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Catherine Driscoll  
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Mr Paul Maubach, Accountable Officer, NHS Black Country and West Birmingham  
Clinical Commissioning Group  
Matthew Smith, Local Area Nominated Officer, Dudley

Dear Dr Driscoll and Mr Maubach

### **Joint area SEND revisit in Dudley**

Between 31 January and 3 February 2022, Ofsted and the Care Quality Commission (CQC) revisited the area of Dudley to decide whether sufficient progress has been made in addressing each of the areas of significant weakness detailed in the inspection report letter published on 16 July 2019.

As a result of the findings of the initial inspection and in accordance with the Children Act 2004 (Joint Area Reviews) Regulations 2015, Her Majesty's Chief Inspector (HMCI) determined that a written statement of action was required because of significant areas of weakness in the area's practice. HMCI determined that the local authority and the area's clinical commissioning group (CCG) were jointly responsible for submitting the written statement to Ofsted. This was declared fit for purpose on 13 December 2019.

The area has made sufficient progress in addressing eight of the significant weaknesses identified at the initial inspection. The area has not made sufficient progress in addressing six significant weaknesses. This letter outlines our findings from the revisit.

The inspection was led by one of Her Majesty's Inspectors from Ofsted and a Children's Services Inspector from CQC.

Inspectors spoke with children and young people with special educational needs and/or disabilities (SEND), parents and carers, headteachers, special educational needs coordinators (SENCOs), the parent carer forum (PCF) and local authority and NHS officers. Inspectors looked at a range of information about the performance of the area in addressing the 14 significant weaknesses identified at the initial inspection, including the area's improvement plans and self-evaluation. Inspectors also looked at a sample of education, health and care (EHC) plans and evaluated the online local offer. Inspectors considered the responses to the parent and carer survey and the emails sent to Ofsted.

In reaching their judgements, inspectors took account of the impact of the COVID-19 pandemic on SEND arrangements in the area. Inspectors considered a range of information about the impact of the pandemic and explored how the area's plans and actions had been adapted as a result.

## Main findings

- At the initial inspection, inspectors found the following:

**Improvement strategies are not embedded, and they have not had a marked impact on improving outcomes for children and young people with SEND.**

- At the start of the summer term 2021, area leaders established four working groups to review SEND provision for children and young people in Dudley. An external body facilitated this process. Education, health, social care, the PCF, children and young people, and the voluntary sector were represented on these groups. The working groups provided leaders with a clear overview of the area's strengths and the further improvements that needed to be made. Area leaders used the findings to develop and co-produce (a way of working where children and young people, families and those that provide services work together to create a decision or a service that works for them all) the new three-year SEND strategy, which was launched in September 2021. The strategy is child centred and aims to provide children and young people with SEND with the appropriate support and provision so they can achieve their full potential. The local area is making sufficient progress in relation to these aims. However, currently, there are still too many parents and carers who do not have confidence in how their children's SEND needs are being met.
- The SEND oversight group (SOG) monitors the SEND strategy. Education, health, social care and the PCF are represented on this group. The group provides support and challenge relating to specific aspects of the SEND strategy. Area leaders have worked with education settings to promote the strategy and provide training to develop inclusion further across the borough. Currently, half of the education settings in the local area are on board with, and supportive of, the SEND strategy. Setting leaders and SENCOs speak positively about improvements across the local area SEND system. Area leaders are working strategically to bring

on board the remaining education settings to further embed the strategy across the sector. This will build on what has already been achieved.

- The SEND strategy works alongside other improvement strategies. The inclusive pathways strategy was launched in January 2021. The strategy brings relevant agencies together to monitor and provide bespoke, timely support for children and young people, including those with SEND, who are in danger of being excluded. The short-term use of alternative provision is a fundamental aspect of this programme. This approach is having a positive impact on reducing the number of children and young people with SEND who are excluded. So far, this academic year, no child or young person with an EHC plan has been permanently excluded.
- The preparation for adulthood strategy was launched in June 2021. The strategy consists of four pillars linked to education and employment, community inclusion, independent living, and health and well-being. The overall aim is to prepare young people for adulthood. The strategy has already resulted in positive outcomes relating to the number of young people entering employment and apprenticeships. However, there is more work to be done, especially in relation to supporting young people aged over 19 with the most complex needs.

