

Southend-on-Sea Borough Council and Southend Clinical Commissioning Group

Working to make
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Written Statement of Action, Resubmission May 2019

Following Local Area SEND Inspection by Ofsted and the Care Quality Commission

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The Commitment by Senior Leaders accountable for Area SEND

Senior Leaders within the Local Authority, The Clinical Commissioning Group, Public Health and their partners welcome the inspection report and accept its findings.

As Area Leaders we are committed to pursuing improvements for all children and families, in particular to ensure we are working together to make lives better for children and young people with SEND in Southend. Our driving ambition is to ensure children and families are safe and healthy and achieve their potential. We will provide effective support for children and families at the earliest opportunity to ensure better outcomes, and to prevent escalation of their needs where possible. To achieve this, we will collectively agree what is holding back progress on improvements and respond quickly to raise the quality of our practice consistently across the area.

The Southend-on-Sea SEND Written Statement of Action (WSOA) , which has been co-produced following the inspection through a task and finish group involving relevant senior officers, school leaders, third sector representatives, parents and children and young people, sets out how these improvements will be achieved. Leaders will monitor the delivery of actions in the written statement and review outcomes and measures, through the governance structure outlined on page 5.

The education, health and care of all vulnerable groups, but especially those with SEND remain of the utmost importance in the work of Area Leaders. This inspection allowed us to collectively refocus our leadership, work and energy across the area, to ensure that the area's ability to assess, meet the needs of and improve the outcomes for learners with SEND remains of the highest priority. This will be undertaken at pace, working with and alongside our partners in settings, and critically working with and informed by children and young people and their families. We are determined to ensure that the WSoA drives robust, sustainable and irreversible improvements in the lives of children and young people with SEND. The WSoA contains a number of actions that we are committed to co-producing with our partners. Our commitment and investment will be reflected in appropriate timelines to take account of this essential part of the delivery.

The WSoA sets out a clear vision for how the area will address the four areas of significant weaknesses identified by the inspection, and sustain improvement for children and families at scale and pace. As leaders, we are committed to ensuring that the initiatives contained within the WSoA are properly resourced and implemented in full, and to using all levels of our governance to monitor that implementation. We are determined to ensure that when we are revisited, inspectors will see significant and lasting improvements for all children and young people with SEND.

Introduction

Between 1 October 2018 and 5 October 2018, Ofsted and the Care Quality Commission (CQC), conducted a local area SEND inspection of Southend-on-Sea of the effectiveness of the implementation of the Special Educational Needs and Disability (SEND) reforms in the Children and Families Act 2014 and reviewed the area's provision for learners with SEND.

Three inspectors reviewed services over five days, and gave formal feedback on the fifth day. Prior to the inspection, the inspectors reviewed documentary evidence, the Local Offer and information from a parental 'webinar' which took place in the week before the inspection. The inspection had three parts: officer and stakeholder interviews; site visits to schools and other settings; and listening to the voices of parents and of learners.

Ofsted and the CQC published the final report on 5 December 2018; the report required that the area write a joint Written Statement of Action ("WSoA"). The area established a task and finish group made up of joint area leaders and managers, school and parent representatives to write the WSoA. This group, under the name of Southend WSoA Improvement Group ("SWIG"), is now responsible for delivering the actions in the WSoA.

The four significant areas of weakness identified in the inspection report are addressed in the WSoA which sets out the actions that the area will take, and states the required outcomes, and the measures it will use to check that these outcomes have been achieved. The WSoA will be a reference document for the SEND WSoA Improvement Group, and the operational groups supporting the delivery of the four areas of significant weakness.

The WSoA will also be shared widely through the Local Offer, and through networks, partners and stakeholders including Southend Family Voice (our local Parent Carer Forum), and our SEND Independent Advice and Support Service. The SWIG will meet every six weeks to review the progress against the outcomes and measures of the WSoA, and will publish an updated version on the Local Offer website on a quarterly basis. The group will also report directly through the joint governance arrangements as set out in the "Governance and Accountability" section, on page 5.

The area is committed to involving children and young people with SEND and their families in decisions about services for them. From the outset, we have engaged with, parents, schools and settings in drafting the WSoA. We will make every opportunity for children and young people and their families to be included in the improvement work.

In all cases throughout the WSoA, the "Target Date" is the date for completion and implementation of the action.

In all cases, for highlight reports the BRAG system will be employed as high level summary/assessment of progress against the sub-heading actions on a quarterly basis, purely for the purpose of identification of progress, trajectory and risk. Far greater granularity evaluation will take place at work plan and operational levels following the approval of this plan. Blue, complete, Red at risk of not being delivered, Amber watching brief, possible slippage, Green on track to be delivered by the target date.

Governance and Accountability

The WSoA of Action has been prepared by a SEND task and Finish Group, consisting of senior managers and clinicians from the Local Authority and CCG, and school and parent representatives, established for the purpose of drafting the WSoA. The WSoA has been approved by the respective governance board for each of the organisations involved.

Ultimate accountability rests with the Health and Wellbeing Board (HWBB), the highest level partnership Board, consisting of Elected Members of Southend Borough Council, Chief Officers from the Local Authority, Southend CCG and Public Health, Southend University Hospital Trust, Local Safeguarding Board and Lay members. HWBB meets five times a year.

Reporting to the HWBB is the respective strategic Leadership groups of the Local Authority and the CCG accountable for all Children's Services, including SEND, namely the Local Authority Children's Improvement Board and the CCG's Governing Body. These groups will scrutinise achievement of the WSoA outcomes at their regular meetings, and monitor the work of the SEND WSoA Improvement Group. These groups meet monthly.

The direct accountability for ensuring that the WSoA is delivered will be the responsibility of a new group, the SEND WSoA Improvement Group (SWIG). This will consist of senior leaders from not only the respective organisations, but also from relevant directorates and services involved who have delegated authority to make necessary decisions. They will work alongside partners from Southend Family Voice and schools leaders. The SWIG will meet every six weeks.

The operational groups who are responsible for performing the actions in the WSoA will be monitored by the SWIG.

In addition, to ensure greater visibility and accountability for progress against implementing the WSoA, other existing groups will be engaged and involved with the implementation, such as the Southend Education Board, SEND Strategic Board and the SEND Leadership Programme. Progress against the overall plan, informing the reports described above will also be reported through the Success for All Children Group.

The plan will be monitored at each level of its governance, and where necessary escalation to the next level of accountability will occur. Formal reporting from the SWIG will inform subsequent levels of governance on a regular basis. In addition, periodic "stock take" meetings every quarter by Chief Officers of the Council and CCG will retain an oversight of implementation, outcomes and resource on a periodic basis for the life of the WSoA.

The life of the WSoA will be from approval by OFSTED and the CQC, through an 18 month period, to the anticipated revisit towards the end of 2020, although in several areas, work started immediately and has already progressed to address areas identified as significant weaknesses in the report.

