



17 March 2025

Agenda Item: 8

**REPORT OF THE EXECUTIVE DIRECTOR FOR CHILDREN AND FAMILIES
AND THE DIRECTOR OF NURSING, NOTTINGHAM AND
NOTTINGHAMSHIRE INTEGRATED CARE BOARD PARTNERSHIP**

**PROGRESS IN IMPROVING THE EXPERIENCES AND OUTCOMES FOR
CHILDREN AND YOUNG PEOPLE WITH SPECIAL EDUCATIONAL NEEDS
AND DISABILITIES – UPDATE**

Purpose of the Report

1. To provide an update to the Select Committee on the progress made by the Nottinghamshire local area Partnership for Special Educational Needs and Disabilities (SEND) in implementing improvements to the lived experiences and outcomes of children and young people with SEND and their families.

Information

2. Progress reports have been presented to the Select Committee quarterly since October 2023 outlining the progress of the local area Partnership to deliver improvements in response to the [findings](#) of the January / February 2023 Ofsted/Care Quality Commission (CQC) local area SEND inspection.
3. The local area Partnership brings together the organisations from across education, health, care, and the voluntary sector, which provide services to meet the needs of children and young people with SEND in Nottinghamshire. The two leading partners are the County Council and the Integrated Care Board (ICB).
4. The Ofsted/CQC local area SEND inspection identified two Priority Action Areas which required urgent attention by the local area Partnership:
 - a) **Area for Priority Action 1 (APA1):** *To urgently identify, assess, and provide for the needs of children and young people with SEND. This includes assessment of needs, timely issuing of Education, Health, and Care (EHC) plans and holistic oversight of these plans through annual reviews.*
 - b) **Area for Priority Action 2 (APA2):** *To identify and address the delays and gaps in access to some health services, particularly speech and language therapy, neurodevelopmental pathways, and equipment services. They should also ensure that they use available performance data to identify where gaps exist and whether actions taken to address these are effective.*

- In addition, to the two Priority Actions, the inspection identified the need for the local area to have a stronger focus on the use of data, quality assurance (especially of assessments and plans), co-production and shared leadership and governance across the SEND system.

Department for Education (DfE) and NHS England (NHSE) Stocktakes and Deep Dives

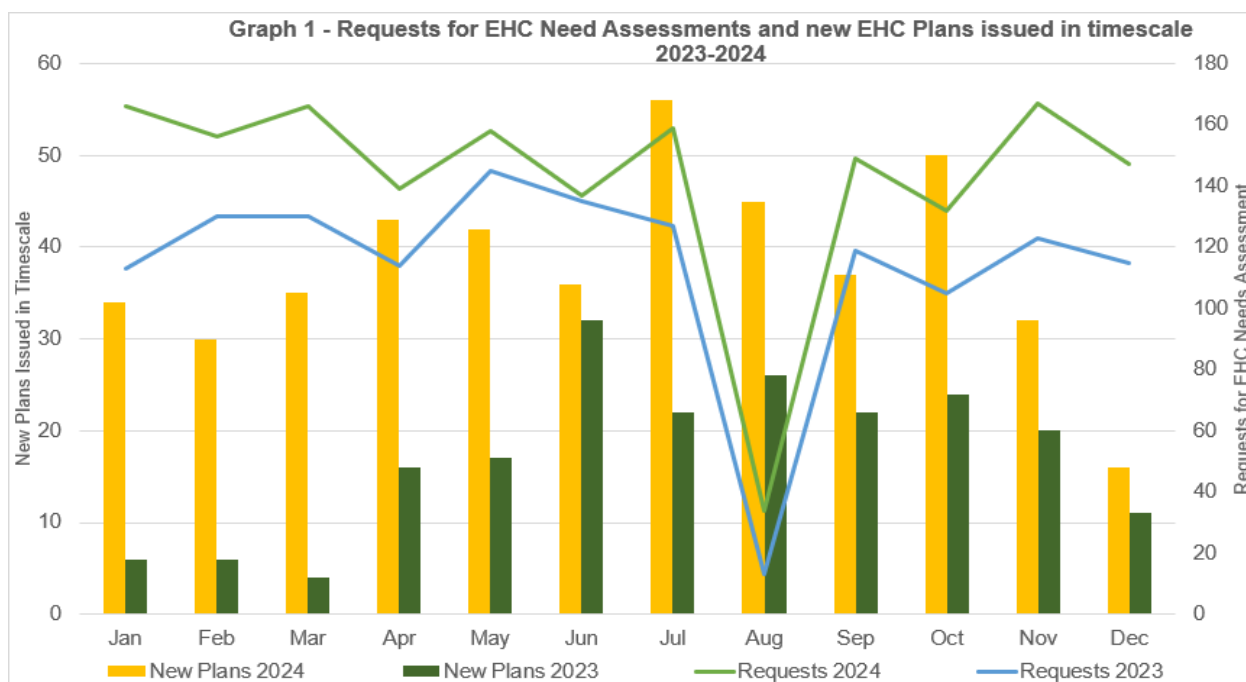
- Since the last report to the Select Committee in December 2024, the DfE and NHSE have undertaken a Stocktake with the local area Partnership. The visit was intended to provide the DfE and NHSE with assurance on progress. The evidence of progress presented was well received.

