



SEND Accelerated Progress Plan

June 2022

Dudley Local Area Partnership

Name of the Local Area	Dudley
Date of Inspection	31 st January - 3 rd February 2022
Date of Publication of the revisit report	23 rd March 2022
Accountable Officers from the LA and CCG	Helen Ellis - Service Director, Early Help/Schools and SEND - Dudley MBC Neill Bucktin - Managing Director, Black Country & West Midlands ICB
SEND and NHS England Advisers	Pat Tate - SEN and Disability Professional Adviser Deborah Ward - NHS England Improvement Adviser

Governance and Accountability Structures and Processes

The governance and oversight of the SEND Improvement Programme is the responsibility of the SEND Oversight Group (SOG). All partners and stakeholders are represented at the bi-monthly SOG meetings together with the DfE in the role of informal advisers. The SOG in turn is accountable to the Children & Young People Board and the Health & Wellbeing Board (**see below Fig 1**). The wider governance structure is shown to illustrate the interdependencies and related workstreams that link the Accelerated Progress Plan (APP) to the continuing SEND Improvement Programme. This is to ensure that, even in the areas of the WSOA where we had made sufficient progress, the work continues to improve delivery in these areas and to embed them into the business-as-usual aspect of the Local Area SEND Service.

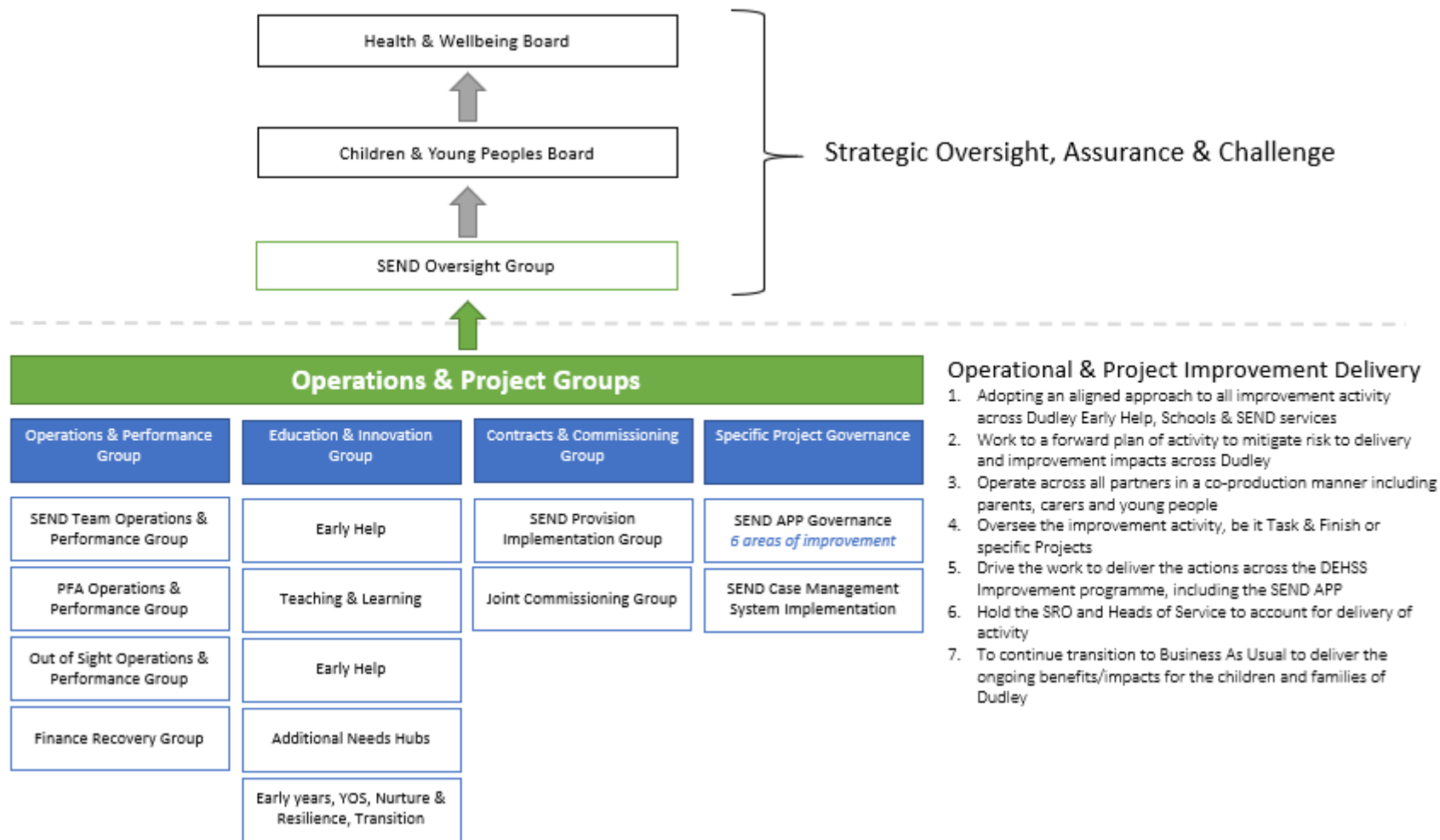
With regards to the specific governance arrangements for the APP, each area of weakness has its own lead and individual workstream consisting of all relevant stakeholders and partners across Education, Health, Social Care, SEND, and the Parent Carer Forum. These workstreams meet monthly to assess the progress against the improvement actions, their impact and success against the agreed KPI's as well as assessing and managing any identified risks and associated mitigation. The day-to-day oversight of the APP is the responsibility of the Head of SEND and CDT (Children with Disabilities Team) with the Programme Manager providing support and technical assistance as required.

The strategic oversight and governance of the APP workstreams is from the bi-monthly SOG meetings who provide the strategic, oversight, governance and challenge on behalf of the Local Area Partnership. SOG performs this strategic role for the four project groups that form the SEND Improvement Programme.

Each APP working group has a jointly developed terms of reference which includes clear accountability, roles, and responsibilities for all members together with the actions, outcomes, and success measures associated with each improvement activity. This is supported by comprehensive risk register and mitigation management and support that enables early identification of the risk but also any issues with the proposed mitigation and the forecasted effect of this on the outcome.

There is an allocated Programme Manager to oversee the delivery of the APPs and associated improvements, who is a member of each of the six working groups to monitor delivery and compile progress reports for SOG and other strategic oversight boards and bodies. Reporting of progress is not restricted solely to the delivery of the APP's actions but will also include progress with our impact score card and consultations and surveys amongst partners and stakeholders, including children and young people, families, and schools that show the improvement in SEND services across the Local Area.

Fig 1.



1. Supporting Statement

(In addition to the detailed Accelerated Progress Plans we have developed for the six relevant areas of weakness we would welcome the support and challenge of the DfE/SIU/NHSEI and have included the areas of support and at which intervals in Appendix A).

