

EDUCATION, PARTICIPATION AND SKILLS

Local Area SEND Improvement Plan Progress Report
January 2025



Overview

This report provides comprehensive information on the progress made in the Plymouth Local Area SEND Improvement Plan since the local area SEND inspection which took place in June 2023. The aim is to highlight the advancements in each of the priority action areas.

Local Area SEND Critical Review

The critical review held in January 2025 aimed to establish what progress has been made since the inspection and to test what impact this is having on children and young people. The review had six distinct elements:

1. A new Local Area SEND Self Evaluation Form (SEF)
2. Plymouth Parent Carer Voice (PPCV) survey
3. A critical review workshop to review progress against the actions on the Local Area SEND Improvement Plan.
4. Creation of a strategic case study from each of the nine priority areas to demonstrate progress and learning since the inspection.
5. Collaborative audits of six children, including multi-agency partnership auditing of the children's files, and a visit to each of the children in their school or setting.
6. Discussion groups with children and young people in mainstream schools about their experiences, led by the Participation Team

The final three elements were completed at the end of January, and therefore the findings have not been able to be included in this report due to the timing of Scrutiny Panel.

Local Area SEND Self Evaluation Form (SEF)

The Local Area SEND SEF has been fully updated to represent and evaluate the current work of the local area to support children and young people with SEND and to be in line with the Ofsted local area SEND inspection criteria.

Our SEF is representative of the local area partnership and a document owned by all. Collectively we hold high ambitions for our children and young people with SEND, and we keep our children and young people at the heart of what we do. We have robust governance in place which has a cycle of review and challenge to ensure this.

Our partnership ensures that children, young people and their families have regular opportunities to meaningfully participate in the decisions that affect them. We hold termly (6) forums for parents and carers, and make use of parent carer surveys, and we have a feedback loop for children and young people led by the council's Participation Team.

Please read the SEND SEF here: [SEND SEF](#)

Plymouth Parent Carer Voice (PPCV) survey

The main respondents of the PPCV survey were parents and carers of children with SEND with an EHCP, and those with SEND without an EHCP.

Service strengths identified from the survey were:

1. **Education and School Support:**
 - Special schools and personalised placements like Mill Ford School, Heather Bridge, and Courtlands received significant praise for meeting individual needs.
 - Dedicated staff such as SENCOs and supportive teachers were frequently appreciated.
 - School transition plans, tutoring arrangements, and accommodations for GCSE exams were highlighted as beneficial.
 - Forest schools and alternative provisions (e.g., Flint and Steel, outdoor learning programs) were effective for engagement and wellbeing.
2. **External Support Services:**
 - Services like PIAS, Routeways, and Barnardo's were deemed invaluable, providing emotional, educational, and administrative support.
 - Speech and Language Therapy (SALT) and Child and Adolescent Mental Health Services (CAMHS) were helpful when accessible.
 - Fit and Fed programs and direct payments supported extracurricular and care needs.
3. **Parental Involvement:**
 - Parents often played critical roles in sourcing tutors, managing transitions, and advocating for children's needs.
 - Consistent communication and collaboration with schools were essential for success.
4. **Community and Extracurricular Activities:**
 - Clubs like Plymouth Dance and Theatre Royal were beneficial for creativity and social engagement.
 - Activities fostering routine and low-demand environments at home or in small-group settings worked well for many children.

The key findings and recommendations were:

1. **Service Availability:** Increase the number and variety of wraparound care options, particularly for older SEND children and during school holidays.
2. **Specialist Provisions:** Expand resources like speech therapy, occupational therapy, and behaviour support.
3. **Funding and Training:** Address staffing shortages with better training and funding to ensure schools can support diverse needs.
4. **EHCP Improvements:** Streamline EHCP updates, ensure timely reviews, and involve appropriate specialists throughout educational transitions.
5. **Awareness and Access:** Improve communication about available services (e.g., Local Offer, short breaks) and simplify the access process.
6. **Parental Involvement:** Incorporate parent feedback in service design and policymaking to address unmet needs effectively.
7. **Streamline EHCP Processes:** Reduce delays and enhance communication between families and Local Authority.
8. **Increase Funding and Resources:** Expand capacity for special schools, therapies, and direct payments to meet growing demand.
9. **Enhance Support Services:** Broaden the scope and reach of mental health support, sensory assessments, and post-18 planning assistance.
10. **Improve Training and Inclusion in Schools:** Equip educators with better SEN training and adapt curriculums to cater to diverse needs.
11. **Expand Extracurricular Programs:** Provide more inclusive and accessible activities for secondary-age children.
12. **Parental Support:** Offer clearer guidance and dedicated personnel to assist families in navigating complex systems.