Key Performance Indicators

- This section of the report provides key information against identified key performance indicators measured against SEND improvement activities. To monitor ongoing performance and maintain system oversight and assurance into these areas the SEND Data Dashboard includes a set of ‘vital signs’.

EHC Need Assessment Requests and timeliness of new EHCPs

- Graph 1** below details the number of requests for EHC Needs Assessments and the number of new EHC Plans issued on time over the last two years.



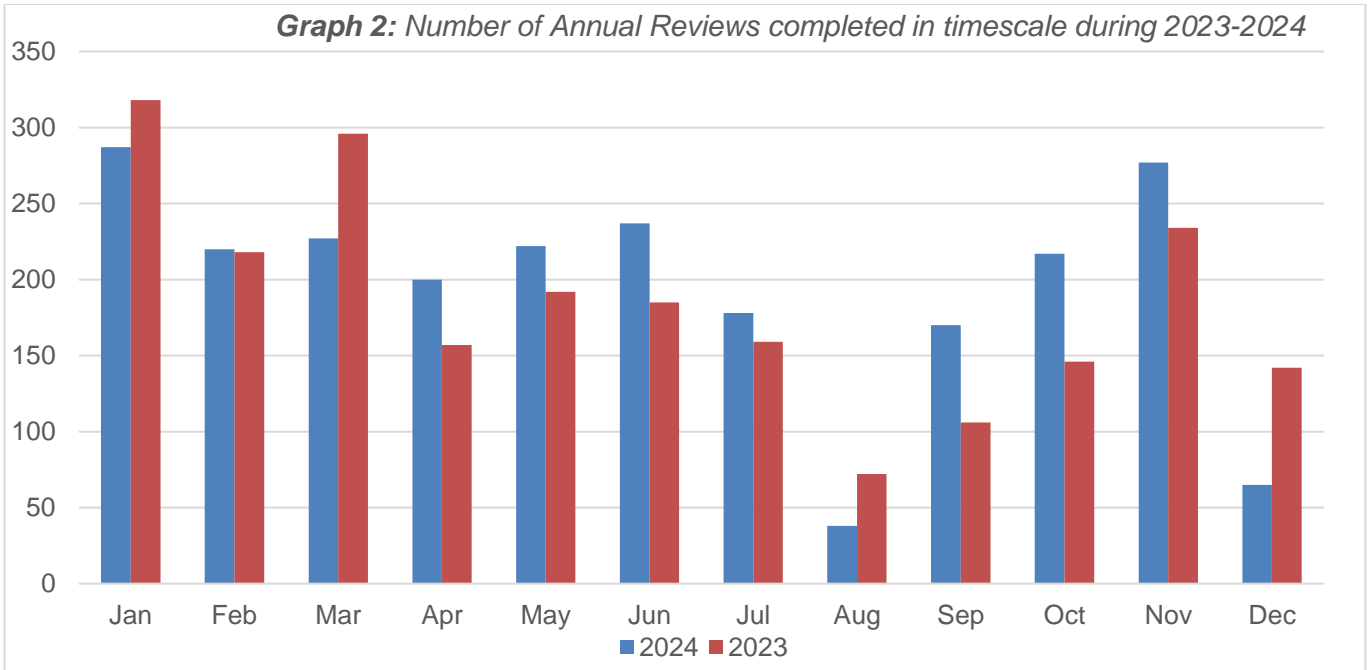
- The demand for statutory Education, Health, and Care (EHC) Needs Assessments continues to increase, both locally and nationally:
 - Nottinghamshire:** Between January and December 2024, 1,708 requests for an EHC assessment were received, which is 24.9% higher than the 1,368 requests received between January and December 2023.

