples raised have been excluded to protect anonymity.

Interviews were conducted over the telephone or via MS Teams and ranged in length from 30 minutes to 1 hour. Despite the small numbers, the data gathered is rich, therefore, meaningful insight can still be drawn from these participants. Even with the unique nature of some of the journeys that these families have been on, shared challenges and experiences around the reasons for applying and the application process itself were evident during the analysis.

¹ Francesca Baylis – Kent Analytics undertook the analysis of this data

3 Data Analysis

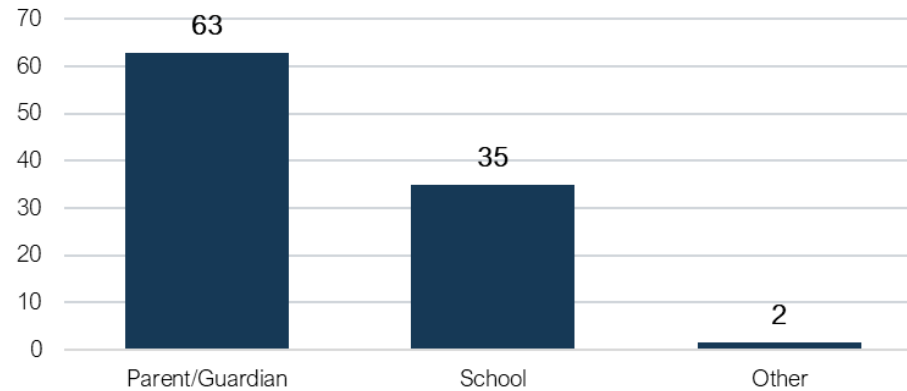
KCC sees many applications for Education, Health and Care Needs Assessments (EHCNAs) directly from parents; this research was commissioned to better understand parental motivations for making applications. Parental applications are less likely to progress to the next phase of assessment when compared to school-led applications. The volume of applications is putting pressure on the system as well as potentially leading to distress and disappointment for parents undertaking the process.

3.1 Application Data

This section explores data that covers the period January 2018 to 14th December 2021. Figure 1 demonstrates the percentage of EHCP referrals by parent, schools, and other categories during the above-mentioned time period.

Percentage of EHCP referrals by referral source

Referral date Jan 2018 - 14th Dec 2021



Source: Kent Analytics, (FB) Mar 22

Figure 1: Percentage of EHCP referrals Jan 2018 – 14th Dec 2021 by referral source

Figure 1 demonstrates how the largest referral source over this time was parents, with 63% of all EHCP referrals being made by parents, 35% by schools and only 2% from other sources. Referrals made by parents are less likely to result in an EHCP, therefore any reduction in this area may not only ease pressure in the application system but also focus on supporting children in different ways thus diverting them from the EHCP process.

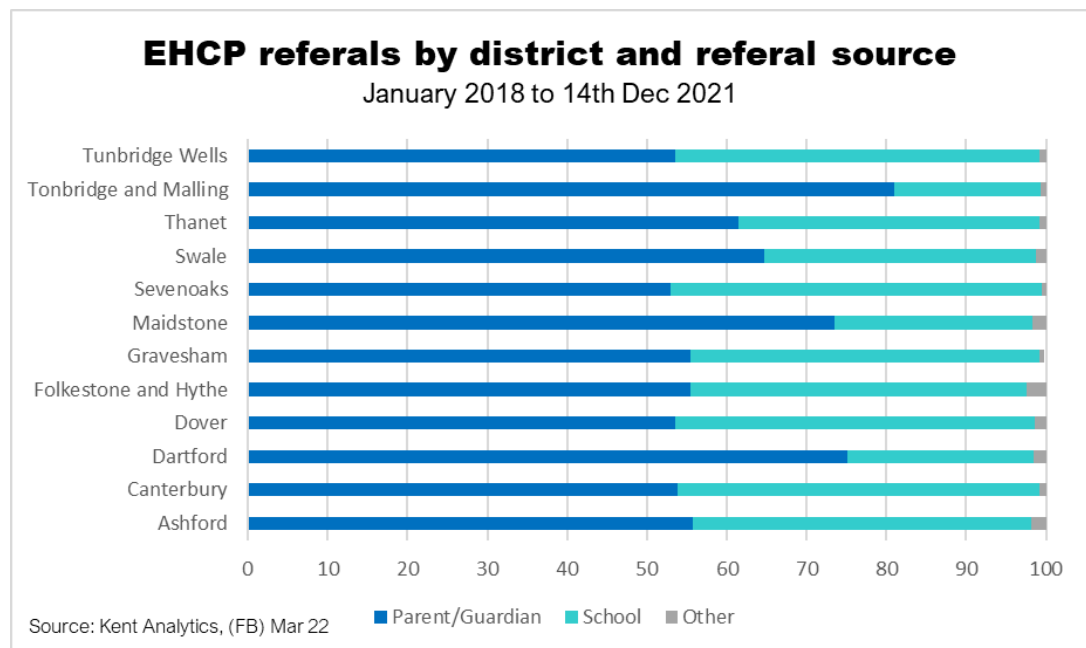


Figure 2 ECHP referrals by district and referral source January 2018 to 14th December 2021

Figure 2 demonstrates EHCP referrals by referral source broken down by district, this clearly demonstrates that some districts have a much higher rate of parental applications than others. It also demonstrates that Tonbridge and Malling seeing the highest proportion of EHCP referrals from parents out of all EHCP referrals for that district followed by Dartford. Whereas Sevenoaks and Dover are two areas that see a lower proportion of referrals from parents.