As a result of the SEND Local Area inspection in May 2019 Dudley initiated a co-produced and partnership wide Improvement Programme to address the fourteen areas of weakness identified. This is supported by a comprehensive communications strategy that enables us to ensure partners, including families, are fully informed of our actions and progress and are able to provide feedback on the improvements (please see Appendix A for the Communications Strategy).

Feedback from the revisit and our own self-assessment has enabled us to consolidate our view of the reasons why we have not made sufficient progress and what we need to do to address this in the six relevant areas, namely:

The needs of Children & Young People with SEND have not been accurately identified or moderated over time

The local area has focussed its collective efforts on providing regulatory evidence post SEND identification, rather than early identification and assessment (including moderation), workforce development and the existing pathways to support early identification and assessment. This now provides the Local Area with an opportunity to revisit the inter-connectivity of existing work, map the early identification, assessment, and moderation pathways across the maternity, early years, primary, secondary, and further education phases. The action plan for this area details these specific action, outcomes, and success measures.

Parents, carers, and children and young people have been engaged in work to support the strategic approach to assessment, co-ordination of information, and provision mapping where SEND had been identified. Given that this was the focus, rather than early identification and assessment (including moderation), workforce development and the existing pathways to support early identification and assessment, there is now an opportunity to accurately assess the impact of current work across the Local Area with parents, carers, and children and young people, and co-produce support where there are identified areas for development. We will also need to embed this evaluation into our business-as-usual operations and ensure that it is the responsibility of all practitioners.

Joint Commissioning is underdeveloped and not always informed by accurate analysis of data

As the name suggests, the JSNA is a strategic assessment of need across the borough and does not necessarily provide granular level analysis. The approach taken in Dudley has been to provide a “live” analysis that is updated on a regular basis as and when new information becomes available, rather than a single document refreshed at a point in time.

Historic commissioning decisions have therefore been based on need identified on the ground and through the SEND Needs Assessment, rather than directly linked to the JSNA.

Whilst work has taken place on the JSNA and this has been utilised to an extent, there hasn't been a sufficiently visible connection between the JSNA and commissioning actions. To demonstrate progress in the manner expected, the JSNA itself requires further development/refinement to provide clear evidence-based recommendations to the Joint Commissioning Group, particularly in relation to early years.

In addition, commissioning decisions need to be evaluated on the basis of outcome achievement when implemented and subsequently monitored through routine contract review processes within the commissioning cycle, and the approach needs to be Code of Practice compliant.

Parents, carers, and children and young people have been engaged to a limited extent in the commissioning process through stakeholder events. There is a need for parents, carers, and children and young people to be more directly involved in the strategic commissioning decision-making machinery and for them to define how they will know improvements have been embedded.

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

The areas identified within the WSOA December 2019 are mostly completed but it is clear that the impact is yet to be felt by a number of parents and carers in their lived experiences, and it is evident that until this impact is felt the current levels of dissatisfaction will remain. Resolution to this dissatisfaction does not sit solely with the Local Area and Co-production with the PCF is a key feature that needs to continue through our jointly developed work plans and the various working groups.

In addition to this, regular feedback which ensures a full cross representation of the families within the borough is vital. Regular feedback via quality checks and surveys plus a key role for SENDIASS to monitor and feedback results from their data regarding themes will be monitored closely. Key themes to identify areas of concern will be monitored, tracked, and addressed.

EHC plans are often of a poor quality, they do not all contain Health & Social Care needs and are not outcome focused

Following the 2019 inspection, a complete restructure of the SEND Team was identified as an immediate priority in order to add capacity to the team and develop a skilled, knowledgeable, and confident workforce. The recruitment, induction, and training of a new team has taken time to complete, and progress has been impacted by COVID.

Whilst our improved working relationship with health professionals has had a positive impact on the quality of plans there is still a lot more to achieve to ensure that the health assessment always informs the EHC plan appropriately and that processes are in place so that the right advice is sought and draft EHCPs are shared with all practitioners who have contributed to the assessment.

Alongside this, work on the ICT infrastructure has been reviewed and new systems commissioned although the procurement process has proved lengthy and there have been unavoidable delays which have meant that implementation will not now take place until later this year.

At the point of the revisit, we did not have a consistent approach to the assessment of the care needs of all children and young people subject to an EHC needs assessment. This has led to gaps in identifying need and provision and has also impacted on transition to adult services for some of our most vulnerable young people. Progress had been made and in respect of this area of work and we are developing a variety of care pathways so that there is always an assessment of social care need. This has been supported by a system wide restructure that has brought the disabled children's team into the SEND service area, we are also in the process of developing and recruiting to the DCSO role.

Pupils with SEND make slower progress than other pupils

In broad terms, children and young people with SEND continue to make slower progress than other pupils although there has been an historical underperformance in all areas. This was clearly identified in 2019 and the same situation remains, exacerbated by the lack of published data from Covid. Local area leaders acknowledge that this is not good enough and they are keen to see all levels of performance improve including that of pupils with SEND.

There has been a lack of joined up training and planning for Headteachers, SENDCOs, and school staff with regards to meeting the needs of children with SEND, along with a lack of differentiation for SEN Support pupils. Data has also not previously been used to lead driven interventions and a lack of clarity in terms of the improvement needed has been poor.

Our evidence tells us that we need to continue to focus on improving pupil attendance and reducing exclusion rates, increasing attainment in writing and numeracy particularly in early years and supporting pupil wellbeing including, where appropriate, their mental health. All of these are contributory factors to our attainment levels.

Ensuring equity and excellence for all, raising attainment, and closing the poverty related attainment gap will be even more important in light of COVID-19 and learners will need support to re-connect with peers and adults in school post pandemic. They may experience a variety of emotions from relief and happiness to anxiety, anger, and loss. As such, a focus on relationships, health, and wellbeing to raise attainment will be central to the ongoing recovery process.

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

Whilst there has been good progress with developing a co-produced PFA Strategy and establishing effective transition pathways, there is currently no provision in the borough for this group of young people, and although we have been looking into utilising the borough's further education settings no progress has been made with this.

All current post 19 provision for young people with complex needs is out of borough and is led by what is available rather than being based on the needs and aspirations of the young person and we know that this is a huge concern for parents.

This has been caused by the Local Area not having a formal and robust method of identifying the needs of the post 19 cohort and/or forecasting the numbers of provision and where this is required. This will be developed alongside an approach to planning that will focus on the most complex

cases around a personalised approach (personal budgets). We will also ensure that our post 19 provision is wider than just education and is designed to cater for the young people that fall between education and employment.

We have identified the issues behind us not achieving sufficient progress in this area and have set up the structures and co-produced approaches, but we have not yet implemented them.

