



Nottinghamshire Partnership Improvement Plan for support for children and young people with special educational needs and disabilities (SEND)

Working Draft

13 June 2023



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1. Introduction

The local area partnership is committed to continuous improvement to deliver the best outcomes for children and young people with SEND. This action plan reflects our key partnership priorities. Between 16 January and 3 February 2023, Ofsted and the Care Quality Commission (CQC) undertook a joint inspection of the Nottinghamshire local area. The purpose of inspection was to:

- provide an independent, external evaluation of the effectiveness of the local area partnership's arrangements for children and young people with SEND; and
- where appropriate, recommend what the local area partnership should do to improve the arrangements.

This action plan will take forward the learning from the Ofsted/CQC inspection process and the areas for improvement identified through the inspection.

Nottinghamshire's SEND Partnership spans a broad range of partners, services and stakeholders. This includes the Integrated Care Board, Healthcare Providers, education settings (from early years through to FE including mainstream maintained, academies, special schools and independent and Alternative Provision (AP) providers), Local Authority Services, parents and carers and our key stakeholders, children and young people. To deliver positive change, it is essential that areas for improvement, improvement activity and accountability is shared across this complex partnership.

The key priorities for improvement across the partnership and wider SEND system in Nottinghamshire relate to the timeliness of identification, assessment and provision of support to effectively meet the needs of children and young people with SEND and improve their outcomes and experiences. This includes a focus on the graduated response pathway and education, health and care (EHC) planning process, including annual reviews, as well as access to health services and therapies. Key to this is strengthening our partnership arrangements to commission the most effective services for children and young people based on an accurate understanding of needs, performance and gaps in provision.

To ensure delivery of our key priorities for improvement at pace, and evidence impact on the outcomes and experiences of children, young people and families with SEND, we will strengthen our governance, oversight and accountability across the partnership.

Evaluation and future planning for improvement, informed by the views of children and young people with SEND and their families will be a key feature of revised governance.

Our Partnership Improvement Plan identifies the actions the Nottinghamshire local area partnership will undertake to address our most important areas of improvement, how we will measure success and what difference this will make to Nottinghamshire’s children and young people with SEND and their parents and carers. Our plan focuses on ensuring that:

- Children and young people’s needs are identified accurately and assessed in a timely and effective way.
- Children, young people, and their families participate in decision-making about their individual plans and support.
- children and young people receive the right help at the right time.
- Children and young people are well prepared for their next steps and achieve strong outcomes.
- Children and young people are valued, visible and included in their communities.

Adrian Smith Chief Executive Nottinghamshire County Council	Amanda Sullivan Chief Executive Nottingham and Nottinghamshire Integrated Care Board
Colin Pettigrew Corporate Director for Children and Families Nottinghamshire County Council	Rosa Waddingham Director of Nursing Nottingham and Nottinghamshire Integrated Care Board

2. Strategic Vision

Nottinghamshire is ambitious for all children and young people to achieve their potential and have the best start in life. We recognise that children and young people have different strengths and needs, and that services and provision need to be differentiated so that all children and young people have their needs met and experience success.

We recognise that for children and young people to achieve their potential then all services need to work together with parents, carers, children, and young people and that their voices are heard at all levels.

Services and organisations should support people and families to live independently in the community, with prevention and self-management at the heart of our service delivery.

Our local area partnership vision is that:

“Children and young people with Special Educational Needs and Disabilities (SEND) will be safe, healthy, and happy, and have a good quality of life and opportunities to fulfil their aspirations, develop their independence and make a positive contribution to society.”

3. Governance

Partnership assurance and scrutiny of the SEND Partnership Improvement Plan will be achieved through a newly established and independently chaired **Nottinghamshire SEND Partnership Improvement Board** (“the Board”). The Board will provide both support and challenge across the partnership, facilitating solution-focussed practice to resolve issues and barriers that impact on the timely delivery of actions. The Board will be time-limited for the lifetime of the SEND Partnership Improvement Plan, or until it can be transitioned into business-as-usual partnership governance arrangements.

The Chief Executives of Nottinghamshire County Council (NCC) and NHS Nottingham and Nottinghamshire Integrated Care Board (ICB) will meet with the Board’s Independent Chair on a monthly basis to seek assurance on progress.