- **National:** there was an 20.8% increase in the number of initial requests for an EHC Plans during 2023, compared with 2022.
10. The proportion of new Education, Health and Care Plans issued within statutory timescales (20 weeks) continues to increase in Nottinghamshire:
- **Nottinghamshire:** new EHC plans issued in timescale during the calendar year has improved significantly in 2024 compared with 2023, up from 28.01% (207 new EHCPs) between January and December 2023 to 35.0% (456 new EHCPs) between January and December 2024. By comparison, Nottinghamshire issued just 4.5% (30 EHCPs) of new EHCPs within 20 weeks during 2022.
 - **National:** in 2023, 50.3% of new EHC plans were issued within 20 weeks. In 2022, 49.2% were issued within 20 weeks. National data for 2024 will be available after May 2024.

Annual Reviews

11. Over the last six years the number of EHCPs that the Local Authority maintains has increased significantly. As the number of EHCPs grow, so therefore does the number of Annual Reviews. Between January 2023 and December 2024 the number of new of EHCPs maintained by Nottinghamshire grew from 3,741 to 5,164 (38.0% increase).
12. Between January and December 2024, 4,685 Annual Reviews were due for completion, compared with 4,172 between January and October 2023 (an increase of 12.3%).
13. As shown in **Graph 2** below the percentage of annual reviews completed in timescale were lower in 2024 compared with 2023, with an average of 49.9% completed in time in 2024 compared with 53.3% in 2023. Although the County Council has the statutory responsibility for the timely completion of annual reviews the majority are completed by education settings. **Graph 2** below shows the number of Annual Reviews completed in timescale during 2023 and 2024.

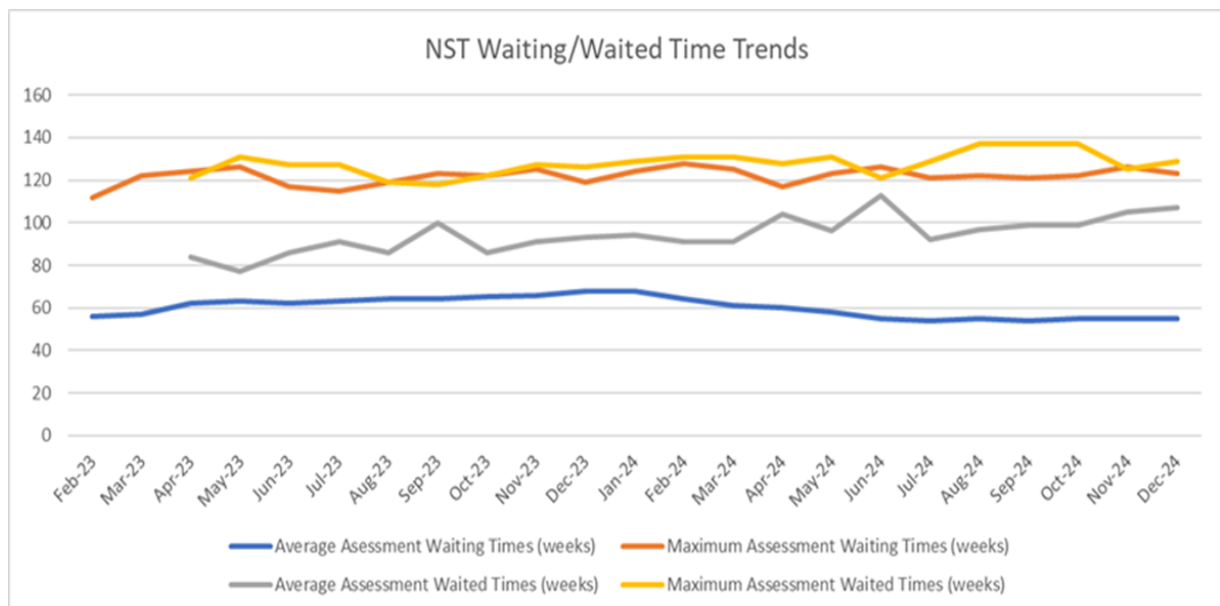
Graph 2: Number of Annual Reviews completed in timescale during 2023-2024



