

# Area SEND inspection of North Yorkshire Local Area Partnership

Inspection dates: 29 April to 3 May 2024

Dates of previous inspection: 27 June to 1 July 2016

## **Inspection outcome**

The local area partnership's arrangements lead to inconsistent experiences and outcomes for children and young people with special educational needs and/or disabilities (SEND). The local area partnership must work jointly to make improvements.

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

Ofsted and the Care Quality Commission (CQC) ask that the local area partnership updates and publishes its strategic plan based on the recommendations set out in this report.

#### Information about the local area partnership

North Yorkshire Council, NHS West Yorkshire Integrated Care Board (ICB) and NHS Humber and North Yorkshire ICB are responsible for the planning and commissioning of services for children and young people with SEND in North Yorkshire.

The commissioning of health services changed across England in 2022. On 1 July 2022, two ICBs became responsible for the commissioning of health services in North Yorkshire. West Yorkshire ICB is responsible for Craven and Humber and NHS Humber and North Yorkshire ICB for the remainder of the council area. North Yorkshire Council is represented within both ICBs. Each partnership has a clear commitment to delivering SEND improvements.

There have been several recent strategic appointments to the local area partnership. The local authority Assistant Director for Inclusion was appointed in March 2023, the Head of SEND caseworker was appointed in July 2023, the NHS Humber and North Yorkshire Head of SEND appointed in November 2023 as was the Designated Clinical Officer.

The local authority commissions five pupil referral units and a range of alternative provision (AP) for children and young people who cannot attend school due to medical needs or who have been permanently excluded. Schools also commission their own AP.



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

Children and young people with SEND experience inconsistent support to meet their health, education and social care needs. While leaders are ambitious for children and young people with SEND, multi-agency working varies across the partnership. Some partnerships are well-established and make a positive contribution to the lives of children and young people. However, it is too early to see the impact of some partnership actions that are not fully embedded.

Depending on where they live, children and young people experience inconsistencies in the identification and assessment of their needs. Some wait too long to access health services. Other families experience delays due to waiting times for overnight stays at the Children's Resource Centres. However, children and young people receive good care and support when they receive short breaks.

The wishes and feelings of most children and young people are captured in their education, health and care (EHC) plans. However, their views are often out of date and their current wishes are not always translated into actions within their plans. This means that many EHC plans do not always accurately reflect children and young people's lived experience. Parents and carers are frustrated with the EHC plan process, including the lack of timeliness of annual reviews and out-of-date health, social care and education information. This is exacerbated if the child or young person is non-verbal, has high needs or has been permanently excluded.

Most families of vulnerable children and young people with SEND receive effective and timely support when needed. Joint working across agencies is sometimes effective. For example, the members of the early help team successfully work with, and refer to, a range of partners. When early help practitioners identify a young person who requires ongoing or more specialised support, they work with the Disabled Children's Services to ensure their needs are met. This improves children's lived experiences and helps them to make progress.

Children and young people with the most complex health needs are well supported in North Yorkshire in special schools and child development centres. There are robust commissioning arrangements in place to review and purchase placements in residential special schools. Although waiting times for some health assessments and treatments are too long, the local area has a wide offer of emotional health and well-being services and training to support children, young people and their families.

There are a significant number of pupils with SEND, with increasing numbers of primary-aged pupils, who are receiving permanent exclusions and suspensions from schools in North Yorkshire. Some pupils who have been excluded and then placed in an AP often have not had their needs identified at an early enough stage.

Parents and carers are concerned about the sufficiency of special educational placements available in North Yorkshire. This has resulted in pupils waiting too long in places that do



not fully meet their needs. However, once in a specialist setting, including AP, pupils benefit from tailored support. Leaders have been tenacious in expanding the number of specialist educational settings. Some pupils with social, emotional and mental health (SEMH) needs successfully access 'Targeted Mainstream Provision' across North Yorkshire. This often results in successful integration back into mainstream education.

Leaders recognise there is more work to do to support children when they are transitioning between services. Some young people who attend Personalised Learning Colleges across North Yorkshire benefit from a range of tailored learning and training opportunities. However, many young people's support to transition to their next stage of adulthood ends abruptly. For example, children and young people who receive a range of support in school are not able to access this as easily once they leave school. There is lack of detail around health, social care and education within EHC plans to support children and young people to successfully transition to their next stage of education, employment or training. There is evidence that when plans are detailed, children and young people successfully transition to adulthood.

