

## **Hartlepool SEND Improvement Plan updated January 2021**

A joint local area inspection of Hartlepool's effectiveness in identifying and meeting the needs of children and young people who have special educational needs and/or disabilities (SEND) took place in October 2016. This inspection identified four areas of significant weakness which were detailed in a written statement of action (WSOA). The local area jointly submitted an action plan to tackle the areas of weakness which was declared fit for purpose by Ofsted on 24 April 2017.

The local area convened an Improvement Board that oversaw the implementation of the action plan which made some positive progress to deliver the required improvements. In January 2019, Ofsted and the Care Quality Commission revisited Hartlepool to assess whether the local area had made sufficient progress in addressing the areas of significant weakness detailed in the written statement of action. During the revisit, inspectors found that we had not made sufficient progress in two of the four areas included in the Written Statement of Action, although acknowledged that we had undertaken significant work in tackling these outstanding issues. During the revisit, the inspectors told us that our governance arrangements were not robust enough as our SEND Improvement Board, established in February 2017, had responsibility for delivering the improvements as well as holding ourselves to account on the effectiveness of this. This resulted in a lack of progress in the two areas:

- Inconsistencies in the timeliness and effectiveness of the local area's arrangements for identifying and assessing children and young people's special educational needs and/or disabilities; and
- Weaknesses in the joint commissioning of services for children and young people who have special educational needs and/or disabilities.

As a consequence of the insufficient progress made in the above detailed areas of weakness, a further, more rigorous improvement plan has been produced to accelerate the pace of change to tackle these two outstanding weaknesses.

The Hartlepool local area is committed to delivering this plan to improve the quality of services provided to children and young people with special educational needs and disabilities, ensuring their needs are identified and assessed in a timely way and the arrangements for joint commissioning are substantially improved resulting in a more responsive service.

The timescales detailed within this action plan will be monitored by a newly formed Strategic Group of accountable officers who will receive six weekly reports from the Operational Group and in turn be accountable to the Hartlepool Health and Wellbeing Board. Within 12 months, the Health and Wellbeing Board will have received the report of a Local Government Association Peer Review which will demonstrate that the improvement plan has been delivered and the local area has implemented the necessary improvements to the quality of services to children and young people with Special Educational Needs and / or Disabilities.

