People & Health Scrutiny Committee

Provision of EHCP Support Inquiry Final Report Date: March 2026

1. Foreword from Chair
2. Panel Membership
3. Aims of the Inquiry
4. Witnesses
5. Inquiry Approach
6. Evidence Base and Further Lines of Inquiry
7. Conclusion and Recommendations
8. Next Steps

1. Foreword from the Chair

Having a child with additional health and education needs can be daunting in a challenging and difficult time, Dorset Council should be providing the best support that it can for these families.

Under the SEND Code of Practice (0-25) the Council has a statutory duty to identify, assess and meet the needs of children and young people with SEND.

As elected members, we frequently hear from parents and carers who face significant obstacles in securing the support their children need. These families already manage the daily demands associated with SEND and should not experience further stress navigating complex systems.

The Dorset Council Plan 2024-2029 identifies “Communities for All” as a key priority, including improving educational attainment and delivering joined-up locality services partnership with the NHS, Health & Wellbeing Board and the Integrated Care Partnership. Dorset is a trailblazer for the Families First for Children Pathfinder, committing to place families at the centre of service design and delivery.

Ensuring timely and effective support for vulnerable children and young people is essential to help them achieve their potential.

Data driven analysis highlighted the need for the Scrutiny Committee to undertake a comprehensive review of EHCP processes, from initial assessment through to delivery and annual review.

At the outset of the inquiry, Dorset’s performance on EHCP timeliness aligned with national benchmarking at 63%. However, this still meant that more than one in three children were not receiving plans on time, leaving families increasingly frustrated and anxious.

Performance data indicated that there were significant issues both in terms of demand, capacity and service quality. The scrutiny function is aimed at providing critical friend challenge to decision makers in our county and supporting residents by providing a route through which their voice and concerns can be heard.

The review has been affected by delays in arranging stakeholder meetings and the implementation of the new case-management system. This contributed to a decline in EHCP timeliness (22.6% in Sept 2025) and a period without reliable performance data. Although Q4

2025 data showed an improvement to 35.82% against a 75% target, performance remains below the level that originally triggered the inquiry, meaning that two out of three children are not receiving their plans on time. In the view of the panel the target should be 100% to ensure all children have the appropriate educational support in place.

Annual reviews issued on time stood at 50% in September 2025, with no Q4 2025 data currently available.

In May 2025, Dorset Council reaffirmed its commitment to the UN Rights of the Child, aiming to be a Rights Respecting Council and embedding these principles into local policy. Despite this, the panel was not able to directly engage with children and young people despite several requests. We are grateful to the Parent Carer Forum for facilitating a focus group of parents with lived experience to meet with the us allowing for a better understanding of the issues they face.

Following the scrutiny inquiry we have identified key areas for improvement including:

- ensure statutory timelines for assessments and reviews are met
- reviewing caseloads and workforce capacity
- strengthening communication protocols
- evaluating the effectiveness of digital modernisation
- Improving partnership working with health partners
- analysing complaints and tribunals outcomes
- embedding the voice of children and young people in service design and evaluation

Meeting statutory duties is essential to improving the quality, timeliness, and accuracy of support. Getting it right early gives families and children the best start and ultimately delivers longer-term efficiencies for the Council.

I would like to thank all contributors including the senior leadership and staff within the Children's Services Directorate, the Dorset Parent Carer Council, SENDIASS, Schools and the NHS. Progress is being made and we remain committed to monitoring improvements, providing constructive challenge and ensuring that services meet the needs of children and young people across Dorset.

Councillor Toni Coombs
Chair of the Panel and the People & Health Scrutiny Committee

2. Panel Membership

The panel consisted of three members drawn from the membership of the People and Health Scrutiny Committee.

Cllr Toni Coombs chaired the panel and is the Chairman of the People and Health Scrutiny Committee. She was previously Cabinet Member for Young People between 2004-2014 at Dorset County Council.

