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|  | Image result for nottinghamshire parent carer forum |  |

**Nottinghamshire Partnership Improvement Programme - children and young people with special educational needs and disabilities (SEND)**

**Priority Action Plan**

**26 June 2023**

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| 1. **Introduction** |

The local area partnership is committed to continuous improvement to deliver the best outcomes for children and young people with SEND. This action plan reflects our key partnership priorities. Between 16 January and 3 February 2023, Ofsted and the Care Quality Commission (CQC) undertook a joint inspection of the Nottinghamshire local area. The purpose of inspection was to:

* provide an independent, external evaluation of the effectiveness of the local area partnership’s arrangements for children and young people with SEND; and
* where appropriate, recommend what the local area partnership should do to improve the arrangements.

This action plan will take forward the learning from the Ofsted/CQC inspection process and the areas for improvement identified through the inspection.

Nottinghamshire’s SEND Partnership spans a broad range of partners, services and stakeholders. This includes the Integrated Care Board, Healthcare Providers, education settings (from early years through to FE including mainstream maintained, academies, special schools and independent and Alternative Provision (AP) providers), Local Authority Services, parents and carers and our key stakeholders, children and young people. To deliver positive change, it is essential that areas for improvement, improvement activity and accountability is shared across this complex partnership.

The priorities for improvement across the partnership and wider SEND system in Nottinghamshire relate to the timeliness of identification, assessment and provision of support to effectively meet the needs of children and young people with SEND and improve their outcomes and experiences. This includes a focus on the graduated response pathway and education, health and care (EHC) planning process, including annual reviews, as well as access to health services and therapies. Key to this is strengthening our partnership arrangements to commission the most effective services for children and young people based on an accurate understanding of needs, performance and gaps in provision.

To ensure delivery of our key priorities for improvement at pace, and evidence impact on the outcomes and experiences of children, young people and families with SEND, we will strengthen our governance, oversight and accountability across the partnership. Evaluation and future planning for improvement, informed by the views of children and young people with SEND and their families will be a key feature of revised governance.

Our Partnership Improvement Programme identifies the actions the Nottinghamshire local area partnership will undertake to address our most important areas of improvement, how we will measure success and what difference this will make to Nottinghamshire’s children and young people with SEND and their parents and carers. Our plan focuses on ensuring that:

* Children and young people’s needs are identified accurately and assessed in a timely and effective way.
* Children, young people, and their families participate in decision-making about their individual plans and support.
* Children and young people receive the right help at the right time.
* Children and young people are well prepared for their next steps and achieve strong outcomes.
* Children and young people are valued, visible and included in their communities.

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| **Adrian Smith**  Chief Executive  Nottinghamshire County Council | **Amanda Sullivan**  Chief Executive  NHS Nottingham and Nottinghamshire Integrated Care Board |
| **Colin Pettigrew**  Corporate Director for Children and Families  Nottinghamshire County Council | **Rosa Waddingham**  Director of Nursing  NHS Nottingham and Nottinghamshire Integrated Care Board |

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| 1. **Strategic Vision** |

Nottinghamshire is ambitious for all children and young people to achieve their potential and have the best start in life. We recognise that children and young people have different strengths and needs, and that services and provision need to be differentiated so that all children and young people have their needs met and experience success.

We recognise that for children and young people to achieve their potential then all services need to work together with parents, carers, children, and young people and that their voices are heard at all levels.

Services and organisations should support people and families to live independently in the community, with prevention and self-management at the heart of our service delivery.

Our local area partnership vision is that:

***‘’Children and young people with Special Educational Needs and Disabilities (SEND) will be safe, healthy, and happy, and have a good quality of life and opportunities to fulfil their aspirations, develop their independence and make a positive contribution to society.’’***

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| 1. **Governance** |

Partnership assurance and scrutiny of the SEND Partnership Improvement Programme will be achieved through a newly established and independently chaired **Nottinghamshire SEND Partnership Improvement Board** (“the Board”). The Board will provide both support and challengeacross the partnership, facilitating solution-focussed practice to resolve issues and barriers that impact on the timely delivery of actions. The Board will be time-limited for the lifetime of the SEND Partnership Improvement Programme, or until it can be transitioned into business-as-usual partnership governance arrangements.