4 Parental Insight

We asked the families to share some background about the child to whom the needs assessment application referred to. The children and young people they spoke about ranged from being at nursery right through to secondary school.

Some of the children/young people had been diagnosed, whilst others were still waiting to be assessed. Diagnoses included Asperger's, Autism, ADHD, and trauma to the brain.

At the time of their applications, many of the families explained how they had run out of options or ideas and in some instances were in crisis and struggling to know what the best support options were available.

4.1.1 Previous SEN support



“The school have got a really good provision for him because they’ve got a SRP Unit. I think they are amazing; they are a breath of fresh air for me as a parent with children with SEN needs, even without a diagnosis they can clearly see both my boys’ needs. That’s why I trust their opinion, they are telling me that he needs this. Even though he is bright and academic he can’t reach his potential and he is not going to get on as well if he’s not understood and not given the support. So, I’m dreading going through the process again, but I feel this time I’m a lot more knowledgeable about it, it’s still hard, it still shouldn’t have to be this much of a fight.”

When families described previous SEN support it was very mixed with some recalling support from Early Help, specific 1:1 support, and a variety of programmes, like Lexia within the school community. Some families recalled that their child’s school were particularly helpful in ensuring support was in place for their child. Families also sought advice from their GP which led to being referred to other professionals i.e., CAHMS, whilst some paid for private assessments, i.e., speech and language therapists and psychologists.

One parent mentioned that their child received support only once they had gotten to a point where they could no longer attend school, they felt it was a shame that support was not put in place before their child had gotten to this point.

“We had quite a lot of support because of how it came about because unfortunately, he was quite poorly, he couldn’t get into school, he wasn’t functioning, and he really took a bad turn... it got that bad that he needed it. I kinda feel that it was a shame that he had to get to that point before anyone realised, oh he’s a child that really needs some support and really needs to be in a provision with the right support for him.”

Some families reflected that it was through these initial forms of support that the desire to gain a more formal assessment and plan for support originated, either through acknowledging that more was needed or because they felt that the current support available was not enough.

“Early Help pushed for the school to do screening again they were very reluctant it took many meetings for them to even do basic screening...”

4.2 EHC Needs Assessment Application

4.2.1 Why did you apply?

Some families first heard about an EHC needs assessment from their children’s/young person’s school via the SENCo, although others mentioned that they had been advised by other professionals like occupational therapy to apply for a needs assessment. However, when asked ‘why did you apply for the needs assessment’, all the families interviewed were advised to do it themselves or felt they had no choice but to apply themselves. If their child/young person was in school, the reasons varied from being told by the SENCo it wasn’t something the school did or *“it would be quicker”* if you (the parent) completed the assessment, however, a few families did explain that their school had been supportive with the application and provided relevant information for them to support the process. A few of the families mentioned that they had also been told by their school that *“EHCPs were very hard to obtain, that it is a long process, and you need a lot of evidence”* which left them feeling *“put off”* by the process.

"He [SENCo] never said anything about school doing an application, so it was always the ball was in my court if I wanted to, that was the way it felt and part of me was thinking it's such a big process, do I personally feel capable of doing that, because I know it's quite a challenging process, emotionally draining process..."

"I had the full support of the school, I discussed it with them first, they were quite happy for me to do it as a parent application. So, I feel quite lucky that I had the agreement of the school because a lot of parent applications are because the school won't and that wasn't my experience."

4.2.2 Support while completing the application

A few of the families explained that they had been given support from local charities with specific knowledge of EHC needs assessment applications, they were able to either guide them through the application process or fill in the forms together, ensuring all the relevant sections were completed correctly. Support from schools was again mixed, some were happy to support the families whereas others stated that they had no help with their application. Most applications were made online, and families found the actual submitting of the applications easy and straightforward. However, it was gathering all the evidence and information required that families found complex, with one family stating that for someone like herself that had ADHD, there appeared to be no help or support for them, *"I find (reading questions/form filling) difficult, it all becomes overwhelming for me..."*.

"I had been aware of an organisation called The Autism Apprentice CIC. What they do is offer a service where they will support you and help guide you through the application. So, at the time... I think it was £50 and I had a phone call with two of them, who've got children on the spectrum as well and have been through the process and then they help and support people who are trying to do the same thing. Together they asked lots of questions, I talked a lot, they wrote the list really on the application. I then got a copy of that and tweaked and edited and put a few extra bits in and then sent it off."

"I am not very good at computers and a friend of mine helped me, she got the form up and wrote it all in for me. Obviously, she asked me the questions and I told her the answers and she wrote it in and then sent it off. So, I had to use my own support network to do it rather than the school or anything official."

