

Suffolk SEND Outcome and KPI measures -

June 2021

Current Performance

Baseline

Sep-19

Jan-20

May-20

Commentary

1. Parents, children and young people to get the right support at the right time and feel that they are listened to and in control

69 % of children/young people that have an EHCP, believe they were either well or very well placed at the centre of the process. (2019) i

69% (2019) 63% (2018) n/a 75% n/a

The SPNC annual survey reports the level of satisfaction/confidence in this area - this will not change until a further survey is completed by SPNC or we have alternative outcome measures to support this. There was not a 2020 annual survey

2. Suffolk pupils with an EHCP or on SEND support reach their expected standards at age 11 in English, reading and mathematics (to include, LAC and care leavers)

Key Stage 2 Results i

18% (2019) 16% (2018) n/a 21% n/a

Since 2017 the percentage of pupils with SEN achieving the expected standard in reading, writing and mathematics has increased by 3%pt in Suffolk

Expected Standard in Reading, Writing and Maths

Year	SEN	Gap	Non-SEN	Ntl Gap	LA-Ntl Gap
2017	15	50	65	53	-3
2018	16	52	68	53	-1
2019	18	52	70	53	-1

The attainment of pupils with EHCPs has increased by 1% in Suffolk and 2% nationally. The Suffolk to National gap is 2%pt in 2019.

The attainment of pupils with SEN Support has increased by 4%pt in Suffolk. The next set of nationally verified attainment and progress data will be available in Jan/Feb 2023. (Unvalidated data may be available from Nov/Dec 2022. The Standards and Excellence team work with school leaders including governors to support and challenge them in their whole school improvement work to secure improvement so that their provision meets the needs of their pupils, particularly, vulnerable learners including those with SEND.

3. Suffolk pupils with an EHCP or on SEND Support make expected progress at age 16 (to include, LAC and care leavers)

Progress 8 Score i

-0.47 (2019) -0.43 (2018) n/a n/a

Since 2017 the Progress 8 figures for pupils with SEN has decreased from -0.44 to -0.47.

Year	SEN	Gap	Non-SEN	Ntl Gap	LA-Ntl Gap
2017	-0.44	0.48	0.04	0.66	-0.18
2018	-0.43	0.58	0.15	0.69	-0.11
2019	-0.47	0.52	0.05	0.70	-0.18

For pupils with EHCPs Suffolk figures has fallen by 0.09 to -0.87.

For pupils with SEN support in Suffolk the figure has remained constant at -0.3.

The Standards and Excellence team work with school leaders including governors to support and challenge them in their whole school improvement work to secure improvement so that their provision meets the needs of their pupils, particularly, vulnerable learners including those with SEND. This support and challenge is provided to all LA maintained schools and those academies that take up the offer of visits. A range of evidence is used to evaluate the impact of the school's provision in meeting their pupils' needs. The last published performance data was in 2019 and the next validated published performance data will be , at the earliest, available in November 2022.

4. Education health and care needs assessments are completed within statutory timescales.

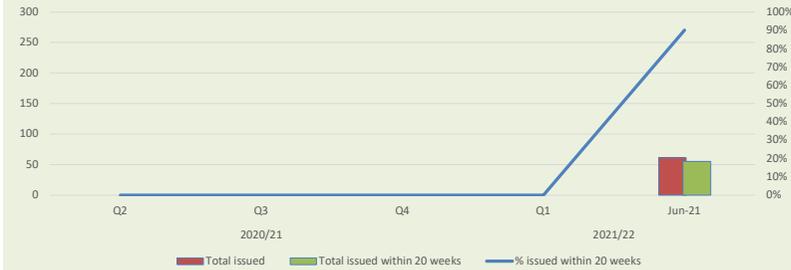
EHCP timeliness data – proportion of EHCP issued within 20 weeks (exc. exceptions) i

90 % Jun 2021 41 % average for the first quarter of 2019/20 50% 65% 70%

Completion of EHC Needs Assessment over the last 4 full quarters ran a 95% or over, the slight dip to 90% in June-21 reflects the difficulties in securing placements.

