

Ofsted  
Agora  
6 Cumberland Place  
Nottingham  
NG1 6HJ

T 0300 123 1231  
**Textphone** 0161 618 8524  
enquiries@ofsted.gov.uk  
[www.gov.uk/ofsted](http://www.gov.uk/ofsted)  
[lasend.support@ofsted.gov.uk](mailto:lasend.support@ofsted.gov.uk)

22 December 2021

Catherine Underwood  
Corporate Director for People  
Nottingham City Council  
Loxley House  
Station Street  
Nottingham  
NG2 3NG

Amanda Sullivan, Clinical Commissioning Group Chief Officer

Sara-Jane Brighthouse, Local Area Nominated Officer

Dear Ms Underwood and Ms Sullivan

### **Joint area SEND inspection in Nottingham**

Between 8 November 2021 and 12 November 2021, Ofsted and the Care Quality Commission (CQC) conducted a joint inspection of the local area of Nottingham City to judge the effectiveness of the area in implementing the special educational needs and/or disabilities (SEND) reforms as set out in the Children and Families Act 2014.

The inspection was led by one of Her Majesty's Inspectors from Ofsted, with a team of inspectors including an Ofsted Inspector and a children's services inspector from the CQC.

Inspectors spoke with children and young people with SEND, parents and carers, and local authority and National Health Service (NHS) officers. They visited a range of providers and spoke to leaders, staff and governors about how they were implementing the SEND reforms. Inspectors looked at a range of information about the performance of the area, including the area's self-evaluation. Inspectors met with leaders for health, social care and education. They reviewed performance data and evidence about the local offer and joint commissioning.

In reaching their judgements, inspectors took account of the impact of the COVID-19 pandemic on SEND arrangements in the area. Inspectors considered a range of information about the impact of the pandemic and explored how the area's plans and actions had been adapted as a result.

This letter outlines our findings from the inspection, including some strengths and areas for further improvement.

## **Main findings**

- Area leaders were quick to respond to the SEND reforms. They undertook significant and timely actions when the reforms were introduced. Education, health and social care leaders and professionals share a common ambition for Nottingham to be a truly inclusive place to live.
- Leaders understand the current strengths and areas to improve in Nottingham's SEND arrangements. They know the shortcomings in SEND provision. There is an appropriate strategy in place to improve outcomes for children and young people with SEND.
- Recent, significant changes in the area's leadership have resulted in some disruption to the strategic oversight of the SEND strategy. Leaders are managing substantial organisational changes across services. They are beginning to overcome these challenges.
- An external review has made recommendations to improve commissioning arrangements. Leaders have responded to these recommendations by establishing structures to strengthen joint commissioning arrangements. Appropriate plans are in place to develop a joint commissioning strategy in the near future. The current absence of an overall joint commissioning strategy limits the area's ability to use commissioning as a tool for improvement.
- Leaders have developed a coherent plan to support children and young people with SEND to prepare for adulthood. The plan identifies what should happen at each stage of a child or young person's school life. The pandemic delayed implementation of this new consistent approach. The partnership with 'Futures' strongly supports young people with SEND to transfer from schools into further education, employment or training.
- The online local offer for children and young people with SEND is not well publicised. It does not capture all the services and activities. There is no effective oversight of the local offer website to ensure that it is well maintained and accessible to all parents and carers.
- The neurodevelopmental pathway is not communicated well enough to parents. As a result, some parents have unrealistic expectations of what support their children will receive once diagnosis has been confirmed.
- Area leaders have not communicated their strategy for identifying, assessing and meeting the needs of children and young people with SEND clearly enough. A

large proportion of parents do not understand or appreciate the strategy. Many do not know where to find information and guidance to improve outcomes for their children.

## **The effectiveness of the local area in identifying children and young people's special educational needs and/or disabilities**

### **Strengths**

- Professionals work together effectively across services to identify the needs of children and young people with SEND. This effective work continues during the pandemic.
- Early years provision for children with SEND is strong. Well-established working relationships across all services support the identification of children's needs at an early stage. Education, health and social care colleagues share information. They work together to support families effectively. For example, the 'Small Steps, Big Changes' team supports families. It helps children with SEND to develop their communication skills and understand their emotions and behaviour. The team works closely with health visitors to provide families with further support when needed.
- Children and young people with complex needs benefit from early identification of their needs. Professionals across frontline education, health and social care services work effectively to ensure that children and young people with SEND receive appropriate clinical and medical support from their earliest years. Children and young people with hearing impairment told us how they receive valuable support through the hearing impairment service, speech and language service and teachers of the deaf.
- Ahead of guidance from the government, the Designated Clinical Officer team worked with partners across Nottingham City's and Nottinghamshire's public health teams. They worked with infection prevention control leads to assess and agree interim steps to allow the safe reintroduction of children requiring aerosol generating procedure back to school during the pandemic. Children were able to return in September 2020, with very few staying at home. This included transport to and from school.
- Young people with SEND entering the Youth Justice Service (YJS) receive appropriate support and focused assessments to identify their needs. Professionals work with young people to identify undiagnosed speech, language and communication needs and poor mental health. There is strong provision to support young people with SEND in the YJS through the work of three dedicated nurses.
- Children and young people with SEND have access to a variety of health services, including the school nurse 'Text Health' text service for 11- to 19-year-olds. This service is offered daily to children and young people with SEND to support concerns about their health. Children and young people who

require more intervention are referred to the school nurse. An out-of-hours automated service provides emergency numbers to call. The service is well used and valued by children and young people.

