

Medway Local Area Partnership SEND Improvement Plan - May 2024

Context

An Ofsted (Office for Standards in Education, Children's Services and Skills) and CQC (Care Quality Commission) inspection of services provided by Medway's Local Area Partnership was conducted in February 2024. Their joint report was published in April 2024. Ofsted and CQC ask that the local area partnership updates and publishes a strategic plan based on the recommendations set out in the report.

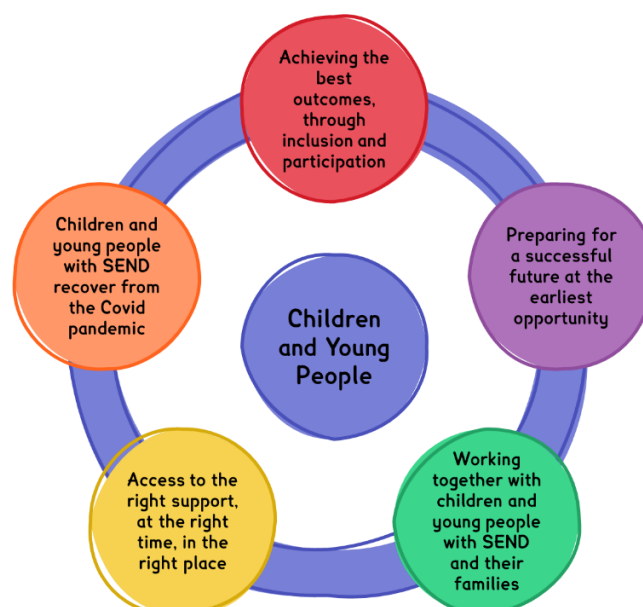
In response to the inspection the partnership has developed a strategic improvement plan with specific actions to achieve the outcomes identified in the inspection report.

The current partnership SEND strategy action plan, which we continue to deliver, has been updated to include the improvement actions.

Progress on the priority areas will be monitored through existing governance and accountability arrangements. It will include the monitoring of a joint set of key performance indicators (KPIs) by the SEND Partnership Board. Partners hold each other to account and jointly problem solve to remove barriers to achieve the outcomes.

Our Partnership commitment

Our partnership commitment is set out in our Medway Local Area Special Educational Needs and/or Disability (SEND) Strategy 2022-25. The strategy focuses on Inclusion, Participation, Aspiration and Achievement, and sets out our ambitions:



Inspection outcomes and findings:

The Inspection identified the following areas of strength:

- Leaders have an accurate understanding of the needs of children and young people with SEND. They know the areas for future development and improvement and have recently made progress with some of the ambitious actions in their strategic plan. These actions have had recent and positive results.
- Leaders have reviewed the majority of services, processes and provisions and made changes that are firmly focused on the needs of the children, young people and their families. Where this has happened, more children and young people get the right help and support in an increasingly timely fashion.
- There is a strong relationship with the passionate, confident and experienced Medway Parents and Carers Forum (PCF). The PCF is involved in co-production and commissioning at all levels of service development. They represent parents and carers through gathering views in a range of accessible ways.
- Leaders commission effective services to build capacity and ensure that quality and efficiency of process is always focused on how these will benefit children and young people with SEND.
- There is a strong universal health offer for children and young people up to 19 years.
- Leaders have commissioned AP using their knowledge about the needs of children and young people. There is a range of suitable mental health support within schools to support the rising numbers of children and young people with social, emotional, and mental health needs. This includes signposting to additional services.
- There are effective systems and processes to ensure effective oversight of experiences and outcomes for children and young people in care who live at a distance from the local area.
- There are some positive examples of thoughtful, inclusive co-production in all areas of the partnership. Leaders have co-produced training to support school professionals to identify and support children's and young people's mental health needs.
- The use of young people's lived experiences to inform the Dynamic Support Database is a strength. As a result, fewer children and young people reach crisis point and need admission to hospital.
- Health practitioners have received training in SEND to improve their understanding. This has made processes and support smoother for children, young people, and their families.
- Children and young people with SEND receive a good service from the 'early help hubs'. Clear partnership networks are effective in providing a wide range of timely practical support as well as parenting programmes that make a positive difference to children's, young people's, and families' lives. Targeted early help is well informed through detailed assessments of need. Practitioners create plans of support collaboratively with families and children.
- The recent changes to the fair access protocols and the implementation of assessment centres have positive and prompt impacts for children and young people who are permanently excluded or do not have school placements. More are now placed in appropriate full-time education in a timely manner.

The report also highlighted the following areas for improvement:

1. Leaders across the partnership should ensure that they swiftly identify key performance indicators that represent all stakeholders and enable evaluation of the impact of the partnership as a whole.
2. Leaders across the partnership should improve communication to:
 - a. improve equity for all children, young people and families across the area.
 - b. remove barriers to information and provide clear, consistent and accessible information about processes so that families can access the right support at the right time; and
 - c. ensure that all professionals have appropriate access to information they need to support children and young people with SEND.
3. Leaders across the partnership should continue to sustain the pace in completing the actions to:
 - a. improve the oversight, quality and timeliness of EHC plans and annual reviews; and
 - b. reduce waiting times for health assessments and educational psychologists.
4. Leaders across the partnership should continue to improve co-production specifically to ensure that children's and young people's voices are heard and used to inform improvements and developments.
5. Leaders across the partnership should continue to improve the transitions from child to adult services in health, education and care for all children and young people with SEND.
6. Leaders should ensure that they improve children's and young people's access to experiences outside of education by:
 - a. improving and maintaining the quality and content of information on the local offer so that is it up to date and helps families find appropriate, accessible activities; and
 - b. developing more partnership working so that barriers to services are lifted.