Following approval of the WSoA by OFSTED/CQC, further iteration of the plan will include a full budget and resource plan and disaggregation of the outcomes into a live dashboard for the purposes of monitoring impact. Whilst a small number of the measure remain more process based "outputs", it was felt essential that for monitoring purposes they remain visible, and reviewed on a regular basis in the same way as the impact and quantifiable measures.

Written Statement of Action

A. Partnership Working and Joint Commissioning		Accountable Leader: Director of Integration and Partnerships	
Ofsted and the CQC said: “The emerging leadership of the SCCG, public health, the local authority and education providers has not developed quickly enough to ensure precisely coordinated priorities, accountabilities and joint commissioning to improve the outcomes for children and young people.”			
Actions	Responsible Officer	Target Date*	Outcomes and measures
<p>A1 Establish an executive joint strategic SEND commissioning group which will work with children and young people with SEND and their families to:</p> <ul style="list-style-type: none"> a. Agree terms of reference for the group and arrangements for communicating its decisions b. Agree joint priorities for change following a robust self-review and wide engagement of key stakeholders, notability parents and children and young people with SEND c. Co-produce and publish a revised joint SEND strategy to address these key priorities d. Develop a joint governance and accountability framework with delegated decision making power e. Work within the joint Southend and CCG commissioning framework as required by the SEND Code of Practice to ensure precisely coordinated priorities and accountabilities for joint commissioning in relation to SEND. f. Use information and key issues identified at Section C of the WSoA, EHC Plans and processes to ensure that children and young peoples’, voice, aspirations, experiences, welfare and outcomes inform joint commissioning decisions. 	<p>ADIP DPH DOL DCS DOIP</p>	<p>July 19 Sept 19 Apr 20 Sept 19 Mar 20 Dec 19 onwards</p>	<p>Outcomes Strategically led priorities for children and young people with SEND improve through effective, precise and timely joint commissioning of services</p> <p>There is a consistent strategy to ensure that a holistic approach is taken by healthcare service to support the child and the family.</p> <p>And as a result...</p> <ol style="list-style-type: none"> 1. The Designated Medical Officer (“DMO”) role and responsibilities established and working across the system effectively 2. Children and young people with SEND and their families to report satisfaction with the arrangements for commissioning, with feedback showing that satisfaction with the Local Offer of services is improving (reference evidence in section C). Baseline/improvement to be determined 3. The Joint Commissioning Framework is developed, signed off and in use by all professionals in the area. 4. Planning, procuring and evaluation of jointly commissioned services is agreed and fully integrated between education, health and social care commissioners. 5. Jointly owned risk register established and used to mitigate risk with effect from August 2019.

<ul style="list-style-type: none"> g. Agree an aligned budget for joint commissioning of SEND services aligned to joint priorities h. Identify capacity and resource commitment required to accelerate joint working. i. The Area will refine a clear job profile and work plan for the DMO role, identifying the operational and strategic functions in supporting community paediatrics. j. The DMO will share locally developed plans with the DMO/DCO peer group for peer validation k. Devise and ensure appropriate levels of advice, support and guidance are in place to support all children, young people and their families post diagnosis., including a “map” to aid navigation for parents during referral l. Initiate and pilot a multi-disciplinary decision making panel between agencies for neurodevelopmental referrals. m. The Associate Director of Integrated Commissioning dedicates 75% of their role to Children/SEND agenda. n. The DMO will produce an annual report for presentation to the CCG Governing Body and the Health and Wellbeing Board outlining strategic direction, current position and performance in-year service developments and future plans. o. The “Ready Steady Go” model of transition will be implemented and reviewed to include a holist approach between agencies. <p>BRAG Rating</p>		<ul style="list-style-type: none"> Jul 19 June 19 June 19 Dec 19 Dec 19 Dec 19 Aug 19 Mar 20 Sept 19 	<ul style="list-style-type: none"> 6. Statutory agency agreement reached regarding membership of SEND Commissioning Group by June 2019. Meetings scheduled for next 18 months. 7. Joint SEND Commissioning Strategy agreed and necessary resources identified across the three statutory agencies. 8. 90% participating parents and children and young people with SEND consider the consultation and engagement regarding the formulation of the Joint SEND Commissioning Strategy as good or better. 								
<table border="1"> <tr> <td>July 2019</td> <td>Nov 2019</td> <td>March 2020</td> <td>July 2020</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> </table>	July 2019	Nov 2019	March 2020	July 2020							
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<p>A2 Commission and deliver SEND training and development programme with leaders to:</p> <ul style="list-style-type: none"> a. Develop and define the values, behaviours and principles applied to joint commissioning of SEND provision and the requirements of the SEND reforms. b. Embed the operational aspects of governance structures, working groups and forums established by this WSoA in order to ensure aligned and effective implementation of the WSoA. c. Use the intelligence gained from section B of the WSoA in order that leaders can inform future commissioning decisions and hold one another to account. d. Development sessions with the Council for Disabled Children and Senior Leadership Teams ensure leaders have a collective and clear understanding and joint accountability for their roles. e. Follow-up development sessions take place to ensure individual and collective responsibilities are understood by senior leaders and used to inform the work of the Strategic SEND Commissioning Group. <p>BRAG Rating</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 25%;">July 2019</th> <th style="width: 25%;">Nov 2019</th> <th style="width: 25%;">March 2020</th> <th style="width: 25%;">July 2020</th> </tr> </thead> <tbody> <tr> <td style="height: 20px;"></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>				July 2019	Nov 2019	March 2020	July 2020					<p>CN SCCG AO SCCG C SCCG, DMO</p>	<p>July 19</p> <p>Sept 19</p> <p>Sept 19</p> <p>Sept 19</p> <p>Mar 20</p>	<p>Outcomes</p> <p>The SEND reforms are embedded at leadership level with good knowledge of individual and collective responsibilities under the SEN Code of Practice.</p> <p>Ensure leaders have an understanding, and ongoing challenge around the outcomes sought for and achieved by children and young people with SEND, including their aspirations, welfare and lived experience.</p> <p>And as a result...</p> <ol style="list-style-type: none"> 1. As a result of the development sessions, appropriate Area Senior Leaders ensure that collective accountability for SEND is embedded, as evidence by external/peer review of provision.
July 2019	Nov 2019	March 2020	July 2020											

