



Wolverhampton SEND and Inclusion SEF 2024



Wolverhampton
SEND and Inclusion
Partnership Board

Common Abbreviations Used in this Document

ADHD Attention Deficit Hyperactivity Disorder

AP Alternative Provision

ASC Autism Spectrum Condition

BCHFT Black Country Healthcare Foundation Trust

CAMHS Children and Adolescent Mental Health Services

CDC Council for Disabled Children

CYPiC Children and Young People in Care

CIN Children in Need

CNS Clinical Nurse Specialist

CWC City of Wolverhampton Council

CYP Children and Young People

DCO Designated Clinical Officer

DCYPT Disabled Children and Young Person's Team

DfE Department for Education

DMO Designated Medical Officer

DoLS Deprivation of Liberty Safeguards

EHCNA Education, Health and Care Needs Assessment

EHCP Education, Health and Care Plan

EP Educational Psychology

ESBNA Emotionally Based School Non-Attendance

FFCP Families First for Children Pathfinder

HAF Holiday and Activities Food Programme

ICB Integrated Care Board

JSNA Joint Strategic Needs Assessment

LD Learning Disabilities

LDA Learning Disabilities and Autism

MASH Multi-Agency Safeguarding Hub

MDT Multi-agency Disciplinary Team

MH Mental Health

NHS National Health Service

OT Occupational Therapy

PCF Parent Carer Forum

PfA	Preparing for Adulthood
PHB	Personal Health Budget
PRU	Pupil Referral Unit
PT	Physiotherapy
RWT	Royal Wolverhampton Trust
QA	Quality Assurance
SAO	School Attendance Order
SEN	Special Educational Needs
SENCO	Special Educational Needs Co-ordinator
SEND	Special Educational Needs and/or Disabilities
SENSTART	Special Educational Needs Statutory Assessment and Review Team
SLIP	Sector Led Improvement Programme
SLCN	Speech, Language and Communication Needs
SLT	Speech and Language Therapy
SNEYS	Special Needs Early Years' Service

SPA	Single Point of Access
TCP	Transforming Care Partnership
V4P	Voice4Parents
WIIASS	Wolverhampton Information, Advice and Support Services
WISE	Wolverhampton Inclusive Schools for Everyone

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Executive Summary

Wolverhampton's vision is to be a highly inclusive City where we work with children, young people with **SEND (Special Educational Needs and Disabilities)** and their families so that they can achieve their full potential. We recognise that all children with SEND are individuals with aspirations to lead their own lives. While life for a child or young person with SEND and their family is anything but ordinary, the ordinary life principles are what extraordinary achievements are built on.

As a partnership, the **Local Authority (LA); Integrated Care Board (ICB); strategic leads for parent carer's voice (Voice4Parents); young people's voice (HY5!)** and our wider key stakeholders on the **SEND & Inclusion Partnership Board**, share a common firm belief that all children and young people (CYP) should have access to good local provision including health and care, to enable every opportunity to thrive, whether this be in education, employment, independent living or participation in their community.

The Local Area has a shared view of our effectiveness in identifying the needs of children and young people, in meeting those needs and in securing good outcomes for children and young people. In Wolverhampton there are many strengths in the system, but we recognise there is still work to do to achieve our goals. We are realistic in our achievements but recognise that the 'lived experiences' of children, young people and their families do not always reflect the improvements that have been made however

there is a strong commitment from all partners to give priority to improvements across all areas of SEND and inclusion so that we enable a culture of belonging and support, ownership, continuous improvement and, co-production of policy, strategy and services.

We are committed to working together to provide continuously improve the quality of our work to secure better outcomes for children with SEND through a clear **SEND & Inclusion strategy**, and fast-paced transformation projects such as the **Local Area SEND & Inclusion Improvement Plan**.

Wolverhampton benefits from a **Designated Medical Officer (DMO), Designated Clinical Officer (DCO), Designated Social Care Officer (DSCO)** and **SEND Leads in both the ICB and Local Authority**, providing a strong health link with the Local Authority. The Joint Strategic Needs Analysis (JSNA) has a rolling programme to update information for commissioning purposes. The SEND analysis within the JSNA has been refreshed in 2023 which underpins the **SEND & Inclusion Strategy**.

The **SEND & Inclusion Strategy for 2023-27** builds on our **SEND Strategy 2020** and the work done since our last Ofsted CQC inspection in 2021. It is recognised that all children with SEND are individuals with aspirations to lead their own lives. Since 2020, Wolverhampton has made good progress in realising the ambitions set out in the strategy, which will be shared throughout the evaluation.



The SEND & Inclusion Strategy 2024 - 2026

The SEND & Inclusion Strategy sets out the City of Wolverhampton strategic priorities for children, young people, and young adults aged 0-25 years, with special educational needs and disabilities (SEND) and those with additional education support needs. It builds on our SEND strategy 2020 and the work done since our last Ofsted CQC inspection in 2021.

It is recognised that all children with SEND are individuals with aspirations to lead their own lives. While life for a child or young person with SEND and their family is anything but ordinary, the ordinary life principles are what extraordinary achievements are built on. The strategy is built on the principles of inclusion which are outlined within the department for Education's (DfE) SEND and Alternative Provision (AP) Improvement Plan 2023 and all partners are committed to developing and embedding an inclusive offer for the children and young people of Wolverhampton.

Our vision is that every child and young person with additional support needs in Wolverhampton lives in an inclusive city where we work together to support them and their families to lead a good quality 'ordinary life' and achieve their full potential. We believe that by working together and co-producing our services with families and communities we will achieve this.

The focus for this strategy is:

- children, young people and young adults with special educational needs and disabilities, where they have a learning difficulty and/or a disability that means they need special education, care and health support. We call this SEND.
- working proactively to accept, understand and cater for the educational support needs of all children, young people and young adults' difference and diversity, that might be related to ethnicity, language, gender, economic, social or emotional difference. We call this Inclusion.
- providing environments that can appropriately meet the needs of children, young people and young adults whether this be at home, in the community or in education, offering the right support in the right place at the right time. We call this provision.

The priorities highlighted in the strategy are adopted from the Department for Education's SEND & Alternative Provision Improvement Plan 2023. The outcomes are based on the inspection standards set out within the SEND Local Area Inspection Framework. The actions reflect the priorities highlighted within this self-evaluation framework to achieve the outcomes.

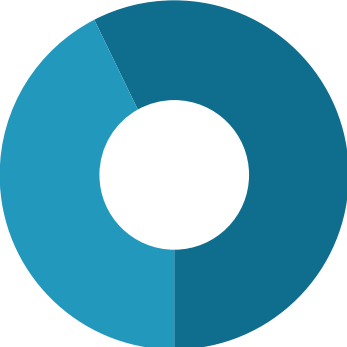
The strategy and self-evaluation have been co-produced with children, young people and young adults with lived experience, Voice4Parents (our parent carer forum), Wolverhampton Information, Advice and Support Service, early years settings, schools, colleges, frontline practitioners the voluntary and community sector, and the Royal Wolverhampton Trust (RWT), Black Country Healthcare NHS Foundation Trust (BCHFT), Black Country Integrated Care Board (ICB). Public consultation was completed between October and December 2023.

A child and young person guide can be found and downloaded in easy read on the Local Offer.



SEND in Wolverhampton

According to the 2021 Census, the Wolverhampton population has grown to **264,036** which is an increase of **5.8%** since 2011. The population of England and the West Midlands saw larger increases of 6.6% and 6.2%, respectively. According to the 2021 Census, in Wolverhampton there are **67,404** young people aged between 0-19 years.

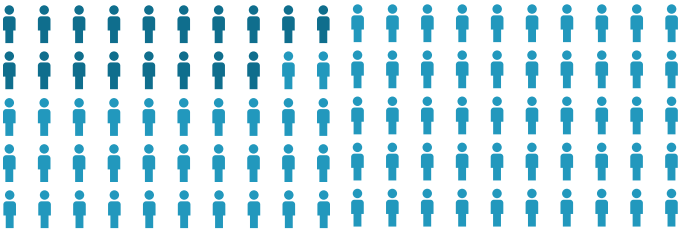
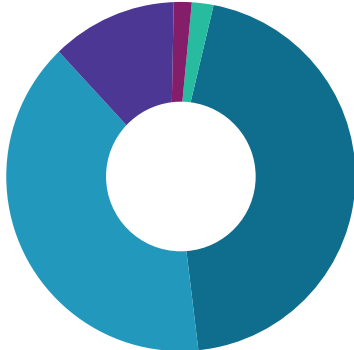


Increase of **12.3** percentage points compared to the 2011 Census.

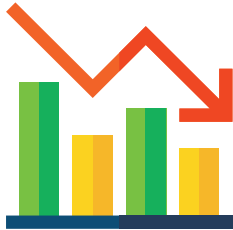
- White British (44%)
- Ethnic Minority (56%)

The distribution of pupils with SEND needs amongst State-funded Schools in Wolverhampton.

- AP School (1%)
- Nursery (2%)
- Special school (11%)
- Secondary school (39%)
- Primary school (43%)



- SEN Support/EHC Plan (18%)
- Non SEN Support/EHC Plan (82%)



In Wolverhampton there is a **strong relationship** with the rate of pupils receiving SEN Support and the index of multiple deprivation (IMD)* decile that their home resides in. The relationship suggests that there is a **higher rate** of pupils receiving SEN Support in the **most deprived** areas of the city, compared to the more affluent areas. This relationship is not as evident between pupils with EHC Plan and deprivation.

Secondary school pupils with SEND have a high proportion of **moderate learning difficulty** at 25.7%, which is 10.1% higher than the national average. Around 23.7% of SEND pupils have **social, emotional and mental health needs**, compared to 24.7% nationally.



Within primary school age pupils, the most prevalent primary need (2023/24 academic year) is **speech, language and communication** (40.2%); slightly above the national average of 34.8%



Wolverhampton's latest published completion rate for EHC assessments excluding exceptions for 2023 is **75.8%**; this is **above** the national rate of **50.3%**.

Within Special schools, 30.3% of pupils have **autistic spectrum disorder** compared to 36.4% nationally. This is linked to the **local partnership work improving performance** of CAMHS and ASD waiting times.





What our Children, Young People and Young Adults with SEND and Their Parents Say About Living in Wolverhampton

To inform this evaluation, a young people's survey was conducted between 16 August 2023 to 30 September 2023. 102 children, young people and young adults participated. This information was shared with HY5!, the SEND & Inclusion Partnership Board's young persons' strategic group, who have used this information to agree the young people's priorities for 2024-26.

Top Priorities for Children and Young People

1. Ensuring children and young people **feel safe** at school, in their communities and are able to travel safely and independently around the city
2. Children, young people, and adults know and understand when they have a plan and **understand what that means for them**. They feel that they are listened to and that they feel that they own and are in control of their plan.
3. Children, young people and young adults are involved in a **meaningful way** in **Education Support Plans and Education Health & Care Plans** and their reviews
4. Children, young people and adults know how to **access help** to think about the future
5. All young people and young adults are supported **access good quality information** to help achieve their aspirations into adulthood including access to services, jobs, accommodation, travel and community activities

Top Priorities for Parents and Carers of Children with SEND

The V4P annual survey 2023 and Parent Carer feedback collected over 2023, showed that there is a feeling that progress in some aspects of support and provision for families with SEND is making a positive difference to the lived experiences, however this needs to be built on and continue to improve and develop. The survey highlighted a range of issues some of which are long-standing and some that have been more recently brought to the attention of the SEND Partnership Board. The 3 main themes included:

1. Autism Spectrum Condition (ASC)

- Further progress to be made on Autism Board, Black Country & ICB work development of promoting clear pathways, including pre-diagnostic and post- diagnostic support.

2. Mental Health & Wellbeing

- Develop clarity of Wolverhampton's Mental Health (MH) offer across the partnership from early intervention to accessing services.
- Improve waiting times for mental health services.
- Give further clarity on exit pathways to families when they are discharged

3. Short Breaks and respite provision

- Develop clarity on the Short Breaks Offer available to children, young people and families in Wolverhampton
- Be clear about when families can access them and how this process works, including criteria
- Share pathways for families of what can be accessed through private or leisure activities when they do not meet the short breaks criteria
- Development of an accessible leisure offer.
- Have an accessible Holiday Activities and Food Programme (HAF) offer that meets the needs of children and young people with SEND and their families.



Understanding Our Self Evaluation

This self-evaluation has been co-produced across **Wolverhampton's SEND & Inclusion Partnership** to ensure that there is a clear understanding and consensus of the duties and expectations against the **Local Area SEND Inspection Framework**.

There are 13 areas within the framework that the local area partnership have reviewed themselves against include:

p13-22	1	Children and Young People's Needs are Identified Accurately and Assessed in a Timely and Effective Way
p23-33	2	Children, Young People and Their Families Participate in Decision Making About Their Individual Plans and Support
p34-44	3	Children and Young People Receive the Right Help and Support at the Right Time
p45-57	4	Children and Young People are Well Prepared for Their Next Steps and Achieve Strong Outcomes
p58-66	5	Children and Young People with SEND are Valued, Visible and Included in Their Communities
p67-74	6	Leaders are Ambitious for Children and Young People with SEND
p75-82	7	Leaders Actively Engage and Work with Children, Young People and Families
p83-89	8	Leaders have an Accurate, Shared Understanding of the Needs of Children and Young People in Their Local Area
p90-98	9	Leaders Commission Services and Provision to Meet the Needs and Aspirations of Children and Young People, Including Commissioning Arrangements for Children and Young People in Alternative Provision
p99-107	10	Leaders Evaluate Services and Make Improvements
p108-115	11	Leaders Create an Environment for Effective Practice and Multi-agency Working to Flourish
p116-120	12	Alternative Provision
p121-22	13	Legal Duties and Statutory Guidance

Area 1: Children and young people’s needs are identified accurately and assessed in a timely and effective way

Strengths	Areas for Development
<ul style="list-style-type: none"> • Proactive use of graduated response by schools • Improved offers of support while waiting for diagnosis with Children and Adolescent Mental Health Services (CAMHS). • Special Needs Early Years assessments are completed within 6 weeks • Increasing compliance against the 20-week statutory expectations for Educational, Health & Care Needs Assessment (EHCNA). • Significant improvement in timeliness of Section 17 assessments. • CYP’s strengths are identified and used to reflect aspirations and inform outcomes. • Clear communication, support and training is in place for Special Educational Needs Co-ordinators (SENCO) • There is transparency of waiting lists for SLT, OT, CAHMS. • Continuing Care process identifies appropriate level of health needs following a holistic assessment • CAMHS Single Point of Access (SPA) offers support and guidance to practitioners in all settings. 	<ul style="list-style-type: none"> • Supporting settings to recognise challenging behaviour as an unmet need and develop clear support structures and pathways to support social, emotional or mental health needs. • Incorporation of Early SEND offer for Social Care as part of Families First for Children Pathfinder (FFCP) Programme. • Ensuring preschool children’s SLT needs are met at a Universal, Targeted and Specialist level in the local community. • Strengthening of timeliness of submissions and quality of amendments of annual reviews . • Removal of carers re-assessments backlog. • Reducing outpatient waiting lists for health by introducing transition clinics and additional outpatient waiting list capacity. • Improving signposting to other services via websites e.g. Local Offer. • Provision of resource videos, leading to better understanding of the service and what it can offer and better self-management techniques and understanding about interventions that would be suitable to assist in addressing issues

What and How we Know About the Impact of Our Arrangements for Children and Young People with SEND

Children and young people's needs are identified in a timely way, so as to prevent needs from escalating

- Schools proactively use a graduated approach to support the identification of needs for children and young people, from special educational need (SEN) support to the EHCNA requests. This is seen within the census data, offering better accuracy of the type of need children and young people have, and better articulating the expectations of the graduated approach as detailed by local guidance. In case studies, parents and schools have shared that they have a better understanding of what schools should provide through the Local Offer and WISE websites. Work is required to address the increase in needs that schools are experiencing, particularly within secondary schools and addressing the barriers that some children and their parents still experience.
- 79% of Special Needs Early Years assessments are completed within 6 weeks from allocation, which enables timely support to children under 5 with additional support needs. Area SENCO's use the assessments to support settings to access the graduated approach pathways where needed, in most situations, before the children are of statutory school age. This can be seen within the SNEYS dashboard and within feedback from Primary School Head Teachers.
- Children, young people and families are having EHCNAs completed with increasing compliance against the 20-week statutory expectations, as demonstrated in DfE return and SEND Performance Dashboard. These dashboards shows trends in performance and analysis, which is monitored by the CYP performance meeting (Senior Management performance monitoring meeting). This means trends in timely performance are analysed regularly to predict pressures, thus enabling resource to be consider so that children, young people and families see a significant improvement in the timeliness of new plans.
- Disabled Children and Young Person's Team (DCYPT) have capacity in place for specific workers to only complete initial Section 17 assessments, resulting in significant improvement in previous delays for families awaiting initial assessments. Families are contacted within 5 working days following initial screening in the Multi-Agency Safeguarding Hub (MASH), and 70% of initial assessments received by the Disabled Children and Young Person's Team are now completed within 15 working days. Parent carers feedback within V4P coffee mornings shows that further work is to be completed around the criteria, pathways and thresholds.

- Co-produced approaches to the review of EHCNA processes have taken place, which have led to amendments to the EHCNA form and a test and learn for the new EHCNA process. This has enabled a clear and shared understanding of the EHCNA process for professionals, however, this is yet to be reviewed to understand the effectiveness this has for families.

Practitioners assess the strengths and determine the aspirations of the child or young person alongside their individual needs

- School leaders routinely identify pupils with SEND as part of wider analyses including attainment and achievement. SEND pupils are discussed in pupil progress meetings, showing SEND pupils have high priority. The strengths and aspirations of children and young people are considered alongside their individual needs, and advice audits have shown evidence of where strengths have been identified and used to reflect aspirations and inform outcomes and provision recommendations.



The criteria for carrying out assessments of need and for accessing services and support are understood, and the application of these criteria improves outcomes

- Communication, support and training is in place to Special Educational Needs Co-ordinators (SENCO) in order to accurately identify SEND as part of the graduated approach guidance and emotionally based school non-attendance (EBSNA) pathways. Training and support for SENCOs is delivered by a range of LA professionals through SEND Networks, the CWC SENCO Induction Programme and a coordinated training offer to ensure that SENCOs understand how to accurately and swiftly identify the special educational needs of pupils in schools and maintained nurseries. Census Data Results confirm an increased confidence around identification and definition of needs. PVI's receive separate training for SENCOs through SNEYS and the Early Years Advisory Service. SENCOs report that they feel increasingly confident in the accurate identification of needs of pupils in their settings.
- The school improvement team works closely with school leaders and SENCOs to ensure that the graduated approach is understood by leaders in schools and implemented effectively so that children and their families can receive the right help at the right time. Support and challenge conversations, SEND reviews and school visits aim to quality assure this and provide evidence that this is the case. When a concern is identified about the quality of provision available in a setting, a plan of support is actioned, ensuring the appropriate professionals across the local authority provide training and support where needed recommendations.

Timely referrals are made to other services and agencies, where necessary

- The Multi-Agency Referral panel, as part of the Child Development Centre, continues to provide a one stop front door for all professionals and parents to refer children under 5 for specialist assessment and support. This has created a shared understanding, ambition and effective communication around the child's support needs as well as enabling clear routes for pathways to services. This enable's timely and effective routes to services, which can be seen through the number of referrals, open and closed as well as the range of referrers and outcomes from referral panel on the SNEYS outcomes dashboard, and through feedback from parents.

Children and young people's needs are identified in a timely way, so as to prevent needs from escalating

- The identification of potential Neuro-developmental assessment at CAMHS Initial Assessment leads to a delay in completing Neurodevelopmental assessments due to insufficient capacity and unclear pathways. This is known and is the subject of an ICB led review of Neuro-developmental assessment in the Black Country.



- Speech and Language Therapy (SLT) new referrals are prioritised to ensure that those CYP with the highest need are seen first. Advice and strategies are usually given following the first contact. So that families and settings can support CYP while they are waiting for an appointment. Early identification is initiated by the neonatal services through SLT, Occupational Therapy (OT), Physiotherapy (PT) to improve developmental outcomes. This is reinforced by early referral to the appropriate community services for follow up.

Practitioners assess the strengths and determine the aspirations of the child or young person alongside their individual needs

- The NHS Children and Young People's Continuing Care process identifies appropriate level of health needs following a holistic assessment. A referral into the service would instigate whether a full assessment is required or signposting to appropriate universal services is required.
- SLT practitioners assess the strengths and determine the aspirations of the child or young person alongside their individual needs because the voice of the child is central to our work and is set out in the Children and Young Persons Act (2008).
- A greater understanding of the need is captured during initial assessment (where indicated) and further information about SEN and disabilities are discussed. SLT have been able to create an opportunity to report against the SEN population by identifying them on our record system. There is some remediation needed to add that information to records of children known prior to the form creation. They are able to assess well within the current 18-week expectation of referral to completion of assessment for mental health needs.
- OT and PT clinicians complete functional assessments of CYP and ensure that goals are set in collaboration with the CYP and what they wish to achieve.
- CYP with SEN needs and/or disabilities which are open to the OT and PT services will have interventions in place, where clinically identified, and those caring/assisting the CYP at home and in education along with the CYP will be educated on the implementation as per the Education, Health and Care Plan (EHCP). The eventual goal being that from an early stage they are being educated for self-management of their long-term conditions, inclusion and given strategies to achieve their aspirations.

The criteria for carrying out assessments of need and for accessing services and support are understood, and the application of these criteria improves outcomes

- New means of access to the friends and family test within specialist CAHMS and improved offers of support while waiting diagnosis are in place.
- Transparency of waiting lists for SLT, OT, PT, CAHMS and co-produced workstreams addressing the issues.
- Criteria for accessing the SLT Service is clear and once a referral is accepted, assessment will take place according to the nature of the need, for example a language comprehension assessment and/or a speech sound system assessment
- SLT Assessment is carried out by qualified therapists, as necessary. Where no specialist exists in the service, regional and national centres of excellence are used, leading to children receiving accurate diagnoses of SLCN.