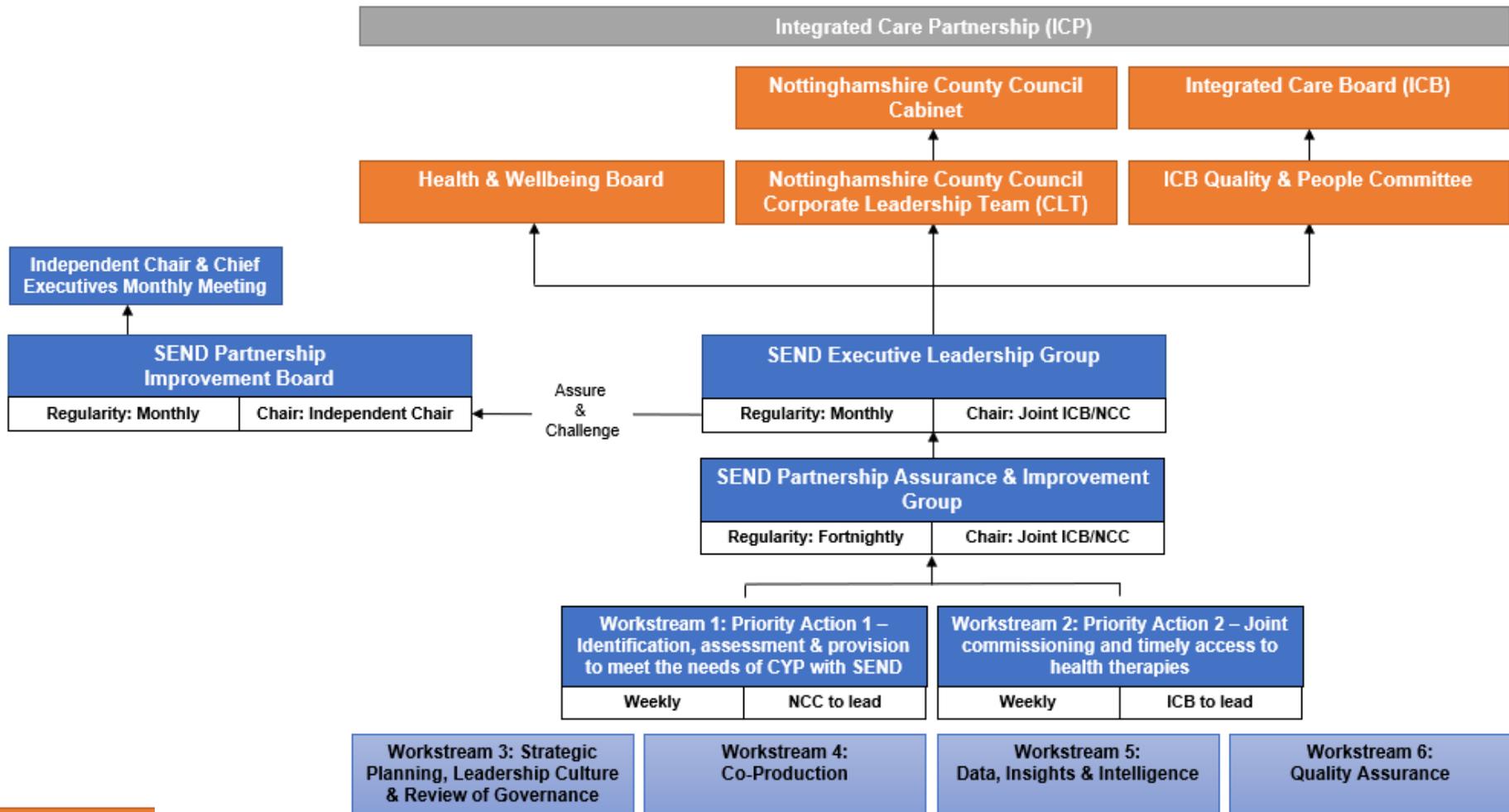
A tiered partnership structure will be established to enable joint ownership, oversight, leadership and partnership accountability for the SEND Partnership Improvement Plan. These arrangements will be established on an interim basis, pending a governance review to establish longer-term governance arrangements and ensure effective alignment with the developing requirements of the SEND and Alternative Provision (AP) Improvement Plan (published by the Department for Education in March 2023). It is proposed that the SEND Accountability Board, in its current configuration, will discontinue, with its functions being integrated into this new, tiered partnership structure. A governance review will be undertaken as part of one of the improvement workstreams, which will consider the evolving national guidance around inclusion partnerships.

- **SEND Executive Leadership Group:** Partnership leadership and strategic oversight of the SEND Partnership Improvement Plan will be achieved through a newly established SEND Executive Leadership Group. This Group will be jointly chaired by the ICB and NCC executive leads for SEND and will set strategic direction across the partnership. The Executive Leadership Group will report highlights, exceptions and escalations to the Board and into partnership/external governance forums, providing assurance of progress against the Plan.

- **SEND Partnership Assurance & Improvement Group:** Joint accountability and operational oversight of the SEND Partnership Improvement Plan and wider SEND Partnership Improvement Programme will sit with the newly established and jointly chaired SEND Partnership Assurance & Improvement Group. Membership of this group includes representatives from all SEND partners and relevant agencies that have key SEND responsibilities. The Partnership Assurance & Improvement Group will apply a programme management methodology to ensure the effective oversight and monitoring of improvement activity, focussing on the delivery of priority improvement actions, underpinned by enabling improvement activity. The Partnership Assurance & Improvement Group will commission and oversee deep dive reviews in line with the Improvement Plan. It will report highlights, risks and escalations to the Executive Leadership Group on a monthly basis.