Neurodevelopmental Pathway (Neurodevelopmental Support Team (NST))

- 14. The service has seen a substantial rise in referrals, increasing from a monthly average of 223 in 2021 to 245 in 2022, and further to 332 in 2023. The upward trend has continued, with the monthly average for 2024 so far reaching 341 referrals per month.
- 15. The work undertaken to date to support the neurodevelopmental pathway has cumulated in a reduction in average wait times from 68 weeks in December 2023 to 55 weeks in December 2024 for NST (see **Graph 3**). Wait times for referral screening and triage have also significantly reduced from 12 months to just one week over the past year, ensuring that priority and/or inappropriate referrals are identified much more quickly, ensuring the primary needs of the child/young person are addressed much more effectively.

Graph 3 – Neurodevelopmental Support Team Waiting / Waited Time Trends



16. Wait times are anticipated to reduce again to below the planned trajectory (see **Table 1** below) following the introduction of additional specialist practitioner resource within the team and the implementation of a new online referral form with revised thresholds. This streamlined revised referral process will minimise information requests needed to start assessments, potentially reducing referral numbers by emphasising a more needs led approach rather than diagnosis.

Table 1: Waiting Times Trajectory – Planned and Actual

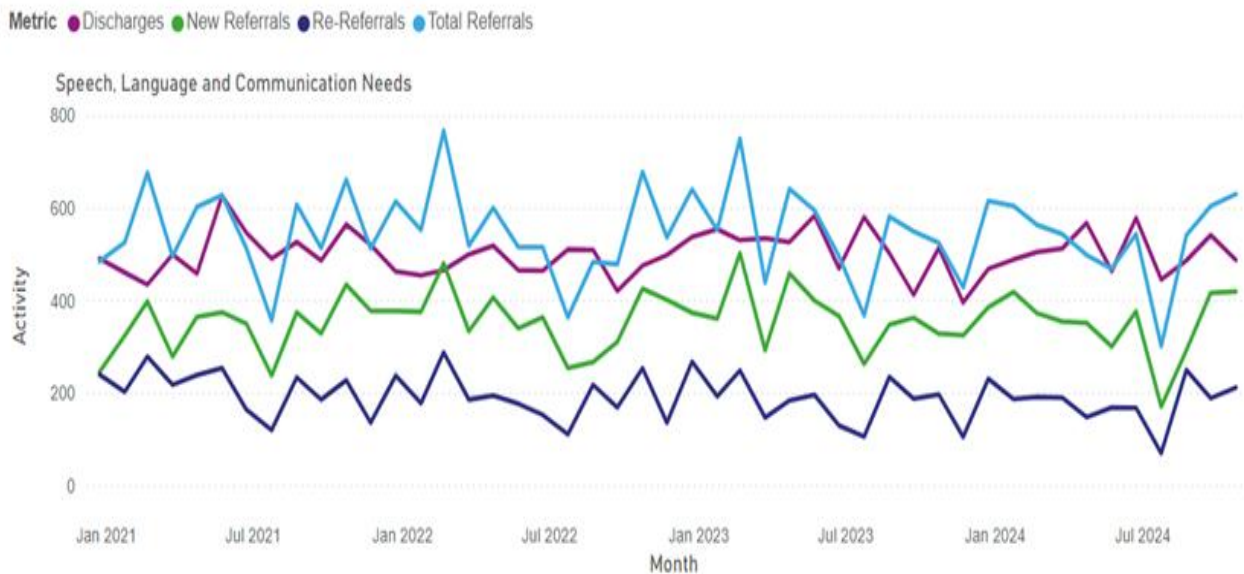
Month/ Year	Maximum waiting Time (weeks)	Average waiting time (weeks)	Actual maximum waiting time (weeks)	Actual average waiting time (weeks)
Jan 2024	125	66	124	68
Feb 2024	125	66	128	64
Mar 2024	125	66	125	61
Apr 2024	123	65	117	60
May 2024	121	63	123	58
Jun 2024	119	61	126	55
Jul 2024	117	59	121	54
Aug 2024	115	57	122	55
Sep 2024	113	55	121	54
Oct 2024	111	53	122	55
Nov 2024	109	51	126	55
Dec 2024	107	50	123	55
Jan 2025	105	48		
Feb 2025	103	46		
Mar 2025	101	44		
Apr 2025	99	42		
May 2025	97	41		
June 2025	95	40		

17. Currently, 279 children and young people have been waiting over 104 weeks for assessments. A plan is in place to reduce this number to approximately 50 children and young people waiting past 104 weeks by March 2025.

