

# Area SEND inspection of West Northamptonshire Local Area Partnership

Inspection dates: 18 to 22 March 2024

Dates of previous inspection: Not previously inspected

## Inspection outcome

There are widespread and/or systemic failings leading to significant concerns about the experiences and outcomes of children and young people with special educational needs and/or disabilities (SEND), which the local area partnership must address urgently.

A monitoring inspection will be carried out within approximately 18 months. The next full reinspection will be within approximately three years.

As a result of this inspection, His Majesty's Chief Inspector requires the local area partnership to prepare and submit a priority action plan (area SEND) to address the identified areas for priority action.

## Information about the local area partnership

West Northamptonshire Council, NHS Northamptonshire Integrated Care Board and Northamptonshire Children's Trust are responsible for planning and commissioning services to meet the needs of children and young people with SEND in West Northamptonshire, as part of the Local Area Partnership.

West Northamptonshire Council was created in April 2021. It is a relatively new local authority, which has experienced some changes to its leadership. These include, in July 2023, the Deputy Director for Children's Services acting as the Director for Children's Services, the appointment of an Assistant Director for Education in September 2022, and members of the SEND improvement team who were appointed to the local authority between March and June 2023.

The commissioning of health services changed across England in 2022. On 1 July 2022, the responsibility for health services in West Northamptonshire passed from the NHS Northamptonshire Clinical Commissioning Group to NHS Northamptonshire Integrated Care Board.

The West Northamptonshire local area partnership commissions a range of alternative provision (AP). AP provides education for children or young people, including those who cannot attend schools due to social, emotional and mental health and medical needs, or for those who have been or are at risk of being permanently excluded from school.

## **What is it like to be a child or young person with SEND in this area?**

Children and young people with SEND have not been prioritised for education, health and social care provision. Many children and young people with SEND wait too long for their needs to be assessed and for suitable provision to be put in place to meet their needs. If children's needs are recognised early on, dedicated professionals collaborate effectively to provide the right support. However, such examples account for only a few children and young people with SEND.

Children and young people are waiting too long for health services such as speech and language therapy, mental health services and neurodevelopmental assessment. Area leaders have not acted effectively to ensure that appropriate support is available to mitigate the negative impact of these waiting times. This impacts significantly on the outcomes and experiences of children and young people with SEND and limits their chance of success. Some children and young people's difficulties become greater while they wait to get the right support. This can lead to families finding themselves in crisis. Area leaders are aware of these issues and have committed themselves to addressing these concerns.

Some parents and carers and practitioners feel that it is those who 'shout the loudest' that get the help they need. This is because area leaders are not working together closely enough to ensure that children and young people with the most need are prioritised, particularly those with needs across different services. This increases stress and anxiety for families because they feel they must battle to get the right support, and it has led to increasing complaints from parents.

The current needs of the majority of children and young people are not reflected in their education, health and care (EHC) plans. EHC plans are not completed in a timely manner. The accuracy of the plans is poor. Some plans are finalised without contributions from health or social care professionals. In some cases, this has led to inaccurate identification of children's needs and inappropriate support being allocated to them. Practitioners and parents are frustrated about the quality of EHC plans. Area leaders have recognised the need to improve these plans but are only just starting to address these issues. The actions taken are yet to have an impact.

Children and young people with SEND are not consistently supported early enough to ensure that they are helped to transition to a suitable educational provision or service. Some parents say that these times are like 'approaching a cliff edge', with no guarantees of ongoing support, services or care. Some children leaving nursery do not have their needs identified in time. This can lead to them being placed in schools where staff have little information about how best to support them. Too many young people expressed their frustration that it took until nearly the end of their time in education before professionals realised that their needs remained unmet.

Some children and young people with SEND who are placed in AP have not had their needs identified or assessed promptly enough. As a result, their needs have not been

met at an early-enough stage. Inspectors found evidence that earlier identification could have prevented the need for them to receive their education other than at school.

Children and young people with SEND who access AP or a specialist school setting often receive the right help and succeed in their placement. Leaders are aware that there are not enough places available to meet the growing demand for these settings. They have started to address this issue by opening more specialist resourced bases in mainstream schools. They have also increased capacity in specialist settings. However, the current shortage of places means that some children and young people are left without any suitable provision or must access provision a long distance from where they live.

Area leaders are aware that the level of support children and young people with SEND receive often depends on how well individual schools implement the local area's 'SEND ranges' guidance. Too many parents say that schools are unable to meet their children's needs. A significant number of children and young people with SEND have been suspended or excluded from school, particularly at primary age. Some parents are concerned that these exclusions are the result of particular needs not being identified early enough or not being supported effectively once identified.