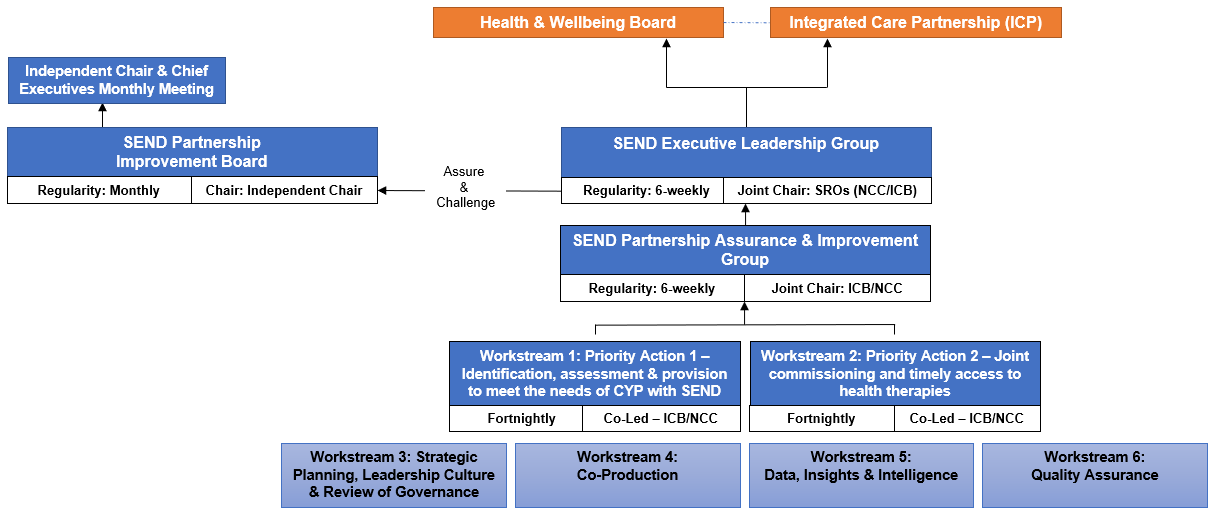
The Chief Executives of Nottinghamshire County Council (NCC) and NHS Nottingham and Nottinghamshire Integrated Care Board (ICB) will meet with the Board’s Independent Chair on a monthly basis to seek assurance on progress.

A tiered partnership structure will be established to enable joint ownership, oversight, leadership and partnership accountability for the SEND Partnership Improvement Programme, as well as the SEND strategic plan and the developing requirements of the SEND and Alternative Provision (AP) Improvement Plan (published by the Department for Education in March 2023). The partnership structure will be established on an interim basis, pending a governance review to establish longer-term governance arrangements. It is proposed that the SEND Accountability Board, in its current configuration, will discontinue, with its functions being integrated into this new, tiered partnership structure. A governance review will be undertaken as part of one of the improvement workstreams, which will consider the evolving national guidance around inclusion partnerships.

* **SEND Executive Leadership Group**: Partnership leadership and strategic oversight of the SEND Partnership Improvement Programme, SEND strategic plan and implementation of the requirements of the SEND and AP Improvement Plan ​will be achieved through a newly established SEND Executive Leadership Group. This Group will be jointly chaired by the ICB and NCC executive leads for SEND and will set strategic direction across the partnership. The Executive Leadership Group will report highlights, exceptions and escalations to the Board and into partnership/external governance forums, providing assurance of progress.
* **SEND Partnership Assurance & Improvement Group**: The SEND Partnership Assurance & Improvement Group will lead and co-ordinate the continuous improvement of Nottinghamshire’s implementation of the Children and Families Act 2014 & SEND Code of Practice (from current SEND Accountability Board), ensuring that improvements and reforms are effective and have a positive impact on outcomes for children and young people with SEND. The Group will include representatives from all SEND partners and relevant agencies that have key SEND responsibilities, providing oversight, check and challenge on delivery plans for SEND, ensuring that there is full scrutiny of work being delivered.

Co-production and multiagency working are at the heart of our improvement work. In developing our Priority Action Plan we engaged with over 250 school leaders, healthcare professionals and colleagues. Parents and carers have been engaged at all stages of development through briefings, and the Parent Carer Forum has been engaged in the development of the plan. We have also met with representative groups of children and young people through the Pioneers Youth Forum in developing the plan and have scheduled in further sessions for feedback and ongoing engagement in the implementation of the plan.

**Diagram 1 Governance Arrangements**



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| 1. **Monitoring progress** |

There will be regular monitoring of progress against milestones and success measures embedded within the governance structure.

