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THE BIRMINGHAM SEF SPRING 2024

SPECIAL EDUCATIONAL NEEDS
AND DISABILITIES (SEND) &
ALTERNATIVE PROVISION (AP)
SELF EVALUATION FRAMEWORK

Birmingham **SEND** Local Area Partnership



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FOREWORD & VISION

We are delighted to introduce the Birmingham local area partnership SEND and Alternative Provision Self Evaluation Framework (the SEF). Our partnership commitment and vision is to ensure every one of our children who has additional needs receives the support they need to reach their full potential and thrive. This SEF has been co-produced and developed with insight, support, and challenge from all our stakeholders. We have listened carefully to the feedback and lived experiences of those we support, and we have used this feedback to shape the priorities and objectives that will deliver better outcomes and impact for our children and young people. We are clear that we must consider their personal ambitions and aspirations so we can co-produce and deliver the support which allows them to fulfil those ambitions in adult life.

We know from previous inspection outcomes and our self-evaluation that we have several areas we can improve upon to provide consistently high-quality services in the right place and at the right time for our children. Our partnership is continuing to mature and work more effectively together to deliver the vision that our children and young people of Birmingham thrive.

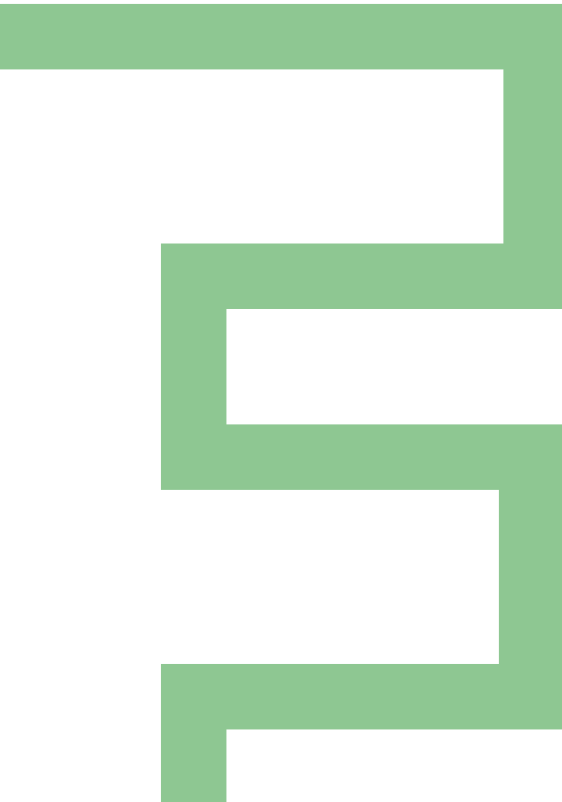


INTRODUCTION

Many children and young people with SEND in Birmingham have positive experiences and outcomes. However, we know that there is more to be done to ensure that all children, young people and families have confidence that SEND will be appropriately assessed, and identified, with needs met so children can thrive. The pace of improvement and embedding of effective practice has accelerated in the last eighteen months to two years. The decision in February 2024, by DfE and NHS England advisers, that the local area had made sufficient progress with the area of significant weakness pertaining to strategic leadership, confirms that the partnership are relentless in their commitment to ensuring every Birmingham child and young person with SEND gets every opportunity to achieve, progress and make their ambitions a reality. We will achieve this by empowering children, young people and families to influence the provision and support they require, remain visible and make a valuable contribution in their communities.

This document outlines the Birmingham Local Area Partnership self-evaluation. We are reflective of how and where our work is delivering positive experiences and outcomes for our children and young people with SEND. We are also clear that we have more work to do to ensure our children and families feel valued, visible and included in their communities.

Our self-evaluation has been co-produced between Birmingham City Council, the Integrated Care Board, Birmingham Children's Trust, and health delivery partners. We engaged and received the views of all education settings and those of the Birmingham Parent Carer Forum. (Self-evaluation surveys were sent to all education settings and health partners/providers.) We added a page providing information about the self-evaluation to the Local Offer Website and publicised this widely through the Birmingham Parent Carer Forum and other parent carer networks and forums. An email address was set up specifically to allow parents to give direct feedback or complete a self-evaluation survey. A number of meetings and focus groups have taken place with parent carers from across the city. Focus groups of Children and Young People (CYP) have taken place in schools as well as directly with the "YES" and "RISE" groups of our children and young people.



The local area had a SEND inspection in 2018 which resulted in a Written Statement of Action. Following a revisit in 2021 which found insufficient progress had been made on 12/13 areas of significant weakness, on 15th October 2021, the Minister wrote to inform Birmingham City Council that John Coughlan was their appointed representative under Statutory Direction to 'direct' Birmingham in how the local area must improve. In response, BCC developed the Accelerated Progress Plan (APP) to address the remaining 12 areas of significant weakness and commenced a period of transformation to improve the support and outcomes for those with SEND in Birmingham. The delivery of the APP is overseen by the SEND and AP Improvement Board chaired by the DfE appointed SEND Commissioner.

The local area partnership is continuing to work to improve the structures and ways of working that were lacking in Birmingham. We continue to enhance and implement the systems, processes and commitments so we listen to our children, young people, their families, and services to inform service design for the future. Our ambition is to ensure we provide a clear pathway for our children and young people to thrive, giving them the support that allows them to work towards their own ambitions and a settled, independent adulthood.

After the most recent stocktake of the APP, we received written confirmation (in February 2024) of the positive progress that has been achieved. We were particularly pleased to learn that we were able to demonstrate sufficient progress in addressing one of the areas of significant weaknesses identified at the initial inspection: 'The initial inspection found that there was a lack of an overarching approach or joined-up strategy for improving provision and outcomes for children and young

people with special educational needs and/or disabilities (SEND)'. This means that we will no longer be formally monitored in this area and is testament to the hard work colleagues across the local area partnership are undertaking to ensure we deliver continual change and improvement for our children and their families.

We have significantly improved our data collection and reporting which has allowed us to identify priority areas of need. As a result of much clearer and stronger leadership, the relationships between professionals have improved across all services through collaborative, multi-agency working, and we are delivering better impacts and outcomes for our children and their families.

Examples of the achievements we have delivered to date are covered in detail in the sections below. Examples of how we have improved include:

1. Recruited permanent, local, additional capacity into the Special Educational Needs and Review (SENAR) service to improve the experiences of families when navigating EHCP processes including assessment and review.
2. Within all settings and services across Birmingham there are many examples of strong and innovative practice, delivered by dedicated, skilled and highly qualified practitioners who are making a positive difference to our children and young people with SEND and their families.

"I had the privilege of working with an exceptional member of your team who made the process although somewhat overwhelming so much easier to understand."

“Carry on being the professional positive person you are as you will be a good credit to SENAR. Have an amazing weekend and you really have made mine and B’s.”

3. We are working to create an inclusive culture across the city, for example creating an Inclusive City Sub Group, and the implementation of the ordinarily available guidance.

‘If only there had been something like this when my son was at school ... if I had known what his school could offer then I probably wouldn’t have gone for an EHCP!’ Quote from a parent of a young adult with autism.

4. We are continuing to cultivate quality systems which ensure we know where we need to focus to improve delivery, whilst at the same time listening to those we serve, and adapting approaches which meet their needs via co-production.

‘The co-production of today’s Calthorpe trip was invaluable for our young people to engage and feel safe to take the risks within a new environment and learn.’ Virtual school staff member.

5. Much better inter-agency working and engagement with families across the local area.

“The transition from nursery to reception this time last year was excellent.... HST... have delivered awareness training to the reception teachers and TAs” “ ...(MPs) fantastic to ensure the pupil has the correct level of provision in place.”

“I found today really interesting as a lot of what was said I could really relate to and made me feel I’m not alone with it all I like the fact I can get a better understanding as well on how I can help my children”

We know that we need to be more consistent with our delivery across our local area partnership. We also know that we need to improve and embed consistent quality with what, where and how we are delivering. Examples of where we know we need to improve include:

1. We know from our children and young people and their parents and carers is that their experience can sometimes be characterised by services which are disjointed, lack consistency and can be ‘service’ rather than ‘person’ led. Waiting times for assessment remains an issue in some service areas.

“We want the basics in place and the statutory rules met. The school said they wouldn’t put in place any EP suggestions because they legally didn’t have to without an EHCP.”

2. The attainment of our children with additional needs compared to their peers.

“I have aspirations for my son. I just want to feel that someone else believes in him.”

3. Our delivery of Alternative Provision that students wish to engage with, so we reduce absence rates.

4. A consistent graduated approach and a balanced education system which draws in expertise to build capacity that will ensure better outcomes for our children and young people with additional needs. This includes reducing suspensions and exclusions.

“My child school refuses due to sensory overload, there are no quiet spaces for my child, so we are stuck at home without him having an education.”

5. The sufficiency of the right places at the right time in the right locations for our children and young people with additional needs.

These examples can lead to frustration, anxiety and ultimately poorer outcomes for our children and young people with SEND, their families, and the partnership, aspire to. System leaders are rising to the challenge of ensuring effective practice is system wide and leading to consistently good experiences and outcomes for our children, young people and their families. We will continue to drive improvement so that the effective practice for some becomes the expectation and experience of the many.



WE HAVE IDENTIFIED 11 KEY PRIORITIES OF WHICH 8 WERE OUTLINED IN OUR SEND STRATEGY

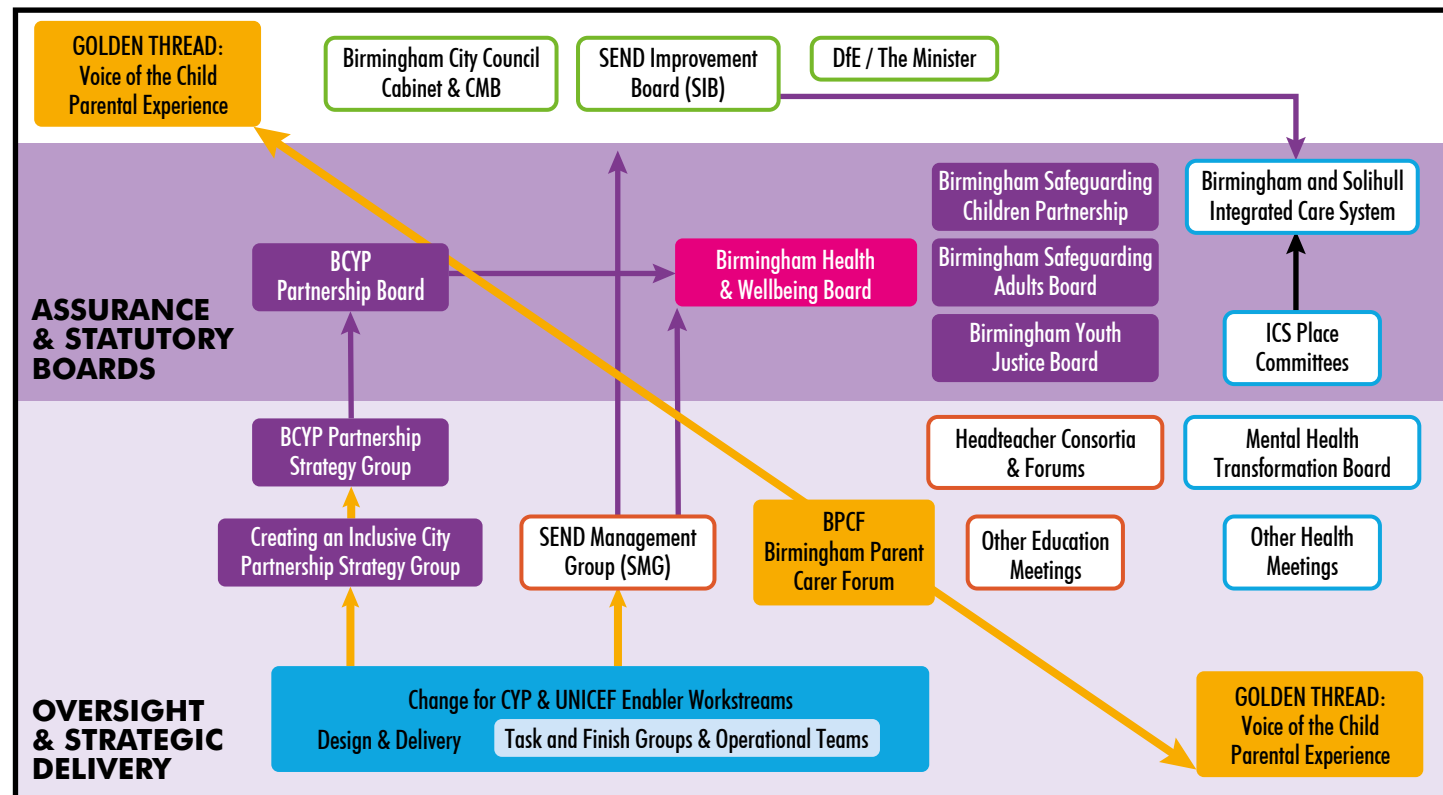
Key priorities for the next 12 months:

No.	Title	Description
1	Early identification	Effective early identification of needs, with appropriate and timely assessments across Education, Health and Care.
2	Graduated approach	Collaborative, graduated approach delivered consistently across the city, ensuring the right support and provision are in place as soon as possible to meet need.
3	Transitions	Smooth transition across Education, Health and Care at every stage of a young person's life, particularly the transition to adult life.
4	Education review	A comprehensive review of the provision in education settings across Birmingham to deliver an offer which is aligned with national and regional best practice.
5	Localities	Locality-based model of provision, right support, right place, right time with improved access to provision which meets the needs of our children and young people in line with the Children and Families Act 2014 and SEND Code of Practice.
6	Communication	Excellent communication and engagement between our children, young people, their families, Education, Health and Care services, including schools.
7	SEND Partnership Team	A resilient, skilled and sustained SEND Partnership team that delivers impact and positive outcomes for all our children and young people who have additional needs.
8	Data	Improved collection, publication and analysis of data to inform the Birmingham SEND priorities in supporting our children and young people in the future.
9	Safeguarding	Embed actions following the National Review - Children with disabilities and complex health needs living in residential settings.
10	Preparation for Adulthood	Improve preparations for adulthood pathways across education, health and social care; embedding practice that ensures the aspirations of our children and young people are considered at the earliest stages, reflect the voice of the child, and secure appropriate pathways to achieving their ambitions.
11	Early Years	Improve oversight of contextual safeguarding issues that may relate to some of our children and young people who are electively home educated, receiving education within Alternative Provisions and those on part-time timetables.

Governance

There is collective commitment to deliver the right support which our children, young people and their families receive in the right place and at the right time.

Our governance model is illustrated below, shows the inter-agency working and the interdependencies between the different decision-making bodies. There continues to be a significant amount of collaborative working within the 'Design and Delivery' element(s).



The local area partnership (the LAP) is committed to every child being connected, confident, included, healthy, happy, safe and respected.

There is much to celebrate in Birmingham. We now benefit from a number of our services being judged good or excellent by national inspectors and delivering good outcomes for our SEND children and young people and those that use alternative provision, when compared to national benchmarks.

The Care Quality Commission (CQC), published a report in November 2023, indicating that Birmingham City Council is ensuring people have access to a good standard of adult social care and support, including 18-25 year olds with learning or physical disabilities.

The Children's Trust has been awarded an Ofsted "Good" of which the Children with Disabilities Team has been acknowledged as a strength.

4 of our in-house overnight short break provisions (Charles House, Warwick House, Edgewood Road and Bridgelands) which are operated by the Children's Trust are rated "Good" by Ofsted.

Birmingham at a Glance

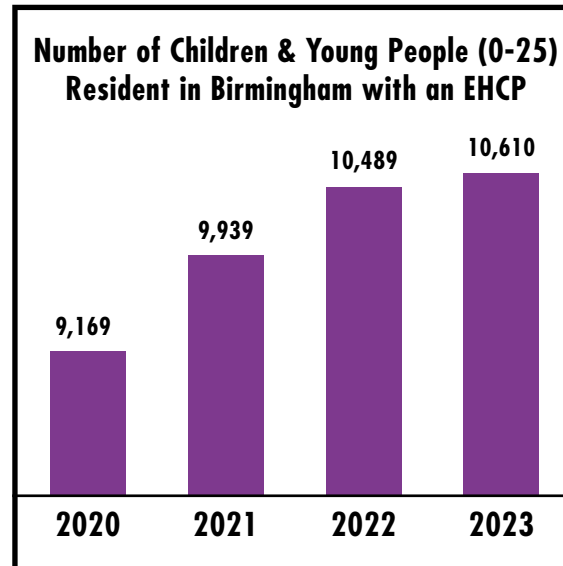
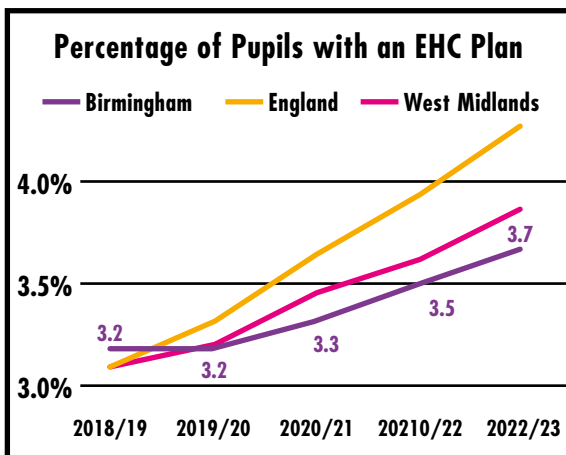
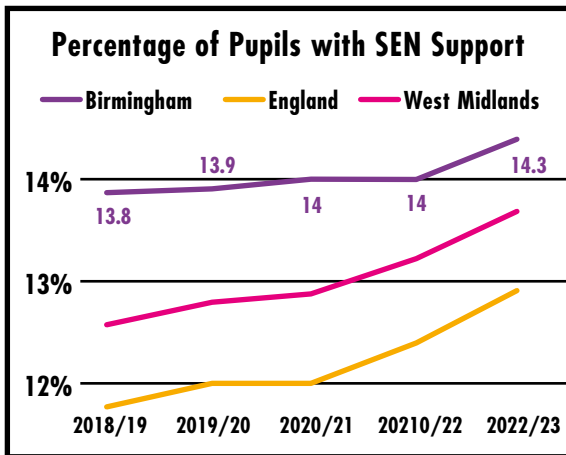
We know our children and young people

We have improved our data recording and analysis. We know our children, their needs, the significant challenges, and have plans to support more effectively. Some headlines are covered below, and we have full data suites available.

We have a total population of 207,175 children and young people educated in Birmingham schools. 51% are male and 49% are female.

70% of our school age children are BAME (compared to 28% nationally) and 38% are eligible for Free School meals (compared to 24% nationally). Boys significantly outnumber girls in terms of needs in both the EHCP and SEN Support cohorts.

In line with the national picture, we have had an increasing number of EHCPs being maintained year on year. However, we remain slightly below the national average for the percentage of the cohort with an EHCP. The national date return/figures for Birmingham shows the below volumes (from our SEN2 return in 2023). These are the figures for those who are the responsibility of Birmingham, resident of the city.



Our SEN Support numbers are also increasing at a similar rate. The graphs below are taken from our Census data, which reflects those educated in Birmingham schools, not necessarily Birmingham residents.

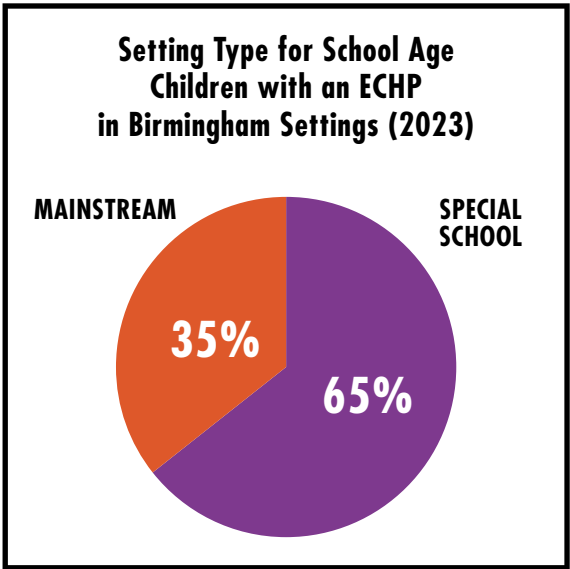
In the 2022/23 (academic year), a total of 30,432 pupils were recognised to be receiving SEN Support.

