Suffolk SEND Outcome and KPI measures - February 2022

	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)	69% (2019)	63% (2018)	n/a	75%	n/a	The SPCN annual survey reports the level of satisfaction/confidence in this area - this will not change until a further survey is completed by SPCN 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	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	-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.

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.

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

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.

Suffolk SEND Outcome and KPI measures - February 2022

	Current Performance	Baseline	Sep-19	Jan-20	May-20
EHCP timeliness data – proportion of EHCP issued within 20 weeks (exc. exceptions)	30% Feb 2022	41 % average for the first quarter of 2019/20	50%	65%	70%

Commentary

Mar-22 - EHCPs issued within 20 weeks (excl exceptions) has reduced due to; increase in requests for EHCP's, the shortage of EP's and the under capacity of Family Services staff. These matters are being addressed via recruitment to vacant posts and an injection of new posts.

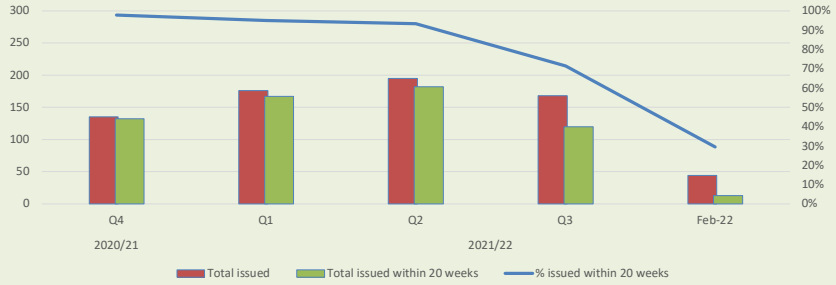
The last 4 quarters of 2020/2021 show an average of 89% EHCP completed within the 20 weeks.

The completion of EHC Needs Assessment within 20 weeks for the final quarter of 2020 performance will give an overall performance of 84% for calendar year 2020 which is the benchmark used by DfE and published nationally.

National performance for 2019 was 60% and In 2019 Suffolk

EHCP's Issued

(By Fin Year quarter and latest month)



	2020/21	2021/22			
	Q4	Q1	Q2	Q3	Feb-22
Total issued	135	176	195	168	44
Total issued within 20 weeks	132	167	182	120	13
% issued within 20 weeks	**98%**	**95%**	**93%**	**71%**	**30%**

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 (baseline)	Cycle 1 score (Sept-Nov 20)	Cycle 2 score (Mar-May 21)	Cycle 3 score (June-Aug 21)	Internal Average (C123)
New EHCP	16.4	17.8	18.7	18.8	18.4
Amended EHCP	n/a	17.4	18	18.7	18
Annual Review	n/a	12.6	13.6	12.6	12.9
Parent/CYP	13	15	17	13	15
Educational Setting	13	16	15	13	15
Specialist Teacher	n/a	n/a	14	11	13
Medical	7*	12	16	14	14
Mental Health	7*	9	13	13	12
SALT	12	18	18	18	18
Occupational Therapy	13	15	19	17	17
Physiotherapy	13	17	n/a	19	18
Educational Psychology	17	19	19	19	19
Social Care	*11*	*11*	*13*	*17*	*14*

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

* Medical and mental health advice/reports were not separated for the

Mar-22 - March 2020 audits
Note on scoring: All scores are calculated using a weighting system using a 2:1:0 weighting system for "Yes" "Partly" and "No". Scores are out of a maximum of 20. All "N/A" scores are removed from the weighting.

There has been a consistent improvement in the quality of our new EHC plans. SALT and EP advice has been consistent but there is an area of focus where the quality of advice has reduced, e.g. Educational setting & Specialist Teacher advice.