Critical Review Workshop

A critical review workshop has been held with all partners on 9th January 2025 to review the plan. The workshop facilitation group included the DfE Adviser and the Head of SEND from Telford and Wrekin, ensuring that it therefore was robust and objective. The workshop findings were then moderated by the Service Director and Head of SEND. The findings are that of the 55 actions in the plan:

- 17 are deemed to be not yet fully completed.
- 31 are completed and now monitoring for evidence of impact on children and young people.
- 7 are completed and there is evidence of clear impact on children and young people.

Feedback from partners on the experience of being involved in the critical review workshop included:

“It was helpful to share thoughts together and reflect honestly on progress, areas still to develop and how we evidence impact. IT issues aside, a helpful process, thanks.”

“Great to be a part of it - there are lots of reasons to be positive and hopeful, although there is a need to be realistic about what we can actually say and evidence at this stage.”

“Very helpful session to learn about the work being undertaken as a new member to Plymouth. Really good conversations on testing our impact on children and young people.”

“Good to have some open conversations about progress with some very dedicated colleagues and reflect on how we move forward in each area of SEND improvement for children and families. However, as with many such meetings, I find the available time is not commensurate with the importance of the task and the depth of thought and reflection needed for it... I recognise the time constraints but equally acknowledge this potentially limits input and may affect the quality of response and ultimately, action. That said, overall, this was a very engaging session, if a little short for the value of the task.”

“Good to hear that so much has already happened and the impact so far. Particularly interesting to hear other perspectives and learn from each other.”

The key outcomes from the review thus far are detailed against each of the priority areas below.

Priority Action Area I: Leadership and Governance

The plan emphasises that leaders must ensure children and young people with SEND are at the heart of all improvement plans, with clear oversight and tracking.

Significant progress has been made in this area, with the appointment of a permanent Head of SEND and the ongoing implementation of leadership development programs. The voice of children and parent/carers is present in the recruitment processes for leadership roles. There is a full time SEND commissioner in the ICB and an ICB Head of SEND and Children in Care. The ICB now has an aligned children's portfolio, inclusive of children's mental health, SEND and all core children's services.

Whilst the Service Director for Children's Social Care is absent and the Service Director for EPS is leaving, there is now strength in depth within the services to ensure that SEND Improvement Plan continues to be driven forward. From families' perspective there has been a lot of disruption in the past five years, with a number of senior leaders changing over this period. We need to continue to improve the relationships and long-term stability between senior leaders and families.

Leadership development is in place for senior and middle leaders, and a SEND training programme is in place for the local area partnership. Children's voice informed the Children's Services middle and senior leadership development programme 'Leaders for Excellence'.

Governance structures have been strengthened, and there has been positive feedback from the Department for Education (DfE) and SEND peer reviews, indicating robust oversight and effective leadership. The local area partnership improvement plan has strong governance in place with robust monitoring and holding to account via the independently chaired SEND Improvement Board, SEND Strategic Delivery Group chaired by the DCS, Children's Scrutiny Committee and Cabinet members via Cabinet Planning meetings. SEND Delivery is reviewed at the ICB Quality Committee bi-monthly.

Children and young people's voice feeds into each SEND Improvement Board meeting and has included the presentation of a video on inclusion made by children and young people, and their attendance at the Board to ask questions of Board members.

The SEND Improvement Plan was co-developed with children and families. There is regular communication with schools and settings to update them on the progress of the SEND Improvement Plan via the Schools Bulletin, Head Teacher briefings, the SENCo forum.

School leaders are members of the PSIB, SEND Strategic Board, SEND Strategic Delivery Group and priority delivery groups.

The Place Based Working Group is being led by one of the city's multi-academy trusts and has 100% focus on inclusion and belonging. The place-based work is fully multi-agency, cross phase. Learning is shared widely across the Head Teacher conferences. The SEND graduated approach is a key focus in termly Head Teacher Conferences, as requested by Head Teachers.

Priority Action Area 2: Early Identification and Support

The plan calls for the development and implementation of training on thresholds relating to vulnerability and risk, ensuring early identification of children at risk.

Progress in this area includes the completion of threshold training with over 400 attendees. Additionally, the integrated front door for referrals is being implemented, with a target completion date of April 2025. These efforts aim to enhance early identification and support for children with SEND.

There have been clear improvements in the ownership of the inclusion agenda and the importance of a partnership approach. Inclusion has been woven as a golden thread through all family hubs work, with a growing SEND offer and support for families from birth to 25.

