The local area leaders hear clearly that children and families must be at the heart of both practice and culture; we must build their confidence in us by ensuring that their voices and views matter and that they inform decisions and shape planning. Every contact with children, parents and carers must count from day one, and interactions and responses must be right the first time.

We accept that overwhelmingly families are still reporting that they do not have a good experience and that this must be addressed as a priority. We recognise that too often we do not meet statutory timescales, and too many children and families experience very long delays in receiving the support they need. Too frequently services and practitioners miss the early opportunities to identify and respond to a child’s special educational needs and disabilities at whatever point they emerge in their life.

To drive improvements for children and families across the system, we will focus on 5 strategic commitments:

- Embedding a consistent process, person-centred approach across the assessment and planning for and with children and families
- Creating and maintaining a strong performance culture where information drives planning and improvements in services and practices
- Collaborating and engaging a wide group including families, children and young people in the planning and evaluation of our services
- Working in partnership to integrate services to meet the needs of children and families closer to home and within their local communities
- Integrating services to provide a welcoming front door and better support early identification and support for children with SEND

The principles set out in the Code of Practice are supported by our partnership plan and the actions set out in the Written Statement of Action will move us closer to achieving them for all families:
The participation of children, their parents and young people in decision making
the early identification of children and young people’s needs and early identification of intervention to support them
greater choice and control for young people and parents over support
collaboration between education, health and social care services to provide support
high quality provision to meet the needs of children and young people with SEN
a focus on inclusive practice to remove barriers to learning
successful preparation for adulthood, including independent living and employment

The person-centred approach can be characterised by the principles set out in the Code of Practice as having regard to:

- the views wishes and feelings of the child or young person, and the child’s parents
- the importance of the child or young person, and the child’s parents, participating as fully as possible in decisions, and being provided with the information and support necessary to enable participation in those decisions
- the need to support the child or young person, and the child’s parents, in order to facilitate the development of the child or the young person and to help them achieve the best possible educational and other outcomes, preparing them effectively for adulthood

Actions that have already been taken since the inspection:

Since April 2016, the Surrey SEND Partnership Board, composed of the County Council, CCG, Health providers, Family Voice Surrey and Schools, has overseen the delivery of the Surrey SEND Development Plan. Many of the improvements were recognised in the inspection findings including improvements in the Council’s leadership team, examples of effective joint commissioning and involvement of parents and carers in the co-design of some services.

More recently, following the inspection in October 2016 and the identification of significant areas of weakness, the County Council and CCG have undertaken a number of key actions. These are the foundations for delivery of the commitments set out in the Written Statement of Action.

Culture and practice:

- Introduced a person-centred practice pilot, which will be evaluated based on family and practitioner feedback and scaled out from May 2017;
- Delivered a two day co-design workshop event, with the input of family representatives and practitioners, in January 2017 to improve the experience of families applying for an education health and care plan (EHCP), supported by an audit of the timeliness and suitability of health advice that informs EHCPs;
- Identified 10 highly complex cases and introduced a new Systems Leaders Case Panel in March 2017 to resolve them, to be rolled out monthly from April to resolve complex cases that become ‘stuck’;
- Identified a further 90 cases requiring rapid intervention to place children in an appropriate setting, and worked with schools to provide placements and families to ensure they were involved and confident in the outcomes;
- Continued to show reductions in waiting times to access paediatric therapies;
- Increased the number of new EHCPs completed on time and by the end of January 2017, nearly all of the transfers for Year 2 and Year 6 were completed;
- Appointed the provider for children’s community health services from April 2017, with performance targets for reducing inequity in provision, waiting times for access, improved date management and collection and a single front door for referrals;
- Co-designed the SEND Commissioning Plan following four engagement events with partners and family representatives, to be published in June 2017;
- Removed the November Panel meetings from the Decision Making Framework, embedding the annual review or EHCP process as the main mechanism to work with families and agree placements;
- Met with all SEND Caseworkers to discuss how best to empower them to improve outcomes for families which has informed actions in this Statement;
- Commenced a review of the role of Educational Psychologists to ensure the service is well placed to support the strategic priorities of the County Council;
- Undertook an assessment of current practice through the Council’s lead on restorative practice;
- Brought together the Designated Medical Officer and the Designated Looked After Children’s Doctor to formally co-ordinate their work;