The SEND Partnership Improvement Board will receive monthly “spotlight” updates from the Joint Chairs of the SEND Executive Leadership Group, providing assurance to members of the Board and to enable any emerging concerns to be raised.

Each of the joint Priority Leads will have overall accountability for the actions in the relevant sections of the Partnership Improvement Programme.

A performance monitoring scorecard will be in place which covers the key measures for each of the improvement priorities. Each of the sub-groups of the SEND Partnership Assurance & Improvement Group will be responsible for monitoring their own action plan and providing evidence of impact to demonstrate improvement. Actions will be signed off by the SEND Executive Leadership Group and included in the monthly updates to the Board.

The local area Partnership recognises that a culture of high support and high challenge is critical to successfully achieving the improvements required in Nottinghamshire. This high support and challenge will be provided by the SEND Partnership Improvement Board. Leaders will be expected to be held to account for the areas they lead on and to provide detailed analysis when actions are not being progressed as expected, and to take the steps necessary to improve outcomes.

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| 1. **Nottinghamshire’s Partnership Priority Action Plan** |

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| **Areas for Priority Action** | | **Responsible Body** |
| 1. | Leaders, NHS Nottingham and Nottinghamshire Integrated Care Board and education, health, and care providers should cooperate to urgently identify, assess and provide for the needs of children and young people with SEND. This includes assessment of needs, timely issuing of EHC plans and holistic oversight of these plans through annual reviews. | Nottinghamshire County Council and NHS Nottingham and Nottinghamshire Integrated Care Board |
| 2. | Leaders, including commissioners and providers, should act urgently to identify and address the delays and gaps in access to some health services, particularly speech and language therapy, neuro-developmental pathways and equipment services. They should also ensure that they use available performance data to identify where gaps exist and whether actions taken to address these are effective. | NHS Nottingham and Nottinghamshire Integrated Care Board |

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| **5a. Progress to date** |
| **Priority Action 1**   * Key themes and outcomes for the Priority Action Plan were identified at a partnership workshop held on 22 March 2023 * Interim Group Manager for ICDS has been appointed and commenced * Job Description for SEND Group Manager is in the process of being reshaped as part of improvement planning * Additional EHC Plan writer capacity recruitment is underway * Additional educational psychologist (EP) capacity is in the process of being secured * Revised draft KPI monitoring process has been developed to inform the Learning and Improvement Board and wider improvement arrangements. Current performance in respect of EHCP timeliness has improved from 3.4% within 20 weeks (at time of inspection) to 7.8% (first quarter 2023). * There has been an uplift in funding targeted to provide additional support for children with SEN in mainstream settings for 2023-2024 by 20%. * Additional funding has been secured through the County Council and Covid Outreach Management Fund to secure improvements. * Initial engagement and coproduction sessions held with education leaders, parents and carers, children and young people and wider stakeholders in developing the Priority Action Plan |
| **Priority Action 2**   * JSNA section on SEND was approved by the Nottinghamshire Health and Wellbeing Board on 8 March 2023 * Key themes for the Partnership Improvement Programme were identified at a partnership workshop held on 22 March 2023 * Partnership group of Senior Managers already established and working on a detailed plan for implementation * COMF funding approval for additional Speech, Language and Communication support to reduce waiting times, enable earlier intervention and scope longer-term approach * An outline *demand and capacity* *modelling* paper has been received from provider regarding speech and language therapy * ICB engaged with two NHS England (NHSE) led workshops regarding Balanced System approach to achieving impactful change to speech and language therapy services - supporting a whole system approach, working closely with other ICBs and exploring workforce baseline comparisons * The first meeting of Priority 2 Workstream was held with executive leads on 19 June 2023 * Funding has been identified and a recruitment process has commenced for dedicated Project Manager resource to support delivery of Priority 2 Action Plan. * Additional non-recurrent funding has been confirmed for this year to provide an additional Specialist Practitioner in the neurodevelopment service for 12 months * Additional investment provided to increase capacity of community paediatrics and support the waiting list initiatives for neurodevelopment * Funding for Consultant Psychologist posts has been agreed to support the autism assessment pathway |