Many children and young people enjoy a range of social opportunities, including activities via Early Help short break grants. The 'This is Me' festivals for children and young people with complex health needs, disabilities or autism are well-received by families. Young adults access activities, short breaks and time in the community with their friends and family. This promotes the development of social skills and healthy lifestyles. However, some parents report that there is lack of availability of activities or that they miss the short break offer due to long waiting times or difficulties that families experience recruiting personal assistants.

# What is the area partnership doing that is effective?

- The local area partnership is ambitious for children and young people with SEND. They acknowledge that there is more to do to ensure that their ambitions are realised. Partners across the area work together to implement and embed priorities that they have identified through their SEND strategy. This has resulted in some positive initiatives, such as the commissioned autism project, where some schools benefit from advice, training and guidance to successfully support pupils with autism.
- Leaders across the partnership are committed to engaging with children, young people and their families. Their 'Working Together Pledge' and 'Co-production Charter' underpin this commitment. Parents' views are successfully captured and are instrumental in decision-making. This includes a review of the Disabled Children's Service eligibility criteria.
- The parent carer forum is a valued strategic partner, whose members are positive about the partnership's improved understanding and implementation of co-production across the SEND system.
- The 'Flying High Group', consisting of young people with SEND, has co-produced a new preparation for adulthood guidance document. The group has been instrumental in gaining the views of children and young people to further shape mental health



services.

- Skilled professionals provide effective intervention with the most vulnerable children and young people to prevent escalation of need. This includes the use of communication tools to help children and young people to express their likes and dislikes at home and in school.
- SEND hubs provide a range of opportunities for multi-disciplinary working. This promotes the local commissioning of services, such as therapy services, who work closely together to ensure consistency of support within a child's home and school setting.
- In some areas, the early identification speech and language team (SALT) provides early assessment and support to families of children under three with speech, language and communication needs who have other vulnerabilities. This means that families with high needs, including those with safeguarding concerns who may find it difficult to engage with services, receive personalised support and guidance.
- Neonates across North Yorkshire benefit from a new integrated care pathway in which they are carefully monitored by a multi-disciplinary team to help identify and respond to emerging needs.
- Children with emerging mental health needs can access a wide range of SEMH services commissioned across North Yorkshire. This supports children and young people with mild to moderate mental health needs, including schools-based work, individual therapies and consultation.
- Children and young people with SEND on the dynamic support register who are at risk of admission receive a care, education and treatment review. This supports multiagency care planning and bespoke commissioning to meet the young person's needs in their community.
- For military families in North Yorkshire, health assessments and treatments for both universal and specialist health input are expedited, particularly when a move out of the area or country may be imminent. This results in children and young people with additional medical needs being prioritised where needed.
- Children, young people and their families benefit from the effective support that they receive from a number of services across the partnership. This includes the medical education service, special school nursing service, sleep service, disabled children's service, SEND information, advice and support service (SENDIASS) and social prescribers. Many parents report good relationships with professionals who understand the needs of their child.
- The views and experiences of children are considered well by social workers and incorporated into their social care plans. Social workers help children to understand their plans using words and pictures. Children's plans include multi-agency partners, and they are reviewed regularly. This means that plans are monitored, which prevents drift for children.
- For the small number of children living out of area, their families are involved in the decision to identify the right children's home and school to meet their child's needs. Commissioning arrangements and placement oversight are robust. Children are well



- prepared for their move and maintain appropriate links with their family and home community. This helps children to feel settled and make progress.
- There is a comprehensive multi-agency training package across the partnership, which includes SEND training and cultural awareness training. Practitioners across health, education and social care speak positively about the training and support that they receive.