Therapies – Speech Language and Communication Needs (SLCN)

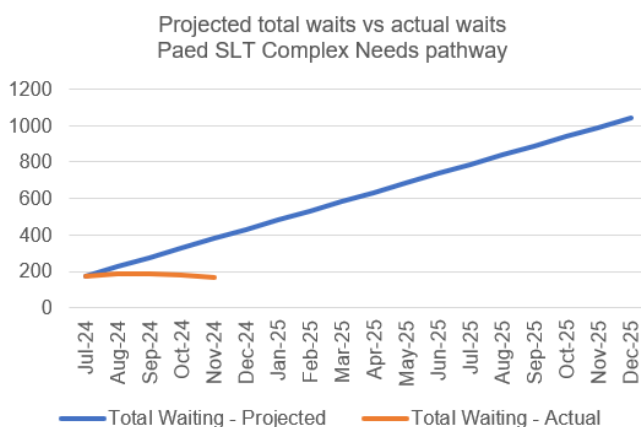
18. Demand continues to outstrip capacity within specialist SLCN services, with high rates of referrals and lower rates of discharge, meaning that caseloads are continuing to grow. **Graph 4** overleaf illustrates the rates of referrals against the rates of discharges showing the increasing demand on the service.

Graph 4 – Demand for SLCN services

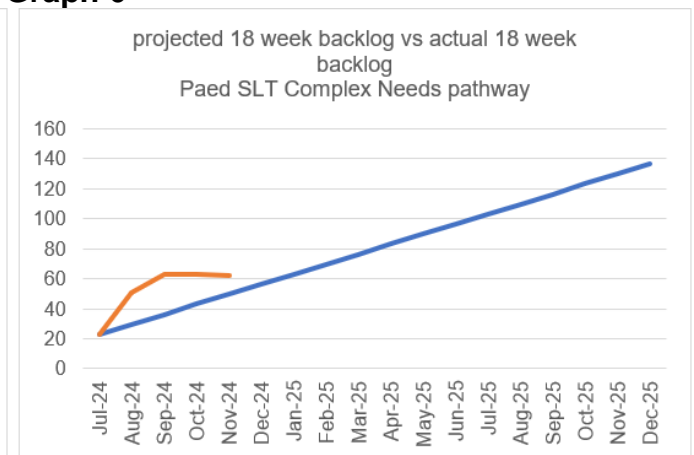


19. Interventions that have been put in place to date have demonstrated a reduction in the anticipated wait times and projections are showing a decline. **Graphs 5 – 10** show this information across the various SLCN pathways.
20. **Graphs 5 and 6** relate to the Paediatric Speech and Language Therapy Complex Needs pathway. **Graph 5** shows that the total number of children waiting is well below the trajectory. However, **Graph 6** shows that the numbers waiting over 18 weeks remained higher than projected. This is largely due to the impact of long-term sickness in the Dysphagia Service over the Summer.