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| **5b. Priority Action 1 –** Leaders, NHS Nottingham and Nottinghamshire Integrated Care Board and education, health, and care providers should cooperate to urgently identify, assess and provide for the needs of children and young people with SEND. This includes assessment of needs, timely issuing of EHC plans and holistic oversight of these plans through annual reviews.  *Partnership Leads:*  *(1) Peter McConnochie, Service Director, Education, Learning and Inclusion – Nottinghamshire County Council*  *(2) Nicola Ryan, Deputy Chief Nurse, NHS Nottingham and Nottinghamshire ICB* |
| **Outcomes we will strive for:** | |
| * **Outcome 1: Children and Young People with SEND in Nottinghamshire have their needs identified and assessed through statutory processes and in a timely way**   **Aims:**   * 1.1 - Reduce the length it takes us to complete all EHC needs assessment requests * 1.2 - Reduce the length of time it takes to issue Education, Health, and Care (EHC) Plans. * **Outcome 2: Ensure our children and young people with SEND receive robust and consistent support through their EHC Plans, which have the right input, at the right time and from the right place**   **Aims:**   * 2.1 - Develop and implement improvements to the annual review process * 2.2 - Ensure education, health and social care needs, outcomes and services are identified and provided for within EHC Plans and Annual Reviews * 2.3 - Ensure EHC Plan reviews are completed in a timely and appropriate way.      * **Outcome 3: Children and young people with additional needs, but without an EHC Plan, have their needs identified, met and monitored effectively**   **Aims:**   * 3.1 - Implement new ways to monitor support provision and capture how children and young people are progressing * 3.2 - Further develop and embed a culture of inclusion across Nottinghamshire, meetings need outside of statutory processes, where appropriate * 3.3 - Improve consistency across all education settings in identification and provision of need * 3.4 - Ensure that the graduated response pathway / approach is effective and clearly communicated and understood by parents and carers, children and young people, and all professionals (e.g., health, social care, and education) * 3.5 - Embed early intervention and multi-agency processes to prevent children and young people’s needs from escalating. | |