2. Accelerated Progress Plans

Actions Designed to Lead to Improvement

Red = Not on track, requires intervention.

Amber = On Track.

Green = Action complete.

Blue = Embedded and evidence of impact

1. The needs of Children & Young People with SEND have not been accurately identified or moderated over time. Lead - Scott Jones-Head of Family Solutions Dudley Metropolitan Borough Council.	Our Children, Young People and families will see the following impacts across the SEND Local Area
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Ref	Action	Lead Officer	By When	Action RAG	Measures of Success/Impact	Baseline	3 Months- (Jul 2022)	6 Months- (Oct 2022)	12 Months- (Apr 2023)
1.1	Form a project group with Parent Carer Forum and local area partners to deliver the improvements listed in the Area 2 Action Plan.	Scott Jones-Head of Family Solutions DMBC	Apr-22	Action Complete	Achieving a measurable increase in Parent/Carer satisfaction with identification of needs.	n/a	Baselining completed.	Targets set.	First evaluation completed.
1.2	Map and highlight gaps in early identification, assessment and moderation opportunities across maternity, early years, primary, secondary and further education phases	Scott Jones-Head of Family Solutions DMBC	Jul-22	On Track	Achieving a measurable increase in Parent/Carer satisfaction with identification of needs.	n/a	Baselining completed.	Targets set.	First evaluation completed.
1.3	Map and highlight gaps in provision and interventions to support children and young people's development to ensure their needs are met without needing to unnecessarily have a SEND status.	Scott Jones-Head of Family Solutions DMBC	Jul-22	On Track	Reduction in the number of Children & Young People identified with MLD.	2182	n/a	Touchpoint with stakeholders to assess interim progress.	2% reduction (6% by March 2024).

Ref	Action	Lead Officer	By When	Action RAG	Measures of Success/Impact	Baseline	3 Months- (Jul 2022)	6 Months- (Oct 2022)	12 Months- (Apr 2023)
1.4	Map and highlight gaps in pathways that will better serve the early identification, assessment and moderation of children and young people's emerging developmental needs.	Scott Jones- Head of Family Solutions DMBC	Jul-22	On Track	Reduction in the number of Children & Young People identified with MLD.	2182	n/a	Touchpoint with stakeholders to assess interim progress.	2% reduction (6% by March 2024).
1.5	Assimilate findings of mapping and identification across maternity, early years, primary, secondary and further education phases and share with DfE and NHSEI support prior to presentation at SOG of: Early identification, assessment and moderation. Provision and interventions. Pathways.	Scott Jones- Head of Family Solutions DMBC	Aug-22	On Track	Confirmation of the impact the revised framework has had in improving the identification of needs.	n/a	Baselining completed & targets set.	Touchpoint with stakeholders to assess interim progress.	First evaluation completed.
1.6	Present findings across maternity, early years, primary, secondary and further education phases to SOG of mapping and identification of: Early identification, assessment and moderation. Provision and interventions. Pathways.	Scott Jones- Head of Family Solutions DMBC	Sep-22	On Track	Confirmation of how early identification and associated support services contributed to Parents feeling included in their child's assessment of need.	n/a	Baselining completed & targets set.	Touchpoint with stakeholders to assess interim progress.	First evaluation completed.
1.7	Act on feedback and recommendations made to SOG across the local area via maternity, early years, primary, secondary and further education phases regarding: Early identification, assessment and moderation. Provision and interventions. Pathways. and develop an approach to: Workforce Development. Outcomes. Communication of new or refined approaches to the local area.	Scott Jones- Head of Family Solutions DMBC	Sep-22	On Track	Confirmation of the impact the revised framework has had in improving the identification of needs.	n/a	Baselining completed & targets set.	Touchpoint with stakeholders to assess interim progress.	First evaluation completed.

Ref	Action	Lead Officer	By When	Action RAG	Measures of Success/Impact	Baseline	3 Months- (Jul 2022)	6 Months- (Oct 2022)	12 Months- (Apr 2023)
1.8	Utilise shared learning to develop the Dudley approach to the identification of need (e.g.) 'NHSEI Identification of LD' workshop output) through: <ul style="list-style-type: none"> identifying LD- AHC (Annual Health Check) data source sharing data with partnership 14-18 years / 18-25 years scrutinising the data and develop action plan with partnership to: <ul style="list-style-type: none"> increasing GP LD Registration at 14 years. through EHCP Annual Review process. updating Local Offer re LD AHC's. understanding YP experience of LD-AHC. developing pathway for sharing LD-AHC. action plan with EHCP Annual Review process. raising awareness of GP practices re EHCP holistic assessment status, source of reasonable adjustments, source of assessment supporting information - "say it once". 	Juliet Ridgeway-Dudley Designated Clinical Officer	Oct-22	On Track	Confirmation of the impact the revised framework has had in improving the identification of needs.	n/a	Baselining completed & targets set.	Touchpoint with stakeholders to assess interim progress.	First evaluation completed.

Risk Register

High =material risk to the objectives of the project and requires intervention.

Medium = will cause delay but there is a plan in place to resolve.

Low = could possibly cause delay if not monitored.

Date Raised	Risk	Severity/Impact	Mitigation	Severity/Impact /Post-Mitigation	Notes
25/3/22	Project group made up of PCF members and local area representatives that have reduced capacity due to significant roles in other project groups.	Medium	Early notification of plans and associated actions/timescales to enable adequate planning and prioritisation.	Low	

Date Raised	Risk	Severity/Impact	Mitigation	Severity/Impact /Post-Mitigation	Notes
25/3/22	Given that this is a whole system approach to early identification, assessment and moderation across the maternity, early years, primary, secondary and further education phases, it is unclear at this stage whether the gaps are minimal or significant which could have an impact on the timings of delivery for implementation phase.	Medium	As wide as possible engagement across the system to capture 'all points of the compass' to enable clear understanding of the risks and associated impacts.	Low	
5/4/22	The Dudley approach to identification of needs around MLD does not change to effect the required improvements.	High	Implementation of a system wide revision of Dudley's approach to identification of needs around MLD through a partnership approach factoring in NHSEI's Identification of LD output.	Low	