<p>A3 Develop a clear strategy to promote and support the process of personalisation to:</p> <ul style="list-style-type: none"> a. Ensure that the needs of children and young people with SEND are identified and met at the earliest opportunity. b. Ensure that children and young people with SEND and their families are: <ul style="list-style-type: none"> • well informed • participate in strategic commissioning decisions • and able to challenge and hold the area to account c. Make commissioning decisions by reference to the known needs of the Area, including the outcomes sought for children and young people with SEND. d. Develop a common approach to co-production as an area. e. Collectively increase choice and access to provision through the further use of personal budgets. <p>BRAG Rating</p> <table border="1" data-bbox="85 938 855 1015"> <thead> <tr> <th data-bbox="85 938 277 976">July 2019</th> <th data-bbox="277 938 470 976">Nov 2019</th> <th data-bbox="470 938 663 976">March 2020</th> <th data-bbox="663 938 855 976">July 2020</th> </tr> </thead> <tbody> <tr> <td data-bbox="85 976 277 1015"></td> <td data-bbox="277 976 470 1015"></td> <td data-bbox="470 976 663 1015"></td> <td data-bbox="663 976 855 1015"></td> </tr> </tbody> </table>	July 2019	Nov 2019	March 2020	July 2020					<p>ADIP</p> <p>ADIP</p> <p>ADIP</p> <p>HOS</p> <p>ADIP</p>	<p>Dec 19</p> <p>Mar 20</p> <p>Mar 20</p> <p>July 19</p> <p>Dec 19</p>	<p>Outcomes</p> <p>Commissioning of services for children and young people with SEND is undertaken jointly by leaders and in collaboration with Children and young people with SEND and their families.</p> <p>And as a result...</p> <ol style="list-style-type: none"> 1. Joint governance and accountability framework implemented in full by March 2020. 2. As an interim, the executive joint strategic SEND commissioning group will incrementally ensure that all interim commissioning decisions are informed by the emerging policy with immediate effect. 3. Co-production of plans and provision will be acted upon and embedded though positive feedback from children and young people with SEND and their families (via the Parent Carer Forum, SENDIASS, Personal Outcomes Evaluation Tool (“POET”) and Local Offer). 4. Personal budgets (where applicable) are included in person centred discussions when EHC plans are issued. 5. Southend Youth Council, Learning Disability (“LD”) Partnership Board and Autism Partnership Board are fully engaged and contributing to the ongoing joint commissioning work. 6. Children and young people with SEND and their families report they have a better understanding because they are able to access information on personal budgets via the Local Offer website to help them make informed decisions.
July 2019	Nov 2019	March 2020	July 2020								

B. The Local Offer

Accountable Leader: Interim Director of Public Health

Ofsted and the CQC said: “**The Local Offer does not provide a service that is fit for purpose to meet the obligations in the code of practice. Local partners in health, social care and education, including schools, are not proactive in promoting co-production of the Local Offer. They are not ensuring that the Local Offer is adapted according to the views, needs and achievements of the children, young people and their families.**”

Actions	Responsible Officer	Target Date	Outcomes and Impact Measures
<p>Staff and resources and training</p> <p>B1</p> <ul style="list-style-type: none"> a. Recruit a joint Local Offer and Co-Production Lead Officer to lead the redesign of the Local Offer of Provision and Local Offer Website and ensure parent and pupil voice is embedded in all Local Area work. b. Create development opportunities for children and young people with SEND (for example, work experience, volunteering or a supported internship) to support co-production and the Local Offer role and engage with other children and young people with SEND to co-produce services. c. Invest in appropriate administrative support to maintain the Local Offer. d. Health partners appoint a dedicated Community Paediatric Clinical Lead to lead system transformation. e. The DMO & Community Paediatrician Clinical Lead to provide training to SENCOs for the management of health & medications in schools. f. DMO establish a dedicated generic email to enable schools to access support. g. All schools will be offered high quality speech and language training. 	<p>HOS</p> <p>HOS</p> <p>HOS</p> <p>ADIP</p> <p>DMO</p> <p>DMO</p> <p>ADIP</p>	<p>June 19</p> <p>July 19</p> <p>July 19</p> <p>Sept 19</p> <p>Mar 20</p> <p>Sept 19</p> <p>Jan 20</p>	<p>Outcomes</p> <p>The Local Offer is co-produced, is fit for purpose and meets the needs of children and families.</p> <p>The voice of children and young people with SEND and their parents will be embedded In the work of the local area and inform Service design.</p> <p>And as a result...</p> <ol style="list-style-type: none"> 1. The Local Area has made the appropriate appointments in order to create its capacity to deliver improvements to the Local Offer. 2. At least 70% of school SENCOs receive training in management of health, speech and language and medications in schools

<p>h. School nursing will participate in key induction events to highlight their role to parents and young people in transition points (R and year 7).</p> <p>BRAG Rating</p> <table border="1" data-bbox="91 432 952 507"> <tr> <td>July 2019</td> <td>Nov 2019</td> <td>March 2020</td> <td>July 2020</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> </table>	July 2019	Nov 2019	March 2020	July 2020					DPH	Sept 19	
July 2019	Nov 2019	March 2020	July 2020								
<p><u>Local Offer of Provision*: Review Group and Co-Production</u></p> <p>B2 Establish a Local Offer of Provision Review Group, which includes key service users, school and health representatives, to create and resource a business and review process for ensuring that the Local Offer of Provision meets the needs of the children and young people with SEND and their families, taking into account outcomes, aspirations, welfare and lived experience:</p> <p>a. Establish a Local Offer of Provision Review Group which will meet termly to review feedback and act upon the both the views of service users and ensure comprehensive content and coverage from services.</p> <p>b. The group will map all services, including health and social care assets and pathways, both inside and where appropriate outside the area, available to children and young people aged 0-25 with SEND and their families from Southend-on-Sea.</p> <p>c. Establish a SEND Student Forum to supplement the gathering of pupil voice and to lead co-design of new services for pupils with SEND.</p> <p>d. Representatives from the Local Area will attend all SEND student forums to ensure that the forum is supported and agreed actions implemented.</p>	<p>HOS</p> <p>HOS</p> <p>HOS</p> <p>HOS</p>	<p>Sept 19</p> <p>Oct 19</p> <p>Oct 19</p> <p>Sept 19</p>	<p>Outcomes</p> <p>The Area has a clear understanding of the services available to children and young people with SEND both inside and outside the area.</p> <p>The local offer of provision (suitability and sufficiency) is validated as meeting the needs of children and young people with SEND by Southend Family Voice and SENDIAS Service representatives and other local user groups.</p> <p>The voice of young people with SEND and their parents is embedded in the work of the local area and informs all service design.</p> <p>Direct feedback regarding the Local Offer indicates that it is making a demonstrable difference to improve the lives of children and young people with SEND.</p>								

