Education and Children's Social Care Overview and Scrutiny Committee



Date of meeting: 16 July 2025

Title of Report: SEND Local Area Improvement Plan

Lead Member: Councillor Sally Cresswell (Cabinet Member for Education,

Apprenticeships and Skills)

Lead Strategic Director: David Haley (Director of Children's Services)

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Your Reference: LMcD

Key Decision: No

Confidentiality: Part I – Official

Purpose of Report

This report provides an update on the progress of the plan to improve the quality, timeliness and outcomes of our SEND Services across the Local Area partnership. The improvement plan was coproduced and co-developed with all our key partners following the Local Area SEND inspection in July 2023 and takes forward our ambitious priorities outlined within our SEND Strategy 2023-2026. Progress of our improvement journey is reported into our Local Area SEND Improvement Board and has been outlined within this report.

Recommendations and Reasons

It is recommended that the progress, key challenges and priorities for the next quarter are noted.

Alternative options considered and rejected

None

Relevance to the Corporate Plan and/or the Plymouth Plan

Ensuring that the children and young people with SEND and their families receive the earliest support with the right help, at the right time.

Implications for the Medium Term Financial Plan and Resource Implications:

The Special Educational Needs spend on independent placements for children and young people with SEND create significant financial pressures on the Local Authority Designated Schools Grant.

Carbon Footprint (Environmental) Implications:

Increased travel across the City and out of area due to capacity of specialist placements

Other Implications: e.g. Health and Safety, Risk Management, Child Poverty:

No other implications

Background papers:

*Add rows as required to box below

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Please list all unpublished, background papers relevant to the decision in the table below. Background papers are <u>unpublished</u> works, relied on to a material extent in preparing the report, which disclose facts or matters on which the report or an important part of the work is based.

Title of any background paper(s)	Exemption Paragraph Number (if applicable) If some/all of the information is confidential, you must indicate why it is not for publication by virtue of Part 1 of Schedule 12A of the Local Government Act 1972 by ticking the relevant box.						
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Sign off:

Fin	N/A	Leg	N/A	Mon Off	N/A	HR	N/A	Assets	N/A	Strat Proc	N/A

Originating Senior Leadership Team member: Lisa McDonald

Please confirm the Strategic Director(s) has agreed the report? YES

Date agreed: 4th July 2025

Cabinet Member approval: YES, approved by Email

Date approved: 4th July 2025

Introduction

This report provides an update on the progress of the plan to improve the quality, timeliness and outcomes of our SEND Services across the Local Area Partnership The improvement plan was coproduced and co-developed following the Local Area SEND inspection in July 2023 and takes forward our ambitious priorities outlined within our SEND Strategy 2023-2026. Plymouth is now over 18-months into delivery of the SEND Improvement Plan with the majority the original actions completed.

Progress of our improvement journey is reported into our Local Area SEND Improvement Board and has been outlined within this report.

Since the inspection Plymouth local area partnership has embarked on a learning and self-reflection journey. 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. Our local partnership is made up from:

- Plymouth Parent Carer Voice
- Youth Ascends
- Plymouth Young Safeguarders
- NHS Devon Integrated Care Board (ICB)
- Plymouth Public Health
- University Hospitals Plymouth
- Livewell Southwest
- Education settings and providers
- Plymouth City Council
- Voluntary and Community sector

The SEND Improvement Journey

To achieve the ambition set out in the Local Area SEND Improvement Plan we knew we needed to strengthen our governance and partnership arrangements. We have reviewed and restructured our governance across Plymouth to strengthen our accountability, oversight and transparency across the whole system. This updated governance structure aims to:

- Keep co-production at the heart of all we do.
- Refocus our improvement programme, holding firm to the good work we have started through our SEND Strategy Delivery Board, while giving the priority improvement actions the capacity and attention needed to drive improvement forward at pace.
- Establish robust Partnership accountability for delivery of the plan.
- Ensure effective monitoring of progress and the impact this has for children and families in Plymouth.
- Strengthen professional development, learning and training.