Graph 5

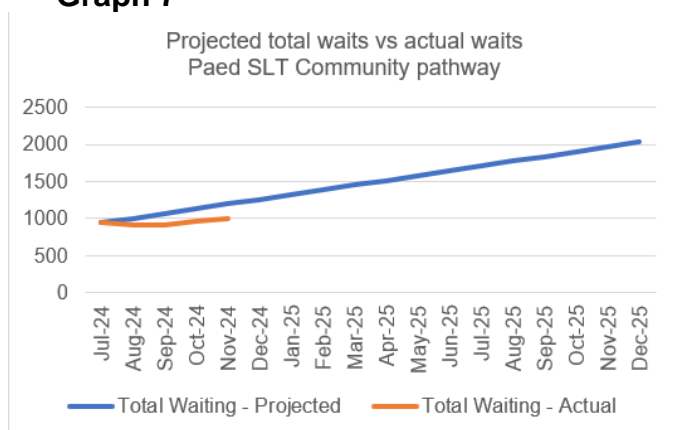


Graph 6

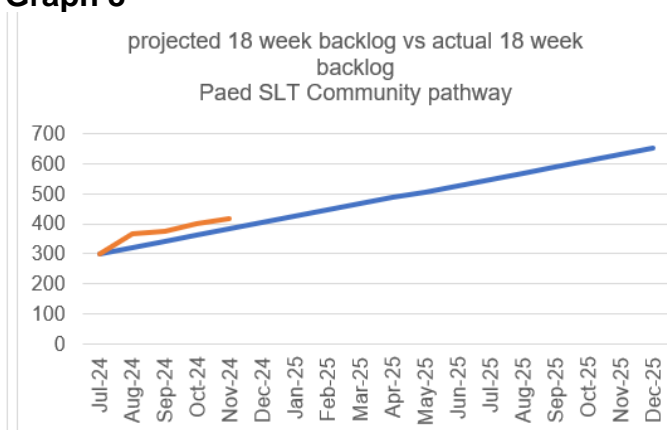


21. **Graphs 7 and 8** relate to the Paediatric Speech and Language Therapy Community pathway. **Graph 7** below show the total number of children waiting continued to be slightly lower than projected. However, **Graph 8** shows that the numbers of children waiting over 18 weeks continues to increase and is higher than projected. This is primarily due to increasing demand even though capacity has been increased.

Graph 7

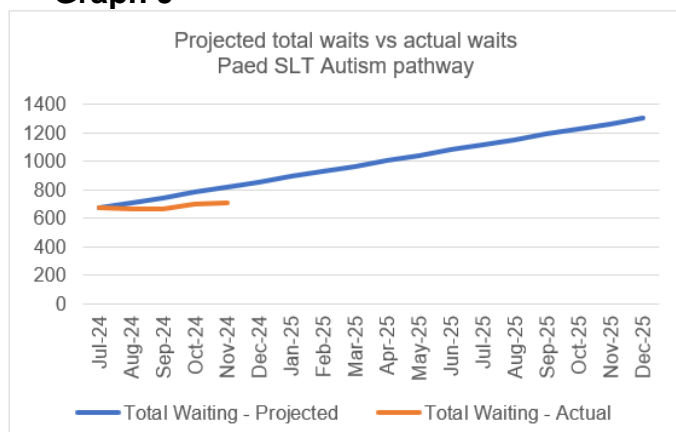


Graph 8

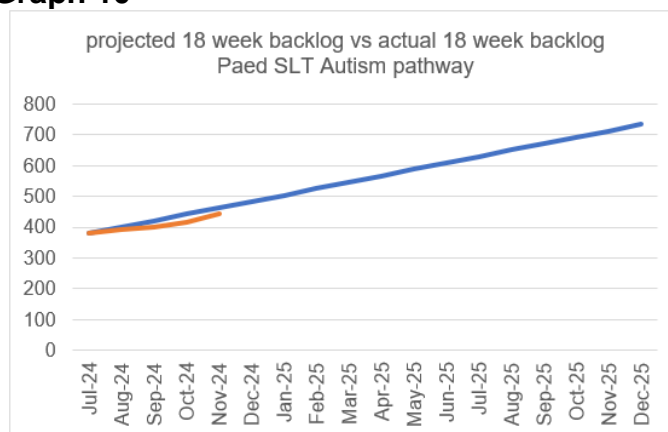


22. **Graphs 9 and 10** relate to the Paediatric Speech and Language Therapy Autism pathway. **Graph 9** shows that the total of children waiting remained slightly lower than projected. Likewise **Graph 10** shows that the number of children waiting over 18 weeks is slightly lower than projected. This demonstrates the impact the additional non-recurrent funding available to this pathway and the changes made to service delivery.

Graph 9



Graph 10



Local Area Partnership Progress since September 2024

APA 1 - Outcome 1: Children and young people with SEND in Nottinghamshire have their needs identified and assessed in a timely way through statutory processes

23. Performance and output have increased significantly. However, there is further work to do to manage the rising demand and to continue to strengthen service performance. Activities underway to address this include:
- Support from SEND sector-specialists, providing additional leadership around SEND improvement for a six-month period to review internal processes.
 - This work will include a full-service review of statutory SEND services seeking to embed a more strengths-based relational approach, with a greater focus on providing the right support at the right time for children. The review will work closely with other partners and stakeholders. It has been initiated through an EHC Assessment Service

process remodelling workshop held in December 2024. The outputs will be used to inform the vision of the future operating model.