Area of Improvement 1

<p>Area for Improvement:</p> <p>Leaders across the partnership should ensure that they swiftly identify key performance indicators that represent all stakeholders and enable evaluation of the impact of the partnership as a whole.</p>
<p>Narrative from the report:</p> <p><i>Leaders have not developed key performance indicators at governance level. This prevents them from being able to jointly evaluate the progress and impact of services and provision across the partnership. Leaders have aimed to work on this for some years now. While the monitoring inspection in 2019 found that lines of accountability were strengthening, it also noted continued lack of joint strategic leadership across the area. While leaders express high ambition for children and young people with SEND and have recently developed strategic actions, this lack of key performance indicators means this ambition is not able to be assessed or measured.</i></p>
<p>Governance Group: SEND Partnership Board</p> <p>Linked Ambition: Improvement Priority 1 is underpinned by a more detailed action plan, in addition to the ambitions in the SEND action plan.</p>
<p>Lead Partner/s: Chief Nurse – ICB</p>

Action Ref:	Strategic Improvement Priority	Accountable lead(s)	To be fully completed by	What is the expected impact	What actions will we carrying out to enable the Partnership to know outcomes have improved for our children and young people?
IP 1.1	<p>The partnership will apply the logical framework approach to the development of the 2025- 2028 SEND Strategy:</p> <p>(a) Stakeholder working group to define clear indicators and coproduce the ambitions and priorities for the new strategy.</p> <p>(b) Key Performance Indicators developed in line with the strategy.</p>	Assistant Director – Education and SEND/ Head of Public Health Intelligence	(a) Dec 24 (b) March 25	<p>The SEND Partnership board can ensure that the Area SEND strategy is well-designed, logically structured, and has clear objectives and indicators for monitoring and evaluation, enabling robust partnership governance and collective accountability.</p> <p>There is an improved dataset and oversight.</p>	<p>The logical framework approach is a systematic and structured method which provides a framework for the Partnership to monitor and evaluating strategies.</p> <p>It will be used to inform the development of the SEND Strategy for 2025 and enable tighter monitoring of the impact of services on our children and young people.</p>
IP 1.2	<p>In the interim, the partnership will develop an interim SEND dashboard to monitor the current SEND strategy. The dashboard will integrate the existing individual partners monitoring data. This dashboard will then be updated from April 25 in line with the action 1.1.</p>	Assistant Director – Education and SEND/ Head of Public Health Intelligence / C&A Performance Business Partner	July 24	<p>Improved services for children and young people due to tighter monitoring and responsiveness to current indicators and identified improvements.</p> <p>There is an improved dataset and oversight and improved outcomes for CYP against the data matrix</p>	<p>The current SEND dashboard will be added to with more regular stakeholder feedback to enable triangulation and assurance of existing and added metric data.</p> <p>The partnership will monitor as part of the SEND partnership board.</p> <p>By July 24 Leaders across the partnership will be able to monitor key performance indicators that represent all stakeholders and evaluate the impact of the partnership.</p>

IP 1.3	The partnership will develop a partnership identity and branding, and shared communications and mechanisms for feedback (compliments and complaints)	Assistant Director – Education and SEND	Sept 24	Improved collective accountability and responsibility for the joint area agenda	The partnership will be able to receive collective feedback and better understand the areas to prioritise resource.
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Area of Improvement 2

<p>Area for Improvement: Leaders across the partnership should improve communication to:</p> <ol style="list-style-type: none"> improve equity for all children, young people and families across the area. remove barriers to information and provide clear, consistent, and accessible information about processes so that families can access the right support at the right time; and ensure that all professionals have appropriate access to information they need to support children and young people with SEND.
<p>Narrative from the report: <i>Leaders know that across the partnership communication is not effective. Parents and carers often have difficulties and delays in communications with the SEND team. Communications with parents and carers who are waiting for assessments are often confusing, creating barriers to ensuring that children and young people are supported effectively and at the right time. Recent changes have not been communicated clearly to education professionals in order to help them to navigate systems and advocate for the families with whom they work. Leaders are still unpicking historical barriers. For example, until recently, some professionals did not have access to education, health and care (EHC) plans or SEND information. Families have had to repeat information that should have already been shared. This hinders the process of helping children and young people in a timely fashion.</i></p>
<p>Governance Group: SEND Partnership Board / Medway Education Partnership Group/ MPCF Linked Ambition: Improvement Priority 2 is underpinned by a more detailed action plan, linked to ambition 3 - Working together</p>
<p>Lead Partner/s: MPCF / Assistant Director Education and SEND</p>