Timely referrals are made to other services and agencies, where necessary

- A guide for professionals referring CYP for a Continuing care assessment has been developed, which has ensured referrals are appropriate and assessments are needs led, enabling involvement at the right time.
- The ICB has piloted the use of a Learning Disability (LD) screening tool, which has been implemented within Community Paediatric Clinics and shared with General Practitioner colleagues at the RWT NHS Trust. The tool can be completed in a few minutes within a clinic appointment. This has allowed families to be directed to appropriate support for LD including Learning Disabilities Matters and to allow appropriate young people to be flagged to a General Practitioner (GP) as eligible for the Learning Disability Health Check .
- CAMHS Single Point of Access (SPA) offers support and guidance to practitioners in all settings, supporting children & young people for early concern and signposting. Triage of the presenting need of children and young people (CYP), for signposting and referral management for appropriate support including to 'Getting Help' and 'Getting More Help' services– I Thrive).
- CYP are referred to the OT and PT services when they are identified as having needs. They may be referred for functional issues and clinicians are sometimes part of the initial identification of SEN and / or disabilities. The OT and PT clinicians are integral to the multi-agency disciplinary team (MDT) approach as they can piece together the 'jigsaw' which then identifies SEN and/or disabilities.
- When specific needs are identified which are outside of the OT and PT clinicians' remit or thought to compliment the interventions for the benefit of the CYP then, if needed, the clinicians will refer to the appropriate agencies. Resulting in the CYP seeing the correct professional for the correct input at the right time and making their needs heard.
- SLT make timely referrals to other services and agencies, where necessary, such as Community Paediatricians, PT, Autism Panel etc. are made as required. Children and young people's needs are identified in a timely way, to prevent needs from escalating.

What children, young people, young adults with SEND and their families say

Children and young people's needs are identified in a timely way, so as to prevent needs from escalating.

"My child is exceptional at masking therefore no emotional difficulties are seen within school."

"Help with siblings getting the right support as they are young care givers too."

"I feel school needs to be more honest about where your child is at and explain the SEN waves so you don't have to research yourself."

"I feel resources could have been provided from the beginning when he needed support, not to wait to hear what the outcome of the diagnosis to then decide what they are going to put in place."

"Families need to have a clear understanding of graduated response."

Timely referrals are made to other services and agencies, where necessary.

"I wanted to apply for an EHCP for my child, but the school haven't put anything in place."

Practitioners assess the strengths and determine the aspirations of the child or young person alongside their individual needs.

"Schools need to meet more regularly with families and adopt a whole family approach."

"Help with siblings getting the right support as they are young care givers too."

"The lady from SENSTART kept in contact through the EHCP process and was keen to ensure my sons & my opinions/ views were taken into consideration and kept me updated all the way through the process."

The criteria for carrying out assessments of need and for accessing services and support are understood, and the application of these criteria improves outcomes.

“Finally getting diagnosed has opened some doors.”

“Everything went smoothly and all information correct, my son was issued a [EHC] plan.”

“LA needs to develop guidance/support for families, similar to what they have done for professional.”

“Waiting on an ASC assessment had the initial assessment on video August 2021 and was told it would go to a panel, recently rang them up they couldn't give me any update other than there is a long waiting list.”



2024-2025 Planned Improvements for Area 1

Children and young people's needs are identified in a timely way, so as to prevent needs from escalating

- Review the Inclusion Pathways and provide training and guidance to support settings to recognise challenging behaviour as an unmet need.
- Incorporate the Early SEND offer for Social Care as part of Families First Pathfinder to support children with SEND needs that do not meet the threshold for Disabled Childrens Young Persons Team.
- The Autism Assessment Pathway and the Attention Deficit Hyperactivity Disorder (ADHD) Pathway is being review and further development to ensure timely and accurate assessments of need, with a focus on early needs-based intervention.
- Work with One Wolverhampton to ensure preschool children's SLT needs are met at a Universal, Targeted and Specialist level in the local community.

Practitioners assess the strengths and determine the aspirations of the child or young person alongside their individual needs

- Guidance for young people and parent carers regarding the graduated approach will be develop and published in line with the guidance for professionals
- In addition to the Community Nursing Service support already introduced, Royal Wolverhampton Trust will develop a SEND Health Visitor Parenting Programme to provide help and support around sleep, diet, behaviour and sensory issues, alongside development of easily accessible information whilst CYP and their families are waiting for a diagnosis.

The criteria for carrying out assessments of need and for accessing services and support are understood, and the application of these criteria improves outcomes

- Develop guidance to clarify exceptions for partners to consider and apply a statutory exception to an EHCNAs so that they are making appropriate requests for assessments.
- Strengthen timeliness of submissions and quality of amendments of annual reviews through working with SEN Officers, SENCO's and advice professionals.
- Carry out all outstanding carers re-assessments to remove the existing backlog.
- Ensure that robust triaging ensures that only those children who require SLT, OT and PT services are accepted onto the caseload.
- SLT, OT and PT use the North Staffordshire Risk Matrix to ensure that children are discharged appropriately as this enables staff to identify which children are not likely to benefit from these services.

Timely referrals are made to other services and agencies, where necessary

- Introduction of transition clinics and additional outpatient waiting list capacity is being developed. The Clinical Nurse Specialists (CNS) in ADHD, ASC and Continence will independently caseload hold and revise referral guidance to provide clarity on referral criteria and pathways in place.
- Raise awareness of the parents/carers the various OT services (e.g. CAMHS / Independent Living Service/ Royal Wolverhampton Trust) so people are clear that they're separate services and ensure that the CYP and their families/carers are aware of the correct service they need at the right time.
- Develop better communication on PT and OT referral rejections to give clarity that they are no longer on a waiting list and children young people and their families/carers are more informed.
- Improve signposting to other services via websites e.g. Local Offer where information resources can also be provided to help CYP, and their families understand access to services better.
- Develop resource videos as part of the graduated approach to OT provision to help CYP and carers understand the universal, targeted and specialist roles. Leading to better understanding of the service and what it can offer.

Area 2: Children, Young People and Their Families Participate in Decision-making About Their Individual Plans and Support

Strengths	Areas for Development
<ul style="list-style-type: none"> • WIASS was restructured in 2023 to increase capacity ensuring CYP and their families receive timely advice and support to help them participate in decision making about their support. • In 2023 WIASS supported 35 individuals through SEND tribunal appeals, and/or mediation, enabling parent and young people to participate in the process. • There are a number of additional agencies within Wolverhampton that support young people to understand their rights including NDCS, helping hands, RNIB, Autism society and CHSWG. • A survey has been created on 'Respondster' to capture the individual views of children and young people of their experiences. • The quality of EHCP audits completed evidence that the views, aspirations and interests of the children/young people identified, and they are 'known'. • Training and information about parental engagement and pupil voices provided to all SENCOs for them to understand their duties with regards to involving parents/carers and CYPs . • Each CAMHS Risk Assessment and review is a collaborative conversation with the child/individual/family. • The value of co-production and ensuring the voice of CYP and their families is heard; is valued evidenced by the redesign of the ADHD and Continence pathways, and the co-production of the 'All About Me' health passport 	<ul style="list-style-type: none"> • Supporting settings to recognise challenging behaviour as an unmet need and develop clear support structures and pathways to support social, emotional or mental health needs. • Incorporation of Early SEND offer for Social Care as part of Families First for Children Pathfinder (FFCP) Programme. • Ensuring preschool children's SLT needs are met at a Universal, Targeted and Specialist level in the local community. • Strengthening of timeliness of submissions and quality of amendments of annual reviews . • Removal of carers re-assessments backlog. • Reducing outpatient waiting lists for health by introducing transition clinics and additional outpatient waiting list capacity. • Improving signposting to other services via websites e.g. Local Offer. • Provision of resource videos, leading to better understanding of the service and what it can offer and better self-management techniques and understanding about interventions that would be suitable to assist in addressing issues

What and How we Know About the Impact of Our Arrangements for Children and Young People with SEND

Children, young people and families are supported to understand their rights, make choices and contribute to decision-making about their plans and support

- Wolverhampton Information, Advice and Support Service (WIASS) was restructured in 2023 to increase capacity ensuring children and young people and their families receive timely advice and support. From April 2023 to March 2024, 842 families received tailored advice and support, an increase of 188% from the year prior to restructure. A recent satisfaction survey showed that 52/94 people reported they felt more involved in discussions and decisions, with 62 feeling more empowered whilst 85 reported there was better support in place. See WIASS Annual Survey 2023.
- WIASS supported 48 people to resolve disagreements with the local authority. As a consequence, WIASS has identified 18 cases where parents and young people were able to share their views effectively and an appeal to the SEND tribunal had been avoided. Out of the 29 mediations opened by the local authority WIASS supported 11 families to participate in mediation meetings. As a result, 8 cases were resolved at mediation. Thereby bringing about a positive outcome in the best interests of the young person.
- There are a number of additional agencies within Wolverhampton that support young people to understand their rights including NDCS, helping hands, RNIB, Autism society and CHSWG.

Children and young people understand their plans and support, including intended outcomes, and why some changes are not possible

- The WIASS EHCP booklet and the SEN Support booklet have been co-produced with parents, carers, and Wolverhampton's parent carer forum (PCF) and hard copies of the booklets are available.
- All children attending an EHCP paediatric appointment have access to the information and are given the WIASS leaflet. This means children and young people and their parents/carers receive information at the right time to enable them to participate in the graduated approach, EHCNA process and decision making.
- The quality of EHCP audits completed evidence that Wolverhampton has 18% more outstanding sections compared to National benchmarking. This indicates that the views, aspirations and interests of the children/young people are identified, and they are 'known'. A survey has been created on 'Respondster' to capture the individual views of children and young people of their experiences with the EHC process in Wolverhampton to help develop service improvement priorities through the Special Educational Needs Statutory Assessment and Review Team (SENSTART).

- The views of children and young people are collated in all social care assessments and plans. This is evidenced through internal practice week audits, which evidenced this as an area of strength.
- Children and young people are supported with advocacy services if they are unable to share their views. Advanced practitioners support social care staff with direct work tools specifically for children and young people with SEND to ensure workers are equipped to obtain their views.
- V4P parent carer feedback shows that there are some circumstances where there is no social care advice in section H1 or H2 of the EHCP, which may inhibit some families to access advice on social care needs where thresholds have not been met.

Children and young people access impartial information, advice and support that enable them to make informed choices about their future

- The SENCO Induction Programme, is offered by the City of Wolverhampton Council (CWC) to all new SENCOs and experienced SENCOs new to the City of Wolverhampton. It provides training and information about parental engagement and pupil voice in order to ensure that all SENCOs understand their duties with regards to involving parents/carers and CYPs in decision-making and the graduated approach in schools. Through regular SEND Networks, all SENCOs are encouraged to subscribe to the WIASS newsletter and to regularly sign-post parents and families to the service in order to better understand their rights and how to navigate the SEND system.
- The existing policy and procedures for direct payments and personal budgets are on the councils Wolverhampton Information Network website which has seen 1214 unique visits in the past 4 months. The revised guidance for schools on completing EHCNA's and Annual Reviews also draws on a reference for SENCOs to ensure that direct payments are discussed as part of a new request or the annual review. There are 4 children and young people with a SEND personal budget, which are paid via an Individual Service Fund and 64 Direct Payment recipients in addition to the SEND Individual Service Fund.



Children, young people and families are supported to understand their rights, make choices and contribute to decision-making about their plans and support

- Children and Young Peoples Continuing Care offer all package of care to be delivered by a Personal Health Budget (PHB) if the Child/Young person and their family are in agreement. This has ensured that packages of care are tailored about the child/young person's needs, they also have influence on who they may wish to employ and are fully involved in the process. The PHB can be used flexibly to meet individual needs and circumstances.
- CAMHS carry out risk assessments and risk management is a collaborative and positive process within CAMHS Services. CAMHS recognises that the role service play is to support families to decrease and manage the risks consequent of mental ill health. Each Risk Assessment and review is a collaborative conversation with the child/individual/family. This is the case along all of the I THRIVE spectrum.
- The purpose of the CAMHS approach is to mitigate against the risk of an 'Expert' Service disempowering Children Young People and families when it comes to their mitigation of the risks posed by mental ill health. The purpose of involvement of the families in their CAMHS treatment is to ensure shared ownership and authority in the management of risk.
- OT and PT services ensure that all CYP and parent carers are included in the patient centred therapy interventions and goals are set around what the CYP wished to achieve. They are also involved in the EHCP process where their goals/outcomes are set with the CYP and carer to try to enable the CYP to achieve their aspiration. Any changes to these are communicated from the CYP to the OT/PT clinicians and these are adapted in the programme of interventions provided. If their chosen aspiration is not realistic then the CYP and parent carer are involved in a discussion where a realistic compromise can be met, and goals worked out to achieve this.
- SLT support CYP to understand and express themselves to the best of their ability using verbal communication alongside alternative and augmentative communication (AAC) as appropriate. SLT also support families and the MDT to utilise communication successfully. Open Access Follow up has increased the amount of time SLTs can work on implementing AAC resulting in CYP being able to communicate for basic communication, increase their understanding, develop their language skills, facilitate social interaction, build relationships and increase equal opportunities

- The 0-19 Team recognise the value of co-production and ensuring the voice of CYP, and their families is heard; this is evidenced by the redesign of the ADHD and Continence pathways, and the co-production of the 'All About Me' health passport which contains relevant personal, social and medical information and avoids the need for repetition of information having to be relayed to healthcare professionals.

Children and young people understand their plans and support, including intended outcomes, and why some changes are not possible

- CAMHS have introduced and embedded the use of an assess, plan, implement and review process, with the use of goals-based outcomes, to drive child/family centred goals for treatment. The process includes a repeat review of the family aims for treatment to ensure that the service is appropriate and meeting the aims of the child/family.
- The current process for all CAMHS assessment and treatment, planning and risk management is centred around co-producing that episode of care with the child/young person/family. CYP and their Carers will be able to access the information supplied on the local offer which will be reviewed and updated regularly. This information will signpost to the BCHCFT website areas where information about services will be listed and linked to resource packages which can assist CYP and carers with their understanding of managing their needs.

Children and young people access impartial information, advice and support that enable them to make informed choices about their future

- CAMHS clinicians employ best practice when imparting information and ensure appropriateness, openness, timeliness, maintenance of confidentiality and accessibility to ensure information is shared to support decision making for children and families. CAMHS utilise the differing MDT skills where appropriate to ensure creative ways of enhancing the delivery of information to inform choices.
- SLTs signpost CYP and families to advice and support as appropriate. They source reliable on-line sites and develop our own resources to signpost to, such as established charities such as the national Autistic Society, The What Works website (for evidence-based interventions) and the British Stammering Association. SLT also have resources developed in-house, for example, those available on the Black Country Early Outcomes site.

What children, young people, young adults with SEND and their families say

Children, young people and families are supported to understand their rights, make choices and contribute to decision-making about their plans and support.

“The outcome for children and young people (CYP) who feel their voice is heard was a multiple choice question and 31.3% of CYP feel ‘parents’ care about their thoughts and feelings (85 out of 273 responses).”

“There is a significant proportion of CYP that also feel that ‘family’ care about their thoughts and feelings at 28.2% (77 out of 273 multiple responses).”

“Strategic and family level co-production needs to provide a clear understanding of true co-production, mutual respect, whole family approach and being heard including during EHCP drafting process.”

“When she is listened to and adaptations have been made to meet her needs.”

“I don't feel that people are listened to as family unit.”

“Make the expression “child-centred” be the truth of the experience, rather than an empty statement.”

“Listen to the what the parents and YP are saying and actively move in that direction.”

“Many times they are not listening to parents.”

Children and young people understand their plans and support, including intended outcomes, and why some changes are not possible.

“Out of the 102 respondents to the young people’s survey; there was an even proportion of young people who do know what an EHCP is, than don’t. The highest proportion that answered ‘yes’ were between 13-17 age group the 49% who replied ‘I don’t know’ to ‘do you have an EHCP’, the majority were in 0-10 age group.”

“Young people want up to date and easy to find information about what help and support is available to them and their families.” – HY5! Annual report.

“Carers assessments and direct payments – Further clarity is needed around when these can be accessed and the criteria.

“Further work needs completing around annual reviews and personal budgets so that families understand and feel involved in these. In response to the co-production work for the WIASS EHCP booklet, it was decided to produce factsheets for the Annual Review process and personal budgets/personal health budgets which have since been co-produced with all partners and shared on WIASS website.”

“EP insisted on social skills and English and maths interventions against wishes of YP.”

“Further work needs completing around annual reviews and personal budgets so that families understand and feel involved in these.”

Children and young people access impartial information, advice and support that enable them to make informed choices about their future.

“I refuse to currently use the Local Offer - it is diabolical, can't find anything and certainly can't see how it helps us in any way, shape or form.”

“Don't know what local offer is, never heard of it nor never been told about it.”

“I feel there is a lot of information regarding the local offer, but I find it difficult to make sense of it.”

“These platforms must be made simple, easy to navigate, instead of being so complicated. The information is not presented in an accessible way which puts me off.”

“They should also listen to your concerns.”

“I've been asked been dragged through meetings [carers] assessments and humiliation but not one that has helped.”

“My child's EHCP targets are aspirational and needs and provisions are all addressed because I write his EHCP.”

“Graduated response - families need to have a clear understanding of graduated response. Schools need to meet more regularly with families and adopt a whole family approach.”

“Health - Information regarding what the offer is from each service and how therapy is delivered with respect to Health Personal Budgets, access to therapies, waiting list for services, Learning Disability annual health check.”



2024-2025 Planned Improvements for Area 2

Children and young people's needs are identified in a timely way, so as to prevent needs from escalating

- CAMHS will improve evidence of coproduction in individual family experiences of care delivery and embed a new caseload management tool that enables audits to focus on quality delivery rather than 'how many forms are completed' approaches.
- CYP, parent carers and the PT/OT services will ensure that they are working towards a collective goal for EHCP assessment and reviews to ensure that CYP are part of the decision-making process, ensuring that progress is being made towards their aspiration and this leads to the CYP being the centre of the intervention.
- Expand the SLT Augmented and Alternative Communication offer so that children have a boarder range of options and increased expertise to support facilitating communication.
- Work with One Wolverhampton will progress to ensure preschool children's SLT needs are met at a universal, targeted and specialist level in the local community through working with Family Hubs meaning that established best practice to meet the needs of the CYP is utilised, embedded in the community and with support and agreement with all stakeholders.

Children and young people understand their plans and support, including intended outcomes, and why some changes are not possible

- Children, young people and young adults have shared that they would like a better understanding of the annual review process and more control over this. To respond, the SEND and Inclusion Improvement Plan will revise how children and young people views are included in both the EHCNA and Annual Review pathway processes and support children and young people to make choices about their future through annual reviews and their preparation for adulthood. This will include:
 - Revising the graduated approach documentation including My SEND Support Plan which will have a focus on person centred planning and capture pupil and parental voice, including having a clear focus on the four areas of preparing for adulthood.
 - Understanding of Mental Health Capacity and Deprivation of Liberty Safeguards (DoLS) across the partnership (procedure/process/policy) to be rolled out with the support of the Council for Disabled Children (CDC) through SLIP support in February 2024.

- Data monitoring development will take place to enable the ability to easily identify the number of CYP who are involved in their EHC assessment or annual review.
- Further training for schools will take place to help understand how to illicit the views of their young people, through adaptable approaches to communication and supporting resources, to support young people to become actively involved in their reviews for both SEN support and ECHP – guidance to be provided through the ‘Wolverhampton Inclusive Schools for Everyone’ website.
- Providing children and young people with Young people have adaptable ways of communicating their aspirations within their annual reviews with schools & families able to access a range of resource to help capture this.
- Providing updated guidance to professionals so that they are clear about the expectations they have in attending annual reviews including appropriate training and tools to offer effective reviews.

Children and young people access impartial information, advice and support that enable them to make informed choices about their future

- Further information will be made available for parents and young people through the redesigned local offer so that they are clear about what to expect for an annual review and the information they should receive.
- Offer a scale to listen to the voices of young people and families in what is working for and not working for them in the delivery of care, through consideration of the Black Country as a whole.
- Development of the SEND 0-19 health service to ensure that CYP and carers are aware of other services and ensure that they are signposted to the most appropriate service for their needs, ensuring that the CYP and their families/carers are aware of the correct service they need to be accessing at the right time.
- Ensure that CYP and carers are provided with evidence-based understanding about sensory interventions needing to be part of the holistic package and not an isolated issue, they will be signposted from the websites and resource packs. The resource packs and websites will be provided to give information, and help emphasizes the importance of working within an evidence-based framework when addressing sensory processing and integration difficulties.

Area 3: Children and Young People Receive the Right Help and Support at the Right Time

Strengths	Areas for Development
<ul style="list-style-type: none"> • Impact evidence been gathered showing positive results regarding the implementation of the Graduated Approach Guidance. • Advice and guidance is offered to both schools and families where concerns arise that a child has unmet SEND support, or social needs that affects their attendance, or ability to engage in effectively in education. • SNEYS as part of the Child Development Centre ensures children between birth and five years of age receive robust support through multi-agency working. • WIASS offers individuals tailored advice and support following the graduated approach ensuring they receive the right support at the right time. • The quality of EHCPs audit shows that nearly 94% of EHCPs are good or outstanding in Section B and nearly 90% are good or outstanding in Section E. • Online CDC training has been established and is embedding, including SEND training facilitated by SEND Inclusion Education services, equipping workers to better support children and families with SEND. • The RWT SLT Service and One Wolverhampton are working together to support SCL Needs resulting in a significant decrease in timescales for initial assessments. • ADHD task and finish group is well established with an ADHD nurse in post. QB testing also in place to support patient. • Health have recruited to a Clinical Nurse Specialist (CNS) post to improve the support provided for children and young people awaiting an assessment. • Currently the Children's PT and OT services are seeing CYP's within the national 18-week RTT timeline. 	<ul style="list-style-type: none"> • The development of the Family Hubs SEND Centre of Excellence, will provide families the opportunity to access immediate support, advice and guidance for any SEND related needs. • Establishment of a specialist SEND team to work alongside the existing Disabled Children and Young Person's Team further enhancing the offer to all SEND CYP and their families in the City. • FFCP will provide a multiagency approach to the Family Help assessment, as other SEND professionals will also be connected to the locality area where the family help assessment is being completed. • Social Care are working closely with commissioning services and procurement to increase capacity of Short Break providers. • Improved data monitoring of annual reviews to ensure reviews are held on time, reports are submitted correctly by schools, and decisions made in line with timelines. • Staff in universal services to have appropriate training made available and support from services to enable adaptations to service delivery to young people with physical and sensory needs including parks, leisure offers. • Publication of the updated Personal Budgets process and add to the new local offer following testing. This needs to be accompanied by training for those involved in reviewing EHCP's so there is a clear understanding what this can be used for and how families can apply for this. • Develop the monitoring of data to effectively strengthen support pathways including establishing attendance to enable all schools to access support; • Improved referral process between social care and the ICB in relation to Continuing Healthcare (18 years and above).