e. Ensure local partners in health, social care and in particular schools and settings actively contribute to and promote the Local Offer.	HOS	Oct 19	And as a result... <ol style="list-style-type: none"> 1. Scrutiny of school websites confirms that every school is compliant with the requirement to publish their SEN implementation report. 2. All schools' individual SEND offer is both included in, and can be accessed by, the local offer website, actively promoting their contribution to the Area Local Offer. 3. Quality assurance through SENCO networks and scrutiny of governing body minutes indicate that all schools actively promote inclusion through their SEN information report. 4. On a termly basis, an evaluation of the effectiveness of the local offer provision is taken through governance routes in order to inform future commissioning. 5. Evaluation summaries of user feedback on the Local Offer of Provision indicates that 90% families are satisfied with the provision on offer. 6. There is a clear feedback pathway for children about the assessment process through the portal, and indicates 90% satisfaction in the outcomes relating to the assessment process (POET). 7. The Local Area is represented at all SEND Student Forum meetings, and in turn fulfils any actions agreed by the forum. 8. The Local Area and the Parent Carer Forum fulfil the requirements detailed in the joint memorandum of understanding. 9. All materials utilised by the Local Offer will be easily recognised and co-designed with parents (branding).
f. Revise the current Coproduction and engagement strategy to embed arrangements for engaging and gathering the views of children and young people with SEND and their families in order to review the content of the Local Offer.	HOS	Oct 19	
g. Promote further the opportunities for young people with SEND and their families for discussion, feedback and review of Local Offer services via the Local Offer website.	HOS	Sept 19	
h. Use data and feedback from children and young people with SEND and their families, and discussion forums, to identify, highlight and act upon good and poor practice in the area.	HOS	Jan 20	
i. Ensure that views, needs and achievements from children and young people with SEND and their families is used to ensure content of the Local Offer accurately informs needs based joint commissioning.	HOS	Mar 20	
j. Co-produce a campaign to relaunch and promotion publicity of the Local Offer across the area, via the website in B3.	HOS	Mar 20	
k. Use the strategy to actively promote all services, but in particular those less well known and used, such as School and Specialist Nursing that can be accessed by families.	HOS	Dec 19	
l. Ensure that the provision offer of all schools is recognised and included as part of the Local Offer.	ADIP	Dec 19	
m. Appropriate professional development through the SEND Leadership Programme (bespoke in school and training) so Schools are supported to ensure young people and their families are directed to the Local Offer Website as their first port of call for SEND information advice and support.	HOS	Sept 19	
n. Publish guidance on how universal services can and should promote inclusive practice and therefore be more accessible to children and young people with SEND.	HOS	June 19	

<p>o. Complete annual evaluation of the success of the Local Offer Provision Review Group and Local Offer.</p> <p>p. Full introduction of the Personal Outcomes Evaluation Tool (“POET”) to gain feedback from young people, their families and SEND practitioners about satisfaction.</p> <p>q. Evaluate POET feedback against regional and national benchmarks and consider the impact and needs this demonstrates in the borough.</p> <p>BRAG Rating</p> <table border="1" data-bbox="91 612 952 687"> <tr> <td>July 2019</td> <td>Nov 2019</td> <td>March 2020</td> <td>July 2020</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> </table> <p>*B2 and B3. For the avoidance of doubt, with reference to the Local Offer, B2 is concerned with the Local Offer “of provision”, the content and services therein, whereas B3 refers to the Local Offer “website”, the means to access that content through the website.</p>	July 2019	Nov 2019	March 2020	July 2020					<p>HOS</p> <p>HOS</p> <p>HOS</p>	<p>June 20</p> <p>May 19</p> <p>June 20</p>	
July 2019	Nov 2019	March 2020	July 2020								
<p>Local Offer Website* Review Group</p> <p>B3 Establish a joint Local Offer website review group which includes key school representatives, health, and children young people with SEND and their families to:</p> <p>a. Create a document which sets out both statutory duties relating to the Local Offer of Provision and Local Offer website, in collaboration with SEND and Parent/Carer forums.</p> <p>b. Create a process for ensuring that the Local Offer website is firstly up to date, co-produced and reactive to area feedback, and secondly includes all required information that is publicised and promoted across the area.</p>	<p>HOS</p> <p>HOS</p>	<p>June 19</p> <p>June 19</p>	<p>Outcomes</p> <p>A revised Local Offer website is implemented in full.</p> <p>The Local Offer website is reviewed on a monthly basis, and is current and comprehensive</p> <p>The Local Offer website is judged as “fit for purpose” by Southend Family Voice and SENDIAS Service representatives.</p>								

<p>c. Over time, ensure that the Local Offer website is clearly signposted by all key partner websites, including schools, in order to enable parents to access information quickly and easily.</p> <p>d. Review the technical aspects of the Local Offer website, considering the software and hosting arrangements to ensure good value for money, accessibility, compatibility with devices, and easy control of content, and implement revisions and/or re-procurement as appropriate.</p> <p>e. Review and amend the content and presentation of the information on the Local Offer website with a focus on accessibility for users.</p> <p>f. Ensure that the Local Offer website is current and regularly updated with new services as they become available.</p> <p>g. Promote the Local Offer website and raise its profile across the area.</p> <p>h. Ensure that universal services actively promote inclusion and accessible to children and young people with SEND via the website.</p> <p>i. The DMO will oversee the health content of the Local Offer and ensure health references are accurate and up to date.</p> <p>BRAG Rating</p> <table border="1"> <thead> <tr> <th>July 2019</th> <th>Nov 2019</th> <th>March 2020</th> <th>July 2020</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>	July 2019	Nov 2019	March 2020	July 2020					HOS	June 19	<p>And as a result...</p> <ol style="list-style-type: none"> 1. Self-evaluation using the SE7 Quality Assurance Tool LO Evaluation Tool SE7.docx scores the Local Offer as collaborative, accessible, comprehensive, up to date and transparent at 60% or above in all areas. 2. The Local Offer website has forums and feedback tools for service users to share their experiences and give their views on the Local Offer website and provision, and the area publishes its response to these comments on a monthly basis. 3. The area will publish a “You Said, We Did” report every three months in response to feedback from users. 4. Monthly “secret shopping” confirms that the Local Offer is current, comprehensive and compliant.
	July 2019	Nov 2019	March 2020	July 2020							
	HOS	Nov 19									
	HOS	Feb 20									
	HOS	Sept 19									
	HOS	Apr 20									
	HOS	Apr 20									
	DMO	Sept 19									

C. EHC Plans and Processes

Accountable Leader: Director of Children’s Services

Ofsted and the CQC said: “Leaders have not worked together to ensure that EHC plans provide a meaningful joint area approach to meeting children and young people’s academic, social, health and care needs. There are no clear accountabilities between agencies to make sure that children and young people’s outcomes are well assessed, planned for, met and reviewed.”