Enhance, our external auditors scored our new plans, on average, 14.6 and advice 13.5 (against 13.8 for new plans and 10.7 for the advice, in the Summer of 2019). Internal average scores were 18.4 for our plan and 15.8 for the advice. This comparison suggests that there is further work needed to bring internal scoring more in line with the external scoring. All Enhance audits will be shared with the relevant teams/auditors for review against their own audits. Some of the discrepancies between internal and external EHCP scores may be attributed to Enhance not always taking into account the plan template, for example, the template does not have space for steps towards outcomes and the summary is in Section A rather than B.

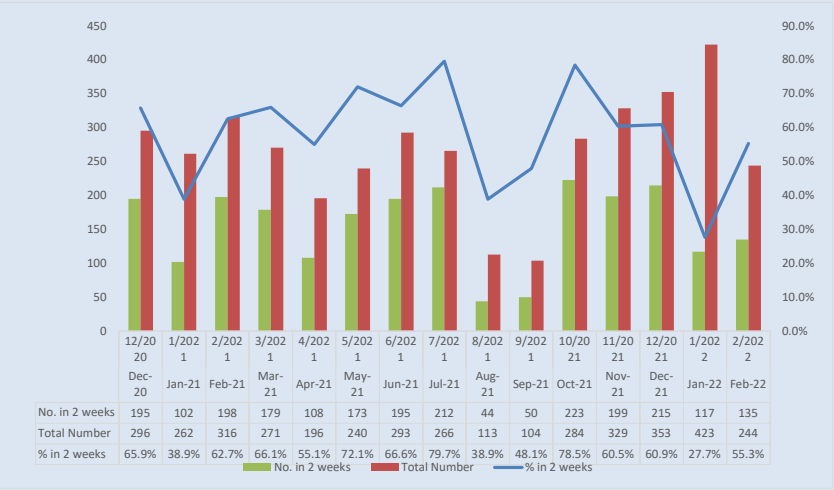
6. Children and Young People with an EHC plan make good progress in achieving their outcomes.

Suffolk SEND Outcome and KPI measures -	February	2022	Current Performance	Baseline	Sep-19	Jan-20	May-20	Commentary
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

Current Performance	Baseline	Sep-19	Jan-20	May-20
55.3% Feb 2022	17.4% Dec 2018	50%	70%	90%



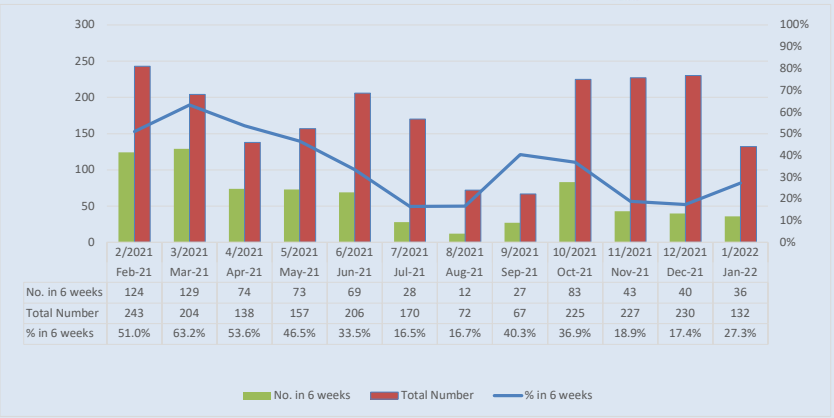
	12/2020 Dec-20	1/2021 Jan-21	2/2021 Feb-21	3/2021 Mar-21	4/2021 Apr-21	5/2021 May-21	6/2021 Jun-21	7/2021 Jul-21	8/2021 Aug-21	9/2021 Sep-21	10/2021 Oct-21	11/2021 Nov-21	12/2021 Dec-21	1/2022 Jan-22	2/2022 Feb-22
No. in 2 weeks	195	102	198	179	108	173	195	212	44	50	223	199	215	117	135
Total Number	296	262	316	271	196	240	293	266	113	104	284	329	353	423	244
% in 2 weeks	65.9%	38.9%	62.7%	66.1%	55.1%	72.1%	66.6%	79.7%	38.9%	48.1%	78.5%	60.5%	60.9%	27.7%	55.3%

No. in 2 weeks Total Number % in 2 weeks

Mar-22 - 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.
Following a siginificant drive from Family Services colleagues phased transfer Annual Review for Early Years and Primary to secondary were completed at 74%, this is up from the 22% of 2021.