Our commitment to children and young people with Special Educational Needs and Disabilities (SEND) and their families has been agreed based on the Ten Wishes (here which focus on what children and young people want from professionals. There is a methodical plan for regular and meaningful engagement activity with children and young people. The Ten Wishes provides a vital framework to hold Leaders to account as part of a feedback loop, as well as children and young people attending meetings with decision makers and asking challenging questions in order to influence strategy and plans.

Our commitment as we continue with our improvement journey is to:

- Put children and young people (CYP) at the heart of everything we do
- Help CYP much earlier
- Work together to help CYPin school
- Work together to support CYP when you are waiting for the care you need
- Ensure they get the additional specialist help and support they need at the right time
- Reduce the long waiting times for the care that CYP need
- Make sure everyone working with CYP has the right training and development
- Ensure the right services and support are in place for the future

The recent DfE/NHSE stock take stated that: The Partnership has made good progress in responding to the recommendations in the inspection report. Most of the actions in the improvement plan have been completed and there is evidence of impact in key areas.

Following feedback from the internal critical review of SEND progress, and the 6-month DfE/NHSE stock take, the SEND team with key partners have completed a deep dive into the status of all action areas.

This has included cross referencing of the original SEND Local Area action plan, the SEND Strategy document 2023-2026, and the feedback from all reviews.

SEND Self Evaluation Framework (SEF)

The SEND SEF has now been refined in collaboration with all partners. This has included a multi-agency workshop, and key meetings with family representatives, health partners and schools.

We have embedded co production thtrough this work so that the voice of children, young people and their families are the building blocks for our transformation. This has been reflected in feedback and testimonials about the impact of our improvements, alongside key information about how we can continue to progress.

The final iteration of the SEF has been audited by the DfE SEND advisor and has been presented at the Local Area SEND Improvement board meeting on the 8th July 2025.

The SEF demonstrates a broad range of improvements to the leadership, management and delivery of our SEND strategy with feedback of impact from children, young people and families.

Key achievements since the SEND inspection that are outlines in the SEF are as follows:

- I. Communication and listening
- 2. Co-production
- 3. Governance & oversight
- 4. The graduated Response
- 5. Health Services
- 6. Skills and Post 16

In addition, the document outlines our commitment to the next steps and the continuing progress through ambitious target settings and planning.

Communication with Families and professionals

A new SEND duty system has been implemented from the 5th May 2025 to improve communication with both families and professionals. The duty system comprises of a Caseworker, two EHCP Officers and two Annual Reviewing Officers each day. The team are responsible for managing telephone calls to the help line, answering queries that are received in general inboxes alongside conducting normal duties connected to individual children. Data captured through the system demonstrates that families were previously waiting to have their calls answered with many abandoning their calls. Since introducing the duty system the experience for families has been significantly improved.

The chart below details the telephone performance information both pre and post the duty system.

Month	Calls Answered	Calls Abandoned	% Answered		Average time to abandon call
February	251	126	50%	27min	10.40min
March	351	160	54%	9.37min	9.35min
April	198	31	86%	8.22 min	7.32 min
May (Duty started)	269	21	93%	6.42min	3.26in

In addition to managing telephone communications, the team have also completely reduced the backlog of the SEND Admin Inbox and Annual Review Inbox. These workstreams now function live each week.

Annual Review Officers and EHCP Officers are now issuing their own draft plans to families, providing direct contact details for both parents and professionals. This ensures that family concerns and feedback returns requiring amendments or decisions are being actioned in live time and placed on appropriate panels for swift decision making.

Complaints are now being dealt with promptly within timescales, and where concerns are raised meetings with families are taking place to weave into the continued learning and development for the SEND team.

To develop our service even further we have increased engagement from children and young people with SEND through the invaluable work of our Participation Team and wider Partnership. We have listened to children and young people and strengthened our awareness of our early help support through our Waiting Well offer. We have received positive feedback from children, young people and families. Read Children and Young People's Voice on Health Waits.