Increased family communication has received positive feedback with monthly forums infographic updates offering transparent information about the local area progress. These have also been excellent opportunities to seek parent/carer feedback to add to the quality assurance and review.

There has been strong improvement across the transition processes to ensure that all children and young people's needs are identified succinctly, and there are no gaps in provision. The early years team have been expanded, and their approach refined which will allow for early targeted support, advice and guidance. Phase transfer for Y6-7 is being actioned on time and a transition portal is now embedded across schools to allow for succinct transfer of information.

In addition, the post 16 terms of reference have been finalised and the team fully reviewed. A preparation for adulthood quality assurance report has identified some strong practice across post 16 provisions, and within key stage four plans. The priority action plan will now focus on consistency within schools, and mapping offers for the local area.

A valuable addition to the EHCP annual review team has been the allocated officer for vulnerable children with low attendance and/ or at risk of provision breakdown. Targeted early annual reviews are supporting identification of need and offer of resource to ensure there is a team around the child.

Priority Action Area 3: Reducing Exclusions

To reduce the likelihood of exclusion for pupils with an Education, Health, and Care Plan (EHCP), the plan outlines collaborative efforts.

Progress includes the launch of place-based strands and the refinement of action plans. Early identification of children with multiple suspensions has been implemented, resulting in a significant impact on reducing exclusions. These measures demonstrate a commitment to keeping children with SEND engaged in education.

The Place Based Plan launched at event on 9th December 2024, with the action plan for each of the six strands completed by 20th December 2024. The plan is wholly focused on inclusion and belonging. Progress against delivery is to be presented at Head Teacher Conference on 6th March 2025.

Learning from child's voice research of children who are permanently excluded will feed into the place-based work, with research findings shared in February 2025. The attendance survey and home education survey with Plymouth universities includes a survey for children. Surveys go live in January 2025. Research will be fed into the place-based strands and service design.

Work to date includes:

- The early identification of children with multiple suspensions - termly meetings are in place with schools to discuss individual children and prevent risk of permanent exclusion.
- The educational psychology service has developed a pilot to prevent permanent exclusions, working with schools on a different way of approaching the issue.
- The educational psychology service has produced resources for schools to understand physical behaviour and reduce risk of exclusion. This is now available to schools.
- The Ordinarily Available Provision has launched and is being used across schools in the city. This is now being monitored.
- A Vulnerable Pupils Panel has launched and is held monthly. It has strong multi-agency membership across the local area partnership supporting schools to reduce risk of permanent exclusion for vulnerable children. Educational outcomes for children referred to the panel are tracked for 12 months.
- Regular dip samples of educational outcomes for children known to a social worker are now embedded within One Children's Services and supporting practice developments.
- A research project into permanently excluded children which is driven by child's voice is being undertaken. Research findings will be presented to the Priority 3 Delivery Group in February.
- Targeted conversations are in place with schools to discuss planning for individual children with an EHCP who are on part time timetable or severely absent is taking place.
- A model for joint dip-sampling with schools is being developed and will be presented to the SEND Priority Delivery Group in February 2025.
- A 'Need to Know' process has been introduced for all primary permanent exclusions and all secondary exclusions of vulnerable children, increased oversight and planning for primary PEX and those on CiN or CP. PEX prevention.
- 61 permanent exclusion prevention meetings have been held since the start of academic year, of which only five have resulted in a permanent exclusion, none of whom have an EHCP.

The work has had an impact on numbers of children with an EHCP being permanently excluded, with a reduction of 40% (2) this academic year to date. Of the three children with an EHCP who were due

to be permanently excluded this academic year, one was from a Cornish school and one permanent exclusion was quashed at Independent Review Panel.

The data for the year to date shows there has been:

- 22% (273) reduction in number of suspensions for children who require SEN Support in school.
- 33% (75) reduction in number of suspensions for children with EHCP
- 28% (10) reduction in number of permanent exclusions
- 40% (2) reduction in number of permanent exclusions children with EHCP

Priority Action Area 4: Risk Assessment for Waiting Lists

The plan emphasises the need to risk assess children on waiting lists to ensure those with multiple needs receive the earliest support possible.

There is an innovative piece of work on a clinical prioritisation tool currently being piloted on speech and language. Although not completed it is not a high risk area as there are other examples of clinical prioritisation which can demonstrate children with complex needs are receiving support earlier than at the time of the inspection.

The waiting well offer has been developed for children waiting for neuro assessments across Livewell Southwest and University Hospitals Plymouth (UHP) - the wellbeing team have developed this with children, young people, parents and carers

Access Multi-Disciplinary Team (MDT) is now in place. The Vulnerable Pupils Panel is now established and running. Public health nursing is based across the city in localities. There is a locality based Mental Health Support Teams (MHSTS) across most localities in Plymouth.