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Diagram 1 Governance Arrangements



Key

Denotes existing governance forum

Denotes new, interim governance forum

4. Monitoring progress

There will be regular monitoring of progress against milestones and success measures embedded within the governance structure.

The SEND Partnership Improvement Board will receive monthly "spotlight" updates from the joint Priority Leads, providing assurance to members of the Board and to enable any emerging concerns to be raised.

Each of the joint Priority Leads will have overall accountability for the actions in the relevant sections of the Partnership Improvement Plan.

A performance monitoring scorecard will be in place which covers the key measures for each of the improvement priorities. Each of the sub-groups of the SEND Partnership Assurance & Improvement Group will be responsible for monitoring their own action plan and providing evidence of impact to demonstrate improvement. Actions will be signed off by the SEND Executive Leadership Group and included in the monthly updates to the Board.

The local area Partnership recognises that a culture of high support and high challenge is critical to successfully achieving the improvements required in Nottinghamshire. This high support and challenge will be provided by the SEND Partnership Improvement Board. Leaders will be expected to be held to account for the areas they lead on and to provide detailed analysis when actions are not being progressed as expected, and to take the steps necessary to improve outcomes.

5. Nottinghamshire's Partnership Improvement Plan

5a. Nottinghamshire's Improvement Priorities

1. Improve the timeliness of identification and assessment of need and provision of support to effectively meet the needs of children and young people with SEND and improve their outcomes and experiences.

This will be delivered through ensuring that education health and care plans (EHCP) are produced in timely manner, easy for everyone to read and use as well as including the views of children and young people, their families who support them. Reviewing the graduated process pathway to outline how decisions are made to ensure families feel confident in the decisions made. Supported through improving the annual review process, ensuring effective monitoring performance and a cycle of continuous improvement is embedded across the partnership in a strength-based way.
2. Improve the timeliness with which children and young people can access the health services and therapies that they need, whilst ensuring that there are no gaps in services.

This will require strengthening the approach to joint commissioning, including the effective use of data, intelligence, and insight, and ensuring the effective monitoring of performance and a cycle of continuous improvement is embedded across the partnership.

5b. Progress to date

Improvement Priority 1

- Key themes for the Partnership Improvement Plan were identified at a partnership workshop held on 22 March 2023.
- Interim Group Manager for ICDS has been appointed and commenced.
- Job Description for SEND Group Manager is in the process of being reshaped as part of improvement planning.
- Additional EHC Plan writer capacity recruitment is underway
- Additional educational psychologist (EP) capacity is in the process of being secured
- Revised draft KPI monitoring process has been developed to inform the Learning and Improvement Board and wider improvement arrangements. Current performance in respect of EHCP timeliness has improved from 3.4% within 20 weeks (at time of inspection) to 7.8% (first quarter 2023).
- There has been an uplifted in funding targeted to provide additional support for children with SEN in mainstream settings for 2023-2024 by 20%.

Improvement Priority 2

- JSNA section on SEND was approved by the Nottinghamshire Health and Wellbeing Board on 8 March 2023.
- Key themes for the Partnership Improvement Plan were identified at a partnership workshop held on 22 March 2023.
- Partnership group of Senior Managers already established and working on a detailed plan for implementation.

5c. Improvement Priority 1 – Improve the timeliness of identification and assessment of need and provision of support to effectively meet the needs of children and young people with SEND and improve their outcomes and experiences.

Partnership Leads:

(1) Peter McConnochie, Service Director, Education, Learning and Inclusion – Nottinghamshire County Council

(2) Nicola Ryan, Deputy Chief Nurse, Nottingham and Nottinghamshire ICB

Outcomes we will strive for:

- **Children and Young People with SEND in Nottinghamshire have their needs identified and assessed through statutory processes and in a timely way**
 - Reduce the length it takes us to complete all EHC needs assessment requests
 - Reduce the length of time it takes to issue Education, Health and Care (EHC) Plans
- **Ensure our children and young people with SEND receive robust and consistent support through their EHC Plans, which have the right input, at the right time and from the right place**
 - Develop and implement improvements to the annual review process
 - Ensure health and social care needs / outcomes / services are identified within EHC Plans and Annual Reviews
 - Ensure EHC Plan reviews are completed in a timely and appropriate way
- **Children and young people with additional needs, but without an EHC Plan, have their needs identified, met and monitored effectively**
 - Implement new ways to monitor support provision and capture how children and young people are progressing
 - Further develop and embed a culture of inclusion across Nottinghamshire, meetings need outside of statutory processes, where appropriate
Improve consistency across all education settings in identification and provision of need
 - Ensure that the graduated response pathway / approach is effective and clearly communicated and understood by parents and carers, children and young people, and all professionals (e.g. health, social care and education)
 - Embed early intervention and multi-agency processes to prevent children and young people's needs from escalating