Where children and young people with SEND receive specialist social care support from the Children's Disability Team, they receive timely assessment and appropriate advice to meet their needs. Through the early help offer, children and young people with SEND can access services which support their inclusion in their communities.

Parent voices, as well as the views of children and young people with SEND, are now heard much more effectively. The 'West Northants Voices in Partnership' group, which represent parents of children with SEND, have a much more prominent and strategic place within the local partnership than that seen previously. Communication between the local partnership leaders and families has improved and trust is slowly being rebuilt.

## **What is the area partnership doing that is effective?**

- Area leaders are clearly ambitious for children and young people with SEND. They recognise where provision has not been good enough in the past and are keen to rectify this. They have put together an ambitious SEND and AP strategy that has been co-produced with children and young people and parents. However, it is too soon to see the impact of this strategy.
- Professionals from across the partnership are engaging positively in the working groups that have been established to implement the area's SEND and AP strategy.
- Children and young people with SEND say that they now contribute more to help improve services for their peers. Young people have effectively co-produced the SEND and AP strategy as well as contributing to high-quality joint activities with professionals from individual services.
- Children and young people with SEND benefit from early help services that provide support in their home and in the community. The early help assessment and team around the family model are well established. Social care, education and health

professionals coordinate assessments and produce clear plans for the child or young person.

- Some children and young people with SEND are valued, visible and included in their communities, through activities such as power chair football and tabletop cricket clubs. Some children and young people said that they benefit from a good range of activities in their community to develop their confidence, life skills and independence. Such activities include cinema times with quiet screenings and inclusive gyms, sports and voluntary groups.
- Professionals across the partnership work closely together to ensure that there is a coordinated approach to the support they provide for children and young people who have particularly complex needs.
- A specialist school nursing team provides effective support and care for children and young people with SEND who are in a special school setting. This team also provides high-quality training for other professionals.
- Children and young people with SEND benefit from a strong emotional health and well-being offer. This includes the work that is done by mental health support teams, as well as The REACH collaborative, which works seamlessly with statutory services to provide support and interventions through several initiatives.
- The team that works with children and young people with sensory impairment offers a strong, needs-led service. As a result, children and young people with a visual or hearing impairment are well supported. They are well prepared for their next steps and provided with bespoke support to increase their independence.
- The local partnership commissioned a nationally recognised programme to analyse speech, language and communication needs. This has provided useful recommendations for improvement and future transformation.

## **What does the area partnership need to do better?**

- There is not a shared partnership joint commissioning agreement in place. The lack of a partnership joint strategic needs assessment for SEND and AP means that leaders do not have the full picture to be able to assess all of the needs and challenges in the area. As a result, not all services and systems are designed around the needs of children and young people with SEND. They are not informed by the partners' detailed evidence of what works in regard to achieving good outcomes. The lack of joint commissioning arrangements means that partners are not able to make the best use of all the resources available to improve outcomes for children and young people with SEND in the most efficient, effective, equitable and sustainable way.
- Leaders are aware of the need to improve the joint approach to speech, communication and language needs and are embedding the recommendations from phase one of the improvement model. However, it is too early for children and young people with SEND to benefit from this model at the time of the inspection.
- Some of the health leaders' actions in identifying, and resolving, areas for improvement are completed in isolation. As a result, it is unclear how health leaders'

work in this respect contributes to a joint strategic approach to address area-wide issues or to contribute towards the partnership SEND and AP strategy.

