Ofsted Agora Nottingham NG1 6HJ

T 0300 123 1231 **Textphone** 0161 618 8524 6 Cumberland Place enquiries@ofsted.gov.uk www.gov.uk/ofsted lasend.support@ofsted.gov.uk



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Nick Ireland Strategic Director of People, London Borough of Sutton Civic Offices St. Nicholas Way Sutton SM1 1EA

Lucie Waters – Managing Director, Sutton Clinical Commissioning Group Victor Roman, SEND Transformation lead (Consultant), Local Area Nominated Officer

Dear Mr Ireland and Ms Waters

Joint area SEND revisit in Sutton

Between 2 and 4 March 2020, Ofsted and the Care Quality Commission (CQC) revisited the area of Sutton to decide whether sufficient progress has been made in addressing each of the significant weaknesses detailed in the written statement of action issued on 23 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 area's practice. HMCI determined that the local authority and the area's clinical commissioning group(s) (CCG) were jointly responsible for submitting the written statement to Ofsted. This was declared fit for purpose on 10 July 2018.

The area has made sufficient progress in addressing all three of the 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 the CQC.

Inspectors spoke with children and young people with special educational needs and/or disabilities (SEND), parents and carers, as well as local authority and National Health Service (NHS) officers. They spoke to leaders, staff and governors about how they are implementing the disability and special educational needs reforms. Inspectors 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. They reviewed performance data and evidence about the local offer and joint commissioning.





Main findings

The initial inspection found that there was:

'lack of coherence and joint working between local area leaders, agencies and schools, which is resulting in poor communication, inconsistent opportunities for social inclusion and a high number of exclusions, especially at primary school level'.

Area leaders have secured the confidence and support of leaders in education settings. Leaders from these settings describe a 'seismic shift' in coherence and communication since the time of the initial inspection. External partners have offered challenge and support to area leaders. These partners agree that area leaders have made good progress in improving joint working in the area.

Health professionals have become visible and accessible in Sutton. They are playing a much more significant part in addressing the weaknesses identified at the initial inspection. For example, the CCG is committed to providing the multidisciplinary SEND team with enough capacity to ensure that the SEN reforms are complied with.

Children and young people told us they feel confident when making choices about future training and careers. They appreciate the guidance their school staff give them in developing skills which can support their social participation and independence, such as managing money and knowing how to use a supermarket.

The number of exclusions has reduced for pupils with education, health and care (EHC) plans in primary schools. However, there has been a rise in exclusions of those who receive SEN support. Some parents remain concerned that part-time timetabling is being used to distort exclusion rates. Some schools are improving inclusion through projects such as 'step forward'. Some of these have been recently introduced which means their impact is hard to measure. Other projects such as 'maximising potential' are more established. School leaders told us these have helped them reflect on and share ideas aimed at supporting children to stay at school.

Evidence from satisfaction surveys commissioned by area leaders indicates an improving level of engagement and buy-in from parents. However, this was not echoed in the typical views of those parents and representatives of parents who spoke with us and responded to our survey.

Some parents are not convinced that leaders are acting in the best interests of their children. They view the assessment and review process as continuing to be flawed. Leaders of education settings told us that, in their experience, this is not the view of parents as a whole. There is a need to find a way to reestablish the trust and confidence of parents and parent groups so that constructive working relationships can work in the best interests of children and young people.





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

■ The initial inspection found that there was:

'poor oversight of quality and impact of EHC plans in meeting the needs of children and young people'.

Leaders now have a secure oversight of EHC plans. They regularly and capably check on the quality of completed plans. Provider leaders told us that plans are now more helpful in securing positive outcomes for children and young people. They also told us that the wider representation of professionals at panel meetings means that the right children and young people are getting an EHC plan.

EHC plans have improved in quality. They usually include clear links between objectives and the wishes and enthusiasms of children and young people. They typically include clearer and more simply worded aims. However, a few we sampled still include convoluted technical language and some replication of wording from one plan to the next. Objectives related to social development and preparation for adulthood are more prominent than at the time of the initial inspection. Children and young people who are not known to social care are offered an assessment as part of the EHC process. This helps meet their social needs more thoroughly.

Some parents, however, remain unconvinced. They feel that leaders continue to lack a secure oversight of the quality and review of plans. Parents are concerned that delays in annual reviews mean that outcomes and suitability of plans are compromised. Leaders of education settings we spoke with believe that the review process is strengthened. The area knows which EHC plans have not been reviewed on time and have a clear plan to address this. However, the oversight of the quality of plans which have not been reviewed in a timely way remains a concern.

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

■ The initial inspection found that there was:

'inequality of opportunity for families, which has arisen from a serious decline in the availability of an effective independent advice service in Sutton'.

There is now a functioning and adequately staffed service. Evaluative feedback from users shows it has a growing positive reputation. Case workers are busier now that parents have become more aware of the service. There are plans to extend capacity through the current appointment process for a service manager.

Case workers get out and about to meet parents in different settings. This is seen as a strength by provider leaders. There has been some work done to





think about how to make the service more appealing to young people, but this aspect of the service remains limited in its scope.

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

As the area has made sufficient progress in addressing all the significant weaknesses, the formal quarterly support and challenge visits from the Department for Education and NHS England will cease.

Yours sincerely

Andrew Wright Her Majesty's In

Her Majesty's Inspector

| Ofsted | Care Quality Commission |
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| Michael Sheridan | Ursula Gallagher |
| Regional Director | Deputy Chief Inspector, Primary Medical Services, Children Health and Justice |
| Andrew Wright | Elizabeth Fox |
| HMI Lead Inspector | CQC Inspector |

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