**Engagement with parents and carers:**

Since the inspection, families and parent representatives have directly shaped improvements in our county-wide EHCP practices and our commissioning priorities and plans. We have worked closely with families in individual cases to resolve outstanding issues, making decisions with them and their child. To make involvement of families systematic, we will be co-designing with Family Voice Surrey a refreshed Family Communication and Engagement Strategy to routinely hear the experiences of families and continue to learn from them.

**Information management:**

- Undertook an initial review of exclusions and absence data and tribunals data to identify trends and patterns; and commenced a review of our profile of vulnerability;
- Cleansed the last three years of data to enable forward planning of provision;
- Completed an analysis of places required for SEND pupils and began the planning with schools and providers to ensure pupils attend the right provision close to home, including increasing capacity through ‘bulge class’ provision;
- Developed a new visualisation tool (Tableau) to provide performance management information to frontline workers, empowering staff and managers;
- Developed a performance compendium to measure performance and impact which we will continue to enhance;

**Enhanced leadership and scrutiny:**
- Established the Children’s Services Improvement Board as providing formal oversight for SEND improvement and amended the Board’s Terms of Reference and membership to reflect this;
- Enhanced scrutiny arrangements through a cross-party Member SEND Task Group, representing all scrutiny Boards, with three meetings since December 2016;
- Reviewed the Terms of Reference for the SEND Partnership Board to have greater focus on impact and performance;
- Updated the Transforming Care Programme Board and Learning Disabilities Partnership Board on SEND developments to inform prioritisation;

**Budget and resources**
- Extended contracts for frontline staff and commencing recruitment to improve timeliness of EHCPs and to enhance staff retention;
- Attended the London Leadership Strategy conference to plan work to build the confidence and capacity of mainstream schools to support children with SEND;
- Increased programme, customer service and strategy capacity to support SEND improvement.

Taken together, these early actions have achieved some tangible improved outcomes for families and children: some complex cases have been resolved; more children have been placed in suitable settings; waiting times for therapies are reducing; completion rates for EHCPs and transfers are improving. They also build our longer-term capability and capacity to deliver the sustained improvements that we aspire to: enhanced practitioner and strategic capacity; timely, relevant and accessible performance information; key SEND processes and plans co-designed with families and grounded in their insights; a clear agreed strategy for engaging with families.

The implementation of the actions detailed in the Written Statement of Action will further achieve the following:

<table>
<thead>
<tr>
<th>Key milestones and impact on children and families</th>
<th>June 2017</th>
<th>September 2017</th>
<th>December 2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>Driving a high performance culture – embedding new tools to empower staff and drive the timeliness and quality of EHCPs.</td>
<td>Building our performance system to develop our high performance culture including improved regular and consistent</td>
<td>Person-centred approach embedded throughout the EHCP process including through annual reviews, reducing the number</td>
<td></td>
</tr>
</tbody>
</table>
Delivering SMARTer EHCPs which are consistently outcomes focussed.

**Family engagement** – hearing the voices and views of a broader range of children, young people and families through the implementation of co-designed engagement plans and enhancing and embedding the person centred approach to planning. Family Voice Surrey providing a rich range of representation.

Agreed a **joint commissioning strategy** based on our understanding of the vulnerability profile. Utilising existing data and information technology to improve our understanding and capacity quickly to drive impact.

**Enhanced governance**, scrutiny and performance oversight arrangements in operation.

**Therapy waiting times** further reduced through a range of measured including the introduction of the new speech and language therapy model, reduced need for reassessment at reception year and the new community health services contract.

Reporting on attendance and exclusions. Using supervision and management oversight to ensure practice is well developed and supported.