Action Ref:	Strategic Improvement Priority	Accountable lead(s)	To be fully completed by	What is the expected impact	What actions will we carrying out to enable the Partnership to know outcomes have improved for our children and young people?
IP 2.1	<p>The partnership will develop a comms plan that ensure communications are kept up-to-date and are accessible to families. Help to navigate the system will be readily available and families will be kept up to date with the progress of EHCP applications and health referrals.</p> <p>The partnership will:</p> <ol style="list-style-type: none"> revise and maintain the Local Offer website. provide front facing support for education/SEND, in the Inclusion hubs (As part of the family hubs). Including 	Head of Inclusion	(a) Sept 24 (b) Dec 24 (c) June 24 (d+e) Oct 24	<p>Children, young people, and their families will be able to easily access up-to-date information about all available support and services. Parents/carers and young people can access face to face support for any issues. Support wrapped around the families is more integrated and multi-agency, such that issues are dealt with promptly.</p> <p>Children and young people and their parents and carers receive earlier support and intervention, such that</p>	<p>The partnership will be regularly scrutinising the Local Offer site metrics and feedback.</p> <p>A working group of Parents/Carers and young people will help design and test monitor the quality of the site. Children and young people will access services in a timelier way. The partnership will monitor suspensions, exclusions, rate of application for an EHCP without the support of education or health professionals and other instances of</p>

	<p>parent support pack for all parents of CYP with SEND.</p> <p>(c) ensure all information to families and stakeholders is communicated via a variety of different mediums and accessible formats.</p> <p>(d) ensure that communications to parents are co-ordinated across the partnership (newsletters/emails/consultations etc)</p> <p>(e) ensure processes in relation to SEND include specified communication points and where appropriate consider automation to support with this.</p>			<p>there is improved inclusion in schools.</p> <p>Parents and carers will receive immediate responses to communications and be aware of waiting times. Parents and Carers are aware of where they are in the system in relation to SEND processes.</p>	<p>CYP being out of education e.g. EHE, CME, persistent absence.</p> <p>The partnership will be monitoring the number of complaints raised in relation to EHCP process communication.</p>
IP 2.2	<p>Medway Partnership Commissioners will promote the NHS England CORE20PLUS5 programme of work (Mental Health, Epilepsy, Asthma, Diabetes and Oral Health) across the wider system, including a scheduled 'Roadshow' with Medway Parent Carer Forum, Medway Social Care & Medway Education/SEN</p>	<p>Head of Child Health Commissioning / Programme Lead for Children's Mental Health and Emotional Wellbeing Designated Clinical Officer Head of Inclusion</p>	April 25	<p>The system partnership will better understand health services, pathways, resources and access and a feedback loop will ensure pathway improvement is coproduced.</p>	<p>Colleagues in the Partnership will report improved understanding and navigation of the health system to better support children and families.</p> <p>Metrics will include:</p> <p>Reduced A&E attendance for children with asthma to move in line with England average rate.</p> <p>Increase up take up of Hybrid Closed Loop system for Medway children with T1 Diabetes to over 50%.</p>
IP 2.3	<p>The partnership will engage with children, young people, families, and NHS Providers in Medway to understand improved ways to capture and manage information to minimise the need to for families to repeat their story, including having clear protocols for communication with parents and carers and transfer of information when changes in staff relating to their child e.g. social worker.</p>	<p>Head of Child Health Commissioning / Programme Lead for Children's Mental Health and Emotional Wellbeing Designated Clinical Officer Head of Inclusion</p>	Oct 25	<p>Children and their families will need to 'tell their story once' - where clinically safe to do so - when working with Health professionals</p>	<p>In the SEN Partnership Survey, there will be a baseline established and a measurable increase in satisfaction around communication with Health providers over an 18-month period.</p>
IP 2.4	<p>Medway Partnership Commissioning and Education Teams to jointly commission an accessible 'one stop shop' digital offer to outline the suite of support (with links to Local Offer and Start for Life offer) to include</p>	<p>Head of Child Health Commissioning / Programme Lead for</p>	Oct 25	<p>Families receive an equitable, consistent, and supportive offer of support whilst on the ND pathway</p>	<p>The use of web analytics will measure use of the digital offer and ongoing analysis will be used to improve the offer.</p>

	information and support for families and schools whilst waiting for NHS assessments.	Children's Mental Health and Emotional Wellbeing Designated Clinical Officer Head of Inclusion			
IP 2.5	The partnership will work to ensure education stakeholders are kept up to date with SEND priorities and changes by providing termly Education Briefings, which are recorded, followed up by attendance at 1 per term of each professional's meetings.	Assistant Director Education and SEND	June 24	Education professionals are kept up to date with partnership activity and have the opportunity to input.	Families receive support and consistent information from their education professionals.

Area of Improvement 3:

Area for Improvement:

Leaders across the partnership should continue to sustain the pace in completing the actions to:

- improve the oversight, quality, and timeliness of EHC plans and annual reviews; and
- reduce waiting times for health assessments and educational psychologists.