- Local area leaders have not addressed wait times in services for mental health, speech and language therapy or all aspects of the neurodevelopmental pathway. Children and young people with SEND have been negatively affected by the lack of sufficient help provided across most services while they wait for an assessment or support. Some children's needs have escalated while they have waited a considerable amount of time for help.
- Local area leaders have not ensured that EHC plans are accurate and contain information from all partners. This has led to plans being issued without key information from health and social care being included. As a result, children and young people's needs have not been fully identified and provision has been put in place based on inaccurate assessments. Health professionals are not provided with completed EHC plans to use as a working document. This means that EHC plans are not being used to plan and deliver healthcare effectively.
- Local area leaders have not ensured that there are equitable contributions from all partners involved at EHC plan annual reviews. There is currently no accountability for partners who fail to provide information that would make sure that reviews of plans contain information from all agencies involved with the family. As a result, EHC plans are not always updated accurately to reflect the child or young person's current needs.
- Local authority leaders have started working more closely with AP leaders. However, they have not yet included all local area partners in developing a strategic partnership approach to commissioning AP. There is still uncertainty as to how AP should be used to ensure that these placements adequately meet the needs of children and young people with SEND.
- Local area leaders have identified preparation for adulthood as a weakness across the partnership and have developed a strategy to address this. However, at present, support and help for key transitions often rely on the capacity of individual provisions. The lack of timely needs assessments and inaccurate EHC plans do not support children and young people with SEND effectively in order to achieve strong outcomes or access appropriate placements. Information about young people's needs is not routinely passed to their next setting. This results in education professionals having to start new assessments to understand what support may be needed. Young people transitioning to adulthood do not always receive timely assessments under the Care Act. This impacts on young adults receiving the right help and support when they reach 18.



## Areas for priority action

Responsible body	Areas for priority action
West Northamptonshire Council, NHS Northamptonshire Integrated Care Board and Northamptonshire Children's Trust	Area leaders need to ensure that there is a partnership commissioning agreement in place based on a thorough joint strategic needs assessment.
West Northamptonshire Council, NHS Northamptonshire Integrated Care Board and Northamptonshire Children's Trust	Area leaders need urgently to address the length of time families have to wait for EHC needs assessments. Leaders should ensure that plans are completed in a timely manner so that children and young people start to receive the support they need at the earliest opportunity.
West Northamptonshire Council, NHS Northamptonshire Integrated Care Board and Northamptonshire Children's Trust	Area leaders must ensure that when they are issued, EHC plans are accurate and contain key information from all partners. They must check that children and young people's needs have been fully identified in these plans to enable appropriate provision to be put in place based on accurate assessments of needs. Area leaders need to assure themselves that contributions from all partners at annual reviews ensure that EHC plans remain accurate and reflect children and young people's current needs.
NHS Northamptonshire Integrated Care Board	Health leaders must address the current waiting times for speech and language therapy, mental health services and neurodevelopmental assessment. Children and young people's needs should be identified at the earliest opportunity for plans to be developed to support them. Health leaders must ensure that there is sufficient support for families across all services while they wait for an assessment or support.
West Northamptonshire Council and NHS Northamptonshire Integrated Care Board	Local authority and health leaders must improve the joint approach to speech, communication and language needs. They should work swiftly to embed the recommendations from phase one of the improvement model so that children and young people with SEND benefit from this approach.

## Areas for improvement

Areas for improvement
Area leaders need to accelerate their plans to improve transitions and support more effective preparation for adulthood. They need to ensure that all settings understand the statutory guidance for preparation for adulthood outlined in the SEND code of practice. There needs to be more timely and effective communication so that

transitions to different settings and services are managed in a way that reduces the stress and anxiety for families.
Area leaders need a partnership approach to working with mainstream schools to ensure that rates of suspensions and exclusion decrease for children and young people with SEND.
Local authority leaders need to provide clarity on exactly how AP will be used as part of the partnership's SEND and AP strategy. This will then enable strategic commissioning of AP to ensure that these placements adequately meet the needs of children and young people with SEND.
Local authority leaders need to continue their work with mainstream schools and partner agencies so that the 'SEND ranges' are used to ensure that all children and young people with SEND benefit from a consistently applied graduated response.
Health leaders need to ensure that improvements made to services will be fully effective in addressing area-wide issues and contribute towards key priorities in the partnership's SEND and AP strategy.



## Local area partnership details

Local authority	Integrated care board
West Northamptonshire	NHS Northamptonshire Integrated Care Board
Rebecca Wilshire, Director of Children's Services	Toby Sanders, Chief Executive Officer
<a href="http://www.westnorthants.gov.uk">www.westnorthants.gov.uk</a>	<a href="http://www.icnorthamptonshire.org.uk">www.icnorthamptonshire.org.uk</a>
One Angel Square, Angel Street, Northampton NN1 1ED	Haylock House, Kettering Parkway, Venture Park, Kettering, Northamptonshire NN15 6EY

## Information about this inspection

This inspection was carried out at the request of the Secretary of State for Education under section 20(1)(a) of the Children Act 2004.

The inspection was led by one of His Majesty's Inspectors (HMI) from Ofsted, with a team of inspectors including: two HMI from education and social care; a lead Children's Services Inspector from the Care Quality Commission (CQC); and another Children's Services Inspector from the CQC.

## Inspection team

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