Cllr Jane Somper is the Vice-Chairman of the People and Health Scrutiny Committee. She has previous experience as Cabinet Member for Adults and Housing from 2023-2024 and as Lead Member for Safeguarding from 2020-2023.

Cllr Bridget Bolwell is a member of the People and Health Scrutiny Committee and is Chair of the Corporate Parenting Board. Previously she has been a SENCO at a local school.

3. Aims of the Inquiry

The People and Health Scrutiny Committee undertook this inquiry to examine the effectiveness of the Education, Health and Care Plan (EHCP) process in Dorset.

The inquiry was prompted by:

- concerns raised by families regarding delays and communication
- performance data relating to EHCP timeliness
- the increasing demand for SEND services locally and nationally.

The aim of the inquiry was to understand the challenges facing the system, consider the experiences of families and practitioners, and identify areas where improvements could support better outcomes for children and young people with special educational needs and disabilities.

4. Witnesses

At the Inquiry Day on 12 May 2025, the panel met with a wide range of witnesses from local organisations. The full list of witnesses and the timetable for the Inquiry Day is appended to this report.

Following the inquiry day, the panel held further evidence gathering and follow up sessions with parents and NHS Dorset.

The session with parents took place on 21 November 2025 and included the following witnesses:

- 3 parents of children with EHCP's
- Cllr Andy Todd, as a parent with a lived experience of EHCP's
- Lesley Mellor – Chair, Dorset Parent Carer Council

The session with NHS Dorset took place on 26 January 2026 and included the following witnesses:

- Chloe Morley – Designated Clinical Officer for SEND
- Pam O'Shea – Chief Nursing Officer
- Tanya Hamilton-Fletcher – Operations Manager

5. Inquiry Approach

The panel considered evidence relating to EHCP services through a series of scrutiny meetings and evidence sessions.

These included:

- presentations from council officers
- discussion of performance information and service data
- engagement with parents and carers, schools SENCOs, NHS Dorset
- consideration of national SEND policy and statutory guidance.

This approach enabled the panel to examine the EHCP process from multiple perspectives and identify areas where improvements may be required.

6. Evidence Base and Further Lines of Enquiry

The panel gathered evidence from a range of sources including:

- performance reports on EHCP timeliness
- evidence from council officers and service leads
- feedback from parents and carers
- feedback from schools and SENCOs
- feedback from NHS Dorset
- information relating to tribunal cases and complaints
- national policy and statutory guidance relating to SEND

This evidence informed the panel's findings and the recommendations set out in this report.

a. Communication with Parents and Children

The panel met with parents on two occasions through the Dorset Parent Carer Council. The panel have been unable to meet directly with children and young people to hear their lived experience directly, despite several requests. In May 2025 Dorset Council reaffirmed its commitment to the principles and provisions of the UN Rights of the Child and aiming to be a Rights Respecting Council; and that it would integrate these into local policies and practices.

Issue Raised	Current Response / Position	Gap Identified	Impact / Consequence
Parents feel 'fobbed off', especially around EHCP decisions and annual reviews.	A new case management system and parent portal are being introduced.	The portal is still in internal rollout and not yet accessible to parents. Staff report regular updates but parents report the opposite.	Parents feel poorly informed and frustrated, reducing trust in the system.
Feedback on amended plans	Decision letters are issued following amendments.	Amended plans are not always provided	Risk of not meeting case law requirements (Devon ruling) and

		alongside decision letters.	delaying parents' right of appeal.
Listening to the views of children	The panel attempted to gather views during the inquiry.	The panel was unable to hear directly from children and young people.	Lack of direct lived experience informing the inquiry.

b. Early Years and Practitioner Engagement

Issue Raised	Current Response / Position	Gap Identified	Impact / Consequence
Communication in early years	Health visitors often act as the first point of contact for parents.	Parents report inconsistent or unclear early information about the EHCP process.	Parents feel unprepared and unsure how to navigate the system.
Speech & Language and Portage support	Services exist across health and education partners.	Parents report long gaps between actions and poor communication with caseworkers.	Parents must coordinate information themselves and support may be delayed.
Accuracy of EHCPs	Assessments involve multiple professionals.	Some conditions are not properly recognised and referrals may not occur.	EHCPs may not fully reflect the child's needs.
Practitioner attendance at reviews	Reviews are arranged by schools.	Practitioners do not always attend due to workload pressures.	Risk that the full understanding of a child's needs is not captured.