| **Ref** | **Aim** | **Action Ref** | **Action** | **Action** **Lead** | **Action Completion Date** | **Implementation Activity (key milestones)** | **Impact measures (KPI’s/ Targets)** | **BRAG** |
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| **Outcome 1**   * **Children and Young People with SEND in Nottinghamshire have their needs identified and assessed in a timely way through statutory processes**   **What does good look like*: EHC assessments and Plans will be issued within statutory timescales to CYP in Nottinghamshire*** | | | | | | | | |
| **1.1** | **Reduce the length of time it takes to complete Educational, Health and Care (EHC) assessment requests through statutory processes.** | 1.1.1 | Increase staffing capacity to increase the volume of EHC plan assessments completed monthly. | Charles Savage, Principal Educational Psychologist (NCC) | October 2023 | Agree specification for additional Education Psychology (EP) capacity through agency (May 2023).  Agreement for increase in EP Establishment (July 2023).  EP establishment increased by 9 FTE (Sept 2025), 3 per year. | Reduction in backlog of EHC plan assessment application (323 assessments unallocated to EPS as of 31 May 2023)  Increase in number of EP assessments completed per month (90 per month by October 2023).  Reduction in waiting times for EP assessments with a maximum wait established by Dec 2023.  Parents and carers report their EHC assessments are provided in a timely way. |  |
| 1.1.2 | Improve the decision-making processes which support EHC assessments through increased involvement of parents / carers and professionals. | Lynda Poole, Group Manager ICDS (NCC) | July 2024 | Revised protocol for Stage 1 decision making approved by stakeholders including parents and carers and implemented (Sep 2023).  Structured conversations with parents/carers and education settings introduced to inform decision making at stage one (Sep 2023) | Parents / carers report their views are considered when deciding if an assessment will take place.  50% of (Stage 1) decision making will incorporate structured conversations (Dec 2023).  95% of (Stage 1) decision making will incorporate structured conversations (Jul 2024). |  |
| 1.1.3 | Complete a comprehensive review of our operating model, processes, and the systems we use. | Lynda Poole, Interim Group Manager ICDS (NCC)  Council for Disabled Children | April 2024 | “Discovery and Design” work completed (Dec 2023).  Implement recommendations of review and revised operating model introduced (Apr 2024). | Reduction in complaints.  Improved feedback from children, young people, parents, and carers about the support and advice being provided more easily and quickly. |  |
| **1.2** | **Reduce the length of time it takes to issue Education, Health, and Care (EHC) Plans** | 1.2.1 | Increase staffing capacity to reduce the length of time taken to draft (and where appropriate issue) an Education, Health, and Care (EHC) Plan | Lynda Poole, Interim Group Manager ICDS (NCC) | October 2023 | Additional 6 EHCP coordinators recruited (July 2023).  Additional 1 Service Organiser recruited (July 2023). | Parents and carers lived experience of the EHC process is improved.    15% of new EHCPs issued in 2023 on time by Sep 2023.  40% of new EHCPs issued in 2024 on time by Jul 2024. |  |
| 1.2.2 | Learn from other local areas about their approach to improving and sustaining improved timescales for EHC Plans. | Chris Jones, SEND Strategic Lead (NCC) | December 2023 | Meetings held with other local areas to review and identify strategies to increase and sustain EHCPs timescales (July 2023)  Nottinghamshire will implement recognised ‘best practice’ from other areas quickly and to good effect. (Dec 2023) | Improved timescales for the issue of new EHCPs. |  |
| **Outcome 2**   * **Ensure our children and young people with SEND receive robust and consistent support through their EHC Plans, which have the right input, at the right time and from the right place.**   **What does good look like: *Annual reviews will take place on time and EHCPs updated where required on time. Process will ensure that health and social care outcomes are reviewed, and provision outlined in EHCPs is being delivered. CYP and families report a more effective review process centred on the needs of the CYP.*** | | | | | | | | |
| **2.1** | **Develop and implement improvements to the Annual Review process** | 2.1.1 | Complete a comprehensive review of our operating model with regards to annual reviews. | Lynda Poole, Group Manager ICDS (NCC) | May 2024 | “Discovery and Design” work completed (Oct 2023).  Recommendations for changes to be coproduced with educational settings, health and care, parents, and carers, CYP (Feb 2024).    Robust revised operating model introduced which includes the monitoring of the delivery of provision detailed in the EHCP (May 2024). | Reduction in complaints relating to annual review timescales.  Feedback from children, young people, parents, and carers about their experience and value of the annual review process.  80% of Annual Reviews take place within 12 months of previous MAC (Maintain, Amend or Cease) decision date or date of issue by July 2024.  85% of amended EHCPs are issued within 12 weeks of the Annual Review meeting taking place by July 2024. |  |
| **2.2** | **Ensure education, health and social care needs, outcome and services are identified and provided for within EHC Plans and Annual Reviews** | **2.2.1** | Audit and review partner contributions to EHCPs and annual reviews to identify and plan for improvements. | Lynda Poole, Group Manager ICDS (NCC) | January 2024 | Complete audit (Nov 23)  Develop action plan for improvement (Jan 2024)  Implement action plan (Aug 2024) | Improved contributions to annual reviews as identified through EHCP Quality Control and Assurance activities (percentage judged to be good or better).  Families and young people feel that the annual review process reflects their needs and that they are listened to. |  |