**Working in partnership** with schools and other partners focussing on the progress of children with SEND, those receiving SEN Support and those with a statutory plan. Implementing support that will improve progress, reduce exclusions and increasing attendance.

**Shaping the market** based on the joint commissioning strategy agreed with partners to ensure we can meet need locally and make best use of valuable resources for the benefit of children and young people. Reviewed our vulnerability profile to develop more detailed insights to inform this work.

**Enhanced training**, development and continuous professional development (CPD) programme underway to support staff and practitioners including SENCOs. Embedding our person centred approach to practice.

**Consistency of the area teams** achieved through guidance and assurance processes in place to maintain and support consistency.

**Formally consulting on proposals, impacts and implementation of our early help approach** to support early identification of tribunals and increasing the number of newly requested EHCPs delivered within the statutory timeframe.

**A broad range of families, children and young people** routinely engaged in planning, monitoring and evaluation of services.

**Improved local provision** provides better access to high quality, local provision and families are aware of the offer available and how to access services and support.

**Early help approach** to support early identification and intervention, providing a graduated response to families is being implemented.

**Improved information management** is moving onto a systemic approach of profiling, monitoring and evaluating services and performance enabling deeper insights to be gained and acted upon to make further improvements.

**Quality assurance** is embedded within all activities and service delivery ensuring measurable standards are in place and organisational learning is routine driving higher performance.
and intervention, providing a graduated response to families.

**Clear and consistent pathway** for those with autistic spectrum disorder (ASD) across the county.

<table>
<thead>
<tr>
<th>What difference?</th>
<th>What difference?</th>
<th>What difference?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Family representatives’ confidence will begin to grow through early signs of progress.</td>
<td>Embedding a systemic approach to knowing ourselves well and targeting areas for further improvement will drive continuous improvement.</td>
<td>Timely, suitable, higher quality plans will enable children and young people to be supported and achieve agreed outcomes.</td>
</tr>
<tr>
<td>A broader and richer range of views from families, children and young people will enable more families to be heard and ensure plans support need more fully.</td>
<td>All children with a statutory transfer will receive a timely service ensuring they receive the right support at the right time. More children who request an EHCP will receive a person-centred, timely response, providing them with a good experience, increasing satisfaction rates and growing trust and confidence.</td>
<td>A person-centred approach and more empowered staff will increase the number of families feeling satisfied with the services provided.</td>
</tr>
<tr>
<td>Individual families, children and young people benefitting from improved timeliness of plans, intervention and the quality and sufficiency of response focussed on achieving outcomes that are well developed.</td>
<td>Improved early identification and support will mean more children will receive the interventions needed in order for them to achieve their outcomes.</td>
<td>Ensuring that our person-centred approach consistently delivers the right support and the right time for children and young people who need it.</td>
</tr>
<tr>
<td>Empowered teams and staff will be able to make a difference and drive their own performance improvement, benefitting the families they support.</td>
<td>Teams and individual staff members will be empowered to agree plans and provision with families generating a higher degree of satisfaction and faster resolutions to issues that arise.</td>
<td>Families feel heard and are heard, enabling them to shape service improvements within the constraints of the statutory requirements and resources available.</td>
</tr>
<tr>
<td>Partnership resources and activities will be directed towards making the largest impacts based on evidence and agreed strategy and plans. Holding each other to account in the process.</td>
<td></td>
<td>Schools will routinely experience better support from partners in respect of early help, enabling them to deliver better educational outcomes for children.</td>
</tr>
<tr>
<td>Leaders and staff at all levels will be held to account routinely through performance management and scrutiny.</td>
<td>Schools will begin to experience better support from partners in respect of early help, enabling them to deliver better educational outcomes for children.</td>
<td>Team morale will increase ensuring that staff are better placed to provide high quality services increasing satisfaction rates.</td>
</tr>
<tr>
<td>---</td>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td>Children will gain more timely access to the therapies and services they require helping them to achieve their outcomes and meeting their needs.</td>
<td>Children, young people and their families will not experience inconsistent services dependent on where they live - eliminating the postcode lottery.</td>
<td></td>
</tr>
</tbody>
</table>