The panel met with health partners on two occasions. This enabled the panel to do a deeper dive into the concerns relating to health provision.

c. Health Advice and Annual Reviews

Issue Raised	Current Response / Position	Gap Identified	Impact / Consequence
Generic health advice within EHCPs	A template for health contributions is being developed.	No timeline or monitoring mechanism for quality of input.	Inconsistent quality of health advice across cases.
NHS attendance at annual reviews	Health services can provide written input without attending.	No defined process for when attendance or contribution is required.	Health insights may not be fully integrated into updated EHCPs.

d. Diagnostic Waiting Times

Issue Raised	Current Response / Position	Gap Identified	Impact / Consequence
Autism diagnostic waiting times	Recognised nationally as a demand issue.	No clear interim support strategy for children awaiting diagnosis.	Children may wait extended periods without appropriate support.
Delays for Children in Care placed outside the county	Different providers involved in assessments.	Unclear ownership of responsibility for ensuring timely assessments.	Children may experience lower service standards.

e. Joint Commissioning and Funding

Issue Raised	Current Response / Position	Gap Identified	Impact / Consequence
Joint commissioning between NHS and Local Authority	Joint commissioning arrangements are described as existing.	No joint budget or clear accountability framework.	Limited practical integration of services.

f. Health Inequalities

Issue Raised	Current Response / Position	Gap Identified	Impact / Consequence
Uneven availability of Mental Health Support Teams	Transformation plans referenced.	No timeline or expansion plan described.	Variation in access across Dorset.

g. Medical Absence Certificates

Issue Raised	Current Response / Position	Gap Identified	Impact / Consequence
GPs issuing school absence certificates without seeing the child	Recognised as problematic.	No coordinated engagement between education and health services.	Inappropriate absence certification disrupts education access.

h. SEND Provision and Education Settings

Issue Raised	Current Response / Position	Gap Identified	Impact / Consequence
Growth in home education linked to dissatisfaction with mainstream provision	Emotionally based school avoidance is increasingly recognised.	Limited confidence among parents in the SEND support system.	Increased demand for alternative provision.
Capacity pressures in schools	Schools face staffing and training pressures.	Limited support for SENCOs and pre-schools writing EHCPs.	Delays in identifying and supporting children with high needs.
Parents report issues regarding ability and willingness of schools to provide the support identified in EHCP due to league tables and budget restraints.	Schools facing budgetary pressures.	SEND funding needs review, however all partners should be working to minimise the impact of this.	Impact on learning outcomes for all children, given drive to include more SEND children in mainstream schooling.

i. Complaints and Tribunals

Issue Raised	Current Response / Position	Gap Identified	Impact / Consequence
Declining EHCP timeliness and rising complaints	Seasonal staffing pressures and vacancies cited as factors.	No consistent improvement in performance across locality teams.	High tribunal volumes and parental dissatisfaction.

j. Budgets and Staffing

Issue Raised	Current Response / Position	Gap Identified	Impact / Consequence
High caseloads (around 250 cases per officer)	Directorate managing a vacancy rate of around 7%.	Limited capacity to maintain communication with families.	Staff burnout and delays in supporting children.

7. Conclusion and Recommendations

We have made the following recommendations and key areas for improvement include implementing modernising services through digital approaches, ensuring that engagement and communication is improved both in terms of providing updates and on EHCPs themselves, and reducing the use of tribunals to reach EHCP outcomes. It is vital that the Council meets its statutory commitments moving forward and that in turn services are quicker, more accurate and meet the needs of children and young people across Dorset.