In proportion to the school census population, this equates to 14.3% of pupils receiving SEN Support which is in line with previous years trend and remains above both the England (12.9%) and West Midlands (13.7%) average for 2022/23.

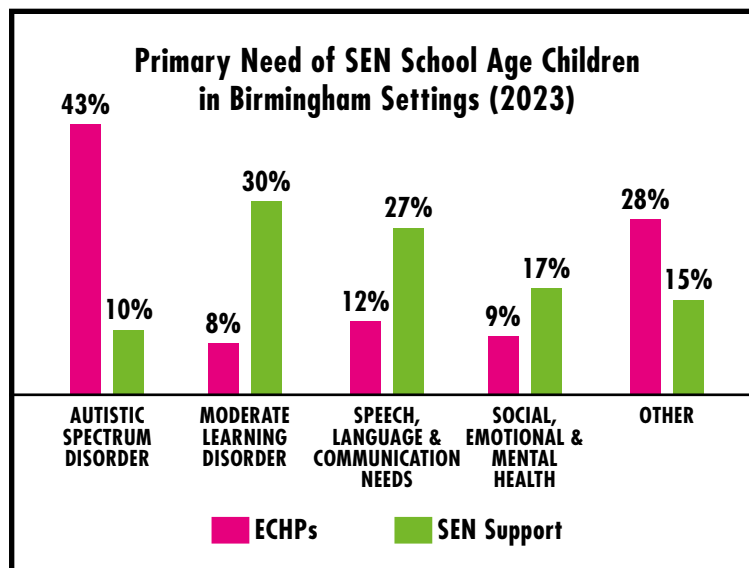
3.7% of the school census pupil population have an EHC Plan. The percentage of pupils with EHC plans in Birmingham continues to increase from 2018/19, however, the rise in those on an EHC plan in Birmingham (from 3.2% in 2018/19 to 3.7% in 2022/23) is less drastic than the England average (from 3.1% in 2018/19 to 4.7% in 2022/23).



We have significantly more CYP with an EHCP educated in specialist provision compared to the national average (and our statistical neighbours). Many of these CYP could and should be educated in mainstream settings, sometimes with enhanced provision via a resource base. We are working across the whole of the Local Area SEND Partnership to improve capacity in mainstream and resource bases whilst ensuring that the most vulnerable and those with highest need have access to places in specialist provision. The below chart shows the broad picture of those with an EHCP.



Demand for SEND services has outstripped provision. With the increasing numbers, our focus is on improving the breadth of provision in the city to meet the changing needs and aspirations of our children and young people. We continue to build a more effective and consistent graduated approach, building capacity within mainstream, resource base and specialist education settings. We are responding by building and commissioning more resource base and specialist places and developing mainstream inclusive practice so more of our children can be effectively educated in their local community alongside their peers.

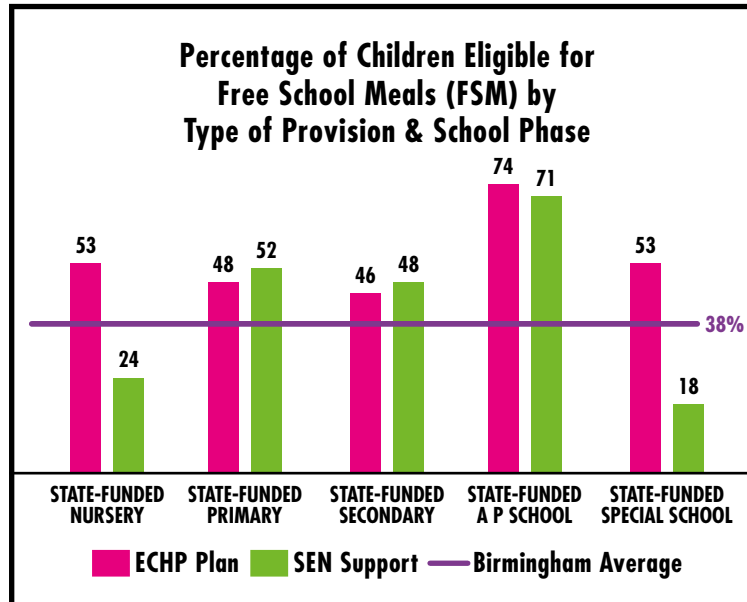


At SEN Support Speech, Language and Communication needs, Moderate Learning Difficulty (MLD) and Social, Emotional and Mental Health are the most common needs identified. For those with an EHCP, autism is the highest presenting need and more of our autistic learners will need to be supported in mainstream with only our most complex autistic pupils being educated in special schools.

We need more of our mainstream schools to accommodate the needs for all those pupils, other than those with the most complex and profound needs, who need to be supported in our commissioned specialist provision. This will allow us to manage the increasing demand for speech, language and communication support, moderate learning difficulty and social emotional and mental health.

We also know that those with additional needs do not perform well compared to their peers. The difference (gap) is simply too great for progress and attainment, attendance and suspensions/exclusions. Greater insight is provided from page 32.

For our SEND and AP children, the link to low income mirrors the situation nationally, and 71% of AP pupils live in relative deprivation, as do over half of pupils in our Special Schools. We also find our children in care and those in alternative provision have a high prevalence of SEND needs.



We know that many CYP are waiting too long for assessment and for intervention in the health system. The waits for diagnostic assessment for autism, ADHD and waits to access mental health services and some community therapies are lengthy. The experience of waiting can negatively impact the wellbeing of the CYP, their parent-carers as well as their experience and attainment in school. The ICB consistently publishes waiting times for services and has recently established a 'Support Whilst Waiting' webpage on the ICB website, linked to the Birmingham SEND Local Offer. This webpage has monthly updates of waiting times across relevant health services and signposts to resources of support to families whilst waiting.



POSITIVE IMPACT OF THE LOCAL AREA PARTNERSHIP'S SEND ARRANGEMENTS ON THE EXPERIENCES AND OUTCOMES OF CHILDREN AND YOUNG PEOPLE WITH SEND

Children and young people's needs are identified accurately and assessed in a timely and effective way.

Positive signs

We have several different and complementary initiatives that deliver accurate and effective assessment of needs as early as possible.

These include:


Steps and supports all families across Birmingham with our children up to the age of 5, providing support in different localities via the Children's Centres. The Health Visitors and Assistant Practitioners work alongside family support workers and early years outreach workers to give specific SEND support to individual families.

KIDS UK run groups in each district which are aimed at our children with SEND with the aim to help families through the

early identification of additional needs. These groups liaise with our Early Support Service to ensure a coordinated approach.

Young people aged 14 or over with a learning disability are entitled to a free NHS health check every year with their GP. Uptake of 14 + Health Checks has improved significantly from 49% in 2018-10 to 79.3% in 2022-23 which is above the national target of 75%.

The **Strengths and Difficulties Questionnaire (SDQ)** is a behavioural screening questionnaire for 2–17-year-olds that measures psychological and behavioural problems. The outcome from the SDQ is being captured onto Birmingham Children in Care Personal Education Plans (PEP). From September 2024 the virtual school will be ensuring that where a score is reported as borderline or abnormal, that there are agreed targets and interventions within the PEP to support the child's SEMH progress.



The Birmingham Early Years Speech, Language and Communication (SLC) – **WellComm Project** supports a consistent universal approach to assessing, identifying and supporting our children’s speech, language and communication needs. Birmingham City Council is funding the WellComm Toolkit for all schools, nurseries, pre-schools, and childminders registered to offer Early Education Entitlement (EEE) places.

In partnership with Speech and Language UK, a cohort of PVI providers are funded for Early Talk interventions with two and three-year olds. This has had significant impact with those on free school meals (and with SEND), moving expected level of development from 0% to 33%. The positive impact evidenced during the pilot will continue a whole system rollout across the Family Hubs and early years sector during the 2024/25 academic year.

Our specialist BCC teaching teams (Pupil and School Support Service (PSS), Communication and Autism team (CAT), Sensory Support and Physical Disability (SSPD) are working jointly in mainstream schools with locality SEND Speech and Language Therapy and Occupational Therapy teams (our therapy teams are jointly commissioned.) The collaborative approach is improving early identification of need and providing appropriate interventions before a formal assessment. This provides immediate support to SENCOs with managing communication and sensory needs, building capacity in settings. The PSS and the CAT teams also support the Early Help district drop-ins to aid with SEND specific questions.

Multi-agency planning meetings with the SALT / OTs are offered to all mainstream schools on a regular basis. These meetings are used to discuss key strategic actions and individual pupil cases where more than one agency needs to support a child.

This approach ensures that our children and families experience coordinated intervention and support across the network, preventing the need to repeat their story more than once or feeling overwhelmed.

Assessments of need and sharing of knowledge has improved, leading to better recommendations to deliver the right support to the child or young person. The collaboration has also created new and improved techniques and expertise to support our children and young people, thus improving outcomes. Teams are better informed about needs, assessments are more accurate and effective, and the quality of the interventions provided have improved. More children and young people are being seen in a timely way and staff in education settings have greater clarity on the evidence-based approaches they can deliver, and when. We continue to work towards making this consistent and embedded across the whole system but know we still need to improve in some areas/settings.

A link SALT has been allocated to mainstream nursery schools providing support around SLCN. Trainers in Early Talk Boost are delivering a targeted programme aimed at our 3- to 4-year-old children who need help with talking and understanding words, helping to boost their language skills to narrow the gap between them and their peers. The programme aims to accelerate the progress of our children in language and communication by an average of 6 months after 9 weeks.

91% of 412 schools in Birmingham have a Link Speech and Language Therapist allocated to them. Our children, young people and their families are being seen more quickly. Families feeling empowered and confident to support their children.

“I’ve been doing mirror play and now he pulls me to the floor”

"I love that he doesn't have to miss loads of school for appointments". - Parent

"It's so good that you can show me what to do".
- Teaching Assistant

Feedback from training delivered to schools:

'The session was very informative! I thought the key definitions matching activity was very useful and I have learnt a lot from the session'

'The training session was very informative and included many useful tips that could be implemented by teachers in their day-to-day practice straight away. I was blown away by some facts and statistics, which were a real eye opener!'

The Birmingham health SEND team offers Sensory Circuit training to all mainstream schools across Birmingham, along with Early Years settings. Since September 2023, 47 Early Years settings, 71 Primary schools, and 25 secondary schools have been trained.

"This training has been effective in helping me to identify the children who would benefit from Sensory Circuits support and which areas specific children would need to focus on in order to best support them"

"I just wanted to feed back that the training was very inspiring. I feel excited and motivated to implement this in our school and it will have a significant impact on a lot of children. The pack has lots more support in it than I thought it would, so thank you?"

"It helped the child settle in the morning, I also found out it helps some kids in year 6 especially when they are anxious about a test to be calm"

The Developing Local Provision (DLP) project is aimed at enabling settings to work together in localities to identify needs early; provide resources for our children with SEND to access effective provision more easily; and to support early intervention to improve outcomes.

Phase 2 of Early Years DLP commenced in January 2024 with priority outcomes informed by local and national data. The Key Performance Indicators focus on increasing the uptake of early education entitlement, increasing the % of our children achieving a Good Level of Development at the end of the EYFS and successful transition into Reception. The work builds on Phase 1, where the engagement of all types of providers was prioritised along with a professional development programme consisting of training and outreach work. This included delivery of the Level 3 National SENCo award, led by the Early Years Area SENCo team and supported by nursery school SENCos who achieved trainer status. 92 participants out of the 100 enrolled achieved the qualification.

The EHC needs assessment process has improved as a result of significant changes to our processes, captured in standard operating procedures agreed across the partnership. Joint working with health and social care partners has improved and there are improved processes for contributing to EHCPs. As a result, the quality of advice received is developing in its consistency with greater quality assurance checks. Birmingham Children's Trust have established a weekly meeting with The Special Educational Needs Assessment and Review Service (SENAR) to address any issues relating to the quality or timeliness of EHCP's. Information shared at this meeting is helping improve practitioner understanding of SEN processes across the Trust.

Performance has improved. The number of plans completed in the 20-week time scale has increased over time and is now consistently above national averages: the rolling (annual) average was 55% in March 2024, comfortably above the national average of 49%. Where we have been unable to deliver the EHCP within 20 weeks, the two main factors have been:

- i) advice not received on time from EPs and other professionals
- OR; insufficient places in the right settings and so we were unable to name a placement for the child or young person.

The work of the multi-agency SEND panel, which makes decisions about whether to assess, issue, amend, or cease to maintain Education Health and Care Plans (EHCPs), is increasingly robust. Around 90% of decisions to assess for an EHCP progress to a decision to issue and EHCP and less than 20% of decisions not to assess are overturned via mediation or appeal. This indicates improved accuracy and better communication of the decisions made at the SEND panel.

There has been a significant improvement in the completion of annual reviews from 4% in April 2021 to 83% in December 2023. The impact of these improvements is that there is greater clarity for more children and young people about what up to date support they need throughout their educational journey. This is also reflected in increasingly positive feedback from parents, carers, our children, young people and settings regarding annual reviews, and a reduction in the number of complaints.


“I just wanted to take the time to write and say a big thank-you for taking all the time you did last Wednesday to inform me and reassure me about my daughter’s future college application. I appreciated that you listened to my worries and gave me some useful information I know it’s easy for people to complain about services, but I believe it’s just as vital to offer

thanks and praise when appropriate. Thanks so much again.
C” – Parent after annual review

The Education Psychology Service annual school survey 22-23 confirms that the service remains a well-regarded front-line specialist service in high demand: with 90% of Local Authority, Special and Free Schools in the city purchasing traded services to support with the early identification of our children and young people’s needs for learning and wellbeing through consultation, assessment, intervention and training.

BCT has implemented effective practice guidance across all of its services for the EHCNA process. This includes a detailed response to families whose child is “not known” to BCT and is not in receipt of statutory services. Families are contacted directly by phone by the team and their social care needs discussed for inclusion in the advice. In addition, they are then signposted to other services that may be appropriate or to our short break local offer: the telephone call is followed up with a letter to parents. This same process is now being introduced as part of EHCP Reviews, where the child is ‘not known’ to BCT and not in receipt of statutory services.

SEND and EHCP process training takes place across NHS trusts and services to enable staff to have greater awareness of process and ensure good quality health advice and information is provided. Oliver McGowan Mandatory Training is also being rolled out nationally throughout all services. The approach of using experts speaking about their first-hand experience of living with a learning disability and/or being autistic has been very well received by the Birmingham Women’s and Children’s NHS Foundation Trust. Feedback that the training delivered by a trio including a person who has a learning disability, and an autistic person, is extremely valuable.



Birmingham Community Healthcare (BCHC) community teams always provide a holistic assessment of all our children referred to the services and individualised care plans are provided and shared. Documentation from the partnership (EHCAR) is shared with Health and final EHCPs uploaded onto community Health records, which helps clinicians to understand the CYP holistically. Parents/carers, CYP are involved within the assessment process and the voice of the child is very much at the center of the care delivery.

Hospital passports are utilised to help articulate need and the reasonable adjustments required when in a healthcare setting. The BWC Learning Disability and Autism (LDA) team are working with BSOL colleagues under LDA Programme to improve consistency and use of the hospital passport. The use of hospital passports was audited Q4 2022-2023 and re-audited Q2 2023-2024.

Reasonable adjustments care plans are created by the LDA liaison team. LDA Link Workers are established across the Birmingham Children's Hospital (BCH) site to support with improving awareness and meeting the needs of CYP with LDA. BCH LDA team have effective relationships with partners which support discharge planning for our children with complex needs. BCH complex patient guidance details requirements for multi-agency working escalation process and safe discharge arrangements.

Spotlight on practice

Our 'EHCP Task and Finish Group' has full partnership representation and local leaders take responsibility for embedding the QA processes at each point of the assessment journey and with annual reviews. Our audits are telling us that:

- i) New plans being produced are of better quality than those previously delivered.
- ii) That plans amended after Annual Review remain (on average) less than good.
- iii) We need to focus on training for how we conduct and record the annual review with schools and settings.

"Hello, I've just read the draft EHPC. It's great thank you. I'm happy ... and it brought tears to my eyes that he will be getting the support he needs thank you." - Parent.

Auditing has helped improve communication and information sharing, contributing to a growing understanding across BCC, BCT, Health and schools and settings of the role each needs to play and how we can engage with parents, carers, our children and young people to ensure that their voices are represented in EHCPs.

Collaborative work has happened between Health, BCT and SENAR/BCC colleagues to refine how assessments are undertaken. Health colleagues have their own QA system in place with internal quality audits of advice before submitted to SENAR as well as 6 monthly audits over the whole health system led by the DCO/ DMO team. Quality assurance is undertaken for the health sections of all new EHCPs by the DCO and DMOs. In addition, thematic audits are led by the SENAR quality and improvement team on a monthly basis in relation to emerging themes so that improvement work can be targeted at the appropriate part of the SEND system.

A number of local services (including the **Early Support Service**, Sensory Support and Physical Disabilities Service and Home Bridging Team) provide welcome calls to newly referred



families giving them the opportunity to provide additional referral information and understand the service pathway.

“Had an unexpected but really lovely welcome call from the service. I hadn’t anticipated that anyone would be in touch before the new year, despite knowing that the referrals for my twins had been sent, so it was really nice to have someone just check in to provide some basic information about the service and ascertain some details about myself and the boys.”

Areas of focus

We are developing and continuing to improve our service delivery in a number of ways to ensure effective assessment of need and ensuring our children and young people are accessing the right support at the right time for them.

An area of partnership focus is the effectiveness of partnership working to support those young people with Learning Disability and / or Autism (LDA) at risk of a hospital admission due to escalating mental ill health. Led by the ICB LDA Programme and Delivery Board there is a plan to implement an online portal for referrals to the Dynamic Support Register (DSR) by any partners, with launch date expected in Summer 2024. The DSR is a partner-held register of those with a Learning Disability and / or Autism vulnerable to a mental health crisis requiring hospital admission.

Quality improvements in the timing and partnership work around effective Care, Education, and Treatment Reviews (CETRs) are required in order to prevent admission as well as support discharge back from hospital to the community. We are committed to developing our resources for CETRs which have been shown to help some of our most vulnerable citizens avoid hospital admission through earlier intervention and coordinated system support.

Each person on the Dynamic Support Register under 25yrs has an allocated key worker. BSol has continued to develop the Key Worker Service delivered by Barnardo’s. The service has positively impacted multiple CYP with LDA and their families at times of crisis.

There are issues with getting a formal medical diagnosis of Learning Disability, which is a prerequisite in order to be placed on the GP learning disability register. A working group is in place between GPs and Community Paediatricians to agree a pathway of diagnosis to make this as streamlined as possible.

Waiting times for therapy and neuro-developmental pathway assessment and interventions remain high. Work is ongoing to address this, but we are aware that more needs to be delivered by the partnership. Some strategies are in place to support families and partners whilst they are waiting. This needs to be more consistent across the area.

The Balanced System (for SLCN) is a good example of support for building capacity in mainstream settings, resource bases, with families and in community settings through targeted approaches. This approach involving best use of speech and language therapists at a local level needs to be rolled out further and across disciplines in line with the graduated approach.

The Balanced System approach (for SLCN) is being applied across both our DLP program and within the ordinarily available guidance. Work is ongoing to prioritise the development of robust processes for communicating waiting times for community services to children, young people, their families and professionals. We will continue to develop this approach across the whole partnership to ensure effective use of the available resources.

Processes are not yet in place to maximise the contribution of health teams to Annual Reviews of EHCPs and ensuring alignment of reviews where the CYP is open to multiple agencies. Impact on the child and family may be that information is missing that may be relevant to the child's management within the education setting. Our EHCP task and finish group has excellent partner representation including health. We are developing the plans to ensure information is delivered by the right professionals at the right time to inform Annual Reviews and any EHCP amendments. We are also creating an annual review pilot to ensure the key transition point annual reviews are effectively delivered with input from all the required professionals.

To ensure appropriate access to education, BCHC are exploring securing a service level agreement with Birmingham Women's and Children's Hospital to obtain more respiratory physio resources into the service. This SLA will enable further scoping of what is required for a community respiratory service and support with education and training of nursing staff. This will prevent delays in facilitating care packages and also provide training to parents/carers that will reduce the number of hospital admissions and attendances due to exacerbation of respiratory symptoms.

There is a need for system wide collaborations with Local Authority OT and BCHC Physio and OT on seating pathways. Work is commencing on the Health Visiting (HV) pathways to ensure all partners are clear on the service offer, how the service works with other services within BCHC, Children's Centers and wider early years partners. This is being considered in collaboration with partners and services.