Headteachers and school SEND leaders now frequently report that they feel there is much improved communication and that they are better supported to include children and make a positive difference to their lives.

We have made a difference in the way in which we listen to and respond to parent voice fed back through the Parent Carer surveys. Through the introduction of infographics, face-to-face forums and video feedback we have continued ambition to expand our communication and engagement from all of our families.

New Targeted funding in mainstream schools

The new Plymouth graduated approach (<u>www.plymouthgati.co.uk</u>) is receiving a wide range of positive feedback from families with more than 4000 visits to the site since launching in April. Feedback is being received from families, partners and young people.

The New Graduated Approach - Family Feedback "The GATI video and "It's reassuring to see a consistent "The language used on the approach being used across Plymouth schools. It builds trust step-by-step layout website is parent-friendly and easy to understand. It helped me feel more confident when talking make the process much that everyone is working from the clearer. It helped me see same page. to school staff about support fo exactly where we are my child. and what comes next. 'It's good to know tha the graduated approach recognises that not all children's "Thanks to the GATI, I now understand terms "This website shows that like 'universal' support is not just reactive 'targeted', and but planned and adaptable. That gives me There's flexibility built 'specialist'. I feel much The site gave me tools to more confidence in the more confident in engage in a more equal system. meetings with school.' conversation with the schoo about my child's support.' 31

The next step for the website is the launch of the children and young person tab which is currently in development with our young person advocates.

As part of the graduated approach to inclusion in Plymouth, we have introduced the targeted funding model in mainstream schools for children and young people without an EHCP. The purpose of the funding is to ensure the right support is in place, at the right time without the need for a statutory plan.

Currently, there are 5 early adopter schools with the funding in place, with a further 25 schools live with the bespoke curriculum pathways in September. This strand of the funding supports schools to implement an alternative approach to learning for up to 10 children at any one time, supporting more than 290 learners across the academic year.

Parental feedback has been gathered as part of the initial monitoring & evaluation of the early adopter schools and demonstrates clear impact on the lives of children in schools:

"The Provision has been nothing short of transformational for our son. Before, he found it so hard to explain how he was feeling. It was difficult as a parent watching him struggle with emotions he couldn't name. Thanks to the incredible support, coupled with his play therapist, he can now not only tell us how he feels but also explain why. He's more confident, calmer, and so much happier in himself. We see a little boy who feels understood, valued, and safe, both at school and at home. Words can't express how grateful we are for the care, love, and belief that have helped him find his voice and we are now starting to see the light shine in ways we only dreamed of before." (Parent)

"Since the group started, I have noticed a positive shift in his confidence, and engagement with the school. The nurturing environment made possible by small group size, enables the staff to be able to begin working on helping him understand and express emotions in a way that simply isn't possible in his classroom. The provision is able to cater for the unique challenges for each individual child — and they have been specifically working with him on important social interactions skills like sharing ideas and teamwork. What's made the biggest difference is how the group taps into special interests to spark learning. Lessons appear to be brought to life — accommodating sensory activities, movement, outdoor play, and meaningful community activities. Children like mine often carry a

lot of shame — for not fitting in, for struggling in ways that are misunderstood or overlooked. The group has given him a chance to feel something different: pride." (Parent)

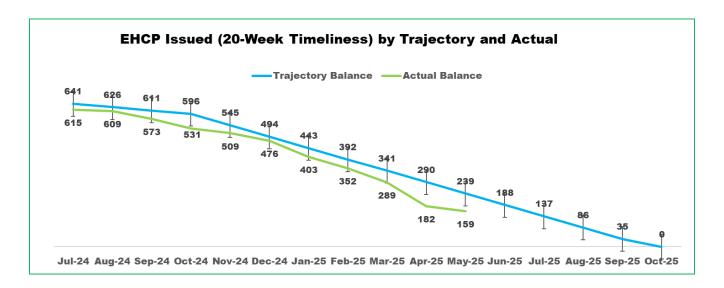
Education, Health and Care Plan Statutory Timescales

At the end of May 2025, 3362, children and young people (CYP) in Plymouth have an EHCP, compared to 3287 in April 2025. This includes the increase for completed new plans, transitions in and out of the local area and the ceasing of any appropriate post-18 plans.