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<b>Weakness to be addressed:</b> System governance for delivery of SEND services for the children and young people of Hartlepool.									
<b>We will know this is working well when:</b> The effectiveness of the local system is held to account by itself and internal and external scrutiny									
Objective	Actions	Intended Outcomes/ Impact Measures	Responsible Person(s) / Post	Milestones					
				By 31/05/19	Status/ Evidence	By 30/09/19	Status/ Evidence	By 31/03/20	Status/ Evidence
<p>The governance arrangements provide effective strategic and operational accountability.</p> <p>Clearly identified action plan to deliver improvements with robust accountability and reporting arrangements.</p> <p>Local area leaders are sighted on delivery of this improvement plan and hold those working within the system to account to achieve the required improvements.</p> <p>Local leaders take swift action to address barriers, delays or systemic issues that impact on progress.</p> <p>Strategic leaders are individually responsible for the implementation of this improvement plan within their own organisation and escalate risk to their own internal governance. Collectively HWB board will hold strategic leaders to account for the delivery of this plan.</p>	<p>Implement revised governance arrangements for local area SEND ensuring there is clear understanding of accountability and governance across all stakeholders.</p> <p>Workstreams produce 6 weekly reports which track progress, milestones, issues and risks for strategic group. Strategic group will be responsible for tracking progress against milestones within this action plan and taking remedial action where these are not achieve.</p>	<p>Local governance arrangements hold all organisations to account for the delivery of the SEND Strategy and the improvement of performance including related outcomes for children and young people with SEND.</p> <p><b>Evidence by: Minutes of meetings and action logs demonstrating timely discussions and monitoring of the plan</b></p> <p>Children, young people, parents, family members and carers will understand how the system is working to deliver SEND services and improvements.</p> <p>Children, young people, parents and carers will feel that the system works for them and shape and design the development of services.</p> <p>Children, young people and parents/ carers will provide feedback on the effectiveness of the local arrangements leading to evaluation and continuous improvement.</p> <p><b>Evidence by: Parents and Carer representation attend strategic/decision making meetings. Minutes of governance meetings.</b></p>	<p>Director of Children's and Joint Commissioning Services</p> <p>HAST CCG Director for Childrens Services</p> <p>Chair of Health and Wellbeing Board</p> <p>Chair of One Hart, One Mind, One Future (PCF)</p> <p>HeadTeacher representative</p>	<p>New governance arrangements in place:</p> <ol style="list-style-type: none"> <li>1. Separation of current Improvement Board into distinct Operational and Strategic functions.</li> <li>2. Revised Terms of Reference in place outlining lines of accountability including to Health and Wellbeing Board.</li> </ol> <p>First Progress Report presented to strategic group.</p> <p>All organisations understand the challenges and need for accelerated progress and understand their role in delivering this action plan.</p> <p>Local balanced scorecard produced which details performance measures of compliance, impact and effectiveness.</p>	<p>Complete - Minutes ToR</p> <p>Complete - Minutes, ToR</p> <p>Complete-report to HWB</p> <p>Complete-HWB mins</p> <p>Complete-BSC</p>	<p>Health and Wellbeing Board holds challenge session to review the effectiveness of new governance arrangements in ensuring all partners are fulfilling their responsibilities to deliver this improvement plan and system change.</p> <p>Second Progress Report presented to Health and Wellbeing Board, CCG Exec/Governing Body and LA committees. Any risks escalated to Audit and Governance Committee.</p> <p>Balance scorecard shows improvements in performance.</p> <p>Findings from audits of EHC Plans received by strategic group identifying areas of strength and areas for improvement and actions required to tackle these.</p>	<p>Complete – HWB report and minutes</p> <p>Complete – HWB report</p> <p>Balance score card has been produced with baseline information populated – to be updated quarterly</p> <p>Audit completed Findings being presented to Strategic group on 8/10/2019</p>	<p>One year on report presented to Health and Wellbeing Board demonstrates areas of weakness fully addressed and significantly improved performance in compliance, impact and outcomes.</p> <p>Peer review completed and findings presented to Health and Wellbeing Board confirming Improvement Plan delivered.</p> <p>Systems improvement embedded business as usual in good performing local area.</p>	<p>Report presented to HWB March 9<sup>th</sup> 2020</p> <p>Peer Review planned 31<sup>st</sup> March 2020 <b>Not completed due to COVID restrictions</b></p>

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**Weakness to be addressed:** Limited and inconsistent assurance around the timeliness, quality and effectiveness of the local area's arrangements for identifying and assessing children and young people's special educational needs and/or disabilities

**We will know this is working well when:** Local area effectively identifies and assesses children and young people with SEND through timely high quality and effective plans that lead to improved outcomes