EHCP's Issued

(By Fin Year quarter and latest month)



	2020/21			2021/22	
	Q2	Q3	Q4	Q1	Jun-21
Total issued	#REF!	#REF!	#REF!	#REF!	61
Total issued within 20 weeks	#REF!	#REF!	#REF!	#REF!	55
% issued within 20 weeks	0%	0%	0%	0%	90%

The completion of EHC Needs Assessment within 20 weeks for 2020 performance as reported by the DfE was 80.1% the national average saw a dip to 55.6%.

National performance for 2019 was 60% and In 2019 Suffolk was 35% so this represents a very significant improvement due to the work of teams.

5. Assessment advice and EHC plans provide clear information regarding the needs of C&YP, the specific provision they require to meet those needs and outcomes are person-centred and specific to support progress

Type of Document	Internal Audit Score March 2020	Internal Audit Score Feb 2021	Variance since 2020
Final EHC Plan	16.4	17.8	+1.8
Final Amended EHC Plan	n/a	17.4	n/a
Annual Review Reports	n/a	13	n/a
Parent/CYP Advice	13	15	+2
Educational/Setting Advice	13	16	+3
Health/Medical Advice	7	11	+4
Speech and Language Therapy (SALT) Advice	12	18	+6
Occupational Therapy Advice	13	15	+2
Physiotherapy Advice	13	17	+4
Educational Psychology Advice	17	19	+2
Social Care	11	11	0

	Feb 21 Cycle	Mar 20 Cycle
Plans Avg. Score	17.80	16.40
Advice Avg. Score	15.25	12.10

The internal audit findings from 2020 to 2021, show improvements in the quality of the EHC Plan and in the EHC Needs Assessment Advice. There were significant improvement in the SALT advice, now scoring 18 after scoring just 12 in the Internal and Enhance March 2020 audits. Improvements have been supported by review of the advice templates and training delivered to all caseworkers

The external audit findings also track an improvement in the overall quality of both EHC Needs Assessment EHC Plans and the advice. There were notable increases in the SALT and Physiotherapy scores. Annual review paperwork was found to be lacking in detail which impacts on the quality of amended EHC Plans and, in some cases, where information has been provided, this is not being fully incorporated into the amended plans.

6. Children and Young People with an EHC plan make good progress in achieving their outcomes.

This needs a new reporting process from the Capita System. The annual review report has been amended to capture progress towards outcomes as data as well as narrative so data can be reported on. The Capita SEND professional portal is now being tested to accommodate electronic annual reviews and will be implemented at scale from September 2021

The EHC plan annual review documentation has the appropriate questions to measure progress against outcomes under the four areas of need and the short-term targets set, the management information system to record and report is under development for implementation at scale from September 2021

7. Annual reviews are well managed and impactful

a) % of LA responses to annual review reports within 2 weeks of receipt



65.9% Jun 2021

17.4% Dec 2018

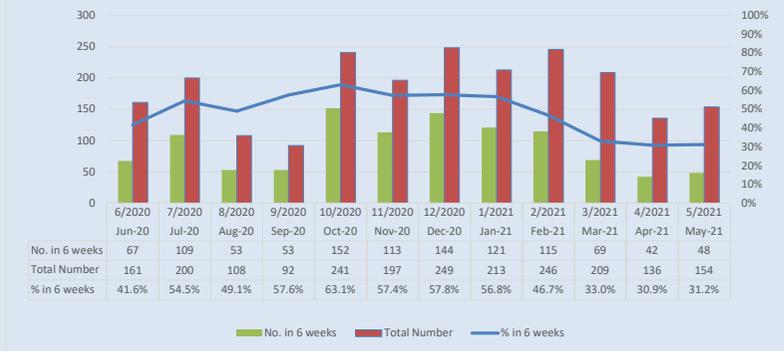
50%

70%

90%

Performance is not yet consistent and has been impacted by the processing of a backlog of reports and draft EHC Plans. KPIs will need to be reviewed in this area to include a wider system measures and the issue of final amended EHC plans.