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

Current Performance	Baseline	Sep-19	Jan-20	May-20
22.3% Jan 2022	44.0% Dec 2018	50%	60%	70%



	2/2021 Feb-21	3/2021 Mar-21	4/2021 Apr-21	5/2021 May-21	6/2021 Jun-21	7/2021 Jul-21	8/2021 Aug-21	9/2021 Sep-21	10/2021 Oct-21	11/2021 Nov-21	12/2021 Dec-21	1/2022 Jan-22
No. in 6 weeks	124	129	74	73	69	28	12	27	83	43	40	36
Total Number	243	204	138	157	206	170	72	67	225	227	230	132
% in 6 weeks	51.0%	63.2%	53.6%	46.5%	33.5%	16.5%	16.7%	40.3%	36.9%	18.9%	17.4%	27.3%

No. in 6 weeks Total Number % in 6 weeks

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

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

SEN Exclusions

Annual Suspensions	2021-22 (end March) No.	2021-22 (end March) %	2020-21 No.	2020-21 %
Suspensions (all pupils)	**2,629**	**2.8**	**3,248**	**3.5**
- Primary School	520	0.9	**726**	1.3
- Secondary School	2,096	5.5	2,510	6.6
- Special School	13	1.1	12	1.0
Suspensions (pupils with an EHCP)	**247**	**7.4**	**408**	**15.0**
- Primary School	78	6.5	180	14.9
- Secondary School	156	16.9	217	23.5
- Special School	13	1.1	11	0.9
Suspensions (pupils with SEN Support)	**1,014**	**9.2**	**1,161**	**11.9**
- Primary School	280	4.2	360	5.4
- Secondary School	734	16.6	801	18.1

Mar-22 - 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.

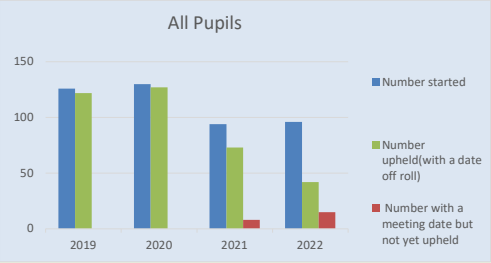
School level data is reviewed and targeted work undertaken to support and challenge schools around the use of exclusion. This has also included challenge to the Regional School Commissioners team about the use of exclusion data as part of their annual conversation with MATs. LA officers have held meetings 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.

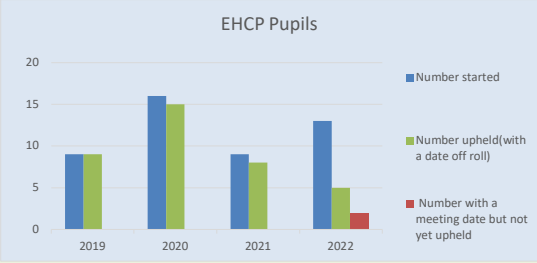
Permanent exclusions	No.	%	No.	%
Permanent exclusions (all pupils)	**36**	**0.04**	**67**	**0.07**
- Primary School	9	0.02	10	0.02
- Secondary School	27	0.07	57	0.15
Permanent exclusions (pupils with an EHCP)	**4**	**0.12**	**9**	**0.33**
- Primary School	3	0.25	3	0.25
- Secondary School	1	0.11	6	0.65
Permanent exclusions (pupils with SEN Support)	**8**	**0.07**	**15**	**0.15**
- Primary School	2	0.03	4	0.06
- Secondary School	6	0.14	11	0.25