- c. Improving understanding, public confidence and application of the 'graduated approach', primarily in education settings. Closer locality working is underway with inclusive practice district workshops scheduled to share best practice and agree principles for these groups.
- d. Ensuring that local authority decision-making as part of the EHCP process is more effective.

APA 1 - 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

24. Improvement activities are underway to strengthen relationships and understanding across partners who contribute to effective EHC Plan Annual Reviews. These include improvements to local quality assurance arrangements and especially the information provided for Annual Reviews by partners. It will involve:
 - a. Re-establishing a quality assurance multi-agency steering group to refresh our approach and progress in embedding the QA Education, Health and Care (EHC) Plan Framework across organisations.
 - b. Developing a 5-level plan to produce a mechanism that ensures all EHCPs meet the required standards, at operational, multiagency and strategic levels.
 - c. Embedding the learning from previous partnership audits, in addition to feedback from families about their experience of the annual review process.

APA 1 - Outcome 3: Children and young people with additional needs, but without an EHC Plan, have their needs identified, met, and monitored effectively

25. Children and young people receiving SEN support (but without an EHC Plan) account for around 80% of Nottinghamshire's overall SEN population. Children and young people in Nottinghamshire have been able to access additional support in educational settings (e.g. additional funding, input from specialist services) without the need for an EHC Plan, resulting in the local area having a lower number of EHC Plans relative to its population when compared with nationally.
26. There are now better shared systems to identify the SEN Support cohort of children and young people across the local area Partnership. SEN Support cohort descriptors and outcome data is now shared regularly through the SEND Monthly report and the Data Dashboard.
27. Following the school engagement events last Summer, the County Council during 2025 will work with school leaders in districts to develop the actions identified as part of the engagement events. This work will also include partners from health and social care.

APA 2 - Outcome 4: The needs of children and families with SEND are clearly understood so that immediate and long-term changes to health service provision can be made through effective joint commissioning

28. A system-wide Nottingham and Nottingham and Nottinghamshire SEND Joint Commissioning Strategy (2024-2027) has now been published, the annual delivery plan for which is fully aligned with the annual delivery plan for the Partnership's SEND Strategy.
29. Regular engagement sessions and working groups with families continue to be held to support the development of local pathways and service provision. Lived experience is being embedded within the SEND Data Dashboard and the Partnership has committed to co-produce services and service improvement within the SEND Joint Commissioning Strategy and the SEND Outcomes Strategy. Recommendations made by families and professionals within Nottinghamshire have shaped improvements within the neurodevelopmental pathway and SLCN service provision and has influenced changes to working practices within local Occupational Therapy Services.

APA 2 - Outcome 5: Children and young people receive timely assessment and treatment offer for assessment by the Neurodevelopmental Support Team (NST)

30. Activity since the last report to Select Committee has included:
 - Completion and distribution of a neurodevelopmental medical 'Red Flag' guidance document for professionals to ensure the appropriate pathway is identified and followed where priority medical concerns are identified.
 - Completion and distribution of a 'Right to Choose' guidance document to assist families in making informed decisions and navigating alternative assessment options effectively.
 - Drafting of a second opinion guidance document for professionals.
 - Minds of All Kinds neurodevelopmental website co-production group re-commenced with proposed launch of the site in Spring 2025.
 - Updates made to the 'Concerning Behaviour Pathway' now known as the [Neurodevelopmental Assessment Pathway Guidance](#)
31. Key priorities and implementation of the neurodevelopmental pathway review recommendations for 2024/25 include:
 - A review of demand & capacity within Community Paediatrics.
 - A review of threshold criteria and implementation of a revised online referral system within early support service NST.
 - An in-depth review of the neurodevelopmental services within Doncaster & Bassetlaw HealthCare Trust.
 - A review of the Tics & Tourette's service for children and young people.
 - A review of pre- and post-diagnostic support across neurodevelopmental services.
 - Implement awareness campaigns within the community to inform families, educators and healthcare providers about early signs of neurodevelopmental concerns and the pathway process.
32. Improvements continue to be made to communications with children, young people and families who are waiting. Information detailing support for families is now sent at the point of referral receipt, and via monthly newsletters.