b) % of draft amended plans issued within a further 6 weeks



31.2% May 2021

44.0% Dec 2018

50%

60%

70%

8. Children and young people with SEND are rarely excluded from school

SEN Exclusions



Annual	2020-21 (end June)		2019-20	
Fixed term exclusions	No.	%	No.	%
Fixed term exclusions (all pupils)	3,006	3.2	3,073	3.3
- Primary School	673	1.2	868	1.6
- Secondary School	2,321	6.1	2,202	5.8
- Special School	12	1.0	3	0.3
Fixed term exclusions (pupils with an EHCP)	390	11.7	324	11.9
- Primary School	177	14.7	157	13.6
- Secondary School	202	21.8	164	20.6
- Special School	11	0.9	3	0.3
Fixed term exclusions (pupils with SEN Support)	1,073	9.7	1,061	10.9
- Primary School	330	5.0	475	7.5
- Secondary School	743	16.8	586	13.8
Permanent exclusions	No.	%	No.	%
Permanent exclusions (all pupils)	61	0.06	124	0.13
- Primary School	7	0.01	33	0.06
- Secondary School	54	0.14	91	0.24
Permanent exclusions (pupils with an EHCP)	9	0.27	14	0.51
- Primary School	3	0.25	11	0.95
- Secondary School	6	0.65	3	0.38
Permanent exclusions (pupils with SEN Support)	11	0.10	41	0.42
- Primary School	1	0.02	18	0.28
- Secondary School	10	0.23	23	0.54

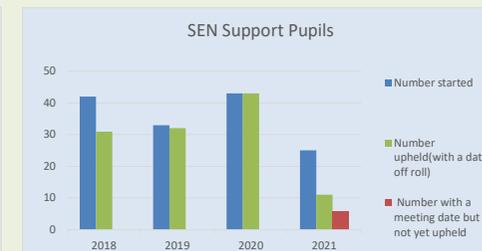
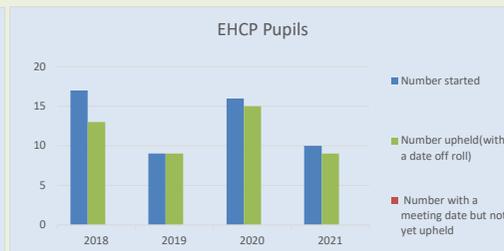
Fixed term exclusions are declining across all categories of pupils, however, it is difficult to draw conclusions about trends because of the very unusual circumstances of the pandemic.

School level data is reviewed and targeted work undertaken to support and challenge schools around the use of exclusion. This has also included challenge to the Regional School Commissioners team about the use of exclusion data as part of their annual conversation with MATs. LA officers have held meetings with MATs where exclusion rates are a concern. We continue to challenge and support schools to consider alternative solutions and as a consequence the number of permanent exclusions begun but not concluded has increased. Furthermore, we have communicated our graduated response and redesign of the Specialist Education Services to all secondary schools attending the IYFAP setting an expectation of seeking earlier support from September.

Permanent exclusions across all groups of pupils have fallen. While it is positive to see a reduction compared with 19/20 it is difficult to assess what this data means because of the very unusual circumstances of the pandemic. Exclusions due to persistent disruptive behaviour continue to occur, this is an area of priority focus to address. It is positive to see the reduction in PEx for children with EHCPs and substantial reduction for those on SEN support.

School level data is discussed and shared with the Regional Schools Commissioners team and targeted work by LA officers is undertaken to consider how schools can be supported and challenged to reduce rates of exclusion for this group of young people. Currently sharing with Stakeholders in the school community about how to address the impact. We continue to challenge and support schools to consider alternative solutions and as a consequence the number of permanent exclusions begun but not concluded has increased. Furthermore, we have communicated our graduated response and redesign of the Specialist Education Services to all secondary schools attending the IYFAP setting an expectation of seeking earlier support from September.