| **2.3** | **Ensure EHC Plan reviews are completed in a timely and appropriate way** | **2.3.1** | Increase staffing capacity to improve EHCP review performance. | Lynda Poole, Group Manager ICDS (NCC) | October 2023 | Additional staffing recruited (Jul 2023) | Families tell us that their annual review process is valuable and on time.  80% of Annual Reviews take place within 12 months of previous MAC (Maintain, Amend or Cease) decision date or date of issue by July 2024.  85% of amended EHCPs are issued within 12 weeks of the Annual Review meeting taking place by July 2024. |  |
| **2.3.2** | Undertake a review of the EHC hub and how it is utilised for annual reviews. | Rob Briggs, Service Manager, ICDS EHC Assessment Team (pre-16). (NCC) | April 2024 | Review completed (Oct 2023).  Multi-agency action plan developed (Nov 2023).  Action plan improvements implemented (Apr 2024). | SENCOS, parents, carers and professionals report an effective annual review process.  Reduction in complaints.  Delivery within statutory timescales. |  |
| **Outcome 3**   * **Children and young people with additional needs, but without an EHC Plan, have their needs identified, met, and monitored effectively**   **What does good look like: *The needs of CYP in Nottinghamshire will be identified as early as possible and monitored effectively (including their holistic needs). Consistent early support through the graduated pathway will be developed and understood by the workforce resulting in greater inclusive practice across the local area. Parents and carers will tell us this approach ensures that their CYP’s are being identified and met earlier.*** | | | | | | | | |
| **3.1** | **Implement new ways to monitor support and provision and capture how children and young people are progressing** | 3.1.1 | Further develop the existing funding processes to identify a mechanism to quality assure the effectiveness of provision being made to improve children’s educational outcomes. | Simon Ray, Team Manager, Schools, and Families Specialist Services (NCC) | April 2024 | SEND funding tracking tool designed and implemented at a Family of Schools level (Dec 2023).  Effective monitoring arrangements are in place in educational settings (Apr 2024).  Mechanisms to share relevant information with key stakeholders; including health and social care established (Apr 2024). | Information gathered through monitoring arrangements, are shared by local area partnership to inform decision making. |  |
| **3.2** | **Further develop and embed a culture of inclusion across Nottinghamshire, meeting need outside of statutory processes, where appropriate** | **3.2.1** | Undertake a multi-agency deep dive to scope detailed action plan to improve inclusive practice and oversight of inclusion within settings. | Charles Savage, Principal Educational Psychologist (NCC) | September 2024 | Deep Dive activity planned with key stakeholders (Jan 2024)  Deep Dive activity undertaken (May 2024)  Action plan developed, based upon findings of the Deep Dive activity (Sep 2024). | Stakeholders will have contributed to the action plan for embedding inclusion across Nottinghamshire. |  |
| **3.3** | **Improve consistency across all education settings in identification and provision of need** | **3.3.1** | Review application of graduated response across the local area. | Charles Savage, Principal Educational Psychologist (NCC) | March 2024  March 2024 | Provide in service training for school SENCOs on the graduated response (Sep 2023)  Review application of the graduated response (Jan 2024).  Revised training offer to SENCOs developed (Mar 2024). | Graduated response will be applied consistently and evidenced through the journey of a child or young person via a variety of methods |  |
| **3.3.2** | Review training offer for SENCOs and address any gaps to improve workforce development. |
| **3.3.3** | Identify the opportunities to strengthen the Family and District SENCO model. | Charles Savage, Principal Educational Psychologist (NCC) | July 2024 | Family and District SENCO model reviewed and strengthened to ensure consistency across schools in different districts. | Increased consistency evident through locality SEND and inclusion data. |  |
| **3.4** | **Ensure that the graduated response pathway/ approach is effective and clearly communicated and understood by; parents and carers, children and young people and all professionals (****e.g. health, social care and education)** | **3.4.1** | Undertake a multi-agency deep dive review of the effectiveness and understanding of the graduated approach (see 3.2.1) to inform improvements. | Charles Savage, Principal Educational Psychologist (NCC) | April 2025 | Develop appropriate materials to explain the graduated response pathway for key stakeholders, including parents /carers /CYP. (Dec 2024).  To be published on SEND local offer (Dec 2024).  Communications strategy developed and rolled out (April 2025). | Reduced complaints, leading to reduced mediation and tribunal activity.  Improved partner engagement and increased participation in ‘graduated response pathway’  Parents and Carers will feel supported, listened to, and have a clear understanding of what to expect for their child/ young person as they travel along the ‘graduated response pathway’  Partners will have an improved understanding of the ‘graduated response’ approach and how they contribute to its development |  |
| **3.5** | **Embed early intervention and multi-agency processes to prevent children and young people’s needs from escalating** | **3.5.1** | Audit existing locality processes to provide additional support and resource to meet need and develop further to provide multiagency forums. | Charles Savage, Principal Educational Psychologist (NCC) | July 2024 | Audit undertaken (Apr/May 2024)  Audit findings and recommendations implemented (Jul 2024) | Children and young people access the right support at the right time  Partners will be working together well to identify early opportunities to support children and young people. |  |