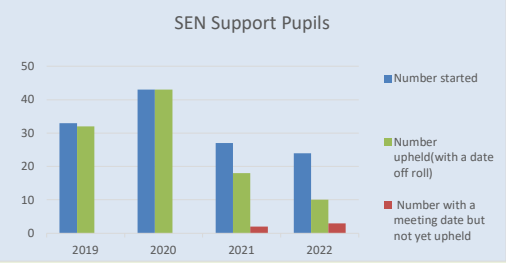
Permanent exclusions across all groups of pupils have fallen. While it is positive to see a reduction compared with 19/20 it is difficult to assess what this data means because of the very unusual circumstances of the pandemic. Exclusions due to persistent disruptive behaviour continue to occur, this 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 nhas 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





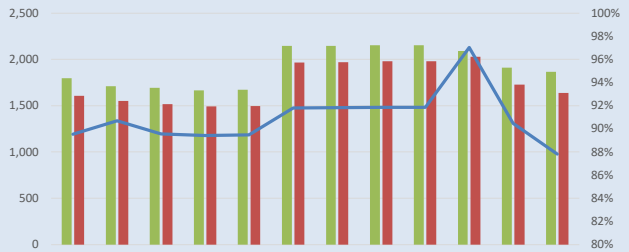


Suffolk SEND Outcome and KPI measures -	February	2022	Current Performance	Baseline		Sep-19	Jan-20	May-20	Commentary

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

Current Performance	Baseline		Sep-19	Jan-20	May-20	Commentary
87.8% Feb 2022	80.1% 2018	Dec	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



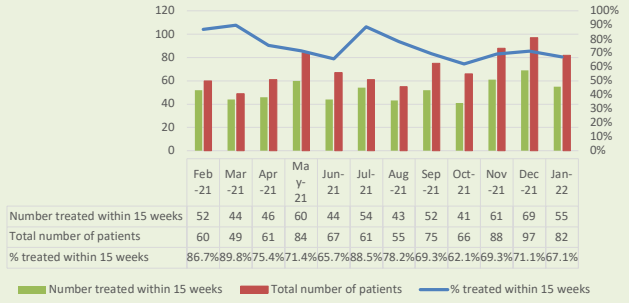
	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22
Cohort total	1,796	1,712	1,694	1,667	1,674	2,144	2,144	2,154	2,154	2,091	1,909	1,864
EET Total	1608	1553	1517	1491	1498	1968	1969	1979	1979	2029	1727	1,637
%	89.5%	90.7%	89.6%	89.4%	89.5%	91.8%	91.8%	91.9%	91.9%	97.0%	90.5%	87.8%

Cohort total EET Total %

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

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

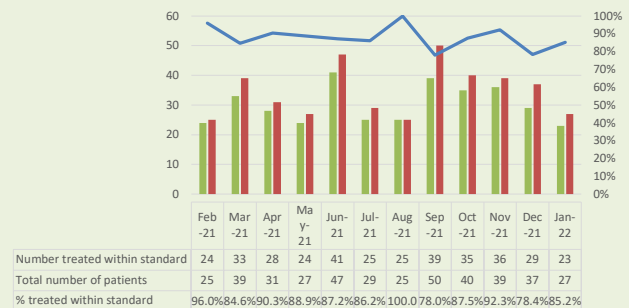
Current Performance	Baseline		Sep-19	Jan-20	May-20	Commentary
67.1% Jan 2022			95%	95%	95%	Mar-22 The ADHD team have been working with Barnardo's who are commissioned to provide the triage panel for the Neuro Development Pathway. The new NDD pathway Triage panel is impacting on the clinic capacity of the Non Medical Prescribers in the teams and Psychiatry in the ADHD Service due to attending the Triage panel for 3 hours per week. This is equating to a reduction of patients seen for medication review by 6 patients a week.