Birmingham Children's Hospital (BCH) are working towards a

consistent approach where all BCH patients are asked about additional need at initial point of contact. Where any diagnosis or reasonable adjustments are required, these are documented in the notes and hospital passport. A new Electronic Patient record (EPR) has been procured by BCH and the LDA Liaison team are actively involved in the scoping and development phase of the this to ensure there is opportunity to improve the quality of practice related to identification, assessment, and documentation.

BCH have audited their practice for complex patients presenting to ED with mental health/LDA, behavioural concerns against the BCH complex patients guidance and the recent HSIB report '**Unsafe' paediatric ward environment for children with complex mental health needs' (hsib.org.uk)** and have developed an action plan based on audit findings to improve practice.

The partnership recognises that more work needs to be done to ensure that transition to adult services is effective. A multi-agency partnership in place to address this. More rigorous and coordinated multi-agency input from age 14 is required and being galvanised.

There is a lack of take-up from families for the (current and increased) entitlement to free childcare especially at 2 years old for those with already-identified additional needs. This is impacting on early support and ongoing identification of additional needs and the effective transition into nursery/primary education settings. There is a lack of capacity in the system for both available places and staffing levels should take-up increase dramatically as we hope it will. We are addressing this in a range of ways:

- Bespoke transition support from EY SEND teams. Both the

Early Support Service and the Sensory Support Teams help at transition to and from reception phase, specifically assessing access needs within the environment(s).

- A brokerage role to support the parent/carers of our children with emerging or identified SEND to secure a place where there are barriers.
- Implementation of early years inclusion funding and associated support from Area SENCo team towards take up of full entitlement.
- Work of DLP.
- Extensive CPD through Birmingham EY Network and the SEND advisory teams with and for colleagues in the local area partnership.
- Increased partnership work with Birmingham Forward Steps and Health Visiting Service to ensure alignment and cohesion across pathways of identification and support.



Action

SEND and AP Action Plan ref	Intention - What we want	Implementation - What we're doing about it
Priority 1 Early Identification	<p>All SEND Support Services work with locality SEND Speech and Language Therapy and Occupational Therapy teams (jointly commissioned) to improve early identification and intervention pre-referral for assessment.</p> <p>Recruitment to increase capacity and delivering innovative ways to support families whilst they wait for assessment and/or interventions.</p>	<p>Embedding SEND Support Services and SALT and OT teams work so support is accessible for and in education settings without the need for referral.</p> <p>Creating/embedding 'Support whilst Waiting' partnership action plan.</p> <p>Communicating with parents, working with universities to take on newly qualified professionals and commissioning additional capacity where possible.</p>
	<p>To ensure all EHCP's are completed in the 20 weeks and are of high quality</p>	<p>Increase capacity of teams to support the EHCNA process, particularly Educational Psychologists.</p> <p>Implement the sufficiency strategy so that where CYP need a resource base or special school place the EHCP can be finalised in a timelier fashion.</p> <p>Social Care and Health Assessment and Advice task and Finish Group is in place looking at improving the quality of advice provided.</p>
Priority 9 Safeguarding	<p>Urgently improve the dynamic support register (DSR), Care (Education) and Treatment Reviews (C(E)TR) and oversight arrangements.</p>	<p>Frequent and intensive oversight to gain confidence that care is of sufficient and consistent quality. That action/ improvement plans are leading to the desired outcome and that the improvements in care are sustained.</p>
Priority 10 Preparation for Adulthood	<p>More rigorous multi-agency input from age 14 is required.</p> <p>Improve the effectiveness of Annual Reviews to promote a focus on ensuring independence and emphasising the importance of preparation for adulthood and input by relevant professionals in school years 5 and 9 in particular.</p>	<p>A task and finish group is developing multi-agency guidance and operating protocols to drive improvements in this area.</p> <p>Ensure resources are managed effectively from all services collaborating to support annual reviews effectively.</p>
Priority 11 Early Years	<p>Ensure there are sufficient qualified staff and SENCOs in Early Years settings to manage the expansion in places from April 2024</p>	<p>Increase the number of postgraduate Early Years Initial Teacher Training (EYITT) programmes in Birmingham via university or school-led training routes.</p> <p>The EYIS is supporting early years staff to gain an accredited Level 3 early years SENCo qualification. We signpost to the Best Practice Programme.</p>
	<p>EY children with SEND can take up their EE entitlement</p>	<p>Bespoke transition support from EY SEND teams: The Early Support Service, the Sensory Support Teams.</p>



Children, young people and their families participate in decision-making about their individual plans and support.

Positive signs

We recognise co-production is central to working effectively with our children, young people and their families, to deliver effective services, strong experiences, and excellent outcomes. This is at both an organisational level when designing service delivery and processes as well as within interactions with individuals. All members of the local partnership have signed up to our Inclusion Charter. The charter was published in summer 2022 and sets out how organisations in the SEND Partnership should work with parents, our children, young people and their families. We know in many cases we are giving them an opportunity to be involved in shaping plans and how they receive support going forward. We know that this approach needs to be more widely adopted in all service areas.

Engagement activity with parents has increased in range and frequency. Partners individually and collectively are engaging with parents about the provision for their child/young person. Parents are also being involved more often and more directly in leading the strategic direction of the **SEND Local Area Partnership**, e.g. in the design of the co-production charter, the co-production awards scheme, the content of this SEF and the SEND, Inclusion and Change for Children strategies.

Young experts by experience have supported health colleagues to improve further their services by undertaking a project visiting GPs and other clinical sites to assess what reasonable adjustments could be made to encourage attendance at 14+ Health Checks and other appointments. This work has influenced the take up of 14+ Health checks which continue to increase from 49% in 2018-10 to 79.3% in 2022-23: above the national target of 75%.

Parent-carer views are routinely sought by Health and Social Care services when devising individual care plans, to ensure that the plan is achievable and meets the needs of the family. The views of parent-carers are sought for Health advice for EHCPs, and therapies colleagues always confirm the recommendations in the Health advice with parents before submission to SENAR.

Access to the advice lines in therapy services (**SEND therapy**) provides space for families to speak to a clinician about their concerns and are given immediate advice to implement with their child.

There has also been an autism specific co-production group developed with **James Brindley Academy** which is supporting the implementation of the **Autism Friendly Award** across the therapies service. The **Communication and Autism Team (CAT)** provides an awareness course for parents and a range of training programmes. Feedback from these courses is very strong with high numbers of parents reporting that they had positively impacted their support for their children and young people.

The Communication and Autism Team delivered a successful two-year pilot as part of the NHS England National Autism in Schools Programme. As a result, they are continuing with a programme to support our autistic children and young people to develop a positive autistic identity, self-advocacy and develop their own one-page profiles. This has been devised and coordinated with the ICB and rolled out successfully in several secondary mainstream schools.

The team are also delivering our local 'Autism and Me' programme in collaboration with the Birmingham Parent Carer Forum and Occupational Therapists. This programme has been embedded within the CAT team core offer to mainstream settings.

Feedback has been very positive from participants:

I have learnt I have autism and I am ok with it.

Autism doesn't make you weird, it makes you special. I have learnt if I need help to ask for it. I'd like to know how many people have this in the world.

I have learnt there is nothing wrong with autism.

I enjoyed these sessions because it helped me with understanding autism from my perspective

And from settings:

St Pauls Girls: SENCo. "One young lady who was attending school part time, with poor mental health, is now attending full time and is aspiring for really high grades, she readily comes to us for support and very clearly identifies what the problem is, she has also made real strides in her communication with her peers and letting them know when she is unhappy about something."

A common set of parent feedback questions is used across the BCC SEND advisory services. Parents consistently rate professionals listening to their child's views as strongly agree or agree in over 95% in survey responses.

There has been a significant improvement in direct and ongoing engagement between parent-carers from the PCF and the health system. This was initially facilitated by the establishment of a cross system SEND Health Parent Carer/Participation Group jointly chaired by ICB and PCF leads. Collaborative work has matured to such an extent that the group is no longer required; instead, PCF leads work directly with Trust PALs leads and Participation leads.

Parent feedback received via all routes, including internal and

external sources, is included in service improvement plans across BCH. An example of this is the current 'way finding' work across the hospital, including signage to enable more accessible navigation in hospital(s).

Feedback includes:

"Thank you for looking after my son during his transplant journey. All the staff have been brilliant with my son and know how to adjust with his learning difficulties." (BCH)

"My psychologist [] is the realest. She's really funny and has a nice smile. She's the best and she always answers my emails and messages super-fast. AND she moves her chair, so the sessions don't feel intimidating, and I am comfortable. She understands autism and understands anxiety and trauma. She's literally the best person ever and she makes me smile and makes me feel like I matter. And she has a dog called honey which just makes her even more amazing because I love animals. I look forward to speaking to her and I feel like she actually listens, and I look forward to telling her about my week at university and home. AND she knows about nutrition and sports which is so cool because I study sports so it's nice to talk with someone who has similar interests." Forward Thinking Birmingham (FTB)

BCHC Feedback:

Feedback from parents such as HV has been fantastic, offering me the support when I needed it and making me aware of Sleeping stones, KIDs, and early support services. (HV)

Someone who listens to all enquiries and concerns also is able to give sound information and be understanding. Nothing to improve. (HV)

There has been improved communication with parents by the

SENAR service. Ways of working have been changed so that all case officers have direct phone numbers which are published on the Local Offer. SENAR have implemented a range of standard operating procedures which specify where case officers must liaise with parents. Person centred planning is being further developed in the service via the work of the partnership EHCP task and finish group.

The tables below show the changing volumes of appeals to tribunal, the number of mediations undertaken, and the numbers of complaints made (from parents). We have monitored tribunal and mediation numbers aligned to the SENDIST calendar year reporting mechanism.

	Jan – Dec 2022	Jan – Dec 2023	%Change
SEND Tribunal appeals received	597	512	-14.2%
Av per month	50	43	
Mediation referrals received	539	574	+6.5%
Av per month	45	48	
Complaints received	180	202	+12.2%
Av per month	15	17	

The positive movements are testament to the work of the teams improving the communication, service delivery and relationships with families and other professionals. Recently we have seen the nature of complaints change. We see a small increase in mediations as a positive, with more families engaging with the service to resolve things prior to appeal. We are analysing the nature of these to ascertain what we can learn from cases resolved at mediation versus the number that continue to appeal.

Throughout 2022/23 the majority (over two thirds) of complaints were regarding a lack of consistent and timely communication. Since January 2024 the breakdown of the complaints is seeing an even split between communication, the lack of an appropriate place for the child/young person and the provision within an EHCP not being met. We hope to continue to reduce the complaints, and we will continue to use them to learn from and improve services.

Spotlight on practice

The Communication and Autism team are receiving positive feedback and recognition from the families they are supporting. Alongside working with schools and settings to build inclusive and enabling practices around autism, social communication and interaction needs, the team hold regular Parent Awareness Courses providing information and creating understanding around autism and allowing an opportunity for parents to come together in a sociable, learning environment. The advice and information provided is invaluable to parents and the courses cover a range of topics, themed around early years, primary and secondary age. The approaches utilise the principles that are outlined within the Autism Education Trust Framework(s) and over 5,000 colleagues from education settings were trained between April 2023 and March 2024.

The feedback from parents includes:

- “Thanks, you’re doing a great job! Keep going – you are making a difference – you definitely did for me and my family. Keep awesome and we’ll change the world for the neurodiverse... One brain at a time!”
- “I found today really interesting as what was said I could really relate to and made me feel I’m not alone with it all. I like the fact I can get a better understanding as well on how I can help my children with their autism.”
- “The course has given me a good overview of Autism and lots to think about and try with my son. Autism is new to me and felt quite ‘scary’ prior to coming along. I know of people who have autistic children, but didn’t really understand the complexities of it or the reasons why autistic people act/respond to certain things and situations. We are at the beginning of our journey and I feel better prepared to help my son going forward.”
- “I was very pleased with the information provided as I’m new to all this and it helped making a start on some little changes to help the day to day life for my son.”

Areas of focus

Co-production at an individual level is improving but is still inconsistent. The voice of our children, young people, and their parents and carers need to be more systematically included in any plans that directly relate to them.

Although there has been a considerable increase in the range of parent engagement, the partnership is aware that there is not yet a system wide parental engagement strategy to ensure that parents are listened to, and their input is acted upon. For example, parent feedback is not yet systematically being used

to inform service development and improvement. Similarly, our children and young people’s voice is not systematically capitalised upon to drive service improvement. We are in the process of co-producing the Parental Engagement and Participation Strategy with parents and carers to understand better how we: i) engage them for feedback to learn from their lived experiences, and; ii) provide meaningful participation opportunities to work with partners to shape service delivery.

When it comes to the voice of the child, we need to enhance our approaches beyond specific co-production initiatives and embed the culture across the Local Area Partnership. We will take the learning and the approaches cultivated with the parental engagement strategy to deliver similar with children and young people. We will also be encouraging parents and carers to enable their children to have their own voice as appropriate, e.g. at annual reviews or within education settings, in how they wish to have services provided.

The Parent Carer Forum has used the SEND Health Participation Group to identify priorities for improvement action in the health system generally. This has included improving the experience of people with learning disabilities who attend the emergency department (ED) by making reasonable adjustments, championing more effective use of Health Passports and supporting the roll out of Oliver McGowan training (mandatory training for Health and Social care in supporting people with Learning Disability and Autism). Progress on these priorities plus autism support to young adults is now being addressed under the ICB Learning Disability and Autism Partnership Board workstreams.

The BCHC Neurodevelopmental Pathway reviewed how we inform young people regarding their diagnosis. This review incorporated information from individuals with lived experience with emphasis placed on neuro-affirming practice. Anecdotal feedback regarding this implementation has been positive.

The BCH LDA team are developing a specific Friends and Family test template to identify patients with LDA to facilitate focussed feedback. The Patient Experience Team are also supporting in identifying specific LDA feedback from the current FFT.

Feedback examples include:

“Different people each time - this was difficult due to ASD and need for routine, so it would've been better to be seen by the same person or at the same time each week, lack of parental involvement causes conflict between young person and parent as they disagree about what advice is best.” (BCH)

“I think they could have looked after my ASD needs better and put me in a space that was quieter and more peaceful without the bright lights, and away from the babies who cry it's not their fault.” (BCH)

We are aware from the learning gained before, during and after mediations and/or tribunals that we can do more when it comes to resourcing provision. We are working strategically and operationally on agreements that will deliver tripartite decision making, co-productive decisions between

professionals, with the child at the centre of decision making, and the appropriate resource allocation.

Where needs are significant, multi-agency annual reviews help ensure the appropriate plans are issued and monitored and that parent carer and young person involvement is a central prerequisite. Some SEND learners may have multiple plans in place to address specific needs across in addition to their EHCP, as their needs can be complex and multi-dimensional. For example, safeguarding needs may be captured in Child Protection Plans (CP), needs for support are identified in Child in Need (CIN) Plans. Children in Care (CIC) have Personal Education Plans (PEP) that have input from the Designated Teacher and the Virtual School. As young people transition into adulthood, they might be eligible for an Adult social care and support assessment, that could lead to a Care and Support Plan. Again, as a young adult with SEND, residents might be eligible for an NHS Continuing Care or Continuing Health Care plan.

There is more scope for Birmingham SENDIASS - Birmingham Information Advice and Support Service to work with our children and young people with special educational needs and/or disability (SEND) and their parents and carers to ensure they are informed, empowered and supported, when necessary, to achieve the best possible outcome for their families to live life as independently as possible.

Action

SEND and AP Action Plan ref	Intention - What we want	Implementation - What we're doing about it
Priority 1 Early identification	Even more robust identification of need and subsequent support and advice for parent carers and our children and young people with SEND.	Further strengthening the "ordinarily available guidance" work with early years and schools and deepening the integration of work with the LA, the Children's Trust and the NHS around early identification.
Priority 2 Graduated Approach	<p>We want teachers and support staff in schools and settings to be confident about offering different opportunities or using alternative approaches to learning when a child appears not to be making progress. (Making reasonable adjustments).</p> <p>We want teachers, support staff and SENCOs to know how and where to go for advice and support from external agencies.</p>	<p>Through our SENCO training we are clarifying the approach to</p> <ol style="list-style-type: none"> 1. Identifying need 2. Providing intervention 3. Monitoring progress 4. Planning next steps <p>Further developing the work of the Birmingham Early Years Networks (BEYN) to build professional partnerships in order to develop pedagogical practice to improve educational outcomes for the young children of Birmingham.</p> <p>Implementing/embedding the Balanced Education System and improving the relationships with all settings.</p>
Priority 3 Transitions	<p>Implement an inclusive 0-25 service for our children with special educational needs and disabilities, with targeted support for those who are likely to require ongoing services into adulthood to maximise the quality and independence of their lives.</p> <p>Ensure that those young adults with additional needs up to the age of 25 who wouldn't routinely be entitled to services due to the Care Act (2014) are provided with relevant support during their transition into adulthood based on their needs.</p> <p>We want to enhance the work of the Birmingham Parent Carer Forum, the work of the Birmingham Benefits and Support Team and the Customer Services Centre staff giving them greater information and knowledge to share regarding preparation for adulthood.</p>	<p>Phase 1: Preparing for adulthood – Young person by Year 9 (KS3): Support every young person from age 14 to be at the centre of preparing for approaching adulthood and for the move to adult services. Strengthening Independent Careers education and advice. Supporting families to prepare for their changing role.</p> <p>Phase 2: Preparing for moving on – Young person aged 14-18 (KS4 & 5): Supporting every young person to plan proactively for their future. Involving them in ongoing assessments and developing a comprehensive holistic plan that reflects their wishes for the future. Ensuring children's and adult services are actively working together to enable a smooth transition.</p> <p>Phase 3: Settling into adult services – Young adult age 18+ Every Care Act eligible young person should be supported in adult services with a multi-agency team fully engaged in facilitating care and support. The young person and their family should be equipped with realistic expectations and knowledge to ensure confidence in their care and support needs being met in the future</p> <p>We want to hold a series of roadshows linked to preparation for adulthood so that the voice of young people in the "transitions" process is given priority, fully explained and understood as a process.</p>

SEND and AP Action Plan ref	Intention - What we want	Implementation - What we're doing about it
Priority 4 Review of Education	<p>We want all schools and settings to be at least "Good".</p> <p>Increase the proportion of our children and young people with an EHCP educated in mainstream schools to be in line with national and statistical neighbour outcomes.</p>	<p>Providing focused support for schools to help them raise standards and tackle underachievement, enabling every young person with SEND to fulfil their potential at each stage of their development.</p> <p>Supporting schools, colleges, and early years settings to improve teaching and learning through better use of evidence, including resources such as Education Endowment Foundation - Maximising the Impact of Teaching Assistants.</p> <p>Deliver consistent approaches with and by all schools so that regardless of postcode, our children and young people receive the same offer of support in their location via a graduated approach</p>
Priority 5 Localities	<p>Local area partners work with parents, carers, CYP to plan, evaluate and develop the SEND system.</p>	<p>Strengthening communities of best practice in localities to disseminate outstanding knowledge and experience. Working collaboratively with the Birmingham Family Hub and the BCT locality models to align services and improve access to those services.</p> <p>Building on the work of the Birmingham Education Partnership and the 7 Secondary Networks and 16 Primary Consortia.</p>
Priority 6 Communication	<p>We want to make it easier for parent carers to contact appropriate professional help.</p>	<p>In order to improve communication with parents and carers we will ensure all case officers business phone numbers and email contact details are published on the local offer website.</p>
	<p>We want to better involve parent carers in deciding how best to support pupils with SEND.</p>	<p>We will embed our recently updated standard operating procedures that specify points through the EHCP assessment, issuing and maintenance/ ceasing process where officers must liaise with parent carers and capture their views and input.</p>
	<p>We want to promote Birmingham SENDIASS</p>	<p>Work with Birmingham SENDIASS to promote their service to a wider audience, through attending. Virtual parent wellbeing sessions and virtual coffee mornings being held by the Birmingham Parent Carer Forum.</p>

SEND and AP Action Plan ref	Intention - What we want	Implementation - What we're doing about it
<p>Priority 7 SEND Partnership</p>	<p>We want to further develop our relationships with Birmingham SENDIASS and Birmingham Parent Carer Forum to influence and support local SEND strategic development and strengthen relationships across local statutory and voluntary partners.</p>	<p>Open more regular communications between the LA and DCO with BPCF and Birmingham SENDIASS to discuss themes and barriers that parents are experiencing and how we can work effectively together to deliver even better information, advice and support.</p>
<p>Priority 11 Early Years</p>	<p>Significantly greater uptake of Early Years provision by parent carers.</p>	<p>Working with locality groups to encourage stress the importance of early years education. We are working with the Children's Centres through the Early Years Health and Wellbeing contract. And each district has a focused plan that we review quarterly, identifying target groups.</p>





Children and young people receive the right help at the right time.

