

Area SEND inspection of Dorset Local Area Partnership

Inspection dates: 11 to 15 March 2024

Dates of previous inspection: 23 to 27 January 2017

Inspection outcome

The local area partnership's special educational needs and/or disabilities (SEND) arrangements typically lead to positive experiences and outcomes for children and young people with SEND. The local area partnership is taking action where improvements are needed.

The next full area SEND inspection will be within approximately five years.

Ofsted and the Quality Care Commission (CQC) ask that the local area partnership updates and publishes its strategic plan based on the recommendations set out in this report.

Information about the local area partnership

Dorset Council and the NHS Dorset Integrated Care Board (ICB) are jointly responsible for the planning and commissioning of services for children and young people with SEND in Dorset.

The commissioning of health services changed across England in 2022. On 1 July 2022, NHS Dorset ICB became responsible for the commissioning of health services in Dorset.

On the 1 April 2019, Dorset local authority's boundaries changed. Dorset's boundaries changed to form Dorset, and Bournemouth, Christchurch and Poole local authorities. The executive director for children's services has been in post for a sustained period of time. There have been more recent changes to some senior leadership posts in the local authority services for children and families and within the ICB.

Dorset Council commissions a range of alternative provision (AP). These providers offer education for children or young people who have, for example, been unable to attend a school due to their social, emotional or medical needs, and for those who have been, or may be at risk of, being permanently excluded. The local area partnership publishes a directory of AP that it has checked for suitability. This includes providers such as four local authority learning centres and a number of independent providers.

What is it like to be a child or young person with SEND in this area?

Children and young people with SEND and their families are placed at the heart of all that leaders do. Effective co-production across the partnership ensures that the needs of children and young people lead decision-making. This culture of working together results in continual improvement to secure the best possible outcomes for children, young people and their families. These outcomes are clearly focused on education, employment, more independent living, participating in society and being as healthy as possible across education, health and care.

The voice of children and young people with SEND is highly valued. Leaders are developing creative ways to listen to young people. Examples within 'Dorset Youth Voice' include the development of the Young Ambassadors role, Dorset Youth Council and the Vision Support Service Student Council. Engagement with the DPCC (Dorset Parent and Carers Council, which is Dorset's parent carer forum) ensures highly effective two-way communication between families and the partnership. Consequently, many parents and carers feel they are true partners when planning their own provision and improvements generally. Parents, carers, children and young people typically speak positively about how they are supported to have better experiences.

The children and young people with SEND who are most vulnerable have their views represented well in shaping the support they receive. This is exemplified by the commissioning of AP and education other than at school provision, as well as for those in care. Particular groups, such as those who do not communicate with words or live out of the local area, are given particular attention. Long-term permanence is considered for children and young people in care. Careful planning about the right type of home for the child, both short and long term, and whether this is with family, foster care or residential care, is well-considered.

Leaders' knowledge of the children and young people in Dorset is evident. Even so, the partnership continues to explore innovative approaches to ensure that children, young people and their families can get the right help at the right time. The co-design of strategies such as the Belonging Framework and the Birth to Settled Adulthood plan have evolved from the partnership's knowledge of their children and young people. This knowledge is shared by the full range of partners, including practitioners and the DPCC. However, this could be strengthened further by more adept use of the data and information available to leaders. In turn, this will further improve the work already started to meet the needs and aspirations of young people as they transition into post-16 destinations and beyond.

Children and young people, as well as their families, are growing in confidence in local services. This is a result of local area leaders developing a knowledgeable workforce across the multi-agency partnership. Creative strategies and approaches are implemented successfully because people have the right expertise. Leaders have focused on making sure that any new plans are sustainable.

The shared aim of the local area is to improve the experience of children and young people who are placed in AP. This ambitious vision is strongly rooted in the Belonging Framework. Leaders ensure that AP is subject to a robust quality assurance process. This provides the necessary assurances about managing risk and safeguarding, including monitoring attendance. The four learning centres, as the local area's maintained alternative providers, are developing a best practice model. They are identifying the most effective approaches to meet the needs of children and young people, prioritising increased attendance and re-engagement with education.

What is the area partnership doing that is effective?