	Feb -21	Mar -21	Apr -21	May-21	Jun-21	Jul-21	Aug -21	Sep -21	Oct-21	Nov -21	Dec -21	Jan-22
Number treated within 15 weeks	52	44	46	60	44	54	43	52	41	61	69	55
Total number of patients	60	49	61	84	67	61	55	75	66	88	97	82
% treated within 15 weeks	86.7%	89.8%	75.4%	71.4%	65.7%	88.5%	78.2%	69.3%	62.1%	69.3%	71.1%	67.1%

Number treated within 15 weeks Total number of patients % treated within 15 weeks

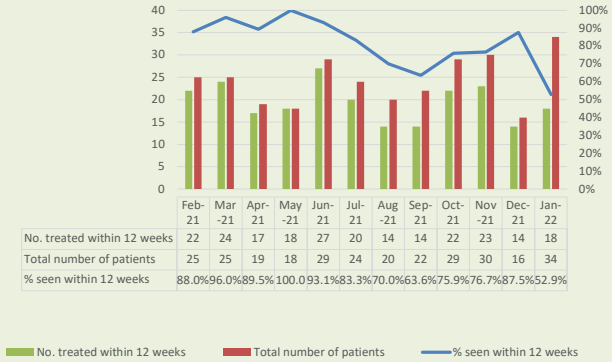
Mar-22 - Heolios are now working with NSFT supporting waiting lists for ADHD, CBT and for goal based interventions. This is being coordinated via the EWH with oversight by Dr Beth Mosley. Skill mix review prepped and ready to be sent to clinicans to update and this will align with needs typing work.



	Feb -21	Mar -21	Apr -21	May-21	Jun-21	Jul-21	Aug -21	Sep -21	Oct -21	Nov -21	Dec -21	Jan-22
Number treated within standard	24	33	28	24	41	25	25	39	35	36	29	23
Total number of patients	25	39	31	27	47	29	25	50	40	39	37	27
% treated within standard	96.0%	84.6%	90.3%	88.9%	87.2%	86.2%	100.0	78.0%	87.5%	92.3%	78.4%	85.2%

Number treated within standard Total number of patients % treated within standard

Suffolk SEND Outcome and KPI measures - February 2022	Current Performance	Baseline	Sep-19	Jan-20	May-20	Commentary
c) Under 18 Referrals treated within standard (12 weeks) - Waveney	52.9% Jan 2022		95%	95%	95%	Update March 2022 - N&W CCG has commissioned YMCA, UK Counselling and the Matthew Project to deliver additional treatment capacity for CYP referred to NSFT community teams in Waveney. This additional capacity will be in place over the next 12 months. In addition to this N&W CCG is leading on the development of an integrated front door to ensure that CYP, families and professionals are able to access support through one route and are directed to the most appropriate treatment offer first time. Alongside this work we are undertaking demand and capacity modelling and pathway mapping to ensure we have the right treatment offers sitting behind the integrated front door. We are also developing a Talking Therapies Collaborative which will be managed by a lead VCSE organisation who will subcontract with smaller VCSE organisations bringing additional capacity to the overall system. The integrated front door will go live in Q4 of 22/23



	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Jan-22
No. treated within 12 weeks	22	24	17	18	27	20	14	14	22	23	14	18
Total number of patients	25	25	19	18	29	24	20	22	29	30	16	34
% seen within 12 weeks	88.0%	96.0%	89.5%	100.0	93.1%	83.3%	70.0%	63.6%	75.9%	76.7%	87.5%	52.9%