**The area has made sufficient progress to improve this area of weakness.**

- At the initial inspection, inspectors found the following:

**The needs of children and young people with SEND have not been accurately identified or moderated over time.**

- In the past, there was an over-identification of moderate learning difficulties. This meant that the needs of some children and young people had not been accurately identified. As a result, appropriate provision was not put in place and the needs of children and young people were not being met effectively.
- Currently, the needs of children and young people are still not always correctly identified. Area and setting leaders do not have a clear and shared understanding of the difference between identification and assessment of need. Consequently, too many children and young people do not do well academically and socially because suitable provision is still not put into place because their needs are not correctly identified. When the needs of children and young people are accurately identified, this leads to positive outcomes for children and young people, but this does not happen often enough. Area leaders have introduced a range of systems, such as early help protocols and processes and the violence reduction unit, to respond to and enhance the identification of children and young people's needs. However, it is not clear whether those who make the initial decision around the identification of need have the necessary awareness, expertise, knowledge and understanding to identify the needs of children and young people accurately.

**The area has not made sufficient progress to improve this area of weakness.**

- At the initial inspection, inspectors found the following:

**A strategic approach to assessment and provision mapping in Dudley is lacking. There is poor coordination of assessment information between agencies, resulting in fragmented information systems.**

- Area leaders have developed systems and procedures to support the assessment of SEND. There is evidence of a strong partnership between relevant services, such as educational psychology, speech and language, occupational therapy, and the learning support services. When a child has been accurately identified as having SEND by a setting or relevant service, precise assessment provides a greater understanding of this need. Reports are thorough and detailed and are shared with the relevant agencies. They identify what needs to be done as a result of the assessment to promote high-quality outcomes for the child or young person. Area leaders in the partnership have used the assessment information to develop provision mapping across the local area. For example, the development of a range of additional resourced provisions for pupils with social, emotional and mental health needs, and speech, language and communication needs means that more children and young people have their needs met in mainstream schools.

**The area has made sufficient progress to improve this area of weakness.**

- At the initial inspection, inspectors found the following:

**Joint commissioning is underdeveloped. It is not always informed by accurate analysis of performance data, which is required to understand areas of need and gaps in current service provision.**

- The local area does not consistently use data well to collaboratively inform strategic priorities. Area leaders set out plans to improve the effectiveness of commissioning arrangements while considering the current commissioning cycles for different services. However, commissioning decisions were not informed by information contained within the Joint Strategic Needs Assessment.
- Systems and processes are now in place to provide area leaders with relevant performance data. The partnership acknowledges that more needs to be done to make sure that the analysis and use of data support the local area's commissioning decisions to meet children and young people's current and ongoing needs.
- Area leaders have started to identify and implement processes to enable education, health and social care services to work together on strategic priorities. However, parents and carers and young people are not sufficiently involved in developing strategic joint commissioning to assist in identifying commissioning priorities.

**The area has not made sufficient progress to improve this area of weakness.**

- At the initial inspection, inspectors found the following:

**The designated medical officer (DMO) has insufficient capacity to promote SEND agenda across health providers.**

- The recruitment of a designated clinical officer (DCO) to work alongside the DMO has strengthened the focus on children and young people with SEND. This increase in capacity has significantly improved partnership working between the CCG, all health professionals and the local authority, at both strategic and operational levels. There is an improved relationship with the PCF and a recognition of its necessary involvement to ensure that health partners are getting it right for children and young people with SEND.
- Effective training has been delivered to increase health professionals' knowledge and confidence in relation to their SEND responsibilities and their contributions to the statutory assessment process. All health providers completed a baseline survey so that area leaders could gain an understanding of their level of knowledge. Further sessions have been arranged to support the ongoing development of health professionals' knowledge, understanding and expertise.
- Engagement between the DCO and health providers as part of the developing health pathways meetings helped to identify that a new template for requesting health advice for EHC assessments and planning was required. This work has been undertaken in collaboration with the SEN team and health partners to improve the quality of information shared.