APA 2 - Outcome 6: Children, young people and families with SEND experience services that are easy to navigate, free from duplication and are adaptive to their needs

33. Options for the redesign of Local SLCN service provision are under review by strategic commissioning leads, with aims to reduce referrals to specialist services (and therefore wait times to access provision) and enhance the experiences of children, young people and their families. Due to complexities and practicalities of this work, it is likely to be toward the end of the 2025/26 financial year before a jointly commissioned pathway can be fully designed, negotiated, agreed across partners and implemented. Additional capacity and the implementation of improvement measures have helped cut waiting times despite continued high demand.
34. Drop-in sessions at Family Hubs and an advice line (contacted over 200 times between October and December 2024) provide interim support for families waiting to access specialist support.
35. A sensory processing support pathway is being scoped by strategic commissioning leads, with a school support pilot live within 40 schools. This has an aim to create sensory-friendly environments and upskill education staff to understand sensory processing difficulties within an education setting.
36. An Integrated Care System (ICS) wide Occupational Therapy Professionals Network has been established and is working collaboratively in line with both the SEND Joint Commissioning Strategy and feedback from families and professionals to reduce duplication of contact with families, through the development of a digital interoperability platform that will support in the sharing of assessments, diagnoses, care plans and progress between the multiple OT teams supporting families in Nottinghamshire.
37. An ICS Health Transitions Network has been established, bringing together colleagues from paediatric and adult services to work collaboratively to provide a smooth and positive transitions process for local young people in Nottingham and Nottinghamshire. Young people with recent experience of transitioning have been invited to support the Network in implementing improvements that will have real-life impact.
38. Additional sleep practitioners have been recruited to community paediatric services to support the de-medicalisation of sleep difficulties in neurodivergent children and young people and to reduce the use of melatonin as a first-line intervention.

Leadership & Strategic Development

39. The Nottinghamshire SEND Local Area Partnership completed an updated [SEND self-evaluation framework \(SEF\)](#), which was shared with Ofsted and CQC at the Annual Engagement Meeting. The SEF outlines the local area's current strengths and areas for development as part of a continuous cycle of monitoring improvements and seeking assurances, when meeting the needs of our children and young people with SEND.
40. The local area Partnership is expected to receive a Monitoring Inspection by Ofsted and CQC in the Summer term.

Other Options Considered

41. No other options have been considered.

Reason for Recommendation/s

42. The local area Partnership is committed to improving the experiences and outcomes of children and young people with SEND and will continue to focus on implementing the improvement plan and wider improvement arrangements moving forwards.

Statutory and Policy Implications

43. This report has been compiled after consideration of implications in respect of crime and disorder, data protection and information governance finance, human resources, human rights, the NHS Constitution (public health services), the public sector equality duty, safeguarding of children and adults at risk, service users, smarter working, sustainability, and the environment and where such implications are material they are described below. Appropriate consultation has been undertaken and advice sought on these issues as required.

Financial Implications

44. Local authority costs associated with the improvement programme and associated partnership governance arrangements have been subject to the relevant approvals in line with financial regulations.

RECOMMENDATIONS

That the Children and Families Select Committee:

- 1) considers and comments on the content of the report in relation to progress with the required improvements.
- 2) agrees to receive a further update on progress on SEND improvement activity in July 2025.

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Executive Director, Children and Families

Rosa Waddingham
Director of Nursing, Nottingham and Nottinghamshire Integrated Care Board

For any enquiries about this report please contact:

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Constitutional Comments (03/03/25)

45. This report falls within the remit of the Children and Families Select Committee for consideration under Section 6, Part 1, paragraph 4(a) of the Council's Constitution at p.91.

Financial Comments (SS 03/03/25)

46. Local authority costs associated with the improvement programme and associated partnership governance arrangements have been subject to the relevant approvals in line with financial regulations.

Background Papers and Published Documents

Except for previously published documents, which will be available elsewhere, the documents listed here will be available for inspection in accordance with Section 100D of the Local Government Act 1972.

[Partnership progress in improving the experiences and outcomes for children and young people with Special Educational Needs and Disabilities – update: report to Children and Families Select Committee on 2 December 2024](#)

[Nottinghamshire Local Area Special Educational Needs and Disabilities Strategy \(2024-2027\) – report to Cabinet on 25 July 2024](#)

Electoral Division(s) and Member(s) Affected

All.

CFS0035