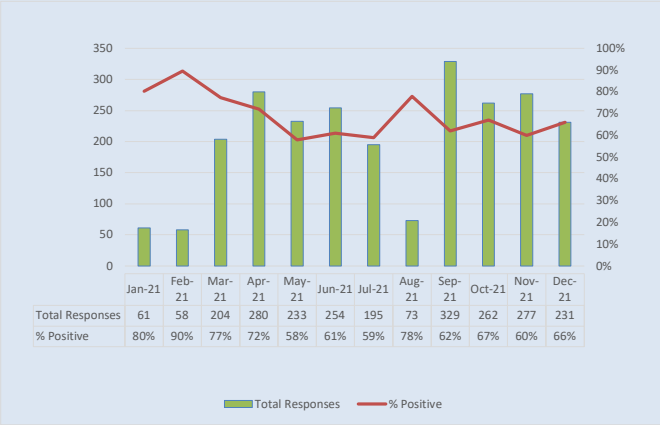
No. treated within 12 weeks — Total number of patients — % seen within 12 weeks

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)

66% in Dec 2021

Mar-22 - The People Participation lead in the Suffolk CFYP Care Group is working with the team to create a ADHD pathway expert by experience event. FFT results are sent



	Jan-21	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21
Total Responses	61	58	204	280	233	254	195	73	329	262	277	231
% Positive	80%	90%	77%	72%	58%	61%	59%	78%	62%	67%	60%	66%

Total Responses — % Positive

12. Children and young people with SEND have access to ASD & ADHD services within expected timeframes

Suffolk SEND Outcome and KPI measures -	February	2022	Current Performance	Baseline	Sep-19	Jan-20	May-20	Commentary

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

39% Jan 2022

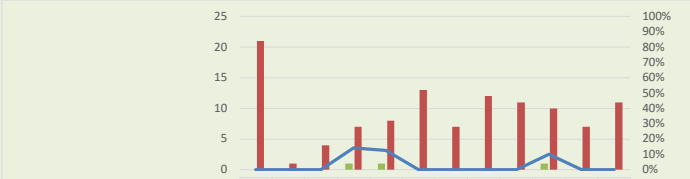
	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Jan-22
Total no. of patients	62	64	36	54	48	51	52	62	62	91	63	76
Number RTT in 18 wk	46	42	16	41	23	32	35	37	32	44	33	30
% in 18 weeks	74%	66%	44%	76%	48%	63%	67%	60%	52%	48%	52%	39%

Total no. of patients — Number RTT in 18 wk — % in 18 weeks

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. Assessment pathway is still being significantly impacted by Covid rates across Suffolk - impacting on access and staff/child availability. Locum in place focusing on ASD backlog caseload but additional SLT and Psychology not yet in place due to

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)

0.0% Jan 2022



	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Jan-22
Number treated within 13 weeks	0	0	0	1	1	0	0	0	0	1	0	0
Total number of patients	21	1	4	7	8	13	7	12	11	10	7	11
% treated within 13 weeks	0.0%	0.0%	0.0%	14.3%	12.5%	0.0%	0.0%	0.0%	0.0%	10.0%	0.0%	0.0%

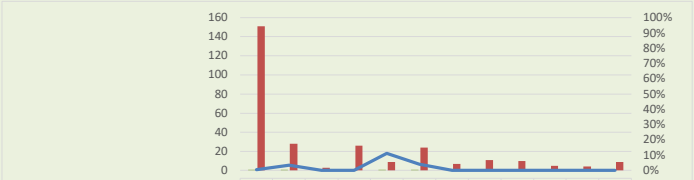
Number treated within 13 weeks — Total number of patients — % treated within 13 weeks

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% Jan 2022



	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Jan-22
No. getting diagnosis within 13 wk	1	1	0	0	1	1	0	0	0	0	0	0
Total no. of patients	151	28	3	26	9	24	7	11	10	5	4	9
% with a diagnosis within 13 wk	0.7%	3.6%	0.0%	0.0%	11.1%	4.2%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%

No. getting diagnosis within 13 wk — Total no. of patients — % with a diagnosis within 13 wk