We are committed to communicating what we learn to families, partners and staff, learning about what works and building on it, shaping good ideas wherever they come from and ensuring that families are increasingly happier and more satisfied.
Self-evaluation and self-improvement:

We have undertaken a self-evaluation of the root-causes of the weaknesses identified in the inspection which provides the rationale for the actions underway and what we expect to be different as a result.

| Priority 1: The timeliness, suitability and quality of statutory assessments and plans, including when statements are transferred to education, health and care plans. |
|---|---|
| **Related inspection findings:** | **Self-evaluation:** |
| ➢ Failure to meet the statutory timescales. | Parents and carers have described to us a SEND system that is adversarial and cumbersome. Many of our staff and managers say that they are demotivated by too much low value process and too little time and support to engage with families and children directly. |
| ➢ Slow progress on transferring statements to EHCPs. | Since the inspection, we have increased capacity in SEND casework teams through extension of contracts and further recruitment to clear the backlog of cases and transfers. This is having a positive impact on timescales. We are also streamlining our processes, such as bi-annual placement panels, that have driven inefficient use of resources and do little to improve outcomes for children. Other relatively simple process improvements were identified in our rapid improvement event in January and have been or are being implemented. We expect these both to improve timeliness as well as free up time for staff to work in a person-centred way with children and families. |
| ➢ Efficiency of process undermined and significant backlog of cases due to weaknesses in staff skills and knowledge and high caseworker turnover. | We are equipping frontline teams with live performance data to enable them to identify quickly areas of weakness (and strength) and take remedial action. As systems leaders we are reviewing monthly performance across a range of areas including timeliness of advice and assessments. |
| ➢ Lack of clarity in respect of the timeliness of health reports delaying assessment for EHCPs. | New commissioning arrangements for therapies are being introduced from April 2017 that will embed and sustain the improvement in these services for families. A single contract and provider, with rigorous performance targets, are expected to address timeliness of advice for assessments, as well as consistency of provision and waiting times. As systems leaders, we will monitor this closely and intervene where necessary. |
| ➢ Some parents and providers question why statutory assessment is delayed in Early Years. | |
| ➢ Varying quality of plans. | |
| ➢ The designated medical officer and designated LAC's doctor do not coordinate their work well. | |
| ➢ Fresh assessment in the first term of Reception year generally results in an unnecessary break in speech therapy intervention undermining the children's progress. | |
| ➢ Parents and necessary health disciplines and specialist not regularly included in planning meetings resulting in plans not being consistently fully and comprehensively informed. | |
| ➢ Waiting times for assessment and intervention in SLT, OT and physiotherapy are highly variable and in some cases unacceptably long. | |
| ➢ LA approval for therapy adjustments agreed at case reviews is often delayed. | |
- Plans are too broad in their aims and lack clear measures of success limiting the ability to provide precise provision and effectively review the impact.
- Outcomes are not well developed. The development of meaningful and measurable outcomes is a key area for improvement across all services and agencies.
- Early Years discretionary funding welcomed by some parents and providers but not all.

We have also taken steps to resolve long-standing complex cases, including those subject to tribunals, by working closely with families and schools. Our learning is that where needs are complex, and there are systems barriers, cases can get ‘stuck’. We have introduced a new mechanism for complex case reviews to enable these cases to be escalated to systems leaders for swift resolution.

How will we know we have made a difference? Firstly, performance data will be consistently collected, analysed and used to inform planning and drive improvements. This Statement sets out the indicators we will routinely monitor to demonstrate that we are making a difference for children. Alongside this, we are significantly upgrading our quality assurance, grounded in a child-focused approach. Systematic case audits, involving senior leaders as well as case workers and case managers, will enable learning of what good looks like to improve practice and provide confidence where it is good.