### **Areas for development**

- Leaders have not communicated their strategy for early identification of children and young people's needs well enough. Some parents do not appreciate the range of support that is made available for their children who do not have a formal diagnosis or education, health and care (EHC) plan. Some parents do not understand the purpose of having an EHC plan, believing that having an EHC plan automatically brings additional funding.
- Not all parents understand the system in place to identify and meet the needs of children and young people with SEND. For example, some parents of older young people attending specialist provision expressed their frustration over their child being refused an EHC plan while attending primary school only to have their request processed at a later stage.
- Leaders recognise that support for young people with SEND to transfer from children's services into adult services is an area in need of improvement. They have developed a suitable strategy which they expect to put in place shortly. This strategy is based on an individualised approach to support young people.
- Some children and young people with SEND wait too long for assessments to identify possible autism spectrum disorder (ASD). Some parents do not feel that they or their children are well supported while waiting for these assessments. They feel that the behavioural, emotional and mental health (BEMH) pathway offers only basic support for children with complex needs while they are waiting for a formal assessment. Some consider the thresholds for support and treatment to be too high. Nevertheless, the pathway provides parents and professionals working in schools with appropriate strategies to support children and young people while they wait for a formal assessment of their needs.
- Some parents are frustrated with having to wait for assessments to identify their children's needs. Some are resorting to paying for private assessments and therapies to ensure that their children's needs are met appropriately.

### **The effectiveness of the local area in meeting the needs of children and young people with special educational needs and/or disabilities**

#### **Strengths**

- Leaders demonstrate their commitment to inclusion through prioritising funding to meet children and young people's needs at the earliest possible stage and in their own community.

- The quality of EHC plans has improved over time. Recently completed EHC plans accurately capture the views, interests and aspirations of children and young people with SEND. Suggested support and strategies are outlined clearly. Outcomes to prepare children and young people for adulthood are identified in plans.
- Nottingham CityCare Partnership specialist community public health nurses for school health and health visiting deliver the 0 to 19 offer. They work in teams alongside specialist community public health nurses to assess and support the needs of children and young people with SEND.
- The virtual school carefully oversees children and young people with SEND who are also in the care of the local authority. Children and young people benefit from frequent assessments of their education, health and social care needs. Those with EHC plans receive timely reviews so that the requirements of their plans are met.
- Highly effective partnership working through 'Futures' supports young people to prepare for adulthood. 'Futures' provides a range of services for young people with SEND. It offers an individualised approach to support these young people through this key phase in their lives.
- There is a commissioned neurodevelopmental pathway in place. The behaviour and emotional health team ensures that all referrals are screened using a single point of access with the child and adolescent mental health services (CAMHS). Referrals include children and young people experiencing emotional and mental health issues and ASD and attention deficit hyperactivity disorder. Professionals work together to decide the most appropriate assessment and intervention for children and young people.
- Speech and language therapy (SALT), occupational therapy and physiotherapy services provide an 'opt-in' process for assessing and meeting the needs of children and young people with SEND. Parents are supported in this process. SALT provides blocks of therapy and support to children and young people with SEND at the point of need. As a result, children and young people with SEND are assessed in a timely way and waiting times are minimal.
- A well-planned personal budget process provides clear information to parents about what is available to them and how budgets can be spent. For example, leaders have effectively integrated personal budgets with their short-break offer. Additionally, young people with SEND receive targeted support for independent living where this is perceived as a possibility.
- Parents of children and young people with SEND find the advice and support they receive from the Special Educational Needs and Disability Information and Advice Service helpful. Trained advisers work closely with families and support parents well.
- There is wide-ranging support for children and young people's social and emotional well-being and mental health needs. Support is available for

parents and professionals working with the family. Services are innovative and adaptable to the needs of individuals. The effectiveness of the provision is closely monitored to ensure that interventions are working.

- Children and young people with SEND can share their views and have their voices heard. A recent initiative linked to 'Ask Us Nottingham' (Young Reviewers group) involved children and young people with SEND feeding back their views on facilities and services provided in the city. Issues such as how public transport best meets their needs and access to the castle were brought to the attention of leaders. Children and young people with SEND are proud of their involvement in this project.