4.3 Submitting the application

"The actual application process so far has been relatively clear up to this point... the moment it was sent in I had confirmation that it had been received. I had a number of people contacting me very early on, very quickly, saying this is what we are going to do, and asking for certain information or asking for permission to collate various things. It felt that it was being handled which was really nice, that was comforting and everybody I spoke to was also really understanding as well."

We asked parents to reflect on their experience of submitting the application. Most of them felt that the application was positive, and the process was straightforward. They felt they were being kept well informed about what happened next. One parent also mentioned that so far, the application process was *"proceeding in a timely manner"* which they had not initially expected. Aside from giving approval for various information to be collated, parents reported that while the application was processing there was little for them to do apart from wait.

"To be honest, I have been impressed with the process of the application so far, from when I applied to where we are now...he has the educational psychologist going in on Monday to assess him. So, I think that process, considering the current times we are experiencing, has been a quick process so I am quite pleased with that."

“We heard before Christmas, probably submitted the application around mid-November. So just before Christmas we heard that they had accepted that he was then going to go through the assessment process, so we are in that bit. So, we are waiting, so I’ve had various phone calls from people saying, asking for permission to collect information.”

4.3.1 Support after application submitted

Whilst in the previous section we discussed how parents were supported while making the application, a few parents discussed the support they had after the application was submitted. In one instance the parent was continuing to receive support from their daughter’s nursery as their original application had been rejected. The parent reflected that they felt unable to contest this decision on their own, so the nursery was supporting them in re-applying.

“The nursery have said, because I told them I didn’t have the strength to contest it, with testimonials and stuff, they said they will see come April, [name] still has more, I think they said they have more paperwork, I don’t know if they can reapply, I’m not 100% sure...Nursery is gathering further evidence for the application.”

Another family mentioned that an advocate would be helpful for parents going through the process. They recalled reaching out for support but could not find the type of support they were looking for.

“And I think you are almost looking for an advocate, somebody to talk for you because it’s a minefield and you want somebody that’s got knowledge insight. IAsk can only advise you but they can’t really act as an advocate, they can’t go and help with you.”

4.3.2 Application process difficulties

Families discussed some of the difficulties that they found during the process. Many problems can be attributed to lack of communication about the application process and what is expected of parents during this time. One parent who felt confident about their knowledge of the EHC needs assessment remarked that they found the process challenging,

“I came into this process thinking I will be able to handle this EHCP because I know what I am doing, but I found it really challenging as to what was exactly expected of me, what the different deadlines are...”

Other parents experienced issues around application rejection, not knowing whether the application was going ahead and what steps they could take next.

“I still don’t know if it is going ahead...I emailed the EH worker back, I said I was upset that it has been cancelled because I still want to go ahead with it and I feel that my daughter is being failed again. I have had to fight for everything, and I am still fighting...I asked her to get back in touch with me and that was over two weeks again and I still haven’t had a response from her.”

Some mentioned that although they were given timescales for how long the process should take, in their experience things took longer which caused frustration and delays in their child receiving support.

“It wasn’t that simple though, they refused to do the assessment. It was longer than 6 weeks, at his time there were huge delays so everything was taking a lot longer, I can’t remember how long. They refused to assess and then you have to go through whether you want to mediate or not mediate, and then appeal, which is what I had to do. Then they agreed to assess

and then after assessing they then refused to issue a plan so then I had to appeal again and go through that process again. It was only about a week or so we were coming towards tribunal that they then conceded and issued a plan.”

One parent felt that the delays and uncertainty of the process led them to make the decision to have their child privately assessed.

“I couldn’t wait for 3 to 4 years to get him help. So, we decided to go down the private road. So, we booked an appointment and paid and what have you and a week ago he had his assessment done and the paediatrician basically diagnosed him there on the spot with serious ADHD. They stated there was nothing they could do other than to medicate him.”

4.4 Purpose of an EHC needs assessment and plan



“As a parent, we don’t know how these things work. We know we need the assessment and then the experts will suggest what kind of help he needs and work with the school to say this is the kind of support he needs, at the minute it’s 1:1, so they can help his learning, support breaks, to keep him concentrating so that he doesn’t distract the class and that’s the main thing.”

When asked about the families’ understanding of the purpose of an EHC needs assessment, many of them were not entirely sure what one was. However, most of them went on to explain that they hoped that having an EHC plan would give their child/young person more options and support at their current school and especially when transitioning onto secondary school. Some families voiced that they felt they had exhausted all their options and needed the support of professionals to suggest alternatives for them as a family and support within the school environment.

"I feel and, in some ways, the school has run out of ideas or things that can be put in place to help him, that there is no more we can do on our own and in sense within a school environment without the input of other professionals' knowledge, suggestions, basically I've run out of ideas."

Other parents had decided to pay for their own professional assessments to submit as part of the application. Paying for additional assessments is not an option for all parents seeking to make an application but for those who are able to feel that it will help them, particularly if they feel they have tried everything else.