Narrative from the report:

The quality, impact, and timeliness of EHC plans is too variable. Leaders have taken recent action, which has started to have a positive impact, but there are still too many processes which delay and cause barriers to the implementation of support for children's and young people's needs. There is a lack of detail in social care contributions and inconsistencies in how children's and young people's health needs are reflected. Frequently, outcomes are not specific, appropriate or time bound. The development of children's and young people's plans is also hindered by the inconsistent attendance of practitioners at meetings. Similarly, annual reviews are not always attended by the practitioners who know the child or young person. There are delays in updating plans following annual reviews. These have a negative impact on the support provided to the child or young person. There is a lack of identification and support for the health needs of children and young people who are not attending full-time education. There is little consideration of the changing needs for these children and young people.

Governance Group: SEND Partnership Board / Medway Education Partnership Group/ MPCF

Linked Ambition: Improvement Priority 3 is underpinned by a more detailed action plan, linked to ambition 1: Achieving the best outcomes through Inclusion and Participation and ambition 4: Access to the right support, at the right time, in the right place

Lead Partner/s: Assistant Director Education and SEND

Action Ref:	Strategic Improvement Priority	Accountable lead(s)	To be fully completed by	What is the expected impact	What actions will we carrying out to enable the Partnership to know outcomes have improved for our children and young people?
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IP 3.1	<p>1. The partnership will work to reduce waiting times for health and ensure families receive the appropriate support whilst waiting for a neurodevelopmental assessment:</p> <p>(a) NHS Kent and Medway to develop managed approach to Neurodevelopmental (ND) waiting list management including improved prioritisation, communication, and support.</p> <p>(b) NHS Kent and Medway to work with partners to move the system for ND to a support first approach.</p> <p>(c) Provide further support for education establishments whilst waiting on an EHCP.</p> <p>2. The partnership will improve the early intervention offer for Speech and Language Therapies (SaLT) to reduce the need for escalation to specialist services.</p> <p>3. The partnership will work with to ensure children don't exceed 18 week wait times for Occupational Therapy.</p>	Public Health Principal and Strategic Head of Public Health / Head of Child Health Commissioning / Assistant Director Education and SEND/KMICB Deputy Director for Children	<p>(a) Oct 25 (b) Dec 24 (c) Dec 24</p> <p>2. April 25 3. Sept 24</p>	Improved triage so children with the highest needs are seen as a priority. Children and their families will have their presenting needs met at the right time, reducing the cultural belief that a diagnosis is the key to accessing support. Children accessing appropriate education support prior to formal diagnosis. More children and young access appropriate SaLT support earlier. More children and young access appropriate Occupational Therapy support earlier.	The partnership will monitor referral rates and parent carer satisfaction. They will expect to see a downward trend in referrals into the assessment pathways and/or improved conversion rate within the ND assessment pathways. Prioritization against ND W/L – MCH The partnership will monitor the waiting list for SaLT and the rate of referrals. The partnership will monitor the waiting list for Occupational Therapy.
IP 3.2	<p>The partnership will work to ensure identification and support for the health and social care needs for children not in full time education:</p> <p>(a) Education other than at School (EOTAS) planning to include partner agencies.</p> <p>(b) Health notified and supported for those absent from school under Section 19.</p> <p>(c) Elective Home Education advice to parents and carers to include access to health services.</p>	Head of Inclusion / Public Health Principal and Strategic Head of Public Health	<p>(a) Dec 24 (b) Sept 24 (c) Sept 24</p>	Children and young people not in full time education have their health and social care needs met effectively.	The partnership will monitor this through their bimonthly monitoring of pupil journeys. The partnership will monitor the volume and activity input for children not in full time education.
IP 3.3	<p>The partnership will work to increase the rate of EP assessments and therefore reduce the waiting time:</p> <ul style="list-style-type: none"> - Review the EP structure to maximise the capacity of specialists. - Ongoing programme of recruitment. - Provide guide relating to requirements of statutory assessment for those choosing to use independent specialists. - Allow schools to use traded time for statutory assessment. 	Strategic Head of Education: Quality and Inclusion/ Principal Education Psychologist	Dec 24	Children and Young people are assessed in a timely manner, within 12 weeks of stage 1 panel decision to assess.	The partnership will monitor the waiting times for assessment.
IP 3.4	<p>Reduce waiting times for EHCPs by:</p> <p>(a) Initial screening of application on receipt for CYP with clear and complex diagnosis.</p> <p>(b) Increase capacity of stage 1 and stage 2 panels.</p>	Strategic Head of Education: Quality and Inclusion	<p>(a) July 24 (b) July 25</p>	<p>80% ECHPna will be heard at stage 1 panels with 6 weeks.</p> <p>We will be able to meet the 20-week completing timeframe in line with national rates.</p>	The partnership will monitor the percentage of EHCP's provided within the statutory 20-week timeframe. It will also monitor the exceptions.