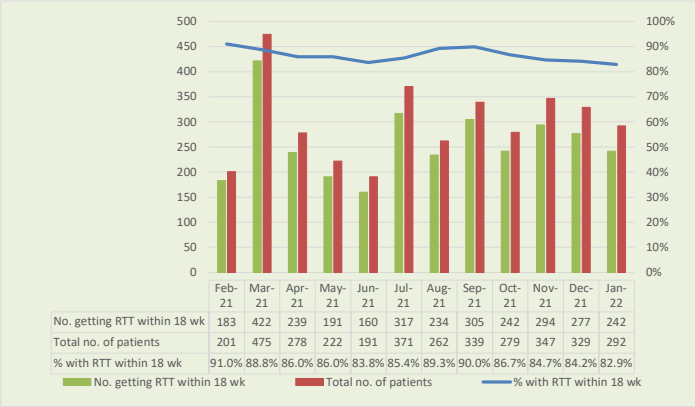
ADHD

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 oif the county. The ADHD recovery business case has been submittted 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 trainign provision for GP's to recognise the signs of ADHD nad to provide patients a better understanding of their expectations of ADHD diagnosis. Education and training in schools for psycho-educationb ti support them to better understanding the impact of ADHD will have in their interaction and preparation for hildren with ADHD. Dedicated parenting education adn 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 servics 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 vlaued partners in driving the design and development of better ADHD services going forward.

The ADHD team continue to support the neuro-development pathway transformation wor, working with clinicians in other areas of the pathway to develop a service that is more responsive and appropriate to meet service users needs.

	Current Performance	Baseline	Sep-19	Jan-20	May-20	Commentary
d) Number and percentage of children and young people receiving treatment within 18 weeks of referral (Ipswich E & W Suffolk)	82.9% Jan 2022		95%	95%	95%	



	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Jan-22
No. getting RTT within 18 wk	183	422	239	191	160	317	234	305	242	294	277	242
Total no. of patients	201	475	278	222	191	371	262	339	279	347	329	292
% with RTT within 18 wk	91.0%	88.8%	86.0%	86.0%	83.8%	85.4%	89.3%	90.0%	86.7%	84.7%	84.2%	82.9%

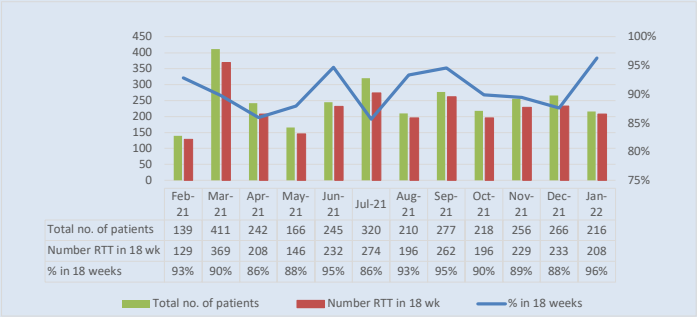
13. Children and young people with SEND to have access to therapies within the timeframes (Physio, OT, speech & language)

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

96% Jan 2022

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.

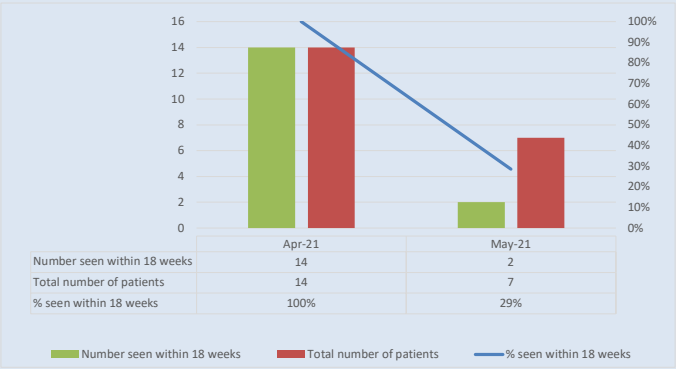


	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Jan-22
Total no. of patients	139	411	242	166	245	320	210	277	218	256	266	216
Number RTT in 18 wk	129	369	208	146	232	274	196	262	196	229	233	208
% in 18 weeks	93%	90%	86%	88%	95%	86%	93%	95%	90%	89%	88%	96%