<p>2. Joint Commissioning is underdeveloped and not always informed by accurate analysis of data. Lead: Neill Bucktin Managing Director, Black Country ICB</p>	<p>Our Children, Young People and families will see the following impacts across the SEND Local Area.</p>
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Ref	Action	Lead Officer	By When	Action RAG	Measures of Success/Impact	Baseline	3 Months- (Jul 2022)	6 Months- (Oct 2022)	12 Months- (Apr 2023)
2.1	Review membership of existing Joint Commissioning Group to ensure appropriate representation from health, public health, education and social care. Invite participation from Parent Carer Forum.	Neill Bucktin Managing Director Black Country ICB	Apr-22	Action Complete	Increased level of parental satisfaction with commissioning plans	n/a	Baseline established	Touchpoint with stakeholders to assess interim progress.	20% increase in numbers of Parents/Carers satisfied.
2.2	Review existing Joint Commissioning Strategy to reflect the SEND Strategy including actions relating to: Engagement activities. Provision of therapy services including speech and language therapy. Quality assurance	Neill Bucktin Managing Director Black Country ICB	Jul-22	On Track	Increase in Parent/Carer satisfaction with the level of their input into the commissioning process.	n/a	Baseline established	Touchpoint with stakeholders to assess interim progress.	20% increase in numbers of Parents/Carers satisfied.
2.3	Invite the Parent Carer Forum to participate in the SEND Joint Commissioning Group and the Children and Young people's Emotional Health and Wellbeing Transformation Group.	Neill Bucktin Managing Director Black Country ICB Linda Cropper Children, Young People and Families Commissioning Manager-DIHC	Jun-22	Action Complete	Increased level of parental satisfaction with commissioning plans.	n/a	Baseline established	Touchpoint with stakeholders to assess interim progress.	20% increase in numbers of Parents/Carers satisfied.
2.4	Review the current JSNA to confirm where it can be updated/refreshed utilising best practice input from neighbours such as Staffordshire.	Jill Edwards Public Health Manager Dudley MBC	Jun-22	Action Complete	Increased levels of parental satisfaction relating to transition arrangements.	n/a	Baseline established	Touchpoint with stakeholders to assess interim progress.	20% increase in the numbers of those satisfied.

Ref	Action	Lead Officer	By When	Action RAG	Measures of Success/Impact	Baseline	3 Months-(Jul 2022)	6 Months-(Oct 2022)	12 Months-(Apr 2023)
2.5	Review Section 3 of Code of Practice. Ensure Joint Commissioning arrangements and strategy address all requirements.	Neill Bucktin Managing Director Black Country ICB	Jul-22	On Track	Increased levels of parental satisfaction relating to transition arrangements.	n/a	Baseline established	Touchpoint with stakeholders to assess interim progress.	20% increase in the numbers of those satisfied.
2.6	Review data requirements and business processes to ensure decisions are data led and intelligence driven, linked to a commissioning cycle and clear JSNA process.	Neill Bucktin Managing Director Black Country ICB Marie Spittle- Head of Integrated Commissioning Dudley MBC Jill Edwards- Public Health Manager Dudley MBC	Sep-22 (to coincide with planning cycle for 22/23) and ongoing	On Track	Increased levels of parental satisfaction relating to transition arrangements.	n/a	Baseline established	Touchpoint with stakeholders to assess interim progress.	20% increase in the numbers of those satisfied.
2.7	Confirm for children with more complex needs how we work collaboratively with our partners to strengthen the resilience of families and settings.	Juliet Ridgeway Dudley DCO	Sep-22	On Track	Reduction in the number of requests for residential placements.	n/a	Baseline established	Touchpoint with stakeholders to assess interim progress.	20% reduction.
2.8	Put in place effective communication with service providers regarding personal budgets/personal health budgets through: <ul style="list-style-type: none"> Local Offer Joint Commissioning Strategy Market Position Statement Market engagement events 	Juliet Ridgeway Dudley DCO	Sep-22	On Track	Increase in uptake of personal budgets/personal health budgets.	n/a	Baseline established	Touchpoint with stakeholders to assess interim progress.	20% increase.
2.9	Confirm that we have developed a market position statement to communicate to the market how it will	Julie Cox	Sep-22	On Track	Increase in number of providers aware	n/a	Baseline established	Touchpoint with stakeholders to	20% increase.

Ref	Action	Lead Officer	By When	Action RAG	Measures of Success/Impact	Baseline	3 Months-(Jul 2022)	6 Months-(Oct 2022)	12 Months-(Apr 2023)
	be rolling out the provision of personal budgets over the next five years.	Dudley Adult Social Care Service Manager			of Council/CCG approach to the use of personal budgets/personal health budgets.			assess interim progress.	
2.10	Confirm that joint commissioning arrangements are leading to improvements in partners working together to support the delivery of outcomes in EHC plans.	Marie Spittle Head of Integrated Commissioning Dudley MBC	Mar-23	On Track	Increase in service provider satisfaction with interactions/communications with Commissioners.	n/a	Baseline established	Touchpoint with stakeholders to assess interim progress.	20% increase
2.11	Confirm there are clear links between commissioners of children's and adult services to ensure a successful transition to adulthood.	Neill Bucktin Managing Director Black Country ICB Marie Spittle- Head of Integrated Commissioning Dudley MBC	Mar-23	On Track	Increased levels of parental satisfaction relating to transition arrangements.	n/a	Baseline established	Touchpoint with stakeholders to assess interim progress.	20% increase

Risk Register

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Date Raised	Risk	Severity/Impact	Mitigation	Severity/Impact /Post-Mitigation	Notes
28/3/22	There is a risk that the JSNA does not properly take account of relevant needs.	Medium	JSNA scoping requirements to be set out in CCG's partnership agreement with Public Health and includes best practice input from neighbours such as Staffordshire.	Low	
28/3/22	There is a risk that commissioning decisions do not take proper account of data and intelligence	Medium	Business case process to require clear explanation of the link between evidence and the decision require.	Low	
28/3/22	There is a risk that parents/carers do not engage in the commissioning process.	Medium	Ensure a continuous approach to engagement with parents/carers through a range of opportunities to be available aside from attendance at commissioning group meetings including specific engagement events on the joint commissioning strategy.	Low	

3. There is a great deal of parental dissatisfaction. The passion and commitment of the various parent groups has not been harnessed. Many parents feel disengaged with the system. Lead: Sue Powell- SEND Team Manager Dudley Metropolitan Borough Council					Our Children, Young People and families will see the following impacts across the SEND Local Area.				
Ref	Action	Lead Officer	By When	Action RAG	Measures of Success/Impact	Baseline	3 Months- (Jul 2022)	6 Months- (Oct 2022)	12 Months- (Apr 2023)
3.1	Ensure that all TOR & work plans for working groups include the 'golden threads' of the hearing the voice of the child and increasing parental satisfaction.	Sue Powell SEND Manager DMBC	Jun-22	Action Complete	Increase in the overall PCF satisfaction rating from their annual survey.	2/5	n/a	Touchpoint with stakeholders to assess interim progress.	3/5
3.2	Work with PCF to analyse survey results to establish priority areas and baseline of Parental/Carer dissatisfaction.	Sue Powell SEND Manager DMBC	Jul-22	On Track	Reduction in the number of SEND complaints across the service.	44 (21/22)	n/a	Touchpoint with stakeholders to assess interim progress.	10% reduction
3.3	Liaise with Local Authority and Healthwatch (PALS) complaints team to coordinate and review SEND complaints across services to enable cross referencing with the PCF survey results.	Sue Powell SEND Manager DMBC	Jul-22	On Track	Reduction in the number of SEND complaints upheld.	11 (21/22)	n/a	Touchpoint with stakeholders to assess interim progress.	10% reduction
3.4	Liaise with SENDIASS to gather data around themes and concerns raised by parents/young people as per reports submitted to Commissioners. This would allow for cross referencing with PCF survey results by SEND Team.	Sue Powell SEND Manager DMBC	Jul-22	On Track	Reduction in the numbers of Tribunals that go to a Tier 1 hearing.	55 (20/21)	n/a	Touchpoint with stakeholders to assess interim progress.	10% reduction
3.5	Set up a formal process of evaluating Parent/Carer experience at various stages of access to SEND services such as: <ul style="list-style-type: none"> annual reviews completed assessments. 	Sue Powell SEND Manager DMBC	Jul-22	On Track	Increase in the overall PCF satisfaction rating from their annual survey.	2/5	n/a	Touchpoint with stakeholders to assess interim progress.	3/5