IP 3.5	Continue to remove Annual review backlog: (a) Project team removing backlog ended as bulk clears. (b) Ensure structure has capacity in teams to meet annual reviews as part of business as usual. (c) Annual review Quality Assurance included in EHCP Quality Assurance.	Strategic Head of Education: Quality and Inclusion	(a+b) July 24 (c) Sept 24	Annual review backlog is cleared and all EHCPs are amended to reflect CYPs current needs, ambitions, and provision.	The partnership will monitor the backlog.
IP 3.6	The partnership will improve quality of EHCPs by: (a) Introducing a dedicated requests panel. (b) Representatives from health, social care and education at all Stage 1 and 2 panels. (c) Monthly cycle of multiagency complex case discussions. (d) Develop an annual review framework across the partnership that encompasses Preparation for Adulthood (PfA) planning to ensure up to date health and social care advice is available for the annual review. (e) Develop and deliver a system wide workforce training plan to be provided to staff inputting into or responding to the EHCP.	Strategic Head of Education: Quality and Inclusion/ Designated Clinical Officer SEND	(a-d) Sept 24 (e) Jan 25	Decisions are taken collectively and not by one case officer alone and all staff inputting into EHCPs are well trained and equipped with knowledge and skills to write high quality EHCP's. The EHCP is fully supportive of all of the CYP's needs with quality contributions from Health Social Care and Education.	The partnership will monitor the feedback from parents and carers on their satisfaction with EHCP's. The partnership will send a feedback form out with every draft EHCP and listen to the feedback from this.
IP 3.7	Improve quality of EHCPs: (a) Develop a shared Quality Assurance framework. (b) Bi-monthly cycle of multi-agency audits of EHCPs, with appropriate feedback. Annual cumulative rate of 15% minimum of new EHCPs and 10% minimum of Annual Reviews. (c) Consider purchasing QA audit tool to support process. (d) Publish QA feedback for partners.	Strategic Head of Education: Quality and Inclusion	(a) July 24 (b) Sept 24 (c) Jan 25 (d) Oct24	Children and young people's needs are accurately and effectively represented in their EHCPs.	The partnership will scrutinise the QA feedback data. Improvement in % Good or better, with minimum of 80% Good or better by April 25. One member of the partnership board will attend the QA monitoring as an observer and feedback to the partnership board.

Area of Improvement 4:

Area for Improvement:

Leaders across the partnership should continue to improve co-production specifically to ensure that children's and young people's voices are heard and used to inform improvements and developments.

Narrative from the report:

There are some positive examples of thoughtful, inclusive co-production in all areas of the partnership. This includes lived experience work in mental health and engagement in forums, including 'Takeover Tuesdays'. Leaders have co-produced training to support school professionals to identify and support children's and young people's mental health needs.

Governance Group: SEND Partnership board

Ambition: Improvement Priority 4 is underpinned by a more detailed action plan, linked to ambition 3: Working together with children and young people with SEND and their families.

Lead Partner/s: Public Health Principal and Strategic Head of Public Health

Action Ref:	Strategic Improvement Priority	Accountable lead(s)	To be fully completed by	What is the expected impact	What actions will we carrying out to enable the Partnership to know outcomes have improved for our children and young people?
IP 4.1	<p>1. The partnership will map all engagement with children and young people to identify gaps and devise a multi-agency plan such that consistent feedback from young people is considered by the partnership boards.</p> <p>This plan will be a purposeful, multi-agency plan outlining Medway's approach towards capturing, building, and listening to children and young people's voices.</p> <p>The plan will include:</p> <ul style="list-style-type: none"> (a) Work with NHS Providers to improve feedback mechanisms so children and families can influence service development. (b) The partnership will agree with children and young people a co-production charter to underpin service development and improvement. (c) Work to ensure representation of young person's voice at SEND partnership board. 	<p>Programme lead for Inclusion and Education / Head of Children's Services Commissioning & Placements/ Public Health Principal and Strategic Head of Public Health / Programme Lead – Children and Families Partnership Commissioning</p>	<p>1. Sept 24 (a) April 25 (b) Oct 24 (c) July 24</p>	<p>Children and young people's voices and experiences shape the local offer, influencing operationally and strategically.</p> <p>Services are developed and shaped in partnership with the children and families who use them.</p> <p>Services are developed and shaped in partnership with the children and young people who use them. Young people with SEND are supported to voice their opinions, feelings, and shared experiences.</p>	<p>The partnership will challenge every action and decision made without input from children and young people.</p> <p>The partnership will monitor the delivery of the plan and listen to feedback from young people regarding the plan.</p> <p>The partnership will assure itself through representation at forums and surveys that young people feel heard.</p> <p>The partnership will assure itself that the ongoing programme of service improvement is based on feedback from children and young people.</p>
IP 4.2	<p>The Local Offer website will include young people's direction over accessibility and co-design content to improve current offer. Seek to build recommendations, co-produced with children, young people and families for future direction of site.</p>	<p>Head of Inclusion</p>	<p>Dec 24</p>	<p>Children and young people are able to identify and access appropriate services more independently</p>	<p>The partnership will be regularly scrutinising the Local Offer site metrics and feedback. The partnership will receive feedback on the co-production from the SEND operational group.</p>
IP 4.3	<p>The partnership will Quality Assure the experiences of the child and young person.</p>	<p>Assistant Director Education and SEND / Designated Clinical Officer</p>	<p>Bimonthly from July 24</p>	<p>The partnership has an accurate understanding of the experiences of the children and young people it serves and uses this information to inform its planning.</p>	<p>The partnership will audit the journey of 4 randomly selected children and young people, bimonthly, to monitor the quality of their journey and use this qualitative data to enhance their lived experience.</p>