### **Areas for development**

- There is no collaborative and consistent quality assurance process for EHC plans. The city council has its own process to check the quality of plans but this does not include health colleagues. The designated clinical officer and the SEND health coordinator are currently working towards a single framework which will represent all health services. Plans for the council and health team to work together on a joint quality assurance process are not clear.
- Health and social care contributions to EHC plans are often lacking in detail. Some descriptions of educational needs are overly complex. There is a risk that weaknesses with these aspects of EHC plans may lead to the needs of children and young people with SEND not being met accurately. Leaders know that these parts of EHC plans need further refinement.
- There is extensive published information available for parents, including through the local offer website. However, most parents do not know where to find this information. Many do not know about the local offer website. This is particularly the case for those who speak English as an additional language and for those experiencing digital poverty.
- Until very recently, there were no templates and icons to identify children and young people with SEND, including those with an EHC plan, in electronic health records. This meant that professionals accessing the electronic records were not alerted to a child or young person's additional needs.
- There are significant recruitment difficulties within some therapy teams. This is particularly the case for occupational therapy and physiotherapy teams. Experienced therapists are working longer hours to make up for the shortfall in staffing. This approach is not sustainable. Leaders have designed an appropriate improvement plan but this has not yet been progressed due to leadership changes.
- The BEMH pathway is not communicated well enough to parents. Consequently, many parents have unrealistic expectations about what they will receive once a diagnosis has been confirmed.

- There are limited social and recreational opportunities in the community that children and young people with SEND can access. Those that exist are said by parents to be run by adults who are not sufficiently trained in meeting the needs of children and young people with SEND. A typical example of this was where children with SEND were unable to join a boxing club because the trainers could not manage their needs. Area leaders did start work to improve provision in the area before the start of the pandemic. They have yet to continue with these efforts.
- Recent improvements to the management of resources and funding for CAMHS has yet to make a difference to the sometimes long waiting times for children and young people with SEND.
- The short-break offer does not currently meet the range of diverse needs and disabilities of children and young people and their families. Some parents find it difficult to access the short breaks and respite provision they want. Leaders are working to address the gaps in provision for short breaks.

## **The effectiveness of the local area in improving outcomes for children and young people with special educational needs and/or disabilities**

### **Strengths**

- Outcomes for children with SEND in the early years have improved over time. The targeted support these children receive is appropriately focused on improving their outcomes.
- Settings, schools and colleges, in partnership with area leaders, support children and young people with SEND to make progress. Those with complex needs make strong progress. Education professionals are skilled at supporting children and young people with SEND in having a strong sense of achievement when accreditation in formal examinations is not an option. The progress of children and young people with SEND is closely monitored and adjustments are made to their curriculum when needed.
- Area leaders provide bespoke training for staff working in schools to understand and meet the needs of children and young people well. For example, the educational psychology service tailors training for staff according to children's needs. A recent example given by staff was training to support teenagers with SEND to manage their emotions.
- Despite a shortage of community paediatricians in Nottingham, children and young people with SEND are provided with an effective service to meet their needs well. The large majority of children and young people with SEND referred for assessment are accepted by the service and are fully assessed.
- Young people with SEND are supported to make appropriate choices for their post-16 destinations. Schools manage transition meetings well, working closely with 'Futures' to help young people move on to meaningful education

or training. A large proportion of young people with SEND leave school to attend further education, enter employment or begin apprenticeships. Young people aspire to attain qualifications and to achieve their ambitions.

- Some young people with SEND benefit from respite care. An outreach service is also available for young people. These services are highly valued and well received by young people and their parents. Young people with SEND can build their confidence, develop social skills and make friendships.
- Leaders closely monitor the number of children and young people with SEND who are excluded from schools and colleges. The introduction of the 'Routes to Inclusion' initiative and the work of the Intensive Support Team is having a positive impact on supporting schools and colleges to reduce the use of exclusions. Education professionals feel well supported by the range of strategies available to them to support children and young people with SEND who may be at risk of exclusion.
- Young people with SEND who are known to the YJS receive a comprehensive package of support, including for their speech, language and communication skills and mental health. The number of young people with SEND who reoffend is reducing as a result.

### **Areas for development**

- Some parents of children and young people with SEND described the transition from children to adult health services as like 'jumping off a cliff'. The health services available to adults with SEND are not equivalent in quality to those available to children and young people with SEND.
- Educational outcomes for children and young people with SEND in Nottingham are improving but are still too low. Leaders are driving necessary improvements, including training for staff. Some actions have been delayed by the pandemic.
- Many parents do not understand area leaders' strategy to improve outcomes for children and young people with SEND. They do not receive the information they need in this regard.
- There is some considerable dissatisfaction among parents with the quality of SEND provision in the area. This is because leaders have not ensured that key information for parents is widely disseminated and fully accessible. Many parents who responded to the online survey were negative in their opinions. Leaders recognise that they need to engage with the wider community of parents and share more effectively their approach for improving outcomes for children and young people with SEND.

Yours sincerely

Stephanie Innes-Taylor  
**Her Majesty's Inspector**

<b>Ofsted</b>	<b>Care Quality Commission</b>
Katrina Gueli HMI Regional Director	Mani Hussain Deputy Chief Inspector, Primary Medical Services, Children Health and Justice
Stephanie Innes-Taylor HMI Lead Inspector	Andrea Crosby-Josephs CQC Inspector
Jane Moon Ofsted Inspector	

Cc: Department for Education  
Clinical commissioning group(s)  
Director of Public Health for the area  
Department of Health  
NHS England