Ref	Actions we will take	Lead and resource	Evidence of success (what will change)	Impact measures (KPI's/ Targets)	Completion date	Progress narrative (BRAG)
Outcome 1						
➤ Children and Young People with SEND in Nottinghamshire have their needs identified and assessed in a timely way through statutory processes						
1.1	Reduce the length of time it takes to complete Educational, Health and Care (EHC) assessment requests through statutory processes.					
1.1.1	Increase staffing capacity to increase the volume of EHC plan assessments completed monthly and reduce the backlog of EHC plan assessment applications	Charles Savage & Lynda Poole	<p>Agree specification for additional Education Psychology capacity through agency (May 2023)</p> <p>Agree contract for delivery of additional 30 EP assessments per month (June 2023)</p> <p>Additional EP team established</p> <p>Children and young people will have their needs assessed within the statutory timeline.</p>	<ul style="list-style-type: none"> Reduction in backlog of EHC plan assessment application Increase in number of EP assessments completed per month Reduction in waiting list for EP assessments 	<p>May 2023</p> <p>June 2023</p> <p>July 2023</p>	<p>Funding secured to increase EP capacity</p> <p>Contract agreed with external agency to deliver 30 additional EP assessments per month.</p>

Ref	Actions we will take	Lead and resource	Evidence of success (what will change)	Impact measures (KPI's/ Targets)	Completion date	Progress narrative (BRAG)
			Parents and carers will know whether their child or young person will receive an EHC plan more quickly.	<ul style="list-style-type: none"> 15% of new EHC assessments will be completed (to Stage 2 decision-making) within statutory timelines Rising to 25% of new EHC assessments completed 	End June 2023 End September 2023	
1.1.2	Improve the decision-making processes which support EHC assessments.	Lynda Poole	When assessing a child's need for an EHC plan, staff will make decisions based on structured conversations with parents/ carers and schools/ educational settings.	<ul style="list-style-type: none"> 50% of (Stage 1) decision making will incorporate structured conversations Rising to 95% 	End September 2023 End November 2023	Revised protocol for Stage 1 decision-making drafted and agreed by all key partners.
1.1.3	Complete a comprehensive review of our operating model, processes, and the systems we use. Make improvements to the way we work.	Lynda Poole & Emily Wormall	Opportunities to improve our effectiveness and efficiency will be identified. We'll then make changes to the way we do things. Children, young people and their	Reduction in complaints Improved feedback from children, young people, parents, and carers. Reduced time taken to complete EHC assessments	End October 2023 "Discovery", "Design" work and some implementation work.	Process mapping 'the child/young person's journey' has started.

Ref	Actions we will take	Lead and resource	Evidence of success (what will change)	Impact measures (KPI's/ Targets)	Completion date	Progress narrative (BRAG)
			parents or carers will get the support and advice they need more easily and quickly.	Reduced time taken to issue EHC plans	Implementation work then ongoing.	
1.2	Reduce the length of time it takes to issue Education, Health and Care (EHC) Plans					
1.2.1	Increase staffing capacity to reduce the length of time taken to draft (and where appropriate issue) an Education, Health and Care (EHC) Plan	Lynda Poole	<p>More NCC staff will be available to provide EHC plans.</p> <p>Children and young people will receive their EHC plans sooner.</p>	<ul style="list-style-type: none"> • 10% of new EHCPs are issued on time • Rising to 25% of new EHCPs are issued on time • No new EHCPs issued over 30 weeks late 	<p>End June 2023</p> <p>End September 2023</p> <p>End July 2023</p>	<p>Additional EHC Plan writers recruited.</p> <p>Further temporary staffing proposals have been drafted- to reduce immediate backlog.</p>
1.2.3	Learn from other local areas about their approach to improving and sustaining improved timescales for EHC Plans.	Chris Jones	<p>Nottinghamshire will implement recognised 'best practice' from other areas quickly and to good effect.</p> <p>Children and young people will receive their EHC plans sooner.</p>	<ul style="list-style-type: none"> • 10% of new EHCPs are issued on time • Rising to 25% of new EHCPs are issued on time • No new EHCPs issued over 30 weeks late 	<p>End June 2023</p> <p>End September 2023</p> <p>End July 2023</p>	