What and How we Know About the Impact of Our Arrangements for Children and Young People with SEND

Children and young people receive support based on their identified needs when they are awaiting assessment

- Impact evidence gathered shows positive results regarding the implementation of the Graduated Approach Guidance, which was launched and shared with schools and services for use from September 2022. This highlights that schools have responded and are able to put interventions in place whilst children are going through assessments before and during EHCPs.
- The Early Bird and Teen Life Autism Parent Programmes is available while young people are on the waiting list for an autism diagnosis for ages 4-9 years.
- Schools access services that support attendance, risks of exclusion and are supporting parents when they requests elective home education. Advice and guidance is offered to both schools and families where concerns arise that a child has unmet SEND support, or social needs that affects their attendance and engagement in education. Outcomes include support pathways being accessed, mediation and supporting meetings to consider next steps. School attendance and Inclusion data is monitored so that support can be offered to schools if they have not approached the team.

Plans and support are coordinated within and, where necessary, across providers and services, and are based on a shared understanding of the child or young person

- The Special Needs Early Years' Service (SNEYS) as part of the Child Development Centre ensures children between birth and five years of age receive robust support through multi-agency working across education, health and social care. This results in effective early identification and support for children, their families and educational settings.
- WIASS offers individuals tailored advice and support following the graduated approach ensuring children and young people receive the right support at the right time to improve outcomes for children and young people. Because of this, in a recent WIASS survey 85 out of 94 families who said they had received in meeting support from WIASS reported better support is in place.
- There is interim guidance in place whilst awaiting implementation of online EHCP portal. This paper-based solution has simplified the previous process and made it more accessible to some practitioners and families, however it has increased the workload for schools and the SENSTART team, meaning that the annual review process now takes longer to complete which impacts on the timeliness of amendments needed.



- The Families First for Children Pathfinder, City-Wide SEND offer is being implemented. A specialist SEND team will work alongside the existing Disabled Children and Young Person's Team, enhancing the offer to all SEND children in the City. Providing support to families at the very earliest opportunity and reducing delay previously experienced for families accessing the right level of support. The City-Wide Send offer, will take a multi-agency holistic approach to meet the needs of children with SEND

Plans and support are regularly reviewed and updated to reflect changes in children and young people's skills, independence, understanding and other factors in their lives, including reduced support in line with reduced need where appropriate

- The quality of EHCPs audit shows that nearly 94% of EHCPs are good or outstanding in Section B (10% higher than national) and nearly 90% are good or outstanding in Section E (20% more than national). This shows that needs are identified, and outcomes defined clearly enabling the right support to be given at the right time.
- Currently the % of EHCP annual review notes which are processed within the statutory 4-week period as April 2024 is 75.9%. Work has been prioritised to take place to improve the compliance of annual reviews over 2024/25.
- Social Care work closely with commissioning services and procurement to increase capacity of Short Break providers. The new Framework is planned for completion in September 2024. Families will be provided with a needs led service in a timely manner.

The wider needs of the child or young person's family are considered, and barriers to learning and participation are addressed

- Online CDC training has been established and is embedding, including SEND training facilitated by SEND Inclusion Education services, equipping workers to better support children and families with SEND. MASH have been provided with training from the DCYPT managers, to support appropriate application of threshold. There are less re-referrals to DCYPT for families that are triaged by MASH, evidencing the right referrals are going through to DCYPT, and Early Social Care and Early Help are better supporting families that do not meet the threshold for support from the DCYP team.
- As a wave one Local Authority for the Department of Education, Families First for Children Pathfinder, a citywide SEND family help service is established to ensure children, young people and their families receive support at the earliest opportunity. This will enable to families to access support directly in their communities.
- The parent carer conversations, with the Carers Team are carer focused and the feedback has been positive. Parent carers say they felt visible and listened too and that they felt they weren't defined by their caring role.

Children and young people receive support based on their identified needs when they are awaiting assessment

- The RWT SLT Service and One Wolverhampton are working together to support SCLN resulting in a significant decrease in timescales for initial assessments.
- ADHD task and finish group is well established with an ADHD nurse in post. QB testing also in place to support patient referrals and is a device for assessing core symptoms of ADHD such as hyperactivity, impulsivity and inattention.
- ICB and BCHFT led a review of the demand, capacity and process for Neuro-Developmental Assessments across the Black Country. This is with a view to ensuring capacity and harmonising process.
- Assess, Plan, Implement and Review process are embedded, with support for clinicians, to ensure that all that can be achieved with the workforce happens and that CAMHS delivers Care/treatment Episodically and therefore families can access help for the time they need.
- Children and young people receive SLT support based on their identified needs when they are awaiting assessment, this ensures all children referred receive high quality information around supporting and developing communication while they are waiting for an appointment so that families and settings can support CYP while they are waiting for an appointment.

Plans and support are coordinated within and, where necessary, across providers and services, and are based on a shared understanding of the child or young person

- To improve the support provided for children and young people awaiting an assessment, health have recruited to Clinical Nurse Specialist posts, alongside having a SEND team in the 0-19 service for health visiting and school nursing. As a result of Wolverhampton being one of the first 3 'test and learn' sites for the Families First for Children Pathfinder which should lead to further support for these children and young people.
- SLT plans are developed, and support is provided in a timely way. CYP's needs are evidenced by reports being completed to support EHCPs and education plans for CYP.
- SLT plans and support are coordinated within and, where necessary, across providers and services, and are based on a shared understanding of the child or young person. This is seen when SLTs work closely with the MDT to ensure that outcomes are harmonised where necessary.
-

Plans and support are regularly reviewed and updated to reflect changes in children and young people's skills, independence, understanding and other factors in their lives, including reduced support in line with reduced need where appropriate

- CYP open to the PT and OT service will be reviewed at each contact and this will denote the timeline for review. If issues arise between reviews, parents / carers can contact the service to inform them, and the clinicians will respond accordingly to the risk of need. CYP centred goals are reviewed regularly for progress and adaptations if needed, these are agreed with by the CYP and parent carer as they are set around what the CYP wished to achieve.
- The PT and OT services work on episodes of care, ensuring CYP get the required input to the right level of need at the right time which results in better use of resources. For ongoing intervention regular reviews are planned and needs are addressed as they occur. If a CYP is self-managing, the episode of care will be closed with a 'contact us' time allocation to allow a safety net approach prior to discharge. Once discharged the CP can be re-referred, if clinically required, to the services

The wider needs of the child or young person's family are considered, and barriers to learning and participation are addressed

- BCHFT have rolled out a new digital offer WYSA which is an artificial intelligence wellbeing coach application which supports CYP over 12 by enabling independent access to advice, guidance and evidence-based approaches to meeting emotional and mental health needs.
- The wider needs of the child or young person's family are considered, and barriers to learning and participation are addressed, demonstrated by SLTs working in a holistic way, acknowledging that the success of their outcomes is dependent on the wider team around the child and using coproduction to ensure that wider views are incorporated.
- Adapted clinics are being developed for those patients with additional needs. These clinics will offer extended appointment times, will be in a quieter environment, and with staff that are trained to support patients with additional needs
- LD Champions in place in Community Ambulatory Care Services
- Following an external audit of Pond Lane, they received the 'gold standard' for quality of Learning Disability Health Checks.



What children, young people, young adults with SEND and their families say

Plans are developed and support is provided in a timely way, and meets children and young people's needs.

"Having a SENCO that communicates with myself and my child. That does what she's says she will do and ensures I have information I need to support my child. Also gives consistency."

"Five of the city's special schools are mentioned by name in the parental feedback as 'amazing'; 'phenomenal': 'approachable'"

"SEND support in Wolverhampton for parents and careers is hard to access. Services have long waited lists and criteria to receive support is too high."

"We wait for up to 18 months at a time to see community consultant paediatrician - and audiology which should be regular (3-6 months) but we haven't been seen for at least a year."

"Carers assessments and direct payments – Further clarity is needed around when these can be accessed and the criteria."

Children and young people receive support based on their identified needs when they are awaiting assessment.

"For the outcome of CYP that feel they are supported, there was a significant proportion that feel they do not have any extra help to do things. This was in relation to the 14 CYP who responded no to 'do you have an EHCP?' only."

"We were issued with a plan, the help on there would have been great if it was ever given."

"You wait forever to access the services and you have to have the door shut in your face over and over before you actually meet the criteria to get the support for your child."

Plans and support are coordinated within and, where necessary, across providers and services, and are based on a shared understanding of the child or young person.

“I have mixed answers with this as I have 2 children with SEN and two different experiences with assessments and support. My child with a severe learning disability and many other complex needs we have a high package of support. However, my other child with complex needs I had to go through the complaint's procedure for an assessment. My other children and myself wasn't included in my other child's assessment I have been lucky with one of my children ...but I had an appalling time accessing support for my other child and the other CIN not being updated which led to my mental breakdown.”

Plans and support are regularly reviewed and updated to reflect changes in children and young people's skills, independence, understanding and other factors in their lives, including reduced support in line with reduced need where appropriate.

“Expired and outdated EHCP from 2018, when child was 9 years old. Despite attending annual reviews, plan has not been updated accordingly. Last review March 2022, still waiting for draft.”

Young person is losing crucial time to achieve milestones.”

“My child has just started at an autism specialist school in September, and so far, I'm satisfied with the school. It is far better and of course different to a mainstream school. It has been very positive experience so far.”

“Annual health check doesn't happen... can't even get a regular appointment when I'll let alone a health check. GP are so out of touch and don't even read notes from gem or hospital.. I have to update them on everything.”

The wider needs of the child or young person's family are considered, and barriers to learning and participation are addressed.

“...not accessed [Short breaks] for a few years now but when I did it was very helpful. So, we could afford a holiday that was better suited to our children's needs.”

“Support for my child on SEN support she is overlooked and no opportunities to prepare.”

“I have begged social services to help. No help. Numerous referrals to disability team and all rejected. Still awaiting a carer assessment.”

“We have not bothered with either, too hard to gain plus who wants a social worker involved just to get some respite?”

“Near impossible to access. We had an [Short Break] assessment nearly a year ago and yet to see any outcomes from it. Had to complete informal complaint. Still waiting.”

“When my daughter did have an EHCP nothing was offered even though I asked, I was told by a support worker who I got in touch with for help with my own mental health we didn’t meet the criteria for help but again not clear what that was for, guidance reads as though we should have been eligible for a parent’s assessment and a social needs assessment, but I was told not.”

“When we used direct payments, we found it impossible to recruit a personal assistant despite looking for over a year. This meant that my child’s money was taken back and so not only could he could not access respite, he was unable to access his money. The direct payments system places too much responsibility on parent e.g. pension contributions and maternity leave and we were left without any support when the service provided by the council to help with this admin was inadequate withdrawn.”



2024-2025 Planned Improvements for Area 3

Children and young people receive support based on their identified needs when they are awaiting assessment

- Continue to monitor the waiting lists across health services to ensure that there are no barriers to CYP accessing the service at the right time if clinically appropriate.
- Implement the use of North Staffordshire Risk Matrix scoring to ensure that the CYP are triaged and reviewed at the correct clinically indicated timelines.
- Establish the provision of specialist SEND workers in FFCP Family Help which will enable earlier assessments to be provided for children and families.
- FFCP will establish a multiagency approach to the Family Help assessment, including SEND professionals who will also be connected to the locality area where the family help assessment is being completed.

Plans and support are coordinated within and, where necessary, across providers and services, and are based on a shared understanding of the child or young person

- Continue to implement the graduated approach in OT services.
- Establish the Family Help model of assessment, allowing what is currently known as child in need and Early Help services to work collectively.

Plans and support are regularly reviewed and updated to reflect changes in children and young people's skills, independence, understanding and other factors in their lives, including reduced support in line with reduced need where appropriate

- Establish the cycle of data monitoring for annual reviews to ensure reviews are held on time, that reports are submitted correctly by schools, and decisions made in line with timelines. This will be monitored through the CYP Performance Leadership meetings to monitor improvements.
- Improvement will be made in capturing Preparation for Adulthood for children and young people open to social care by evidencing the discussion with families in all plans for Year 9 Annual Review.
- Staff in universal community services will have access to appropriate training and have information about services available to them, which will be established to enable adaptations for young people with physical and sensory needs including parks, leisure offers. This will be published through the local offer.
- The procurement of an EHCP IT system and interim system processes will be re-established to reduce the impact on annual reviews timeliness and amendments.

- The updated Personal Budgets process will be published on the new local offer following testing. This will be accompanied by training for those involved in reviewing EHCPs to support a clear understanding of what this can be used for and how families can apply.

The wider needs of the child or young person's family are considered, and barriers to learning and participation are addressed

- Monitoring of data cycle will be established to effectively strengthen support pathways including attendance, to enable all schools to access support; develop an elective home education reintegration pathway to effectively support children when long periods of curriculum-based education has been missed; share revise codes to identify children missing education and their destinations more easily; and further develop a core offer to schools with support from partner agencies and the LA attendance advisors.
- Implementation of the City-Wide SEND offer for social care pathway, to support the continued improvement of the quality of social care advice and ensure high quality social care advice is provided on all new EHCP plans and annual reviews.
- Family Hubs SEND Centre of Excellence will be established, to provide families the opportunity to access immediate support, advice and guidance for any SEND related needs.
- Develop a wider resource for families where a neuro-developmental diagnosis is being considered, where demand is not meeting and/or the pathways are not clear for families.
- BCHFT are continuing to seek to maximise what can be achieved with the resource allocated by engaging with the workforce and wider community to explore potential new ways to deliver service that could be more efficient.
- To increasing the number of SLT to positively impact on the timeliness of initial appointments and reviews, progress work with One Wolverhampton to establish a Service Specification and Joint Commissioning arrangements to address the demand-capacity shortfall, so that CYP can be seen in a timelier manner, ensuring that CYP receive the right support at the right time.
- Improved referral processes between social care and the ICB in relation to Continuing Healthcare (18 years and above), particularly for those young people approaching transition stage to adult services, including clarity on funding arrangements for equipment and consumables for the CYP who are transitioning into adult services.

Area 4: Children and Young People are Well Prepared for Their Next Steps, and Achieve Strong Outcomes

Strengths	Areas for Development
<ul style="list-style-type: none"> • Transition pathways, co-created to ensure accessibility to provide information for children, young people, and their caregivers. • City-wide information sharing protocols streamline transitions via a universal transition form to Secondary and Primary school. • Annual review guidance, ensures focus on preparation for adulthood from Year 9. • To support our specialist, SEND in schools in meeting GATSBY Benchmarks, a Careers Enterprise Co-ordinator now supports the integration of meaningful employer encounters into individual career programmes. • Young people up to the age of 25 allocated to DCYP team are successfully supported on their journey to adulthood. • Monthly data analysis helps identify gaps in provision, enabling tailored services for SEND young people in Wolverhampton. • Annual Moving into Adulthood careers fairs, since 2022 showcase collaborative efforts among local partners in education, health and social care. • The 18-25 CAMHS service went live in Wolverhampton at the end of 2023, this has provided a smooth transition of care of treatment for young people who are already a recipient of the Specialist CAMHS Service. • Health services identified a need for a Transition Clinical Nurse Specialist and RWT supported a pilot to test the concept of the role. • The Transition CNS has been supporting mainstream schools with young people with long term and neurological conditions. • There are several initiatives and services to support clinical transfer from children to adult services. 	<ul style="list-style-type: none"> • RISE support has started to help shape this a Local authority, however further work is needed through 2024 to ensure all service areas have a clear commitment and lead representing their area of business and a clear preparing for adulthood action plan is created to captures actions across all partners. • HY5! have identified a priority to make sure young people get the help and support they need as they grow up including Having good options and choices after school; Moving from children to adult health services is a good experience and Young people feel safe and part of their community. • Further develop the SENCO questionnaire to consider what review of outcomes of CYP with an EHCP looks like in schools beyond the annual review. • Supported living pathway requires additional work. • 'Beyond School' transition pathway to be published. • The new improved co-produced Local Offer is currently in development to support families with autonomy, offering self-service advice regarding PfA.



What and How we Know About the Impact of Our Arrangements for Children and Young People with SEND

The outcomes that are the most important to children, young people and their parents and carers are understood and planned for

- Transition pathways have been co-created across education, and skills services to ensure accessible information for children, young people, and their caregivers. Centralisation of resources within these pathways, has been amalgamated within the Connexions SEND Guide into the education, employment, and training pathway.
- City-wide information sharing protocols have streamline transitions via a universal transition form from Early Years to Primary to Secondary schools, facilitating tailored plans for individuals requiring specialised support beyond universal services.

Support and plans reflect children and young people's ambitions, and extend beyond required levels of support (such as the number of hours of support from a particular service) to focus on the planned outcome

- Thanks to robust training, SENCO's now adeptly craft outcomes for pupils with SEND, aligned with the four areas of preparing for adulthood. This is evident in the increasing number of My SEN Support Plans and EHCP's.
- To address the inconsistent approach to planning and supporting transition from a children's social worker to a young person's social worker because of staffing difficulties within the Disabled Children and Young Person's service, children in transition are now co-worked and children's social workers given the training and skills to effectively support children in transition into adulthood.
- Young people with a visual impairment benefit from bespoke life skills support from habilitation specialist which prepares them for their next steps of their educational journey, identified in EHCP outcomes.

Children and young people are supported before and during any point of transition, including when they will no longer be eligible for a service

- Annual review guidance, ensures focus on preparation for adulthood from Year 9, including clarity and direction for schools including accessing support from social care
In September 2023 schools received training around the annual review process, fostering high-quality EHCP's with clear transition plans.
- Young people with an EHCP's benefit from bespoke Connexions support and personalised Career Pathway Plans, providing the most relevant information on further education, training, and employment. Although it is acknowledged that V4P feedback shared there is some inconsistency for some young people with SEND.
- To enhance support for children and young people in care with SEND, a new policy introduced in 2024 establishes Young Persons Advisers (YPAs) to foster independent skills among those leaving care. Multi-agency Transition panels continue to assess and refer children in care with SEND to the Disabled Children and Young Person's Service for specialised transition planning.

From an early age, children and young people develop the knowledge, skills and behaviours necessary to prepare for greater independence and adulthood, including in the areas of further and higher education, employment, more independent living, good health, positive relationships and participation in society

- Specialist transition advice and support are integral throughout education, provided by the Early Identification and Support and Educational Psychology (EP) Service. This enables effective information sharing and transition planning between early years, reception, primary and secondary.
- Recent Education Psychology and advice promotes Preparation for Adulthood (PFA) outcomes for all children and young people. This is reflected in updated advice templates and guidance documents evident in recent EHCNA's and confirmed through recent audits of the EHC plans (link template).
- Young people up to the age of 25 allocated to DCYP team are successfully supported on their journey to adulthood, benefitting from social work support during this critical transition period through a strong partnership between adult and children's social care, and health supports the needs of our most complex young people through the transition nurse.

- For specialist SEND in schools a Careers Enterprise Co-ordinator supports the integration of meaningful employer encounters into individual career programmes. Wolverhampton SEND schools excel in the Gatsby benchmarks, boasting a city average of 6.8 BM's achieved at 100% to the target of 5.5 targets.
- Wolves at Work 18-24, fund a specialist SEND Careers Adviser who collaborates with Education, Employment and Training Advisers to offer dedicated support to children and young people in care (CYPiC), children in need (CIN) and SEND young people with SEND. This partnership fosters a holistic approach, resulting in tailored services and collaborative working, leading to innovative solutions like bespoke provision funded through EHCP's.
- Annual Moving into Adulthood careers fairs, since 2022 showcase collaborative efforts among local partners in education, health and social care influencing future plans for 40% of attendees in 2023.

The outcomes that are the most important to children, young people and their parents and carers are understood and planned for

- SLTs work with schools, families and the MDT to signpost and support at transition points.
- Childrens PT and OT work together with schools, families and the MDT to signpost and support at transition points and endeavour to make the transition a smooth one. This is seen in the transition meetings that are held between schools and school to college. Liaison work to ensure the CYP's needs health needs are met which will allow them to continue to access the curriculum.

Support and plans reflect children and young people's ambitions and extend beyond required levels of support (such as the number of hours of support from a particular service) to focus on the planned outcome

- All staff have undertaken the CDC Writing EHCP Training which highlights the need for outcomes that promote independence and reflect the child's and family's views.
- SLTs support school staff in gathering children's views, using AAC where appropriate.
- At the beginning of any CAMHS treatment, GOALS are created collaboratively (Where possible) with the YP and/or their family. These are monitored at 6 session intervals and are inter-changeable as needed.
- Transition clinics established at Penn Hall School as a new initiative however early findings and feedback from users is that a less formal model such as open sessions or coffee mornings may be more engaging for young people (although good attendance from parents). As a consequence of recognising the importance of transition at many different stages there is a multidisciplinary transition task and finish group which has been addressing how to make this seamless for the child/young person at certain life points.
- Childrens PT and OT provide training for children and young people, their families, school staff, and the MDT on programmes that encourage full active functional activities which enable, where possible self-management and future independence. This is identified in the CYP's EHCP where educational staff are educated to implement the interventions so the CYP can access the curriculum. The helps with developing independence for the long-term nature of the condition and giving the CYP control on their journey.
- All Childrens PT and OT staff have completed the EHCP training and undertaken the Writing EHCP Training which highlights the need for outcomes that promote independence and reflect the child's and family's views. Our services can ensure that the input is always CYP focused which will mean that all those involved are working alongside the CYP to benefit their long-term aspirations and prepare them for adulthood and self-management where possible.