Actions	Responsible Officer	Target date	Outcomes and measures
<p>Review business processes C1 Review and improve all systems and processes relating to EHC assessment and planning.</p> <ul style="list-style-type: none"> a. Until full implementation of C1, urgently review existing procedures to ensure they remain effective. b. Agree joint area approach to statutory decision making for EHC assessment requests, issuing, and ceasing plans. Review and publish terms of reference for statutory decision making. c. Following the current research, identify and procure a customer facing multi agency SEND portal to support the statutory process of requesting, assessing for, and reviewing and ceasing an EHC plan. d. Refresh and co-produce the annual review process for children and young people with and EHCP to ensure it gathers information on progress towards outcomes and informs joint commissioning decisions. e. Revise existing templates and guidance for completing multi agency contributions to EHC needs assessments. f. Establish quality assurance criteria and process which allows the area to clearly evaluate the strengths and weaknesses of EHC plans (new and amended) and address issues. g. Establish a joint area quality assurance process to sample EHCPs and review the information collected by the EHCP 	<p>HOS</p> <p>HOS</p> <p>HOS</p> <p>SSM</p> <p>SSM</p> <p>SSM</p> <p>DCS</p>	<p>June 19</p> <p>July 19</p> <p>Dec 19</p> <p>Sept 19</p> <p>Sept 19</p> <p>Sept19</p> <p>Sept 19</p>	<p>Outcomes The area delivers its statutory duties to children and young people with SEND in a timely, transparent and person centred way.</p> <p>Information gathered through EHC assessments and annual reviews is shared consistently and transparently with children and young people with SEND and their families.</p> <p>Children, young, people and their families confirm that their views and aspirations are shared across services within the area to ensure that they only have to tell their story once.</p> <p>Person centred outcomes are identified by key professionals working with the child or young person, across the area.</p> <p>Leaders are fully aware of key issues and challenges in writing EHCPs and their delivery which informs day to day management and systematic training to staff and leaders.</p> <p>And as a result...</p> <ol style="list-style-type: none"> 1. The number of formal complaints to either SBC or SCCG has reduced by 10% in comparison to the previous year. 2. The local authority concedes or loses fewer appeals to SENDIST in comparison to the previous year.

<p>quality assurance process, and inform joint strategic planning, joint commissioning and training.</p> <p>h. Put in place protocols that ensure prompt and appropriate contributions are received when drafting an EHCP from Education, Health and Care. This will include compliance and escalation to relevant service and senior managers.</p> <p>i. School nurses to agree quarterly reports 2019/20 in order to update the SEN Icon on SystemOne to identify children and young people with SEN more readily.</p> <p>BRAG Rating</p> <table border="1" data-bbox="107 687 929 759"> <thead> <tr> <th>July 2019</th> <th>Nov 2019</th> <th>March 2020</th> <th>July 2020</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>	July 2019	Nov 2019	March 2020	July 2020					<p>DCS</p> <p>DPH</p>	<p>June 19</p> <p>Sept 19</p>	<ol style="list-style-type: none"> 3. All EHCP plans include contributions from Education, Health and Social Care that outlines the child’s needs and associated provision. 4. Evaluation protocols ensure relevant contributions received within five working days (initial/ simple response) and ten working days (more detailed response). 5. All professional contribution to EHCPs include child specific outcomes. 6. All EHCP panel meetings are attended by the School Nursing Service. 7. 90% of EHC plans contain the views of the child or young person and input from their family. 8. The EHCP quality assurance process evidences that the “average score” improves from inception and on subsequent 6th month reviews (benchmark and calibration determined by initial scrutiny). 9. The information relating to the EHC needs assessment on the Local Offer is accessible and transparent with clear timelines for making and communicating decisions.
July 2019	Nov 2019	March 2020	July 2020								
<p>Review record keeping</p> <p>C2 Review and improve systems, and access to systems, for recording and storing information across the area:</p> <ol style="list-style-type: none"> a. Identify, procure and implement a joint area SEND case management system which interfaces with current health and social care systems across the area and links with the customer facing portal identified at C1. b. Agree to a joint commitment to allow area staff to access appropriate shared information about children and young people with SEND who they are supporting. c. Establish a joint area quality assurance process for SEND record keeping within different service systems which reviews individual cases. 	<p>HOS</p> <p>HOPI</p> <p>HOSPAR</p>	<p>Mar 20</p> <p>Dec 19</p> <p>Dec 19</p>	<p>Outcomes</p> <p>The experience of children and young people with SEND and their families improves as a result of professionals’ ability to access detailed and accurate information about their needs.</p> <p>Children and Young with SEND and their families do not have to repeat their story.</p> <p>And as a result...</p> <ol style="list-style-type: none"> 1. Effective migration ensures smooth and timely transition to the new SEND case management system. 								

<p>d. DMO will develop and evaluate a health quality assurance framework for EHCP advice submitted by health professionals.</p> <p>BRAG Rating</p> <table border="1" data-bbox="103 469 931 544"> <thead> <tr> <th data-bbox="103 469 311 507">July 2019</th> <th data-bbox="311 469 517 507">Nov 2019</th> <th data-bbox="517 469 723 507">March 2020</th> <th data-bbox="723 469 931 507">July 2020</th> </tr> </thead> <tbody> <tr> <td data-bbox="103 507 311 544"></td> <td data-bbox="311 507 517 544"></td> <td data-bbox="517 507 723 544"></td> <td data-bbox="723 507 931 544"></td> </tr> </tbody> </table>	July 2019	Nov 2019	March 2020	July 2020					DMO	Dec 19	<ol style="list-style-type: none"> 2. Independent scrutiny of pupil records indicates improvement in the quality and timeliness of information (completeness, timeliness) contained within the system. 3. 90% Parents /schools report that the quality of EHCPs are effective in meeting a child's needs, evidenced through sampling and annual reviews. 4. Practitioner POET feedback shows that professionals working with children and young people with SEND have identified other professionals working with the child and know what their outcome are. 5. 90% of parents report that professionals working with their children are well informed and they do not have to repeat their story (using POET).
July 2019	Nov 2019	March 2020	July 2020								
<p>Improve data gathering</p> <p>C3 Improve recording, tracking and knowledge of the outcomes sought by children and young people with SEND, their aspirations, welfare and lived experience.</p> <ol style="list-style-type: none"> a. The quality assurance process established at C1 will allow outcomes to be categorised, and progress towards these categorised outcomes recorded in the joint SEND case management system identified at C2, above. b. A child's progress towards person centred specific outcomes is recorded in the child or young person's record following their annual review. c. Create a reporting process that allows the area to review progress towards and achievement of outcomes for all annual reviews. d. Information on outcomes, aspirations, welfare and lived experience is reviewed through the identified governance routes. As a result key issues are identified and fed back to 	SSM SSM HOPI DOL	Mar 20 Mar 20 Mar 20 Mar 20	<p>Outcomes</p> <p>All children and young people's broader outcomes are person centred and reflected in their EHC plans.</p> <p>All annual reviews are completed on time and inform future planning for the child or young person.</p> <p>The progress of children and young people with SEND improves as a result of leaders' greater understanding of their aspirations, welfare and lived experience. This information informs, joint area training, provision planning and joint commissioning.</p> <p>And as a result...</p> <ol style="list-style-type: none"> 1. There is a clear system for capturing and recording outcomes and progress towards them in all plans. 								

leaders, to inform planning for future training and joint commissioning.

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2. Every child has a set of person centred outcomes captured on the case management system.
3. Data analysis shows that 70% of children and young people with EHCPs are making expected progress towards meeting their outcomes.
4. Quality assurance data from Parent Carer Forum confirms 95% of children and young people's broader outcomes are person centred and reflected in their EHCP.
5. 100% of EHCP annual reviews have complete (met, decision made and annual review paperwork logged) within +/- one month of the annual review due date.