Ref	Actions we will take	Lead and resource	Evidence of success (what will change)	Impact measures (KPI's/ Targets)	Completion date	Progress narrative (BRAG)
Outcome 2						
➤ Ensure our children and young people with SEND receive robust and consistent support through their EHC Plans, which have the right input, at the right time and from the right place.						
2.1	Develop and implement improvements to the Annual Review process					
2.1.1	Complete a comprehensive review of our operating model, processes, and the systems we use. Make improvements to the way we work. (Further specific actions to be defined).	Lynda Poole & Emily Wormall	Opportunities to improve our effectiveness and efficiency will be identified. We'll then make changes to the way we do things. Children, young people and their parents or carers will get the support and advice they need more easily and quickly.	Reduction in complaints Improved feedback from children, young people, parents, and carers. Reduced time taken to complete EHC plan reviews	End October 2023 "Discovery", "Design" work and some implementation work. Implementation work then ongoing.	Process mapping 'the child/young person's journey' has started.
2.2	Ensure health and social care needs/ outcomes/ services are identified within EHC Plans and Annual Reviews					
2.2.1	Undertake deep dive 'Discovery' and 'Design' activity. Which will include: <ul style="list-style-type: none"> • Multi agency workshops • Consultation 	Lynda Poole	TBC	TBC	End October 2023	Work underway to establish new working groups and identify existing coproduction opportunities.

Ref	Actions we will take	Lead and resource	Evidence of success (what will change)	Impact measures (KPI's/ Targets)	Completion date	Progress narrative (BRAG)
	<ul style="list-style-type: none"> Engagement activity with Parents and Carers to identify specific improvement activity. 					So that the improvement activity can be: <ul style="list-style-type: none"> Accurately defined Include the right people
2.3	Ensure EHC Plan reviews are completed in a timely and appropriate way					
2.3.1	Increase staffing capacity to address the backlog of EHCP reviews	Lynda Poole	Children and young people will receive their Annual Reviews more regularly.	<ul style="list-style-type: none"> 60% of Annual Reviews take place within 12 months of previous MAC (Maintain, Amend or Cease) decision date or date of issue by end of Sep 2023. 75% of amended EHCPs are issued within 12 weeks of the Annual Review meeting taking place 	End September 2023	Additional EHC Plan writers recruited
Outcome 3 ➤ Children and young people with additional needs, but without an EHC Plan, have their needs identified, met, and monitored effectively						
3.1	Implement new ways to monitor support and provision and capture how children and young people are progressing					

Ref	Actions we will take	Lead and resource	Evidence of success (what will change)	Impact measures (KPI's/ Targets)	Completion date	Progress narrative (BRAG)
3.1.1	Review existing funding processes/pathways to identify mechanism to provide identification and assurance of effectiveness of provision to improve outcomes.	Simon Ray	Regardless of whether an EHC Plan is in place or not, all children and young people with complex needs are having their progress monitored effectively Effective monitoring in place with outcome data shared across partnership	TBC	April 2024	
3.2	Further develop and embed a culture of inclusion across Nottinghamshire, meeting need outside of statutory processes, where appropriate					
3.2.1	Multi-agency deep dive activity to be undertaken to scope detailed action plan to improve inclusive practice and oversight of inclusion within settings.	TBC	TBC following deep dive scoping activity	TBC	TBC	In development
3.3	Improve consistency across all education settings in identification and provision of need					
3.3.1	Review application of graduated response across local area and	Charles Savage	Children and young people will receive a more consistent level of support, regardless	TBC	TBC	In development

Ref	Actions we will take	Lead and resource	Evidence of success (what will change)	Impact measures (KPI's/ Targets)	Completion date	Progress narrative (BRAG)
	Review training offer for SENCOs and address any gaps to improve workforce development.		of location or placement. Graduated response will be applied consistently evidenced through the journey of a child or young person			
3.3.2	Identify the opportunities to strengthen the Family and District SENCO model.	Charles Savage	Family and District SENCO model will ensure consistency across schools in different districts.	Increased consistency evident through locality SEND and inclusion data	July 2024	In development
3.4	Ensure that the graduated response pathway/ approach is effective and clearly communicated and understood by; parents and carers, children and young people and all professionals (e.g. health, social care and education)					
3.4.1	Specific actions to be defined through multiagency deep dive to review the effectiveness and understanding of the graduated approach.	Charles Savage	Parents and Carers will feel supported, listened to, and have a clear understanding of what to expect for their child/ young person as they travel along the 'graduated response pathway'.	Improved Parent and Carer feedback. Reduced complaints, leading to reduced mediation and tribunal activity. Improved partner engagement and increased participation in	July 2024	In development

Ref	Actions we will take	Lead and resource	Evidence of success (what will change)	Impact measures (KPI's/ Targets)	Completion date	Progress narrative (BRAG)
			All partners will have a clear understanding of the 'graduated response' approach and how they contribute to it.	'graduated response pathway'. Improved partner feedback.		
3.5	Embed early intervention and multi-agency processes to prevent children and young people's needs from escalating					
3.5.1	Audit existing locality processes to provide additional support and resource to meet need and develop further to provide multiagency forums.	Charles Savage	All partners will be working together well to identify early opportunities to support children and young people, prior to the establishment of EHC plans.	Children and young people access support sooner. Reduction in highly complex/ advanced need EHC plans.	April 2024	In development