Area of Improvement 5:

<p>Area for Improvement: Leaders across the partnership should continue to improve the transitions from child to adult services in health, education and care for all children and young people with SEND.</p>
<p>Narrative from the report: <i>The strategic partnership's work to prepare children and young people for adulthood has not had the impact that children and young people need. Too often, plans for adulthood are not considered early enough. However, where plans have been implemented, children's and young people's experiences have improved. For example, those known to social care and health have more effective support to transition into adult services. There is a lack of suitable provision to meet the needs of young people aged over 16 years, other than level 3 qualifications.</i></p>
<p>Governance Group: SEND partnership Board/ Medway Education Partnership Board</p>
<p>Ambition: Improvement Priority 5 is underpinned by a more detailed action plan, linked to ambition 2: Preparing for a successful future at the earliest opportunity.</p>
<p>Lead Partner/s: AD – Childrens Social care, (DSCO), Head of Service 0-25</p>

Action Ref:	Strategic Improvement Priority	Accountable lead(s)	To be fully completed by	What is the expected impact	What actions will we be carrying out to enable the Partnership to know outcomes have improved for our children and young people?
IP 5.1	<p>The partnership will work collaboratively to ensure transitions are managed in a timely manner, including:</p> <p>(a) NHS Providers in Medway will align transitions into adult services processes and protocols in line with NICE guidance.</p> <p>(b) Developing systemwide approaches to sharing information e.g. multi agency transitions group.</p> <p>(c) Develop Pathways to independence action plan and co-working transitions.</p> <p>(d) Improve transition planning via EHCPs and annual review process.</p>	<p>Head of Specialist Services & Strategic Safeguarding- ASC</p> <p>Senior Partnership Commissioner / Programme Lead for Children's Mental Health and Emotional Wellbeing</p> <p>Designated Social Care Officer</p> <p>Strategic Head of Education: Quality and Inclusion</p>	<p>(a) Dec 24</p> <p>(b) Sept 24</p> <p>(c+d) Oct 24</p>	<p>Young people and their families are aware of their choices for adulthood in Health, Education and Social care, early on in their development.</p> <p>Young people and their families are able to make informed choices and are supported and confident in making an appropriate plan.</p>	<p>The partnership will monitor outcomes for Children and young people with SEND. Outcomes will include improved:</p> <ul style="list-style-type: none"> - Achievement outcomes – improved progress measures - Destinations - The level of tribunals /complaints relating to transition. - The proportion of young people who don't have a plan at 16/ 19 and 25 yrs. - Feedback from children and young people and their families. - Reduction in the percentage of 16/17 year olds with SEND who are NEET. - Increased children with SEND with a September guarantee.

IP 5.2	The partnership will set up a Pathways to employment task and finish group as part of the Post 16 partnership group work, to include partners from SEND, CSC, ASC, Employment and skills, Supported Internships, Supported Employment, and employers with a specific focus on the sufficiency of available provision and the development of further provision for young people with SEND.	Head of Post 16 / Skills & Employment Programme Manager	Jun 24	Young people with SEND are able to access appropriate post 16 education, employment or training and are better prepared for their adult lives.	The partnership will monitor outcomes for Children and young people with SEND. Outcomes will include improved: <ul style="list-style-type: none"> - Achievement outcomes – improved progress measures - Destinations - The level of tribunals /complaints relating to transition. - The proportion of young people who don't have a plan at 16/ 19 and 25 yrs. - Feedback from children and young people and their families. - Reduction in the percentage of 16/17 year olds with SEND who are NEET. Increased children with SEND with a September guarantee
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Area of Improvement 6:

Area for Improvement:

Leaders should ensure that they improve children's and young people's access to experiences outside of education by:

- a. improving and maintaining the quality and content of information on the local offer so that is it up to date and helps families find appropriate, accessible activities; and
- b. developing more partnership working so that barriers to services are lifted.

Narrative from the report:

There is a lack of identification and support for the health needs of children and young people who are not attending full-time education. There is little consideration of the changing needs for these children and young people.

Leaders have strengthened the knowledge, skills and understanding of staff in the children's disabilities service, specifically around safeguarding. However, the partnership has not maintained its register of children with disabilities in line with statutory requirements. Leaders have started to address this.

Leaders have put in place processes that enable families to directly commission 'short breaks' to meet their children's and young people's needs. However, more is needed to ensure that there is sufficient variety in appropriate services. Currently, there is a six-month delay in reviewing these, and some families have struggled to find and purchase support.

Governance Group: SEND Partnership Board / MPCF

Ambition: Improvement Priority 6 is underpinned by a more detailed action plan, linked to ambition 4: Access to the right support, at the right time, in the right place.