Actions detailed in the Written Statement of Action are designed to ensure:
- increased capacity and efficiency to improve timeliness
- changes to systems to reduce delays and backlog
- the use of information and insight to drive quality
**Priority 2:** The under-developed and often limited involvement of parents and carers, and the narrow range of those included, in planning, monitoring and evaluating services. The ineffective promotion of the local offer, and the incomplete statutory transition plan.

**Related inspection findings:**
- Highly critical of the way that the local area works centrally.
- Parents and carers lack of confidence in the local area’s leaders and services.
- High rates of appeal to first tier tribunals due to parental dissatisfaction.
- Children and young people across the county currently experience unequal health and therapeutic provision.
- Delayed provision of therapies or access to CAMHS for children and young people with identified SEN, including early years, compromises individual’s progress.
- Mental health pathways for young people aged 19-25 are similarly under developed.
- Schools leaders were not aware of their named mental health contact.
- Pathways for children and young people with autism are fragmented.
- Local area does not routinely check the achievement of those with SEND entering the youth justice system.
- High numbers of NMI placements undermining the equitable deployment of limited resources.
- Waiting times for assessment and intervention in speech and language therapy variable and unacceptably long.
- Waiting times for assessment and intervention in occupational therapy (a particular concern) and Physiotherapy variable and unacceptably long.

**Self-evaluation:**
Our practice and the culture that supports it has not been sufficiently person-centred and strength-based for children with SEND. As a result, our staff spend too little time listening to and involving families and children in the decision-making about their support.

To address this, we are implementing a new person-centred framework and practice tools in SEND from April 2017. This will enable fundamental change to culture and practice. Success measures will be parents and carers having a greater involvement in planning and an understanding of the support their child receives. The system will be much less confrontational, focussing on what children have and need to lead happy and fulfilled lives and involving children, young people and their families fully in decisions about the support they receive. Our staff will feel empowered to do the jobs they tell us they want to do.

We have seen the difference that a child-focused, strength based model has made in other services such as youth support and children’s social care. Inspection and our own case audits have confirmed this has enabled a clear voice for the child and consequently better decision-making and outcomes for children. As a result, we will explore integrating training on this model across the wider SEND system partnership.

We are also building on successful experiences of co-designing services with families and children, for instance in short breaks and transport, to involve families more consistently in our service improvements and commissioning. This will include encouraging and supporting Family Voice Surrey to widen its reach and implementing an effective engagement strategy for families. Aligned to this is a strategy for promoting the local offer, as well as ongoing review and improvement of the local offer as a gateway for parents to information, advice and support. This includes information on the Statutory Transition Plan.
- Local authority review of approvals for therapy adjustments agreed at case reviews often delayed.
- Lack of clarity exists about the referral processes for parents and professionals resulting in a wider variation of waiting times.
- Those in the Surrey Downs CCG area do not have access to the same post-diagnostic pathway as those living elsewhere in Surrey.
- Achievement in KS1 fell sharply compared with the national picture including those with SEN.

The inspection also found significant weaknesses and variation in pathways and provision. We are clear that parental satisfaction with services will only improve if the local provision is improved. As a result, improving local provision is a key success measure of the new commissioning arrangements for therapies being introduced from April 2017.

Actions detailed in the Written Statement of Action are designed to:
- embed a person-centred approach within SEND
- collaborate with families and engage a wider group of families in the planning and evaluation of our services
- improve the timeliness, accessibility and equitability of local provision
- promote the local offer
- update the Statutory Transition Plan

<table>
<thead>
<tr>
<th>Priority 3: The inefficient management and coordination of area information, in administrative processes, to inform evaluation of services and outcomes, and to hold leaders and staff at all levels to account for rapid improvement.</th>
</tr>
</thead>
</table>

**Related inspection findings:**
- Contradictions in information used to determine progress towards statutory transitions.
- Weaknesses in the LA information management systems limit coordination between the central administration and local administrative areas.
- No ready analysis of progress being made in meeting statutory requirements.
- Information not available to hold leaders to account.
- Actions to rectify problems lack urgency.
- No analysis in the local area on the timeliness of health reports.
- Identification of trends in absence or exclusion within the local area have not been thoroughly evaluated.