Children and young people are supported before and during any point of transition, including when they will no longer be eligible for a service.

- There is a Specialist SLT who has a dedicated role in transition. The role has been in place for 15 months and has proved very successful supporting transition from early years to school age.
- The service is developing support to our CYP transitioning from primary to secondary and there is a Highly Specialist SLT who works with adolescents in secondary, supporting transitions there.
- The 18-25 CAMHS service went live in Wolverhampton at the end of 2023, this has provided a smooth transition of care of treatment for young people who are already a recipient of the Specialist CAMHS Service. Although the service is still in infancy there has been a positive impact with testimonials from YP and families and Clinicians involved.. It had previously been identified that this was a gap in service provision with long waits for Adult Mental Health Services and young adults not receiving support in a timely manner.
- SLTs also work in the Youth Offending Team. Power2 and CAMHS support older CYP with transitions and independence.
- Specialist CAMHS continues to support healthy transitions for our children and young people and value the benefits if continued support is required with appropriately referring to the getting help services. Each degree of complexity is reviewed and triaged appropriately and if Specialist CAMHS threshold is met the case is discussed in MDT and a joint decision is made about which pathway is the most suited.
- The transition CNS is now well established consequently there are now more defined pathways in place, who has been supporting mainstream schools with young people with long term and neurological conditions. A Transition Group has also been established with Compton Care to support people with life limiting conditions
- In response to the number of young people going through the transition process, Community Transition MDT's meetings have recently commenced with positive initial feedback from attendees. However, it has been identified that the structure needs review to segregate the agenda per speciality (e.g. ASC/ADHD/neuro-disability/special schools). This is being progressed with Consultant support. In order to address the waiting lists for 16-18-year-olds transition clinics are being implemented to prepare both the young person/parent and specialities for this process.

- Transition Champions in Planned Care District Nursing services provide positive examples of patients supported onto adult pathways including with palliative care needs. Transition training delivered on Induction Bootcamp for all new starters into adult community services.
- OT and PT have a dedicated clinician who sits on the NCEPOD team and has been updating our processes of transition. Resulting in the OT and PT services being aware of the most up to date evidence to ensure that they are supporting CYP's correctly in the transition processes.
- The OT and PT clinicians prepare CYP for transitions between primary and secondary and will ensure of the child is open to our service that all aspects are in place and suitably performed. If a CYP is still open to our services at the transition to adulthood commencement, then there will be signposting, and links provided to the CYP and their families for this transition. This will ensure that they are aware of the relevant service for when they need them for example the adult learning disabilities service.

From an early age, children and young people develop the knowledge, skills and behaviours necessary to prepare for greater independence and adulthood, including in the areas of further and higher education, employment, more independent living, good health, positive relationships and participation in society

- SLT provide training for school staff and the MDT on communicating with CYP and supporting their SLCN.
- Childrens PT and OT clinicians ensure that they work with the CYP and their families to generate outcomes which are functional and support the development of independence. Children's aspirations along with parent carer aspirations are included in EHCPs. This can be seen in the CYP's EHCP and leads to the CYP being more invested achieving their goals.
- Voice for Parents coffee morning held, with attendance by 0-19 and Community Childrens Nursing Services ensuring a collaborative approach provided. There are several initiatives and services to support clinical transfer from children to adult services. This includes nurse-led transition clinics and coffee mornings for parents, carers and young people to help them to understand the next stage in their care. A youth worker within the transition team works with young people and their families to help manage a range of needs.

What children, young people, young adults with SEND and their families say

The outcomes that are the most important to children, young people and their parents and carers are understood and planned for.

“Should start whilst young so that correct needs are identified.”

“I think the transition period should start earlier and be more about moving these children away from parents taking on all their future care.”

Support and plans reflect children and young people’s ambitions, and extend beyond required levels of support (such as the number of hours of support from a particular service) to focus on the planned outcome.

“There were 72.5% CYP with an outcome of they are able to learn new things. The highest proportion within ages 11-12 with 83.33% of CYP (10 out of 12) answering ‘yes’, compared to Ages 18+ who have the highest number of children saying they’re not learning new things with 40% of CYP (6 out of 15) answering ‘no’.”

“Out of the age groups that were above 11 there was a significant proportion of CYP who answered ‘yes’ to having help to thinking and preparing for their future at 66.1%.”

Children and young people are supported before and during any point of transition, including when they will no longer be eligible for a service.

“Local community groups and charities are singled out for making a difference to the lives of SEND citizens – these include – Give Us a Break; Let Us Play; Include Me Too; Sassy Sensory and Voice4Parents. There are other service areas which are highlighted by multiple respondents – WIASS, Outreach, The Way (SEND sessions) and special schools.”

“(My biggest fear for my child is) Adulthood. I won’t always be here to stand between them and the world.”

One parent comments that the best thing in the last twelve months for their child was: “being able to visit the new school and the teachers visiting his nursery setting prior to starting to build a relationship.”

“It took a year before my daughter settled into college and found the transition from school to college very challenging, especially to her mental health.”

“The challenge has been moving year groups into the next key stage. He took a lot longer to settle into school than in the previous year - his behaviour at home became very challenging and erratic.”

“There needs to be meaningful and targeted Preparation for Adulthood: ‘acceptance and finding a career, relationship and being able to emotionally and financially mature.’”

“Work with the child to gain independence and explain more to the parent carers, I still don’t understand what any of this means and I feel I am on my own with finding things out or I go to the parent carer groups for help, often what should be offered is not and it’s a fight to get the help, it’s all too stressful and complicated.”

“Daily life, she is scared and anxious herself about growing up and independence and what it means, there was no preparation for this at all.”

From an early age, children and young people develop the knowledge, skills and behaviours necessary to prepare for greater independence and adulthood, including in the areas of further and higher education, employment, more independent living, good health, positive relationships and participation in society.

“The overall combined responses show that there was an even proportion of CYP who do or do not know how to make a doctors or dentist appointment (11+ age groups only).”

“CYP chose “family” to find information and advice about sexual health (11+ age groups only answered this question). This received 25 out of a total combined 60 responses (41.67%). There was a relative amount that also answered ‘I don’t know’ to this question at 18%.”

“In relation to CYP aged 11+ who feel they are in control of their life, which was a multiple-choice question, it shows that 43.4% of respondents use buses, trains, or trams without a parent/carer. Of the 43 who answered ‘none’ to using public transport without a parent/carer; a significant proportion answered, ‘they don’t feel safe’ or ‘not allowed’ (This question was multiple choice).”

“Ultimately it starts with parental support but if outside support doesn't continue into adulthood, I feel this is why so many young people and adults with disabilities lose so much faith and hope when it comes to having opportunities and independence.”



2024-2025 Planned Improvements for Area 4

The outcomes that are the most important to children, young people and their parents and carers are understood and planned for

- A key priority for HY5! is making sure young people get the help and support they need as they grow up and that this is clearly defined and can be easily accessed. The Partnership will establish clear actions around transitions and preparation for adulthood which are set out in the strategy and improvement plan, agreed with HY5!, and publish pathways on the Local Offer

The local area plan, will provide opportunities to formalise a governance group for preparation for adulthood across the City, ensuring all service areas have a lead representing their area of business and a clear preparing for adulthood action plan to captures actions across all partners.

Support and plans reflect children and young people's ambitions, and extend beyond required levels of support (such as the number of hours of support from a particular service) to focus on the planned outcome

- Consultations will take place with SENCOs to review of outcomes of CYP with an EHCP ensuring that it captures the support and ambitions in schools beyond the annual review. This will enable clear evidence of how effective the support offered is and support the monitoring of children and young people's progress against their outcomes and aspirations.
- Pre-supported living pathways from year 9 will be established based on eligible social care needs within the local authority, with the support of Impower Consultancy.
- The NHS Ready Steady Go programme is not meeting the needs of the young people of families in special schools, and work is taking place with parents and the special school on a bespoke transition programme that will meet the young people's needs. In addition, the 'WHAT' document is being explored (developed by Birmingham Community Transition team) to share and implement best practice.

Children and young people are supported before and during any point of transition, including when they will no longer be eligible for a service

- The CWC transitions webpages will publish the 'Beyond School' transition pathway which has been developed as part of the Transitions & Preparing for Adulthood workgroup, providing information on learning and employment, and health and wellbeing.
- Further work around annual reviews needs to be established to ensure every child and young person feels the impact of that their voice is supported in sharing their aspirations and preparation for adulthood. The sections in the most recent EHCP audits show 89% good or outstanding on section E and 75% Good or outstanding in section F, however the work required is to ensure this is reflected in young people's feedback.

From an early age, children and young people develop the knowledge, skills and behaviours necessary to prepare for greater independence and adulthood, including in the areas of further and higher education, employment, more independent living, good health, positive relationships and participation in society

- The Local Offer is currently in development to support families with autonomy, offering self-service advice regarding PfA. This is yet to be published and further work is required to establish clear routes and pathways for Post 16,18 and post 25 transitions between services through the development of the PfA protocol across Health, Education and Social Care.
- Feedback is being gathered to consider an extension of the health passports and having a 'All about me...at transition'. The feedback will be gathered from young people who have recently transitioned into adult services via electronic and face to face methods.
- Following successful evaluation of the Transition Clinical Nurse Specialist the post has now been made permanent. Due to young people saying they preferred a less formal approach to the transition clinics at Penn Hall School, the clinics are under review, and more open sessions and coffee mornings are under consideration.

- To address the waiting lists for 16–18-year-olds transition clinics are being established in order to prepare both the young person/parent and specialities for their appointments.
- There are challenges with funding once a person transitions particularly around consumable order and supply when not CHC funded. Work needs to be established through Joint Commissioning and supported by the DfE’s SLIP support programme.
- Challenges continue with the increase in demand for Specialist CAMHS both for Mental Health Needs and Neurodevelopmental presentations and the consequent wait for support and treatment. Whilst CAMHS have successfully reduced the wait for assessment, there is concerted work in progress to reduce the time that families are waiting following on from assessment to commencing therapy with an allocated professional or in a group.



Area 5: Children and Young People with SEND are Valued, Visible and Included in Their Communities

Strengths	Areas for Development
<ul style="list-style-type: none"> • There are a range of exclusive and inclusive SEND leisure and community activities available within the City of Wolverhampton. • Family Hubs are available across the City, at our eight Family centres. Families can access support via attending the reception or via phone. • #YES Board is involved in identifying what activities children and young people want to see available in their city through an annual survey. Young people work with the HAF team to identify suitable provision and awarding of funds through regular grant making days. • Through programmes such as Yo! Active; Swimming Lessons; Pathways to employment and Inclusive Libraries and Community Centres have been introduced. • WV Active are working with HY5! Youth Forum, through the HY5! On the move project. This project looks to assess the accessibility of venues across Wolverhampton from a young person's point of view. • OT and PT services can provide, where appropriate signposting to disability sports to enable full participation in activities. • SLT are working with One Wolverhampton to ensure preschool children's SLT needs are met at a Universal, Targeted and Specialist level in the local community through working with Family Hubs meaning that established best practice to meet the needs of the CYP is utilised, embedded in the community and with support and agreement with all stakeholders. 	<ul style="list-style-type: none"> • A new Local Offer is under development, which is being shaped with feedback received from children, young people and their families. • The Framework for the short breaks outreach and residential offer is being reviewed. • The directory element of the Local Offer will be improved in the second phase of developing the website. This will be done by requesting information from all service providers across the city to be filtered into relevant sites such as Yo Wolves!, Wolves Workbox as well as the SEND Local Offer. • The updates accessibility strategies are to be published on the new Local Offer to give clear advice and guidance. • A comprehensive training offer and list of advice services will be developed and made available to all staff across Wolverhampton's universal services to increase access, and support confidence when delivering services to children and young people who require additional support. • The work being developed between schools and specialist services within the LA regarding the Inclusion Framework will increase the opportunities for children and young people to continue to access education in their local area. • Consideration will be given as part of the Joint Commissioning development to enable advisors to support universal services to young people with physical and sensory needs including parks, leisure offers as they are being developed.

What and How we Know About the Impact of Our Arrangements for Children and Young People with SEND

Children and young people and parents and carers understand what community activities are available

- There are a range of exclusive and inclusive SEND leisure and community activities available within the City of Wolverhampton. The provision is available on the directory element of the Wolverhampton SEND Local Offer and Yo! Wolves website. The Local Offer publishes this on the WIN platform setting out the support available to help children and young people with SEN or disabilities and their families. Whilst the site is statutory compliant, feedback from Voice4Parents survey shows that this is not an easy site to navigate and redesign of the site is in progress.
- Family Hubs are available across the City, at our eight Family centres, and a SEND Centre of Excellence at our Brickkiln Community Centre. Families can access support via attending the reception or via a phone call. Young people and parents have been involved in the accessibility of the hubs, the scoping and what services will be provided. Their feedback has been and will continue to be incorporated to any adjustments, and amendments to the service Family Hubs | City Of Wolverhampton Council.

Children and young people are supported to participate, where appropriate, in activities, and to make friends and develop positive relationships

- #YES Board is involved in identifying what activities children and young people want to see available in their city through an annual survey. Young people work with the HAF team to identify suitable provision and awarding of funds through regular grant making days.
- The City of Wolverhampton Council have been working collaboratively across departments to co-produce a community offer for children, young people and their parents to ensure there is an inclusive provision offer. Further information is available in the Preparation for Adulthood Community Inclusion Briefing Paper, which sets out information about outcomes for children and young people in relation to community inclusion and participation in society.
- Whilst work is developing around the community offer, there are various projects that are being developed using the Department for Education funded HAF programme and council investment through programmes such as Yo! Active; Swimming Lessons; Pathways to Employment; Inclusive Libraries and Community Centres.

- WV Active are working with HY5! Youth Forum, through the HY5! On the move project. This project looks to assess the accessibility of venues across Wolverhampton from a young person's point of view. The group have reviewed WV Active Bert Williams and have provided a series of recommendations for improvements which are featuring in the WV Active Service Improvement Plan. The group will continue to review the WV Active sites and provide recommendations for action in how services can be improved for children and young people with a special educational need and/or disability.
- The Framework for the short breaks outreach offer is being reviewed. This is being co-produced with procurement, commissioning and social care. The outreach model will also be aligned with the FFCP Early SEND offer and scoping will be co-produced with Voice4Parents for an inclusive outreach offer. The Short Breaks workstream is being led by the Head of Service for Children and Young people in care.
- Community events are regularly held by the Sensory Inclusion Service to support and engage young people, and their families within their local community.

Children and young people are supported to develop their confidence, resilience and knowledge, so that they can participate in universal and specialist activities as appropriate

- HY5! is part in the Young Inspector Programme who ensure that activities and providers are supportive to children and young people with additional needs and disabilities and evaluate the provision on offer. From June 2023 - June 2024 a total of 74 young inspector visits have taken place with all HAF and YO holiday activities. 17 of these visits were with SEND Specialist provisions covering 7 separate provisions. The average score for the SEND specialist provision was 5 which is top score which was for enjoyability of the provision and the ease of the ability to engage with the activity
- Autism parent mentors provide support for other parents of children who are autistic. Parent workshops include the Early Bird and Teen Life for parents who have a child who is autistic or awaiting an assessment.
- British Sign Language courses are held by Sensory Inclusion Service who offers the services for free to families, these have been well received to support young people to raise their confidence.

Children and young people and parents and carers understand what community activities are available

- SLT assist children and young people and parent carers understand what community activities are available.

Children and young people are supported to participate, where appropriate, in activities, and to make friends and develop positive relationships

- OT and PT services can provide, where appropriate signposting to disability sports to enable full participation in activities. For example, PT service has signposted a few CYP's to access wheelchair basketball where they can be fully included in a sport and compete against other CYP's on par.
- Children and young people are supported by SLT to participate, where appropriate, in activities, and to make friends and develop positive relationships
- The ICB will consider the results of the CYP survey around health services and develop appropriate actions to make improvements.

Children and young people are supported to develop their confidence, resilience and knowledge, so that they can participate in universal and specialist activities as appropriate

- Children and young people are supported by SLT to develop their confidence, resilience and knowledge, so that they can participate in universal and specialist activities as appropriate. This is demonstrated by SLTs signposting families to community activities and encourage participation. Resulting in families having increased opportunity to support CYP to develop their communication skills as part of universal services.
- SLT are working with One Wolverhampton to ensure preschool children's needs are met at a Universal, Targeted and Specialist level in the local community through working with Family Hubs meaning that established best practice to meet the needs of the CYP is utilised, embedded in the community and with support and agreement with all stakeholders.

What children, young people, young adults with SEND and their families say

Children and young people and parents and carers understand what community activities are available.

“The charities and community groups mentioned by parents enable family members to access their activities whether on their own, with parents or with siblings.”

“There needs to be more support and services for SEND families, especially to do with mental health and more SEND friendly leisure for all family members to help families to go out more often and to help their SEND child to explore the environment better.”

“What is there to access? No swimming that is accessible - although V4P managed to offer some accessible swimming in holidays... no parks - uneven, crap parking and no accessible/safe equipment, no centres to go to - no teen groups / no activities.”

“My child is 15 so too big for a baby swing but needs the same safety as one or even a net swing he can lye on. Inclusive Playgrounds are a must for Wolverhampton parents shouldn't be having to travel out of area to find accessible Playgrounds Voice for parents activities that bring send families together are very important to my family as days out are very limited.”

Children and young people are supported to participate, where appropriate, in activities, and to make friends and develop positive relationships.

“There were multiple choice questions around the outcome where CYP feel happy. Across all age groups respondents selected ‘gaming’ as the hobby, activity/club they most take part in at 24.44% (44 out of 180 responses). There was a notable number answering they do not take part in any hobbies, activities, or clubs at 12.78% (23 responses).”

“Regarding CYP who do take part in activities, there was an additional multiple-choice question, where a significant proportion of CYP said, ‘on my own’ (27.95%).”

“CYP would go to ‘family’ for information/advice about friendships and relationships at 44.32% (78 out of 176 responses). Along with ‘family’, there was a significant proportion selecting ‘friend’ at 14.77% for this multiple-choice question.”

“HY5! has been on the move visiting places and spaces to see how inclusive and accessible they are. We hope this inspires change where it's needed and helps young people with additional needs and disabilities feel more confident about using places in our city. – HY!5 Annual Report.”

“HY5! say that having places to go and spend time is important. Places and spaces that are accessible and inclusive can make us feel happy, stay healthy, make memories and make new friends.
– HY!5 Annual Report.”

“The whole family often feels isolated because they are unable to access activities as a family in line with non-SEND families.”

“There are many activities we cannot access in Wolverhampton. The ones we have been able to access is with Voice4Parents for the whole family and they meet the needs for my children.”

“I would really like send groups for my child so he can meet other like-minded children.”

“Wolverhampton is not an inclusive City and he is being excluded from an ordinary life.”

“Despite claiming to be inclusive, most leisure services are not open to accommodating those with additional needs.”

Children and young people are supported to develop their confidence, resilience and knowledge, so that they can participate in universal and specialist activities as appropriate.

“There was a significant proportion of CYP that feel safe at ‘home’ and at ‘school’; 79.4% of respondents answered either. The least chosen response was ‘public transport.’”

“The majority of CYP felt they belong at ‘home’ followed by ‘school’; the proportion selected was 78.4%. There was a small proportion of CYP that selected ‘other’ or ‘none’ as their choice of where they feel they belong.”

“He enjoys spending time with his carer which allows him to access the community.”

“My son has to come home for lunch every day as he has found ways to try and escape and he will also not tolerate sitting down and eating with his peers and not enough staff to be able to have someone try and sit with him.”



2024-2025 Planned Improvements for Area 5

Children and young people and parents and carers understand what community activities are available

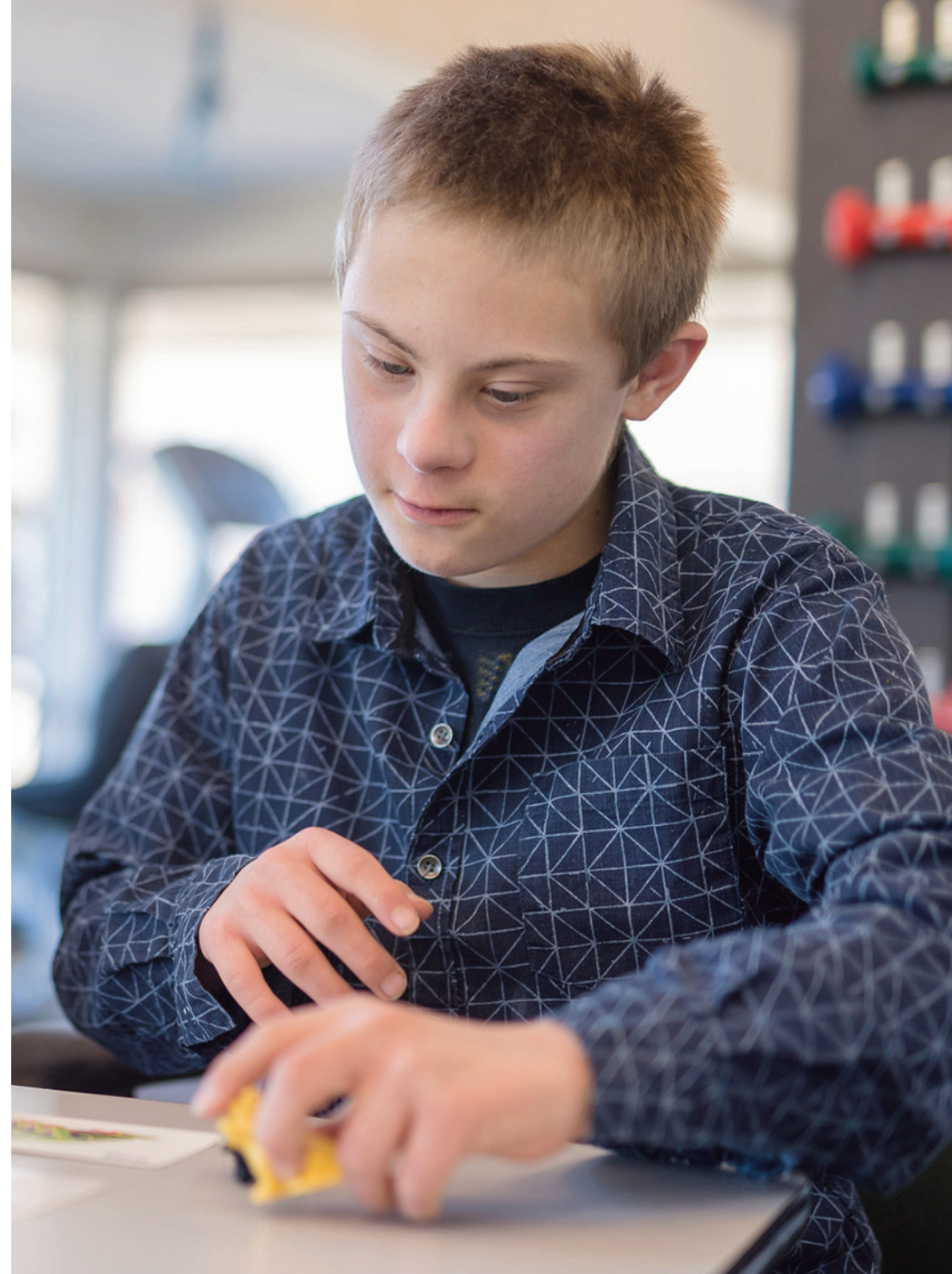
- A revised Local Offer website is under development, which is being shaped with feedback received from children, young people and their families. This will provide an improved experience for children, young people, parents and carers to access information about community activities that are available in Wolverhampton
- The updated accessibility strategy will be published on the revised Local Offer to give clear advice and guidance to children, young people, parents, carers and professionals.
- The directory element of the Local Offer website will be improved whilst the website is under development. This will be completed by requesting information from all service providers across the city to be filtered into relevant sites such as Yo Wolves!, Wolves Workbox as well as the SEND Local Offer. The directory element of each site will be reorganised to provide a better user journey for finding services on offer. Further collaboration work will take place to ensure directory searches are relevant and user friendly.