<https://www.livewellsouthwest.co.uk/mental-health-support-team> . This website shows a map of all schools supported by MHST's in Plymouth. CAMHS Early Help also provide school support and have allocated school liaison practitioners that provide consultation and staff drop in.

Priority Action Area 5: Social Care Needs

Ensuring that children with SEND who have social care needs receive the necessary care and support is a key focus of the plan.

Progress includes regular reviews of children receiving short breaks and the strengthening of governance structures. Transition pathways are being developed to ensure smooth transitions for children with SEND. These efforts aim to provide comprehensive care and support for children with social care needs.

Quality assurance activity by the Participation team on the relationships between the Independent Reviewing Officers (IROs) and the children has been presented to Corporate Parenting Board. Young people told us in the main that their IRO knows them, supports them, enjoys having an enduring relationship with them, listens to them, advocates for them and were positive about their role on their lives. Key themes for areas of development were ensuring that all young people have a clear understanding of the IRO role, knowing that they can escalate concerns on their behalf if these issues are in their best interests and that the Child in Care Review is their meeting.

IROs have significantly increased their use of the resolution/escalation framework when children are experiencing practice drift and delay, and improved outcomes can be evidenced as a result of these escalations.

Visits to children in residential homes, special schools and unregistered homes is currently 89% - for the children who have not been visited it is mostly due to them very recently moving to this provision. During children in care statutory visits, children are always given the opportunity to be spoken to alone. This is detailed in the visit recording. The visit recording asks key questions: "Why was the child not seen alone? Who was with them? When will this be arranged?" thus prompting the curious questions and ensuring an action is set to ensure the child is seen alone as soon as possible.

The Virtual School attended Foster Carer Support Groups to share information and advice about getting the best out of EHCP Reviews and Personal Education Plan (PEP) meetings. Attendance and engagement were not high, but foster carers and residential staff have continued to express a need for this learning. In response to feedback, we have reviewed this approach and are designing some joint workshops for social workers, supervising social workers, foster carers, residential and 16+ staff to learn together. Colleagues from a range of teams and agencies have been consulted to consider how we can achieve this collaboratively. This will enable the sharing of knowledge, experiences and for the virtual school and SEND Team to provide learning that improves confidence and engagement across the system through Spring 2025.

An EHCP officer is now in place for children in care and known to a social worker. We are also linking with other local authorities to ensure that reviews are completed and shared.

There is now a transition pathway that is in place which includes health, ICB, Adult Social Care (ASC), Children's Disability Team (CDT) and permanence teams, to ensure that all children are referred into ASC and health by the age of 15 ½. We are also providing a list of those aged 14+ to give early alerts to ASC.

There is a monthly meeting that is held where all children are discussed who require a referral into ASC/ ICB. Action plans are formulated and reviewed each month thereby ensuring that all young people who are needing to transition to ASC are referred in and discussed much earlier.

The team recognised that oversight and governance of the service has not been as robust as it should have been, and we have an action plan in place for robust governance. To date:

All children and young people known to CDT who have not been assessed in the last 3 months has been reviewed at panel. A regular review has been implemented at 3, and 6 months depending on need of child, young person, family or carer.

All children and young people known to children's service (not CDT) that have not been assessed in the last 3 months will be scheduled for review at short breaks panel (Dec 24 through to Feb 25).

More robust communication and closer working are in place with children's services, which has been reflected in the improved step-up, step-down process which has been developed and implemented. Improved decision making at panel and referrals across to Resource Panel.

Established a format to baseline health of children and young people new to short breaks (via the CHC checklist) Downham House review is now partially complete.

Children identified for priority admission and children who no longer require residential provision to meet their short break need have also been identified.

Priority Action Area 6: Consistency of Support

The plan aims to ensure that all children receive mandated checks and benefit from a consistently applied graduated response.

Progress in this area includes improvements in recruitment and retention within the Public Health Nursing service, leading to increased delivery of mandated reviews.

Over the past year a programme of “grow your own” within the PHN service has been developed, established. This has been very successful in recruiting qualified nurses into the service at band 5, for a short period moving onto SCPHN training. First cohort is within the establishment and in consolidated practice.

Impact of increase in the ‘grow your own’ programme within the PHN service:

- Increased ante-natal review within 14 days from 25.5 % to 39.2%
- New birth review within 14 days have increased slightly from 82% to 83% (97.3%)

Data is showing increase in the five mandated reviews completed within timescales due to the increased capacity of the workforce. New reporting systems are in place to monitor reviews on a weekly basis.