**The area has made sufficient progress to improve this area of weakness.**

- At the initial inspection, inspectors found the following:

**Co-production with parents is weak. Co-production at a wider strategic level is underdeveloped.**

- Parents and carers have started to engage with developments in the local partnership through the growth of the recently formed PCF, but this is in the early stages. The PCF work plan is appropriately focused on further promoting this level of strategic engagement. The formulation of the new SEND strategy was co-produced with a range of stakeholders, including the PCF. The improvement of the new local offer has been supported by the direct involvement of parents and carers, children and young people, and community groups.
- Local education providers, health, social care and the voluntary sector speak positively about how they were involved in the co-production and development of improvement strategies, such as the preparation for adulthood strategy. All these actions are supporting the continued development of co-production across the area.

**The area has made sufficient progress to improve this area of weakness.**

- At the initial inspection, inspectors found the following:

**There is a great deal of parental dissatisfaction. The passion and commitment of the various parent groups have not been harnessed. Many parents and carers feel disengaged from the system.**

- Despite developments within the local partnership, there continues to be a high level of parental dissatisfaction. Too many parents and carers continue to feel disengaged from, and let down by, the local area systems for children and young people with SEND. A significant proportion of parents and carers say that services have not improved over time. The concerns of parents and carers link to a wide range of areas, including the statutory assessment process, the timeliness and quality of EHC plans, annual reviews, communication with local area officers, appropriate settings for their children and some of the specialist services, including the child and adolescent mental health services. Area leaders acknowledge that they need to build trust with parents and support them to understand the journey that the local area is on in relation to improving SEND provision. Leaders acknowledge that the level of dissatisfaction is deep rooted and based on long-term issues in the local area, which will take time to address and remedy.

**The area has not made sufficient progress to improve this area of weakness.**

- At the initial inspection, inspectors found the following:

**There is a lack of understanding about inclusion in Dudley. The local area needs to change the culture and develop stakeholder confidence in the system.**

- Area leaders have implemented plans to change the culture of inclusion across the local area. Stakeholder confidence in the system is improving.
- Area leaders and officers work closely with schools, particularly secondary settings, to promote inclusion and make it a higher priority across the sector. School leaders value the headteacher briefings because these promote information-sharing and collaboration across schools. Setting leaders value the role they have played in co-production, especially in relation to the formulation of the SEND strategy and their representation on the SEND oversight group.
- Area leaders have developed the SENCo network to support communication and the development of SEND across mainstream schools. SENCos speak very positively about the network. They say that it supports them in their individual schools and equips them with the skills and expertise to carry out their roles more effectively. SENCos value the contribution that specialist services make to support them to identify, assess and meet the needs of children and young people with SEND.
- Mainstream primary and secondary pupils with SEND say that they feel part of their respective schools. They say that everyone is treated the same. This reflects the positive action taken by area leaders to communicate a greater understanding of inclusion in schools and settings. Pupils say that they feel included in lessons

and all aspects of school life, including extra-curricular clubs. They say that they get the support they need in lessons to help them complete their work. Pupils value the support they get from staff in school. They say that they have a voice in their school, that staff listen to them, and that their views are acted on. Pupils speak positively about the external agencies that come into school to work with them.

- Area leaders know that there is more work to do with schools so that the culture of inclusion spreads more widely and deeply across the local area.

**The area has made sufficient progress to improve this area of weakness.**

- At the initial inspection, inspectors found the following:

**The published local offer is poor. It is underused and difficult to navigate.**

- Area leaders and stakeholders quickly established that information contained within the previous local offer was not fit for purpose. A series of ineffective local offers had eroded provider and parent confidence in the platform.
- Area leaders have systematically reviewed the processes for developing, maintaining and reviewing the local offer. They have carefully considered the experience of a parent or carer accessing the local offer. The site leads with a child or young person's developmental need, rather than service provision, to enable a better navigation pathway through the pages. The platform is available in a variety of different languages and formats.
- The new local offer has been published. It is currently under further review before a formal public launch later in the year. A team has been established to make sure that the local offer is regularly updated. There are positive examples of co-production with parents and carers, local communities, and children and young people to refine the local offer in order to make sure it provides the information needed. Area leaders and those with responsibility for the local offer know that there is more work needed to build the confidence of parents and carers and providers in the local offer. However, there has been sufficient progress to develop a high-quality source of information for all in the borough.