Children and young people are supported to participate, where appropriate, in activities, and to make friends and develop positive relationships

- A comprehensive training offer and list of advice services for all staff across Wolverhampton's universal services, will be established and published on the local offer. This will increase access to self-directed learning and support services which will support staff confidence when delivering services to children and young people who require additional support.
- As part of new planning applications and when new commissioning arrangements are made, a process to consider provisions for accessibility for people who have physical and/or sensory needs will be put in place.
- HY5! are in the process of planning to visit more spaces and buildings as part of the 'HY5! On The Move' project to make sure they are accessible and inclusive.
- Preparation for adulthood will consider community as one of the area improvement plans workstreams, ensuring young people are supported to access activities locally where they are able to make friends and build positive relationships.

Children and young people and parents and carers understand what community activities are available

- Children and young people are supported by SLT to develop their confidence, resilience and knowledge, so that they can participate in universal and specialist activities as appropriate. This is demonstrated by SLTs signposting families to community activities and encourage participation. Resulting in families having increased opportunity to support CYP to develop their communication skills as part of universal services.
- SLT are working with One Wolverhampton to ensure preschool children's needs are met at a Universal, Targeted and Specialist level in the local community through working with Family Hubs meaning that established best practice to meet the needs of the CYP is utilised, embedded in the community and with support and agreement with all stakeholders.



Area 6: Leaders are Ambitious for Children and Young People with SEND

Strengths	Areas for Development
<ul style="list-style-type: none"> • The local area partnership’s strategic priorities have been created taking into consideration feedback from the Wolverhampton Parent Carer Survey and the survey for children and young people with SEND. Results of the consultation were very positive from both parent carers and professionals that work with children and young people with SEND. • The partnership continually monitor the effectiveness of its plans and interventions. The Local Authority hold monthly performance meetings that enables leaders to be aware of performance against the statutory duties and responsibilities of individual services. • Strong leadership is evident in health with the ICB having an Executive Lead for SEND who is the Chief Nursing Officer and Deputy Accountable Officer. Each Acute provider Trust has recently been asked to nominate an Executive Lead for SEND within their own organisations. • A dedicated Designated Social Care Officer (DSCO) is in post to support all aspects of SEND for children in City. • Through a variety of activities such as reviews, annual conversations and core visits as the school improvement team regularly provides support and challenge to leaders around provision for children with SEND, thereby raising the profile of SEND and requiring leaders to evaluate provision and its effectiveness. • The Virtual School EET Advisors have been recruited to and provide additional levels of bespoke support for young people with EHCPs and additional vulnerabilities, helping young people to fulfil their potential and to overcome barriers, in line with their plans and ambitions. 	<ul style="list-style-type: none"> • The SEND and Inclusion Strategic Implementation plan will be published from September 2024. Leads and subsequent participants of working groups will be identified for each priority area to enable work to progress in line with the key performance and outcome indicators to be able to monitor progress. • Oversight of delegated responsibilities will continue to be monitored by SEND and Inclusion Partnership Board and relevant governance groups within the local authority, ICB and health care trusts. • Understanding if there are any additional areas where a focus is needed, and where data is readily available to support this. • Development of a SEND (QA) Quality Assurance Framework to continue to audit the quality of EHCPs and other QA activity.

What and How we Know About the Impact of Our Arrangements for Children and Young People with SEND

Leaders have an ambitious strategy that defines the shared outcomes they will work collectively to achieve for all children and young people with SEND, and they embed an aspirational culture of high expectations and quality across services and provision.

- The SEND & Inclusion Partnership Board is a well-established partnership with embedded relationships across, Health, Care, Education, Strategic Parent Carers & Young Peoples representatives, Public Health, Voluntary Sector and many more. The governance of this group is co-chaired with the ICB and Local Authority representatives, and Vice Chaired by our Parent Carer Forum, Voice4Parents.
- The local area partnership is extremely ambitious for all of our children and young people including those with special educational needs and disabilities and strives to provide appropriate support and services across the partnership from the moment needs are identified through early years and all phases of learning including preparation for adulthood and independence. Our strategic priorities have also been created through taking into consideration feedback from the Wolverhampton Parent Carer Survey and the survey for children and young people with SEND. Results of the consultation were very positive from both parent carers and professionals that work with children and young people with SEND. Over 85% of the respondents agreed or strongly agreed with the 5 priorities set out in the strategy and over 80% agreeing with how it would be delivered.
- The partnership continually monitor the effectiveness of its plans and interventions, ensuring these are meeting the needs of the children and young people in the City. This is monitored for effectiveness through the use of outcome measures as defined in the SEND Partnership Dashboard and the wider service key performance indicators shown within Annex A.

Leaders understand their responsibilities and accountabilities, including their statutory duties and their individual responsibilities in the wider area strategy

- The ethos and multi-agency training for Restorative Practice offers opportunities for the SEND & Inclusion Partnership Board and subsequent working groups that operate, to have a shared commitment and understanding of the partnerships interdependencies and varied strategic responsibilities across the partnership. This helps to acknowledge areas of co-delivery and limitations within working groups.
- The Local Authority hold monthly performance meetings that enables leaders to be aware of performance against the statutory duties and responsibilities of individual services. Where areas of practice impact the delivery of the Area Send and Inclusion Plan, briefing notes are shared with the board to help inform progress such as ENCNA performance.
- There is good representation within the Quality of EHCP auditor cohort from across the SEND partnership showing that partners are accountable and committed to evaluating and improving the quality of EHCPs.
- West Midlands Local Authority Regional Groups and National groups are well utilised to help inform and shape practice around areas of SEND, Data, Sufficiency and hospital education for example.

Responsibilities are delegated in line with leaders' legal duties and there is strong oversight of these resulting activities

- Leaders have invested in a strategic SEND lead for children and young people supported by Early Help and Social Care. A dedicated Designated Social Care Officer (DSCO) is in post to support all aspects of SEND for children in City. Leaders support the implementation of SEND champions across all children's services areas in the local authority, to drive SEND improvement, and assist all children and young people are supported by trained workers, that can also support their transition to adulthood. The DSCO also supports leaders with their SEND knowledge and delivers training with and to extended managers within the local authority. Thus, supporting a SEND informed approach to practice from leaders through to workers that are directly supporting families. This includes leaders investing in the Disabled Children and Young Person's Service, providing additional staffing in 2023-2024 to reduce delays experienced by families for their needs assessments, and over all service provision. The improvements are evidenced in the data as all statutory duties have significantly improved.

Processes for making decisions are structured so that the leaders responsible can swiftly agree to the changes that are required to improve services

- Through a variety of activities such as reviews, annual conversations and core visits as outlined in the Education Excellence Strategy, 2021-2024, services such as the school improvement team regularly provides support and challenge to school and local authority leaders around provision for children with SEND, thereby raising the profile of SEND and requiring leaders to evaluate provision and its effectiveness.
- SEND is well resourced within the ICB with a dedicated Designated Medical Officer, Designated Clinical Officer, SEND Senior Programme Lead and Administrator which supports health compliance and strong governance arrangements. Each 'Place' (Local Authority area) has an identified commissioner to support SEND / joint commissioning.
- Information gathered by the school improvement team is regularly shared with local authority leaders of SEND and Inclusion to help identify key challenges and possible solutions with regards to the current challenges faced by leaders in schools with regards to SEND provision, including funding, staffing and meeting the needs of pupils with more complex needs.

Leaders challenge themselves and each other to improve experiences and outcomes for children and young people with SEND

- Childrens and education services, such as the Virtual School and Inclusion Service rigorously tracks attendance, attainment and progress, and supports the Personal Education Plan (PEP) process, which includes ensuring that SEND issues are identified, assessed and appropriate support provided. The Virtual School EET Advisors have been recruited to and provide additional levels of bespoke support for young people with EHCPs and additional vulnerabilities, helping young people to fulfil their potential and to overcome barriers, in line with their plans and ambitions. Two full-time advisors were recruited in April 2023 utilising Wolves@Work funding. Their support ranges widely, from skills assessments to benefit calculations and claims, assistance with travel training, EET applications, interview preparation and supporting to interviews. To date (Feb 2024), EET Advisors have monitored and supported 182 young people with SEND, from year 11 to year 14, of which 132 (73%) are now in education, employment and training. 57 of those young people were either NEET or at high risk of NEET at the start of intervention, and of that 57, 43 were in EET at the end of the involvement. Advisors are also currently supporting 66 vulnerable young people with SEND in year 11 with post-16 EET destinations.

Leaders have an ambitious strategy that defines the shared outcomes they will work collectively to achieve for all children and young people with SEND, and they embed an aspirational culture of high expectations and quality across services and provision.

- SEND has been included in the ICB Strategy and Annual Report.

Leaders understand their responsibilities and accountabilities, including their statutory duties and their individual responsibilities in the wider area strategy

- There is ongoing work in the SLT service with one Wolverhampton, SENSTART, Public Health, NHS Services and the ICB ensure that overarching outcomes for CYP with SEND are shared. Which will contribute to the identification of good practice, appropriate commissioning and the best use of resources.
- All SLT staff are aware of the legal duties in the area of EHCPs through accessing the CDC training package annually, so that the quality of SLT contributions to the EHCP process remains at a very high standard.

Responsibilities are delegated in line with leaders' legal duties and there is strong oversight of these resulting activities

- Strong leadership is evident in health with the ICB having an Executive Lead for SEND who is the Chief Nursing Officer and Deputy Accountable Officer. Each Acute provider Trust has recently been asked to nominate an Executive Lead for SEND within their own organisations. This will ensure that the status of SEND within our health organisations is fully recognised and considered to make improvements.
- All CAMHS referrals are triaged via the Single Point of Access and passes to the appropriate part of the service for further assessment of need. Should signposting or other sources of support be identified as being helpful or appropriate to the family this information/referral can take place whilst children and families are awaiting assessment. If reasonable adjustments are required such as adaptations / home or school visits ensuring that this is completed considering CYP and their family / carers wishes and preferences.
- There is strong leadership and membership in the SEND Health Steering Group across all health areas.

Processes for making decisions are structured so that the leaders responsible can swiftly agree to the changes that are required to improve services

- The ICB has a range of multiagency panels to ensure, as a partnership, the right support in the right place at the right time is provided, this includes an equipment panel and a Children and Young Peoples Continuing care/Transition Panel.

Leaders challenge themselves and each other to improve experiences and outcomes for children and young people with SEND

- The SLT Service continually evaluating its work and being open and responsive to challenge. For example, following discussion with a parent, there is a co-produced a Wolverhampton Speech and Language Therapy pathway for Childhood Apraxia of Speech (CAS).

What children, young people, young adults with SEND and their families say

“Mainstream Schools are not equipped to manage SEN children even with EHCPs they are at full capacity and understaffed.”

2024-2025 Planned Improvements for Area 6

Leaders have an ambitious strategy that defines the shared outcomes they will work collectively to achieve for all children and young people with SEND, and they embed an aspirational culture of high expectations and quality across services and provision.

- The SEND and Inclusion Strategic Area Improvement Plan to be published. Leads and participants of working groups will be established for each priority area enabling work to progress in line with the key performance and outcome indicators to be able to monitor progress.
- Priority 3 of the SEND and improvement plan will focus on establishing a clear quality assurance processes that will show that the available services are good and do what they need to, as well as establishing a shared training offer that supports schools and services to test and learn together to help improve support to young people.

Leaders understand their responsibilities and accountabilities, including their statutory duties and their individual responsibilities in the wider area strategy

- The governance structure for SEND and Inclusion Board will be published on the revised local offer within the strategic documentation, which will help to offer clarity around where decisions are made about SEND and Inclusion offer in the city.
- Priority 3 of the area plan (a skilled workforce and excellent leadership) and Priority 5 (a financially sustainable system delivering improved outcomes) will address opportunities to develop shared systems that will help support needs at an individual in schools and across services.

Responsibilities are delegated in line with leaders' legal duties and there is strong oversight of these resulting activities

- Oversight of delegated responsibilities will continue to be monitored by SEND and Inclusion Partnership Board and relevant governance groups within the local authority, ICB and health care trusts..

Processes for making decisions are structured so that the leaders responsible can swiftly agree to the changes that are required to improve services

- A self-evaluation update cycle will be established throughout the life of the strategy and beyond, to create opportunities for any new priorities to be considered within the board where new areas of need arise.
- A joint commissioning dashboard will be established with the support of the Data and Analytics Team supporting the tracking and potential changes in areas of focus for commissioning requirements.

Leaders challenge themselves and each other to improve experiences and outcomes for children and young people with SEND

- Establish a communication plan across relevant boards (i.e. Autism, SEND & Inclusion, Joint Commissioning) to ensure that consultations are aligned across all partners agreeing shared parameters for consultations where possible.
- Establish a SEND Quality Assurance Framework to capture the audit activity across the partnership, offering clarity of processes, reduce duplication, and enable shared involvement of QA activity.
- Work will be established with parents and special schools on a bespoke transition programme on account of the Ready Steady Go Programme not meeting the current needs.



Area 7: Leaders Actively Engage and Work with Children, Young People and Families

Strengths	Areas for Development
<ul style="list-style-type: none"> • The WSOA workstream leads attend HY5! meetings regularly to gather experiences and feedback on work taking place in the key priority areas. This will be replicated with delivery of the SEND and Inclusion Implementation plan delivery, particularly around the 5 priority areas for children and young people. • HY5! is Involved in the Preparing for Adulthood workstream to the journey of young people as they move into adulthood. They shared ideas for a co-production day and an idea to create a game that practitioners could use when supporting young people to think about their future. • During Spring term 2023, workshops were held within Special schools and with HY5! to raise awareness of the Local Offer and gather the view of children and young people around branding, content and layout. • The local area partnership continue to work well with Voice for Parents, and they have ongoing Keep in touch meetings with HOS, Director of Children Services, DSCO, OT PT and SLT. • The Participation Team also facilitates the wider voice for young people and adults in Wolverhampton including the Youth Council, Children in Care Council, Care Leavers Forum, #YES Board, Guardians and Families on Board. • PCF feedback is the top of the agenda on the SEND Health Steering Group. • In Wolverhampton there is a co-produced working group called CAMHS Ambassadors, this is a combination of young people who have or are accessing the service. 	<ul style="list-style-type: none"> • Develop an understanding of engagement, consultation, and co-production (what this is and when this would and would not apply) through training for professionals. • Improve processes for sharing of information between HY5! and SEND and Inclusion Partnership Board including consideration of HY5! Annual report at SIPB. • HY5! will develop plans to ensure more young people get to have their voices heard and be involved in things that affect them. • Supported Internship to champion youth voice to be jointly commissioned. • Increased coproduction of service specifications by commissioning/joint commissioning to capture views of CYP & families and professionals prior to tender of services. • ICB and services to work on regular newsletters with our PCF, to ensure parents/carers are kept informed regarding waiting times, initiatives, improvements within services.

What and How we Know About the Impact of Our Arrangements for Children and Young People with SEND

Leaders consider the specific needs of groups of children and young people with SEND, and how best to engage them in co-production.

- HY5! are the partnership's strategic young person's SEND leads who are proactive in arranging opportunities for co-production activities that link with the SEND and Inclusion Board's activities and priorities. They are embedded in all levels of activity that take place including development of questionnaires, contributing to strategies, plans, quality assurance, and directly delivering against the priorities. Examples of this can be seen in the annual reports that are presented to the Board.
- HY5! are currently involved in offering guidance for the development of a co-production day for young adults that will support young people to think about their future around Preparation for Adulthood, and how young people might want to share their journey of the Education Health and Care Plan process and support they receive.
- The Youth Engagement Team facilitates the wider voice for young people and adults in Wolverhampton including the Youth Council, Children in Care Council, Care Leavers Forum, #YES Board, Guardians and Families on Board. These groups work with the council and partners to improve the offer for care experienced young people holiday activities and family hub offer.

- HY5!'s comments: We know what it's like to have additional needs and disabilities. We talk about things that are important to us and share our thoughts and ideas with others that can help. We work together to make changes where it matters most, making better futures for young people. The Co-production and Youth Engagement Team help at HY5! meetings. Participation Officers make sure important information is shared with us and how it might affect us. They help the Chair and Vice Chair of HY5! to plan and organise our work and activities. We keep the values and principles of Co-production at the heart of everything we do.

Leaders ensure that decisions relating to services are appropriately shaped by children and young people's needs, experiences, ambitions and outcomes

- The partnership's SEND Self Evaluation, SEND & Inclusion Strategy and Area improvement Plan are co-produced with all stakeholders. HY5! And Voice4Parents have been actively involved to ensure the most recent feedback from the user surveys and group work feedback is captured, ensuring that the plan is developed in line with this and enabling coproduced priorities and actions with established with our strategic voice partners.

- Young people actively take part in SEND strategic development and implementation through the HY5! Group and HY5! Website, this has led to HY5! developed programmes such as the ‘Inspiring Change’ training which the SEND and Inclusion Partnership Board received during July 2023.
- During spring term 2023, workshops were held within special schools and with HY5! to raise awareness of the Local Offer and gather the view of children and young people around branding, content and layout. Consideration was made about timing, accessibility of content, age and ability appropriateness for each of the sessions. The workshops resulted in adaptation of the design and content of the website to incorporate their feedback.
- Voice4Parents have a representative who participates in the Quality of EHCP audits to ensure that young people’s and parents views are captured. Parents/carers of children with plans are also contacted directly to gain feedback as part of the audit process.
- HY5! were involved in creating a survey for children and young people with SEND and will be involved in evaluating the feedback and identifying priorities.

Leaders give feedback to children, young people and parents on changes they have made to their area’s services, and explain where change is not possible and why

- The WSOA workstream leads attend HY5! meetings regularly to gather experiences and feedback on work taking place in the key priority areas. This will be replicated with delivery of the SEND and Inclusion Implementation plan delivery, particularly around the 5 priority areas for children and young people.
- A SEND and Inclusion Partnership Newsletter was launched in 2022 to share progress on strategic plan delivery with children, young people and families. This is shared through various groups including through HY5!, Voice4Parents, WIASS and the Local Offer.
- Keeping in Touch meetings are held weekly with Voice for Parents, and leaders across Education, Health and Social Care to enable regular updates around progress.

Leaders consider the specific needs of groups of children and young people with SEND, and how best to engage them in co-production

- CAMHS utilise Goal Based outcomes to ensure that our evaluation of the service is driven by the co-produced hopes and needs of the family. There is an advertised feedback system via the Service Experience Desk and an ongoing relationship with Voice4Parent and meet regularly each month to explore feedback shared via their group.
- OT and PT services feedback questionnaire was designed in collaboration with Voice4Parents. Which is good because it ensures that it embraced different viewpoints/perspectives and ensured that the important views were not overlooked. It allows constructive feedback and is used for continuous improvement to the benefit of the CYP and their families/ carers.
- SLT work with Experts by Experience to develop pathways for specific services meaning that they have a boarder understanding of what is needed, not just relying on professional assumptions.

Leaders ensure that decisions relating to services are appropriately shaped by children and young people's needs, experiences, ambitions and outcomes

- PCF feedback is the top of the agenda on the SEND Health Steering Group.
- In Wolverhampton there is a co-produced working group called CAMHS Ambassadors, this is a combination of young people who have or are accessing the service. CAMHS Ambassadors group meet 6 weekly and work on various projects.
- Health are currently finalising an action plan based on the annual survey completed by our parent carer forum. The survey was shared with Health SEND Steering Group members. This had led to services within health (SLT, OT/PHYSIO, 0-19 team, Community Paediatrics and Commissioning) outlining and agreeing actions following the feedback, which will help inform the overall SEND action plan. The PCF PfA survey has also been shared with health professionals to evaluate and establish if there are any outstanding actions that need to be added to the action plan.