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

29% May 2021 | 95% | 95% | 95%

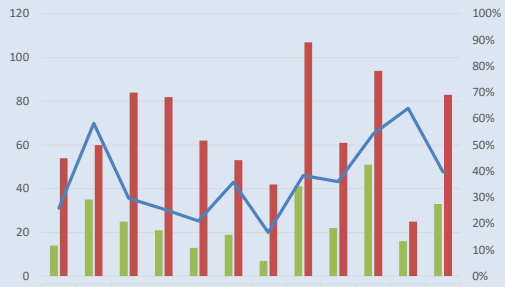
ECCH are currently delivering EHCP provision in Waveney but the community caseload is experiencing a significant backlog expected to be approximately 65 in Waveney (1400 in total). Provider is prohibited by lockdown restrictions in delivering school based therapy but is increasing their digital offer. 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.



	Apr-21	May-21
Number seen within 18 weeks	14	2
Total number of patients	14	7
% seen within 18 weeks	100%	29%

Suffolk SEND Outcome and KPI measures - February 2022

	Current Performance	Baseline	Sep-19	Jan-20	May-20	Commentary
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	39.8% Jan 2022		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) •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 8thMarch, 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



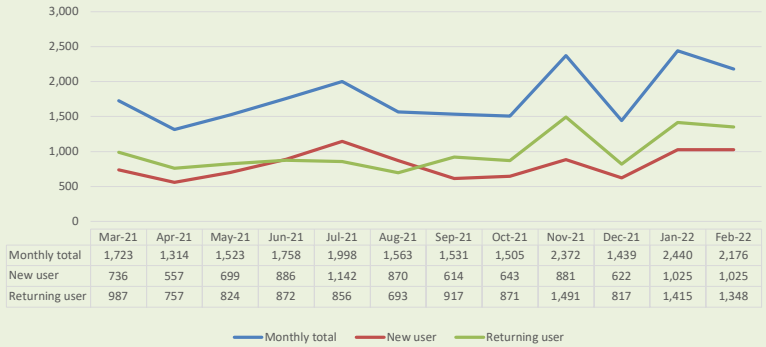
	Feb-21	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Jan-22
No. started treatment within 12 wk assess.	14	35	25	21	13	19	7	41	22	51	16	33
Total no. of patients	54	60	84	82	62	53	42	107	61	94	25	83
% started treatment within 12 wk assess.	25.9%	58.3%	29.8%	25.6%	21.0%	35.8%	16.7%	38.3%	36.1%	54.3%	64.0%	39.8%

No. started treatment within 12 wk assess. — Total no. of patients

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

Monthly usage statistics of the local offer website

	Current Performance	Baseline	Sep-19	Jan-20	May-20	Commentary
	1,348 Feb 2022	813 hits in December 2018	Maintain 1,000 hits per month	Maintain 1,000 hits per month	Maintain 1,000 hits per month	Mar-22 - Our end of year analytics for 2021 have evidenced the growth in users accessing the local offer for information. A total of 76,571 unique users visited the site, an increase of over 12.5k in 2020. 2022 has started very well & we have seen over 2k visits each month and are on course to do so for March. Our social media channels have also had over 23k impressions so far this year.



	Mar-21	Apr-21	May-21	Jun-21	Jul-21	Aug-21	Sep-21	Oct-21	Nov-21	Dec-21	Jan-22	Feb-22
Monthly total	1,723	1,314	1,523	1,758	1,998	1,563	1,531	1,505	2,372	1,439	2,440	2,176
New user	736	557	699	886	1,142	870	614	643	881	622	1,025	1,025
Returning user	987	757	824	872	856	693	917	871	1,491	817	1,415	1,348

Monthly total — New user — Returning user

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