

Ofsted  
Agora  
6 Cumberland Place  
Nottingham  
NG1 6HJ

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



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Steve Reddy  
Director of Children's Services, Liverpool  
5th Floor, Director of Children and Young People's Services  
Liverpool City Council  
Cunard Building  
Water Street  
Dale Street  
Liverpool  
L3 1DS

Jan Ledward, Chief Officer, Liverpool Clinical Commissioning Group (CCG)  
Kerry Crampton, Local Area Nominated Officer, Liverpool City Council

Dear Mr Reddy and Ms Ledward

### **Joint area SEND revisit in Liverpool**

Between 9 May and 11 May 2022, Ofsted and the Care Quality Commission (CQC) revisited the area of Liverpool to decide whether sufficient progress has been made in addressing each of the areas of significant weakness detailed in the inspection report letter published on 6 March 2019.

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 CCG were jointly responsible for submitting the written statement to Ofsted. This was declared fit for purpose on 28 August 2019.

The area has made sufficient progress in addressing all of the significant weaknesses identified at the initial 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 local authority and National Health Service (NHS) officers. Inspectors looked at a range of information about the

performance of the area in addressing the three significant weaknesses identified at the initial inspection, including the area's improvement plans and self-evaluation.

In reaching their judgements, inspectors took account of the impact of the COVID-19 pandemic on SEND arrangements in the area. Inspectors considered a range of information about the impact of the pandemic and explored how the area's plans and actions had been adapted as a result.

## **Main findings**

■ At the initial inspection, inspectors found the following:

### **The failure of leaders to take the necessary actions to remedy known weaknesses.**

Following the initial inspection, the pace of change was slow. The appointment of new leaders in 2020 was a turning point. These new leaders quickly established the most pressing priorities across the area. They worked with key stakeholders to agree the best way to resolve the endemic weaknesses. Leaders' actions quickly started to make a positive difference in improving education and health provision for children and young people with SEND across the area.

New leaders ensured that they secured an accurate understanding of the performance of services in relation to SEND. The establishment of an effective performance and compliance group has ensured that there is up-to-date, accurate information available for all partners. Leaders use this information well to identify any emerging trends and take the necessary actions.

Leaders put in place suitable governance arrangements. There are clear terms of reference for the different boards and groups who have oversight of the area's work. This has ensured a clear accountability structure for leaders and managers across the different services. Moreover, parents and carers are represented across all of these boards and groups. This has ensured that decisions take into account the views of children, young people and their families.

Soon after new leaders took up their posts, the COVID-19 pandemic struck. Leaders worked hard to ensure that their fledgling plans did not get derailed or disrupted. Added to this, they closely monitored the impact of COVID-19 on the needs of the children and young people with SEND across the area. This meant that leaders were quick to spot changes in needs and put suitable actions in place to respond to these.

### **The area has made sufficient progress to improve this significant weakness.**

■ At the initial inspection, inspectors found the following:

## **Significant weaknesses in the education, health and care (EHC) processes, and in the timeliness and quality of plans.**

Following the inspection, leaders put in place systems and processes to ensure that new EHC needs assessments were completed within statutory timescales. Moreover, they also cleared the considerable backlog of assessments. Leaders also revised the area's guidelines to help them decide when it is necessary to carry out an EHC needs assessment. These changes have increased the numbers of needs assessments being carried out. Leaders continue to build capacity to meet this increased demand.

Across the area, leaders have prioritised training and support for professionals. Consequently, staff carry out their roles and responsibilities more effectively. This has improved the area's EHC needs assessment processes. For example, the timeliness and quality of advice from health professionals for EHC needs assessments have improved considerably.

Leaders have worked collaboratively with parents and carers to make the necessary improvements. For example, members of LivPac, Liverpool's parent carer forum, and professionals co-produced an easily understood EHC plan format. Moreover, caseworkers now routinely seek to capture the views, interests and aspirations of the child, young person and their parents and carers as part of EHC needs assessments.

Quite rightly, leaders prioritised resolving the issues around timeliness and processes of EHC plans. However, leaders recognise that there is further work to do to ensure that these plans are consistently of a high quality. Added to this, they know that the contribution made by social care and adult health services to EHC needs assessments needs to improve.

Work has started in earnest to ensure that EHC plans are routinely reviewed each year. Currently, reviews have taken place and plans have been amended as appropriate, for all children and young people with SEND at key transition points. However, this is not the case for all children and young people's plans.

The area's more robust governance arrangements ensure that senior leaders keep a close eye on all aspects of this work. They ensure that any slippage is quickly identified and appropriate action taken. Even during the COVID-19 pandemic, the area's plans remained on track. Any underperformance is escalated to the SEND partnership board so that risks can be robustly managed.

Parents and carers acknowledge the improvement in processes, timeliness and quality of new EHC needs assessments and plans. Importantly, in the past few months, the overwhelming majority of parents and carers surveyed by the area feel that their child's plan has made a positive difference to their day-to-day lives.

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

- At the initial inspection, inspectors found the following:

**Underdeveloped joint commissioning arrangements for 0 to 25 SEND provision.**

Leaders had to start from scratch with this area of work. At the time of the inspection, leaders did not have an accurate, up-to-date understanding of the needs of children and young people with SEND in the area. Once established, the joint strategic needs assessment enabled leaders to determine the most pressing priorities that could be best tackled collaboratively.

Leaders put in place suitable leadership for joint commissioning. Even so, it took time to establish trusting, collaborative working relationships between partners. As time has gone on, these relationships have matured.

As commissioners have grown in confidence, they are more adept at identifying effective ways of working together. They have learned more about each other's work. This has helped them to come up with better ways of working together to improve outcomes for children and young people with SEND. Commissioners' early success in transforming the autism spectrum disorder pathway got their new arrangements off to a good start. They reduced waiting times and gave parents and carers access to pre-, during- and post-diagnosis support. These arrangements have made a positive difference to the lived experience of children, young people and their families.

Recently, commissioners have worked together to make sure that information is shared between health and the local authority about emerging needs for the youngest children. This has enabled the local authority to anticipate the needs of each cohort of children starting school. The local authority use this information to put in place support for the children, their families and schools at this important time. This helps children with SEND to get off to a good start in school.

While progress has been made, leaders acknowledge that there is still much to do. Leaders have had to respond to the impact of the COVID-19 pandemic on the needs of children, young people and their families. They have carried out further analysis of more recent patterns and trends of need and adapted their priorities for joint commissioning accordingly.

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

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

Pippa Jackson Maitland  
**Her Majesty's Inspector**

<b>Ofsted</b>	<b>Care Quality Commission</b>
Andrew Cook Regional Director	Rosie Benneyworth Chief Inspector of Primary Services and Integrated Care
Pippa Jackson Maitland HMI Lead Inspector	Tessa Valpy CQC Inspector

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