Objective	Actions	Intended Outcomes/ Impact Measures	Responsible Person(s) / Post	Milestones					
				By 31/05/19	Status/ Evidence	By 30/09/19	Status/ Evidence	By 31/03/2020	Status/ Evidence
<p>80% of EHC Plans completed within 20 week timescale.</p> <p>For those not completed within timescales this is identified at the earliest possible opportunity and based on the best interests of the child and family.</p> <p>Performance in relation to timeliness of assessments is rigorously monitored by strategic group and reported to the HWB and action taken where the above two actions have not been met.</p>	<p>Strategic group to receive report on the baseline position and 6 weekly thereafter in relation to timeliness and compliance. These reports will also include an analysis of reasons for non-compliance and remedial action being undertaken.</p> <p>Performance report to be shared with all partners and a system action plan developed to address barriers impacting on compliance.</p> <p>A review of the SEND training offer to be completed and updated to address any workforce development needs based identified areas for improvement.</p> <p>Workforce development plan with named lead facilitators to be published on Local Offer with strategic partners identifying key staff within their organisations to attend.</p>	<p>An increase in the completion in high quality effective EHC plans within statutory timescales</p> <p>Strategic group has accurate and real time performance information to address areas for improvement within individual organisations and across system</p> <p>Well trained and skilled workforce that understands its role within the EHC Plan process and consistently provide high quality information in a timely manner that leads to good plans being developed within timescales that meet need.</p> <p><b>Evidence by: Balance scorecard including parental satisfaction</b></p>	<p>Head of SEND, HBC</p> <p>Director of Nursing North Tees and Hartlepool NHS Foundation Trust</p> <p>School reps - SENDCO from each school cluster</p> <p>Locality Manager (CAMHS) Tees Esk and Wear Valley NHS Foundation Trust</p> <p>Local area operational group</p>	<p>Baseline report and action plan on timeliness and compliance outlining performance on an individual agency basis considered by strategic group.</p> <p>SEND training offer reviewed and dates set throughout the year for the roll out of the revised workforce development plan.</p> <p>Workforce development plan identifies targeted staff who need to participate in training.</p>	<p>Complete - SEN2</p> <p>Complete – training offer, attendance lists</p> <p>Complete – registration / attendance list</p>	<p>70% of EHC plans completed within 20 week timescale</p> <p>6 weekly reports received by strategic group</p> <p>40% of identified practitioners have engaged in SEND workforce development programme.</p> <p>Workforce development offer evaluated based on feedback from participants and improvements identified.</p> <p>Parental satisfaction survey undertaken</p>	<p>75% completed within timescale SEN2</p> <p>Have achieved 75% therefore have amended action: <i>Balance scorecard populated and reported to strategic group quarterly</i></p> <p>Complete Attendance list Training evaluation forms</p> <p>Complete Attendance list Evaluation forms</p> <p>Complete Survey report</p>	<p>80% of EHC Plans completed within 20 week timescale.</p> <p>100% of identified practitioners participated in SEND workforce development programme.</p> <p>Workforce development programme continuously updated as per feedback from participants and established as within core workforce development offer to staff.</p>	<p>71.9% of plans within 20 week timescales (not reached local target however exceeded national position)</p> <p>Workforce programme in place – however some delays due to COVID restrictions. Some sessions have been moved to online as appropriate.</p>

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<p>EHC plans are of high quality and are effective leading to improved outcomes for children and young people with SEND</p>	<p>Undertake a piece of work to identify best practice regionally and nationally in EHC plans using PCF and their networks to identify excellence.</p> <p>Define and develop a quality audit tool against which to understand baseline of local performance and improvements required. Implement quarterly audit activity which will be reported within balanced scorecard to strategic group and HWB.</p> <p>Delivery of audit improvement plan to meet identified areas of concern to drive continuous improvement in the quality of EHC plans.</p>	<p>All Hartlepool EHC Plans are legally compliant.</p> <p>EHC plans are consistently of a high quality individualised and meet needs the child / young person.</p> <p>All EHC Plans are outcome focused with SMART objectives to enable impact to be measured.</p> <p>SMART objectives are based upon stretch targets for the individual child / young person.</p> <p>Language used within the plan enables clarity of understanding by child / young person / family / carer / professionals. Ensuring that specialist advice and guidance within plans are of high quality and accessible to families.</p> <p><b>Evidence by: Balance scorecard audit activity which shows improving picture.</b></p>	<p>Head of SEND, HBC</p> <p>Assistant Director, Education, HBC</p> <p>Director of Nursing North Tees and Hartlepool NHS Foundation Trust</p> <p>Locality Manager (CAMHS) Tees Esk and Wear Valley NHS Foundation Trust</p> <p>Local area operational group</p>	<p>Best practice identified and benchmark set</p> <p>Quality assurance tool devised and date set for first audit.</p> <p>Multi-agency quality assurance cycle established, date set for first audit and audit team identified including representatives from PCF.</p>	<p>Complete QA framework QA tool</p> <p>Complete Schedule of audits</p> <p>Complete Schedule of audits</p>	<p>Two audit days completed.</p> <p>Report of audit findings prepared including plan to address of areas for improvement.</p> <p>Report presented to Strategic Group and HWB</p> <p>Audit activity evidences improvement in quality of plans. Target: &gt; 60 %judged good or better</p> <p>DfE SEND Professional adviser to moderate audit findings and reports and advice local area to add value.</p> <p>Parental satisfaction survey in partnership through PCF</p>	<p>One day completed Audit report Second day 1<sup>st</sup> October 2019</p> <p>Complete Audit report</p> <p>8/10/19 Strategic Group 02/12/19 HWB board</p> <p>Amended action: <i>Audit sets baseline for plans meetings minimum standards of CoP</i> Audit report</p> <p>Complete Survey report</p>	<p>LGA Peer Review completed of the local area SEND arrangements including a case review of the timeliness, quality and effectiveness of EHC plans.</p> <p>LGA Peer Review report presented to HWB</p> <p>Audit activity evidences improvement in quality of plans. Target: &gt; 80 % judged good or better</p>	<p>31<sup>st</sup> March – 3<sup>rd</sup> April 2020 <b>Not completed due to COVID restrictions</b></p> <p>Annual report submitted to HWB March 2020 – self assessment in absence of peer review</p> <p>15% of issued plans audited carried out show that quality of plans is consistent. Overview report shows that outcomes have improved</p> <p>DfE SEND adviser dip sampled plans and showed improvement from previous audit. Changes had also been made to proforma in line with previous feedback</p>
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**Weakness to be addressed:** Weaknesses in the joint commissioning of services for children and young people who have SEND.