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

- The local area partnership is aware that children and young people have different experiences within the SEND system depending on where they live. A newly formed partnership group has been established to reduce this variability and address unintended outcomes of commissioning decisions. While progress has been made in standardising service specifications and key performance indicators, there is insufficient attention paid to the experiences of children and young people with SEND.
- There are many initiatives in place to address inconsistencies in the experiences for children and young people with SEND in North Yorkshire. However, the local partnership does not make sufficient use of the plethora of data gathered across a range of sources to identify emerging trends and areas for development in some aspects of its work. This includes data around permanent exclusions and suspensions, children transitioning to adult services and any unmet health needs. This means that the partnership does not always have the information it needs to identify gaps in service, monitor the impact of their strategies and put plans in place quickly enough to meet the needs of children and young people with SEND as effectively as it might.
- The local area partnership recognises the need to ensure that the consistently high quality of EHC plans improves. Plans do not routinely contain sufficient or current information about the social care or health needs of children, including the support and services being provided to meet those needs. Advice submitted by practitioners is not always incorporated into the plan. In these cases, the EHC plan does not accurately provide a record of the child or young person's current circumstances. This causes extra work for practitioners who adapt individual EHC plans. This adversely impacts on the timeliness of support for children, young people and their families.
- The quality assurance systems for checking EHC plans are not focused sufficiently well on the quality and relevance of the content. Many EHC plans do not reflect the work that is happening with the child or young person. Leaders have begun to make improvements to these systems, including additional training for staff. However, it is too early to see the impact of these changes.
- There are an increasing number of children and young people with SEND who are persistently absent from school. The number of primary-aged children with SEND who are being excluded from school has increased substantially. Leaders do not have sufficient oversight of trends and key areas of challenge to put plans in place to reduce this.
- Some children and young people with SEND do not benefit from a coordinated approach to help them transition into adult services, further education or



employment. The local area partnership does not ensure that they work effectively together at the earliest opportunity to provide children and young people with the support and guidance that they need. EHC plans do not contain accurate and measurable targets and next steps.

■ Some children and young people are seen quickly by health practitioners, including paediatricians, without having to be seen by their general practitioner. This leads to referrals to specialist services such as audiology and dieticians. However, in some areas, health and educational settings can only access specialist assessment services through their general practitioner. This results in unnecessary delays in the process. Waiting times for some assessments from services such as specialist dentist, autism and ADHD teams, speech and language teams and occupational therapy can take up to four years. While there are some initiatives to provide support and guidance while families wait, many children and young people's needs escalate further.

#### **Areas for improvement**

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Leaders across the partnership should ensure that EHC plans consistently and accurately reflect the needs of children and young people. This includes updating information regularly and setting clear and measurable targets. The partnership should expedite their quality assurance systems, ensuring there is clarity from all partners on what a good quality EHC plan looks like in order to ensure that all plans are accurate and support children and young people's needs and next steps effectively.

Leaders across the partnership should improve their planning and oversight of exclusions and attendance data for children and young people with SEND. The recently formed attendance alliance group, consisting of partners across education, health and social care, should use this data to intervene swiftly to help bring about improvements.

The local area partnership should develop systems to use data effectively so that they can identify gaps in service, monitor the impact of their strategies and put plans in place to meet the needs of all children and young people with SEND.

Leaders across the partnership should work together to improve children and young people's transitions across education, health and social care settings so that they are prepared for adulthood well.

Commissioners across the partnership need to further develop strategies to reduce waiting times and ensure children and young people across North Yorkshire can equitably access health services. There should be clear processes in place to monitor and report on progress made so that there is evidence of performance against the trajectory on improvements of waits from referral to treatment.



### Local area partnership details

Local authority	Integrated care boards
North Yorkshire Council	West Yorkshire ICB and North Yorkshire ICB
Stuart Carlton	Rob Webster
Director of Children's Services	Chief Executive of West Yorkshire ICB
	Stephen Eames
	Chief Executive Officer of NHS Humber
	and North Yorkshire ICB
www.northyorks.gov.uk	www.westyorkshire.icb.nhs.uk
	www.humberandnorthyorkshire.icb.nhs.uk
County Hall,	Humber and North Yorkshire ICB
Racecourse Lane,	Health House,
Northallerton,	Grange Park Lane,
North Yorkshire	Willerby HU10 6DT
DL7 8AD	
	West Yorkshire ICB
	White Rose house,
	West Parade,
	Wakefield WF1 1LT

# Information about this inspection

This inspection was carried out at the request of the Secretary of State for Education under section 20(1)(a) of the Children Act 2004.

The inspection was led by one of His Majesty's Inspectors (HMI) from Ofsted, with a team of inspectors, including: one Ofsted Inspector from education and one HMI from social care; a lead Children's Services Inspector from the Care Quality Commission (CQC); and two Children's Services Inspectors from the CQC.

#### **Inspection team**

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