- SLT continue to meet with the child, young person and family in order to see services through their eyes so they can constantly evaluate and improve the service offered.
- OT and PT service meet with Voice for Parents to ensure that there is collaboration in information development and to ensure that there is transparency for information sharing regarding service updates. So that the service can ensure that it is continually meeting the needs of the CYP and their families/carers to make their journey a more streamlined one.
- SLT work closely with Voice for Parents and other groups to co-produce ideas, leading to agreed outcomes and clarity of expectations.
- Transition clinics are established at Penn Hall School as a new initiative, however early findings and feedback from users is that a less formal model such as open sessions or coffee mornings may be more engaging for young people (although good attendance from parents).

Leaders give feedback to children, young people and parents on changes they have made to their area's services, and explain where change is not possible and why

- The DMO/DCO/Senior Programme Manager for SEND meet monthly with Voice4Parents to discuss progress around the SEND Health actions plan, key issues and themes are also discussed.
- Health teams attend coffee mornings with Voice4Parents regularly to discuss parent/carer feedback and update on key areas of work and pathways.
- Health updates are produced at least annually to form part of Voice4Parents newsletters.

What children, young people, young adults with SEND and their families say

Leaders consider the specific needs of groups of children and young people with SEND, and how best to engage them in co-production.

“There were 40 responses to the question ‘Do you want to know more about HY5?’ all of which were aged 0-10. Of these 40 responses, 23 CYP responded with ‘yes’ (57.50%) compared to 17 CYP who responded ‘no’ (42.50%).”

“There needs to be timely engagement with the SEND community so they can access activities in their local community including parks, leisure centres etc to make sure they are SEND appropriate and all staff have a clear understanding of what the child’s needs are and how they can be supported in sessions. Up to date information needs to be available to families. Holiday Activities Fund is always accessible for SEND families, and therefore their needs to be targeted and bespoke for SEND families that can meet young people’s needs with an EHCP (up to 25).”

Leaders ensure that decisions relating to services are appropriately shaped by children and young people’s needs, experiences, ambitions and outcomes.

“Strategic and family level co-production need to provide a clear understanding of true co-production, mutual respect, whole family approach and being heard including during EHCP drafting process.”

2024-2025 Planned Improvements for Area 7

Leaders consider the specific needs of groups of children and young people with SEND, and how best to engage them in co-production

- Whilst co-production is strong across the partnership, further guidance will be established to inform where and when additional participation activities may take place. This will help families to understand engagement, consultation, and co-production, including what this is and when this would and would not apply, through guidance which will be published on the Local Offer.
- As part of the quality assurance framework, the gathering of children/young people's views on the quality of EHCPs will be established.



Leaders ensure that decisions relating to services are appropriately shaped by children and young people's needs, experiences, ambitions and outcomes

- Establish a more formalised, recurring annual programme of engagement for sharing information between HY5! and the wider SEND and Inclusion Partnership Board so HY5! and board members are clear on dates so they can plan activities where needed in advance.
- Establish funding and jointly commission a Supported Internship to champion youth voice within partnership meetings.
- HY5! will establish a plan to engage more young people to have their voices heard and be involved in things that affect them.
- Joint commissioners across the partnership will establish processes to increase the coproduction of service specifications to capture views of CYP & families and professionals prior to tendering services.
- Local Authority Education Support Services will further establish processes to ensure the voice of the child is consistently captured within case notes and assessments across all areas.
- SLT will increase coproduction with groups and individuals as an outcome which has been planned for the next 12 months which is included in the Service Plan.

- OT/PT will continue to meet with MDT and Voice for Parents to ensure that there is sharing of information and collaborative practice within the services moving forwards. This will allow different viewpoints/perspectives to be heard and ensure that the important views are not overlooked. It allows constructive feedback and continuous improvement to the benefit of the CYP and their families/carers.

Leaders give feedback to children, young people and parents on changes they have made to their area's services, and explain where change is not possible and why

- The user testing of the Local Offer website will take place early 2024 with children, young people, parents and local voluntary organisations. Their feedback will help shape the Local Offer development. A 'You Said, We Did' will be published to reflect the changes made due to community having their say.
- ICB and services will establish a regular newsletter with our PCF, to ensure parents/carers are kept informed regarding waiting times, initiatives, improvements within services.
- Begin publication of a 'You Said, We Did' from collated feedback on the local area offer.

Area 8: Leaders Have an Accurate, Shared Understanding of the Needs of Children and Young People in Their Local Area

Strengths	Areas for Development
<ul style="list-style-type: none"> • The WSOA workstream leads attend HY5! meetings regularly to gather experiences and feedback on work taking place in the key priority areas. This will be replicated with delivery of the SEND and Inclusion Implementation plan delivery, particularly around the 5 priority areas for children and young people. • HY5! is Involved in the Preparing for Adulthood workstream to the journey of young people as they move into adulthood. They shared ideas for a co-production day and an idea to create a game that practitioners could use when supporting young people to think about their future. • During Spring term 2023, workshops were held within Special schools and with HY5! to raise awareness of the Local Offer and gather the view of children and young people around branding, content and layout. • The local area partnership continue to work well with Voice for Parents, and they have ongoing Keep in touch meetings with HOS, Director of Children Services, DSCO, OT PT and SLT. • The Participation Team also facilitates the wider voice for young people and adults in Wolverhampton including the Youth Council, Children in Care Council, Care Leavers Forum, #YES Board, Guardians and Families on Board. • PCF feedback is the top of the agenda on the SEND Health Steering Group. • In Wolverhampton there is a co-produced working group called CAMHS Ambassadors, this is a combination of young people who have or are accessing the service. 	<ul style="list-style-type: none"> • Develop an understanding of engagement, consultation, and co-production (what this is and when this would and would not apply) through training for professionals. • Improve processes for sharing of information between HY5! and SEND and Inclusion Partnership Board including consideration of HY5! Annual report at SIPB. • HY5! will develop plans to ensure more young people get to have their voices heard and be involved in things that affect them. • Supported Internship to champion youth voice to be jointly commissioned. • Increased coproduction of service specifications by commissioning/joint commissioning to capture views of CYP & families and professionals prior to tender of services. • ICB and services to work on regular newsletters with our PCF, to ensure parents/carers are kept informed regarding waiting times, initiatives, improvements within services.

What and How we Know About the Impact of Our Arrangements for Children and Young People with SEND

Leaders gather accurate, timely information about children and young people with SEND in their local area and monitor the changing needs of the population, including using the perspectives of children, young people and families

- Wolverhampton's Joint Strategic Needs Assessment (JSNA) is a City-wide assessment of the current and future health and social care needs of all local people. This data analysis is used to help to determine what actions partners need to take, to meet health and social care needs, to address the root causes of health and wellbeing, and to reduce inequalities between different groups such as age, race, disability and gender.
- The annual school census SEND data is collected and analysed by leaders in the local authority and shared with school leaders and SENCOs to provide information about national and local trends, highest areas of needs in settings and to ensure any discrepancies in data are addressed directly with schools, thereby ensuring that this information is accurate. It also helps to inform training needs provided to schools throughout each academic year as part of the coordinated training offer.
- Demographic data is regularly reviewed and compared to caseload data to ensure that the caseload is representative of the local population to ensure that the population of Wolverhampton is reached appropriately, and that no groups are unintentionally excluded.

Leaders understand the experiences and outcomes of children and young people with SEND in their area; their backgrounds and identities, including any barriers to them accessing support; and their needs and strengths

- Recognition and support of children with SEND needs is at a good level, with a higher prevalence of pupils receiving SEN Support, compared to regional and national figures, also ensuring that children from the most deprived areas of the city with SEND needs are being recognised and supported.
- Leaders gather the perspectives of children and young people including: My voice is heard, I am able to learn, I am healthy, I am happy, I feel supported, I am safe, and I am in control of my life through an annual survey, this information is used to sense check if views and opinions reflect the data that is held the partnership.
- Wolverhampton has created the Supporting all of our Children in Education Framework supported by a 'Vulnerability Index' which focuses on the most vulnerable children who have additional learning needs in the form of SEN support or an EHC plan and who are also facing additional challenges that potentially impact negatively on their lives. The framework brings services and teams together to form a strong, pre-emptive and supportive team.

- Intervention plans for young people in the Youth Justice System include screening for SLCN and other additional needs.
- Coordinated by the Designated Social Care Officer for SEND, Social Care SEND champions are in place across social care teams and early support teams to promote SEND services and the SEND Code of Practice. The SEND champions receive monthly training to enhance their knowledge and skills to support colleagues across social care to develop SEND practice across the city.

Leaders share information across education, care and health services so they can learn from different perspectives and approaches

- CWC's Data and Analytics Team collates and shares a range of data across education, health and care through the SEND & Inclusion Boards Data Dashboard. The dashboard provides leaders with accurate, timely information about children and young people with SEND allowing them to monitor changing needs. Up to date data packs are shared and discussed with SEND and Inclusion Partnership Board at their half-termly meetings and data collation is supported at bi-monthly data sessions supported by representatives from education, health and care.

- The Data and Analytics Team also shares information with leaders in Children's and Education Services at the Children and Young People's Performance Meetings. Areas of focus are tabled on to the agenda where pressures, assurance and mitigations can be discussed with leaders.

Leaders gather accurate, timely information about children and young people with SEND in their local area and monitor the changing needs of the population, including using the perspectives of children, young people and families

- In SLT, data is collated and analysed on a monthly basis to identify trends and act on these as necessary, adjusting services as required. This data is presented at Service and Management meetings and shared with stakeholders as necessary.
- The ICB have started to develop a health data dashboard incorporating key performance indicators such as the 6 week return of health advice, GP LD Health checks and Annual Reviews and waiting time information etc. Once complete this will inform commissioning decisions.

Leaders gather accurate, timely information about children and young people with SEND in their local area and monitor the changing needs of the population, including using the perspectives of children, young people and families

- In SLT, data is collated and analysed on a monthly basis to identify trends and act on these as necessary, adjusting services as required. This data is presented at Service and Management meetings and shared with stakeholders as necessary.
- The ICB have started to develop a health data dashboard incorporating key performance indicators such as the 6 week return of health advice, GP LD Health checks and Annual Reviews and waiting time information etc. Once complete this will inform commissioning decisions.

Leaders understand the experiences and outcomes of children and young people with SEND in their area; their backgrounds and identities, including any barriers to them accessing support; and their needs and strengths

- SLT work closely with Voice for Parents and other groups to co-produce ideas. SLT liaise with the MDT across education, care and health services regularly, so that there is a shared understanding of need, appropriate input into plans and priorities leading to increased clarity of expectations and better outcomes for CYP.

- For CYP ASC diagnostic pathway review, leaders have engaged with many parents and parent carer forums with Wolverhampton Voice4Parents running a specific survey to support understanding of challenges with accessing diagnostic services for ASC as well as support at pre-during and post – diagnostic levels.
- OT and PT Services work in collaboration with Voice for Parents, education, local authority and other health agencies to ensure that they obtain a cross section of perspectives and approaches to input for the CYP. So that they can collect different viewpoints/perspectives and ensure that the service are meeting the needs of the CYP and their families/carers. Children's OT and PT work on constructive feedback and continuous improvement to the benefit of the CYP and their families/carers.

Leaders share information across education, care and health services so they can learn from different perspectives and approaches

- SLT are closely involved in the SEND Health Steering group and Early Years SEND Steering Group, leading to a shared understanding of need across the city, broader input into plans and priorities and increased clarity of expectations.

What children, young people, young adults with SEND and their families say

Leaders gather accurate, timely information about children and young people with SEND in their local area and monitor the changing needs of the population, including using the perspectives of children, young people and families.

“Feedback is unequivocal – SEND parents want their voices to be represented by those they trust and those relationships are already established.”

“Strategic and family level co-production need to provide a clear understanding of true co-production, mutual respect, whole family approach and being heard including during EHCP drafting process.”

Leaders understand the experiences and outcomes of children and young people with SEND in their area; their backgrounds and identities, including any barriers to them accessing support; and their needs and strengths.

“I felt that social worker didn't understand our needs and support for our children. The needs of a family.”

“I feel the school doesn't understand how my child reacts to different routines and all they do is reprimand him for bad behaviour instead of seeing what they do sometimes is making him worse.”

“My child's school do not have a clear understanding of how autism impact a young person's everyday life and their environment. Therefore, they are unable to quickly identify when my child is extremely anxious.”

“Cost of living is a growing concern for SEND families.”



2024-2025 Planned Improvements for Area 8

Leaders gather accurate, timely information about children and young people with SEND in their local area and monitor the changing needs of the population, including using the perspectives of children, young people and families

- Further establish the Black Country SEND health data dashboard to inform the overall SEND Partnership and Inclusion dashboard about the position of health services.
- Newly appointed Local Authority Attendance Advisors will establish data sets, to share with schools, showing the trends around attendance and inclusion to help identify pupils who may be missing out on the required support for their SEND needs.
- Identify current demand and capacity across each service area including gaining an understanding of current waiting lists across the system.
- Carry out an evidence-based review of current pathways.

Leaders understand the experiences and outcomes of children and young people with SEND in their area; their backgrounds and identities, including any barriers to them accessing support; and their needs and strengths

- Using existing data, establish mechanisms through the Education Equality Group to monitor under-representation of ethnicities amongst children receiving support for their SEND needs.
- HY5! will continue delivery of their 'Inspiring Change' training to professionals to make sure they know what it's like for people with additional needs and disabilities and what they can do to help
- PT and OT services will ensure that progress is being made towards the CYP aspiration and that all parties (parents/carers/education/health) are involved with the same focus, and this leads to the CYP being the centre of the intervention and increase the focus on life outcomes, including employment and greater independence.
- The Partnership for Inclusion and Neurodiversity in Schools (PINS) project has commenced, the 10 schools involved will complete a self-assessment to establish the learning/ gaps that will help form the training/support offer required.

- Co-produce an aligned ASC pathway across the Black Country; including a proposal for a more coordinated approach to management of data and co-develop a joint action plan for improvement that will require approval and oversight at both place and system level; and consider the interface with ADHD diagnostics and opportunities for development.

Leaders share information across education, care and health services so they can learn from different perspectives and approaches

- Black Country Healthcare NHS Foundation Trust, as the lead provider for MH/LDA, will strategically coordinate a Programme of work across agencies to review current CYP ASC diagnostic pathway across the Black Country and work collaboratively with all stakeholders, to make proposals for improvement. A partnership approach will be adopted and supported by Programme management.

Area 9: Leaders Commission Services and Provision to Meet the Needs and Aspirations of Children and Young People, including commissioning arrangements for children and young people in alternative provision

Strengths	Areas for Development
<ul style="list-style-type: none"> • There has been significant progress for residential short breaks, and a commission framework is now in place to support these through the social care assessment framework. • PT and OT services follow evidence-based practice (EBP) for interventions and implementation of practice. • PT and OT services use the North Staffordshire Risk Matrix as a tool for ensuring that the clinical needs of the CYP are identified and reviewed in a timely manner. • Work has now commenced with SLIP (Sector Led Improvement Programme) and Islington Council. The work is focusing on 3 key areas: Agreeing Joint Commissioning systems, principles and approach; Coproduction in commissioning and Intelligent use of data in commissioning. • The establishment of the Wolverhampton Integrated Commissioning Committee has further strengthened joint commissioning discussions and decisions. • WIASS is jointly commissioned by the Local Authority and the ICB. • The Funding and Placement panel ensures there is oversight of the placement of CYP with EHCPs in alternative provision and/or Independent specialist education. 	<ul style="list-style-type: none"> • An action plan is in place to develop a high-quality short breaks offer; this is being co-produced and will cover universal, targeted and specialist community/overnight short breaks. • Improved joint commissioning arrangements between ICB and LA colleagues to consider a more joint up approach focusing on how collective resources can improve value for money and outcomes for children and young people. • Work with SLIP to agree Joint Commissioning Approach and implement joint commissioning improvement plan with an annual set of Joint-commissioning priorities with underpinning action plans. • The Education SEND Commissioning Team are working with SENSTART to develop a framework for all providers during 2024/25 to reduce the need for spot purchasing, and therefore having better control of the demands around EHC spot purchase arrangements.

What and How we Know About the Impact of Our Arrangements for Children and Young People with SEND

Services and systems have been designed around the needs of children and young people, and are informed by evidence of what works in achieving good outcomes

- There has been significant progress for residential short breaks, and a commission framework is now in place to support these through the social care assessment framework. There is an established workstream in place to support a graduated approach to short breaks, which is considering targeted non-residential services through to a universal offer via the HAF provision.
- Wolverhampton is a test and learn site for the Families First for Children Pathway which is improving experiences and outcomes.
- PT and OT services follow evidence-based practice (EBP) for interventions and implementation of practice. Assessments generate outcomes and utilising the EBP, it identifies ways of achieving these. Use of standardised outcome measure to ensure that progression towards a goal is evidenced. They use the outcome measure to reassess the progress much like an assess, plan, do, review cycle.

- PT and OT services use the North Staffordshire Risk Matrix as a tool for ensuring that the clinical needs of the CYP are identified and reviewed in a timely manner. It allows that the service to be is person-centred, evidence-based and use systematically reflective decision-making processes to ensure the right interventions at the right time. This leads to better outcomes for CYP and their families/carers, with greater understanding and greater engagement with the CYP.

Joint commissioning arrangements enable partners to make best use of all the resources available to improve outcomes for children and young people in the most efficient, effective, equitable and sustainable way

- To drive forward joint commissioning arrangements, a jointly funded lead has been established across the local authority's Children, Adult, Education Services and ICB commissioners. This post is initially for 12 months which will help to inform areas where processes can be aligned, and potential areas of joint commissioning can be realised.

- The Joint SEND Strategic Commissioning Group has been re-established and is proactively contributing towards improvements identified through the SEND and Inclusion Partnership Board, Written Statement of Action (WSOA) and the Sector Led Improvement Programme (SLIP).
- The work with SLIP and Islington Council focuses on 3 key areas: agreeing joint commissioning systems, principles and approach; coproduction in commissioning; and intelligent use of data in joint commissioning. Although work is being established around joint commissioning it is recognised as being at an early stage.
- The establishment of the Wolverhampton Integrated Commissioning Committee has further strengthened joint commissioning discussions, governance and decisions.
- All commissioning team posts, across both the ICB and City of Wolverhampton Council, are recruited to.
- Examples of good jointly commissioned practice have been seen in the recent Preparation for Adulthood Thematic Review, including SENDWIASS, the governance through the integrated commissioning committee and mental health support services.

Joint commissioning arrangements meet the local area's statutory responsibilities for identifying, assessing and meeting needs

- EHC panels exist for a 'Decision to Issue' and 'Funding and Placements'. Education, Health and Social Care services attend the decision to issue panel chaired by the local authority. The panel enables services to understand services, equipment and provision that are required to be joint commissioned in advance of plans being finalised. The Funding and Placement Panel enables discussed across commissioners, local authority education support services and transport to identify those settings that best fit the child's needs against the criteria of placements also taking into account travel arrangements.
- The External Placements Panel (EPP) manages a shared funding arrangement which is utilised where the City of Wolverhampton Council and Integrated Care Board have shared responsibilities and duties for children/young people where the nature and level of care requires a shared and co-ordinated approach. The lead professional will also be involved in cases where funding may originate from Transforming Care Partnership (TCP) streams.

- WIASS is jointly commissioned by the Local Authority and the ICB.
- SLT work closely with commissioners to identify gaps and possible solutions, thinking as widely as possible, meaning that they use a wide range of resources to meet the needs of the CYP, embedded in the community and with support and agreement of stakeholders.

The local authority ensures that there are intervention plans for each child and young person in alternative provision, including clear objectives and plans for their next steps, such as returning to mainstream education

- The ‘readiness to reintegrate’ process has been developed and implemented to increase the succession rate of pupils transferring from Pupil Referral Units and Alternative Provision settings to mainstream schools. The pathway includes the Pupil Referral Unit (PRU) or AP evidencing levels of engagement and how children and young people have demonstrated and implemented the strategies they have learnt into practice. To further validate referrals for mainstream ready young people, the local authority inclusion team undertake direct interventions with young people in their PRU/AP settings. This includes undertaking universal and more specific assessments dependant on the areas of concern.

Leaders understand that children and young people with SEND may be more vulnerable to abuse, and ensure that this is carefully considered when commissioning and evaluating services

- Wolverhampton is one of the nine local areas within the West Midlands that collaborate with regards to child safeguarding procedures. With the introduction of Working Together to Safeguard Children 2018, each local area's multi-agency safeguarding arrangements are led by the statutory safeguarding partners/organisations: local authorities, clinical commissioning groups and the police. All commissioned providers are expected to adhere to City of Wolverhampton's Safeguarding procedures as stated within all contracts.
- Tender processes and service specifications ensure that equalities and safeguarding requirements make every effort to protect children and young people from abuse as all potential providers must demonstrate this through their submitted policies and procedures how they would mitigate against such events happening whilst the children and young people where in their care/establishments.

- Once awarded, successful providers are contract managed to ensure that all policies and procedures are adhered to and that any concerns that are raised are responded to immediately with service managers and commissioners. Quality assurance visits will be initiated outside of the annual quality assurance cycle where needed.

The local authority identifies children and young people's needs accurately and arranges suitable full-time educational provision to meet the needs of children or young people who require alternative provision as early as possible, for example, ensuring that full-time education for children and young people who have been excluded begins no later than the sixth day of the exclusion

- For 2023/24 academic year, on average it takes 16 days from the date the LA receive the permanent exclusion notification to the pupils attending their first day at AP. The previous year, the average was 18 days. The delays in admission can be attributed to a variety of factors such as lack of parental/pupil engagement, delays in responses from AP's regarding capacity or costs, mapping intelligence with police etc.

- The Inclusion Team ensures alternative provision placements are secured at the most appropriate provision that can best meet the pupils needs, and so capturing pupils' interests and aspirations is the key to their successful outcomes.
- Solution Circle are offered to schools which is a universal offer for all education settings across the city to support school/setting staff to receive additional support and guidance to find new ways of meeting the needs of children and young people with SEND. It is facilitated by specialist services and is a vehicle for encouraging school to school support and sharing good practice across the city.
- Emotionally Based School Non-Attendance (EBSNA) workshops are also universal offer for all education settings across the city to support school/setting staff to implement the local EBSNA pathway and guidance. The workshops are interactive and include case studies and group discussion to help setting staff to think about other options that can be tried to support children and young people to attend and engage in education.