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| **Delivery Partners** |
| * Parent, carers, and children and young people * Health services * Education settings * Nottinghamshire Parent Carers forum * Local authority services including Children’s and Adult Social Care |

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| **RAG status** | |
| **Blue** | Action complete, impact measures achieved and approval to close obtained from the SEND Improvement Board |
| **Green** | Action on track to achieve the impact measures and within the timelines set |
| **Amber** | Action at risk of not achieving the impact measures and/or completion within the timelines set. |
| **Red** | Action at significant risk of not achieving the impact measures and completion within the timelines set. |
| **Grey** | Action not due to start |

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| **5c. Priority Action 2 –** Leaders, including commissioners and providers, should act urgently to identify and address the delays and gaps in access to some health services, particularly speech and language therapy, neuro-developmental pathways and equipment services. They should also ensure that they use available performance data to identify where gaps exist and whether actions taken to address these are effective.  *Partnership Leads:*   1. *Karon Foulkes, Head of Maternity and Children’s Commissioning and Transformation, NHS Nottingham and Nottinghamshire ICB* 2. *Laurence Jones, Service Director, Commissioning and Resources – Nottinghamshire County Council* |

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| **Outcomes we will strive for:** |
| * **Outcome 1: The needs of children and families with SEND are clearly understood so that immediate and** **long term changes to health service provision can be made through effective joint commissioning**   **Aims:**   * + 1.1 - To strengthen joint commissioning building on data, intelligence and insight to support SEND. * **Outcome 2: Children and Young People receive a timely assessment and treatment offer by the Neurodevelopmental Behaviour Service (NBS)**   **Aims:**   * + 2.1 - Deliver improvements to waiting times for assessment to NBS and subsequent paediatric diagnostic pathways * **Outcome 3: For children, young people and families with SEND experience services that are easy to navigate, free from duplication and are adaptive to their needs**   **Aims:**   * + 3.1 - To reduce waiting times for assessment by therapy services   + 3.2 - To promote seamless provision of requirements, remove gaps and to reduce duplication of assessments for CYP and families |

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| **Ref** | **Aim** | **Action Ref** | **Action** | **Action** **Lead** | **Action Completion Date** | **Implementation Activity (key milestones)** | **Impact measures (KPIs / Targets)** | **Progress BRAG** |
| **Outcome 1: The needs of children and families with SEND are clearly understood so that immediate and** **long term changes to health service provision can be made through effective joint commissioning**    **What does good look like: *Data is shared and analysed across the partnership as standard practice, to pre-empt concerns such as lengthening wait times and respond to changes in needs, as joint commissioners.*** | | | | | | | | |
| **1.1** | **To strengthen joint commissioning building on data, intelligence and insight to support SEND**. | 1.1.1 | Establish shared understanding of data, triangulate with experience of families and children and young people | Karon Foulkes, Head of Maternity, Children’s Commissioning  and Transformation (ICB)    and    Laurence Jones, Service Director, Commissioning and Resources  Children and Family Services (NCC) | October 2023 | Identify partners involved in relevant commissioning process within the Integrated Care System (July 2023)  Define the objectives, determine specific goals outcomes to be achieved through collaboration (July 2023)  Identify, validate and understand baseline data to understand gaps to support growth in information intelligence (September 2023)  Gathering intelligence from providers and working with child, young peoples, parents and carers with a view to triangulating the data across the system (October 2023) | Increased consistency, and transparency of meaningful data evidenced through reporting to the Board  An increase in the number of services that are joint commissioned |  |
| 1.1.2 | To instigate a governance structure for performance, reporting measures and metrics cycles to generate key lines of enquiry regarding further innovation and improvement | October 2023 | Governance pathway for SEND data established across the ICS (July 2023)  Reporting format and data to include agreed (September 2023)  First dataset or scorecard reported (October 2023) |
| 1.1.3 | Establish new areas and approaches to joint commissioning | March 2024 | Current joint and integrated commissioning opportunities mapped in detail as baseline (July 2023)  Opportunities for new areas and or approaches to commissioning agreed (March 2024) |
| **Outcome 2: Children and Young People receive a timely assessment and treatment offer by the Neurodevelopmental Behaviour Service (NBS)**    **What does good look like: *Families, and Children and Young People who have neurodevelopmental needs, are able to access advice and information at all points of the assessment process and are kept informed as to what to expect with the next stage including treatment where relevant*** | | | | | | | | |
| **2.1** | Deliver improvements to waiting times for assessment to NBS and subsequent paediatric diagnostic pathways | 2.1.1 | Undertake a review of the neurodevelopmental pathway in conjunction with children, young people and families, in order to identify and implement improvements | Charlotte Reading, Head of Learning Disabilities and Autism Transformation and Commissioning (ICB)    Denis McCarthy, Children’s Service Manager (NCC)    Karon Foulkes, Head of Maternity, Children’s Commissioning and Transformation (ICB) | March 2024 | Review of all services as part of the neurodevelopmental pathway including their interdependencies (March 2024)  Understand capacity and demand at all parts of the pathway through effective data capture (October 2023)    Neurodevelopmental website to be coproduced with children, young people and families (March 2024)  Monitor the impact of additional capacity within community paediatric services (December 2023) | Reduction in waiting times from referral to diagnosis by March 2024  Reduction in Waiting times for NBS by March 2024  Reduction in waiting times for community paediatric services by March 2024 |  |
| 2.1.2 | Utilise non-recurrent funding to recruit additional staff to increase assessment capacity and reduce the waiting list and times | July 2023 | Recruit 4 posts to increase capacity and reduce the waiting list and times. (July 2023)  Recruit temporary agency business support to assist with the processing of referrals to reduce the backlog and waiting times. (July 2023)  Recruit an additional Specialist Practitioner to increase assessment capacity and reduce the waiting list and times (July 2023) |
| **Outcome 3: For children, young people and families with SEND experience services that are easy to navigate, free from duplication and are adaptive to their needs**  **What does good look like: *Joint education and health assessment of therapeutic or equipment needs are carried out as standard. Treatment offered is personalised to the child or young person. The family understand how to access advice and information at any point in the process*** | | | | | | | | |
| **3.1** | **To reduce waiting times for assessment by therapy services** | 3.1.1 | Analyse and understand current position of waiting times regarding root causes | Karon Foulkes Head of Maternity, Children’s Commissioning and Transformation (ICB)    Laurence Jones, Service Director, Commissioning and Resources (NCC) | August 2023 | Increase capacity of existing Speech and Language team with temporary staff in post (August 2023)  Demand and capacity modelling from providers requested and analysed (August 2023) | Reduction in waiting times health services and therapies by March 2024 |  |
| 3.1.2 | Identify ways to increase effectiveness and efficiency through co-production with families, children and young people | September 2023 |
| 3.1.3 | Agree baseline, trajectory and recovery plans and monitoring performance measures | September 2023 |
| 3.1.4 | Review workforce modelling and alternative ways for delivery of service | October 2023 |
| 3.1.5 | Produce longer term improvement delivery plans for health services and therapies (including through transition to adulthood) | December 2023 |
| **3.2** | **To promote seamless provision of requirements, remove gaps and to reduce duplication of assessments for CYP and families** | 3.2.1 | Scope out existing provision of services with commissioners including education settings, providers, carers and families | Karon Foulkes, Head of Maternity, Children’s Commissioning and Transformation (ICB)    Laurence Jones, Service Director, Commissioning and Resources  Children and Family Services (NCC) | November 2024 | Create vision for end state with stakeholders including CYP, families, education settings, commissioners and providers    Options appraisal undertaken and presented through governance routes | Reduced complaints  Quality improvement indicators  Financial and operational efficiencies  Reduced Extended Appeals/Tribunals  Seamless, transparent accessible and equitable access to services in place  Sensory needs of children and young people are being met, where applicable |  |
| 3.2.2 | Review existing contracting and funding arrangements working towards delivery of collaborative provision of service | May 2024 |
| 3.2.3 | Identify gaps in relation to provision of therapy services and equipment, working closely with commissioners, education settings, providers, parents and carers | Karon Foulkes, Head of Maternity, Children’s Commissioning and Transformation (ICB)    Laurence Jones, Service Director, Commissioning and Resources  Children and Family Services (NCC) | December 2023 | Gap analysis to be completed as part of scoping existing provision |  |