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Date Raised	Risk	Severity/Impact	Mitigation	Severity/Impact /Post-Mitigation	Notes
29/3/22	Other areas of weakness work streams do not deliver the required improvements to increase parental/carer satisfaction.	Medium	Early visibility of other areas work plans to flag any potential issues and working closely with all APP leads to offer support and shared learning where relevant.	Low	
29/3/22	Project group members have reduced capacity due to significant roles in other project groups.	Medium	Early notification of plans and associated actions/timescales to enable adequate planning and prioritisation.	Low	

<p>4. EHC plans are often of a poor quality, they do not all contain Health & Social Care needs and are not outcome focused. Lead: Sue Powell-SEND Team Manager Dudley Metropolitan Borough Council.</p>	<p>Our Children, Young People and families will see the following impacts across the SEND Local Area.</p>
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Ref	Action	Lead Officer	By When	Action RAG	Measures of Success/Impact	Baseline	3 Months- (Jul 2022)	6 Months- (Oct 2022)	12 Months- (Apr 2023)
4.1	High quality EHC needs assessment. Review and update 20 week process to include yes to a plan meeting embedded within the 20 week timescale. Meeting will identify any additional advice required and aspirations of the CYP and outcomes sought.	Julia Dean Head of SEND DMBC	Jun-22	Action Complete	Increase in number of assessments that will have included a meeting with the SEN case officer within 2 weeks of agreeing to the assessment.	0%	20%	40%	60% increase
4.2	Ensure a process is in place to identify and follow up late advice and late advice/plans to be monitored.	Julia Dean Head of SEND DMBC	Jul-22	On Track	A measurable increase in Parent/Carer satisfaction with the quality of EHCP's.	Baseline to be confirmed.	n/a	Touchpoint with stakeholders to assess interim progress.	60% increase
4.3	Ensure updated assessment request paperwork is in place. Training materials developed to support appropriate request for EHCNA Review and update current 20 week process and publish revised process on the LO.	Julia Dean Head of SEND DMBC	Sep-22	On Track	Reduction in the numbers of complaints made against the SEND Team.	44 (2021/2022)	n/a	Touchpoint with stakeholders to assess interim progress.	10% reduction
4.4	Establish a multi-agency panel/s to make decisions about whether to undertake an EHCNA/issue and EHCP these will include: TOR. Criteria for assessment. Updated assessment request paperwork. Training materials in place to support settings to submit appropriate request for EHCNA. SEN team handbook to be reviewed and updated.	Julia Dean Head of SEND DMBC	Sep-22	On Track	Increase in parents/YP satisfaction with the assessment process.	n/a	Baseline confirmed.	50%	60% of parents/YP submitting feedback agree that the assessment process was a

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									positive experience.
4.5	Ensure that the performance review process for SEND Case officers and team managers includes targets relating to 20 week timescale.	Sue Powell SEND Manager DMBC	Jul-22	On Track	Increase in the number of EHCPs issued within 20 weeks.	47%	n/a	Touchpoint with stakeholders to assess interim progress.	60% increase
4.6	High quality new EHC Plans. Ensure there is a skilled team of case officers in place able to write a high quality EHCP's.	Julia Dean Head of SEND DMBC	Jul-22	On Track	Increase in the number of assessment officers stating they feel able to undertake their assessment role with confidence and have a good knowledge of the statutory responsibilities of the LA.	n/a	Baseline confirmed.	Touchpoint with stakeholders to assess interim progress.	90% increase
4.7	Ensure a multi-agency panel at 16 weeks is established that will QA proposed EHCPs prior to issuing.	Julia Dean Head of SEND DMBC	Jul-22	On Track	Dip sampling of new EHCPs shows an increase in the number of final EHCPs that are COP compliant.	n/a	Baseline confirmed.	Touchpoint with stakeholders to assess interim progress.	75% increase
4.8	Put in place an agreed multi-agency QA framework/tool that includes participation for the LA, Health, Social Care and Education.	Julia Dean Head of SEND DMBC Juliet Ridgeway Dudley DCO	Jul-22	On Track	Dip sampling of new EHCPs shows an increase in the number of final EHCPs that are of a good	0	n/a	Touchpoint with stakeholders to assess interim progress.	60% increase

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		Karen Johnson Head of Children's Services DMBC			standard across all areas as measured by our QA tool.				
4.9	Establish a Co-produced social care pathway.	Karen Johnson Head of Children's Services DMBC	Sep-22	On Track	New EHCPs will show an increase in the number where there has been an assessment of care need undertaken.	n/a	Baseline confirmed.	Touchpoint with stakeholders to assess interim progress.	75% increase
4.10	Ensure training plan is in place to support knowledge and skills development across those agencies providing information to support the EHC needs assessment.	Julia Dean Head of SEND DMBC	Oct-22	On Track	Increase in the number of final EHCPs with social care provision identified in Section H demonstrating the required standard against agreed framework.	n/a	Baseline confirmed.	Touchpoint with stakeholders to assess interim progress.	60% increase
4.11	Ensure that the SEND Case Officers Annual review process includes relevant targets and monitoring of new EHC Plans.	Sue Powell SEND Manager DMBC	Jul-22	On Track	Reduction in the numbers of complaints made against the SEND Team.	44 (2021/2022)	n/a	Touchpoint with stakeholders to assess interim progress.	10% reduction
4.12	High quality existing EHC Plans. Ensure a Co-produced Annual Review guidance is developed and agreed.	Julia Dean Head of SEND DMBC	Sep-22	On Track	Increase in numbers of Annual Reviews meeting the	n/a	Baseline confirmed.	Touchpoint with stakeholders to assess	60% increase

Ref	Action	Lead Officer	By When	Action RAG	Measures of Success/Impact	Baseline	3 Months- (Jul 2022)	6 Months- (Oct 2022)	12 Months- (Apr 2023)
					statutory timescales for completion of the process.			interim progress.	
					Increase in the number of Parents/Young People satisfaction with the Annual Review process.	n/a	Baseline confirmed.	50%	75% increase in the numbers of Parents/Young People satisfied.
4.13	Develop and establish systems to monitor existing EHCPs.	Julia Dean Head of SEND DMBC	Nov-22	On Track	Dip sampling of existing EHCPs shows an increase in the number that are of a good standard across all areas.	n/a	Baseline confirmed.	Touchpoint with stakeholders to assess interim progress.	50% increase.
					Dip sampling of EHCPs shows an increase in the number that have long term outcomes appropriately updated at the end of a Key Stage.	n/a	Baseline confirmed.	Touchpoint with stakeholders to assess interim progress.	80% increase.