108 final EHCPs were issued in April having received all amendments from settings and families, and a further 80 final plans were issued in May. This represents a significant increase compared to an average of 40 plans per month previously being issued for this academic year, an 16 per month this time last year (June 2024).

The chart below demonstrates that we are ahead of our trajectory to deal with the backlog of EHCP plans.

We are making faster progress towards our 20-week timescale than our planned trajectory which should lead to plans being issued at a greater rate within the statutory timescale.



The team are now embedding quality assurance across all elements of the statutory process to ensure high quality in line with the pace of support. There is also a focus to increase capacity in the Educational Psychology team to ensure the timescales can continue to improve.

Also, with the EHCP Standard Operating Procedure (SOP) now in place for the health input and statutory processes, this will lead to a more standardised approach and improve the quality and timeliness of our health contribution to EHCPs.

Health Partner Update

Health Waiting Times

Across NHS Devon, we are addressing the situation of long waits, increasing demand, and understanding the complexity of demand, by working with our NHS providers and partners to undertake specific immediate pieces of work to address urgent priorities across our system. This includes neurodiversity transformation, speech, language and communication needs, transformation and emotional health and wellbeing.

In 2024/25, £550k investment was agreed by NHS Devon ICB Board to significantly reduce waiting times for autism assessments across Plymouth, Devon and Torbay. For 2025/26 investments have been set at the same level on a non-recurrent basis.

We have increased capacity to complete 50% more neurodiversity assessments at University Hospitals Plymouth. For Autism assessments the overall time from referral to assessment outcome has improved but currently remains static due to an increase in demand. The Community Paediatric team continue to have a vacancy for a Consultant Paediatrician with active plans for recruitment. When this post was covered by a Locum Paediatrician, a clear fall in new patient waiting times was seen.

For speech and language, with the increased capacity of five additional posts the projected trajectory to achieve the 18-week referral to treatment target will be reached by March 2026, which is reducing the wait for children and young people to access the speech and language service.

We have consistently achieved over the last year the national waiting time standard of 95% for physiotherapy and occupational therapy at University Hospitals Plymouth, as demonstrated by the SEND Scorecard and Healthy & Happy Dataset.

Livewell Southwest continue to fill vacancies within CAMHS Early Help to support the 21.5% increase in demand and current vacancies in the service, this will support the recovery enabling children to be seen in a timely way, however the 35% access target is overachieving and now at 53.85% which demonstrates that increased numbers of children are accessing the service.

The Public Health Nursing service have continued with the 'grow your own' recruit to train project, which has been positive in reducing the vacancies across the service. This can be demonstrated by the increase in the 5 mandated reviews as part of the healthy child program.

Working in partnership with local authorities across One Devon, NHS Devon led the review of wider CYP emotional wellbeing and mental health provision which included all offers outside of CAMHS (provided by Livewell Southwest). The review and an assessment of need resulted in a decision to bring together existing provision as a single integrated service and expand the offer. The new service includes digital and face to face offers across the 'getting advice and guidance' and 'getting help' domains of iTHRIVE.

The service was collaboratively procured through a competitive process by an evaluation team which included local area and subject matter experts from across One Devon. The procurement resulted in the contract being awarded to Young Devon working in Partnership with Kooth and a range of public and VCSE providers with presence across One Devon. The service will commence delivery from 1st July 2025.

Early Help and support for Children, Young People and Families

Within health we have strengthened our early help support to ensure children and young people needs are identified early and supported whilst on the waiting list with our 'waiting well offer'.