Positive signs

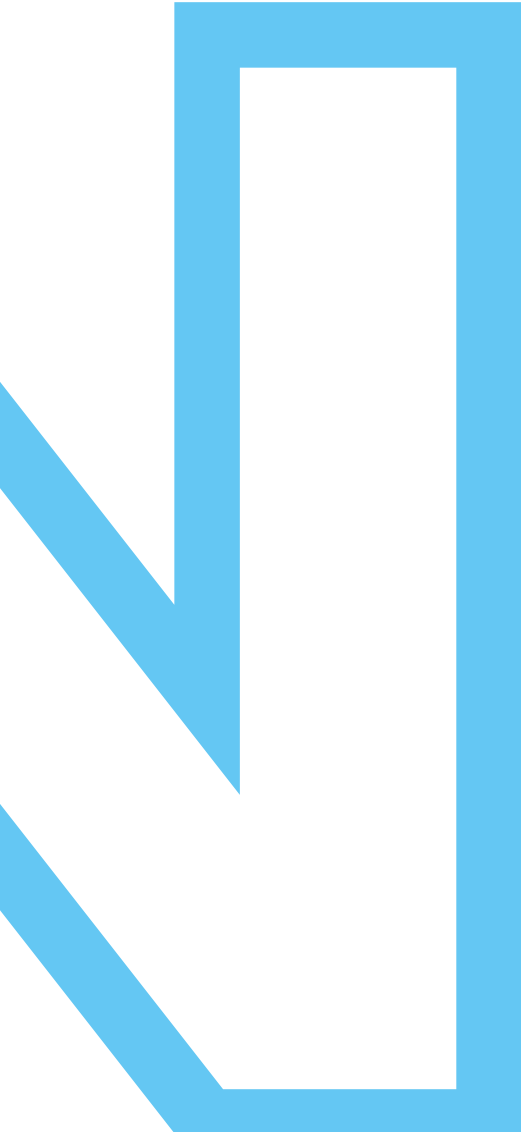
We are working in partnership with our schools to embed a clear graduated approach. Co production with our schools, parents and carers has resulted in a guidance document known as the OAG (Ordinarily Available Guidance), the purpose of which is to support all our education settings to ensure consistency across the city in the use of inclusive activities, experiences, and strategies that benefit every school age child and young person, including those with SEND. As a tool to support schools, the guidance can be used by class teachers and SENCos to support the early identification of SEND, providing a comprehensive bank of strategies and resources that contributes to our children and young people receiving the right help and support at the right time.

The launch of the ordinarily available guidance and capacity building training by BCC through the PSS, CAT and SSPD teams is a crucial pillar of our approach. The work aims to inform education settings regarding the support available to them and how they can support our children and young people with additional needs from their own resources. Health partners are also involved, and the guidance has been received positively by professionals and organisations across the partnership. We are endeavouring to ensure that consistency is applied across the whole of the mainstream education system when supporting any child with additional needs. We aim to ensure equality and inclusive practice is delivered in all postcodes of the city with all education settings receiving and providing the appropriate levels of support to improve outcomes for students with additional needs.

We also are working hard to make sure places in special schools are available for those with greatest need and that cyp who can be supported in mainstream and resource base education settings will be.

The Area has implemented the **Balanced System** to meet speech, language and communication needs. Under the Balanced system, the wider children's workforce is part of the resource used to support SLC need at a universal, targeted and specialist level, with the SALT service working at a locality level wrapped around settings to empower, train and deliver specialist input only where needed. It enables the wider children's workforce to identify and meet SLC need early alongside the more specialist assessment they offer. This has resulted in improved knowledge, skills and confidence for both the SALT and PSS teams in how they work with schools around meeting these needs and makes better use of the available resources. In Birmingham, this has seen the service redesigned away from a central list and referral process to a direct allocation of SALT resource to schools and localities. This allows Speech and Language therapists to deliver more specialist work where triage has resulted in more effective impact through an increased role of the education professionals and families in universal and targeted support. This model will be applied to other services so that the graduated approach becomes consistent across the local area across multiple professional disciplines.

Forward Thinking Birmingham (FTB) (0-25 mental health support), offer a variety of Early Help Services to young people, and crucially their support networks including families, carers and professionals. These include:



- STICK and Mental Health in Schools Teams (MHSTs) support professionals via consultation. Consultations can be requested by professionals and are aimed to be completed within four weeks. The aim of consultation clinics is to offer professionals fast access to expert mental health advice for our children and young people. There are various potential outcomes of consultations as follows; (1) Signposting, (2) Sharing of resources (workbooks) (3) Identification of cases for an Early Mental Health Assessment and (4) Advise to refer to secondary care. Professionals spoke extremely positively about the benefit of consultations, reporting that they "... prevent inappropriate referrals into secondary care, offer reassurance and advice on how to support young people..".

- STICK also offer parent support in the form of psychoeducation and workshops, including more formal interventions such as Non-Violent Resistance (NVR) and SPACE. Feedback from this support, specifically NVR and SPACE training has been phenomenal. STICK and MHST are developing the parent carer offer to include peer support programs and more psychoeducation. FTB Autism Assessment Team are supporting MHST's in reviewing assessment and interventions to ensure these are appropriate and can be adapted for young people with a Neurodevelopmental need.

- Any young person can access signposting and support without a referral through contacting 'Pause' and significant amounts of mental health resources are shared with parents via schools (such as Kooth app and The Waiting Room website).

- There is a divisional Quality Improvement Project within FTB founded on the principles of the NHS drive for 'Waiting Well.' This name is seen as unsupportive to our patients, therefore will be referred to as 'Support whilst you wait.' Projects will

review making improvements in the following 3 key areas:

- (1) Ensuring young people feel cared for whilst they wait
- (2) Offer of helpful information for young people whilst they wait
- (3) Ensuring any deterioration whilst waiting is known and responded to appropriately.

The Autism West Midlands Teen Confident and Rising to the Challenge courses have supported children, young people and their families in understanding their Autism and development of coping techniques and self-empowerment. This includes knowing where to gain the right support at the right time.

All Children's Paediatric Nursing Teams operate a 24/7 telephone advice and visiting advice for those children/young people receiving end of life care. This enables families to access support at any point. The teams work collaboratively with educational settings, children's services, acute, primary and tertiary centres with an MDT approach to ensure the right person undertakes the right task allowing sharing of expertise and improving patient outcomes.

There has been significant investment to enable schools to identify, assess and meet SEND needs early, through the **Developing Local Provision Project (DLP)**. This project has empowered schools to work in partnership and collaboration in localities in relation to our children and young people with SEND. In Phase 1 of the project there have been 44 DLP projects working across the 16 primary consortia and 7 secondary school networks supported by £14m of funding. This has also included specific projects focused on strategic priorities in early years, post 16 and Special School outreach.

Evaluation of the impact of Phase 1 demonstrated significant improvement in the target cohorts of our children and young



people in each locality. For example, in attainment measures including phonics, reading and Early Years Good Level of Development. Following on from this success, funding has been renewed for a further 2 years for DLP Phase 2. Objectives for Phase 2 have been revised to align with the local area's strategic priorities. These objectives are now aimed at improving attendance, reducing suspensions, as well as performance in GLD, reading, writing and mathematics at KS1 and KS2. For secondary schools the focus is on improving attainment 8 scores and reducing numbers of key stage 4 pupils at risk from becoming NEET.

Early years settings in Birmingham are supported by Area SENCOs who provide advice and support to enable settings to effectively meet the needs of our children with SEND. For those children with the most complex needs, Inclusion Support in Early Years funding provides additional resources to settings to meet need and enable them to offer a graduated approach. The Ofsted profile of Early Years providers is improving. For example, the percentage of good and outstanding providers has increased. The BCC SEND Advisory Service provide high quality and specialist teaching support to allow our children with SEND to access the curriculum and the wider opportunities within schools. Evaluations of support with settings confirm that the support is effective in supporting the inclusion of pupils with SEND.

Schools have access to SEN toolkits which support schools to assess needs in the areas of speaking and listening, reading, writing and maths to support improved teaching and learning. 95% of school-based respondents to a recent survey indicated that the toolkits had positive impact, citing their value in assessing our children's current strengths in learning, effective target setting for next steps, and for tracking small steps of progress.

Our short breaks local offer, which is a jointly commissioned offer between BCC and BCT, offering a range of holiday, evening and weekend support and activities across the city to 3000 children, young people and their families. In addition, BCT commissions intensive family support, home support services and overnight short breaks provision delivered through residential or fostering options. The children with disabilities service is currently working with over 700 children and young people under statutory social work interventions.

To enhance further the accountability and ownership of schools in relation to outcomes for our children and young people with SEND, the local area will be implementing Phase Performance Boards and a School Improvement Board. A Head Teacher Reference Group has been established and the model will be piloted in the summer of 2024 for a full implementation in September 2024.

Area Leaders are aware of the need to increase the number of resource base and specialist school places for pupils with SEND. We are aware that currently too many of our children and young people are waiting for special school, and resource base, places. Maintenance of placements in settings that are not appropriate to the needs of CYP is detrimental to their progress, attainment, and wellbeing. We have recently been successful with two SEND Free School applications, one for SEMH and the other for Autism, and once open, these will provide over 500 special school places.

In the interim, a series of measures through local arrangements with schools has enabled us to provide an additional 123 special school places for 2023 entry as well as an additional 68 places in resource bases. Although this additional capacity is welcome, the numbers of pupils without an appropriate

place remains too high. A comprehensive Sufficiency Strategy has now been agreed and will be implemented at pace, but long lead times in being able to create the necessary places and spaces will have an impact on our ability to offer an appropriate school place in some cases.

The inter-agency EHCP Task and Finish Group ensures that all quality developments and proposals are delivered/embedded across the partnership. This task and finish group, and its associated workstreams, are making progress towards developing a common understanding of what 'good' looks like for Annual Reviews and EHCPs. The workstreams have developed and enhanced the co-ordination of assessments for EHCPs through the partnership representation in these groups, specifically there has been a recognition that the advice provided by partner agencies is reviewed and, where appropriate, further training is provided to those writing and submitting the advice requested. Thus, the right support can be delivered in the right place at the right time. A pilot to enhance the effectiveness of Annual Reviews at key transition points is in development and will be implemented during the Autumn term 2024.

The timeliness of the issuing of EHCPs within 20 weeks has been maintained (some seasonal variations apply) ensuring that families, settings and our children and young people know as soon as possible the support they can expect to have in place at the setting in which they will be supported. We continue to maintain performance above the national average for this measure.

In addition to the above, there has been excellent multi-agency collaboration to look at implementing 'whole case/child reviews' (not just the EHCP process). This will deliver improved inter-agency understanding of the core stakeholders and

how we can interact for the benefit of our children and young people. This will also make sure we are embedding the quality approach/philosophy core to the improvement journey and better prepare us for future inspection(s).

Attainment for our children in care with SEND (both SEN Support and EHCP combined) at Key stage 1 and 2 is good with a higher number of young people achieving the expected levels in reading, writing, maths and science than children in care compared to SEND nationally. At Key Stage 2, our Birmingham children in care with SEND (both SEN Support and EHCP combined) is higher than national averages across Reading, Writing and Maths separately and combined.



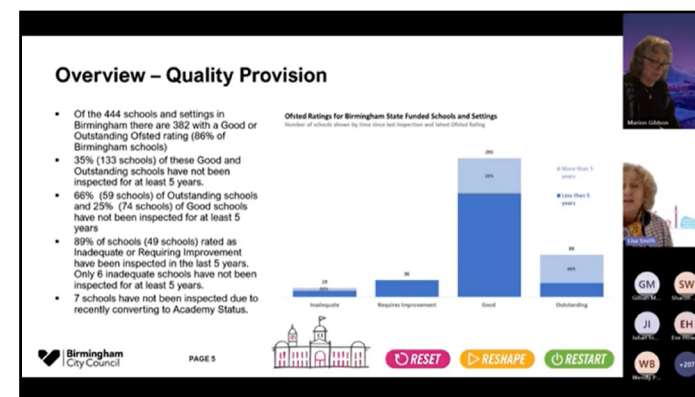
Spotlight on practice

The **New Schools Relationship model** is creating a more clearly defined education strategy across the city and helping local area partnership stakeholders to engage with schools and strengthen our relationships, all with the common goal of helping Birmingham children to thrive. The School Improvement Lead has been driving much of this work that has been positively received.

Our approach to developing a Balanced Education System in Birmingham is based upon the principles of the graduated approach, i.e. right support, right place, right time. Senior leaders are collaborating to embed into the local partnership the culture change required in and from all partners, keeping the child at the centre of the work. Support both to and from education settings, taking a multi-professional approach to ensure our children and young people can thrive alongside their peers where they want to be educated.

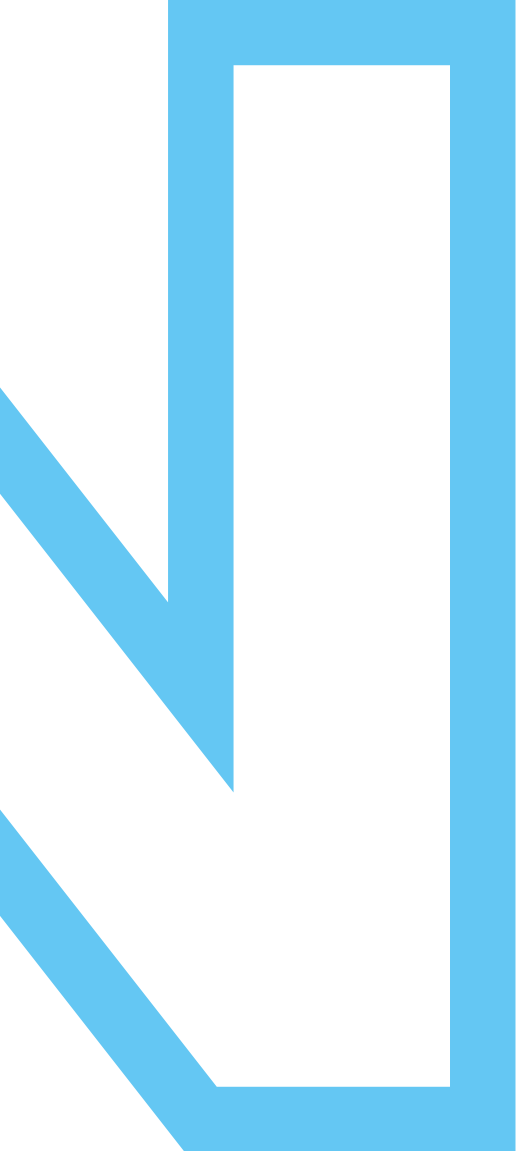
Too many pupils with SEND are on reduced or part time timetables. A partnership approach is being developed to address this, so that our children and young people consistently receive the support and intervention they need to meet their SEND.

There are still concerns about levels of progress and attainment for CYP with SEND, as well as rates of suspensions, exclusions, and absence from school. These are indicative of our children's needs not being met effectively and the right help not being available at the right time. Area leaders are aware of the need to prioritise continued improvement and Developing Local Provision (DLP) Phase 2 has these areas as KPIs for all consortia across the city. Funding for Phase 2 of DLP will only be provided where activity is targeting improvement on these indicators of outcomes.



Our school improvement offer also needs to be improved with new commissioning that focuses on 'closing the gap' for pupils with additional needs in our schools. Investment is being made in the school improvement resource/capacity, but this will take time to become embedded. Alongside the OAG and the DLP provision, we will report the impact in terms of outcomes and changes in the future. This is also crucial with regards improving the standards across our schools. We have too many that are judged by Ofsted to be Requires Improvement or Inadequate and we will work collaboratively with them so the education they offer pupils is good or outstanding as quickly as possible. This will include a focus on capacity building, the need to be more inclusive and deliver a better graduated approach/differentiated curriculum for our CYP.

Health waiting times mean that support is not always accessed at the right time for the child, young person and family and can lead to lack of identification and support. There needs to be continued focus on improvement in waiting times for health service therapy and diagnostic services and a visible network of support for support for our children, young people and their families whilst they are waiting for an assessment and possible diagnosis



Area Leaders are aware that strategic oversight and accountability of Alternative Provision (AP) is underdeveloped. A multi-agency working group has been established which has mapped current provision, agreed a set of design pupils and set out a model for a 'system leader' approach for the Area. A project board established with schools and chaired by a Head Teacher will now take forward the work to devise a strategy for Alternative Provision across the City which includes a review of pathways, commissioning, quality assurance and governance.

Medical Needs

A review of the Medicines Management policy for SSN and CCC will ensure CYP will receive essential medication whilst in the education setting. This will provide assurance that essential medication is administered as prescribed and that nursing resources are more focused on delivering essential medication so appropriate symptom management is available within educational settings and packages of care. This will prevent any possible distress or exacerbation of symptoms for the CYP.

A pilot is being undertaken trialling a blended diet within one of the special schools for our children with continuing healthcare funding that is delivered by our CCC. This demonstrates partnership working with parents and dieticians to ensure that our children and young people are treated as individuals and care will be planned around what is evident as the most appropriate for that child and family to enable them to reach their full potential and maintain a good quality of life by experiencing the benefits of having a blended diet as opposed to prescribed enteral feeds.

Joint working between dietitians and specialist nursing services has resulted in our children with enteral feeding requirements having training at home rather than having to be admitted to

a ward environment. This has been positive and prevented hospital admissions. The pathway is currently being reviewed to ensure its effectiveness and if any improvements are required due to a change in teams service transformation.

Autism

We will strengthen our graduated approach with a focus on Autism to ensure there is a consistently high level of support delivered across mainstream schools and early years providers. This should prevent needs escalating and ensure that considerably more pupils with Autism are educated in the mainstream settings. Whilst we have good access to support through our 'CAT' team and other local service providers, our diagnosis of Autism is very high compared to national averages and needs to be considered moving forward. Staying needs led is a priority so that we can provide the appropriate support as early as possible.

We will also boost our diagnostic services so they can better meet the increased demand for their services. We will develop our "support whilst waiting" partnership initiatives.

The Early Years Inclusion Support (EYIS) team provides support to parents and training for providers and direct support to our children in PVI settings, many of whom are awaiting neurodevelopmental pathway assessment, with a focus on meeting need whilst waiting for a potential diagnosis.



Speech, Language and Communication (SLC)

As a partnership, we recognise the high incidence of SLC need and its impact on school readiness, progress, and social inclusion. Alongside the Balanced System approach, we will help schools to track 'talking' and 'understanding' words at Key Stage 1 and 2 in the same way that every school track literacy and numeracy skills.

As a partnership, we will ensure that high quality training is available to all teachers and early years practitioners to spot our children struggling with talking and understanding words and know how to help or where to refer them to.

Moderate Learning Difficulty (MLD)

The high numbers of our children with MLD might suggest that some may be inappropriately categorised/recorded on our system(s). Through our school improvement approach, we will disseminate the best Quality First Teaching practice across Birmingham schools so that those with additional learning needs are not disadvantaged compared to their peers.

Social, Emotional and Mental Health (SEMH)

The partnership promotes relational and resilience approaches to schools to meet SEMH needs and promote well-being. This includes the promotion of the trauma informed and restorative practices training for staff. Other universal and targeted recommended interventions include school based emotional literacy support assistants and counsellors; ensuring the concept of safe and secure spaces are within the classroom environments as well as designated spaces in settings.

The EPS has trained 158 settings on TIAAS (training complete) and are part way through training another 17 settings. Currently there are 84 schools across the city who have received ELSA training with an active ELSA or are currently

being trained. We have a total of 100 ELSAs with some schools having more than one trained ELSA.

The Birmingham Mental Health Partnership Board is co-chaired between the Mental Health Provider Collaborative and the Local Authority. It provides a partnership overview of the effectiveness of the range of mental health supports available to schools and settings. The NHS Screening, Training, Intervention, Consultation and Knowledge (**STICK**) Team works with strategic partners, including Birmingham Children's Trust, Birmingham Safeguarding Board, Birmingham Education Partnership, and several voluntary agencies to help professionals supporting young people with a mental health concern. STICK is accessible by all 450+ schools across Birmingham and is aligned with Right Help, Right Time to increase confidence and streamline access to early help.

Birmingham and Solihull Mental Health Foundation Trust provides a wide range of inpatient, community, and specialist mental health services young people aged over 16.