**The area has made sufficient progress to improve this area of weakness.**

- At the initial inspection, inspectors found the following:

**EHC plans are often of poor quality. They are not outcome focused and often lack information about health and social care. Completed EHC plans are often not shared with early years settings.**

- There remains too much inconsistency and variability in the quality of EHC plans. Health and social care involvement is still not sufficient to meet the needs of children and young people with SEND. Area leaders are taking action to improve the statutory assessment process. For example, there is a new team that supports the putting together of EHC plans, and there have been recent

improvements to the quality assurance of plans. However, these are not yet embedded.

- Health partners and the PCF have worked alongside the local authority to develop a more useful EHC plan format so that the needs of the child can be better articulated and understood. However, this progress has not been mirrored when considering a child's social care needs. There is a noticeable absence of social care information in EHC assessments and plans, even if a child is known to social care. Social care officers have begun to address this, but the impact is yet to be seen.
- In some EHC plans, the voices of children, young people and their families are included. The involvement of different services is also identified. However, this is not always the case. The template for the plans is appropriate, but there is a lack of consistency in how well the plans are completed. This means that those accessing the plans do not have a full and complete understanding of a child's or young person's needs. This negatively affects the local area's ability to work with appropriate agencies to meet potentially unmet needs.
- The DCO has led work to improve the quality and consistency of health contributions to the statutory assessment process with the introduction of a template to capture health advice. The template has been adapted to improve the transfer of specialist health advice into meaningful planning for EHC plans. However, health leaders are aware that further work is required to make sure that the relevant information is contained in a child or young person's EHC assessment and plan. This is currently lacking.
- A multi-agency partnership group with representation from the local authority, health partners and the PCF has met to audit the quality of EHC plans. Although this is a positive start, the small sample size reviewed provides a very narrow window of insight into the quality of EHC plans. The DCO has very recently implemented an EHC plan monitoring process, which focuses on the timeliness, quality and appropriateness of advice given and requested. Nevertheless, the impact is not yet evident because the first dataset is not yet available.
- EHC plans are still not consistently shared with all relevant partners. Therapists do not receive a copy of the draft EHC plan to check that the specialist advice has been interpreted correctly. Furthermore, systems to ensure that all health partners consistently receive the final EHC plan are not effective. This means that services working with a child do not receive all the necessary information. It also restricts health and social care partners from working on, and being held to account for, their actions within a plan if they have not had sight of it.

**The area has not made sufficient progress to improve this area of weakness.**

- At the initial inspection, inspectors found the following:

**Pupils with SEND make slower progress than other pupils.**



- Since the initial inspection, area leaders and officers have engaged with a range of school and setting leaders. For example, they work closely with school leaders to raise the profile of SEND across the borough and develop inclusion further. Area leaders have organised training opportunities for school staff and established the SENCo network to support SENCos in their roles. However, in broad terms, children and young people with SEND continue to make slower progress than other pupils. Local area leaders acknowledge that this is not good enough and they are keen to see it improve.
- Outcomes for children with SEND at the end of the early years phase remain disappointing. Similarly, pupils with EHC plans do not achieve well in the Year 1 phonics screening. At the end of the primary phase, the outcomes for pupils with EHC plans in reading, writing and mathematics are not good enough. However, at the end of the primary phase, outcomes are more positive for pupils with SEND who do not have an EHC plan.
- At the end of the secondary phase, outcomes for pupils with SEND are more positive. This has improved since the initial inspection and leaders are rightly proud of the efforts that have led to this.
- At the end of key stage 5, the proportion of students with SEND who are qualified to level 2 and level 3 is too low and means that students are not well prepared for their next steps. The gap is more significant for students with an EHC plan.