"We've tried everything, and he is still struggling and so with the EHCP what I've done, I've gone privately for an Occupational Therapy assessment which is sensory and cognitive assessments... so that report will go towards as part of the health care plan application. I've requested, I haven't heard anything yet, but I have requested he gets seen and assessed by speech and language therapy as well."

4.4.1 How do you think a plan will help your child?

All the families we spoke to reflected on what they hope an EHC plan will help their child/young person, one of the main reasons was getting the right professionals to assess and support their children to enable them to have the same chances at education as someone without an EHC plan, especially so when transitioning from primary to secondary education.

"I have asked the school for over 2 years to get this sorted as she has only got just over a year left at primary, and I am petrified because I believe if things aren't put into place she will struggle."

Other parents believed an EHC plan is the last chance for support for their child, they hope that having a plan will ensure extra support is provided for their child.

"If he doesn't get the additional support that he needs what I imagine will happen is that he will most likely stay at that school until he ends up being kicked out. That is what I think will happen, so this feel a little bit like the last hope."

Overall, it was the child's happiness and chance to achieve to the best of their abilities that was the main hope for parents in applying for an EHC plan.

"So, I would hope that the EHCP will help to address all the weaknesses and he will feel supported either with a one-to-one or extra provisions to meet his targets. He has low self-esteem when it comes to education and low expectations of what he can achieve. So, I want him to feel happy and positive in the school of his choice. I think it would be met best if he had continuous one-to-one support."

"I want him to be happy in school and what him to feel that he is achieving something that is achievable for him."

4.4.2 EHC plan in place



"I think if it had been followed and if it had been more specific it would have been better. For him as well right from 2017 he had independent OT written into his EHC plan, but he's only just started having that. So, it's taken over 5 years to get that in place, and those 5 years in an academic path for a child is a huge amount of time and the independent speech and language was quite delayed, and I had to go out and find them and I found the OT. The onus is always on the parent and again following the plan the onus always seems to go back to the parent rather than where it should be which is with school, the LA."

In comparison to the previous section of parental hopes of what having an EHC plan might mean for their child. Parents whose children had already had an EHC plan granted expressed their frustrations. One of the reasons of frustration they mentioned were plans not being reviewed regularly, meaning they didn't always feel they reflected the child's current situation or needs.

"It's supposed to be reviewed annually so it's now been 2 years since the last proper annual review. It was realised that things weren't in place that should have been in place and things were going downhill..."

One family felt that the EHC plan seemed to have been disregarded altogether and this resulted in stressful consequences for themselves and their child.

"... he is finally going to get the support and the help, but they seemed to disregard the EHCP effectively... so things just erupted, and it was quite stressful for him and for us."

Another cause for concern for parents were when changes or reviews to the plan had taken place and information was not recorded correctly.

"... what I found hard and uncomfortable where they'd written, I can't remember it's one of the sections where they do a review and we had to sign it off to say where things had changed, we weren't happy with that because so much of it was not true."

One participant felt that it was down to them as the parent to ensure the plan was being adhered to. This included finding various professionals to support their child. They felt that more of the responsibility to ensure the plan is being followed should lie with the school or local authority.

5 Conclusion

Overall, the main reason for parents applying for an EHC needs assessment themselves, rather than the school, was they believed it was their responsibility. Families had either been advised by their SENCo or other professionals that this was the case and that the process would be quicker. Other parents said they applied because no-one else would.

Parents acknowledged that the process was not easy, and the decision to apply was not taken lightly. Some families sought support from charities to apply whereas others did have some limited support from their SENCo. Although all the families stated the actual submitting of the application via the online portal was straightforward, the gathering of supporting evidence and other relevant information was most challenging.

In many cases families expressed they had no other choice to apply, as the needs assessment was seen as their last hope of getting the support their child needed. All the parents wanted was for their children to be happy, to achieve to the best of their abilities, and have the education that they deserve, the EHC plan was seen to be the method to achieve this when other interventions had not helped.

Finally, we would like to say a big thank you to all the interview participants. These conversations were extremely sensitive and personal, we appreciate you sharing so openly with us. We know you valued the opportunity to share your thoughts and experiences that are covered in this research, and we thank you for taking the time to do so.

6 Pen Portraits

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6.1 Family A

Katie is aged 12 and in Year 8, she has two older siblings. Katie struggled at primary school from Year 1, reading and writing were hard for her, and she showed signs of anxiety. Katie was diagnosed with dyslexia and added to the SEN register. In Year 4 Katie's confidence took a nose-dive, she was even more anxious at how her peers were learning quicker than her and she felt left behind. Katie's parents decided to move her to a different primary school with mixed abilities amongst the children and an innovative and kinaesthetic approach to learning. Katie flourished there, the school celebrated her achievements and she felt like she was succeeding, she even passed her Kent Test. Katie's confidence had returned fully.



By the end of Year 6, Katie had been removed from the SEN register as she was achieving all her goals academically, which meant no special transition arrangements were made for the start of secondary school. Katie found moving on to secondary school challenging.