**Self-evaluation:**

High quality information management for SEND has been hampered by poor information systems and a weak performance culture. Historically, the County Council has had limited access to insight from the county-wide information system for SEND data. Local data management systems, often manually based, have developed as a result with issues of consistency and quality.

The actions set out in the Written Statement of Action will ensure we drive a strong performance culture and decision-making focussed on outcomes for children and families. Performance data will be widely accessible and timely for use by frontline staff, managers and systems leaders. Staff and managers will be empowered to manage their own caseloads and, where there are local performance issues, take immediate remedial action. Likewise, where issues require a system-wide response, local leaders will be routinely monitoring performance information and will have the insight to respond effectively.
### Priority 4: The relatively low identification of need at school support level, indicating inefficiencies in the early identification of special educational needs and/or disabilities.

**Related inspection findings:**
- Targets for developmental checks during the early years not met.
- Inconsistent improvement to reduced waiting times and early identification of children's needs.
- Early year's efficiency in identification of SEN is inconsistent.
- Range of expertise in early years varies considerably particularly between private and voluntary settings.
- Relatively low proportion of pupils identified in Surrey as requiring school support for SEN.
- Delays in the identification and assessment of children's and young people’s SEN, including early years, compromises individual's progress.
- Weaknesses in the identification and assessment of pupils means the achievement of those identified with SEND cannot be relied upon as an accurate reflection.

**Self-evaluation:**

The root causes of the relatively low identification of need at school support level and how that manifests in different areas, ages and settings are not yet fully understood by local leaders. Our starting point will be an analysis of the data to understand this better and to share the findings with Schools to test the hypotheses and identify local solutions.

We will facilitate school to school support to grow capacity in the system to deliver creative local solutions that enhance local provision for children with all levels of SEND needs. This includes accessing peer support tools through the London Leadership Strategy and helping to grow a strong SENCO network.

Alongside the enhancement of local provision for SEND in schools, we are ensuring that Surrey's Early Help acts as an effective front door to early identification and support for children with SEND and their families. There will be a link from the Early Help Hubs to each school; and SENCO outreach to early years settings to develop good practices of support and smooth transitions.

Our vision is a system in which we identify and support children and families earlier to ensure better outcomes for them, and to prevent escalation of their needs. We will know we have made a difference when more children are being placed close to their family home and remaining within their local communities.

---

### Priority 5: The increasing rates of absence and exclusion experienced by children and young people who have special educational needs and/or disabilities in mainstream schools.

**Related inspection findings:**
- Rates of absence for school-aged pupils who have specials educational needs and/or disabilities, at school support and with an EHCP have increased.

**Self-evaluation:**

We are concerned about the increasing rates of absence and exclusion for pupils with SEND, and recognise that we have not responded as systems leaders swiftly enough to address the underlying issues that are driving this.
- Absences for Surrey pupils at school support were above the national average for this group in 2015.
- Lack of clarity in the local area about the role of the GPs in identifying a child or young person as being unfit for school due to anxiety linked to autism. As a result some pupils experience unnecessary unauthorised absence and have limited support for learning at home.
- Fixed term exclusion rates for pupils who have SEN in Surrey’s mainstream schools, at school support and with statements or EHCPs remained above national figures in 2015.
- Exclusions for schools support showing a rising trend.
- Rate of permanent exclusion for other groups of pupils also shows a continuing increase, rising to above the latest nationally published figure for pupils with a statement or EHCP.

<table>
<thead>
<tr>
<th>We will undertake a comprehensive programme of support with schools, underpinned by robust data on exclusions and absences, to build capacity to manage attendance and reduce exclusions.</th>
</tr>
</thead>
<tbody>
<tr>
<td>The actions detailed in the Written Statement of Action are designed to provide sustained engagement with Schools, establish clear processes and pathways and enhance provision. Progress on rates of absence and exclusions will be routinely monitored by systems leaders including school leaders, with further support and challenge provided as necessary.</td>
</tr>
</tbody>
</table>