Forward Thinking Birmingham, (the city's mental health partnership, for 0-25 year olds), provides several community mental health services working closely with NHS organisations.

(Birmingham Women's and Children's NHS Foundation Trust), the independent sector (**Priory**), and valued partners in the voluntary sector (**The Children's Society**).

The **Mental Health Support Team** helps our children, young people and their families by providing emotional health and wellbeing support in schools and colleges.

We will bring the right support and interventions around the child and family at the earliest possible stage.

Action

SEND and AP Action Plan ref	Intention - What we want	Implementation - What we're doing about it
<p>Priority 1 Early Identification</p>	<p>We want all settings to be calm, safe and supportive environments which our children and young people want to attend, free from disruption and fear of bullying with a focus on CYP receiving the right support at the right time.</p> <p>All professionals to have a consistent approach and capability to identify need and support within their professional capacity.</p>	<p>We are working with schools, and other settings, so that suspension and permanent exclusion are not necessary, as early support can help manage a pupil's behaviour.</p> <p>We are encouraging peer to peer support with a focus on reviewing exemplary behaviour policies that set out how settings promote positive behaviour and how to make reasonable adjustments to policies for supporting those with any SEND.</p>
<p>Priority 2 Graduated Approach</p>	<p>We want teachers and support staff in schools and settings to be confident about offering different opportunities or using alternative approaches to learning when a child appears not to be making progress (i.e.. making reasonable adjustments).</p> <p>We want teachers, support staff and SENCOs to know how and where to go for advice and support from external agencies.</p> <p>We want all schools to appreciate and uphold their legal duty under the Equality Act 2010 not to discriminate against a pupil by suspending or permanently excluding them or reducing their access to a full timetable because of their disability and reasonable adjustments should be made.</p>	<p>Through our SENCO training we are clarifying the approach to</p> <ol style="list-style-type: none"> 1. Identifying need 2. Providing intervention 3. Monitoring progress 4. Planning next steps <p>We are reinforcing with schools and settings that there are very limited circumstances where a part-time timetable can be justified, (e.g. required because of significant physical or mental health needs.)</p> <p>This means not using a part-time timetable to manage a child's behaviour or where the setting does not feel competent or confident to meet the child's needs.</p>
<p>Priority 7 SEND Partnership</p>	<p>We want to reduce health waiting times with a focus on therapy, neurodevelopmental pathway(s), including Autism and other needs and mental health.</p>	<p>The ICB is working with the provider network to address these issues and improve the time between referral to assessment and assessment to intervention.</p>
<p>Priority 9 Safeguarding</p>	<p>We want our disabled children, young people and their families who are eligible for assessment and support under section 17 of the Children Act 1989 and section 2 of the Chronically Sick and Disabled Person's Act 1970 to have it with as little delay as possible.</p>	<p>Our children with disabilities assessment and support policy has been updated and is linked to the short break service statement and the local area policy overseen by our safeguarding children's partnership 'right help, right time'.</p>





Children and young people are well prepared for their next steps and achieve strong outcomes.

Positive signs

The **Change for children and Young People plan** has outlined an Outcomes Framework with six key outcomes that embrace the idea of our children and young people thriving in Birmingham.

1. Connected:
To meaningful activities and we are prepared for adulthood.
2. Confident:
To connect with help we can trust at the right time, right place.
3. Included:
And get the most we can from our home, school and community.
4. Healthy:
As possible and nurtured throughout our life course.
5. Safe:
At home and in places and spaces outside of our families and schools.
6. Happy and Respected:
Our voices and lived experience matter.

These indicators provide Birmingham level accountability for the outcomes the local area partnership delivers; they drive transparency, quality improvement and outcome measurement. These are also aligned with the priorities within the SEND and Inclusion strategies, resulting in the priority areas identified in this self-assessment.

What a child or young person wants to be able to do or achieve with support that meets their additional needs is carefully explored during the EHCNA process with multi-agency input. In most cases, this is taken forward when EHCPs are reviewed (at least annually) with a focus on the progress the child or young person has made towards the long-term outcomes detailed in the EHCP. At key transition points, there is a priority on annual review input from multi-agency partners and we continue to evolve and embed the preparation for adulthood agenda within all annual reviews.

There is an excellent supported internships programme running with strong partnership between BCC, Heart of Birmingham Vocational College and local employers including, BCC (9 young people), Amazon (8 for Spring/Summer recruitment) and Asda coming online asap. The young people with varying additional needs completing a scheme of employability and gaining real work experience. After the Spring/Summer phase/wave of internships, and once the concept is proven, this will be rolled out much wider.

We are very proud of our post 16 tracking and placement team where we have extremely low numbers of young people that are unknown or NEET (compared to national/regional) and high numbers in education or training. As a partnership we are aware and working on providing appropriate opportunities for those that wish to move into employment and through supported internships as a destination. The figures can be seen below.

Young people with a SEND - Academic age 16-18	Cohort	Mainstream education and training	ISPs	Supported Internships	Total	NEET	NK	NEET & NK	Month	Year
England	64,442	83.5%	3.4%	0.2%	87.0%	8.8%	1.4%	10.2%	March	2024
West Midlands	6,681	83.9%	3.9%	0.2%	88.0%	7.7%	1.8%	9.5%	March	2024
Birmingham	1,443	95.2%	0.3%	0.1%	95.6%	4.0%	0.1%	4.1%	March	2024

The WHAT programme (What Happens At Transition) is offered to all students in Special Schools from age 14yrs (from the Yr9 annual review) by the Transition Nurse team. Parent carers have opportunity to plan for the health transitions ahead and the young person has a booklet which is added to each school year until leaving. The booklet supports the uptake of the Learning Disability Annual Health Check and the Health passport to advocate for reasonable adjustments when accessing healthcare appointments.

Transition support is established within Clinical Nurse Specialist (CNS) roles across BCH clinical teams and departments across clinical teams and departments, with transition leads in some specialist areas. They have strong links with the University Hospitals Birmingham (UHB) Vulnerabilities Team and share information to support transition.

The LDA Liaison team support with transition through appropriate reasonable adjustments, creating patient specific communication resources, signposting, and linking with adult services for LDA to support where needs are identified.

There is a Preparation for Adulthood (PfA) working group analysing and piloting the best ways possible to instil PfA across the local area, ensuring we have the correct buy-in from education settings and other key stakeholders. A pilot is being developed to run from Autumn term 2024, developing the Annual Review process to focus on PfA from year 9 for those with additional needs.

Spotlight on practice

The MOVE programme initiative is dedicated to enhancing learners' physical abilities and fostering independence by developing their skills in sitting, standing, walking, and transitioning between activities. In the heart of Birmingham, Calthorpe Academy received the MOVE Silver Award in recognition of its outstanding implementation of the programme. The school's commitment to integrating movement into all aspects of the school day was particularly praised.

The Silver Award report highlighted that 'the children and young people on the MOVE programme at Calthorpe are thriving as a result of the MOVE team's hard work, commitment and passion for prioritising movement opportunities'. As we strive towards achieving the Gold Award, we look forward to exciting opportunities such as developing an associate trainer and collaborating with MOVE to host the introduction to MOVE Webinar.





Areas of focus

Early Years

Although there is more to do, there is an increasing trend in the number of our children accessing the ASQ-3 as part of the Healthy Child Programme. It is good that uptake has improved but the most important thing is what is done by partners when a child is identified as having development needs. The Health Visiting team in Birmingham Forward Steps are reviewing their SEND pathway and key partnership work is required to ensure all opportunities for quality early intervention are taken up. The current take up of early education is low, so SEN is less likely to be noticed.

Attainment

The attainment and progress of our cyp with additional needs is poor compared to their peers in Birmingham and compared to national performance figures. We are putting in place a clear and comprehensive school improvement offer, recommissioning school improvement activity and have appointed a permanent lead for school improvement who commence in post in the summer of 2024. Figures can be seen below.

We are working hard to ensure that the progress and attainment of our children and young people with additional needs (both with an EHCP and at SEN Support level) is 'closing the gap' between them and their peers. A full data set is available, and some extracts are included below.

For Early Years Foundation Stage Profile (EYFSP)

In 2023, 19% of our Early Years Children with SEN Needs (SEN support and EHCPs) achieved a Good Level of Development. This is 1% higher than in 2022 and 0.7% behind the comparable National average with the 0.7% gap

between ourselves and national remaining the same as the previous year.

For our Early Years Children on SEN Support 23% achieved a Good Level of Development. This is 2% higher than in 2022 and 1.4 % behind the comparable National average.

The level of GLD is much lower for our Early Years children with an EHCP, where 1% achieved a GLD in 2023. This has increased from 0.4% in 2022 but is still 2.9% lower than the National Average. When comparing Birmingham's EHC plan pupil outcomes for 2019 to 2023, there has been a decrease of 3.3%, whereas the national decreased by 0.7%

Our data shows us that at Primary phase: Phonics Year 1

The number of our SEND children achieving the expected level in phonics at the end of Year 1 is 42.7% which is 0.5% above national at 42.2%. For our SEN support children, they are 0.3% above national with 48.7% reaching the expected standard. Our children with SEN needs and SEN Support have made more progress this year than SEND pupils nationally as we have closed and accelerated past the gaps between ourselves and national in 2022 to 2023. For our children with EHCPs they remain below national at 10.8% achieving the expected standard compared to 8.9% national but the gap to national has narrowed this year by 1.1%

Key Stage 1

For Key Stage 1, outcomes for our SEND children in Birmingham have improved from 2022 but are still behind attainment in 2019. Birmingham's attainment for our SEND Children at KS1 is below National and other LA Groups. SEND attainment in Birmingham is closest to national



equivalents in Writing, which is 1.1% behind, and the widest attainment gap is Maths which is 4.3% behind.

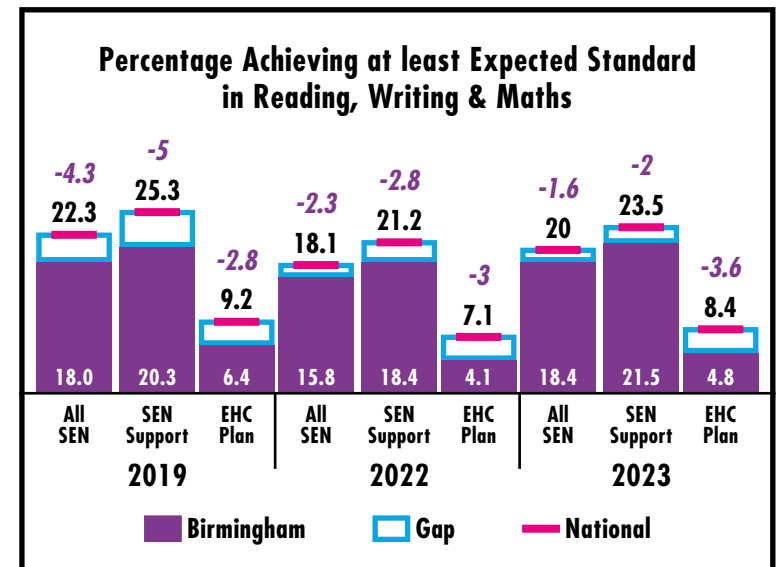
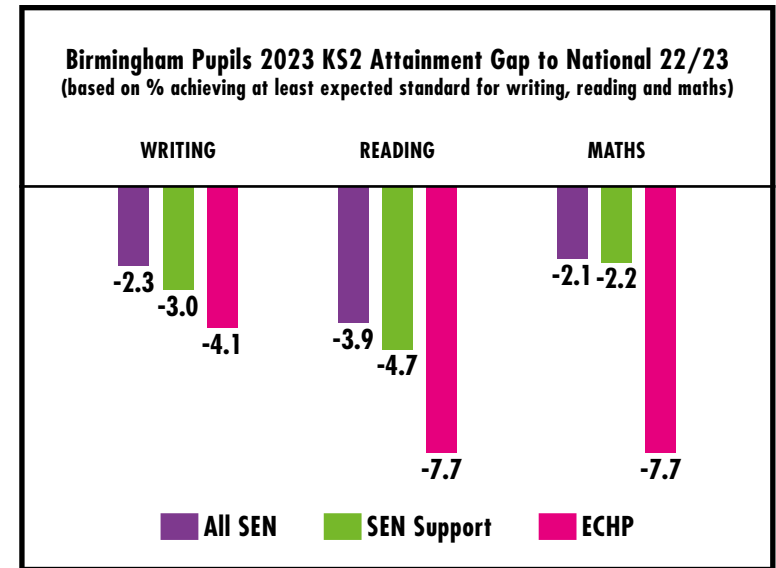
For all subjects, the gap between children in Birmingham and national averages for our children receiving SEN support is smaller than those with an EHC plan. The gap for our SEND and our SEN support children to national has narrowed in 2023 across all areas of reading, writing and maths with the widest attainment gap for our SEND children being maths at 4.3% and SEN Support Maths at 4.9%. Birmingham EHC plan our children are further behind their national equivalents, again Maths has the widest gap at 8.9% behind.


The attainment gap has widened for our children with an EHC plan when comparing 2019 to 2023 for all three subjects, with the widest attainment gap in maths at 8.9%.

Key Stage 2

Overall, SEND attainment (Reading, Writing and Maths combined) at Key Stage 2 is below the equivalent national average by 1.6% but this gap has close by 1.3% from the previous year. The gap is wider for pupils with a EHC plan which is 3.6% and 1.9% for our children on SEN Support which has also narrowed by 0.4% compared to national in 2022.

Birmingham's 2023 attainment outcomes for SEN Support are slightly above 2019 levels. Attainment outcomes for our children on SEN Support have improved compared to both 2019 and 2022. For our children with an ECHP KS2 outcomes have improved by 7% since 2022 but they are still 1.6% lower than in 2019.





For Reading, 40% of our SEN support and 11% of our EHCP children achieved the expected standard. Our SEN Support children in Birmingham have higher attainment than they did in 2019 closing the gap to National, however the gap for our EHCP children has widened (from 16% to 18%).

For Writing, 31% of our SEN support and 8% of our EHCP children achieved the expected standard in Writing. While 2023 Writing outcomes for our Birmingham SEND children have improved from 2022, they have not returned to 2019 levels, which contrasts with Reading trends.

For Maths, 40% of our SEN support and 9% of our EHCP children achieved the expected standard in Maths. Maths outcomes in 2023 for Birmingham SEND children have improved over 2022 but are not at 2019 levels. The gap in attainment to national for all our SEND pupils is smaller in 2023 than it was in 2019, however for those with an EHCP, it has widened.

Key Stage 4

Our SEND pupils in Birmingham have a higher average Progress 8 score than SEND pupils nationally.

For attainment 8 points our Birmingham SEND children are 0.2 points behind national at 27.8 but have closed the gap to national by 0.9% compared to 2022. For our children with SEN support the gap to national was 0.5 points at 32.7 and have closed the gap to national by 0.8. Those with an EHCP are 2.9 points below national at 11.1 and have closed the gap by 0.5 points to national from 2022.

The percentage of our SEND children achieving a strong pass (9-5) GCSE including English and Maths was 16.3% which was 0.5% below national: for SEN Support children pass rate

was 19.5% and our children with EHCP 5.6%, again, both below national. We have seen a gap widen slightly for SEN support and SEND. These were above national in 2022 but as GCSE pass rate was suppressed this year (to bring it back in line with pre covid examinations) the reduction in pass rate was expected and predicted.

For our SEND children the average points scored in the English Baccalaureate was equivalent to the national average in 2023 at 2.3% and 0.1 below national for our SEN Support at 2.7% and 0.2% below national for those with an EHCP at 0.9%

At Post 16 - Further and Higher education.

The percentage of our KS4 pupils with SEN Support going to, or remaining in, education and employment/training is relatively low, but it is better for those with an EHCP.

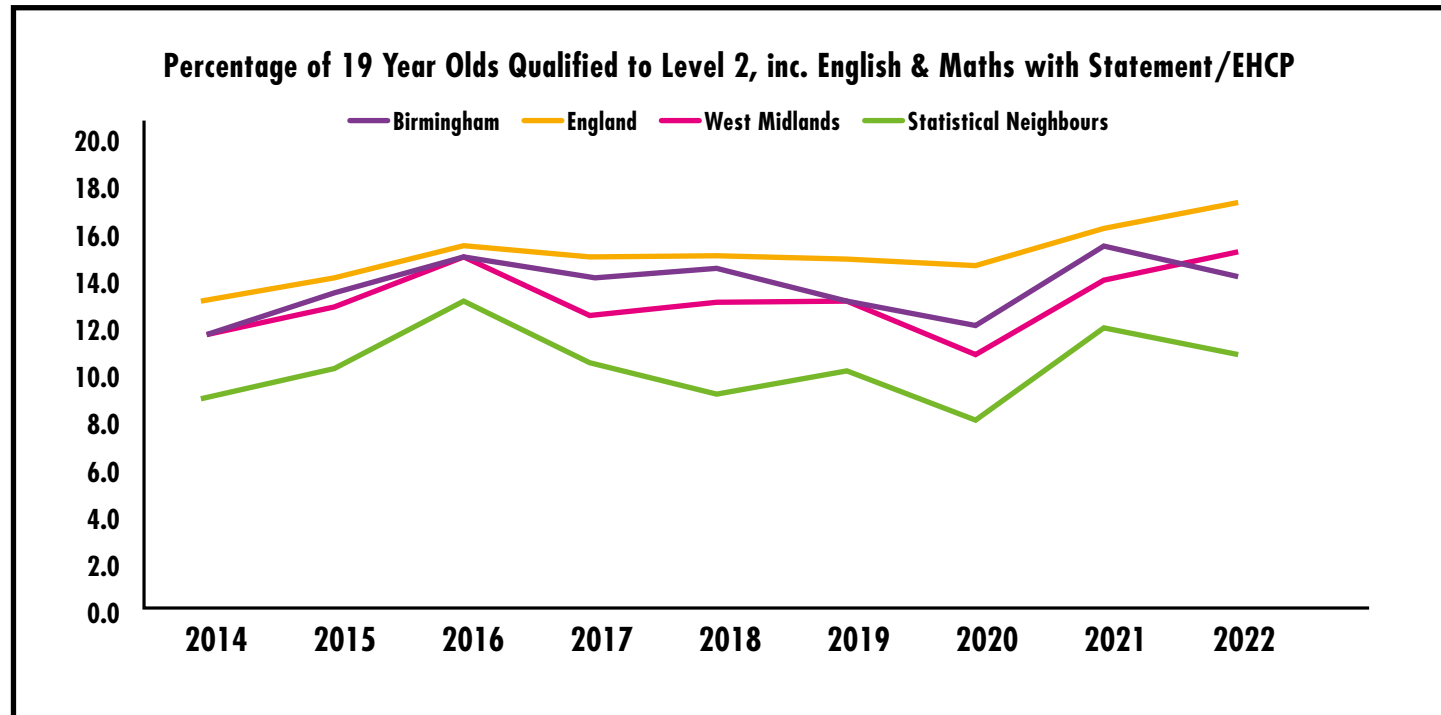
There has been a decline in numbers of our 16–17-year-olds with SEN in education and training and the proportion of our 19-year-olds with an EHCP qualified to level 2 is relatively low and declining.

Achievement with regards English and Maths presents a similar pattern.

Local Authority, Region & England		2014	2015	2016	2017	2018	2019	2020	2021	2022	Change from previous year
330	Birmingham	11.70	13.50	15.10	14.00	14.50	13.20	12.10	15.50	14.30	-1.20
984	West Midlands	11.60	13.00	15.00	12.60	12.90	13.20	10.90	14.00	15.10	1.10
	Statistical Neighbours	8.86	10.09	13.01	10.51	9.11	9.96	8.08	11.96	10.89	-1.07
970	England	13.00	14.20	15.40	15.00	15.00	14.90	14.70	16.20	17.20	1.00

		Trend	Change from previous year	Latest national rank
330	Birmingham	v	-1.20	94

Quartile bands				
Quartile banding	Up to and including	Up to and including	Up to and including	Up to and including
C	12.50	16.70	20.60	50.00



Action

SEND and AP Action Plan ref	Intention - What we want	Implementation - What we're doing about it
Priority 2 Graduated Approach	The quality of EHCPs at year 9 still needs improvement to ensure that Preparing for Adulthood long term outcomes are embedded in all EHCPs.	To support this, the redesign of the SENAR service will have 2 dedicated Year 9 to age 25 years 'year 9 and above' dedicated reviews team, capitalising on the existing expertise in the service in relation to post 16 outcomes and experiences.
Priority 4 Review of Education	We want all settings, schools and colleges to be at least "good".	We will continue the focus on school improvement, strengthening learning across localities. This will involve The Birmingham Early Years Networks (BEYN), as well as looking at the work of the Birmingham Improvement Partnership (BEP).
Priority 10 Preparation for Adulthood	Leaders are aware that there is not yet a comprehensive and integrated approach to PFA which coordinates all aspects of education and employment, health, wellbeing and independence and community inclusion for YP with SEND.	We need to ensure that there is an integrated approach to enhance the lived experience of YP and adults as well as an integrated 14-25 curriculum offer across providers. We will also include ambitious targets for growth in "place and train" learning programmes like supported internships to offer more YP the opportunity of employment.