At the start of Year 8, Katie was extremely anxious, she wasn't sleeping or eating, and she was reluctant to attend school. Katie's parents spoke to the school and although an offer of an anxiety group was put in place, it wasn't working for Katie, and she became even more withdrawn. One day, it all got too much for Katie on the drive to school, she opened the car door whilst in motion and tried to jump from the car into the path of traffic. Katie had said if you make me get in the car and go to school, I will do it again, I can't go there, I would rather die.

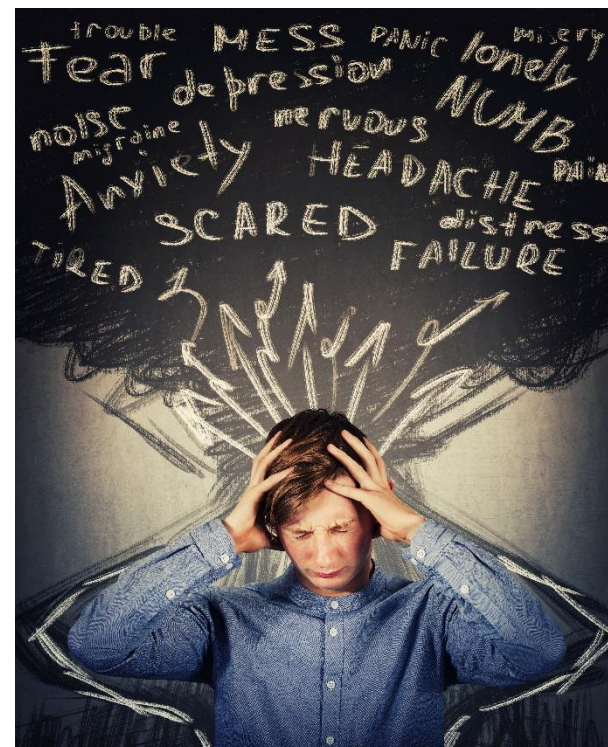
Katie's GP made a referral to CAHMS, the school suggested an autism assessment although all of these had extremely long waiting lists of 2-3 years. Katie's parents felt they were unable to wait that long and decided to go private. Katie and her parents were feeling stuck, Katie wanted to be in school and learn but she physically couldn't go. Katie's parents felt the only option left available to them was to apply for a needs assessment. They had no idea what support was available to Katie and felt that the process of applying was about getting that extra support.

6.2 Family B

Josh is in Year 10 and has three older siblings. Aged 7, Josh was diagnosed with Asperger's. Josh's parents managed to support him throughout primary school and the early years of secondary school without additional SEN support. At the end of Year 9 going into Year 10 Josh's mental health took a turn for the worse. Through their GP and CAHMS they were advised to do a self-referral for Josh to Early Help. Josh had seven months of support from an Early Help worker, which his family found helpful as they were able to bounce ideas and suggestions to help support Josh. It was the Early Help worker that suggested they apply an EHC plan.

Josh experiences social anxiety along with sensory overload, he finds it very hard to communicate, which can lead to miscommunication, especially with teachers. The way Josh copes when he has sensory overload or becomes anxious, he puts his head down and goes into his safe bubble where nobody can get him, he is safe there. On one of these occasions in class, he was sent out and given a detention for his unresponsive behaviour. Josh's parents explained that after this ordeal he was so terrified, that he had spent the next three years terrified of being told off, terrified of getting detention, basically every day he goes to school it is hell for him. Josh's parents have learned to give him space so that he can process his thoughts and tell them what has happened in his own time.

During Josh's first few years at secondary school, they experienced four different SENCOs, none of which supported Josh despite many meetings to explain his situation. By Year 10, a new SENCO arrived, and Josh's parents were able to meet and explain what had been happening, and despite some support from the SENCO, which has helped, it is only in terms of what is in the SENCOs remit.



Josh's parents had been aware of a local CIC and so they turned to them for guidance and support in applying for an EHC needs assessment, as although they had the support from the SENCo, they had felt it was left to them to apply. With the help of the CIC, the application process has been relatively easy for Josh's parents. They have had communication during the process, and it has made them all feel they were doing the right thing.

Josh's parents feel that they and the school have run out of ideas or support that can be put in place to help Josh, they feel they are unable to do anymore without the input of other professionals' knowledge.

Josh has said that he just wants people to acknowledge that he needs a different type of support, a different sort of help, just an understanding of his needs.

Further Information

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SEND Quality Assurance & Practice Development:

- 
- (1) Parental Requests for EHCNA
 - (2) Education Advice Template



Samantha Avison-Williams
SEND Quality Assurance &
Practice Development Officer

SEND Quality Assurance & Practice Development (QAPD) Service

The QAPD Service is part of Kent's wider SEND Engagement, Operations & Assurance Team.