D. High Quality, Assured, Provision

Accountable Leader: Director of Learning

Ofsted and the CQC said: “Leaders have not developed a strategic partnership that makes sure that children and young people are in provisions that give them good-quality, full-time education. This particularly includes those educated at home, in post-16 provisions, and in out-of-borough provisions. Additionally, within the local area, too many pupils access part-time education for too long. Leaders of the local area do not know the extent of the impact of part-time programmes on the outcomes for children and young people. This lack of information is detrimental to the work of joint commissioning.”

Actions	Responsible Officer	Target date	Outcomes and measures								
<p>Review data collection and joint working</p> <p>D1 Review data collection, sharing protocols, and joint area working:</p> <ul style="list-style-type: none"> a. Refresh data sharing agreements with schools and regularise data shared from all schools to ensure the area has good quality information about: attendance, exclusion, part-time timetables, provision, reviews, and, outcomes. b. Agree and publish a joint area protocol which identifies the ‘lead professional’ in the care and support of children and young people who are supported by more than one service. c. Introduce a joint area integrated data dashboard which allows professionals supporting children and young people with SEND access to all appropriate information. The data dashboard will be scrutinised via the CME working Group and actions reported to and quality assured through the Vulnerable Learner Sub-group on a half termly basis. <p>BRAG Rating</p> <table border="1" data-bbox="94 1281 929 1361"> <tr> <td>July 2019</td> <td>Nov 2019</td> <td>March 2020</td> <td>July 2020</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> </table>	July 2019	Nov 2019	March 2020	July 2020					<p>DCS & HOPI</p> <p>DCS & HOPI</p> <p>DCS & HOPI</p>	<p>June 19</p> <p>July 19</p> <p>July 19</p>	<p>Outcomes</p> <p>Area Leaders collectively have established a Strategic Partnership that enables them to robustly share, collect and scrutinise data and hold each other to account to ensure the quality of educational provision received by children and young people.</p> <p>The area has access to good quality information collected on an appropriate schedule from all schools and a clear understanding of the position of children not accessing full time education.</p> <p>Children and young people with SEND receive timely and appropriate additional targeted support from appropriate services and have a named officer from their lead service.</p> <p>Professionals use the data dashboard to ensure a current understanding of the cohort and the needs of individual children and young people to inform practice and plan further support.</p> <p>And as a result...</p> <ol style="list-style-type: none"> 1. All children and young people with support from one or more service have a lead professional who is responsible for
July 2019	Nov 2019	March 2020	July 2020								

			<p>ensuring that care and support is effective in meeting the needs of the individual.</p> <ol style="list-style-type: none"> 2. Senior leaders evaluate the effectiveness of lead professionals on a termly basis in ensuring that the needs of Children and young people are known and met. 3. 100% of schools have revised data sharing agreements for sharing individual child data with the Local Authority. 4. VLSG minutes indicate that the actions resulting from the CME working group are scrutinise and where required escalated as and when required.
<p>Review staffing</p> <p>D2 Review and restructure key teams to ensure that they are fit for purpose, sufficiently resourced and appropriately structured to ensure the high quality, assured, provision for the area’s children and young people.</p> <ol style="list-style-type: none"> a. Scoping exercise of current roles and gaps within service provision across the area. Establish clearly defined roles and responsibilities for supporting and monitoring children on SEN Support, and those with an EHC plan, to encompass: risk management, tracking of outcomes, timely response, increased awareness of duties about SEND, and championing all children with SEND. b. As an interim during restructure period, leaders will ensure that all data acquired at D1 will be added to the data dashboard, scrutinised and reviewed through the existing CME multi agency CME working group and action plan. c. Complete a service review of the area’s SEND team for suitability to deliver the commitments of the WSoA and Code of Practice. 	<p>HOS & HOAI</p> <p>HOAI</p> <p>HOS</p>	<p>Nov 19</p> <p>Apr 19</p> <p>Nov 19</p>	<p>Outcomes</p> <p>The joint area has improved capacity to deliver the WSoA and drive improvement.</p> <p>And as a result...</p> <ol style="list-style-type: none"> 1. A new costed structure, roles and responsibilities are in place. 2. All staff have undertaken induction into new ways of working and will feature in the one to one conversation regarding behaviours (SBC staff) 3. Pupils reintegrating back into mainstream from nurture placement have sustained placements greater than 85% receiving no further exclusions in a 12 month period.

<ul style="list-style-type: none"> d. Review the area’s mental health and related well-being services and provide a revised offer to schools to: e. Incorporate the recommendations of the recently published Youth Council Mental Health Charter. f. Ensure that social, emotional and mental health needs are identified and responded to early. g. Upskill SEND practitioners in schools through programmes such as the SEND Leadership Programme and the Healthy Schools programme. h. Reinforce SEMH as the focus of the SEND Annual Conference (November 2020). i. Review the overall commissioning for nurture placements (current SLA in operation until March 2020). j. Specialist services (including School nursing and EWMHS) will roll out information sharing and Multi-Disciplinary Team pilot to support children and young people with emerging mental health needs in school settings. k. Submit bid for mental health support teams (MHST) in schools and colleges from the NHSE ‘Trailblazer Programme’. 	<p>ADIP & HOS</p> <p>ADIP</p> <p>ADIP</p> <p>HOS</p> <p>HOAI</p> <p>HOS</p> <p>DMO</p> <p>ADIP</p>	<p>Nov 19</p> <p>Sept 19</p> <p>Sept 19</p> <p>July 19</p> <p>Nov 20</p> <p>Jan 20</p> <p>Oct 19</p> <p>June 19</p>	
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<p>Review services and support for mainstream schools</p> <p>D3 Review and relaunch key services and documents for supporting children and young people with SEND in mainstream schools:</p> <p>a. Reorganise the roles and responsibilities of the Advisory SENCO team to have a clear focus on quality assurance, professional development and risk assessment for vulnerable learners.</p> <p>b. Review and publish the ‘Southend SEND Handbook (ordinarily available offer)’ using the Southend Learning Network (education online portal) and through the Local Offer website.</p> <p>c. Advisory SENCO’s promote the Southend SEND Handbook to schools, focusing on:</p> <ul style="list-style-type: none"> • tools and strategies used to support children and young people at SEN Support. • Embedding and quality assuring moderation of primary need assessment. • Embed consistent inclusive practice across the Area. • Signposting children and young people with SEND and their families to the Local Offer website. <p>d. Undertake quality assurance visits by the advisory SENCO team to monitor the impact of support and professional development on individual school data and ISP outcomes.</p> <p>e. Using information gathered through quality assurance visits Identify and deliver effective and targeted professional development.</p> <p>f. The Developmental Delay/Behaviour pathway implementation will be accelerated for launch in July 2019, including comprehensive ADHD and ASD pathways.</p>	<p>HSP HOS</p> <p>HSP</p> <p>HOS & HSP</p> <p>HOS & HSP</p> <p>HSP</p> <p>DMO</p>	<p>May 19</p> <p>June 19</p> <p>July 19</p> <p>July 19</p> <p>Sept 19</p> <p>Oct 19</p>	<p>Outcomes</p> <p>The area provides high quality, quality assured information and support to schools which has consistent, measurable and a positive impact for children and young people with SEND.</p> <p>Inclusion and practice in the area’s mainstream schools is improved through a systemic ongoing training and review programme, as evidence following the publication of the ISOS report recommendations.</p> <p>And as a result...</p> <ol style="list-style-type: none"> 1. An effective, comprehensive professional development programme for SEND is in place for schools, based on a clear framework and the Whole School Consortium SEND Self-Evaluation Framework (or appropriate equivalent). 2. Feedback from the SEND Leadership Programme will evidence 80% good or better evaluations and 80% or more attendance from schools. Needs analyses will be based on reliable indicators such as outcomes and needs identified by school’s self-evaluation. 3. There is increased focus on quality assurance by the Advisory SENCO team who review 10% of schools’ SEND self-evaluation.
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<p>g. Emotional Support workers commissioned to support families (early years focus) to navigate the developmental delay/behaviour.</p> <p>h. Complete the Community Paediatric Transformation which involves:</p> <ul style="list-style-type: none"> a. Integrated Developmental pathways. b. Review and recommissioning (where appropriate) of the Downs Syndrome and Cerebral Palsy pathways. c. Review and recommissioning (where appropriate) the Epilepsy pathway. <p>i. School Nursing 'drop-in' offer will be evaluated from an outcomes perspective to inform future service development.</p> <p>j. School nursing to identify a dedicated SEN nursing time to support transition for children entering mainstream school.</p> <p>BRAG Rating</p> <table border="1"> <tr> <td>July 2019</td> <td>Nov 2019</td> <td>March 2020</td> <td>July 2020</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> </table>	July 2019	Nov 2019	March 2020	July 2020					ADIP	July 19	
	July 2019	Nov 2019	March 2020	July 2020							
		ADIP	Sept 19								
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	DPH	Dec 19									
<p>School improvement</p> <p>D4 Existing Education Board Sub-Groups to:</p> <ul style="list-style-type: none"> a) Maintain risk registers for individual educational settings, e.g. linked to key areas of need, in order that these are appropriately shared with all relevant parties so as to ensure joined up approaches to support and challenge. b) Key Officers and School Performance Sub group (SPSG) to scrutinise area data to identify vulnerable schools in order to provide appropriate challenge and support including targeted intervention, risk management and tracking of related outcomes. 	HSPP	June 19	<p>Outcomes</p> <p>A reliable and robust process identifies settings that may be at risk and for this information to be appropriately shared to ensure appropriate challenge and support.</p> <p>Emerging trends are analysed and identified early with appropriate intervention and preventative work put in place allowing services to target, coordinate and deploy support in a timely and responsive manner.</p>								
	HSPP	Sept 19									