We now have in place, several improved multi-agency panels and processes that are supporting us to risk assess children, such as Access (448 requests discussed in 2024), Vulnerable Pupil Panel, Unborn Baby Panel and the One Devon Escalation Process. This has resulted in children and young people receiving the right help and support at the right time.

Health services in Livewell Southwest are delivered in line with the iTHRIVE model, where all children, young people and families across Plymouth at anytime can complete a request for help directly into services to ensure families are getting advice, getting help, getting more help and risk support. This model aligns with graduated response.

We have delivered an offer for families while they are waiting (waiting well) within Plymouth including: a digital neurodiversity resource hub, neurodiversity wellbeing team, co-produced information for children and young people and a helpline to support families.

Livewell Southwest Childen's speech and language therapy service has introduced an Early Help pathway, in line with the iTHRIVE model, supporting Children and Young People to access help and support early. The service has received positive feedback from families who have accessed the early help offer.

We have established a Child and Adult Mental Health Service (CAMHS) Early Help Pathway, in line with the iTHRIVE model, has open access and there is no need for a professional referral. There is an advice line that professionals are able to access for advice and there is also a 24/7 crisis line in place. We have also increased the crisis home treatment offer in the community.

We have established a Children and Young People's Neurodiversity Wellbeing Team have launched a confidential, free advice line to all children, young people and their families who have a neurodiversity diagnosis or are on the neurodiversity pathway within Livewell Southwest and University Hospitals Plymouth.

We have increased our support to schools via Mental Health Support Teams (MHST). Since the inspection, Plymouth now has 3 teams within the City, covering 8 secondary schools and 51 primary schools. Following further confirmation of funding, LSW are currently recruiting to an additional team which will support a further school population of 8000, with training commencing January 2026.

Partnership for Inclusion of Neurodiversity in Schools (PINS)

The PINS is part of the Department for Education's (DfE), wider ambition to build capacity in mainstream education so all those working with children and young people with SEND, have the knowledge and skills to do so. Projects locally are being overseen by NHS Integrated Care Boards, who are supported by a National Delivery Support Team which includes officials from the DfE, Department of Health and Social Care (DHSC) and NHS England (NHSE).

In Plymouth we were allocated funding for 9 schools to take part in the project. All settings completed the project with hours ranging from 37 to 73. Items for the Menu of Support were pulled from the self-evaluations completed by schools, delivered in a variety of ways by a range of practitioners.

Plymouth schools have reported that they are experiencing raised understanding and confidence in their teaching staff around Neurodiversity, a greater understanding of coproduction and its benefits when

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working with families and a greater understanding of mental health in teachers of children with Neurodiversity. Nationally, there is also some evidence to show that the schools who have taken part in the PINS Project submitted less requests for EHCPs. The national results of year one of PINS are expected in Autumn 2025.

For the academic year 2025-2026 Plymouth have been allocated an additional 7 school to be in the PINS Project allowing further development of neurodiversity training across our settings.

EHE Update

The Send Improvement Board members requested a further update to investigate the link between permanent exclusions, the risk of exclusion, and the parental decision to home educate.

In the academic year 2024/25 to 28th March 2025, 365 children were deregistered from school to Elective Home Education (EHE), taking the total number of Electively Home Educated children to 848 at the end of March 2025.

Between 1st September 2024 and 28th March 2025, 125 permanent exclusions were prevented in partnership between the Local Authority and schools.

Of the 365 new registrations to Elective Home Education, 3% (12) children were at risk of permanent exclusion prior to the parental decision to home educate. All 12 children are secondary school aged.

Of the 12 children who were at risk of permanent exclusion, 58% (seven) have Special Educational Needs and Disabilities (SEND) requiring SEN Support in school. None of the children have an Education Health and Care Plan.

Three children are currently on a University Hospitals Plymouth (UHP) waiting list.

Of the 365 new registrations to Elective Home Education, three children (1%) of the were permanently excluded from school prior to the parental decision to home educate. All three children are secondary school aged.