Children and young people are valued, visible and included in their communities.

Positive signs

The in Birmingham is comprehensive delivering community-based support to up to 3000 of our children, young people and their carers across all areas of Birmingham. There are many in the community that our children and young people with special educational needs and/or disabilities have a chance to experience. Our offer was developed in consultation with our children, young people and their families who asked that we provide services in their local areas, covering all the school holidays, weekends, after school and evenings. We were asked to ensure that our offer provided opportunities for our disabled children and young people to develop friendships and to take part in inclusive activities with our non-disabled children. We provide support through outreach workers or befrienders to enable disabled young people to access social and physical activities, as well as support for siblings and young carers. Along with the community-based support, there is also a range of residential short breaks and family-based provision.

Working with Birmingham Parent Carer Forum, BCT commissioners and the providers of short breaks provision, a comprehensive review has been undertaken leading to an updated short breaks strategy being developed. We are in the last few months of our current short breaks commission and will therefore be designing and procuring a new short breaks offer, which is due to start during the next 12 months. A new multi-agency 'Short breaks Working Group' is being established that comprises of representatives from BCC, BCT, the Early Help localities and Neighbourhood Network Schemes (NNS) Community Connectors, Birmingham Voluntary and

Community Sector, Education, Health, Family Hubs and the Birmingham Parent Carer Forum (BPCF).

An increasing proportion of EHCPs are resulting with a mainstream placement as our assessment of need, better decision making at multi-agency panel, better informed by partner agencies and the voices of families are heard, delivering a positive impact on where our children and young people attend education.

Spotlight on practice

In December 2023, to support UK Disability History Month and as part of our own 'Dis/abilities changed the World' series of events, Dona Stevenson, from Succeed with Dyslexia gave a 'Dyslexia and Neurodiversity: changing perspectives in the workplace' webinar.

This event and the others such as

- Using the Right Words: Inclusive Communication.
- Disability and Carers: Roles Beyond the Workplace.

Helped raise awareness of the significant struggles faced by disabled people in society – both historically and during the present day, to challenge the way disability is viewed, and to advocate for disability equity, inclusion and human rights.

Disability History Month adhered to the Social Model of Disability, in which the barriers of attitude, environment, and organisation cause most of the disability that people face – rather than the impairment itself.



Areas of focus

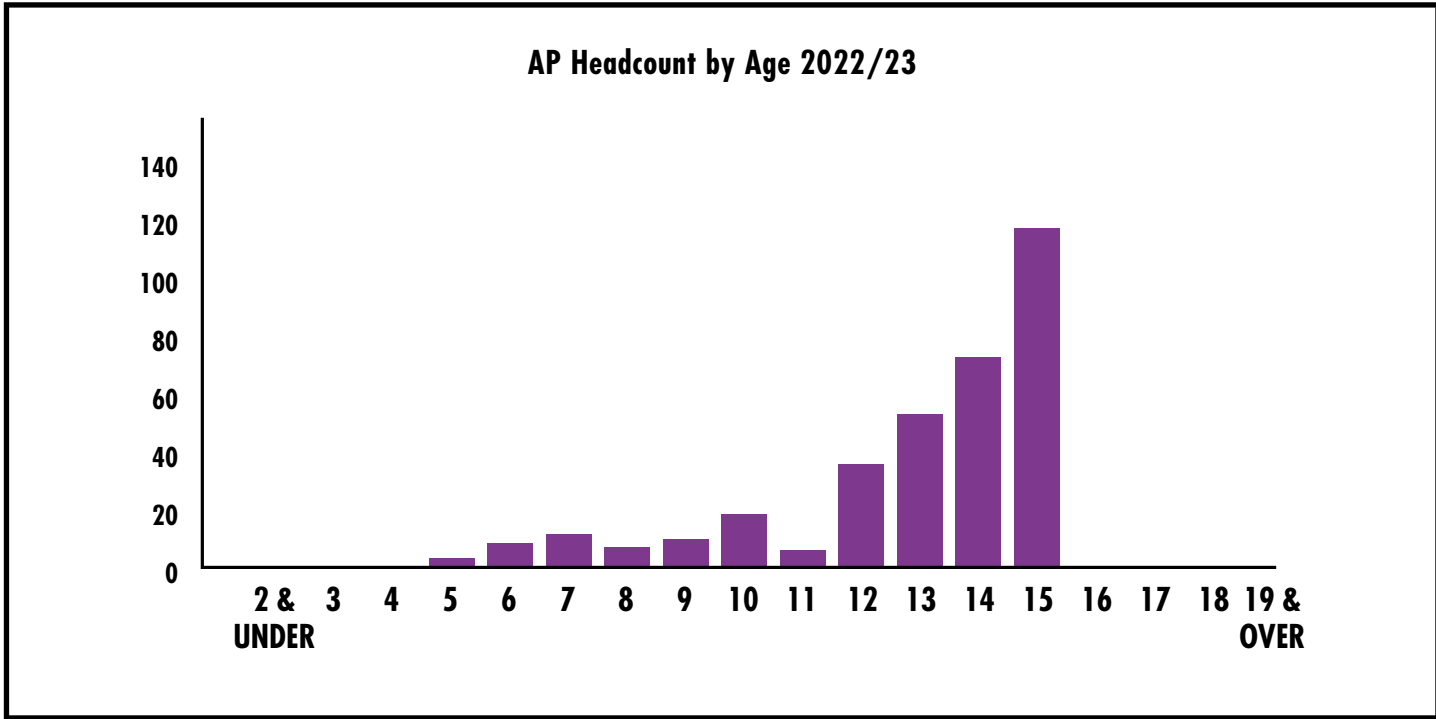
We need to address the number of suspensions and exclusions for those with additional needs. Whilst the trend is a downward one for those with an EHCP or at SEN Support, the data shows we are too high compared to national averages and non-SEND peers. Our DLP project has a focus on both these areas, with good practice delivering significant impact and this being shared across our local area. The DLP outcomes report can be **accessed here** and the learning from the program is being rolled out within and across the Birmingham schools.

In line with the national pattern, attendance rates in our special schools are significantly lower than in mainstream. 86.4% as opposed to 94.4% in primary schools and 92.4% in secondary.

Alternative Provision is largely a secondary phase issue with the focus on KS4.

SEN Provision		2021/22 Autumn term	2021/22 Spring term	2021/22 Summer term	2022/23 Autumn term
No SEN	Permanent exclusions (rate)	0.02	0.03	0.02	0.02
	Pupil enrolments with one or more suspensions (rate)	1.15	1.27	1.06	1.29
	Suspensions (rate)	1.58	1.67	1.40	1.76
SEN with statement or EH	Permanent exclusions (rate)	0.06	0.13	0.07	0.05
	Pupil enrolments with one or more suspensions (rate)	3.03	2.78	2.07	3.10
	Suspensions (rate)	5.15	4.57	3.35	5.22
SEN without statement	Permanent exclusions (rate)	0.1	0.08	0.10	0.17
	Pupil enrolments with one or more suspensions (rate)	3.56	3.34	3.16	3.74
	Suspensions (rate)	6.02	5.16	4.86	6.06

Permanent exclusions and suspensions, by characteristic for SEN provision in Birmingham between 2021/22 Autumn and 2022/23 Autumn Terms



Areas of focus

We need to address the number of suspensions and exclusions for those with additional needs. Whilst the trend is a downward one for those with an EHCP or at SEN Support, the data shows we are too high compared to national averages and non-SEND peers. Our DLP project has a focus on both these areas, with good practice delivering significant impact and this being shared across our local area. The DLP outcomes report can be accessed here and the learning from the program is being rolled out within and across the Birmingham schools.

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Action

<i>SEND and AP Action Plan ref</i>	<i>Intention - What we want</i>	<i>Implementation - What we're doing about it</i>
<p><i>Priority 2 Graduated Approach</i></p>	<p><i>Strengthen the short breaks offer</i></p>	<p><i>Developing the Home Support Service, Direct Payments, as well as overnight residential care, overnight short breaks and intensive family support.</i></p> <p><i>Developing our new short breaks strategy and design our new service, tender and procure the service within the next 12 months.</i></p>
<p><i>Priority 4 Review of Education</i></p>	<p><i>We want exclusion to be used rarely</i></p>	<p><i>Focus on inclusion as part of the Developing Local Provision initiative and ensure Heads develop their peer oversight of suspensions and exclusions in their localities.</i></p> <p><i>Developing and embedding the Inclusion Strategy.</i></p>
	<p><i>We want to significantly reduce part time timetables.</i></p>	<p><i>Reinforce the illegality of much part time timetable activity through heads training and school link work with governors.</i></p> <p><i>Improve and then develop the outreach nature of Alternative Provision and Special Schools where appropriate to help strengthen the inclusive nature of ordinarily available education.</i></p>
<p><i>Priority 7 SEND Partnership</i></p>	<p><i>Strengthen our All-Age Autism Strategy</i></p>	<p><i>Ensure collaboration and multi-agency working becomes much stronger to deliver a better offer for all ages.</i></p>



LOCAL AREA PARTNERS WORK EFFECTIVELY TOGETHER TO PLAN, EVALUATE AND DEVELOP THE SEND SYSTEM.

Leaders are ambitious for children and young people with SEND

Positive signs

As well as improving the above partnership activities, the local area has strengthened the strategic leadership significantly. An experienced, permanent Director for Children and Families (DCS) commenced work in November 2021 and has made significant progress in establishing permanent senior posts. A permanent Director of SEND and Inclusion started in November 2022 and a permanent Director for Thriving Children and Families started in April 2023. A permanent Director of Commissioning, Strategy and Transformation commenced post in July 2022 and our Assistant Director for the Children and Young People's Travel Service (home to school transport) took up post in January 2023. The following roles are also in place and focused on SEND services/improvement:


- Staffing in Birmingham Children's Trust is stable, and the recent Ofsted 'Good' judgement means there is now greater capacity to accelerate their work in relation to SEND improvement.
- Designated Social Care Officer (DSCO) role in place.
- A stable team of Designated Medical / Clinical Officers is in place.

- Interim strategic lead in SENAR from Nov 2022 with a permanent post holder commencing in September 2023.
- Permanent Principal Educational Psychologist has been appointed.
- SENDIASS interim leadership is leading to greater compliance with the minimum standards.

All of the above has led to the local area being given strong leadership, ambitious for our young people and with clear vision of how we want to support those with additional needs.

In July 2023, the SEND Strategy, the Inclusion Strategy, and the Change for Children Plans were all launched. These have been co-produced and the structures and the ambitions within these documents have informed the SEF. We continue to evaluate performance against the strategies and enhance the collaboration that is needed to overcome any barriers to their successful implementation. We know where we are improving, where we still need to improve and where we have significant challenges to overcome and implement better experiences for our children, young people and their families.

The local leaders collaborated to deliver multi-agency inclusion conference(s), and a School improvement and Birmingham Education Partnership conference alongside many virtual



seminars and workshops to outline the quality standards expected for all teams in the local area.

At the most recent stocktake of the local areas' Accelerated Progress Plan, the strategic leadership element is no longer being monitored by the DfE, as the local area is making appropriate progress. There is now a joined-up approach to the way in which the local area supports families with our children with additional needs.

We have developed a detailed SEND and AP improvement plan that captures all the actions that would ensure the local area achieves ambitious outcomes for our SEND children and young people and those attending AP. Each priority area is broken down into separate actions with a named local leader accountable for oversight and delivery.

Recent engagement events with parent carers, our children and young people and professionals have all been very well attended which demonstrates the collective ambition for our children and young people.

BCHC has worked closely with the Birmingham PCF to establish a network of 'children's champions' in all the community health services, whose role it is to advocate for CYP voice in all service developments and design.

There is an established coproduction priorities group within the Health LDA programme which involves experts by experience and parent carers in ensuring improvements to the experiences of people with LDA in health settings are implemented.

We have continued to grow the focus on quality assurance which has been articulated in this document previously. Improving quality along with well-established and accurate

data sets are allowing the local area partnership to evaluate delivery. Added to qualitative feedback from those who use our services (whilst improving) will continue to be a priority for the partnership.

Our local area SEND and AP Partnership Board is considering how the partnership can most effectively lead the strategic direction, support and challenge; and ensure that improvement continues to be made across the local area. This has led to refreshed expectations including better evaluation and analysis of performance, allowing oversight and continuous improvement to be delivered more effectively. We are creating the best tools to enable senior leaders to provide support and challenge, driving the culture and ways of working within our teams, which children and young people need to thrive.

Spotlight on practice Education, Children and Young People Overview and Scrutiny Committee

On 17 January 2024, the Education, Children and Young People Overview and Scrutiny Committee met to provide an update to Members on progress made since July 2023 Overview and Scrutiny Committee Meeting regarding the Improving Services for Children and Families Plan.

The Improving Services for Children and Families Plan was launched in November 2022 to align within one plan, all City Council improvement and transformation activity that impacts on our children, young people and their families. The objectives of the plan and associated activity seek to compliment and reinforce those set out within the City Council's Corporate Plan and improvement and transformation activity, our partnership Change for Children and Young People Plan 2023-2028 and across the UNICEF Child Friendly City commitments.

Workstream C of the Plan is: Transform and improve services for children with Special Educational Needs and Disabilities in line with statutory requirements and to deliver sustainable, well performing services with inclusion of children and young people at the heart.

Scrutiny appreciated the hard work that continues in implementing better and more robust processes around SEND, and ones which will support and drive our improvement journey. The implementation of new processes and procedures takes time but are absolutely necessary in getting us to where we need to be. Our vision will remain firmly 'that all our children and young people are safe, healthy, included, confident, and achieving', and by collaborating as 'one team' there remains every confidence that the partnership will succeed.

Autism Resource Base Practitioners Meeting

The February meeting of Autism Resource Base practitioners celebrated the enthusiasm from our school Resource Base teams. This was the feedback from the Deputy Service Lead for Communication and Autism Team:

There were lots of opportunities to share practice and experience (focus was curriculum) networking, CONTACT autism hub joined us to promote support for families, CAT extended knowledge on executive functioning, work trays and adaptive teaching and Woodhouse presented on their extended curriculum through their work with a local farm. Lots of the new bases attended and were very appreciative of the opportunity. Most importantly we were joined by a young person now at secondary who shared his autistic story, he was fabulous and offered advice on transition and support to the staff. We have to continue / ensure YP voice is at the heart of our work.

The following picture was tweeted -



Action

Areas of focus

Some areas of work around Autism and Mental Health have the potential for duplication across partners and there is scope to align our work further.

Much work has been done to break down siloed activity. Education, health and care colleagues work closely together to work in a more consistent way that avoids duplication of effort and confusion by parent carers and our children and young people. A project is underway led by Healthwatch working between parent-carers and NHS leads of the ND pathway in order to improve the overall experience of assessment process. Joint commissioning arrangements post 14 between our children's social care, adult social care and NHS continuing health care are progressing in relation to preparation for adulthood.

We need to amplify the voice of the child/young person in everything we do across our local area partnership. The services we commission and deliver must make a positive difference to their lives in ways that CYP find meaningful. Our Outcomes Framework puts this front and centre of our collective work. This work is in its early stages and we need to put resource and commitment into capturing feedback on our partnership impact from the child and young adult's perspective.

We will continue to build our quality and assurance processes, embedding them across the partnership to drive up standards. Monitoring will be undertaken by the SEND and AP Improvement Plan via the SEND and AP Improvement Board.

SEND and AP Action Plan ref	Intention - What we want	Implementation - What we're doing about it
Priority 1 Early Identification	<i>Embed the outcomes framework across the LAP so that student reported dips in satisfaction against these is picked up at the earliest opportunity and addressed to avoid needs escalating.</i>	<i>All LAP leaders are aligning agreed projects with the outcomes framework in the SEND and AP Improvement Plan. Student feedback on these outcomes is being used to triangulate the efficacy of all commissioned projects.</i>
Priority 2 Graduated Approach	<i>All LAP stakeholders to be clear on how to support pupils with Autism and promote positive Mental Health.</i>	<i>Autism and Mental Health support emphasised and clarified in the Ordinarily Available guidance and then with more specialist provision, so all stakeholders know their role in the pathway.</i>
Priority 6 Communication	<i>Clear and regular reporting on the SEND and AP Improvement Plan to LAP strategic leaders. Deliver a comprehensive and co-produced parental engagement and participation strategy (including feedback methodologies). Develop the approach for gaining feedback from our children and young people regarding the services they have received.</i>	<i>Sharing an easy read version of the SEND and AP Improvement Plan. Work closely with parent carer representative groups to co-produce feedback methods Work collaboratively with all services and with service users to develop methods of gaining feedback.</i>
Priority 7 SEND Partnership	<i>For our 11 remaining areas of focus in respect of our APP to be fully addressed.</i>	<i>11 APP projects all have nominated leads who ensure rapid progress is being made.</i>
Priority 10 Preparation for Adulthood	<i>Break down any siloed working across schools, children's and adults' social services and health in respect of preparation for adulthood.</i>	<i>Refreshing the PFA pathway with a focus on developing a 0-25 "birth to settled adulthood" continuum that has clear multi-agency protocols at 14+.</i>



Leaders actively engage and work with children, young people and their families.

Positive signs

The voice of our children and young people, and parent carers via Birmingham Parent Carer Forum, is increasingly powerful as they feed into improvements in the Health system, coproducing the aims of the Local Area to improve the experience of our children, young people and their families in accessing healthcare (both primary and secondary).

When considering local 'leaders', we are interpreting this as anyone directly working in a service delivering support to children, young people and their families with additional needs. All are 'system leaders' and have the ability to influence, contribute and improve the way we deliver services.

Stakeholders are increasingly committed to co-production which ensures that services are listening and adapting, learning from those we support and work with. Good examples of working together with our children and young people, parents and carers are shown through the development and implementation of our **Inclusion Strategy**.

We meet regularly with our children, young people and their families so that their voices are always central to our work. 6 weekly meetings with Birmingham Parent Carer Forum, Birmingham SENDIASS and key champions from education, health and social care take place to understand what the current priority areas are for parents and families.

There is increasing appreciation of the multi-agency responsibilities to prevent deterioration of child and young person mental ill-health through a detailed understanding of

the Dynamic Support Register (DSR) function and requirement to build earlier joined up community provision to prevent admission into hospital and support fast discharge.

The Birmingham and Solihull NHS Foundation Trust, Emotional Wellbeing and Mental Health Service offer well received specialist assessments for young people experiencing emotional and behavioural difficulties as well as various specialist assessments in parent and child mental health and neurodevelopmental disorders such as ADHD and Autism. Support is offered in a variety of settings such as specialist community clinics, home visits, school visits and support to hospital Children's wards and A&E departments. Coordination is improving with education, social services and primary care (GPs etc..).

We have refreshed our co-production framework and charter and started embedding co-production as a key principle of the way we work with and for our children, young people and their families with additional needs.

Spotlight on practice

The Family Hubs roll-out continues with the Ladywood location opening in early 2024. By ensuring parents and carers can access the support they need, when they need, the Family Hubs initiative is providing a valuable service. The exact location for each hub is being co-produced with families. The 'in person' hubs will be rolled out through 2024/25. An outline plan of dates and locations can be seen in the table:

Ladywood Jan - Feb 2024	Hall Green March 2024	Northfields April 2024
Erdington May - Jun 2024	Yardley July 2024	Perry Barr July 2024
Selly Oak October 2024	Edgbaston January 2024	Sutton Coldfield February 2024

Family Hubs continues to offer digital support on the **Family Hubs website**, where families can find help and support now, wherever they live in Birmingham.

The regular **newsletter** is full of useful information and well received.

We continue to work in partnership in Birmingham so that the work being done in SEND, the Children and Young People's Plan and Early Intervention and Prevention, aligns with what the Family Hubs programme activity so that help and support is joined up for city residents.