Permanent exclusion: Trend over time



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Sep-19

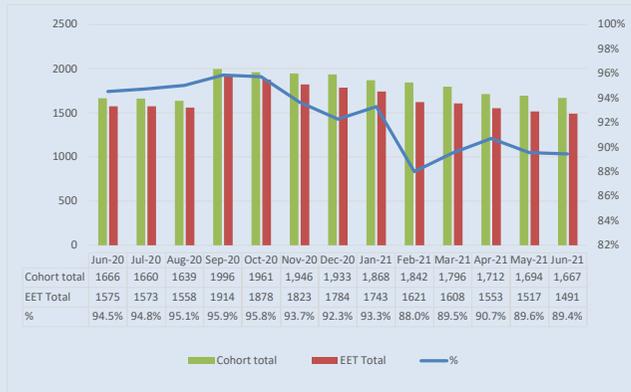
Jan-20

May-20

Commentary

9. All young people aged 16 – 25 with an EHC plan are in education, employment or training

Percentage of young people 16-25 years old that are EET



89.4%
Jun 2020

80.1%
Dec 2018

90%

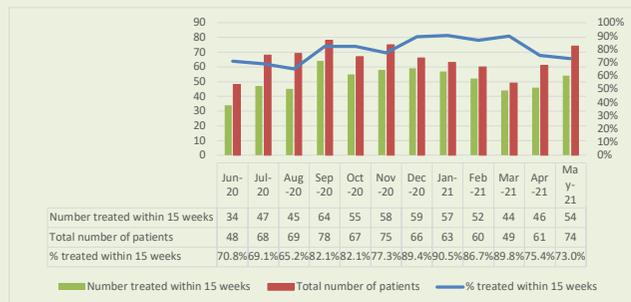
90%

90%

Programme Manger note: The approach used to calculate this data will be subject to a review as part of the refresh of the Outcomes Framework

10. Children & young people access Emotional Wellbeing and Mental Health support

a) Under 18 Referrals treated within standard (15 weeks) Ipswich E&W Suffolk



73%
May 2021

95%

95%

95%

10 Agency staff have nw been recruited to support the EWH. A detailed plan is in place to address ongoing needs and support. A clinical nurse specialist has now started and is supporting the clinical team, prioritising the ADHD referrals. There are 300 cases in the EWH that have been identified for ADHD, while we know only a small percentage of these meets ADHD service criteria, there referrals are waiting triaging to enable them to move to teh ADHD team. An additional resource band 4 and band 6 are currently reviewing the EWH referrals and wfurther work led by the Clinical Nurse Lead in the EWH will be reviewing how referrals are screended and what information is sent with the referral to improve the pathway and anable all ADHD referrals that meet the criteria are sent to the ADHD. VCS offers are available and wil soon jon the exisiting hub staff supporting triagging and signposting. The option of a parent helpline is currently beinf explored with Barnadoes. CFYP external webpage is now under development with guidance that relates to self help and parental support.

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Current Performance

Baseline

Sep-19

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May-20

Commentary



85.7%
May 2021

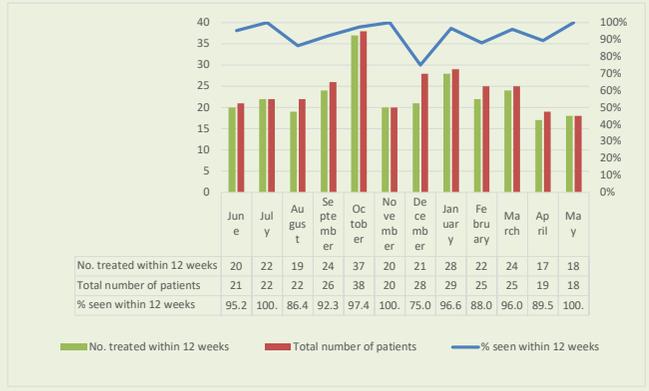
95%

95%

95%

Meetings have taken place with Teenage Mental Health Trust looking at support for the current case load. Exploration of other services too have begun, these have included virtual CBT offers from services such as Heliious. The targetted therapies team have begun wor and are starting to receive cases. Patient trackers now being developed within core teams in order to add clarity as to what patients are waiting for and thier priority. Work with Barnardos and MIND continues.

c) Under 18 Referrals treated within standard (12 weeks) - Waveney



100%
May 2021

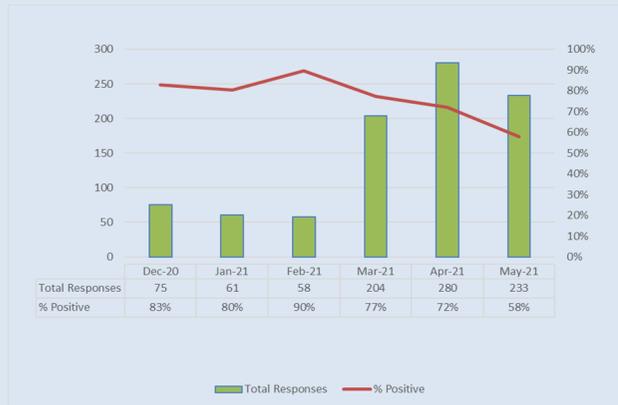
95%

95%

95%

11. Emotional wellbeing and mental health services to have a positive impact for children and young people with SEND

The FFT data for childrens and young people services (NSFT)



58% in May 2021

Friends and Family Test.