Delivery Partners
<ul style="list-style-type: none"> • Parent, carers, and children and young people • Health services • Education settings • Nottinghamshire Parent Carers forum • Local authority services including Children's and Adult Social Care

RAG status	
Blue	Action complete, impact measures achieved and approval to close obtained from the SEND Improvement Board
Green	Action on track to achieve the impact measures and within the timelines set
Amber	Action at risk of not achieving the impact measures and/or completion within the timelines set.
Red	Action at significant risk of not achieving the impact measures and completion within the timelines set.
Grey	Action not due to start

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5d. Improvement Priority 2 – Improve the timeliness with which children and young people can access the health services and therapies that they need, whilst ensuring that there are no gaps in services. This will require strengthening the approach to joint commissioning, including the effective use of data, intelligence, and insight, and ensuring the effective monitoring of performance and a cycle of continuous improvement is embedded across the partnership.

Partnership Leads:

- (1) Karon Foulkes, Head of Maternity and Children's Commissioning and Transformation, NHS Nottingham and Nottinghamshire ICB*
- (2) Laurence Jones, Service Director, Commissioning and Resources – Nottinghamshire County Council*

Outcomes we will strive for:

- To have a better understanding of the current needs of children and families with SEND so that our commissioning activity can most accurately reflect that.
- To reduce waiting times for assessment to Neurodevelopmental Behaviour Service (NBS) to 26 weeks by March 2024.
- To reduce waiting times for speech, language and communication needs to 13 weeks by March 2024.
- To reduce waiting times for Occupational Therapy and Physiotherapy to 13 weeks by March 2024.
- For children, young people and families to experience services that are easy to navigate, free from duplication and are adaptive to their needs

Ref	Actions we will take	Lead and resource	Evidence of change (what will change)	Impact measures (KPIs / Targets)	Milestones	Completion Date	Progress BRAG
Outcome 1: To have a better understanding of the current needs of children and families with SEND so that our commissioning activity can most accurately reflect that							
1.1	Nottingham & Nottinghamshire Strategic Planning Group for Children and Young People's (SPG) agrees areas of joint commissioning activity, resources and delivery group contained within a commissioning framework.	<ul style="list-style-type: none"> Chair(s), SPG 	To have in place: <ul style="list-style-type: none"> Change Plan Resourcing plan Delivery plans Delivery monitoring document 	<ul style="list-style-type: none"> Families report services are easier to access, are timely and are free of duplication 	<ul style="list-style-type: none"> Complete logic model change plan Identify project resources Agreement by SPG and recommendations to Exec Delivery plans established for each key strand of work Implement and monitor delivery plans 	Plan established and delivery commenced by September 2023	
1.2	SPG establishes risk register including the required regular feeds from data analysis that will inform areas for further attention.	<ul style="list-style-type: none"> Chair(s), SPG 	<ul style="list-style-type: none"> TOR and minutes from Data and Outcomes group Risk Register 	<ul style="list-style-type: none"> Risks across the system are collectively understood and responded to and when necessary escalated 	<ul style="list-style-type: none"> Establish a data and outcomes group to provide an analysis of available data and future trends. 	July 2023	

Ref	Actions we will take	Lead and resource	Evidence of change (what will change)	Impact measures (KPIs / Targets)	Milestones	Completion Date	Progress BRAG
					<ul style="list-style-type: none"> Assess required data feeds and any gaps Agree risk register format Establish regular reporting cycle Agree mitigation and escalation mechanisms 		
1.3	SPG and Exec SPG produce Joint SEND Strategic Commissioning Strategy (for Nottinghamshire and Nottingham) embodying principles and scope for consideration by relevant bodies	<ul style="list-style-type: none"> Chair(s), SPG 	<ul style="list-style-type: none"> Strategy document Approval reports 	<ul style="list-style-type: none"> Families report services are easier to access, are timely and are free of duplication 	<ul style="list-style-type: none"> SPG consult on and produce strategy Approval for formal submission to relevant bodies by the SPG Exec Approval be relevant accountable bodies 	Formal approvals by March 2024	
1.4	JSNA chapter on SEND is published	<ul style="list-style-type: none"> Director of Public Health 	<ul style="list-style-type: none"> Published JSNA chapter 	<ul style="list-style-type: none"> Population level need and gaps, risks and opportunities are identified 	<ul style="list-style-type: none"> Identify lead author Establish task and finish support group Consult with PCFs 	March 2023	Completed: JSNA chapter on SEND was approved by the Nottingham

