



Jeanette Richards, Executive Director of Children's Services, Bury Metropolitan Borough Council

Eamonn O'Brien, Leader of the Council, Bury Metropolitan Borough Council Will Blandamer, Executive Director, Health and Adult Care and Deputy Place Lead, NHS GM

24 January 2025

Dear Jeanette, Eamonn and Will,

BURY LOCAL AREA PARTNERSHIP: 6-MONTHLY SEND STOCKTAKE MEETING: REVIEW OF SEND PRIORITY IMPROVEMENT PLAN

Thank you for ensuring appropriate attendance to review the progress made against your Priority Impact Plan (PIP) at the Stocktake meeting on the 10 December 2024. We are particularly grateful for the contributions from representatives of Bury2Gether, the local authority and ICB officers who attended the meeting.

The purpose of this joint letter is to provide a summary of the discussions held at the stocktake meeting, documenting specific feedback from participants on the Areas for Priority Action and Areas for Improvement based on evidence from the six months leading up to and during the stocktake meeting.

The evidence and presentation provided before and during the meeting demonstrated positive progress in delivering the PIP, with a range of actions being undertaken within the agreed timescales. The local area demonstrated a collective determination to make sustainable improvements to SEND services and to the lives of children and young people with SEND. We support the next steps that have been identified by the partnership, which are in line with the plan and should help continue driving improvement.

We are satisfied that the governance is effectively developed to provide oversight of the PIP and that actions are starting to be delivered in line with the expectations and timelines outlined in the plan. The mature relationships in the partnership are a real driver behind that delivery, and the power given to the voice of Children and Young People is a particular strength of the partnership's response. As the partnership have recognised and articulated, the challenge is now to move from planning and action into impact, and this is where we will focus our support and challenge to the partnership to provide evidence ahead of the next stocktake.

In particular, as the PIP actions are completed there is a need to ensure that the impact is being understood, captured and that the partnership can clearly articulate the difference made. The partnership has recognised that it is not always clear in what difference they expect to make. The partnership raised that they wish to consider reassessing the PIP to be reflective of the partnership's current position, by adjusting target actions and timescales. Any reset of the plan needs to include how the improvements will be tangible and felt by families, as well as improvements to outcomes and lived experience. The partnership will also have to consider how to effectively communicate any reset to children, young people and their families.

Your PIP includes six areas for Priority Action and three Areas for Improvement related to the 'systemic failures' outcome identified in the SEND Ofsted-CQC inspection report.

Area for Priority Action 1: Leaders across the partnership should ensure that the SEND strategy continues to be implemented to improve the lived experiences of children and young people with SEND. This should be overseen by shared strategic governance to ensure that the pace of improvement is maintained.

You demonstrated that:

- The partnership is evidencing progress against the milestones of the PIP.
- Senior leaders are more visible, speaking face-to-face, to children, young people and their families to help build confidence and trust with the Bury SEND system.
- The partnership is working towards a wider strategic and aspirational vision. This includes developing a five-year inclusion strategy within the embedded education improvement strategy, which sits alongside the SEND strategy.

Next steps:

- Nuancing the indicators to demonstrate further impact on the lived experience of children, young people and their families
- Identifying and understanding the key impact milestones and appropriate data sets to demonstrate impact of the next phase of the priority impact plan.

Area for Priority Action 2: Leaders across the partnership should work collaboratively and effectively to improve the early identification of children and young people's SEND as part of the graduated approach. In particular, they should urgently improve:

- children's access to support from education, health and social care to improve the early identification of needs
- children, young people's and professionals' access to an effective, well-resourced educational psychology service.

You demonstrated that:

• The early years section of the graduated approach toolkit is live. Post 16 is in development and will go live by the end of January 2025.

- There is a graduated approach CPD programme directed at schools within Bury, providing opportunities to review their SEND strategic priorities and focus on early identification of need.
- Health partners and the council are working together on establishing a process around Section 23 notifications, to ensure that children and young people with SEND are identified at the earliest opportunity.
- Within the outreach offer, the partnership has developed a targeted and specialist offer with educational psychology service (EPS) built into it, which ranges from early years to secondary.
- Bury2gether have set up parent drop-ins for EPS and are involved in engagement work with parents on how to improve EPS services and how to access support.