Of the three children who were permanently excluded, two (66%) required SEN Support in school. Of the two, one child now has an Education Health and Care Plan.

The Priority 3 'Reducing permanent exclusions of children with an EHCP' Task and Finish Group of the SEND Action Plan has now merged with the Elective Home Education Task and Finish group. The group has representation from across the Local Area Partnership. The group is leading a joint action plan which strengthens existing practice and prevents vulnerable children from being withdrawn to elective home education.

The Plymouth City Council SEND Service is working with families of children who are home educated and who have an EHCP to build parental confidence and support children to return to mainstream school. Following the success of a trial, the approach has now expanded to include more children.

In addition, the Vulnerable Pupils Panel is a Local Area partnership which includes the Integrated Care Board, Police, Youth Justice Service, Children's Social Care, Child and Adolescent Mental Health Service and The Child Development Centre. Since its implementation in November 2024, the partnership has worked together to prevent II permanent exclusions; the children referred to the panel continue to attend their registered school, and the children are monitored by the partnership monthly to ensure stability.

Preparation for Adulthood

The Local Area now has 67 supported internships in the city and have been recognised as a leading example in this area. 100% of young people working within this programme and the Your Futures scheme have moved into employment and training.

The team recently won the LGC award for recognition of the strong work in this area which is an example for all Local Areas. The judges commended the work in Plymouth:

Plymouth City Council stood out as this year's winner for their transformative work in supported internships, expanding placements from 9 to 67 in just two years. Their partnership with Discovery College, which achieved a 100% employment success rate, showcases what's possible with vision, collaboration, and inclusive practice. Plymouth's commitment to empowering young people with learning disabilities is not only exemplary, it's reshaping expectations across the sector.

In addition, one of our supported interns won an award at this month's Youth Award and his story was shared with the SEND Improvement board as a great example of what can be achieved with the right support.

Plan for next quarter

In response to this feedback and the deep dive, the team are now developing a new iteration of the action plan that extends beyond the original delivery expectations, and one that is aspirational with further improvements to be made. This plan has been developed with knowledge of the new SEND Ofsted Local Area Inspection Framework: <u>Area SEND inspections: framework and handbook - GOV.UK</u> with a working draft presented to the SEND improvement board on the 8th July, and a final plan to be approved at the September board.

We are now in the evidence collation phase to share a clear impact on our children and young people from the original actions completed, whilst ambitiously planning for further improvements with a key focus on all phases of education from early years through to adulthood.

Inspectors will account for any actions taken by our leaders since the initial inspection and expect to be reassured of the action taken by the local area partnership that impacts on the lives of children and young people against each of the action areas.

Over the next few months the team will focus on inspection readiness and this will include fortnightly targeted meetings, a review of all evidence collation and preparation of impact statements. The data team will support production of the Annex A and our DfE SEND adviser will lead several sessions to support staff practice and preparation.

Whilst we embed and sustain our achievements, the key priorities for the future are:

- To ensure that all children and young people have access to a well-planned, inclusive and appropriate education pathway.
- To ensure the effective implementation of our EHCP timescales recovery plan and improve our trajectory for annual reviews in line with our priority plan.

- To refine the while-you-wait offer across the Partnership to support children, young people and their families at the right time.
- To continue to improve the attendance of pupils with SEND and reduce the number of suspensions across our schools.
- To develop our response to rising numbers of children with SEND who are in home education, missing education or are on part-time timetables.
- To evaluate the impact of our 2023-26 SEND Strategy and start work to co-produce a revised strategy for 2026-2029 reflecting national policy likely to emerge during 2025.
- NHS Devon with our health partners will continue to tackle wait times for neurodevelopmental diagnostic assessments. This approach is brought together in the DRAFT One Devon Neurodiversity Strategy, this is due for consideration in a range of Plymouth City Council forums over the coming months. Following this consideration the development of a Local Authority aligned implementation plan will be proposed, this will promote shared ownership, delivery and oversight of the strategy in each Local Authority within NHS Devon.