Areas of focus

Digital first inclusion and accessibility

- As we continue to improve our service delivery, we will explore how we use technology and digital approaches to enhance the "user experience". E.g. What is the appetite for moving from the physical world to the digital one. We appreciate that some apps (such as the NHS app) are becoming a point of contact with our children, young people and their families and a tool for learning more about them, their needs and aspirations and improving their experience.

- Our SEND children, young people and their families may wish to connect with our services via a digital channel first. We will consult with parents and our children with additional needs to co-produce any such solutions moving forward.
- The role of a SEND navigator is something we are looking at both physically in terms of being available in person and online to support parent carers navigate our local offer but also as an AI chat bot that can engage in multiple languages.

We are refreshing the membership of the cross-SEND Health Parent Carer/Participation Group, co-chaired between ICB and leads of the Parent Carer Forum (EPT) with representatives from the Patient Experience Teams (PALS). We aim to ensure that all SEND patients and carers have a central role in all aspects of care, service design and improvement across Birmingham and Solihull NHS Trust.


We are using participation and lived experience groups to improve the experience of SEND patients (via Reasonable Adjustments and access to Learning Disability nursing) for those of our children and young people with less visible disabilities, championing more effective use of Health Passports and supporting the roll out of Oliver McGowan training for social care and health workers.

We want to strengthen our strategy for engaging parent carers and CYP with strategic developments and monitor engagement. We will deliver on our pledges made to include ways to reach harder to reach groups including publishing the enhanced policy on engaging with seldom heard groups on the Local Offer and ensuring this is implemented; holding specific events or engagement activities with seldom heard groups; and considering what the digital offer for engagement should be (e.g., via social media, virtual engagement opportunities).

Action

SEND and AP Action Plan ref	Intention - What we want	Implementation - What we're doing about it
<p>Priority 6 Communication</p>	<p>Refresh the membership of the cross-SEND Health Parent Carer/Participation Group, co-chaired between ICB and leads of the Parent Carer Forum with representatives from the Patient Experience Teams (PALS).</p>	<p>Engaging with all SEND parents and carers to ensure they have a central role in all aspects of care, service design and improvement across Birmingham and Solihull NHS Trust.</p>
	<p>Local leaders taking opportunities to engage directly with those we support and those who deliver services.</p>	<p>Visits, surgeries, engagement events and shadowing of practitioners to maintain knowledge and understanding of what those we support need and want.</p>
<p>Priority 7 SEND Partnership</p>	<p>To listen to parent carers and our children and young people with SEND and act on their input, advice and guidance to inform service development and improvement.</p>	
	<p>To instil co-production in all aspects of working together with service users – parent carers and our children and young people with SEND and who use AP.</p>	<p>Continue training our workforce through co-production champions in a series of events across Birmingham as part of a city wide roll out of the Co-production Charter.</p>





Leaders have an accurate, shared understanding of the needs of children and young people in their local area.

Positive signs

A more comprehensive set of 'data dashboards' with more accurate information has come as a direct result of leadership being clear on expectations and this in turn has resulted in better resource management and identification of priority areas to improve practice(s). This in turn drives the quality standards expected and the evaluation of performance so we can address areas for development more effectively. A dedicated group has been established to review the specific data for progress, attainment and outcomes of our cyp with an EHCP and at the SEN Support level. This group is made up of the senior leaders in our data team, the virtual school, School Improvement Service(s), Delivering Local Provision and our Pupil and School Support Team and interrogating the data for universal, targeted and specialist support for the different groups and needs of our cyp. Using the intelligence gathered, a plan is being cultivated to deploy resources where they are most needed and where we need to focus the capacity building training to improve provision across all education settings. We are not where we need to be, but there is marked improvement from two years ago.

There is a partnership data sharing agreement to ensure that data is shared across education, health and care services which allows learning from different perspectives and approaches.

Our SEND dashboard is being refreshed to include the Annex A data as core data metrics, with coproduction with partners going ahead to ensure all metrics included are easily interpreted and support evaluations across the wide network of support and need.

Standardised processes are now in place and are being more consistently used across the local SEND system as they become

embedded. We know quality assurance of processes and impacts are critical to sustaining improvements and there is continued system wide focus on embedding quality assurance.

Collaborative working and strategic oversight have led to clear strategic and operational commitments from partners with leaders working together to evaluate services and make improvements.

- Professionals are improving services for families by collectively embracing the partnership vision at both strategic and operational levels.
- Education, Health and Care Needs Assessment process has improved timeliness and families have clearer understanding of the processes being followed. Uncertainty for parents, carers, our children, and schools has reduced.
- The Local Offer website has improved so that families and professionals can now access information and resources much more efficiently. For example: a fully functioning 'search bar' is now in place ensuring easier navigation.
- The Annual Review process is increasingly robust, ensuring Educational Health Care Plans (EHCP) are up-to-date and accurate.
- Phase Transfers have been delivered on time and effectively – 99% in 2024 compared to 0% in 2021.
- Our Health colleagues have invested heavily in additional capacity to convert thousands of referrals into assessments and ensure waiting times are maintained despite increased referral rates.
- We have developed and launched a Co-production Framework and Charter and are embedding co-production as a key principle of the way we want to work with and for children, young people and their families.

- The Inclusion Strategy and SEND Strategy were launched in July 2023.
- Significantly increased permanent resources for the SENAR service.
- Increased resources for Occupational Therapy (OT) and Speech and Language Therapy (SALT) assessments as part of EHCP statutory assessment processes.
- Funding and implementing the 'Balanced System' to deliver effective support for SLCN at universal, targeted and specialist levels from across the children's workforce.
- We have improved the way in which families and professionals can contact the SENAR service through dedicated phone numbers for each caseworker.

Key data and narrative about improving waiting times for key health services (therapies, autism and ADHD assessments) is provided to Local Authority partners on a monthly basis so there is transparency about the challenges, as well as ownership on joint approaches to improve experiences. However, leaders acknowledge more needs to be done to amalgamate the data to give strategic oversight. The investment being made by BCC in the internal data capacity is starting to make a difference. Increased awareness and the move by the SEND and AP Improvement Board to take a broader view of the SEND and AP needs has required the Local Area Partnership to embrace the local priorities (outlined in this document) and focused energy where it is required.

The strong understanding (by leaders) of our local area is epitomised by the work within the SEND Management Group. This involves the key leaders within Health, Social Care, Education

to be challenged by the Parent Carer Forum Chair. This group reviews performance across the local area partnership focusing collectively on what the needs are which continue to require focus whilst maintaining quality delivery across all aspects of the work we deliver. As mentioned earlier, the strategic SEND and AP Improvement Board is also ensuring that leaders at all levels are working in the most effective ways to deliver better outcomes for our children and young people in Birmingham.


We have improved our data collection and reporting which has allowed us to identify priority areas of need. As a result of much clearer and stronger leadership, the relationships between professionals have improved across all services through collaborative, multi-agency working. This has also been the case when cultivating and maintaining this self-assessment. Leaders have had to become more accountable collectively for understanding local needs and collaborating to overcome local challenges.

Spotlight on practice

The Birmingham Early Years Networks (**BEYN**) is a place for the whole Early Years Community to connect, collaborate, and communicate. Professional partnerships are being developed in order to develop pedagogical practice to improve educational outcomes for the young children of Birmingham.

Based on Birmingham's SEND (Special Educational Needs and Disabilities) strategy, the Developing Local Provision (**DLP**) initiative is in place in early years settings and primary and secondary schools across the city. Birmingham Early Years Networks are divided into **ten districts** based on Birmingham's constituencies. Each district is made up of several wards.





The initiative aims to enhance the work already being done by early years settings and mainstream schools in providing support to our children in their local area.

Phase 1 of the Early Years DLP plan focused on three objectives:

- To improve early identification and support for our children with additional needs by increasing the number of our children that have access to a practitioner with a level 3 SENCO award.
- To build knowledge, skills and practice across the sector through coordinated professional development and networking opportunities
- To improve early identification and support for our children with additional needs by the creation of a virtual district inclusion partnership hub in each of the ten districts.

‘This has been an amazing opportunity for my son to socialise with other children, do other activities and be in a nursery setting. The staff were very helpful and welcoming, and I will highly recommend this group to other parents.’

‘We had no access for our daughter to meet other children. We’re also getting support to get access to other places we didn’t know existed. We’re getting lots of information we otherwise would not have.

‘I was observing the group of children enjoying the singing activity, which included children with a range of strengths and challenges. It was a really lovely demonstration of inclusivity. I thought it was so great to see children, at an early age, exposed to the idea of difference and how other children might be different from them, but they can all be together in one place and joining in and sharing an activity – and having fun!’ – a community speech and language therapist.

Based on the success of Phase 1, Phase 2 has focused energy on the needs of those at SEN support level, reducing suspensions and exclusions and increasing attendance whilst delivering better progress and outcomes as notable KPIs.

Areas of focus

The SEND Joint Strategic Needs Assessment (JSNA) is not as detailed or up to date as we want it to be and so is currently being refreshed.

Area Leaders are aware that strategic oversight and accountability of Alternative Provision (AP) is underdeveloped. A multi-agency working group has been established to map out current provision and review pathways, commissioning, quality assurance and governance.

We need to systematically embed multi-agency audits of the child or young person’s lived experience. This includes evaluating the impacts of all support plans by gaining qualitative feedback from service users in a consistent way. This will deliver the insight and learning for the partnership and gain a better understanding of the experiences and outcomes for CYP with SEND.


There is universal understanding that Preparation for Adulthood needs to be improved and leaders are working towards this through pacy and purposeful collaboration (and with support from NdTi).

Our “outcomes framework” is not yet universally understood, and there is more to do to embed the outcomes that we collectively think help define what “thriving” in Birmingham is and should be.

Action

SEND and AP Action Plan ref	Intention - What we want	Implementation - What we're doing about it
Priority 2 Graduated Approach	We want a clear continuum of support to be articulated and widely appreciated across all LAP stakeholders, especially schools so that AP is framed as part of the support pathway.	A multi-agency working group has been established to map out current AP provision and review pathways, commissioning, quality assurance and governance. The working group will report back to SEND and AP Action Plan SROs and senior leaders.
	Our "outcomes framework" to be universally understood and implemented across the partnership.	A task and finish group is being set up to operationalise the outcomes that we collectively think help define what "thriving" in Birmingham is and should be. And to ensure all LAP stakeholders adopt the Outcomes framework in their projects.
Priority 8 Data	Update the SEND Joint Strategic Needs Assessment (JSNA)	The SEND JSNA is currently being refreshed. The data team are creating an online data observatory to reflect the main elements of the SEND JSNA with input from education, health and social care data owners.
	Amalgamate the waiting times data to give strategic oversight. Especially in respect of therapies, autism and ADHD assessments.	A joint multi-agency approach to improve experiences is being developed.
	Data being used by operational leaders to focus time and energy where it is needed to have the greatest impact on outcomes for our children and young people with additional needs.	The data group interrogating up-to-date local information to inform local leaders and identify the strategic ways of improving outcomes and progress for our cyp.





Leaders commission services and provision to meet the needs and aspirations of children and young people, including commissioning arrangements for children and young people in alternative provision.

Positive signs

Our **SEND sufficiency strategy** has been agreed and it outlines how we will commission placements for resource bases, special schools, satellite provisions in Birmingham education settings.

The SEND commissioning team are constantly reviewing and adapting the number of places required across the city in resource bases, special schools and AP settings. The commissioning of these places is crucial to the ongoing sufficiency challenges and having enough space in the right places at the right times. Our work with the Delivering Better Value programme has enhanced our approaches and will accelerate once capacity is identified to support the required commissioning of places.

“I just wanted to say thank you so much for all your help regarding ‘X’ and getting him into a school. Mom is completely grateful and would like you to be aware of this.” – Advocate for family.

The approach to early intervention and support is reinforced through the local guidance for schools on **suspensions and exclusions**. This includes, as the ultimate strategy, should all other approaches be unsuccessful, the use of Alternative Provision, the ‘assessment and intervention’ placements and ‘turnaround’ placements. The SEND processes are implicit within this pathway, as the approaches described are

appropriate for all our children. The graduated approach is built into the pathway, and this should be used to make decisions as to which stage young people should be included on the SEND register.

We have made localised provision available in terms of specialist sufficiency. We are developing specialist Hubs (and resource bases) in primary and secondary schools and specialist outreach to mainstream early years providers and schools. We are continuing to build constructive relationships with special school headteachers ensuring we commission effectively. Our work with schools on the Balanced Education System is also developing how we deliver to those with additional needs in Alternative Provision. Our Sufficiency strategic group has a clear remit to ensure the right provision is in place for all young people (SEND and AP).

Birmingham has a local anomaly in terms of SEN Support funding for individuals which are sometimes delivered through SEND Support Provision Plans (SSPP). SSPPs are used by the Local Authority as the mechanism by which mainstream settings can apply for additional funding, over and above element 1 and 2 funding, for pupils who do not have an EHCP. This may be interpreted as the local authority paying to keep pupils at SEN Support. The reality is different but a comprehensive review of the use of SSPPs is underway. The level of EHCP applications leading to a no to assess decision suggests SEN support is not yet consistently delivered across Birmingham and that some schools might not have a robust understanding of what they should be offering within their own resources.

The local partnership via BCC, BCT, the ICB and increasingly with BPCF are working collaboratively to jointly commission the services required to meet the needs of our cyp with additional



needs. Examples include the Balanced System for therapy to support improved outcomes and reduce waiting times and co-producing the DLP programmes of work to reduce suspensions and exclusions across education settings and improve progress and attainment for those at SEN Support. And as described earlier in this SEF our short breaks offer has been jointly commissioned between BCC and BCT, offering a range of holiday, evening and weekend support; and activities across the city to 3000 children, young people and their families. In addition, BCT commissions intensive family support, home support services and overnight short breaks provision delivered through residential or fostering options.

Spotlight on practice

The Special School Outreach Support (**SSOS**) is a well-received programme (funded through the DLP programme) that gives mainstream schools and settings access to specialist expertise from Birmingham’s special schools to support our children and young people with SEND.



SSOS providers offer additional specialist expertise to educational settings requesting support across the city by working collaboratively with education staff across the city to support the learning goals of pupils with special educational needs and disabilities. SSOS staff work alongside existing SEND Advisory Service and EPS to provide additional capacity.

Lessons learned will be embedded and sustained as ‘business as usual’ as part of any commissioning and school improvement activity going forward.

Areas of focus

Our ambition is to eliminate pupils being excluded from school. Our trends for certain groups are poor and in particular, the rate of suspensions and exclusions for those with additional needs and the attendance for cyp in AP are very poor, particularly at secondary school age. This suggests that settings are not making as much use of the inclusion support that is available on an outreach basis from our attendance team(s), support services, special schools and AP providers.

We commissioned 960 AP placements in 2022/23 which is a significant 126% increase since 2017/18. In 2022/23 71% of AP pupils were eligible for Free School Meals.

	2017/18	2018/19	2019/20	2020/21	2021/22	2022/23
Headcount	424	525	540	634	920	960

Headcount for alternative provision, local authority funded placements, pupil counts in Birmingham between 2017/18 and 2022/23

Schools are also commissioning a significant number of AP placements. 551 placements in 2022/23.

	2022/23
Total	551
Education setting with URN	516
Non-maintained further education college	1
One on one tuition	2
Other unregistered provider	16
Registered provider with UKPRN	14
Work based placement	2

Number of pupils for school arranged alternative provision, by placement in Birmingham 2022/23

	2013/14	2014/15	2015/16	2016/17	2017/18	2018/19	2020/21	2021/22
Authorised absence rate	26.6%	22.8%	18.3%	17.7%	17.2%	14.7%	14.2%	18.1%
No. of authorised absence sessions	52,249	51,263	51,474	47,379	38,779	30,905	38,154	38,154
No. of overall absence sessions	76,536	81,053	91,971	86,061	95,791	88,449	67,065	90,683
No. of persistent absentees (10% or more missed)	769	837	884	838	902	862	674	932
No. of pupil enrolments	953	1,054	1,253	1,190	1,183	1,123	892	1,037
No. of schools	4	5	7	7	7	7	7	7
No. of sessions possible	196,454	224,451	281,964	267,450	269,898	262,964	217,514	210,842
No. of Severely absent pupils (50% or more missed)	307	329	304	286	323	286	219	420
No. of unauthorised absence sessions	24,287	29,790	40,497	38,682	49,475	49,670	36,160	52,529
Overall absence rate	39.0%	36.1%	32.6%	32.2%	35.5%	33.6%	30.8%	43.0%
% of persistent absentees (10% or more missed)	80.7%	79.4%	70.6%	70.4%	76.2%	76.8%	75.6%	89.9%
% of severely absent pupils (50% or more missed)	32.2%	31.2%	24.3%	24.0%	27.3%	25.5%	24.6%	40.5%
Unauthorised absence rate	12.4%	13.3%	14.4%	14.5%	18.3%	18.9%	16.6%	24.9%

Absence rates in state-funded alternative provision, full academic years' in Birmingham between 2013/14 and 2021/22

White British pupils remain substantially over-represented, and AP continues to peak in ages 15 and 16. LA funded AP is largely provided for boys. Over twice as many boys than girls. This relative proportion is diminishing over the years.

Absence from AP settings is very high at 43% and persistent absenteeism being 90%. This is a consistent theme having been high for a number of years (see table below) and we are undertaking a redesign of the attendance service within BCC. This will lead to different ways of supporting and challenging education providers to support cyp within their setting to ensure we deliver truly inclusive practice across our city.

Poor attendance and high exclusions in our AP settings suggests that the system has not previously been designed around the needs of CYP. These factors also suggest that there is a need for the partnership to develop a shared understanding of when placement in AP is appropriate in line with the national SEND and AP improvement plan concept of a 'three tier' AP offer; and what works to provide good

outcomes for CYP accessing AP.

Area leaders are aware of the need to refresh the commissioning of AP places. We are know that there are children and young people waiting for a special school, resource base place or alternative provision place.

Maintenance of placements in settings that are not appropriate for the needs of our children and young people is detrimental to their progress, attainment and wellbeing, so this remains a priority area for us.

We attach particular importance to leadership across systems of care to support greater integration of services around the needs of SEND pupils/patients and those attending AP. Leadership across systems is under-developed in the Local Area Partnership and must become a higher priority. The business case for leadership and engagement for improvement is compelling at a time when public services in Birmingham need to deliver unprecedented efficiency savings.

We also have a number of cyp on 'part-time timetables' and need to ascertain why and at what times these are being implemented. We are working with our school partners and support services to agree a way forward. We do not yet have accurate and timely information about the use of part time timetables in our schools. This is a concern both academically but also from a safeguarding perspective. Many of those on part time timetables have SEND and hence are vulnerable to exploitation in the community.

Delivering the early years, special school and resource base places needed between now and September 2024 (and through to 2028/29) to provide for our children and young people that are out of school/awaiting placement/or currently going through assessment, transition or tribunal appeals remains a priority.

Commissioning sufficient accessible transport to meet the increased demand for services including guide dogs and assistance dogs as well as clearer signs and timetables, easy-read information, trained customer-facing staff, and accessible toilets, priority seating and ramps, is a priority.

Our approach to joint commissioning between the ICB and the council includes Section 75 arrangements. The main areas of service that are commissioned in this way include:

- occupational therapy,
- speech and language therapy,
- enteral feeding and
- autism support.

These established arrangements provide the basis to extend joint commissioning to include all community-based commissioning.

Whilst the current arrangements allow for an aligned approach

to take place, the council and ICB intend to develop a much closer, integrated commissioning hub. Developments are overseen by the ICB Place Board, ensuring that progress is tracked at chief executive level.

The pace on this has slowed, due to savings in the city council because of the S 114 notice, and within the ICB. These savings have led to changes and reductions in the council commissioning structure and changes to ICB arrangements. The integrated hub will eventually oversee commissioning of all community NHS services which support our children and young people with SEND. The draft timetable below (still awaiting BCC and ICB governance and approval processes) sets the proposed key activity towards integration:

- Workforce – October to April 2025 increasingly establish joint working and relationships – including joint team meetings
- Section 75 arrangements - April 2025 to September 2025 Develop and agree new section 75 arrangements. October 2025 to March 2026 Approval (through relevant governance arrangements) revised section 75 arrangements
- Joint working – October 2024 to September 2025 Identify and agree commissioning priorities and timeframes, Identify and agree joint working processes & governance. Implement in shadow form
- Joint commissioning function goes live April to June 2025

The integrated commissioning hub will deliver more closely aligned services to support children, young people and their families with SEND. It will offer the opportunity to reduce any overlaps and hand offs that currently exist and enable exploration of opportunities to co- commission (with parents and young people) these services in the future.