Lead Partner/s: Head of Children's Services Commissioning & Placements

Action Ref:	Strategic Improvement Priority	Accountable lead(s)	To be fully completed by	What is the expected impact	What actions will we carrying out to enable the Partnership to know outcomes have improved for our children and young people?
IP 6.1	<p>The partnership will review the available activities offer to identify any gaps in specialist activities and seek to develop further provision to meet these gaps. Including:</p> <p>(a) To refresh short breaks plan as part of a wider review and expansion of short breaks provisions to meet local need. This will be done in partnership with children and young people as well as Parents and carers.</p> <p>(b) Ensuring that parents and carers of children, known to social care, within Residential settings are aware of and can access the YLF advocacy service.</p> <p>(c) Updating and maintaining an accurate and accessible Local offer Website (see improvement action 2)</p>	<p>Head of Children's Services Commissioning & Placements</p> <p>Children's Commissioning Programme Lead for Education & SEN</p> <p>Head of Inclusion</p>	<p>(a) Jan 25 (b) Sept 24 (c) Dec 24</p>	<p>Children and young people access appropriate experiences outside of education. There is sufficient provision to meet demand, and this is clearly communicated and easily accessible.</p>	<p>The partnership will monitor the action plan develop as part of the review. Using sufficiency data, it will assure itself that the provision is available and is being accessed.</p> <p>The partnership will sign off the new Short Breaks Plan and Short Breaks Statement update.</p> <p>Ensure voice of the children and young people in residential provision is included as part of quality assurance framework.</p> <p>Monitor feedback from parents/ carers and young people to ensure they are aware of the offer and are supported to access.</p> <p>Monitor Local Offer site metrics.</p>
IP 6.2	<p>The partnership will develop a consistent framework of support and sign posting for the Children's Social Prescribers/Care Navigators based on a need led approach.</p> <p>The partnership will ensure a digital flag is applied to clinical health systems if a child or young person requires reasonable adjustments.</p>	<p>Designated Clinical Officer / Partnership commissioning</p>	<p>Dec 24</p>	<p>Children and young people are signposted to support for their individual health needs by the primary care workforce. Health professionals are alerted at the earliest opportunity to improve the child's experiences within a healthcare setting</p>	<p>The partnership will expect to see an improvement in the proportion of parents/ carers and young people reporting an increased in satisfaction in health services meeting the needs of children and young people.</p> <p>Children's Social Prescribers/Care Navigators from Medway will have a consistent attendance rate at the Kent & Medway Community of Practice.</p> <p>Digital Flag – this will be monitored via the LDA (Check)</p>
IP 6.3	<p>The partnership will ensure that a disability register is maintained.</p> <ul style="list-style-type: none"> - To ensure that a safe and accessible registration process is in place 	<p>Head of Safeguarding and Quality Assurance</p>	<p>July 24</p>	<p>Medway know who in their area might benefit from services which are there to promote the welfare of disabled people. Social Services plan by providing estimates of the numbers of disabled people</p>	<p>The partnership will monitor the upkeep of the register and use its intelligence in their planning.</p> <p>Families to be aware of the register and its purpose.</p>

	<ul style="list-style-type: none">- That it meets GDPR requirements- That the register is regularly maintained.			locally and what impairments they have.	That the register is seen to be a useful way of capturing information and communicating to families.
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What actions will we carrying out to enable the Partnership to know outcomes have improved for our children and young people?

The SEND Partnership Board is the forum where key partners hold each other to account for the delivery of the jointly agreed Improvement Plan and SEND Action Plan.

The SEND Partnership Board is responsible for the development and monitoring of the strategy for SEND services in Medway. It enables joint decision making across the Local Area and acts to ensure that appropriate resources are in place to secure delivery of SEND services and service improvement. In doing so the Board will ensure services, and improvement activity, contributes towards meeting the key SEND outcomes for children and young people.

The responsibilities of the Board are to develop best policy, practice, service and provision for children and young people with SEND across the Local Area:

- ensure that services are child and family centred and responsive to need.
- creating and ensuring the delivery of the SEND Strategy.
- ensuring joint strategic needs analysis is robust and is used to agree the joint commissioning priorities.
- monitor local area performance and take robust action to respond to areas of improvement.
- direct finance and other resources where required to deliver the strategy, joint commissioning priorities and service improvement.
- ensure the right resource and activity to contribute towards timely delivery of agreed improvement and fulfilling the key SEND outcomes.
- remove internal and inter-agency barriers to improvement and support management of interdependencies across related partner programmes of work.
- ensure system risk is managed effectively and reported consistently across strategic partners.
- communicate system priorities and performance expectations across partner organisations.
- enable system leaders to work together to drive improvements and identify and address areas of local area performance that require improvement or are not meeting expectations.

In doing so, system leaders:

- are ambitious for children and young people with SEND and have an ambitious strategy that defines the shared outcomes they will work collectively to achieve for all children and young people with SEND.
- embed an aspirational culture of high expectations and quality across services and provision.
- understand their responsibilities and accountabilities, including their statutory duties and their individual responsibilities in the wider area strategy.
- ensure responsibilities are delegated in line with leaders' legal duties and there is strong oversight of these resulting activities.
- ensure processes for making decisions are structured so that the leaders responsible can swiftly agree to the changes that are required to improve services.
- challenge themselves and each other to improve experiences and outcomes for children and young people with SEND.