CFYP recognised that responses to FFT questionnaires was very low. A re-design of FFT questions was proposed and taken to two Young peoples participation groups.: The first group met to discuss what questions yp would like to see in the FFT. The second group then met and compared these questions with the questions which were used in the EWH and against the QNCC standards. The new Suffolk CFYP bespoke questions are now being sent out since mid April. Responses between September 2020 and 15th March 2021: 3 Responses since SMS campaign launched 15th March: 24

Examples of suggested improvements:

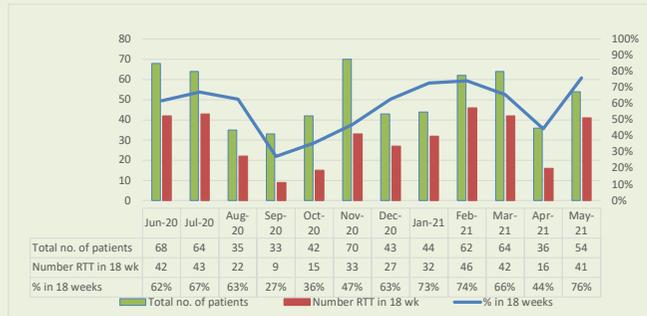
"Pandemic probably didn't help. Explaining myself over and over again was exhausting when going through different teams of people"
 "A quicker initial assessment"

Examples of comments/compliments:

"Everyone that I've had opportunity to communicate with have been very reassuring and helpful"
 "I feel that I've been listened to and respected by everyone I have spoken to from every service I have had contact with recently. Any questions I've had have been answered and I understand my condition far better as a result of this"
 "Very happy the way things are going and the medication (name) receives"
 "It's a caring service and your problems are treated with respect. They do all they can"
 "Daughter has received good care with a team that has known her for 3 years. Good support for family too"
 Feedback: FFT data is discussed in participation groups so that yp/carers are involved in how we can make improvements in the areas which are being highlighted and also to look together at how we can celebrate the good work which is already taking place.
 Our PPL sends out feedback to teams for local learning.

a) Number and percentage of children and young people seen within 18 weeks by Integrated Community Paediatric Services. (Ipswich E&W Suffolk)

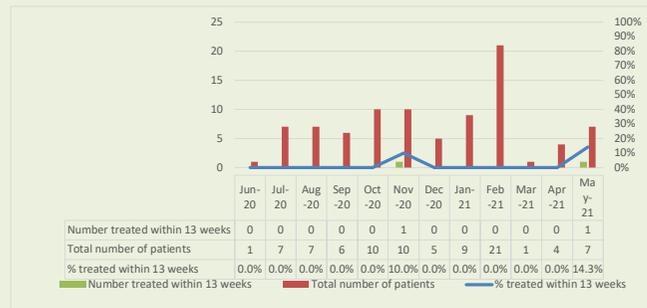
76%
May 2021



12a relates to the NHS waiting standard for first appointment from initial referral to the community paediatric medical team. This chart is for all referrals to the Paediatric East & West Team and not just those on the ASD assessment pathway. New system in place. Currently running three 'clinics' a wee and able to conclude (ie. ASD/Non ASD) two out of the three families in the same week. This new system has enabled the team to catch up on many cases from earlier in the year also. It is hoped that the team will reach its KPIs by the end of the summer.

b) Number and percentage of children and young people with suspected Autism receiving an assessment that are seen within 13 weeks of referral (Ipswich E&W Suffolk)

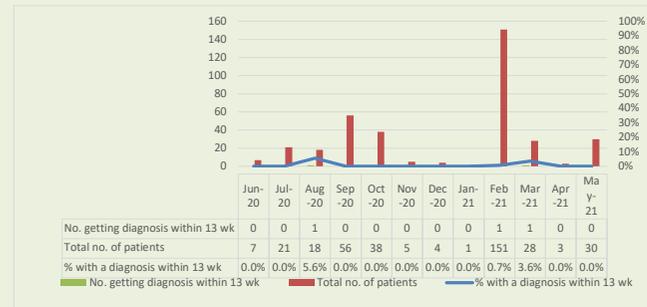
14.3%
May 2021



ASD
There continues to be longer waits within the assessment pathway for ASD due to service restrictions for some assessments, and access, caused by the pandemic. New system in place. Currently running three 'clinics' a wee and able to conclude (ie. ASD/Non ASD) two out of the three families in the same week. This new system has enabled the team to catch up on many cases from earlier in the year also. It is hoped that the team will reach its KPIs by the end of the summer.