Action

SEND and AP Action Plan ref	Intention - What we want	Implementation - What we're doing about it
<p>Priority 1 Early Identification</p>	<p>Reduced suspensions and exclusions and improved attendance at AP settings.</p>	<p>Putting our children and young people/ our service users first and deliver interventions to support setting staff and families as appropriate.</p> <p>Redesign of the BCC attendance teams to offer more effective and timely support, not just administration and process.</p> <p>Increased work to build capacity and share expertise across and within education settings from professionals and partners.</p>
<p>Priority 5 Localities</p>	<p>Manage placement sufficiency.</p>	<p>Agree additional funding for capital expansion.</p>
<p>Priority 9 Safeguarding</p>	<p>We want to reduce the number of part-time timetables being used by schools.</p> <p>Reduce absenteeism with AP and ensure AP provision is fit for purpose and delivering value for money as well as progress and outcome for CYP.</p>	<p>Education Early Help and Safeguarding to work with the Birmingham Children Safeguarding Partnership and The Children's Trust to promote the importance of regular school and setting attendance and investigate the causes of poor attendance. Stressing schools/settings legal safeguarding obligations. And linking with Child Safeguarding Practice Reviews (CSPRs).</p> <p>In terms of post 16, align safeguarding oversight across Safeguarding Adult Reviews (SARs) and Domestic Homicide Reviews (DHRs).</p> <p>Continue the work of the AP working group to deliver better and more outcome focused AP for our cyp, considering where AP can deliver greatest impact.</p>



Leaders evaluate services and make improvements.

Positive signs

In December 2023 we met with the Department for Education (DfE) SEND and NHS England for our 24-month progress review against our Accelerated Progress Plan (**APP**). On Tuesday 6th February 2024, we received written confirmation that we had been able to demonstrate sufficient progress in addressing one of the 13 significant weaknesses identified at the initial inspection: 'The initial inspection found that there was a lack of an overarching approach or joined-up strategy for improving provision and outcomes for children and young people with special educational needs and/or disabilities (SEND)'. This means that we will no longer be formally monitored in this area and is testament to the hard work colleagues across the partnership are undertaking to ensure we deliver continual change and improvement within the SEND service. Please do take a few minutes to read the **favourable comments** we received.

We evaluated the level of staffing in the SENAR service and identified that the structure was not fit for purpose. As a result, we undertook a successful redesign in 2023 and secured substantial investment in the service to improve the experiences of families when navigating the processes related to requesting, assessing, issuing, and maintaining EHCPs. Despite the recent S114 notice, the investment has been honoured in financial year 2024-2025.

Collaborative working and strategic oversight have led to clear strategic and operational commitments from partners with leaders working together to evaluate services and make improvements.

- Professionals are improving services for families by collectively embracing the partnership vision at both strategic and operational levels.
- The Education, Health and Care Needs Assessment process has improved timeliness and families have clearer understanding of the processes being followed. Uncertainty for parents, carers, our children, and schools has reduced.
- The Local Offer website has improved so that families and professionals can now access information and resources much more efficiently. For example: a fully functioning 'search bar' is now in place ensuring easier navigation.
- The Annual Review process is more robust, ensuring Educational Health Care Plans (EHCP) are up-to-date and accurate.
- Phase Transfers have been delivered on time and effectively – 99% in 2023 compared to 0% in 2021.
- Our Health colleagues have invested heavily in additional capacity to convert thousands of referrals into assessments and ensure waiting times are maintained despite increased referral rates.
- We have developed and launched a Co-production Framework and Charter and are embedding co-production as a key principle of the way we want to work with and for children, young people and their families.
- Funding and implementing the 'Balanced System' to deliver effective support for SLCN at universal, targeted and specialist levels from across the children's workforce.
- We have improved the way in which families and SENCOs

can contact the SENAR service through dedicated phone numbers for each caseworker.

Clarity and stability of roles is supporting us to develop a sustainable and consistent offer across Birmingham. All local area partners contributed to the SEND strategy. This was co-produced and resulted in a clear vision, values and set of priorities for the local area understood by all. The structures and the ambitions within this document have informed this SEN Self Evaluation and we know where we are improving, where we still need to improve and where we have significant challenges to overcome to offer better experiences for our children, young people and their families with additional needs.

Local leaders recently delivered a multi-agency inclusion conference and a school improvement conference alongside many virtual seminars and workshops to outline the direction of travel and the quality standards expected for all teams in the local area. Regular workshops and events are planned to ensure we maintain momentum and reach a common ground on how we best support our SEND and AP children and young people.

We are developing the systems by which we use the data, qualitative feedback and the lived experiences of service users to then co-produce service design. Moving forward this will continue to be a focus and we will ensure the SEND and AP Improvement Plan captures the key performance indicators, measures of success and the methods of evidencing improvements.

Spotlight on practice

After feedback from stakeholders across the Local Area Partnership, the full version of the refreshed **Birmingham SEND Co-production Framework & Charter** is now on the Local Offer website as is the **Birmingham SEND Co-**

production Award Scheme.

We are promoting both across all our education, health, and social care settings.

Areas of focus

Use of data

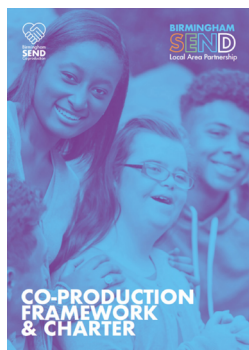
Whilst we have improved our approach to the collection and the accuracy of data, we continue developing a more comprehensive set of “data dashboards” to help leaders identify priority areas to improve practice.


We are working to ensure all community health providers upload data to the community services dataset. And for this data to be linked to pupil level data as specified in the Common Basic Data Set of school management information systems. Both data sets will interoperate with the Child Protection Information Sharing (CP-IS) protocol.

We will refresh our current **Information Sharing Agreement** to ensure the local authority and health partners can share data considering all new technology and legislation.

School Improvement

We need to accelerate the journey to being classified as at least “good” by Ofsted in respect of many of our schools and settings, including some of our special schools. A relatively high proportion of our schools and early years, are still on an improvement journey towards being graded as Good or Outstanding by Ofsted. We will do all we can to accelerate this journey by working in localities, building on the work of our 6 secondary networks and 16 primary consortia to strengthen our “ordinarily available” inclusive practice, with multi-agency teams around schools and settings. The local authority is developing a New Relationship with schools which includes developing





revised school improvement model with a focus on inclusion.

Tackling waiting lists and sufficiency of provision

Capacity is and will continue to be an issue across Education, Health and Care services. Birmingham is growing - the population of Birmingham is projected to grow from 1,141,400 in 2018 to 1,186,000 (3.9%) in 2028 and to 1,230,000 (7.8%) by 2038. This growth in demand for services combined with the previously stated workforce gaps across all sectors means we need to do things differently.

We need to reduce the neurodevelopment (ND), autism, and speech and language therapy (SALT) pathway waiting times for assessments as a priority. Improving Access to Psychological Therapies (IAPT) remains a focus. We will continue to increase the proportion of people completing treatment who move to recovery (from IAPT dataset).

We will support providers to refine and prioritise waiting lists, including for those children and young people awaiting a special school, setting or resource base placement, short breaks, supported accommodation, home adaptations and/or personal health care.

Through robust tracking, pupils/patients who are already on a waiting list will be monitored for deterioration and reprioritised accordingly.

Safeguarding, feeling safe and being safe.

We are strengthening Multi-Agency Safeguarding Arrangements for those with additional needs through the Birmingham Safeguarding Children Partnership (BSCP) and Birmingham Safeguarding Adults Board (BSAB).

Quality assurance policies and procedures for all AP providers

are being developed, as well as the embedding of the three-tier continuum of support. We will continue to focus on mental health and wellbeing through links with our Mental Health Support Teams and Senior Mental Health Leads in schools.

Birmingham Safeguarding Children Partnership (BSCP) has overall lead responsibility for ensuring that the government's response to the recommendations from the National Review – safeguarding children with disabilities and complex health needs in residential settings are developed and embedded across our local area.

GPs and Family Hubs

We are currently engaged in a diagnostic exercise following the publication of Phase 2 of the national child safeguarding practice review of our children with disabilities and complex health needs living in residential settings. This work is currently focussed on our commissioning processes, how we listen to our children, young people and their families and how we safeguard them. This is being overseen by Birmingham's Safeguarding Children Partnership and will lead into the development of working groups to embed the operational and strategic changes that will be required following the Government's response to the recommendations made following the national review.

Action

<i>SEND and AP Action Plan ref</i>	<i>Intention - What we want</i>	<i>Implementation - What we're doing about it</i>
<i>Priority Early Identification</i>	<i>Better self-care and resilience.</i>	<i>Putting our children and young people/ our service users first and provide the right care, closer to home, whenever it's needed.</i>
<i>Priority 4 Review of Education</i>	<i>Every school a good school</i>	<i>Developing a New Relationship with schools which includes developing revised school improvement model with a focus on inclusion.</i>
<i>Priority 5 Localities</i>	<i>Sufficiency of provision</i>	<i>Tackling waiting lists and sufficiency of provision.</i>
<i>Priority 7 SEND Partnership</i>	<i>To have ready access to high-quality, well-trained staff.</i>	<i>Reflecting on how to attract, recruit and retain staff to work in Birmingham, including flexible working options, offering hybrid and flexible working where possible, making sure career pathways are as transparent as possible and supporting the wellbeing of our workforce.</i>
<i>Priority 8 Data</i>	<i>Easy access to accurate and informative data on SEND and AP service users and their needs.</i>	<i>Developing a comprehensive set of online multi-agency "data dashboards" to reflect the SEND and AP priorities.</i>
	<i>To update our local area partnership data sharing policy to ensure that health colleagues in provider organisations can share and contribute safely.</i>	<i>A task and finish group is refreshing our Information Sharing Agreement (ISA) to ensure the local authority and health partners can share data considering all new technology and legislation.</i>
<i>Priority 9 Safeguarding</i>	<i>For CYP to feel safe and be safe. The experience of our children with disabilities and complex health needs living in residential settings will be a positive and safe one.</i>	<i>Strengthening Multi-Agency Safeguarding Arrangements for those with additional needs through the Birmingham Safeguarding Children Partnership (BSCP) and Birmingham Safeguarding Adults Board (BSAB). Reviewing our provision for our children with disabilities and complex health needs living in residential settings. We have just completed a diagnostic exercise to understand the current systems that we have in place to understand the lived experience of our children and young people, living in residential settings.</i>



Leaders create an environment in which effective practice and multi-agency working can flourish.

Positive signs

As recognised at the last DfE/NHS Stocktake (December 2023), senior leaders have been effective in delivering clarity for teams via the local area strategies, the collaborative nature of the way in which we are working and the clear, shared vision for how we want to deliver services across Birmingham. We are prioritising the voices, needs, priorities and the rights of our children with additional needs so they play an integral part in our SEN policies and programmes, as well as being involved in the decision-making process; and supporting our teams by establishing the culture and ways of working to deliver effectively for our children and families.

Birmingham and Solihull's Integrated Care System (ICS) has joined a Collaborative with the UK's largest children's charity, Barnardo's, and the Institute of Health Equity to improve the health of our children and young people in the area and ensure they have a say on how services are run in their communities.

Within the Children's Trust, we have an established team of family support workers, overseen by an advanced social work practitioner, who are responsible for seeking and providing advice for EHCNA's and EHCP annual reviews, where these children and young people have not been known to children's services.

The NHS authority for the region will be working with Barnardo's and the Institute of Health Equity over the next three years to devise and co-design a Children and Young People's Health Equity Framework. This will set out new and innovative ways to overcome the barriers which can prevent our children

and young people from having a basic level of physical health and mental wellbeing. The three organisations will work together to develop new tools, resources and programmes to provide practical solutions to ensure our children and young people in the region are not held back by social and environmental factors which can affect health. This includes income, housing or educational status.

Birmingham Children's Trust has prioritised **equality, diversity and inclusivity** in their strategic Business Plan and is committed to improving the experiences of our diverse workforce and the quality of services we provide to our children, young people and their families we work with.

NHS Birmingham and Solihull is committed to commissioning the very best care, recognising that services need to be designed with **equality, diversity and inclusion** at the core of business and decision-making.

Our well attended SEND and AP Improvement Board galvanises the work across our local area. As described in the governance section of this SEF, the SEND and AP Improvement Board drives our strategic direction and monitors the performance of organisations and teams as they deliver the objectives and vision of the local area partnership. It links closely with the Health and Wellbeing Board, and both bring together a range of key services including Birmingham Children's Trust, adults and children's social care, public health, SEND, environment and community safety, elected members, NHS and DfE advisers, education leaders and GPs. Support, challenge and shaping the way in which services deliver are the key priorities for our strategic boards.

Birmingham Safeguarding Children Partnership ensures that

all agencies who work with our children and young people in Birmingham work together to promote the welfare and safety of our children with SEND.

Our community service provision is increasingly being used as an alternative to admission to hospital, and to support those already in hospital towards a timely discharge.

We have a Designated Clinical Officer (DCO) and two Designated Medical Officers (DMOs) which helps us to ensure high quality health and social care input and engagement with the Education, Health and Care needs assessment and planning process.

In line with 'Working Together to Safeguard Children 2023', Birmingham Children's Trust are trialling a Designated Social Care Officer (DSCO), who is working to improve social care advice, understanding and engagement across social work and early help teams.

Our elected members are very active in their support of SEND through the Health and Wellbeing Board and our Education Scrutiny Committee. This helps ensure SEND is a high priority across the Council.

We provide regular SENCO network meetings where key information from the Local Area Partnership is disseminated. There is a high take up at these meetings and key messages can be shared between all service leaders to improve what and how we deliver.

We will attract, develop and support an exceptional and valued workforce

Similar to the national situation, the Local Area Partnership

continues to face skills shortages with a number of positions (e.g.. therapists, educational psychologists) unfilled for significant amounts of time. The biggest issue for the NHS is workforce gaps, which are very significant. Recruitment and retention of school staff to work with complex pupils is a challenge. We are looking at how to attract, recruit and retain staff to work in Birmingham, including offering hybrid and flexible working where possible, making sure career pathways are as transparent as possible and supporting the wellbeing of our workforce.

Spotlight on practice

Birmingham City Council's schools' visits programme continues, with a recent visit to Kings Norton Nursery School by the Director of Children's Services, to meet with headteacher, Nicola Pinnegar and her team. The school has held an Ofsted 'outstanding' grade since 2009 and continues to go from strength to strength. The school's motto, 'To value all children as individuals, promote their confidence and excitement in learning', threads through the curriculum, and they take enormous pride in participating in the UNICEF Rights Respecting Schools programme, having achieved the Silver award, and equally in their status as an Eco-School, having earned Bronze and Silver Eco School awards and Green Flag status.





Areas of focus

Maturing our local area partnership multi agency working

Multi agency working with the Birmingham and Solihull Health and Care Partnership will bring together the NHS, Birmingham City Council adult social services, BCT and our schools and settings and post 16 providers as well as our voluntary, faith, community and social enterprise partners, residents and communities to provide a strong understanding of what works well and what is needed in Birmingham. As well as the ability to integrate local services across education, health and care and the levers to tackle some of the wider things that impact wellbeing like housing and employment.

Fully embedding our Outcomes Framework and processes to amplify the voice of the child/young person in reviewing and subsequently co-producing services that work for them. Strengthening the “We said, we did” approach to emphasise the centrality of our children, young people and their families lived experience. Implementing our Inclusion Charter and embedding the views of our Youth Voice/Parliament group.

Holding weekly meetings to discuss “complex cases” across the local area partnership and the minutes of these are shared with the SEND team and Children’s social care team, so all professionals are always fully informed of what is happening with our children, young people and their families they support. This leads to consistent conversations with children, young people and their families they support.

The SEND and AP improvement Board to review the “Dynamic Support Register” so all professionals working with people with learning disabilities and/ or autism better respond to incidents and

events that enhance the need for a raised support approach.

We want all our children and young people to flourish in Birmingham as successful adults. This means making a positive contribution through work or volunteering. A key element of this will be to reduce the employability gap between our disabled community and those without such additional needs.

Whilst the local area partnership is maturing its multi-agency working with NHS and Social Services there is more to be done to link with our partners in the Department for Work and Pensions and our Chamber of Commerce to ensure that businesses are inclusive and encouraged to provide opportunities and experiences for our young people with learning disabilities.

We want to strengthen our strategy for engaging our children and young people who are placed or educated outside the local area. This includes seeking the views of our children and young people for whom they are responsible but are placed outside of the local area, including:

- those in the youth justice system,
- those in inpatient units,
- those placed in residential schools or colleges,
- those fostered in another local authority.

Schools getting the right help and support for our children at the right time is too often down to escalating to senior people in BCC. Leaders are aware that systems need to be much more transparent.

Our technology systems “don’t talk to each other” - Adult Social Care/ Birmingham Children’s Trust/ SENAR systems do not connect making it difficult to have a single view of the child or their journey.

Action

<i>SEND and AP Action Plan ref</i>	<i>Intention - What we want</i>	<i>Implementation - What we're doing about it</i>
<i>Priority 3 Transitions</i>	<i>For there to be no employability gap between our disabled community and those without such additional needs.</i>	<i>Setting up a task and finish group to link with our partners in the Department for Work and Pensions and our Chamber of Commerce to ensure that businesses are inclusive and encouraged to provide opportunities and experiences for our young people with learning disabilities.</i>
<i>Priority 4 Review of Education</i>	<i>We want to strengthen our strategy for engaging our children and young people who are placed or educated outside the local area.</i>	<i>A task and finish group is seeking the views of our children and young people for whom the LAP is responsible but are placed outside of the local area, including:</i> <ul style="list-style-type: none"> <i>- those in the youth justice system</i> <i>- those in inpatient units</i> <i>- those placed in residential schools or colleges</i> <i>- those fostered in another local authority</i>
<i>Priority 6 Communication</i>	<i>Schools and settings want clear and easily understood protocols for accessing support in a timely manner.</i>	<i>A task and finish group is clarifying and refreshing the guidance on the individual journey from the referral to the support plan, which includes screening, assessment and determination of eligibility.</i>
<i>Priority 8 Data</i>	<i>A single view of the child/young person</i>	<i>Integration and interoperability between adult's, our children's and clinical systems.</i>

GLOSSARY OF TERMS

- **ASQ-3:** Ages and Stages Questionnaire Third Edition
- **Children and Families Act 2014:** Legislation that brought together a number of changes to services for children and young people and families. The changes cover the family justice system, virtual schools for looked after children, adoption, childcare, shared parental leave and flexible working, and services for children and young people with Special Educational Needs and/or Disabilities (SEND). The provisions in the Act which relate to SEND came into force in September 2014.
- **Co-production:** Placing equal value on the contributions of children, young people, parents, carers, and professionals in making decisions and improving the services received and the experiences and outcomes of those living with SEND in Birmingham.
- **Family:** Incorporates parents/carers and anyone seen as 'family members' who directly support and care for children, young people and young adults.
- **Graduated Approach:** Different levels of support in place to meet an individual's need at the right time for them.
- **Inclusion Strategy:** sets out our shared vision, key principles, principles of practice and contextual factors, to ensure that, as partners, we are working together effectively to identify and meet the needs of Birmingham's children, young people and young adults.
- **Local Offer Website:** Website find help, advice and information about the services available for your child or young person from birth to 25 years with a special educational need or disability (SEND).
- **NEET:** Not in education, employment or training.
- **SENCo:** A member of staff of a school or early education setting, who has responsibility for co-ordinating Special Educational Needs and Disabilities (SEND) provision within that school.
- **SEND Code of Practice:** A guide for schools and local education authorities about the help given to children with special educational needs. Schools and local authorities must have regard to the Code when working with a child with Special Educational Needs and Disabilities
- **Services:** Any service across Education, Health and Care, including statutory social care services (including adult social care), supporting children and young people
- **Short Breaks:** Term that describes opportunities that support disabled children and young people to take part in fun activities and develop important skills, while giving their families a chance to have a rest from their caring responsibilities.
- **Special School:** A school which is specially organised to make special educational provision for pupils with Special Educational Needs and Education, Health and Care Plans whose needs cannot be met in a mainstream school.
- **The Balanced System:** A strategic, outcomes-based, whole system framework and suite of tools and templates that can be used to improve the commissioning and delivery of services which benefit from an integrated approach to delivering outcomes for children and young people.
- **Transition:** For every transition stage in a child's life, when they go from home into their first early years setting, from an early years setting into primary school, from primary to secondary school and into post-16 education and adult life. This includes transition to adult Health and Social Care services.