<p>c) Embed a multi-agency ‘Team around the School’ approach with relevant services from the LA, CCG and other external services, enabling joint working with clear roles and responsibilities, to target schools which have been identified as vulnerable by SPSG, deploy fit for purpose interventions and monitor impact.</p> <p>d) Key services use the areas of development, as reported through the establishment of a Southend SEND Review Framework across Southend (which is supported by the DfE Whole School Consortium SEND Adviser), to broker and / or commission appropriate support to mainstream schools.</p> <p>e) Reorganise the roles and responsibilities of the Advisory SENCO including a focus on quality assurance, compliance and professional development of settings in relation to pupils on part time timetables and / or who are LAC at SEND support.</p> <p>f) Introduce and undertake regular reviews of all educational settings commissioning alternative provision.</p> <p>g) Commission ISOS partnership to undertake inclusion review of SEND, including SEN Support.</p>	DOL	Sept 19	<p>And as a result...</p> <p>a) 100% of schools with high numbers of children and young people with SEND being moved from setting to setting are identified and quality assurance visits take place deploying appropriate challenge and support which result in reductions in pupil movement.</p> <p>b) 100% of schools with pupils on part time timetables which exceed 6 weeks are identified and quality assurance visits take place deploying challenge and support which result in pupils being reintegrated back in to school full time or managed to alternative provision settings, over clear and appropriate timescales.</p> <p>c) 100% of children with complex and/or challenging needs requiring longer term reduced timetables have a plan in place and team around the child involving relevant agencies to monitor and support progress and outcomes for the child.</p> <p>d) Fixed Term exclusion rate for all SEN pupils in all schools (excluding PRU) moves from quartile 3 to 2 in the national statistics.</p> <p>e) Absence rate for all SEN pupils in all schools (excluding PRU) moves from quartile 2 to 1 in the national statistics.</p> <p>f) Moderation indicates more consistent and accurate diagnosis of primary category of need across schools.</p> <p>Progress against a set of key improvement deliverables identified will indicate year on year improvement over time in relation to benchmark pupil level intelligence. In the interim, the following targets will be applied, based upon the annual benchmark outturn:</p>								
	HOS	Jan 20									
	HSPP	Dec 19									
	HSPP & DOL	July 19									
	DOL	June 19									
<p>BRAG Rating</p> <table border="1"> <thead> <tr> <th>July 2019</th> <th>Nov 2019</th> <th>March 2020</th> <th>July 2020</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>			July 2019	Nov 2019	March 2020	July 2020					
July 2019	Nov 2019	March 2020	July 2020								