c) Number and percentage of children and young people receiving a ADHD diagnosis within 13 weeks of referral (Ipswich E&W Suffolk)

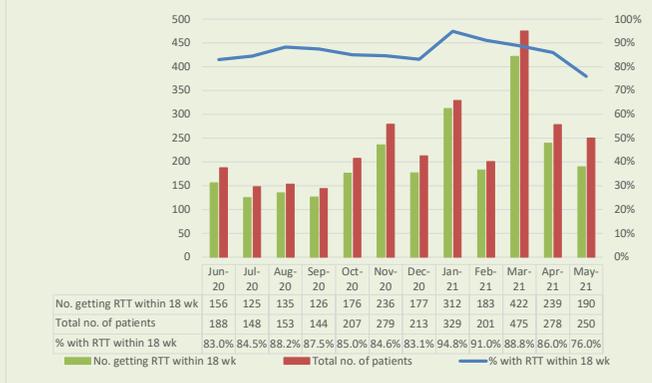
0.0%
May 2021



ADHD
Suffolk CFYP continue to experience challenges of the capacity of the team to meet the needs of the caseload continues. 1 nurse is the team undertaking her non-medical prescribing course currently, this will increase the education review resource in the team in the West of the county. The ADHD recovery business case has been submitted to the CCG and is awaiting review of the CCG comments provided before it can be agreed. If successful this will ensure there is sufficient capacity in the team to undertake the medication reviews in line with NICE guidance, under 10 year- monthly, over 10 years 6 Monthly.
This will also enable the following report to increase awareness, knowledge and skills in the community:- Education and training provision for GP's to recognise the signs of ADHD and to provide patients a better understanding of their expectations of ADHD diagnosis. Education and training in schools for psycho-education to support them to better understanding the impact of ADHD will have in their interaction and preparation for children with ADHD. Dedicated parenting education and support working alongside out partners in universal services. Promotion of good practice under SEND by development and implementation of targeted health information/education to wider health, social care services and education potential to reduce diagnostic overshadowing. Develop service user engagement in service development and patient experience feedback. Service user engagement to enable working together. Listening to and embracing the expertise of those with lived experience as equal and valued partners in driving the design and development of better ADHD services going forward.
The ADHD team continue to support the neuro-development pathway transformation work, working with clinicians in other areas of the pathway to develop a service that is more responsive and appropriate to meet service users needs.

d) Number and percentage of children and young people receiving treatment within 18 weeks of referral (Ipswich E & W Suffolk)

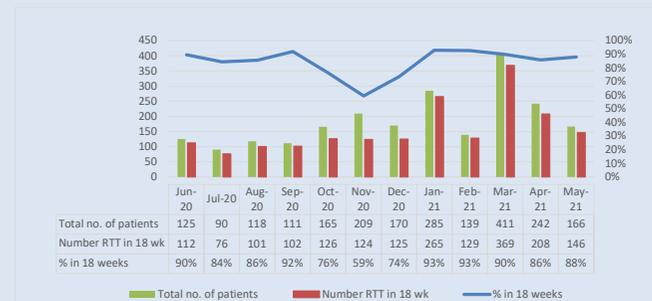
76%
May 2021 95% 95% 95%



13. Children and young people with SEND to have access to therapies within the timeframes (Physio, OT, speech & language)

a) Number and percentage of children and young people seen within 18 weeks by Integrated Community Paediatric Services

88%
May 2021



This data reflects all children seen within month from a new referral for initial assessment within the ICPS therapy teams (Clinical Psychology, OT, Physio, SCARC)

The ICPS therapy teams continue to be able to respond to the majority of initial assessments within 18 wks as expected. This data reflects all referral activity and not just children with SEND.

b) Number and percentage of children and young people with speech and language therapy seen within 18 weeks by Waveney