Ref	Actions we will take	Lead and resource	Evidence of change (what will change)	Impact measures (KPIs / Targets)	Milestones	Completion Date	Progress BRAG
					<ul style="list-style-type: none"> Refresh data collection Publish refreshed chapter 		hire Health and Wellbeing Board on 8 March 2023
1.5	JSNA chapter to be reviewed and recommendations to be implemented	<ul style="list-style-type: none"> Director of Public Health 	<ul style="list-style-type: none"> Reviewed JSNA chapter Implementation of JSNA recommendations 	<ul style="list-style-type: none"> Population level need and gaps, risks and opportunities are collectively understood and reflected in the joint commissioning strategy. 	<ul style="list-style-type: none"> Review recommendations from JSNA Establish task and finish group 	May 2024	
1.6	Health Inequalities: Understand the needs and impact of health inequalities and ensure equity of access and provision by reviewing population health data and wider determinants of health by place based level	<p>Maternity, Children's Commissioning and Transformation (ICB)</p> <p>Service Director, Commissioning and Resources Children and Family Services</p>	<ul style="list-style-type: none"> Data Metrics and trajectories on access to services for health inequality groups / areas identified 	<ul style="list-style-type: none"> Equitable access to services 	<ul style="list-style-type: none"> Review data from JSNA Dashboard created to identify priority areas of inequalities including Core20Plus5 areas of priority 	May 2024	

Ref	Actions we will take	Lead and resource	Evidence of change (what will change)	Impact measures (KPIs / Targets)	Milestones	Completion Date	Progress BRAG
Outcome 2: To reduce waiting times for assessment to Neurodevelopmental Behaviour Service (NBS) to 26 weeks by March 2024							
2.1	Deliver improvements to waiting times for assessment to NBS and subsequent paediatric diagnostic pathways	<p>Head of Learning Disabilities and Autism Transformation and Commissioning</p> <ul style="list-style-type: none"> Head of Maternity, Children's Commissioning and Transformation (ICB) 	<ul style="list-style-type: none"> performance and quality metrics 	<ul style="list-style-type: none"> Waiting times for NBS reduced to 26 weeks by March 2024 	<ul style="list-style-type: none"> Continue to deliver the NBS improvement plan 	March 2024	<p>NBS - Reviewing the service to reduce the inherited waiting lists and lengthy waiting times – focus on referrals process, triage assessment and parenting support.</p> <p>Additional non-recurrent funding has been confirmed for this year to provide an additional Specialist Practitioner in each service for 12 months</p>

Ref	Actions we will take	Lead and resource	Evidence of change (what will change)	Impact measures (KPIs / Targets)	Milestones	Completion Date	Progress BRAG
							Additional investment provided to increase capacity of comm paed and support the waiting list initiatives Funding for Consultant Psychologist posts has been agreed to support the autism assessment pathway.
<p>Outcome 3: To reduce waiting times to treatment for speech, language and communication needs reduced to 13 weeks by March 2024; and</p> <p>Outcome 4: To reduce waiting times to treatment Occupational Therapy and Physiotherapy to 13 weeks by March 2024</p>							
3.1 4.1	Produce change and improvement delivery plans SLCN, Occupational Therapy (including through transition to adulthood)	<ul style="list-style-type: none"> Head of Maternity, Children's Commissioning and Transformation (ICB) 	<ul style="list-style-type: none"> performance and quality metrics 	<ul style="list-style-type: none"> Waiting times for speech, language and communication need reduced to 13 weeks by March 2024, 	<ul style="list-style-type: none"> Position statements Evaluate any already established change or improvement programmes 	March 2024	Additional funding has been secured by the ICB to increase the capacity for targeted and specialist speech,

Ref	Actions we will take	Lead and resource	Evidence of change (what will change)	Impact measures (KPIs / Targets)	Milestones	Completion Date	Progress BRAG
				where applicable	<ul style="list-style-type: none"> • Create vision for end state • Change and delivery plan 		<p>language and communication interventions for children aged two years four months and upwards. An SLT fast track system is under discussion to expediate waiting times</p> <p>Monthly reporting is in place on SLT and other service waiting times and numbers, to be refined further.</p>
Outcome 5: For children, young people and families to experience services that are easy to navigate, free from duplication and are adaptive to their needs							
5.1	Therapy & <i>Personal Care</i> : Single therapy assessment, equipment and care planning, where	Head of Maternity, Children's Commissioning and	<ul style="list-style-type: none"> • Seamless, transparent accessible and equitable 	<ul style="list-style-type: none"> • Reduced complaints • Quality improvement indicators 	<ul style="list-style-type: none"> • Scope existing services across the ICS • Review and understand the 	May 2024	