**We will know this is working well when:** We have a detailed and comprehensive understanding of the needs of children and young people with SEND and their families. Services are commissioned in a more integrated way and working together effectively to meet need.

Objective	Actions	Intended Outcomes/ Impact Measures	Responsible Person(s) / Post	Milestones					
				By 31/05/19	Status/ Evidence	By 31/09/19	Status/ Evidence	By 31/03/19	Status/ Evidence
To understand current and projected need of children and young people with SEND.	<p>A systematic review of all available data which will include prevalence data, analysis and forward projection of needs of the SEND population.</p> <p>Joint Strategic Needs Analysis will detail an evidence based robust needs analysis of the local area's SEND population</p> <p>A sufficiency assessment will be prepared based on refreshed JSNA. This will identify gaps in service provision and areas where services need to be developed, wherever possible, through a joint commissioning approach.</p>	<p>The JSNA and sufficiency assessment will provide local leaders with an understanding of need and the gaps in service provision to allow for the effective joint planning and commissioning of services.</p> <p>The sufficiency assessment will identify specific service areas that require review and/or re-commissioning and /or decommissioning. These areas will be addressed within the joint commissioning strategy.</p> <p><b>Evidenced by: Sufficiency assessment published JSNA refreshed Joint commissioning plan that is SMART</b></p> <p>Local area will jointly commission services for children and young people with SEND that have high levels of user satisfaction.</p> <p><b>Evidenced by: CYP families report they are satisfied with services provided.</b></p>	<p>Assistant Director, Joint Commissioning, HBC</p> <p>Head of Commissioning and Strategy, CCG</p> <p>Director of Public Health</p> <p>Schools</p> <p>Parent Carer Forum</p>	<p>Consultation to inform needs assessment and potential joint commissioning opportunities with all schools</p> <p>Accurate local Information provided, collated and analysed and shared with strategic group</p> <p>Updated qualitative JSNA completed which reflects joint priorities and targets across education, health and care.</p>	<p>Complete - Info gathered from school consultations</p> <p>Complete - Info gathered from all partners</p> <p>Complete - JSNA</p>	<p>Needs assessment, sufficiency assessment and draft joint commissioning strategy presented to Strategic Group and Health and Wellbeing Board</p>	<p>Completed needs assessment/ strategy Strategic Group 8/10/19 HWB 02/12/19</p>	<p>Year 1 priorities services jointly commissioning and commenced delivery</p> <p>First quarter contract information presented to Health and Wellbeing Board</p> <p>Health and Wellbeing board receives a progress report against the joint commissioning plan</p>	<p>Over 5s Neurodevelopmental pathway - joint arrangements in place. Pathway implemented</p> <p>Family Support Service to support neurodevelopment pathway highlighted as a priority. Jointly commissioned.</p> <p>Update presented to HWB Dec 2020</p> <p>SEMH ARPs commissioned with schools</p> <p>Next priority identified- Speech and Language review undertake and working with schools</p>
To jointly commission services that meet the needs for children and	Review TOR for joint commissioning workstream	Partners are jointly commissioning services based on needs and priorities.	Assistant Director, Joint Commissioning, HBC	Revised Terms of Reference for joint commissioning workstream in place	Complete - ToR	Draft joint commissioning strategy approved by	Completed strategy HWB 02/12/19 (due to		