The service contributes to the wider SEND service via:

- facilitating professional development & training for SEND service staff
- assuring policies & procedures across a wide range of teams & service partners
- auditing & moderating draft & final EHCP documents
- analysing feedback & information from service users
- conducting Multi-Agency audits

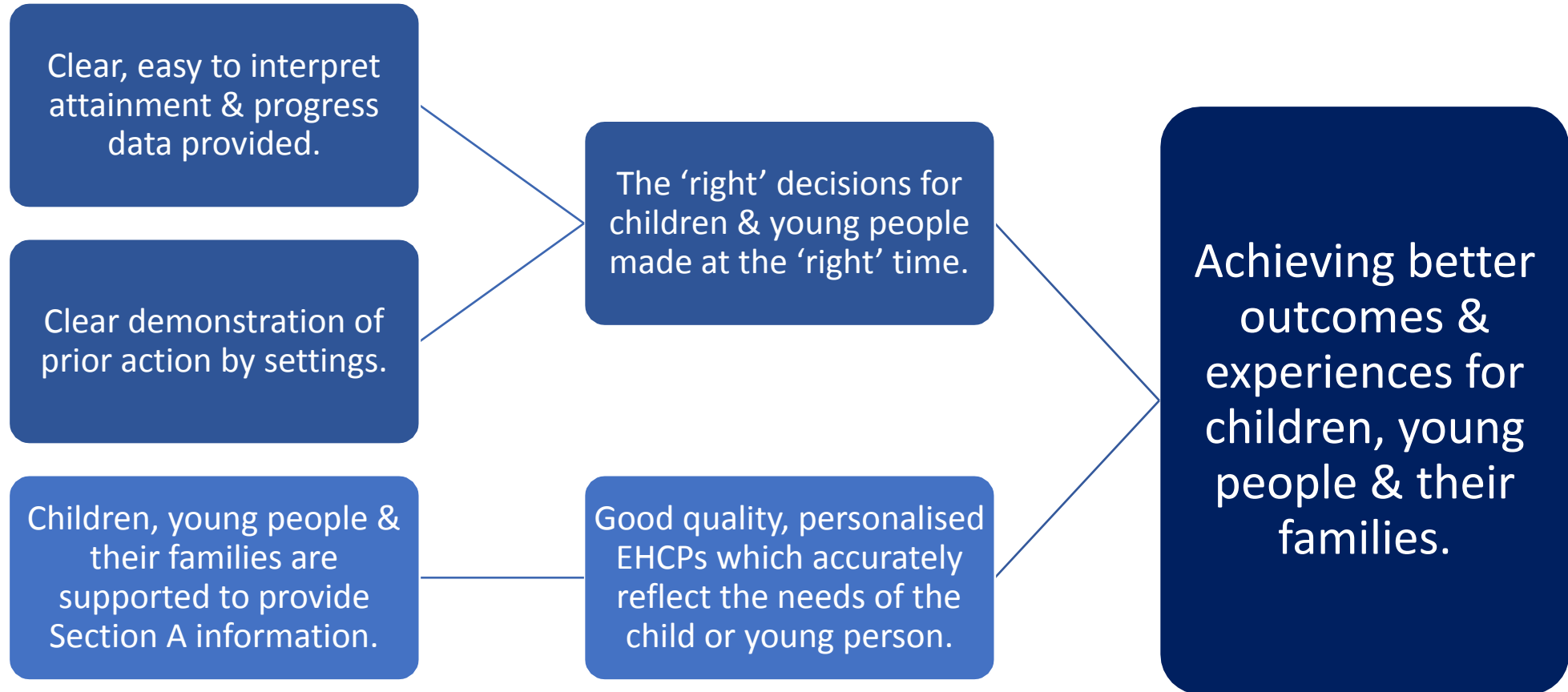
Most members of the QAPD service have a background in education.



Overview:

- Revisit learning shared during the last SENCo forum
- Parental requests for EHCNA – changing the narrative
- Evolving the Education advice template (appendix 2)

Revisit: December 2023



Feedback from December 23 Forum:

I agree about parental EHCP requests for children not on the SEND register. There needs to be a way for KCC to triage these requests before schools are asked to complete Appendix 2 to avoid unnecessary paperwork which adds even more to already heavy workloads.