What children, young people, young adults with SEND and their families say

Services and systems have been designed around the needs of children and young people, and are informed by evidence of what works in achieving good outcomes.

“We now use a commissioned [short break] service which is much better but due to there being more young people than workers, we can only access half of the hours that our child has been assessed as needing.”

“If there was an opportunity to have an educational provision that bridged the gap between mainstream and special schools then I would absolutely 100% support it.”

“We have accessed leisure facilities by paying a large premium to do so through expensive private clubs. We have also accessed several of the sessions run by voice 4 parent - the HAF offer had nothing suitable for my child.”

“Some HAF activities do not cater for SEN kids as its for kids on free school meals too. Plus many of the HAF activities don't allow siblings which makes things difficult to do as a family.”

“Nothing [HAF] for complex needs, most things already booked up when it was released anyway, not enough info for lots of activities.”

“There needs to be timely engagement with the SEND community so they can access activities in their local community including parks, leisure centres etc to make sure they are SEND appropriate and all staff have a clear understanding of what the child's needs are and how they can be supported in sessions. Up to date information needs to be available to families. Holiday Activities Fund is always accessible for SEND families, and therefore their needs to be targeted and bespoke for SEND families that can meet young people's needs with an EHCP (up to 25).”

Joint commissioning arrangements enable partners to make best use of all the resources available to improve outcomes for children and young people in the most efficient, effective, equitable and sustainable way.

“The Local Offer is disgraceful and not fit for purpose - I defy anyone to locate anything they are trying to find on it. It should be a jointly commissioned piece as it relies on all to ensure it works properly.”

“Commissioned services under constant threat, as services argue about funding and delay payments or threaten to withdraw with no other plan in place. LA and Health argue with each other about funding and it is impacting on families and young person directly.”

Joint commissioning arrangements meet the local area’s statutory responsibilities for identifying, assessing and meeting needs.

“WASS stands out with their quality of knowledge and dedication to support the SEN families.”

“V4P represent our families voice, they have provided opportunities the local authority should be providing but aren’t to meet SEND family need.”

2024-2025 Planned Improvements for Area 9

Services and systems have been designed around the needs of children and young people, and are informed by evidence of what works in achieving good outcomes

- An action plan is in place to develop a high-quality short breaks offer; this is being co-produced and will cover universal, targeted and specialist community/overnight short breaks. This is being led by the Head of Service of Children and Young People in Care. Children and families will benefit from a needs led robust offer of short breaks, that is readily available to support all identified need.

Joint commissioning arrangements enable partners to make best use of all the resources available to improve outcomes for children and young people in the most efficient, effective, equitable and sustainable way

- The SEND and Inclusion Board's strategic priority 5 focuses on developing sustainable systems. Improved processes around jointly commissioned arrangement have been identified and continue to be established through the Joint Commissioning Improvement plan with the support of SLIP to improve value for money and outcomes for children and young people.
- An annual set of Joint-commissioning priorities will be established with underpinning action plans.

Joint commissioning arrangements meet the local area's statutory responsibilities for identifying, assessing and meeting needs

- The mapping of all provisions across health, education and social care needs to be completed.
- Further work needs to be established around some areas of the short breaks and leisure offers, it is promising that these workstream are now in place and proactively progressing work.

Leaders understand that children and young people with SEND may be more vulnerable to abuse, and ensure that this is carefully considered when commissioning and evaluating services

- To increase confidence in provisions, a framework for all providers both for AP and EHC placements will be established during 2024/25 to reduce the need for spot purchasing, and therefore having better control of the demands around EHC spot purchase arrangements. The Education SEND Commissioning Team are working with SENSTART and the Inclusion Service to enable this.

The local authority identifies children and young people's needs accurately and arranges suitable full-time educational provision to meet the needs of children or young people who require alternative provision as early as possible, for example, ensuring that full-time education for children and young people who have been excluded begins no later than the sixth day of the exclusion

- Work is underway and will continue through 2024-25 to establish an Inclusion Framework that aims to reduce the number of exclusions requiring 6-day provision. The Inclusion Framework is being co-produced between school leaders and the Local Authority to improve outcomes for children and young people with SEN or in alternative provision. This will ensure that young people have the correct level of support and intervention, whilst continuing to be supported by their mainstream setting. There will also be a variety of resources including staff training, specialist tools and interventions that can take place where the young person lives etc. The framework will ensure that investment into the system is delivering value for money whilst meeting the needs of children, young people and families.



Area 10: Leaders Evaluate Services and Make Improvements

Strengths	Areas for Development
<ul style="list-style-type: none"> The Education Excellence Team regularly evaluates the impact of their work measuring the effectiveness, coherence, sustainability, efficiency, relevance and impact of projects and provision led by school improvement advisors and advisory teachers. CAMHS EHCP, LD and ASC and SEN information is audited routinely in record keeping audits and monitored at senior leadership level. SEND early identification and support services survey SENCOs annually to understand how effectively the services are supporting settings and schools and what further training is needed. This is now being used to produce a co-ordinated training offer across the service as well as EPS and education excellence. Agenda of the SEND Health Steering Group is set so that Parent/Carer feedback is the first item on the agenda. This ensures that they can routinely consider feedback monthly and any associated actions monitored by the Steering Group. CAMHS have an advertised feedback system via our Service Experience Desk and an ongoing relationship with Parent carer Forums where they meet regularly to explore feedback shared via their group. 	<ul style="list-style-type: none"> Established a mechanism for sharing emerging concerns about SEND provision in school, so that targeted support and identified training can be put in place swiftly to address these concerns. Establish regional approaches to Education Psychology (EP) to improve services at a local level Establish collaborative work between PT/OT, the local authority, education, voice for parents and other multi-disciplinary health professionals to ensure that the CYP is the focus of the interventions, evidence-based practice and updated guidelines. Establish a Joint Commissioning Dashboard that can be used to analyse and predict service requirements. Establish a co-ordinated training offer from the local authority for school leaders and SENCO's to preventing duplication and an enhanced both free and traded offers. Black Country as Lead Provider for MH/LDA will strategically coordinate a Programme of work across agencies to review current CYP ASC diagnostic pathways and work collaboratively with all stakeholders, to make proposals for improvement. Extend the Alternative Provider Commissioning Framework to include Independent Special Schools for Education Health and Care Plan placements. The AP Flexible Framework QA audit process will be aligned to Independent Specialist Providers to ensure compliance with procurement and legal regulations and ensure value for money.

What and How we Know About the Impact of Our Arrangements for Children and Young People with SEND

Leaders jointly evaluate whether their services and provision are improving outcomes for children and young people with SEND, not only whether children and young people have received the services

- The Education Excellence Team regularly evaluates the impact of how they engage with schools, measuring the effectiveness, coherence, sustainability, efficiency, relevance and impact of projects and provision led by school improvement advisors and advisory teachers. The team make decisions about the provisions where they need to be adjusted/adapted to better meet the needs of school leaders and SENCOs in the city.
- CAMHS, EHCP, LD, ASC and SEN information is audited routinely in record keeping audits and monitored at senior leadership level. Goal based outcomes are used to ensure that evaluation of the service is driven by the co-produced hopes and needs of the family.
- OT and PT services follow evidence-based practice and national guidelines for interventions set by Governing bodies, and/or NHSE, NICE. These are continually in review to ensure the services are meeting the updated advice to implement the best interventions and advice to the CYP and their carers. For example, the updated RCOT guidance on sensory interventions.
- The local authority uses audits and practice weeks to monitor and evaluate practice across education and social care. These are monitored through leadership team meetings and the Children and Young People's Performance Meetings.
- Regional and national groups for SEND, Education Psychology, Alternative Provision and Commissioning are used to sense check trends and delivery methods against outcomes for young people.

Leaders monitor whether there are sufficient services and provision to meet the needs and aspirations of the children and young people in their area and take appropriate action as a result

- The Joint SEND Strategic Commissioning Group has been re-established and are working with the Sector Led Improvement Programme (SLIP) to help formalise a governance structure to be able to better predict future service needs. Work has been achieved around data quality to realise this and work to establish a joint commissioning dashboard with analysis is in its infancy.
- Services provided by the PT and OT service are monitored for timelines of assessment and review and impact on the CYP's aspirations. Resulting in ensuring that the CYP is receiving the assessment and interventions when they require it and when it would be the most benefit to their needs. It ensures a robust service in place to make the CYP's journey a more streamlined one.

Leaders use information from a range of sources in their evaluation, including feedback from representative groups, children and young people using services and data relating to outcomes to improve their services and provision

- Young People's SEND Survey and Parent Carer Surveys are used to inform the partnership's evaluation of itself and services. This informs action planning where services can be improved to meet the outcomes for young people. Further work needs to be carried out to strengthen informed joint commissioning opportunities, which will be established through the work with SLIP.
- SEND Early Identification and Support Services survey SENCOs annually to understand how effectively the services are supporting settings and schools, and what further training is needed. This is now being used to establish a co-ordinated training offer across services within the local authority including Education Psychology Service and Education Excellence.
- The SEND Health Steering Group is set so that Parent/Carer feedback is the first item on the agenda. This ensures that they can routinely consider feedback monthly and any associated actions monitored by the Steering Group.

- CAMHS have an advertised feedback system via our Service Experience Desk and an ongoing relationship with Parent carer Forums where they meet regularly to explore feedback shared via their group.
- OT and PT services use outcome measures in their assessments and reviews to ensure that the intervention is making the correct impact. For example, the use of the Cerebral Palsy Integrated Pathway assessment to ensure that the physical needs of the children with cerebral palsy are met and the postural management aspects needed to support them when they are accessing the curriculum are in place.
- OT and PT services use patient feedback questionnaires to ensure that there is up to date feedback about the implementation of services, these can be completed by the CYP and / or their carer. The use of a survey monkey patient satisfaction questionnaire, designed in collaboration with Voice for parents, allows immediate feedback after an appointment. It affords the CYP and their family to have a voice and provide constructive feedback to the service to ensure it is meeting their needs. The service is reviewed against this feedback.

Leaders have established clear processes to enable services and providers to evaluate and improve their provision regularly

- SEND quality assurance leads are working across the partnership to establish a SEND quality assurance framework, bringing together a list of all quality assurance activity across the partnership. This will enable timelines to be appropriately planned for where multi agency audits are needed, create opportunities to triangulate good practice, and jointly initiate areas of improvement.
- Training has taken place with education and social care staff around what quality and legally compliant report writing to inform plans looks like. This has enabled staff to feel more confident in completing reports, ensure that the quality and compliance has improved. This can be seen in the QA audits which take place on a termly basis. This has also been seen through a trial run of the EHCNA case file audit which took place in February 2024 and whilst these are scheduled for the rest of the year, the first run has enabled staff to be aware of and improve the quality of the timeliness and quality of the EHC process, enabling staff to feel more confident in their role.

The local authority evaluates how well the alternative provision it commissions is improving outcomes for children and young people, and takes action if needed

- All alternative provision that are used for exclusion prevention are part of a procurement framework and are required to receive regular quality assurance monitoring visits as part of their contracts, along with providing evidence of clear key performance indicators, the most recent being completed in Autumn 2023. The Inclusion Team also attend 6 weekly monitoring visits to ensure that the provision is meeting the required expectations and outcomes for young people, as set out in their contracts and formal contract monitoring meetings take place annually with the SEND Commissioning Team.

The local authority maintains strong oversight arrangements for alternative provision it commissions, including oversight of each alternative provision's safety and suitability, and in particular of alternative providers that are not registered as schools

- Alternative provision that are successfully included within the framework are allocated a contract manager, to ensure that all policies and procedures are adhered to, by the Council's Commissioning Team. They undertake quality assurance audits which typically take place via a visit to observe sessions in progress, followed by an audit of documentary evidence such as policies and reports. The quality assurance audits seek to identify strengths and any areas of further development. Where areas of development or concerns are identified the contract manager, commissioner and quality assurance officer will be responded to immediately, involving additional services where appropriate. Quality assurance visits will also be initiated outside of the annual quality assurance cycle if concerns are raised.

What children, young people, young adults with SEND and their families say

Leaders jointly evaluate whether their services and provision are improving outcomes for children and young people with SEND, not only whether children and young people have received the services.

“There needs to be timely engagement with the SEND community so they can access activities in their local community including parks, leisure centres etc to make sure they are SEND appropriate and all staff have a clear understanding of what the child’s needs are and how they can be supported in sessions. Up to date information needs to be available to families. Holiday Activities Fund is always accessible for SEND families, and therefore their needs to be targeted and bespoke for SEND families that can meet young people’s needs with an EHCP (up to 25).”

Leaders monitor whether there are sufficient services and provision to meet the needs and aspirations of the children and young people in their area and take appropriate action as a result.

“We pay for our own OT as we had no help with our daughter we have paid for 6 years!”

“Splints been made , awaiting to see consultant about him having a fit possible fits was put through as urgent and changed for no reason to routine still waiting 2 months on since his first big fit to see a doctor and put as urgent is missing out on school activities in meantime out of routine upset.”

“Speech and Language was seen in school setting at the start of last year. No one has been out to see or assess him again he is still not talking. Been calling them every few weeks. Not heard from dietician in over year or so, or from feeding services nearly 2 years ago.”

“Support at CAMHS isn't designed for SEN children and the criteria for inspire which is more appropriate is too high as you have to have a learning disabilities and not a learning difficulty.”

“[CAMHS] Service is not adapted for children with SEND and I feel it has more of a general approach.”

Leaders use information from a range of sources in their evaluation, including feedback from representative groups, children and young people using services and data relating to outcomes to improve their services and provision

“Professionals (need to) realise parents are the experts on their children regardless to what is put into place it will not work when parent/carers voices aren’t heard.”

“No one understands, no one really listens.”

“No one listens and works with me.”

Leaders have established clear processes to enable services and providers to evaluate and improve their provision regularly.

“Transport , particularly after summer break, needs to be planned in advance so families don’t have unexpected changes of staff (drivers/escorts) at the start of term.”



2024-2025 Planned Improvements for Area 10

Leaders jointly evaluate whether their services and provision are improving outcomes for children and young people with SEND, not only whether children and young people have received the services

- A mechanism will be established for sharing emerging concerns about SEND provision in school, so that targeted support and identified training can be put in place swiftly to address these concerns.
- Regional approaches to Education Psychology (EP) will be established to improve services at a local level, including: exploring an option to extend the QA framework for core EP activity; establish a regional peer supervision and support structure for EPs in leadership roles to strengthen learning across the region; refinement of West Midlands Education Psychology Service Continual Professional Development offer to ensure best value for money and links to strategic regional priorities; and PATH facilitation with regional strategic SEND leads group to explore opportunities of creative use of High Needs Fund and promoting earlier intervention.

- OT/PT will continue collaborative working with the local authority, education, voice for parents and other multi-disciplinary health professionals to ensure that CYP are the focus of the interventions and to monitor service impact to ensure that needs are met in a correct and timely manner and to update services based on evidence-based practice and updated guidelines.

Leaders monitor whether there are sufficient services and provision to meet the needs and aspirations of the children and young people in their area and take appropriate action as a result

- Continue to work with the Sector Led Improvement Programme (SLIP) to establish a Joint Commissioning Dashboard that can be used to analyse and predict service requirements.

Leaders use information from a range of sources in their evaluation, including feedback from representative groups, children and young people using services and data relating to outcomes to improve their services and provision

- The information gained from school leaders and SENCO's will be used to establish a more co-ordinated training offer from the local authority, preventing duplication and an enhanced both free and traded offers.

Leaders use information from a range of sources in their evaluation, including feedback from representative groups, children and young people using services and data relating to outcomes to improve their services and provision

- Black Country as Lead Provider for MH/LDA will strategically coordinate a Programme of work across agencies to review current CYP ASC diagnostic pathways across the Black Country and work collaboratively with all stakeholders, to make proposals for improvement. A partnership approach will be adopted and supported by Programme management.

Leaders have established clear processes to enable services and providers to evaluate and improve their provision regularly

- The Alternative Provider Commissioning Framework will be extended to include Independent Special Schools for Education Health and Care Plan placements. This will enable standards and costs to be effectively monitored in line with alternative provisions.

The local authority evaluates how well the alternative provision it commissions is improving outcomes for children and young people, and takes action if needed

- The AP Flexible Framework QA audit process will be aligned to Independent Specialist Providers to ensure compliance with procurement and legal regulations and ensure value for money.

Area 11: Leaders Create an Environment in Which Effective Practice and Multi-agency Working to Flourish

Strengths	Areas for Development
<ul style="list-style-type: none"> • The SEND & Inclusion Partnership Board is a well-established partnership with embedded relationships across, Health, Care, Education, Strategic Parent Carers & Young Peoples representatives, Public Health, Voluntary Sector, schools and many more. • Team Around the Setting meetings foster multi-agency working as key professionals involved with vulnerable settings across a wide range of services are invited to discuss key issues, concerns and progress with the headteachers of those settings. • ISAPP provides a multi-agency panel to have holistic approach to YP and offer a range of support that schools can access for YP and staff to reduce the likelihood of education exclusion. • Team around the child meetings in SNEYS are effective in providing a multi-agency approach to supporting our most vulnerable children with SEND. • The WIASS Advisory Board consists of stakeholders from parent/carers, education, health, social care and the voluntary sector including Wolverhampton's parent carer forum. • MDT working is essential for implementation of the CYP's interventions. OT and PT will work with SLT to ensure that communication aids are used appropriately and if joint working can occur when implementing interventions. Resulting in a better journey for the CYP and less time away from academic aspects of their education. 	<ul style="list-style-type: none"> • Embedding the Families First pathfinder model to provide scope to further improve multiagency working. • To streamline information sharing across the different IT systems used in education, health and social care. • Engagement with school leaders around exclusions (Inclusion Framework) • Development of a firm pathway for social care advice for EHCP, and consistent high quality of advice provided. • Continue with the current processes for MDT working and safeguarding so that shared practice is in place and the CYP are the focus. Any concerns are identified early and shared so that the issues regarding the CYP can be addressed and safeguarded before they escalate.

What and How we Know About the Impact of Our Arrangements for Children and Young People with SEND

Processes and systems are set up to support practitioners to work together and share appropriate information in a timely manner, including strong systems for identifying and responding to risks to children and young people with SEND

- It is recognised across the partnership that different professionals use a multitude of different record keeping systems and this could cause risks of information not being shared in a timely manner. As a result of this, information sharing will be a priority for the work undertaken with the Families First for Children Pathfinder.
- There are a range of multi-agency operational and tactical meetings that currently take place to enable information sharing that strengthen systems and respond to risk. These include the following:
 - Termly Team Around the Setting meetings, held as outlined by the Education Excellence Strategy, 2024-2027 for vulnerable settings to discuss key issues, concerns and progress with the headteachers. The schools targeted for discussion are regularly reviewed to reflect changes in settings and appropriate packages of support can be provided to vulnerable settings swiftly.
 - The Inclusion Support & Alternative Provision Panel (ISAPP) is a multi-agency panel offering a holistic approach to young people at risk of permanent exclusion or emotional based school non-attendance. It offers peer support from other schools, support pathways from agencies and alternative educational pathways that schools can access to help maintain children and young people in mainstream settings.
 - The Child Development Centre Multi-agency Referral Panel offers a holistic approach to assessing the support needs of children under 5 in the city and ensures access to specialist services across education and health services.
 - The Under 5s ASC Panel, consists of professionals from Education Psychology, Paediatrics, SLT, SNEYS, CAMHs and Social Care to effectively determine ASC diagnoses.
 - The Resource Panel is a multi-agency fortnightly panel, chaired by social care, with commissioning, education and health representatives to review the short break plans for children under 18. This allows for a robust supportive approach to analyse the needs of children in the DCYP team, allowing a holistic needs led outcome to short break requests.

- Multiagency equipment panels take place monthly with the Independent Living Service and ICB in attendance. Local partner governance arrangements are embedded to ensure children and young people's needs are met and there is no delay in agreeing equipment.
- The Multiagency Children and Young People's Continuing Care Panel is embedded in the continuing care process.
- OT and PT work with education to ensure that they are part of the intervention programme so the CYP can access the curriculum appropriately whilst receiving needed postural changes such as standing frames and seating. This means the CYP is in a comfortable postural position so they can focus on actively accessing the curriculum and have inclusion alongside their peers.
- The OT and PT services regularly conduct joint assessments and work to ensure that the CYP and their family only need to 'tell it once'. The CYP aspirations outline the goals set for the CYP and clinicians regularly will work holistically to enable the CYP to achieve their goals. For example, intervention blocks for OT and PT are usually combined to ensure that the needs of the CYP are being met whilst the time from education is not compromised more than it has to be.

Leaders ensure that practitioners have the appropriate skills to understand children and young people's needs and aspirations, and to create an inclusive environment

- The 'Promoting Inclusion from the Early Years Project' has been developed to support mainstream schools to meet the needs of children transitioning into reception with increasingly complex needs. A free training-based needs analysis is offered, solution circle sessions for creative problem solving are held, and central training on 'keys to inclusion' is available. The impact of this has been demonstrated within Evaluation data from training and solution circles.
- SEND Together Training took place with over 60 social workers in October 2023. Feedback since this session was positive and 100% of the attendees said they felt more confident in their knowledge and responsibilities around SEND including an increased awareness of the services and sources of information available for signposting.
- The introduction of the SEND Champions training offer has been developed for 2024-25 to include 8 sessions (April-Dec) and at least one SEND champion in each team. This has now been embedded as 'Business as usual'. This has enabled a continuous cycle of CPD for social workers around SEND, enabling children's need to be considered more clearly as part of their social care assessments.

- The Power of Words (POW) Project has been launched to inspire the use of positive words and attitudes in conversations between professionals and families of children with SEND. Training will be rolled out to professionals.