Risk Register

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Low = could possibly cause delay if not monitored.

Date Raised	Risk	Severity/Impact	Mitigation	Severity/Impact /Post-Mitigation	Notes
29/3/22	Other areas of weakness work streams do not deliver the required improvements to increase parental/carer satisfaction.	Medium	Early visibility of other areas work plans to flag any potential issues and working closely with all APP leads to offer support and shared learning where relevant.	Low	
30/03/22	Lack of engagement and/or knowledge of partner agencies supporting the EHC assessment process will result in incomplete assessment and poor quality EHCPS.	High	Development of DSCO role to support : Social care assessment. Embed Early Help within SEND process Training for SC staff. Provide and monitor ongoing training for health staff through DCO to ensure it remains effective.	Low	
30/03/22	Plan writers do not have sufficient skills to produce high quality plans.	High	Regular CPD for SEND Team Case Officers. Development of dedicated assessment officers. Performance management system introduced to support specific CPD/training.	Low	
6/4/22	SEN not identified at an early stage within mainstream schools.	Medium	Support for SENCos through toolkit. Centralised CPD for SEN and regular network meetings. SEND involvement within school improvement processes.	Low	
6/4/22	An increased number of children considered to have SEND could place additional burden on SEND System that could impact on quality of EHCPS.	Medium	Partnership working with school improvement. Develop alternative support pathways across all agencies. Partner wide programmes to support 'catch up' with broader remit than academic attainment.	Low	
7/04/22	Implementation of caseload management system further delayed meaning data not collated.	Low	Utilise non electronic systems that are already in place.	Low	

5. Pupils with SEND make slower progress than other pupils. Lead: Martyn Palfreyman-Head of Education Outcomes & Inclusion Dudley Metropolitan Borough Council.	Our Children, Young People and families will see the following impacts across the SEND Local Area
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Ref	Action	Lead Officer	By When	Action RAG	Measures of Success/Impact	Baseline	3 Months- (Jul 2022)	6 Months- (Oct 2022)	12 Months- (Apr 2023)
5.1	Leadership at All levels. Develop leadership opportunities and training at all levels in order to further develop capacity and improve outcomes.	Martyn Palfreyman Head of Education Outcomes & Inclusion DMBC	Sep-22	On Track	Leaders have increased confidence in delivering an inclusive offer to all learners with high aspirations for all children.	n/a	Baseline confirmed and target set.	Touchpoint with stakeholders to assess interim progress.	First evaluation completed.
5.2	Review our school improvement planning framework to ensure a robust approach across all multi agency teams including Health, which is proportionate and builds capacity within the system with a focus on the graduated provision model.	Martyn Palfreyman Head of Education Outcomes & Inclusion DMBC	Jul-22	On Track	Leaders have increased confidence in delivering an inclusive offer to all learners with high aspirations for all children.	n/a	Baseline confirmed and target set.	Touchpoint with stakeholders to assess interim progress.	First evaluation completed.
5.3	Create opportunities for staff, pupils and parents to feel empowered to take forward school improvement priorities.	Martyn Palfreyman Head of Education Outcomes & Inclusion DMBC	Sep-22	On Track	Increased numbers attending network meetings, moderation meetings, support through clusters within IEYS increases.	n/a	Baseline confirmed and target set.	Touchpoint with stakeholders to assess interim progress.	First evaluation completed.
5.4	Strengthen collaborative quality improvement activities across our schools, local management groups and regional improvement collaboratives to drive improvement.	Martyn Palfreyman Head of Education	Sep-22	On Track	Achieve a measurable increase in Parent/Carer	n/a	Baseline confirmed and target set.	Touchpoint with stakeholders to	First evaluation completed.

Ref	Action	Lead Officer	By When	Action RAG	Measures of Success/Impact	Baseline	3 Months- (Jul 2022)	6 Months- (Oct 2022)	12 Months- (Apr 2023)
		Outcomes & Inclusion DMBC			satisfaction with the Education Service.			assess interim progress.	
5.5	Quality First Teaching & Learning. Ensure that the curriculum in all settings is successfully adapted, designed or developed to be ambitious for all pupils, developing their knowledge, skills and abilities to apply what they know and can do with increasing fluency and independence.	Martyn Palfreyman Head of Education Outcomes & Inclusion DMBC	Sep-22	On Track	Increase at the end of key stage 5, the proportion of students with SEND who are qualified to level 2 and level 3.	n/a	Baseline confirmed.	Touchpoint with stakeholders to assess interim progress.	First evaluation (Summer 2023)
5.6	Ensure that all literacy and numeracy supports and frameworks are able to build future learning and recognises the key importance of health and wellbeing in relation to learner success.	Martyn Palfreyman Head of Education Outcomes & Inclusion DMBC	Sep-22	On Track	Measures of pupil progress in the EY data dashboard increases.	n/a	Baseline confirmed.	Touchpoint with stakeholders to assess interim progress.	First evaluation (Summer 2023)
5.7	Embed moderation activities to share good practice, make informed judgements in relation to pupil progress and ensure consistent approaches.	Martyn Palfreyman Head of Education Outcomes & Inclusion DMBC	Sep-22	On Track	Increase at the end of key stage 5, the proportion of students with SEND who are qualified to level 2 and level 3.	n/a	Baseline confirmed.	Touchpoint with stakeholders to assess interim progress.	First evaluation (Summer 2023)
5.8	Identification. To employ action research and improvement methodologies to improve outcomes and measure impact of interventions and pedagogical approaches.	Martyn Palfreyman Head of Education Outcomes & Inclusion DMBC	Sept-22	On Track	The numbers of practitioners stating they can influence good quality practice to raise achievement and outcomes increases.	n/a	Baseline confirmed and target set.	Touchpoint with stakeholders to assess interim progress.	First evaluation completed.
5.9	To ensure that interventions are continually evaluated for impact on children's progress and attainment.	Martyn Palfreyman Martyn Palfreyman	Sept-22	On Track	The numbers of practitioners stating they can influence good	n/a	Baseline confirmed and target set.	Touchpoint with stakeholders to	First evaluation completed.