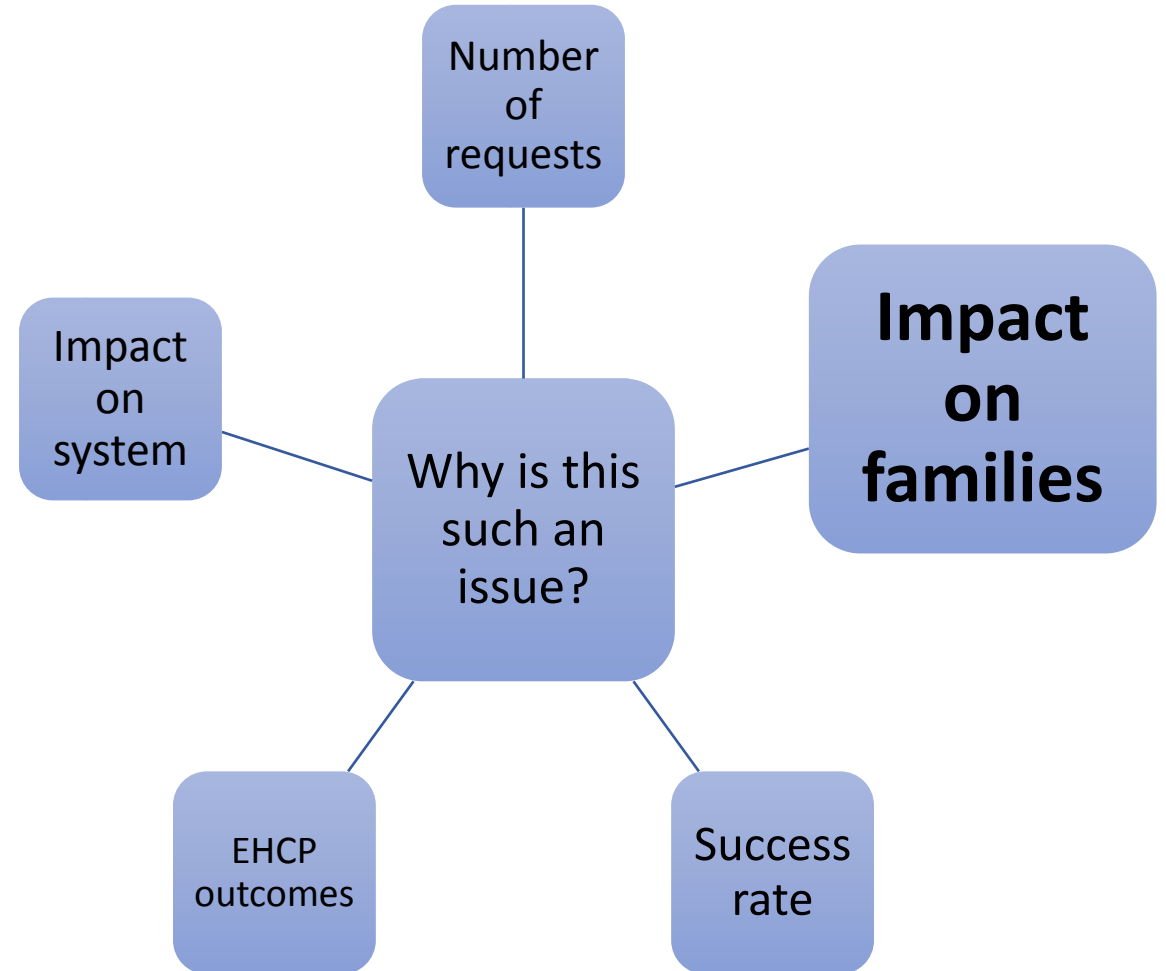
If parents request a statutory assessment without informing schools - there often isn't a plan.

Parental Requests for EHCNA

Parental requests supported by school & other professionals

'v'

Requests where there is a discrepancy between the views & actions of parents & schools



Data Insights: number of requests (1)

County Level

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January – December 2023 Average parental requests per month	
Number	161
As a percentage of all EHCNA requests received (%)	50.9%

- Peak month = March (218 requests)
- Number of requests ranged from 166-199 in Jan, Feb, May, June, Sept, Oct & Nov
- Low months = August (82 requests)
December (92 requests)

	Peak Year Group(s)	Number of Requests (year: 2023)
Nursery/EY (N1-N2)	N2	290
Primary (R-Y6)	Y5	201
	Y6	180
Secondary (Y7-Y13)	Y8	176

What does this data tell us?

Data Insights: number of requests (2)

Area Level

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January – December 2023 Average parental requests per month	
Area	Number
North	34
East	56
South	30
West	38

Local Level

Date Range: 1/3/23 – 31/8/23		
	Number of Parental Requests	Number of School Requests
Primary School 'X'	11	2
Secondary School 'Y'	10	1

- Why are there so many parental requests?
- Why is there such a discrepancy between parent & school requests?

Data Insights: success rate

County Level

January – December 2023		
Decision to Assess: Average rate per month (%)		
	Parental Requests	School Requests
<u>Yes</u> Decisions	43.2%	83.1%
<u>No</u> Decisions	56.8%	16.9%

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- Parental applications are less likely to progress to the next phase of assessment compared to school-led applications (Kent Analytics, April 2022).
- 2023 data does not support the perception that ‘parental requests are quicker or more successful’.

Data Insights: EHCP outcomes

Progress & Attainment 2023		
	Kent	England
EYFS Profile % GLD EHCP Gap	70.8	n/a
EYFS Profile % GLD SEND Support Gap	50.9	n/a
KS2 % Expected in RWM EHCP Gap	61.0	62.0
KS2 % Expected in RWM SEND Support Gap	46.0	46.0
GCSE Progress 8 EHCP Gap	1.43	1.22
GCSE Progress 8 SEN Support Gap	0.69	0.55

An EHCP does not guarantee better outcomes for a child or young person.