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| **Delivery Partners** |
| * Parent, carers, and children and young people * Health commissioners and providers * Local Authority commissioners and providers * Education settings * Nottinghamshire Parent Carers forum |

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| **RAG status** | |
| **Blue** | Action complete, impact measures achieved and approval to close obtained from the SEND Improvement Board |
| **Green** | Action on track to achieve the impact measures and within the timelines set |
| **Amber** | Action at risk of not achieving the impact measures and/or completion within the timelines set. |
| **Red** | Action at significant risk of not achieving the impact measures and completion within the timelines set. |
| **Grey** | Action not due to start |
| 1. **Glossary** | |

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| **ASCH** Adult Social Care and Health  **C&YP** Children and Young People  **CAMHS** Child and Adolescent Mental Health Services  **ICB** Integrated Care Board  **CEO** Chief Executive Officer  **CoP** SEND Code of Practice  **CPD** Continuing Professional Development  **CQC** Care Quality Commission CSC Children’s Social Care  **DCO** Designated Clinical Offer  **DCS** Director of Children’s Services  **EHC** Education, Health and Care  **EHCNA** Education, Health Care Needs Assessment  **EHCP** Education, Health and Care Plan | **Health** relates to Primary care, Secondary Care and Community Care Providers  **JSNA** Joint Strategic Needs Analysis  **LA** Local Authority  **LO** Local Offer  **Ofsted** Office for Standards in Education  **PEP** Personal Education Plan  **PfA** Preparation for Adulthood  **QA** Quality Assurance  **SENCo** Special Educational Needs Coordinator  **SEND** Special Educational Needs and/or Disabilities  **SMART** Specific, measurable, achievable, realistic, timely  **ToR** Terms of Reference |