Ref	Action	Lead Officer	By When	Action RAG	Measures of Success/Impact	Baseline	3 Months- (Jul 2022)	6 Months- (Oct 2022)	12 Months- (Apr 2023)
		Head of Education Outcomes & Inclusion DMBC			quality practice to raise achievement and outcomes increases.			assess interim progress.	
5.10	To promote partnership working between education practitioners, educational psychologists and allied health professionals to inform practice and shape decision-making.	Martyn Palfreyman Head of Education Outcomes & Inclusion DMBC	Sept-22	On Track	Number of Children presenting below cut off at 2yr health and development review (DR) referred to IEYS for universal and targeted interventions reduces.	n/a	Baseline confirmed.	Touchpoint with stakeholders to assess interim progress.	First evaluation (Summer 2023)
5.11	To use PP and Recovery Funding to interrupt the cycle of deprivation and impact positively on children and young people's progress and attainment.	Martyn Palfreyman Head of Education Outcomes & Inclusion DMBC	Sept-22	On Track	Number of Children presenting below cut off at 2yr health and development review (DR) referred to IEYS for universal and targeted interventions reduces.	n/a	Baseline confirmed.	Touchpoint with stakeholders to assess interim progress.	First evaluation (Summer 2023)
5.12	Data Driven Intervention. Define how data can be used intelligently at all levels of the system to help drive improvement.	Martyn Palfreyman Head of Education	Sep-22	On Track	Achieve a measurable increase in Parent/Carer	n/a	Baseline confirmed and target set.	Touchpoint with stakeholders to	First evaluation completed.

Ref	Action	Lead Officer	By When	Action RAG	Measures of Success/Impact	Baseline	3 Months- (Jul 2022)	6 Months- (Oct 2022)	12 Months- (Apr 2023)
		Outcomes & Inclusion DMBC			satisfaction with the Education Service.			assess interim progress.	
5.13	Build the capacity and confidence of school practitioners to generate, understand and analyse a range of data in order for them to know the story of the individual, class or school setting and make informed decisions to support the learner journey.	Martyn Palfreyman Head of Education Outcomes & Inclusion DMBC	Sept-22	On Track	Numbers of staff / practitioner attending network meetings, moderation meetings, workshops / training increases.	n/a	Baseline confirmed and target set.	Touchpoint with stakeholders to assess interim progress.	First evaluation completed.
5.14	Develop a range of qualitative and quantitative data to set aspirational but achievable targets, for excellence and equity.	Martyn Palfreyman Head of Education Outcomes & Inclusion DMBC	Sep-22	On Track	Achieve a measurable increase in Parent/Carer satisfaction with the Education Service.	n/a	Baseline confirmed and target set.	Touchpoint with stakeholders to assess interim progress.	First evaluation completed.
5.15	Family Engagement. Define what is needed to support and promote engagement with families, parents and carers and the wider community to support children's learning.	Martyn Palfreyman Head of Education Outcomes & Inclusion DMBC	Sep-22	On Track	The number of schools with parent clubs increases.	n/a	Baseline confirmed and target set.	Touchpoint with stakeholders to assess interim progress.	First evaluation completed.
5.16	Define what is needed to promote opportunities for family learning to encourage family members to learn together and foster positive attitudes to lifelong learning.	Martyn Palfreyman Head of Education Outcomes & Inclusion DMBC	Sep-22	On Track	The numbers attending parenting courses at schools or family centres increases.	n/a	Baseline confirmed and target set.	Touchpoint with stakeholders to assess interim progress.	First evaluation completed.
5.17	Develop targeted programmes to break the inter-generational cycles of deprivation and low attainment.	Martyn Palfreyman Head of	Sep-22	On Track	The numbers of families that feel better about	n/a	Baseline confirmed	Touchpoint with stakeholders to	First evaluation completed.

Ref	Action	Lead Officer	By When	Action RAG	Measures of Success/Impact	Baseline	3 Months- (Jul 2022)	6 Months- (Oct 2022)	12 Months- (Apr 2023)
		Education Outcomes & Inclusion DMBC			learning together increases.		and target set.	assess interim progress.	

Risk Register

High =material risk to the objectives of the project and requires intervention.

Medium = will cause delay but there is a plan in place to resolve.

Low = could possibly cause delay if not monitored.

Date Raised	Risk	Severity/Impact	Mitigation	Severity/Impact /Post-Mitigation	Notes
29/3/22	Other areas of weakness work streams do not deliver the required improvements to increase parental/carer satisfaction.	Medium	Early visibility of other areas work plans to flag any potential issues and working closely with all APP leads to offer support and shared learning where relevant.	Low	
29/3/22	Leaders fail to understand the key requirements of the actions needed moving forward.	Medium	Robust leadership forums and HT groups established and implemented quickly and efficiently with non-attendance challenged and acted upon.	Low	
29/3/22	Fragmentation of the school system leads to SILOs which operate outside of collaborative practice.	Medium	Collaborative network forums established across both LA schools and MATS and across different council teams – records of attendees kept for all meetings and networks with follow up to non-attendees and those not connected or collaborating.	Low	
29/3/22	Early Years remodel is delayed and impacts delivery and potential outcomes.	Medium	New structure is now in place and recruitment underway for additional staff.	Low	
29/3/22	Data is used ineffectively to provide suitable benchmarks.	Medium	School profiles are generated in a timely way to ensure consistency of data.	Low	
29/3/22	Intervention is not timely and doesn't lead to successful practice	Medium	Bespoke intervention is clear and planned and shared with all stakeholders with timely review.	Low	
29/3/22	Family engagement is poor or not prioritised and has no impact on children's learning and outcomes.	Medium	Family engagement plans are in place for all settings with a clear SEF and project overview of where this is happening, when and why.	Low	