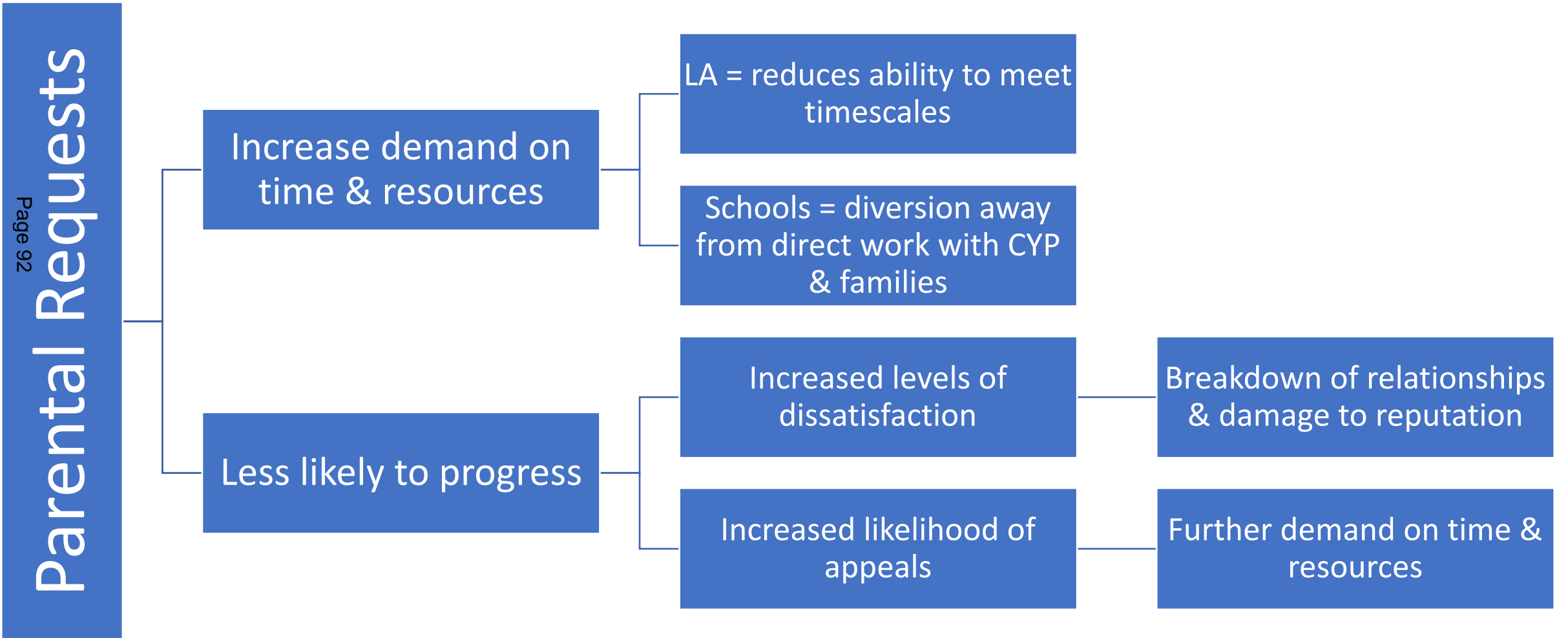
Autumn 2022/Spring 2023 Combined Percentage Total Absence (all schools)		
	Kent	England
Pupils with an EHCP	14.0	12.4
Pupils with SEN Support	11.2	10.1

88.7% of 16-17 year olds flagged as having an EHC plan were in education and training in March 2022 compared with **93.7%** of those with having neither SEND support nor an EHC plan (DfE, June 2023).

What drives parents to apply?

- Fear, anxiety, desperation or crisis
- Limited knowledge & understanding of support available – 'only option' belief
- Desire for extra support
- New diagnosis
- Suggested by another professional
- Lack of confidence in school/s to meet needs
- Approaching a transition point
- Belief that it will lead to 1:1 support
- Choice of school/setting

Impact: The system



Changing the 'only option' narrative:

- Move from a 'reactive' to a 'preventative action' approach.
- Use resources more efficiently & effectively.
- Build confidence & belief amongst all stakeholders.

Using your insight & experience to shape change.

Breakout Room Discussion Questions:



1) What preventative action have you taken (past or present) that has worked well?

(e.g. parent workshops, coffee mornings, open-door policy)

2) What factors do you think may be driving parental requests within your school community and/or local area?

What next ...

On the evaluation form you will find the breakout room discussion questions.

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Please do take the time to record your ideas, experiences & thoughts.

QAPD Service will use this information to guide action & shape change.



Education Advice (Appendix 2) Template



Evolving the template:

1. Child/Young Person's personal details			
Full Name:			
DOB:		Current Year Group:	
Gender at birth:	Male/Female		
Which gender does the child/young person identify with (if different from above)?	Male/Female/ Gender Neutral		
Is the child/young person gender transitioning?	Yes/No		
Pupil Premium:	Yes/No	Child in Care (CiC):	Yes/No
EAL:	Yes/No	Is a translator required:	Yes/No
NHS Number:			
Address:			

Education advice is vital for accurate decision-making and for the production of high quality EHC plans.

Aim:

- Evolve rather than re-draft
- (previous consultation)

Proposed Outcome:

- More user friendly
- Increased clarity to avoid duplication & to support the collection of clear & complete information

Your Feedback:



A copy of the advice template will be emailed out to you.

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Please use the link at the bottom of the document to leave your feedback.

If you would like to discuss your feedback (advice template or parental requests)

in more depth, I will be available on

Thursday 15th February 12.30-5pm

Please call 03000 413603