The Committee expects Dorset Council and partner organisations to consider these recommendations carefully and to provide a formal response outlining actions to be taken.

Recommendation 1 - EHCP Statutory Timeliness

Dorset Council should implement a clear recovery plan to ensure that an absolute minimum 75% (current target) as of Education, Health and Care Plans are issued within the statutory 20-week timeframe, but with regard to compliance the statutory duty of all plans being delivered within the set timescales with actions to achieve full compliance.

The plan should include:

- workforce capacity requirements
- performance monitoring arrangements
- monthly reporting to senior leadership

Progress updates should be reported to the People and Health Scrutiny Committee.

Recommendation 2 - Caseload Management and Workforce Capacity

Dorset Council should review the caseload levels of SEND Provision Leads to ensure workloads are manageable and consistent with good practice.

The Council should:

- establish appropriate caseload benchmarks
- ensure sufficient staffing levels to meet statutory duties
- monitor workforce capacity through quarterly reporting.

A summary of actions taken should be presented to the People and Health Scrutiny Committee.

Recommendation 3 - Communication with Families

Dorset Council should develop and implement a clear communication standard for families involved in the EHCP process.

This protocol should include:

- clear points of contact for each case
- defined response times for communications
- proactive updates to families during the EHCP process
- guidance for practitioners on maintaining effective communication with parents and carers.

The Council should report back to the People and Health Scrutiny Committee on how this protocol is being implemented and monitored.

Recommendation 4 - Digital Systems and Case Management

Dorset Council should review the effectiveness of its current digital case management systems used for EHCP administration to ensure they support:

- efficient case management
- improved communication with families
- accurate performance monitoring.

The review should identify any improvements required to digital systems and provide a clear implementation plan where necessary.

Recommendation 5 - Annual Reviews of EHCPs

Dorset Council should ensure that annual reviews of Education, Health and Care Plans are completed in accordance with statutory requirements.

The Council should

- monitor the timeliness of annual reviews
- ensure that relevant partners are invited and able to participate
- establish clear processes to ensure review outcomes are recorded and acted upon.

Performance data relating to annual reviews should be reported to the People and Health Scrutiny Committee on a regular basis.

Recommendation 6 - Health Partner Participation

Dorset Council should work with the NHS Integrated Care Board to improve the involvement of health partners in the EHCP process.

This should include:

- ensuring appropriate health input into EHCP assessments
- improving attendance or contribution to annual reviews
- establishing clear joint working protocols between education and health services.

The Council and Health Partners should jointly report to the People and Health Scrutiny Committee on progress made.

Recommendation 7 - Reducing Tribunal and Complaint Levels

Dorset Council should analyse the causes of SEND tribunal cases and formal complaints, in order to identify opportunities to resolve issues earlier and reduce escalation.

This should include:

- reviewing patterns of tribunal outcomes
- identifying recurring issues raised by families
- improving early resolution processes.

Findings and proposed actions should be shared with the People and Health Scrutiny Committee.

Recommendation 8 - Engagement with Children and Young People

Future SEND service reviews and scrutiny work should include direct engagement with children and young people with special educational needs and disabilities.

Dorset Council should consider how the voices of children and young people can be more consistently included in service design and evaluation.

Recommendation 9 - Ongoing Scrutiny Oversight

The People and Health Scrutiny Committee should receive a formal progress report outlining:

- actions taken in response to each recommendation
- progress made
- any further steps required

8. Next Steps

The People & Health Scrutiny Committee expects Dorset Council and relevant partner organisations to consider the recommendations set out in this report and provide a formal response outlining the actions that will be taken.

The committee will continue to monitor progress through its work programme and will request further updates on the implementation of these recommendations at six month intervals.