

24 March 2020

Mr Colin Foster
Director of Children's Services
Bedford Borough Council
Borough Hall
Cauldwell Street
Bedford
MK42 9AP

Patricia Davies, Accountable Officer, Bedford Clinical Commissioning Group
Chris Morris, Manager for the SEND Programme, Local Area Nominated Officer

Dear Mr Foster and Ms Davies

Joint area SEND revisit in Bedford Borough

Between 3 February and 5 February 2020, Ofsted and the Care Quality Commission (CQC) revisited Bedford to decide whether the area has made sufficient progress in addressing the areas of significant weakness detailed in the written statement of action (WSOA) issued on 19 March 2018.

As a result of the findings of the initial inspection and in accordance with the Children Act 2004 (Joint Area Reviews) Regulations 2015, Her Majesty's Chief Inspector (HMCI) determined that a written statement of action was required because of significant areas of weakness in the local area's practice. HMCI determined that the local authority and the area's clinical commissioning group (CCG) were jointly responsible for submitting the written statement to Ofsted. This was declared fit for purpose on 27 July 2018.

The area has made sufficient progress in addressing the five significant weaknesses identified at the initial SEND inspection. This letter outlines our findings from the revisit.

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

Inspectors spoke with children and young people with special educational needs and/or disabilities (SEND), parents and carers, and representatives from the local authority and National Health Service (NHS). They looked at a range of information about the performance of the area, including the area's self-evaluation. Inspectors met with leaders from the area for health, social care and education. Inspectors reviewed a range of education, health and care (EHC) plans. They considered 114

responses to the online survey for parents, and reviewed other correspondence received about the area, performance data and evidence about the local offer and joint commissioning.

Main findings

- Area leaders are tackling the failings identified in March 2018, with unflinching honesty and integrity. The Director of Children's Services (DCS) and chief nurse have been integral in leading a sea change in culture at the highest levels in both the local authority and Bedfordshire Clinical Commissioning Group (BCCG). From their previously disjointed approach, leaders are now a cohesive area team that challenges and supports its members. As a result, area leaders are tackling systematically and effectively the significant weaknesses identified at the initial inspection.
- However, children and young people with SEND and their families are not universally feeling the benefits of the improvements made. Some parents and carers remain concerned about the quality of EHC plans, communication between professionals and families, and access to some services. Area leaders are fully aware of these concerns. They understand that maintaining the pace of improvements is essential if they are to reach families in Bedford and work with them effectively.
- The Parent Carer Forum (PCF) has made an influential contribution to the area's leadership and governance. Its members are active voices, who gather the views of families. The PCF champions the rights of families where there is still work to do for children and young people with SEND.
- The initial inspection found that:

'There are no coordinated priorities, strategies or accountabilities between the services to ensure that joint commissioning is undertaken effectively.'

Leaders in both BCCG and the local authority have worked tenaciously to establish a genuine joined-up approach. There are now clearly established and coordinated priorities, which leaders are fully aware of, committed to, and are monitoring intensively.

The Manager for the SEND Programme, whose role is jointly commissioned, drives forwards the key priorities in the area's action plan. He is well supported by the DCS, chief nurse and chief education officer to undertake this role effectively and efficiently.

Leaders' SEND joint strategic needs assessment and outcomes framework is informing a strategic and systematic approach to joint commissioning. Leaders are proactive in seeking new opportunities to jointly commission services and provisions for children and young people with SEND.

The ever-growing PCF has an influential role in the development of joint commissioning. This group actively challenges area leaders about their

effectiveness in jointly commissioning the services that parents and carers tell them are needed.

The area has made sufficient progress in addressing this area of significant weakness.

- The initial inspection found that:

'BCCG has only very recently carried out its self-evaluation to identify progress and barriers to implementing reforms. At the time of the inspection, there was no robust action plan in place to deliver the necessary actions to ensure that outcomes for children and young people improve.'

Since the inspection of 2018, the quality of self-evaluation and action planning by the CCG has improved significantly. The CCG's proactive approach to working jointly with partners, championed by the chief nurse, has galvanised highly productive working relationships.

The development of SEND performance indicators that are outcome-focused is helping to drive change. In creating and monitoring a structured action plan, with clear accountabilities, the CCG has raised the bar in the way it holds its providers to account.

Services to support children and young people with social, emotional and mental health needs are being commissioned using information from the area's joint needs assessment.

Providers are embracing the area's approach to improving SEND arrangements, especially in relation to partnership working and co-production opportunities. This is starting to improve outcomes for children and young people.

The CCG has worked innovatively with the local authority and NHS Digital to create systems which identify the cohort of children and young people with SEND within local health services. This is supporting accurate and effective sharing of information between services. It is also supporting leaders to identify gaps in services across the area, and to act to address these.

The area has made sufficient progress in addressing this area of significant weakness.

- The initial inspection found that:

'Leaders have not ensured that the local offer provides clear, comprehensive, accessible and up-to-date information about the available provision and how to access it. Leaders are not responsive to local needs and aspirations by involving children and young people, their families, and service providers within its development and review.'