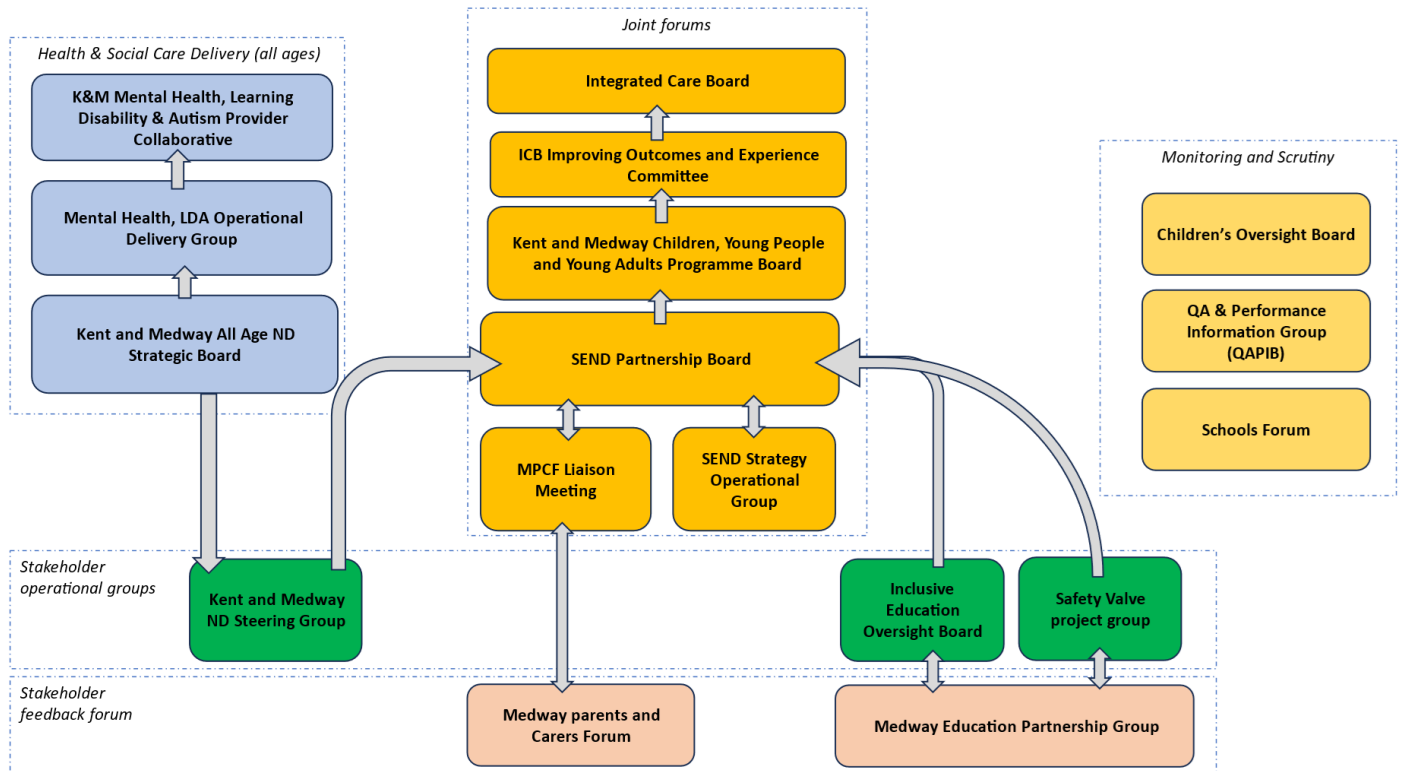
Individual actions are listed in the Improvement plan; however, the governance will consider all aspects of evidence in judging the totality of the impact on our children and young people.

The Partnership Board reports to the Integrated Care Board and Cabinet. It also reports, as required, to corporate boards, the Children & Young Peoples Scrutiny Committee, the Health & Wellbeing Board, and the Children's Safeguarding Partnership.

The Partnership Board can escalate areas of concern to the Council and ICBs governance boards or other stakeholder groups such as the School Heads fora. This may be directly to the Council's lead member or scrutiny boards or the ICB Quality and Performance Assurance Committees

Meeting every six weeks, the membership of the Partnership Board includes representatives across Education, Health and Social Care as well as our third sector and user voice partners.

Governance Structure:



Health and social care delivery (all ages) governance includes Kent & Medway Mental Health, Learning Disability & Autism Provider Collaborative. Mental Health Learning Operational Delivery Group, Kent and Medway All Age ND strategic Board

Joint Forums includes Integrated Care Board, Integrated care board Improving outcomes and experience committee, Kent and Medway Children, Young People and Young Adults Programme Board, SEND Partnership Board, MPCF Liaison Meeting, SEND Strategy Operational Group

Monitoring and Scrutiny is conducted by Children's Oversight Board, Quality Assurance & Performance Information Group (QAPIB), Schools Forum

Stakeholder feedback forum: Medway parents and carers forum, Medway Education Partnership Group