29%
May 2021



95% 95% 95%

ECCH are currently delivering EHCP provision in Waveney but the community caseload is experiencing a significant backlog expected to be approximately 65 in Waveney (1400 in total). Provider is prohibited by lockdown restrictions in delivering school based therapy but is increasing their digital offer. The digital platform has improved and more children are accessing therapy this way since the first lockdown. Where this is not clinically appropriate, face to face appointments are being requested by ECCH should schools be able to facilitate this.

c) % of children receiving speech and language therapy, who started treatment within 12 weeks of initial assessment (Paediatric SLT Community clinics and mainstream schools). Ipswich East&West Suffolk

25.6%
May 2021

95% 95% 95%

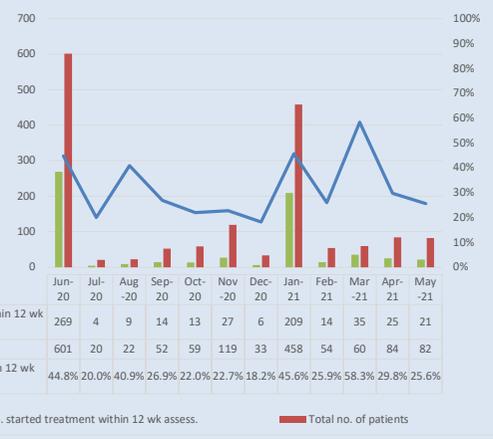
Offering children therapy within 3 months of assessment (their 1stPoC), was the target once all the funding had been utilised and other aspects of the re-design was in place. Due to Covid this has restricted what we can offer (no face to face groups-so waiting lists and times have increased; early years staff unable to carry out f2f assessment/intervention; re design of early years intervention is on hold)

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Current Performance Baseline Sep-19 Jan-20 May-20

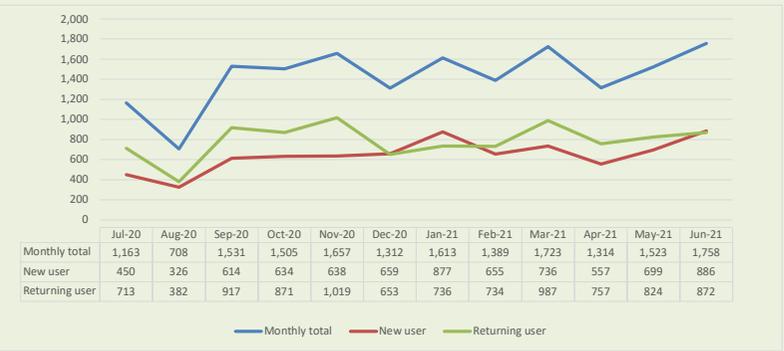
Commentary



- We have 4 whole time equivalent vacancies due to mat leave and back fill and 1 staff member on reduced hours to manage health issues. We have been unable to find cover for any fixed term posts at all adding strain to the capacity available.
- We continue with virtual assessment and therapy; increasing face to face where this is essential, appropriate and a suitable space is available.
- Virtual appointments take as much if not more time to organise, prepare for and execute due to all the information governance and practical elements to this
- We are unable to carry out any face to face group work and this was a large part of our work in seeing 4-5 children at any 1 time. We are unsure when this will be possible due to social distancing requirements and access to suitable space.
- This will have a significant impact on waiting times as all children have to be seen individually which increases the length of wait
- Schools were still closed to most children until 8th March, so a virtual offer has been offered but some parents are unable to take this up due to having IT issues, siblings at home, home schooling
- The service migrated from our old IT contract to WSFT IT in February, and this did present with challenges for some staff where sessions had to be cancelled due to the IT not working as it should.
- Training of school staff is on the increase as the service devised new PoC and ways of delivering training to several schools virtually

14. Service users are aware of and use the local offer website

Monthly usage statistics of the local offer website



1758 Jun 2021 813 hits in December 2018 Maintain 1,000 hits per month Maintain 1,000 hits per month Maintain 1,000 hits per month

Our website analytics are continuing to improve and we have consistently reached over 1,300 unique visits in 2021. Social Media hits and post engagements are high and still continuing to increase. We have promoted a vast amount of content and our new tool Orlo, allows us to easily schedule future content and respond to queries from families.

Have you heard of the 0-25 SEND Local Offer Website ? (SPCN 2019 survey)



41.6% 2018

41.6% of respondents had heard of the Local Offer website