- Leaders in Dorset are ambitious for children and young people with SEND. Jointly commissioned services are well established. Local area partners work effectively with families to co-produce the diagnostic assessment pathway. This ensures that families are more aware that children's care and support needs can often be met without the need for a diagnosis. Leaders across education, health and care know their area well. They are committed to use what they know to ensure that every child or young person has their needs identified accurately and met consistently.
- The established culture of collaborative working across the partnership is a real strength. The locality team, including family hubs model, allows the partnership to work with the uniqueness of each of the six localities within Dorset. Staff share an understanding of high expectations, statutory responsibilities and the importance of integrated conversations about individual children and young people. SEND family workers support schools and families in the community so that help and advice is easily accessible.
- The timeliness and quality of education, health and care (EHC) plans is improving. This is informed through a robust quality assurance process. Local area leaders have mitigated some of the delays in reviewing and keeping these up to date. More recent plans show a clearer picture of the child or young person's experiences and aspirations.
- Children's transition into school is a strength of the partnership. Practitioners in early years feel valued, heard and well-supported by the teams around them. This includes portage and the early years advisory teams within locality teams, including family hubs. Additionally, family workers support schools and families in the community, so that help and advice are easily accessible. This enables a greater understanding of the community, consistency and close multi-agency working. As a result, planning and design of services are improving.
- The dynamic support register (DSR) is in development. However, at risk children and young people are being identified by multi-agency partners. Individual children and young people are risk-rated through regular meetings, and support packages are put in place to reduce the risk of escalation.
- The Special Educational Needs and Disabilities Information and Advice Support Service (SENDIASS) has redesigned its approach to responding to the increasing requests for independent information and guidance. This has strengthened its ability to manage available resources and continue to provide timely and effective

support. This includes, for example, a triage process for referrals into the service so that support can be prioritised more successfully.

- There is support in place for children and young people and their families when they are waiting on the neurodevelopmental pathway or sometimes for other assessments. Families can access further advice as well as being signposted to other support services. Practitioners receive specialist training to maximise the impact they can have when working face to face with families. For example, family workers assess the need for window locks and door sensors to provide additional safety measures while children and young people await occupational therapy assessments.
- Typically, children and young people who receive direct payments and short breaks have their needs assessed appropriately with the right level of involvement. The views of families and other agencies are sought to provide a joined-up approach and gain a clear understanding of identified needs. Effective systems are in place to oversee and monitor children and young people who are in receipt of direct payments, but, equally, families can access commissioned services if this is more suitable to them. The attendance of early help practitioners at annual reviews results in the ability to re-explore family needs, should these needs escalate or change.
- Many children and young people receive an effective service from speech and language therapists. The 'Balanced System' is being embedded through pre-school provisions, and there are currently no children waiting for an assessment. The 'Ready, S.T.E.A.D.I, Chat' sessions are available across the local area, both virtually and face to face. Children are benefiting from an initial triage appointment, with a communication plan provided. The necessary onward pathway can then be determined more appropriately so that the right support is provided at the right time.
- Children and families benefit from comprehensive delivery of the healthy child programme, including the ante-natal check, with all mandated visits being commissioned. This helps to identify children's needs in a timely way.
- Children and young people can access early support for emotional health and well-being through a range of commissioned services provided by the local authority, local schools and the voluntary sector. Mental health support teams work with many of the primary and secondary schools across the local area. This is making it easier to access these services. The partnership has well-developed plans to introduce teams in the remaining schools in the near future.
- Positive investment in housing, designed with young people's personal and social needs in mind, enabling young people living in accommodation that meets their needs and aspirations. Local area leaders' clear understanding ensures that young people do not become socially isolated and instead are able to maintain positive relationships with peers and be active participants in the communities where they live.
- There is strong oversight of children and young people in care living in homes away from Dorset. They are not considered 'out of sight, out of mind'. There is

increased oversight of children's progress and experience by social workers and quality assurance reviewing officers, particularly when there are issues of concern, such as allegations made against staff or a less than good Ofsted judgement.

- Training and development across the partnership are highly effective. Leaders have well-considered transformation plans. There is significant investment to ensure that practitioners at all levels have the necessary expertise to deliver the partnership's ambitious strategies. For example, ICB leaders proactively engage with Dorset SENDIASS so that its support staff are better equipped to address questions about EHC plans. This helps to mitigate demand on services and so target the right support at the right time.
- To further improve the offer for children and young people with SEND, leaders, at all levels, reflect on their practice and decisions, seek challenge and, where necessary, make the changes required. The local area makes connections between key strategic partners, for example by engaging school leaders and the ICB in the independently chaired Education Board in order to drive forward necessary changes.