**The area has not made sufficient progress to improve this area of weakness.**

- At the initial inspection, inspectors found the following:  
**Pupils with SEND have higher absence and exclusion rates than other pupils.**
- Since the previous inspection, levels of absence and persistent absence for children and young people with SEND have continued to reduce. Area leaders and officers work closely with schools to promote and improve pupils' attendance. This is supported by wider working with the safeguarding and early help teams to support specific families to improve their children's attendance.
- During the pandemic, the local area worked closely with families to promote attendance. In particular, it worked with parents who were anxious about their children returning to school. The local area has become more than just an enforcement agency. For example, it now works alongside the elective home education team.
- There has been a year-on-year reduction in the number of children and young people with SEND being permanently excluded from school. No child or young person with an EHC plan has been permanently excluded this academic year. This positive picture is also reflected in the declining number of children and young people with SEND who receive a fixed-term exclusion.

- The inclusive pathways strategy has supported this improving picture. The strategy encourages joint working between schools and the local authority inclusion team. Children and young people who are at risk of exclusion are monitored closely, and intervention is early. If required, alternative provision is used as a short-term placement to avoid exclusion. The child or young person is then supported to reintegrate into a mainstream setting. This work is aided by the virtual school team, which works closely with children looked after. The virtual school team has a policy that no child looked after will be permanently excluded.

**The area has made sufficient progress to improve this area of weakness.**

- At the initial inspection, inspectors found the following:

**There is a lack of local provision post-19 for young people with the most complex needs.**

- There remains a lack of local post-19 provision for young people with the most complex needs. Currently, there is no provision in the borough for this group of young people. Area leaders have been looking into utilising the borough's further education settings, but no progress has been made with this at the moment. All the current post-19 provision for young people with complex needs is out of borough, it is often part time, and the range is limited. The out-of-borough provision currently used is led by what is available; it is not based on the needs and aspirations of the young person, and so it is often unsuitable. Area leaders know that this is a huge concern for parents.

**The area has not made sufficient progress to improve this area of weakness.**

- At the initial inspection, inspectors found the following:

**Too few young people with SEND progress into employment.**

- The number of young people with EHC plans entering into apprenticeships and employment has increased year on year and there is a continued upward trend. Young people with SEND in education, employment and training is on an upward trend. Area leaders commission the services of Connexions to support this aspect of their work. Connexions supports schools in the delivery of careers education, information, advice and guidance. It also tracks young people from the age of 16 to 18 and intervenes when required to help the young people secure education, employment or training opportunities. Until last year, there were no supported internships in operation, but there are now. However, while the supported internships provide young people with the experience of work, currently this is not translating into permanent employment. The virtual school works closely with children looked after to ensure that they are on the right pathway to help them to secure employment.

**The area has made sufficient progress to improve this area of weakness.**

During the inspection, we considered the impact of COVID-19 on the experiences of children and young people with SEND and their families. We also considered the actions leaders took when schools were only open to some children and young people due to COVID-19 restrictions.

Area leaders had clear systems in place to track and monitor vulnerable children and young people, including those with SEND, during the periods of partial school closures. Individual children and young people were risk assessed and an appropriate response was put in place. During this time, area leaders held weekly keeping-in-touch meetings with headteachers of special schools. Therapeutic and specialist services continued. The pandemic reduced opportunities for professionals to meet in person with children and young people with SEND. This led to a wider use of virtual meetings. However, if there were any concerns about a child or young person, in-person meetings were held, sometimes in family’s gardens. This ensured that the area continued to prioritise the needs of children and young people with SEND.

The area has made sufficient progress in addressing eight of the 14 significant weaknesses identified at the initial inspection. As not all the significant weaknesses have improved, it is for the Department for Education (DfE) and NHS England to determine the next steps. Ofsted and CQC will not carry out any further revisit unless directed to do so by the Secretary of State.

Yours sincerely

Wayne Simner  
**Her Majesty’s Inspector**

| <b>Ofsted</b>                      | <b>Care Quality Commission</b>   |
|------------------------------------|--|
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| Wayne Simner<br>HMI Lead Inspector | Kaye Goodfellow<br>CQC Inspector   |
| Chris Pollitt<br>HMI Inspector     |  |

cc: Department for Education  
 CCGs  
 Director of Public Health for the area  
 Department of Health and Social Care  
 NHS England