<p>6. There is a lack of local provision post-19 for young people with the most complex needs. Lead: Emma Matthews-Head of Dudley Disability Services Dudley Metropolitan Borough Council.</p>	<p>Our Children, Young People and families will see the following impacts across the SEND Local Area</p>
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Ref	Action	Lead Officer	By When	Action RAG	Measures of Success/Impact	Baseline	3 Months- (Jul 2022)	6 Months- (Oct 2022)	12 Months- (Apr 2023)
6.1	Develop a project structure to monitor and drive progress around this area.	Emma Matthews-Head of Dudley Disability Service	Jun-22	Action Complete	Achieve a measurable increase in Parent/Carer satisfaction with post 19 provision.	0	Baseline established	5% increase	20% 2 years 40% 5 years 90%
6.2	Establish a robust data set re young people coming through requiring provision post 19.	John Wood-Dudley Adult Social Care Service Manager	Jul-22	On Track	Increase in the numbers of Young People that have in Borough provision.	0	Baseline established	5% increase	10% increase 25% increase (April 2024) All young people offered an in-borough option April 2027)
6.3	Carry out a consultation exercise with young people and their families around post 19 provision for young people with complex needs.	Julie Cox-Dudley Adult Social Care Service Manager	Jul-22	On Track	Numbers of young people that are satisfied with their post 19 provision increases.	0	Baseline established	20% increase	75% 2 years 100%
6.4	Establish an agreed vision of what post 19 provision in Dudley looks like.	Emma Matthews-Head of Dudley Disability Service	Sep-22	On Track	Numbers of young people achieving their agreed outcomes increases.	0	Baseline established	Short- and medium-term plans for achieving outcomes in place for 100%	75% 2 years 100%
6.5	Carry out a review in line with the outcomes in the Preparing for Adulthood/Transition and SEND Strategies	Julie Cox-Dudley Adult Social Care	Sep-22	On Track	The number of young people and families agreeing that	0	Baseline established	50%	100%

Ref	Action	Lead Officer	By When	Action RAG	Measures of Success/Impact	Baseline	3 Months- (Jul 2022)	6 Months- (Oct 2022)	12 Months- (Apr 2023)
	of current post 19 provision for young people with complex needs	Service Manager			they are being heard in terms of provision needs increases.				
6.6	Develop a joined up commissioning plan for post 19 provision for young people with complex needs that includes all partners including Health through: <ul style="list-style-type: none"> Analysing the needs profile of this cohort. Engagement with the families and young people to understand their needs. Ensuring that suitable local in provision is in place as a result. 	Julie Cox-Dudley Adult Social Care Service Manager	Sep-22	On Track	Increase in the numbers of Young People that have in Borough provision.	0	Baseline established	5%	10% increase 25% increase (April 2024) All young people offered an in-borough option April 2027)
6.7	Ensure quality assurance process within DDS identify improvements required in assessment and support planning. <ul style="list-style-type: none"> Case auditing tools developed. Case auditing process to start. Supervision to use feedback from auditing process to support reflection and development. Training needs identified and training needs met. Develop feedback tool for young people in relation to their experiences of assessment. 	Emma Matthews-Head of Dudley Disability Service	Sep-22	On Track	The number of young people and families agreeing that they are being heard in terms of provision needs increases.	0	Baseline established	50%	100%
6.8	Ensure assessments are person centred and outcomes focused and identify the short, medium and long-term outcomes, including where relevant Post 19 Health related that young people want to achieve through: <ul style="list-style-type: none"> Preparing for Adulthood personal guides that will be developed with 	Emma Matthews-Head of Dudley Disability Service	Sep-22	On Track	The number of young people and families agreeing that they are being heard in terms of	0	Baseline established	50% increase	100%

Ref	Action	Lead Officer	By When	Action RAG	Measures of Success/Impact	Baseline	3 Months- (Jul 2022)	6 Months- (Oct 2022)	12 Months- (Apr 2023)
	<p>young people and their families will identify all unmet outcomes including Health.</p> <ul style="list-style-type: none"> • Ensure any relevant input from Annual GP Health Checks are captured. • Auditing tool will look at quality of assessment in relation to being person centred and outcomes focused. • When PFA personal guides are introduced auditing tool will check that these are reflected in the assessment. 				provision needs increases.				
6.9	<p>Ensure support plans clearly identify how support aims to enable achievement of outcomes through:</p> <ul style="list-style-type: none"> • An auditing tool that will look at quality of support planning. • Ensuring when PFA personal guides are introduced auditing tool will check that activities to meet unmet outcomes are reflected in the support planning. 	Emma Matthews- Head of Dudley Disability Service	Sep-22	On Track	Numbers of young people achieving their agreed outcomes increases.	0	Baseline established	Short- and medium-term plans for achieving outcomes in place for 100%	75% 2 years 100%
6.10	<p>Ensure PFA support workers are in place and working with young people by:</p> <ul style="list-style-type: none"> • Recruitment of PFA support workers • Co-producing PFA personal guide tool • Agreeing criteria for young people from age 14 that will be able to access PFA support. 	Emma Matthews- Head of Dudley Disability Service	Mar-23	On Track	Numbers of young people achieving their agreed outcomes increases.	0	Baseline established	Short- and medium-term plans for achieving outcomes in place for 100%	75% 2 years 100%

Risk Register

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Date Raised	Risk	Severity/Impact	Mitigation	Severity/Impact /Post-Mitigation	Notes
29/3/22	Other areas of weakness work streams do not deliver the required improvements to increase parental/carer satisfaction.	Medium	Early visibility of other areas work plans to flag any potential issues and working closely with all APP leads to offer support and shared learning where relevant.	Low	
05/04/22	Recruitment issues in DDS have impact on PFA workers and social workers.	Medium	Recruitment plan in place.	Low	
05/04/22	Low response to satisfaction surveys.	Medium	Ensure surveys are accessible and available in a range of formats. They supported by stakeholders so everyone understands why a response is required and how information will be used.	Low	
05/04/22	Commissioning activity required cannot be delivered in timescale to delivered required impact re satisfaction.	Medium	Robust commissioning plan to be developed that reflects views of parent/carers and young people. Communication plan will ensure parents/carers and young people are kept fully informed and involved in developments.	Low	
05/04/22	Market is not able to deliver in borough the services needed to deliver the required improvements.	Medium	Commissioning plan to include market engagement and development.	Low	
07/04/22	That there will be no real change for young people.	Medium	Clear KPI monitoring as well as outcomes monitoring will track progress of changes. Actions will be tracked via the PFA governance structure. Feedback and the PFA workers will ensure that changes are having the desired impact on young people's outcomes.	Low	
07/04/22	Poor communication between adults and children services will impact on result.	Medium	The PFA high needs working group will lead on this work and drive it forward. This group includes representatives from both adults and Childrens services and this group will ensure that communication is clear and effective.	Low	

Date Raised	Risk	Severity/Impact	Mitigation	Severity/Impact /Post-Mitigation	Notes
07/04/22	Young people who have a range of complex needs but would not meet eligibility criteria for Adults services will not benefit or be able access the opportunities commissioned.	Medium	The PFA groups will ensure that these young people's needs are considered.	Low	

Appendix A

SEND Communications Strategy



SEND Comms
Strategy June 2022.c

DfE/SIU/NHSEI Support Requests

Short Term (1-3 months)	Medium Term (3-6 months)	Long Term 6-12 months)
Informal feedback on APP development.	Informal feedback on APP plan progress.	Informal feedback on APP plan progress.
Attending initial improvement group for EHCP's.	Feedback on specific improvement groups progress.	Feedback on specific improvement groups progress.
Signposting towards relevant best practice.	Formal review meetings and feedback.	Holding 'Deep Dives' to assess impacts on the ground.