		<ul style="list-style-type: none"> • The percentage of pupils with SEN Support meeting the required standard in phonics improves from quartile 4 (41%) to quartile 2 (50%). • The percentage of pupils with an EHC Plan meeting the expected standard at KS1 in reading, writing and maths improves from quartile 2 to quartile 1. • The percentage of pupils with SEN Support meeting the expected standard at KS1 in reading, writing and maths improves from quartile 4 to quartile 2. • The percentage of pupils with an EHC Plan meeting the expected standard at KS2 in reading, writing and maths improves from quartile 4 (4%) to quartile 2 (9%). • The percentage of pupils with SEN Support meeting the expected standard at KS2 in reading, writing and maths improves from quartile 4 (18%) to quartile 2 (24%). • The average Progress 8 score at KS4 for pupils with an EHC plan improves from quartile 4 (-1.33) to quartile 2 (-0.85). • The average Progress 8 score at KS4 for pupils with SEN Support improves from quartile 2 (-0.28) to quartile 1(-0.27). • The percentage of 19 year olds with an EHC plan qualified to Level 2 (8.8%) including English and maths with improves from quartile 4 to quartile 2 (14.6%). <p>An enhanced dashboard will be derived, building on existing materials, to reflect the outcomes and measures identified in the WSoA.</p>
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<p>Support</p> <p>D5 Develop a joint area system for monitoring the educational provision for the welfare and safety of children and young people with SEND and ensuring that records are up to date:</p> <p>a. Termly visits by an officer from the lead service to meet face to face with children and young people with an EHC plan, who are electively home educated or placed outside of the area.</p> <p>b. Establish cross-border agreements with other local authorities for the monitoring, support and sharing of information about children and young people from Southend with an EHCP who are in mainstream provision in their Area who are at risk of exclusion, persistent absence or missing education.</p> <p>c. Agree and implement a joint area system to ensure the area has up to date information about the safety and welfare of children and young people with an EHCP who are: over the age of 16; electively home educated ('EHE'); placed in an independent setting or placed in Alternative Provision.</p> <p>d. Weekly monitoring of those SEN pupils recorded as missing education on the integrated SEN dashboard will ensure action to confirm welfare and safety following joint agreed protocol.</p> <p>e. Recommission Connexions provision for young people aged 16 plus with SEND who are 'Not in Education, Employment or Training' ("NEET"). Develop and implement a SEND area of the Connexions website which links to the Local Offer website.</p> <p>f. Establish a new forum for schools, aligned to the Fair Access Panel, to discuss children and young people (who are at risk of exclusion; under a managed move; or reintegrating back into mainstream) to provide timely advice, support, action and challenge to avoid children accessing multiple settings in order to increase success in maintaining placements.</p>	<p>HOAI & HOS</p> <p>HOAI & HOS</p> <p>HOAI & HOS</p> <p>HOAI & HOS</p> <p>HSPP</p> <p>HOAI</p>	<p>July 19</p> <p>Sept 19</p> <p>Mar 20</p> <p>May 19</p> <p>July 19</p> <p>Sept 19</p>	<p>Outcomes</p> <p>All children and young people have access to a named person from the area and their experiences and views are heard and acted upon.</p> <p>The area has accurate and current knowledge of the placements, safety, welfare, attendance and attainment of all children and young people with SEND educated inside and outside the area.</p> <p>Children and young people with SEND who are NEET have good support and are well known to the area.</p> <p>And as a result...</p> <ol style="list-style-type: none"> 1. 90% of reviews and feedback show that children and young people know who their named person is. 2. 100% of families of children and young people (with SEND) contacted within five days of becoming electively home educated and offered a face to face meeting with a person from the area. 3. 100% children and young people with an EHC plan who are EHE receive a termly face to face meeting to review their progress. 4. All post 16 children whose EHC plan is to be ceased are offered a face to face meeting to discuss their plans and signpost them to relevant services and provisions. 5. 100% of schools share the outcomes of managed moves. Schools where there are high numbers of failed managed moves are reported back to Education Board (VLSG) for support and challenge (D4). 6. The number of NEET Young People with SEND is reduced year on year from Jan 2019 benchmark. 7. 85% of young people report that they received the support they needed when they were NEET.
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<p>g. Revise and implement a health offer for all EHE children and those placed in Alternative Provision.</p> <p>h. Ensure Health contribute fully to the drafting and review of all post 16 EHCP plan Section D (health) where relevant.</p> <p>i. A Transforming Care Accelerator pilot commissioned for CYP at risk of home or residential breakdown potentially resulting in hospital admission.</p>	<p>SPHP</p> <p>DMO & ADIP</p>	<p>June 19</p> <p>Sept 19</p> <p>Dec 19</p>	<p>8. 100% of Young People report that they are supported to return to education, training, or into work.</p>												
<p>BRAG Rating</p>															
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July 2019	Nov 2019	March 2020	July 2020												

<p>D6 YOS</p> <p>a. CCG to commission a comprehensive report to ensure leaders have a clear understanding of a young persons lived experience who have since become known to Youth Offending Service (YOS) in Southend.</p> <p>b. Report to identify the significant factors that impact on children with SEND that led to referral to YOS statutory interventions including (access and engagement to services, barriers to learning (i.e. exclusion) and any presenting health needs.</p> <p>BRAG Rating</p> <table border="1" data-bbox="107 754 927 836"> <thead> <tr> <th data-bbox="107 754 311 791">July 2019</th> <th data-bbox="311 754 515 791">Nov 2019</th> <th data-bbox="515 754 719 791">March 2020</th> <th data-bbox="719 754 927 791">July 2020</th> </tr> </thead> <tbody> <tr> <td data-bbox="107 791 311 836"></td> <td data-bbox="311 791 515 836"></td> <td data-bbox="515 791 719 836"></td> <td data-bbox="719 791 927 836"></td> </tr> </tbody> </table>	July 2019	Nov 2019	March 2020	July 2020					<p>ADIP & YOS</p> <p>ADIP YOS DMO</p>	<p>Dec 19</p> <p>Dec 19</p>	<p>Outcomes</p> <p>The area understands the pathways from exclusion and managed moves to youth offending and designs a protocol to break the chain.</p> <p>This learning will inform and enable future commissioning to be more effective in meeting the needs of the local area.</p>
July 2019	Nov 2019	March 2020	July 2020								

Glossary of Abbreviations

BRAG	Blue, Red, Amber, Green
CCG	Clinical Commissioning Group
CQC	Care Quality Commission
DCO	Designated Clinical Officer
DMO	Designated Medical Officer
EHC	Education Health and Care
EHCP	Education Health and Care Plan
EHE	Electively Home Educated
EWMHS	Emotional Wellbeing and Mental Health Service
HMI	Her Majesty's Inspectorate
HWBB	Health and Wellbeing Board
ISP	Individual Support Plan
LD	Learning Disability
NEET	Not in Education, Employment or Training
NHSE	National Health Service (England)
Ofsted	Office for Standards in Education
POET	Personal Outcomes Evaluation Tool
PRU	Pupil Referral Unit
SBC	Southend Borough Council
SCCG	Southend CCG
SEN	Special Educational Needs
SEND	Special Educational Needs and Disability
SENDIASS	SEND Independent Advice and Support Service
SENDIST	SEND Tribunal
SWIG	SEND WSOA Improvement Group
WSoA	Written Statement of Action
YOS	Youth Offending Service

SEND written statement of action improvement group membership/ responsible officers in WSoA

Role	Abbreviation	Name
Director of Learning	DOL	Brin Martin (Chair)
Director of Children's Services	DCS	John O'Loughlin
Director of Integration and Partnerships	DOIP	Jacqui Lansley
Southend Special School Trust		Jackie Mullan
Head of SEND	HOS	Gary Bloom
Chair Parent Carer Forum		Mike Wilson
Senior Public Health Principal	SPHP	Erin Brennan-Douglas
Director A Better Start Southend		Jeff Banks
Commissioning Manager	CM	Ross Gerrie
Head of Service Placements and Resources	HOSPAR	Diane Keens
SEND Service Manager	SSM	Laura Meynell
Head of Operational Performance and Intelligence	HOPI	Tom Dowler
Principal Educational Psychologist	PEP	Anne Powell-Davies
Head of Access and Inclusion	HOAI	Cathy Braun
Associate Director of Integration and Partnerships	ADIP	Caroline McCarron
Mainstream School Headteacher		Julia Jones
Interim Director of Public Health	DPH	Krishna Ramkhelawon
Designated Medical Officer	DMO	Dr Kate Barusya
Head of School Performance and Provision	HSPP	Amanda Champ
Chief Nurse CP&R and Southend	CN	Tricia Dorsi
Chair Southend CCG	C SCCG	Dr Jose Garcia