Next steps:

- Track the impact of embedding your graduated approach in schools and settings.
- Understand and report the differences made, as a result of new processes for early identification of need.
- Develop EPS service user feedback and ensure this is regularly and robustly monitored to demonstrate impact and inform service development.

Area for Priority Action 3: Leaders across the partnership should improve the quality and availability of support for children, young people and their families while they wait for specialist assessments. This includes:

- children and young people waiting for a speech and language therapy assessment and subsequent intervention
- children waiting for a community paediatric assessment and subsequent intervention Inspection report: Bury Local Area Partnership 12 to 16 February 2024
- children and young people on a neurodevelopmental pathway for an assessment of ADHD or autism. Leaders across the partnership should also ensure that young people aged up to 25 years old have access to a locally agreed neurodevelopmental diagnostic pathway.

You demonstrated that:

- The partnership have an understanding of waiting times and implications for children and young people with SEND and their families.
- Bury2gether held two surveys on the neurodevelopmental (ND) pathway over the summer (to parents currently on the pathway, and to parents who have finished) about their experiences. The report is expected to evidence a challenging landscape for families on the pathway in Bury but will help the partnership identify and understand areas that parents would like support with. The ICB are also engaging parents with similar themes of support.
- A range of padlets (digital bulletin board) are being accessed successfully by parents and teachers. For example, the "supporting a neurodiverse child" padlet was accessed by 1600 users and viewed over 2400 times.

A speech, language and communication (SLC) pilot, using a blended approach
with early help practitioners and SLC therapists, was shared with families via
Whatsapp and over 100 families signed up. Reports from those involved indicate
improvement in parents' confidence and improved communication from children
and young people.

Next steps:

- Explore how to communicate findings of the surveys and how feedback is being used within the partnership i.e. "you said, we did".
- Put in place effective mechanisms by which the impact of programmes can be seen. For example, reduction of waiting times.
- Ensure support whilst waiting for a specialist is offered and is accessible for children, young people and their families.

Area for Priority Action 4: Leaders across the partnership should improve preparation for adulthood from the earliest ages for all children and young people with SEND in Bury. This should include a well-understood and coproduced strategy to embed preparation for adulthood effectively across the partnership.

You demonstrated that:

- Preparation for Adulthood (PfA) information has been uploaded to the local offer.
- Audits are underway of existing ECHPs to ensure PfA is referenced.
- Fact sheets have been developed to provide information to parents, young people and professionals on PfA and transitions. These have been shared with Bury2gether and will be shared more widely in January.
- A new team has been established to work on PfA pathways and are co-producing policies with Bury2gether.
- The Youth Council have engaged with the council participation officer about young people's aspirations and the barriers they face. These conversations have been shared and fed back to the partnership via the SEND Strategic Improvement & Assurance Board (SIAB).

Next steps:

• Establish a roadmap and a shared partnership (health, education, social care) narrative of the PfA vision.

Area for Priority Action 5: Leaders across the partnership should establish and implement a strategic approach to high-quality transitions for children and young people with SEND from birth to 25.

You demonstrated that:

 The digital "6into7" transition tool went live in schools last summer. 86% of schools are involved and the ambition is for 100%. Sessions were held in October

- with pupils who found transitions difficult. The feedback is being used to strengthen practitioners' knowledge and improve the effectiveness of transitions.
- Health partners have created transition pathways for children and young people with SEND including neuro-rehabilitation, nutrition and dietetic services, health visiting and school nursing.
- Multi-disciplinary team panels are operating to focus on complex cases.

Next steps:

- Evaluation and analysis of the pilot Early years transition tool to inform future pathways.
- Embedding health transition pathways to promote better awareness and understanding.
- Ensure that pathways are integrated across all partners to ensure a seamless transition offer.

Area for Priority Action 6: Leaders across the partnership should further improve the quality of the statutory EHC plan process. This should include:

- improving the quality of advice received from professionals as part of the needs assessment process
- improving the timeliness and quality of updated EHC plans following annual reviews
- improving appropriate social care contributions to EHC plans so that children and young people's social care needs are reflected more accurately
- improving the focus on preparation for adulthood in children and young people's EHC plans so that their experiences and outcomes improve.