Leaders ensure that practitioners are clear on their individual roles and how they can best work together to improve outcomes for children and young people

- Partnership meetings between the Designated Social Care Officer (DSCO), Designated Medical Officer (DMO), Designated Clinical Officer (DCO) and Local Authority SEND Leads, providing the scope for operational practice to be reviewed, areas for improvement to be identified and required changes made.
- The school improvement team works closely with school leaders and SENCOs to ensure that the graduated approach is understood by leaders in schools and implemented effectively so that children and their families can receive the right help at the right time. Support and challenge conversations, SEND reviews and school visits aim to quality assure this and provide evidence that this is the case. When a concern is identified about the quality of provision available in a setting, a plan of support is actioned, ensuring the appropriate professionals across the local authority provide training and support where needed

Leaders encourage practitioners working together to focus on the child or young person, identifying alternative solutions when existing options do not meet needs and aspirations effectively

- Team Around the Child (TAC) meetings provide effective multi-agency approaches to supporting the most vulnerable children with SEND in schools. These can be instigated by any professionals that work children where concerns need to be addressed across different services, leading to co-ordinated approaches to support children. These meetings are often co-ordinated by schools.
- Schools engage with the advice and guidance of the Inclusion team to hold Exclusion Prevention meetings to seek solution focussed strategies for young people to overcome barriers to engagement in school.
- MDT working is essential for implementation of the CYP's interventions. OT and PT will work with SLT to ensure that communication aids are used appropriately and if joint working can occur when implementing interventions, resulting in a better journey for the CYP and less time away from academic aspects of their education.
- All clinicians can escalate any situation they feel requires social care input and will work in partnership with other services to ensure that CYP are the priority.

- The Carers Team work closely with Voice4Parents to develop clarity on what their role is and what support can be offered. Working with families in this way has enabled the identification of more young carers and parents being able to share their concerns about sibling carers who also had some form of a caring role. Parent carer conversations are carer focused and the feedback has been really positive, with parent carers saying they felt visible and listened too and that they felt they weren't defined by their caring role. Work is taking place to co-produce all leaflets and info with V4P and with schools as part of the young carer work.

Leaders ensure that practitioners working with children and young people with SEND have the right knowledge and skills to reduce the risk of harm, and understand that children and young people with SEND may be more vulnerable to abuse, neglect and exploitation

- New guidance has been shared with all settings across the city. As part of a multi-agency partnership, education contribute to universal early help for any pupil and as professionals for any social care plan for individual pupils. All training for education Designated Safeguarding Leads includes this guidance.

- MASH have taken steps to become more visible within partner agencies to help and discuss the contact process. Visits have been made to health services, including the 0-19 service, midwives, and mental health services. DSL events take place on a quarterly basis, and meetings regularly take place with Wolverhampton Homes, Police and Recovery Near You. This has helped to build positive relationships whereby threshold conversations can happen as required. MASH have been working closely with the Early Intervention teams to help ensure that there is support in place for partner agencies completing the Early Help Assessment to build confidence, not only in the case management systems, but also in talking to parents and offering support.
- All staff within the OT and PT services have Level 3 safeguarding training and prevent training which is part of their mandatory training to enable clinicians to have the right knowledge and skills to identify any safeguarding issues that may arise. Staff also attend a minimum of 2 safeguarding supervision sessions a year with the Trust safeguarding team.



What children, young people, young adults with SEND and their families say

Processes and systems are set up to support practitioners to work together and share appropriate information in a timely manner, including strong systems for identifying and responding to risks to children and young people with SEND.

“Health passports are only useful if the hospital reading them actually listens to them parents aren't listened too and they don't listen to a piece of paper either.”

“Annual health check doesn't happen.. can't even get a regular appointment when I'll let alone a health check. General Practitioners are so out of touch and don't even read notes from gem or hospital.. I have to update them on everything.”

“The services need to communicate between themselves and share information before any meetings take place, i.e. EHCP Annal Reviews and all reports should be provided beforehand.”

“I hope that all services would come together and produce a document Tell it Once. This should a recognised document as this would save a lot of time and prevent families from getting upset by repeating their child/ren health/physical need.”

“A transition team or board of multi-agency professionals who sit over health, education and social care from both children and adult services so that families are not thrown off a cliff edge at 17/18.”

Leaders ensure that practitioners have the appropriate skills to understand children and young people's needs and aspirations, and to create an inclusive environment.

“Strategic and family level co-production need to provide a clear understanding of true co-production, mutual respect, whole family approach and being heard including during EHCP drafting process.”

“I feel a lot of mainstream schools want to be inclusive, but they either don't have the knowledge or the staff levels.”

“The specialist staff are good but day to day classroom staff do not all have adequate training so that not every teacher is a teacher of SEND. ”

Leaders encourage practitioners working together to focus on the child or young person, identifying alternative solutions when existing options do not meet needs and aspirations effectively.

“26 Parent Carers felt completely unsupported due to no one wanting to help them and being passed between services/teams and ‘it always being someone else's fault’, Services being hard to access, No joined up working, waiting lists being too long for services and mention of transitions being poorly managed. One stated that the system is broken. Overwhelmingly, Parent Carers need services to work together and communication is constantly highlighted. This is communication between services, within service departments and also with Parent Carers.”

“A harmonious and consistent bond must be established amongst all the services involved in each individual case.”

“Again - Educated out of City so nothing for our son is offered - health forget him, social care forget him - services certainly don't work together.”



2024-2025 Planned Improvements for Area 11

Processes and systems are set up to support practitioners to work together and share appropriate information in a timely manner, including strong systems for identifying and responding to risks to children and young people with SEND

- Embed the Families First pathfinder model to provide scope to improve multiagency working. It is recognised that different professionals use a multitude of different record keeping systems and that is why there may be a risk at times of information not being shared in a timely manner. As a result of this, information sharing will be a priority for the work undertaken with the Families First for Children Pathfinder.
- Streamline information sharing across the different IT systems used in education, health and social care. This would drastically reduce unnecessary work for professionals in gathering and sharing information which is already held on a system.
- Ensure parent carers and families are aware of how services work together and share information.
- Publish reference links to the relevant decision-making boards, through the local offer.

Leaders ensure that practitioners are clear on their individual roles and how they can best work together to improve outcomes for children and young people

- Establish the Inclusion Framework and review how ISAPP works with schools to increase the outcomes for young people within their mainstream setting.
- Develop a firm pathway for social care advice for EHCP, and consistent high quality of advice provided.

Leaders ensure that practitioners working with children and young people with SEND have the right knowledge and skills to reduce the risk of harm, and understand that children and young people with SEND may be more vulnerable to abuse, neglect and exploitation

- Continue with the current processes for MDT working and safeguarding so that shared practice is in place and the CYP is the focus. Any concerns are identified early and shared so that the issues regarding CYP can be addressed and safeguarded before they escalate.

Area 12: Alternative Provision

Strengths	Areas for Development
<ul style="list-style-type: none">• The SEND and Alternative Provision framework is maintained by a multi-agency panel and actively evaluates the quality of provision provided by alternative provision settings.• Placements and provisions are effectively monitored for children and young people at risk of exclusion, to ensure that provision is effective and supportive to the needs of children and young people. Each child and young person has a learning plan that is developed to support their needs and aspirations, which are reviewed on a weekly basis by the Inclusion Team to monitor their achievements and outcomes.• EBSNA Co-Ordinator in post to support schools to with implementing and embedding guidance.• Every effort is made to place children and young people in full-time registered provision by the local authority, however in exceptional circumstances, where unregistered alternative provisions are used, these are monitored with rigour.• Through the procurement portal or market warming exercises potential Alternative Providers are identified and consulted re the process and the requirements needed by a tender process.	<ul style="list-style-type: none">• QA activity - dip into alternative provision• The medical policy to be revised in line with new government expectations, to ensure referrals to Nightingale and Orchard are appropriate.• The AP Flexible Framework & QA audit process will be aligned. To ensure compliance with procurement and legal regulations and ensure value for money.• A flexible framework for SEND providers to be commissioned alongside the retender of the AP Framework which is due to time expire next year.• Develop a system for schools to share information when CYP are placed in school commissioned AP places• Establish guidance for schools and attendance services regarding the use of Education Supervision Orders (ESO) to improve parental engagement and reduce burden of court cases.

What and How we Know About the Impact of Our Arrangements for Children and Young People with SEND

Placements meet the needs and aspirations of children and young people; provide the support they need; prepare them for their next steps; and enable them to feel valued and included in their community

- The Local Authority is clear about the standards of alternative provision used as part of their framework both in and out of the City. The aim and ambition is that children and young people should only be placed in settings that are good or outstanding, and supportive of their educational outcomes, regardless if they are registered or unregistered provisions. Only one provider in the city has been rated Special Measure in 2023, since this time no additional young people have been placed, and those who remain there are very closely monitored by the attendance team to ensure they maintain progress and positive outcomes.
- Placements and provisions are effectively monitored for children and young people at risk of exclusion, to ensure that provision is effective and supportive to the needs of children and young people. Each child and young person has a learning plan that is developed to support their needs and aspirations, which are reviewed on a weekly basis by the Inclusion Team to monitor their achievements and outcomes.

- The SEND and Alternative Provision framework is maintained by a multi-agency panel and actively evaluates the quality of provision provided by alternative provision settings. This ensures that places commissioned by the local authority are of a high quality.

The local authority's use of unregistered and online provision is lawful and appropriate to children and young people's needs

- Every effort is made to place children and young people in full-time registered provision by the local authority, however in exceptional circumstances, where unregistered alternative provisions are used, these are monitored with rigour, and it is clear where children are attending, why they are attending, the arrangements that are in place to assist each young person to access full time education through a modified timetable through tuition and provision, and the transition pathways for them to access longer-term destinations. These are tracked and reviewed on a weekly basis through information that can be accessed by the Inclusion Team and Commissioning.

Education provided under section 19 should be full time (unless medical needs make this impossible) and suitable for the child, taking account of their age, ability and special educational needs (if any)

- Through the procurement portal or market warming exercises potential Alternative Providers are identified and consulted re the process and the requirements needed by a tender process. They are supported to prepare their submissions and have in some cases been peer mentored by those providers who have been successful in applying for and been approved to join the Alternative Provider Framework. This process is being revisited for the retendering of the framework which time expires next year. The lessons learnt from the tender process will be used when developing or specifying the new framework documents and requirements.
- The School Attendance Order Policy is in place and works well.



What children, young people, young adults with SEND and their families say

“19 families surveyed in the Parent Carer Annual survey 2022/23 (5%) having experienced off-rolling. 34 young people/children (8%) have been issued with fixed term or permanent exclusions.”

“School don't fully understand autism and I am always asked for strategies and called to come pick him up as school can't cope.”

“35 respondents (9%) have been encouraged to home educate.”

“My son has not been to school since April 2022 as he is in a mainstream setting which is not suitable for him. We are currently trying to get his educational setting changed without success.”

“55 children/young people have been offered an alternative provision (14%).”

“Goes to Orchard as his mainstream school couldn't handle him.”

“Although, these forms of exclusion only affect a small percentage of our families – they dominate the feedback demonstrating the huge impact that not being able to access appropriate education has on SEND families.”

“Rodbaston Campus have excluded my child permanently due to not being willing to adapt their teaching methods’ ‘Excluded from college as couldn't attend’.”

“My son has to come home for lunch every day as he has found ways to try and escape and he will also not tolerate sitting down and eating with his peers and not enough staff to be able to have someone try and sit with him.”

“To make him go into school where the teachers could see he was struggling and told him to his face they had not time to help him so it was either come in or go home.”

“My son had an incident at school TA who wasn't trained with SEN kids and he had been expelled for one day. I am so tired of being called on a daily basis to collect him from school early.”

2024-2025 Planned Improvements for Area 12

Placements meet the needs and aspirations of children and young people; provide the support they need; prepare them for their next steps; and enable them to feel valued and included in their community

- The Emotional Based School Non-Attendance Co-ordinator will support schools to implement and embed the EBSNA guidance, through 2024-25.
- Case work dip sampling will take place with the support of the quality assurance team during 2024 with the theme of alternative provision. This will enable a clear review if recently implemented processes are effective and responding to the outcomes for children and young people.
- The medical policy will be revised in line with new government expectations, to ensure referrals to the Nightingale Home and Hospital Service and The Orchard Centre PRU are appropriate.

The local authority's use of unregistered and online provision is lawful and appropriate to children and young people's needs

- The Alternative Provision Flexible Framework & quality audit process will be aligned to ensure compliance with new procurement and legal regulations, and ensure value for money,

- A flexible framework for Independent SEND providers will be commissioned alongside the tender of the Alternative Provision Framework which is due to time expire in 2025.
- Establish a system for schools to share information when children and young people are placed in school commissioned alternative provision placements.

Education provided under section 19 should be full time (unless medical needs make this impossible) and suitable for the child, taking account of their age, ability and special educational needs (if any)

- Establish guidance for schools and attendance services regarding the use of Education Supervision Orders (ESO) to improve parental engagement and reduce the burden of court cases.
- Attendance leaders will establish work with social care managers to develop the ESO process for cases where attendance is an issue, and the family are involved with Child in Need and Child Protection assessments.
- Revise the School Attendance Order policy and ensure school admission leaders work with the team in a timely manner to ensure schools are named for the order.

Area 13: Legal Duties and Statutory Guidance

Strengths	Areas for Development
<ul style="list-style-type: none"> Partners work proactively together to ensure that they are compliant around the SEND Code of Practice. This is evidenced in the compliance rate of new assessments and an increase in the quality of EHCPs demonstrated using the multi-agency Invision Quality Assurance tool. The Attendance Service has a clear and proactive approach towards implementing its statutory duties around attendance and uses its data to support and challenge local schools. The redesign of the Local Offer has followed the guidelines outlined within the SEND Code of Practice which has resulted in a website that is collaborative, accessible, comprehensive, up to date and transparent about the offer available. The Headteacher Induction Programme offered by the Education Excellence Team covers school leaders' statutory responsibilities. The Inclusion Service and SEND Commissioning Team have a good understanding of the Department of Education's Alternative Improvement Guidance. Placements and provisions are effectively monitored within the City for children and young people at risk of exclusion. All education settings across the city complete the s175/157 statutory audits for safeguarding. KCSIE - all annual safeguarding training delivered in settings includes all updates and information from KCSIE MASH24 provides consistency of practice and response over 24 hours negating the need for an Emergency Duty team. The Children's MASH service ensures that all referrals are triaged by managers in a timely manner and threshold decision is applied. 	<ul style="list-style-type: none"> Annual reviews will be developed further with schools and professionals to support an increased compliance of amendments. Work is due to take place with regional partners within the West Midlands Alternative Provision Leads group, to establish a shared approach to the use of AP. Work is due to take place with school leaders to define the criteria and pathways that for Alternative Provision as part of the new Inclusion Framework and review of ISAPP. Inclusion and Attendance Team to revise non-attendance pathways around statutory role to ensure support is put into place prior to any legal action being taken. Attendance leaders will be developing work with social care managers to develop the Education Supervision Order. Systems will be developed further to ensure CME Outcomes are standardised on Power BI dashboards. Work will be taking place to improve the data captured and reported on of DoLS through the Children's Social Care system (Eclipse).

What and How we Know About the Impact of Our Arrangements for Children and Young People with SEND

Local area partners, and individual providers are familiar with SEND code of practice

- Partners work proactively together to ensure that they are compliant around the SEND Code of Practice. This is evidenced in the compliance rate of new assessments and an increase in the quality using the multi-agency Invision Quality Assurance tool and is monitored as part of the quality assurance process within SENSTART.
- Staff within the SENSTART team have a good knowledge of the expectations within the legislation and can support other services to understand the expectations around professional advice. Training is planned as part of the CPD cycle with social care to support advice writing within plans.
- The redesign of the Local Offer has followed the guidelines outlined within the SEND Code of Practice which has resulted in a website that is collaborative, accessible, comprehensive, up to date and transparent. The WIASS website has been redesigned to offer a better user experience. This includes easy read and video resources to explain statutory processes. Consequently, the website is more accessible and statistics over a six-month period in 2023 show that 887 individuals downloaded information factsheets and booklets.
- Information, advice and support is provided through the well-established Wolverhampton Information Advice Support Service. Jointly funded by local authority and Black Country ICB the service underwent a restructure in 2023 to increase capacity. As a result, 1 supported 779 individuals with tailored advice and support. This is an increase of 63% from the previous year.
- The Headteacher Induction Programme offered by the Education Excellence Team covers school leaders' statutory responsibilities with regards to SEND, including an overview of the SEND Code of Practice and the Equalities Act, so that all school leaders fully understand their statutory obligations with regards to SEND provision. Further advice and support is offered to all headteachers through the School Improvement Advisor Days, that occur five times a year.

Local area partners, and individual providers are familiar with Department for Education (DfE)'s alternative provision guidance

- The Inclusion Service and SEND Commissioning Team have a good understanding of the Department of Education's Alternative Improvement Guidance. Placements and provisions are effectively monitored within the City for children and young people at risk of exclusion. All young people's learning plans that attend registered or unregistered provisions are reviewed on a weekly basis by the Inclusion Team and they attend 6 weekly monitoring visits to ensure that they provision is meeting the required expectations and outcomes for young people, as set out in their learning plan. All Alternative Provisions that are used for exclusion prevention the Local Authority part of a procurement framework who are required to received regular quality assurance monitoring visits, the most recent being completed in Autumn 2023.

Local area partners, and individual providers are familiar with Children Missing from Education, attendance, and part-time timetables

- The Attendance Service has a clear and proactive approach towards implementing its statutory duties around attendance and uses its data to support and challenge local schools. This includes working alongside schools to notify and implement recent changes in the attendance guidance through the delivery of Wolverhampton Attendance Workshops, co-delivered the DfE advisor Kevin Burns, in the spring term of 2024. This enables the sharing of data around attendance, update schools on the support available to help monitor attendance and identify support pathways such as the Emotional Based School Non-Attendance Pathway (EBSNA). Out of City Placements are also monitored through the commissioning of Welfare Call for children and young people with EHCP's and Children in Care and monitored through SENSTART and the Virtual School ensuring that support expectations are realised by the settings.

What and How we Know About the Impact of Our Arrangements for Children and Young People with SEND

Liberty Protection Safeguards

- Shared training has taken place to develop a common understanding of Mental Health Capacity and DoLS across the partnership (procedure/process/policy) as part of the DfE's support through the RISE partnership support programme in February 2024. This has offered some reassurance around a shared understanding towards liberty protection.

Safeguarding

- All education settings across the city complete the s175/157 statutory audits for safeguarding. They were last completed in July 2023 and findings were fully compliant for safeguarding protocols with many demonstrating outstanding inclusive practice. Many schools purchase the Safeguarding SLA where more robust audits take place, including SEND provision.
- MASH24 provides consistency of practice and response over 24 hours negating the need for an Emergency Duty team. MASH24 consists of Children and Adult Social Care, Early Intervention, Police, Wolverhampton Homes, Recovery Near You, Probation Service, Royal Wolverhampton NHS Trust, Black Country Partnership Foundation Trust and Education representation.

- The Children's MASH service ensures that all referrals are triaged by managers in a timely manner and a threshold decision is applied. Children who may be at risk of significant harm are safeguarded appropriately and there are positive links with the Child Assessment Team, Multi-Agency Child Protection Teams and the Court team.

Keeping children safe in education: statutory guidance for schools and colleges

- KCSIE - all annual safeguarding training delivered in settings includes all updates and information from KCSIE. All staff are issued Part 1 and must read and sign to state they understand and will adhere to the guidance. This includes guidance on safeguarding of pupils with additional needs/SEND. As part of the SEND reviews and Safeguarding SLA, school advisors audit safeguarding protocols in settings to ensure staff are trained and have an inclusive culture for safeguarding. All training for education Designated Safeguarding Leads includes this guidance.

Working together to safeguard children 2023

- Updates for the new guidance have been shared with all settings across the city. As part of a multi-agency partnership, education contribute to universal early help for any pupil and as professionals for any social care plan for individual pupils. All training for education Designated Safeguarding Leads includes this guidance.
- MASH have taken steps to become more visible within partner agencies to help and discuss the contact process. Visits have been made to health services, including the 0-19 service, midwives, and mental health services. DSL events take place on a quarterly basis, and meetings regularly take place with Wolverhampton Homes, Police and Recovery Near You. This has helped to build positive relationships whereby threshold conversations can happen as required. MASH have been working closely with the Early Intervention teams to help ensure that there is support in place for partner agencies completing the Early Help Assessment to build confidence, not only in the case management systems, but also in talking to parents and offering support.

Local area partners, and individual providers are familiar with SEND code of practice

- Annual reviews will be developed further with schools and professionals to support an increased compliance of amendments through the development of guidance and systems to support the process. This will be supported through the review of the current IT systems used to help make the process easier to submit changes, requests and amendments.

Local area partners, and individual providers are familiar with Department for Education (DfE)'s alternative provision guidance

- Work is due to take place with regional partners within the West Midlands Alternative Provision Leads group, to establish a shared approach to the use of AP.
- Work is due to take place with school leaders to define the criteria and pathways for Alternative Provision within the Inclusion Framework and review of ISAPP.

Local area partners, and individual providers are familiar with Children Missing from Education, attendance, and part-time timetables

- Inclusion and Attendance Team will revise non-attendance pathways around the statutory role to ensure support is put into place prior to any legal action being taken to incorporate newly established roles.
- Work is to be undertaken and monitored to ensure all schools use the Penalty Notice process as set out in the new Working Together to Improve School Attendance Guidance.
- Systems will be developed further to ensure CME Outcomes are standardised on Power BI dashboards.
- Attendance leaders will be developing work with social care managers to develop the ESO process for cases where attendance is an issue, and the family are involved with CIN/CP.

Local area partners, and individual providers are familiar with Liberty Protection Safeguards

- Work will be established to improve the data captured and reported on of DoLS through the Children's Social Care system (Eclipse).



Supporting Documents

SEND and Inclusion Strategy 2024-27

SEND and Inclusion Easy Read Strategy

Joint Strategic Needs Assessment

Emotional Mental Health Needs Assessment

SEND and Inclusion Governance Arrangements

Children and Young People SEND Survey 2023 Results

Voice4Parents Annual Survey 2022/23 Results

SEND and Inclusion Self Evaluation Key Performance Indicators

HY5! Annual Report

Annex A Evidence Bank

You can get this information in large print, braille,
audio or in another language by calling 01902 551155
or emailing translations@wolverhampton.gov.uk

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