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<p>young people with SEND and their families</p>	<p>Develop and implement local area Joint commissioning Strategy and three year plan which identifies agreed priorities between education, health and Local Authority.</p> <p>Develop and implement system wide reviews of service provision across health, education and social care.</p>	<p><b>Evidenced by:</b> <b>Commissioning Strategy approved and published</b> <b>Commissioning plan approved and published</b></p> <p>There is a mechanism for addressing the commissioning requirements needed to deliver the Joint Commissioning strategy and action plan. <b>Evidenced by:</b> <b>Action logs of operational group</b></p> <p>The joint commissioning strategy and plan is co-produced by Children, young people and their families <b>Evidenced by:</b> <b>Commissioning process paperwork</b> <b>PCF minutes</b> <b>Operational strategic group minutes</b></p>	<p>Head of Commissioning and Strategy, CCG</p> <p>Head of Strategic Commissioning, (Childrens), HBC</p> <p>Director of Public Health</p>	<p>Joint Commissioning workstream has met and developed timeline for development and implementation of strategy</p>	<p>Complete - timeline</p>	<p>Health and Wellbeing Board</p> <p>System wide review of service provision has commenced.</p>	<p>availability of meetings) – JSNA and strategy</p> <p>This has commenced</p>	<p>Year 1 priorities services jointly commissioning and commenced delivery</p> <p>First quarter contract information presented to Health and Wellbeing Board</p> <p>Health and Wellbeing board receives a progress report against the joint commissioning plan.</p> <p>System wide review of service provision has been completed and presented to HWB.</p> <p>All redesigned and or commissioned services for children and young people with SEND will have a positive impact on outcomes</p>	<p>Annual report presented to HWB March 9th</p>
<p>Measure the impact of the effectiveness of services in improving outcomes for children and young people with SEND.</p>	<p>Refine and conclude the implementation of our approach to evaluating and measuring outcomes.</p> <p>Strengthen the review process in measuring the impact of the plan in improving outcomes for children and young people.</p>	<p>Children experience improved outcomes from the implementation of effective EHC plans</p> <p>Local leaders know if services are making a positive impact on the lives of children, young people with SEND and their families. If children are not making expected progress local leaders understand why and work together to address system issues.</p> <p>All services for children and young people with SEND will have a positive impact on outcomes.</p> <p><b>Evidenced by:</b> <b>Balanced scorecard reports to strategic group and HWB.</b></p>	<p>Operational group</p> <p>Strategic group</p>	<p>Pilot within SLT and Education completed and outcomes framework refined from findings of pilot.</p> <p>Develop an outcomes star to show progress of children and young people with SEND.</p>	<p>Completed and shared findings with Ops group – discussion supported development of QA framework</p> <p>Complete</p>	<p>Implement outcomes star</p> <p>Commence roll out of outcomes framework starting with Physio, OT and social care with review processes in place (SLT and education to continue)</p> <p>Reporting template developed and impact and outcomes reported to strategy group</p>	<p>Not completed Remedial action – see risk register below</p>	<p>Outcomes star and outcomes framework fully implemented across all services and report of impact presented to HWB</p> <p>Outcomes framework embedded within balanced scorecard.</p>	<p>Regional outcomes framework adopted. SEND system adapted to include targets met etc...</p>

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