There has been significant progress with the re design of the graduated approach for the local area. This has included the new landing page which has been co-produced, providing a consistent framework for support. This includes a resource directory with a wealth of training, research and targeted offer for settings and schools. The Ordinarily Available Provision [Plymouth Council - Ordinarily Available Provision for Schools by The Education People - Issuu](#) has been launched as part of this work, offering settings and schools a toolkit to embed a consistently inclusive universal offer.

Our co-production approach has included children and young people, families, education provisions and all partners across the local area. A seconded SEND coordinator from a local secondary school has led the final stages of the resource directory; a platform that has been created based on feedback from practitioners, children and their families.

The quality assurance process for Education, Health and Care plans (EHCPs) is now a stronger feature across the service and includes monthly auditing, regular embedded dip sampling across all statutory panels and creation of new process guides. Over 100 dip samples were completed across the Autumn term leading to progress in processes for health and social care advice and support available to all partners when preparing a young person for adulthood.

Training sessions for both the quality of Education, Health and Care Plans, and the tracking of SEND data on Capita are in motion and these have been targeted specifically for areas identified as highest priority through dip sampling and auditing.

The graduated approach is being further enhanced through the enhancement to special school outreach for mainstream provisions and the targeted funding model for children and young people without and EHCP.

Priority Action Area 7: Addressing Long Waiting Times

Addressing long waiting times for children requesting support from health services is a critical focus of the plan.

Progress includes the strengthening of governance and the addition of capacity for speech and language therapy and neurodiversity assessments. These measures are aimed at reducing waiting times and ensuring timely access to necessary services for children with SEND.

The average length of time children and young people must wait has reduced significantly since the inspection and the waiting well offer has improved guidance, support and access to families including 24/7 mental health crisis support.

Devon ICB has a children and young person community recovery plan in place, and this has been endorsed by NHS Devon Senior Executive Team.

Immediate work and longer-term transformation programmes include:

- autism waiting list recovery
- organisation specific recovery: neurodiversity and SLCN.
- longer term: neurodiversity and SLCN transformation (including PINS – a neurodiversity in schools project).

Priority Action Area 8: Training for Practitioners

The plan emphasizes the importance of ensuring that all practitioners have the training they need to provide consistent care and support for children with SEND.

Progress includes the launch of a core level of mandatory training, with over 600 participants completing the training.

This training is hosted on the PCC Learning Pool Platform page and accessible to all internal or external members. The page also contains:

- An introduction page and has links to the training.
- A sign-up page (MS Form) to monitor attendance.
- A plain text version of the training has been developed that works with immersive reader, Goblin technology and with overlays for staff with accessibility issues or neurodiversity.

Specialist training programs have also been developed to further enhance the skills and knowledge of practitioners. The Head of SEND launched a series of training sessions for the Ordinarily Available Provision, delivered a training sessions to leaders & managers on the graduated approach and created training opportunities for social workers on the topic of EHCPs and SEND support in schools.

Further bitesize training opportunities and specialist resources will be available for all partners on the new graduated approach directory.

Priority Action Area 9: Planning Ahead

Using available information to plan ahead and ensure the right services and support are in place is a key focus of the plan.

The updated Joint Strategic Needs Assessment (JSNA) has been co-created with Public Health and presented to the SEND Strategic Board for approval. The Board felt that it was a strong overview and much improved piece of work.

Young people and families were involved in the creation of the survey questions for the parent carer survey. The most recent findings of the parent carer survey have been distributed to partners and have been provided in the first section of this report. Providers will now give feedback on what actions they are taking as a consequence of the findings.

A SEND Sufficiency Plan has been created, published and agreed at cabinet (September 2024). The delivery plans are now underway. Mill Ford satellite provision has successfully opened its first classroom on the 6th January 2025, with the other classes (creating a total of 50 places) due to open in September

2025. Both Brook Green and Longcause expansion plans are in motion, and the assessment nursery is due to open at Woodlands in September 2025.

Resourced provision growth within our mainstream schools is developing with one primary school undergoing feasibility auditing, and four additional schools in discussions regarding the potential use of their sites.

Conclusion

Significant progress has been made in implementing the Plymouth Local Area SEND Improvement Plan. Key actions have been completed, and ongoing efforts are in place to address remaining areas. The Critical Review - Action Plan Tracker provides evidence of the impact and effectiveness of these actions, demonstrating a commitment to improving outcomes for children and young people with SEND in Plymouth.

The findings of the SEND critical review in totality will be presented to the SEND Improvement Board once all elements of the process have been completed and quality assured.