You demonstrated that:

- An annual review recovery plan has been established. Activities include ensuring all annual review data is in the system so teams can coordinate in a timely manner to meet statutory compliance. There is recognition that the quality of ECHPs has been diminishing over the annual review cycle.
- Additional resource and capacity has been provided to the EHC assessment team (three assistants) to update systems.
- A tiered approach to strengthening the quality assurance (QA) protocol of ECHPs
 has been established, including single/multi-agency audits through the Invision360
 digital tool, and multi-agency case reviews to track the lived experience of children
 and young people, to ensure the key questions have been asked.
- The interim designated social care officer (DSCO) will be in post in January and plans are in place to recruit permanently in the spring term.

Next steps:

- Establish effective QA measures and data sets.
- Work with schools to better coordinate information in advance of annual reviews, through training, CPD and improved notifications.

- Address common QA themes. For example, lack of clear aspirations and social care contributions.
- The partnership should collectively look at timescales of this priority and set clear, deliverable milestones that demonstrate the partnership is making progress.

Area for Improvement 1: Leaders across the partnership should improve communication to professionals, parents and carers and children and young people so that their strategies, actions and impact are better understood and that trust in the SEND system improves. The partnership should ensure that the local offer is updated regularly to provide parents, carers and other stakeholders with sufficiently accurate information.

You demonstrated that:

- A workshop took place over the summer which re-established the SEND newsletter.
- A dedicated communications and engagement officer for SEND has been identified for recruitment and a dedicated children services communications manager has been recruited.
- A draft communications strategy, coordinated between health partners and the council has been submitted to SIAB.
- The communications working group has been established with clear objectives.

Next steps:

• Ensure that the comms working group is working effectively to facilitate regular communication with parents, carers and key stakeholders.

Area for Improvement 2: Leaders across the partnership should continue to develop the range of suitable AP available to children and young people in Bury. Leaders should further embed the improved oversight of AP and EOTAS packages in Bury. They should publish the refreshed policy for EOTAS, providing support so that this policy is clearly understood.

You demonstrated that:

- A draft EOTAS policy is being developed with parents.
- Training has taken place, based on one of the key themes raised in the forums, around barriers and understanding of EOTAS and section 19 policy.
- AP guidance for commissioners has been refreshed around processes, placement outcomes and packages.

Next steps:

 Continue developing and bring together the EOTAS strategy and policy for consistency and coherence within the system. Area for Improvement 3: Leaders across the partnership should work collaboratively to create a partnership wide workforce development strategy. This should focus on coordinating training, support and guidance to improve health, social care and education professionals' ability to identify, assess and meet the needs of children and young people with SEND, from birth to 25.

You demonstrated that:

- The senior leader Strategic Workforce Group are implementing Bury's Integrated Care Partnership Locality Workforce Strategy to address system-wide workforce challenges.
- A Bury SEND workforce development strategy has been drafted, building on regional good practice with engagement from partners including Bury2Gether.
- The mapping of current training needs and the training offer has begun although some partners are still to provide information. A task and finish group is meeting monthly to address training gaps surfaced through this exercise.

Intervention Next Steps:

Your DfE Case Lead, Finlay Olivier will be in contact to arrange the next review to assess further progress against your priority impact plan. Finlay, along with your DfE commissioned SEND advisor, Kevin Burns and NHS England Advisor, Janet Wray, will continue to offer support and challenge. Please contact either party if you require further assistance.

We are copying this letter to: Lynne Ridsdale (Chief Executive, Bury Metropolitan Borough Council), Stephen Holden (Interim Director of Education and Skills, Bury Metropolitan Borough Council), Wendy Young (SEND Head of Service, Bury Metropolitan Borough Council), Jane Case (Program Manager, GM NHS Bury), Deborah Glassbrook (SIAB independent chair), Bury2gether (Parent Carer Forum), Lorraine Mulrooney (Head of SEND, NHSE), NHS England), Janet Wray (Regional SEND Advisor, NHSE), Kevin Burns (DfE commissioned SEND advisor), Oliver Mann (Regional Lead for SEND Improvement, DfE), and Finlay Olivier (SEND Case Lead, DfE).

Yours sincerely,

Samantha Morrison

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Development

NHS England North West

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