Ref	Actions we will take	Lead and resource	Evidence of change (what will change)	Impact measures (KPIs / Targets)	Milestones	Completion Date	Progress BRAG
	appropriate and possible, to promote seamless provision of requirements and to reduce duplication of assessments for CYP and families	Transformation (ICB) Service Director, Commissioning and Resources Children and Family Services	access to services in place	<ul style="list-style-type: none"> Financial and operational efficiencies Reduced Extended Appeals/Tribunals 	needs of children and young people <ul style="list-style-type: none"> Create vision for end state Change and delivery plan Options appraisal undertaken 		
5.2	Sensory Provision: Understand and embed sensory provision and approach in health services to enable all CYP to engage equitably in accessing services	Head of Maternity, Children's Commissioning and Transformation (ICB) Service Director, Commissioning and Resources Children and Family Services	<ul style="list-style-type: none"> Sensory needs of children and young people are being met, where applicable 	<ul style="list-style-type: none"> Reduced complaints Quality improvement indicators Financial and operational efficiencies Reduced Extended Appeals/Tribunals 	<ul style="list-style-type: none"> Scope existing services across the ICS Review and understand the needs of children and young people Create vision for end state Options appraisal undertaken Secure Funding 	May 2024	
5.3	EHCPs: Meeting the health and therapeutic	Head of Maternity,	<ul style="list-style-type: none"> Health contributions 	<ul style="list-style-type: none"> Reduced complaints 	<ul style="list-style-type: none"> Validation of waiting time 	May 2024	

Ref	Actions we will take	Lead and resource	Evidence of change (what will change)	Impact measures (KPIs / Targets)	Milestones	Completion Date	Progress BRAG
	needs for CYP with EHCPs, supporting more timely access to services and being able to support them with their aspirations, therefore reducing the number of appeals or tribunals	Children's Commissioning and Transformation (ICB)	<ul style="list-style-type: none"> to EHCPs are returned within statutory timescales Quality assurance regarding health contributions to EHCPs 	<ul style="list-style-type: none"> Quality improvement indicators Financial and operational efficiencies Reduced Extend Appeals/Tribunals 	<ul style="list-style-type: none"> data across providers Collate, validate and understand health and local authority held data to identify gaps or challenges in provision of services and act on these accordingly 		
5.4	Transition to adulthood services to be embedded in contracting and commissioning and delivery arrangements to create seamless transition to adult care	<p>Head of Maternity, Children's Commissioning and Transformation (ICB)</p> <p>Service Director, Commissioning and Resources Children and Family Services</p>	<ul style="list-style-type: none"> Updated service specification and contracts agreed with providers Quarterly reports from providers regarding identification of number of children and young 	<ul style="list-style-type: none"> Young adults to be more prepared for transition to adult services 	<ul style="list-style-type: none"> Review children, young people and adult service specifications and contracts to include paragraphs regarding transition and expectations Children and young people to be identified early from age 	December 2024	

Ref	Actions we will take	Lead and resource	Evidence of change (what will change)	Impact measures (KPIs / Targets)	Milestones	Completion Date	Progress BRAG
			people who need / have transition plans		14 by providers to ensure transitions can be planned		
5.5	Best Start in Life: Children and young people have the best start in life and have their needs assessed and met at the earliest opportunity to enable them to maximise their potential	<ul style="list-style-type: none"> Best Start Senior Lead (NCC) Assistant Director of Quality and Transformation (ICB) 	<ul style="list-style-type: none"> Data from local authorities and providers regarding notifications 	<ul style="list-style-type: none"> ICS will be aware of children and young people with additional needs met at an earlier stage Children and young having their needs met and the earliest opportunity Families supported by earlier intervention 	<ul style="list-style-type: none"> Early identification of children under 5 years old in line with Section 23 of Children and Families Act duty for health to inform local authority 	March 2024	

Delivery Partners

- Parent, carers, and children and young people
- Health commissioners and providers
- Local Authority
- Education settings
- Nottinghamshire Parent Carers forum

RAG status

Blue	Action complete, impact measures achieved and approval to close obtained from the SEND Improvement Board
Green	Action on track to achieve the impact measures and within the timelines set
Amber	Action at risk of not achieving the impact measures and/or completion within the timelines set.
Red	Action at significant risk of not achieving the impact measures and completion within the timelines set.
Grey	Action not due to start

6. Glossary

ASCH Adult Social Care and Health

C&YP Children and Young People

CAMHS Child and Adolescent Mental Health Services

ICB Integrated Care Board

CEO Chief Executive Officer

CoP SEND Code of Practice

CPD Continuing Professional Development

CQC Care Quality Commission CSC Children's Social Care

DCO Designated Clinical Offer

DCS Director of Children's Services

EHC Education, Health and Care

EHCNA Education, Health Care Needs Assessment

EHCP Education, Health and Care Plan

Health Relates to Primary care, Secondary Care and Community Care Providers

JSNA Joint Strategic Needs Analysis

LA Local Authority

LO Local Offer

Ofsted Office for Standards in Education

PEP Personal Education Plan

PfA Preparation for Adulthood

QA Quality Assurance

SENCo Special Educational Needs Coordinator

SEND Special Educational Needs and/or Disabilities

SMART Specific, measurable, achievable, realistic, timely

ToR Terms of Reference