What does the area partnership need to do better?

- There remains work to do to ensure timely and effective reviews of EHC plans, particularly in older plans and to support the early identification of aspirations and provision post-16 and beyond. This is necessary to ensure that sufficiency of provision beyond post-16 can be carefully considered and planned.
- Academic outcomes for children and young people, including those with SEND, at key stage 2 and key stage 4, are lower than national outcomes. Leaders have correctly identified specific aspects to focus on, particularly within key stage 2, such as girls' understanding of mathematics and boys' writing skills. The impact of this work is not yet evident.
- The local area partnership has a wealth of data and information available which is not being used as well as it could be to plan future provision. Leaders acknowledge that there is more to be done to strengthen their quality assurance of the impact of their actions and decisions.
- There is a recognised need to increase the availability of overnight short breaks for young adults with the most complex needs. Local leaders recognise that the current arrangements to identify, assess and support children's emotional, social and mental ill health need improvement. Even so, positive co-production across the partnership, including with the DPCC, has led to an ambitious, needs-led vision. This is driving the strategy to reconfigure and develop services.
- Waiting times for neurodevelopmental assessment for children remain too long. This causes some frustration for practitioners and families alike. Although cases are assessed according to need, elements of the multi-agency assessment pathway for school-age children may take place at different times. This adds to potential delays in the assessment process, which continue to cause families distress. Young people aged 16 years and above, who are referred to the

neurodevelopmental pathway, are at risk of not being assessed before they are 18 years old. At that point, they would require a referral to adult pathways. As a result, this raises some concerns about this service being able to cater for their specific needs.

- There remain some weaknesses in the partnership’s monitoring of waiting times for children and young people accessing services, such as Gateway assessments or core child and adolescent mental health services. Local area leaders’ methods of recording and maintaining oversight of children at risk of attending accident and emergency rooms or mental health wards are not fully effective. Leaders recognise this is a gap and they have well-considered plans in place to increase the monitoring and evaluation of these processes to keep vulnerable children and young people safe.
- There are some challenges about the efficiency in referral processes. These can add unnecessary delays and barriers, such as the expectations for referrals to community paediatrics.
- The partnership is working towards establishing a more formal DSR and the necessary key-worker roles that support this to fully comply with statutory guidance. This will ensure that there is more effective oversight of those vulnerable children and young people in line with to NHS England guidelines.

Areas for improvement

Areas for improvement
Leaders across education, health and social care should strengthen their use of the robust qualitative and quantitative information they hold. This will enable them to continually analyse and evaluate the impact of their, often innovative, work to improve the outcomes for children and young people with SEND.
Leaders across the partnership should ensure that their quality assurance and annual review processes, particularly in relation to preparation for adulthood, are as robust, precise and of the same high-quality as seen in the more recent education, health and care plans.

Local area partnership details

Local authority	Integrated care board
Dorset Council	Dorset ICB
Theresa Leavy, Executive Director of Children's Services	Patricia Miller (OBE)
www.dorsetcouncil.gov.uk	www.nhsdorset.nhs.uk
Dorset County Hall Colliton Park Dorchester Dorset DT1 1XJ	Vespasian House Barrack Road Dorchester Dorset DT1 1TS

Information about this inspection

This inspection was carried out at the request of the Secretary of State for Education under section 20(1)(a) of the Children Act 2004.

The inspection was led by one of His Majesty's Inspectors (HMI) from Ofsted, with a team of inspectors, including: two HMIs from education and social care and an Ofsted Inspector from education; a lead Children's Services Inspector from the Care Quality Commission (CQC); and another Children's Services Inspector from the CQC.

Inspection team

Ofsted

Leanne Thirlby, Ofsted HMI Lead inspector
Sarah Canto, Ofsted HMI
Karina Kulawik, Ofsted Inspector

Care Quality Commission

Daniel Carrick, CQC Lead inspector
Lea Pickerill, CQC inspector

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Piccadilly Gate
Store Street
Manchester
M1 2WD

T: 0300 123 1231
Textphone: 0161 618 8524
E: enquiries@ofsted.gov.uk
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