A new, more interactive and relevant local offer website has been developed through discussions and consultation with the PCF, a parent reference group and children and young people with SEND. The local offer is now more reflective of the aspirations and interests of children and young people with SEND. It is now more widely known and used by parents and professionals in the area.

The appointment of a dedicated local offer officer is ensuring that the website is a resource that can be quickly and easily updated. The local offer officer also attends a programme of events to publicise its content and identify how it can be improved. Area leaders evaluate how well the local offer is being used, how widely it is being accessed and where there are gaps in the information being provided to families, such as the services available. This allows them to review and renew the local offer website routinely.

Much work, including training for professionals in health, social care and education, has taken place to raise professionals' awareness of how they can use the local offer to support children and young people with SEND and their families. However, leaders recognise that this work needs to continue because there are still families who do not know what the local offer is, or how it can help them.

The area has made sufficient progress in addressing this area of significant weakness.

- The initial inspection found that:

'Leaders have not ensured collectively that EHC plans identify the range of needs for children and young people beyond the diagnosis or a multi-agency approach to meeting needs effectively, including the subsequent signposting and guidance around personal budgets.'

Professionals are now providing timely and up-to-date information to inform the content of EHC plans. The most recent EHC plans are of better quality and are more relevant to the child or young person's individual needs. The best plans include clear and ambitious outcomes for each child or young person, along with information about their aspirations for the future. The outcomes also include important aspects of children and young people's personal and social development and independence. Although significantly improved, there are still examples where the advice provided by education, health or care professionals is not sufficiently specific to the individual child or young person.

Leaders have established audit processes, involving education, health and social care, for collectively reviewing and providing mutual challenge regarding the quality of EHC plans. However, the audit process is not focused sufficiently on identifying whether plans are doing enough to support the wider personal and social development of a child or young person, and, going beyond that, in relation to academic achievement.

There has been an increase in the uptake of personal budgets and in the number of direct payments. Guidance on the local offer website has been made more widely available. Workshops and training for frontline staff are ongoing. However, some parents and professionals remain unclear about their eligibility for this funding and the application and assessment procedures.

The area has made sufficient progress in addressing this area of significant weakness.

- The initial inspection found that:

'There are weaknesses in the provision across the borough for young people who have emerging SEN and/or disabilities, including social, emotional and mental health needs, and more complex needs such as autistic spectrum disorder, to live successful lives where they participate positively in wider borough life and engage successfully in education, employment, training and transition into adulthood.'

The child and adolescent mental health service (CAMHS) has developed ways of working which directly benefit children and young people with SEND. One example is the 'CAMHS GP Liaison Team'. This team offers consultation, training and advice and is starting to build stronger relationships between the two professional groups.

Systems are in place to provide more support and better joined-up approaches between health providers and schools. This is having a positive impact on access to services, such as CAMHS and speech and language therapy, for those in receipt of an EHC plan. Importantly, however, parents and the PCF still have concerns about the timeliness of access to these services, especially for those children and young people who do not have an EHC plan.

More schools are working collaboratively with the local authority, recognising their role in the wider local offer. For example, local headteachers have liaised with the local authority to commission two specialist SEND advisers to support leaders in schools. The work of the two specialist SEND advisers is still in its early stages. Leaders recognise that the quality of provision for children and young people with SEND in mainstream schools across the borough is too variable.

The area has adopted a collaborative approach, including co-production, to create a neurodevelopmental disorder pathway. Although it is too early to see the impact of this work for children and young people with autism spectrum disorder (ASD), this approach has the potential to provide better access to services.

There are examples of individual young people being supported to successfully make the transition to adulthood. The small number of young people with

SEND who access supported internships has increased. Two training providers now offer short courses supporting young adults with social, emotional and mental health difficulties. The proportion of children and young people with SEND who are not in education, employment or training has decreased. Almost all young people with SEND who had a primary need relating to their social, emotional and mental health moved on to education, employment or training in 2019.

Leaders’ actions and deadlines are appropriate and realistic. They have made significant headway in addressing this area of significant weakness. However, they are acutely aware that there is still some way to go before these actions will be felt by families universally.

The area has made sufficient progress in addressing this area of significant weakness.

The area has made sufficient progress in addressing the five significant weaknesses identified at the initial SEND inspection. As the area has made sufficient progress in addressing all the significant weaknesses, the formal quarterly support and challenge visits from the DfE and NHS England will cease.

Yours sincerely

Paul Wilson
Her Majesty’s Inspector

Ofsted	Care Quality Commission
Paul Brooker Regional Director	Ursula Gallagher Deputy Chief Inspector, Primary Medical Services, Children Health and Justice
Paul Wilson HMI Lead Inspector	Elizabeth Fox CQC Inspector

cc: Department for Education
Clinical commissioning group(s)
Director Public Health for the local area
Department of Health
NHS England